**VIOLENT DEATHS AMONG AMERICAN INDIANS IN NORTH CAROLINA: 2006-2015**

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 all deaths from violence among non-Hispanic (NH) American Indian residents for the years 2006-2015.

- For the years 2006-2015, there were 1,140,108 NH American Indians living in North Carolina, accounting for 1.2 percent of the state’s population.
- NH American Indians had the highest rate of violent death by race in North Carolina for the years 2006-2015 (30.6 per 100,000 population).

**Manner of Death: NC-VDRS**

**NH American Indian Violent Deaths, 2006-2015**

- Homicide: 55.0%
- Suicide: 39.3%
- Unintentional Firearm Death: 1.4%
- Legal Intervention: 0.6%
- Undetermined Intent: 3.7%

**Manner of Death by Race: NC-VDRS, 2006-2015**

- NH American Indians accounted for 3.4 percent of all homicides and 1.1 percent of all suicides, across all racial groups in North Carolina from 2006 to 2015.
- In contrast, 53.2 percent of all homicide victims were NH black and 86.9 percent of all suicide victims were NH white from 2006 to 2015.

**Violent Death Rate by Race, NC-VDRS, 2006-2015**

- American Indian*: 30.6
- Asian & Pacific Islander*: 8.7
- Black*: 20.5
- White*: 22.0
- Hispanic: 0.4

* Non-Hispanic

- From 2006-2015, 349 NH American Indians in North Carolina died by violence.
- There were 192 homicides (55.0%), 137 suicides (39.3%), 5 unintentional firearm deaths (1.4%), 2 deaths from legal interventions (<1%), and 13 deaths of undetermined intent (3.7%).
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Please see the NC-VDRS 2015 Annual Report for additional data and technical information.

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**Method of Death: NC-VDRS, NH American Indian Violent Deaths, 2006-2015**

- **Homicides**
  - 72%
  - Firearm
  - 21%
  - Poisoning
  - 6%
  - Other method

- **Suicides**
  - 50%
  - Hanging
  - 24%
  - Other method
  - 13%
  - Sharp Instrument
  - 4%
  - Blunt Instrument

*Other includes fire/burns, unarmed assault, falls, and other methods of death.

- The majority of homicides (72.4%) and suicides (49.6%) among NH American Indians were committed using firearms.
- The second most common method of homicide was sharp instruments (13.0%).
- The second most common method of suicide was hanging (24.1%).

**Homicide Circumstances* Among NH American Indians, 2006-2015**

- Argument/conflict: 57%
- Precipitated by another crime: 32%
- Intimate partner violence: 16%
- Drug involvement: 15%

*Among those with reported circumstance information.

- Of all homicides among NH American Indians with known circumstance information, more than half (57.0%) involved an argument or conflict.
- Another serious crime (e.g., robbery, burglary) precipitated 31.5 percent of homicides among NH.
- Sixteen percent of these homicides were suspected to have been related to drug dealing, trade, or use.

**Suicide Circumstances* Among NH American Indians, 2006-2015**

- Depressed mood: 31%
- Current mental health treatment: 38%
- Disclosed suicide intent: 30%
- Intimate partner problem: 24%
- Recent Crisis: 34%
- Other substance problem: 15%
- Left a suicide note: 19%
- Alcohol problem: 18%
- Physical health problem: 16%

*Among those with reported circumstance information.

- Among NH American Indian suicide victims with known circumstance information, 31.2 percent were characterized as being depressed when they completed suicide.
- Thirty-eight percent of victims were receiving treatment for a mental health problem.
- Twenty-four percent of suicide victims experienced an intimate partner problem, and