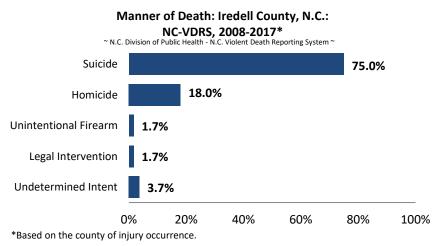
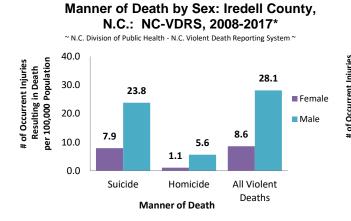


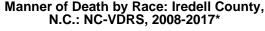
VIOLENT DEATH IN NORTH CAROLINA: IREDELL COUNTY INCIDENTS, 2008-2017

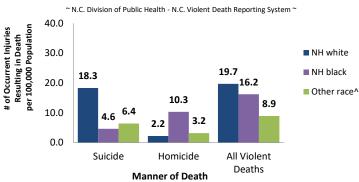
The North Carolina Violent Death Reporting System (NC-VDRS) is a CDC-funded statewide surveillance system that collects detailed information on deaths that occur in North Carolina resulting from violence: homicide, suicide, unintentional firearm deaths, legal intervention and deaths for which intent could not be determined. NC-VDRS is a multi-source system that gathers information from death certificates, medical examiner reports and law enforcement reports. The goal of this system is to aid researchers, legislators, and community interest groups in the development of public health prevention strategies to reduce violent deaths. All deaths reported in this document are based on location of occurrence rather than residence and, instead of a rate, the ocurrent ratio is reported. This statistic is derived from the total number of violent deaths resulting from injuries in a specified geographic region divided by the number of residents in this region. This document summarizes all fatal injuries from violence that occurred in Iredell County for the years 2008-2017.



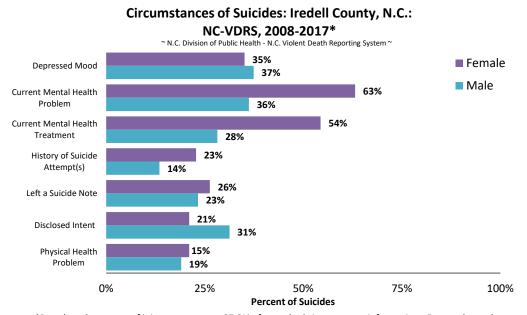
- For the years 2008-2017, there were 300 violent deaths from injuries sustained in Iredell County. Of these 300 deaths, 299 were N.C. residents (99.7%) and 271 were Iredell County residents (90.3%).
- There were 225 suicides (75.0%), 54 homicides (18.0%), five unintentional firearm death (1.7%), five deaths from legal intervention (1.7%) and 11 deaths of undetermined intent (3.7%).
- In Iredell County, the suicide ratio was 3.0 times higher in males than females, and the homicide ratio was 5.1 times higher in males than in females.
- Patterns of suicide and homicide differed by race. Suicide victims were more likely to be Non-Hispanic white than NH black. NH whites had 18.3 suicides per 100,000 population versus 4.6 suicides per 100,000 population in NH blacks. All other racial groups combined had eight suicides.
- In contrast, NH blacks had 10.3 homicides per 100,000 population as opposed to NH whites who had 2.2 homicides per 100,000 population. All other racial groups combined had five homicides.





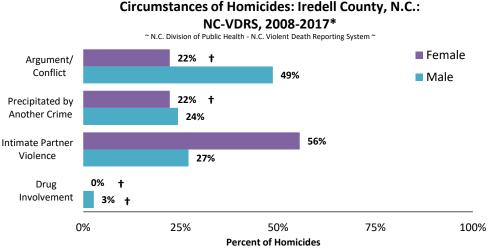


- Suicides and homicides displayed dissimilar age patterns. Homicides peaked among those 20-24 with 6.3 homicides per 100,000, where suicides peaked among those 45-54 with 21.8 suicides per 100,000.
- Most homicides (64.8%) and more than half of suicides (60.4%) were committed using firearms.
- Suspicion of intoxication was reported in 31.5% of homicides and 18.2% of suicides.
- For homicide incidents where one or more suspects were identified, the relationship of the victim to the suspect was known (current or former spouse/boyfriend/girlfriend, family, friend or acquaintance) more frequently for female (90.0%) than male (66.7%) victims.



^{*}Based on the county of injury occurrence. 97.8% of cases had circumstance information. Four males and one female were missing circumstance information.

- 37.4% of male and 35.1% of female Iredell County suicide victims with circumstance information were characterized as being currently depressed when they completed suicide.
- 63.2% of female and 36.2% of male suicide victims were characterized as having a current mental health problem.
- Females (22.8%) were more likely to have attempted suicide in the past as compared to males (13.5%).



- *Based on the county of injury occurrence. 85.2% of cases had circumstance information. Eight males and zero females were missing circumstance information.
- †Use caution-There were less than 5 deaths

- Arguments or conflicts were more likely to be a contributing factor for male homicides (48.7%) than for female homicides (22.2%).
- 22.2% of female homicides and 24.3% of male homicides were precipitated by another crime such as robbery, burglary or drug trafficking.
- Intimate partner violence was a contributing factor in 55.6% of female homicides, but only 27.0% of male homicides.

The North Carolina Violent Death Reporting System is supported by Cooperative Agreement 6NU17/CE002613-05-01 from the Centers for Disease Control and Prevention (CDC).





N.C. Division of Public Health / www.publichealth.nc.gov / Injury Epidemiology & Surveillance Unit/ 919-707-5425 N.C. Violent Death Reporting System / 919-707-5432 State of North Carolina / Department of Health and Human Services / www.ncdhhs.gov

N.C. DHHS is an equal opportunity employer and provider. 2017 FINAL DATA 7/19

Please see the NC-VDRS 2017 Annual Report for additional data and technical information.