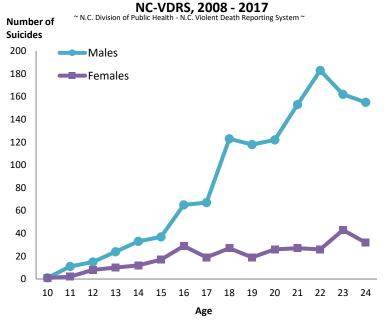


YOUTH SUICIDE IN NORTH CAROLINA, 2008 - 2017

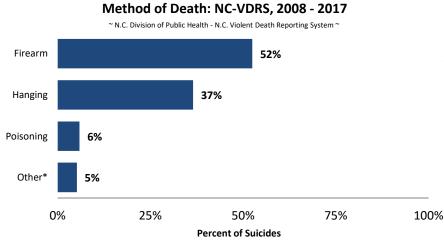
The North Carolina Violent Death Reporting System (NC-VDRS) is a CDC-funded statewide surveillance system that collects detailed information on deaths that occur in North Carolina resulting from violence: homicide, suicide, unintentional firearm deaths, legal intervention and deaths for which intent 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. NC-VDRS began collecting data in January 2004. This document summarizes deaths among North Carolina residents ages 10-24 completing suicide for the years 2008 - 2017.

Youth Suicide in North Carolina, by Sex and Age:



- From 2008 to 2017, 3,378 North Carolina residents ages 10 to 24 died as a result of violence. Of these violent deaths, 1,567 (46.4%) were suicide.
- Males consistently had a higher number of suicides than females, regardless of age.
- The number of suicides peaked for males at age 22 with 183 suicides and for females at age 23 with 43 suicides.

• 71.8% of all youth suicide victims were identified as non-Hispanic (NH) white, 17.2% as NH black, 6.7% as Hispanic, and 4.3% as belonging to another racial/ethnic group.

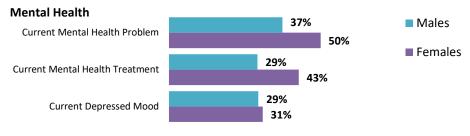


- Overall, the most common method of suicide among youth was firearms (52.5%), followed by hanging/strangulation/suffocation (36.5%) and poisoning (5.9%).
- Only 5.2% of suicides were completed using a method other than firearms, hanging or poisoning.

^{*}Other includes falls, drowning, motor vehicle, fire/burns and other causes of suicide.

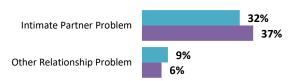
Precipitating Circumstances by Sex: NC-VDRS, 2008 - 2017

~ N.C. Division of Public Health - N.C. Violent Death Reporting System ~



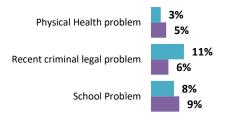
 49.9% of female and 37.3% of male suicide victims were characterized as having a current mental health problem when they completed suicide.

Interpersonal



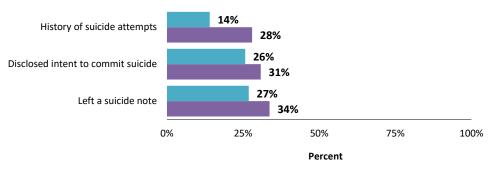
• A similar trend was seen for mental health treatment. Females (42.7%) were more likely than males (29.1%) to be receiving treated for a mental health problem at the time of suicide.

Life Stressor



- 36.6% of female and 32.1% of male suicide victims had an intimate partner problem.
- 30.8% of female and 25.7% of male victims had disclosed their intent to commit suicide to someone else.

Suicide Event



[•] Females (33.7%) were more likely to leave a suicide note than males (26.9%).

More infromation on suicide prevention efforts can be found at:

State Resource Partners

N.C. Division of Mental Health,

Developmental Disabilities and Substance Abuse Services

https://www.ncdhhs.gov/divisions/mhddsas

<u>National Resources</u> The Suicide Prevention Resource Center

North Carolina Office of the Chief Medical Examiner

https://www.ocme.dhhs.nc.gov/

The American Foundation for Suicide Prevention

https://afsp.org/

The Triangle Coalition for Suicide Prevention

https://trianglesuicideprevention.org/

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The National Suicide Prevention Lifeline

(for suicide crisis calls) 1-800-273-8255

http://www.sprc.org/

https://www.itsok2ask.com/

The North Carolina Violent Death Reporting System is supported by Cooperative Agreement 5NU17/CE002613-05-00 from the Centers for Disease Control and Prevention (CDC).





N.C. Injury and Violence Prevention's Youth Suicide Prevention Website

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 5/19

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

^{*}Circumstances are known for 89% of males (n=1124) and 94% of females (n=279)