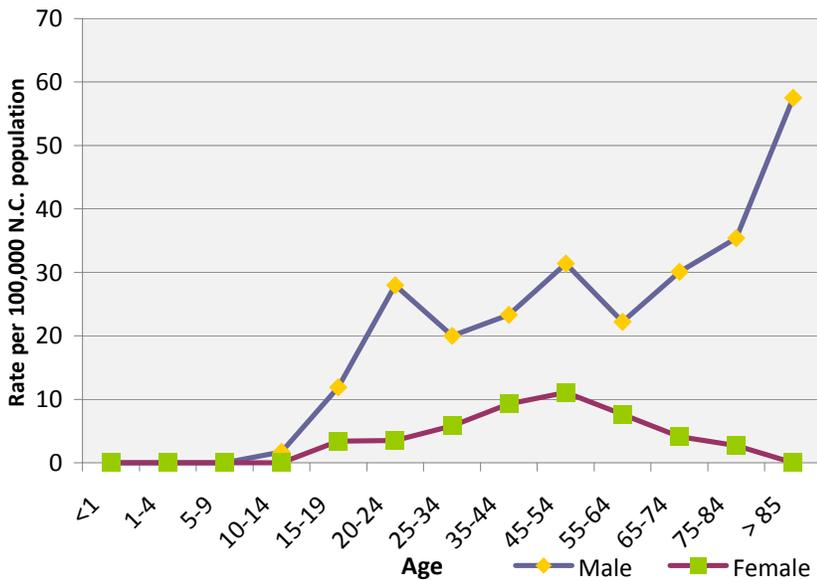


SUICIDES IN NORTH CAROLINA

The North Carolina Violent Death Reporting System (NC-VDRS) is a CDC-funded state-wide surveillance system that collects detailed information on deaths that occur in N.C. 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 N.C. residents caused by suicide for the year 2006.

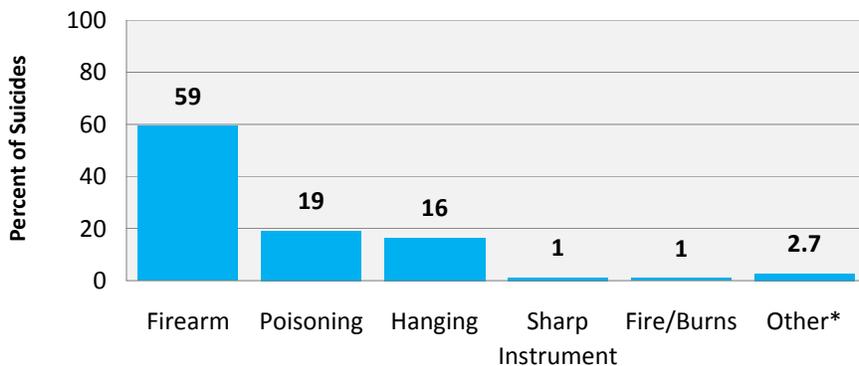
Gender-Specific Suicide Rates by Age: N.C. 2006



- 1,106 North Carolina residents died as a result of suicide in 2006. The total of number of deaths as a result of violence was 1,785.
- Males consistently had a higher suicide rate than females, regardless of age.
- The suicide rate peaked slightly for young adults ages 20-24 and remained relatively stable thereafter, with a peak for both sexes at 45-54.
- Males, but not females, displayed a prominent peak in the rate of suicide after 84 years of age.

- 90% of all suicide victims were identified as white. Whites, particularly white males, had higher suicide rates than members of other racial/ethnic groups.
- The majority of suicides (59%) were accomplished using firearms.

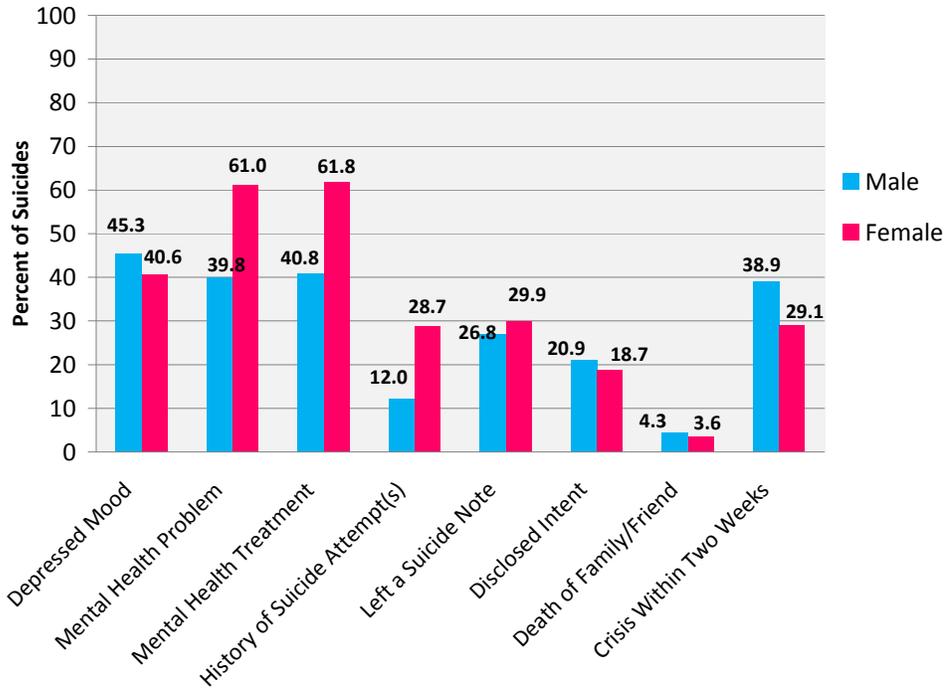
Method of Death: N.C. 2006



- Overall, 59% of suicides involved firearms, followed by poisoning (19%) and hanging (16%).
- Less than 5% of suicides were accomplished using a method other than firearms, poisoning, or hanging.

*Other includes falls, drowning, motor vehicle, and other causes of suicide.

Suicide Circumstances: N.C., 2006



- Nearly one-half (44%) of suicide victims were characterized as being depressed.

- 61% of all female victims and 40% of all male victims had been diagnosed by a medical professional as having a mental health issue.

- A similar trend was seen in mental health treatment. 62% of females and 41% of males were being treated for a mental health problem at the time of death.

- Males were more likely to have experienced a crisis within two weeks of death. This crisis was most often identified as a problem with an intimate partner (25%).

- 21% of victims had disclosed their intention to commit suicide to someone else.
- Females (29%) were more likely to have a history of prior suicide attempts than were males (12%).

More information on suicide prevention efforts can be found at:

State Resource Partners

Mental Health Association in North Carolina, Inc.

Contact: Romaine E. Riddle 919-866-3272

www.mha-nc.org

N.C. Division of Mental Health, Developmental Disabilities and Substance Abuse Services

www.ncdhhs.gov/mhddsas

North Carolina Office of the Chief Medical Examiner

Contact: Krista Ragan, Child Death Investigator, 919-445-4414

www.ocme.unc.edu

The Triangle Consortium for Suicide Prevention

Contact: Phil Morse

www.trianglesuicideprevention.org

National Resources

The Suicide Prevention Resource Center

www.sprc.org

The American Foundation for Suicide Prevention

www.afsp.org

The North Carolina Violent Death Reporting System is supported by Cooperative Agreement U17/CE423098-06 from the Centers for Disease Control and Prevention (CDC).