SUICIDE IN NORTH CAROLINA, 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 deaths among North Carolina residents caused by suicide for the year 2015.

• Of the 2,062 violent deaths in North Carolina in 2015, 1,379 were suicides (66.9%).

• Males consistently had a higher suicide rate than females, regardless of age. The suicide rate peaked for men 85 years and older at a rate of 68.1 per 100,000.

• Among females, the suicide rate peaked for ages 45-54 at 12.1 per 100,000 and steadily declined thereafter.

• Eighty-nine percent of all suicide victims were identified as non-Hispanic (NH) white.

• NH white males had higher suicide rates than other racial/ethnic groups in North Carolina (29.2 per 100,000).

Method of Death*: NC-VDRS, 2015

<table>
<thead>
<tr>
<th>Method of Death</th>
<th>Percent of Suicides</th>
</tr>
</thead>
<tbody>
<tr>
<td>Firearm</td>
<td>56%</td>
</tr>
<tr>
<td>Hanging</td>
<td>21%</td>
</tr>
<tr>
<td>Poisoning</td>
<td>17%</td>
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<tr>
<td>Other*</td>
<td>6%</td>
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</tbody>
</table>

*Other includes falls, motor vehicle, sharp instrument, drawing, fire/burns, unknown and other causes of suicide.

• After firearms (56.1%), hanging (21.2%) and poisoning (16.9%) were the second and third leading causes of suicide, respectively.

• Six percent of suicides were completed using a method other than firearms, hanging or poisoning.
Thirty percent of male suicide victims and 26.3 percent of female victims with circumstance information were characterized as being currently depressed when they completed suicide.

Seventy-one percent of females and 46.7 percent of males were characterized as having a current mental health problem.

Sixty-four percent of females and 39.5 percent of males were currently being treated for a mental health problem at the time of suicide.

Approximately twenty-four percent of all suicide victims had disclosed their suicidal intention to someone else.

Females (26.0%) were more likely to have a history of prior suicide attempts than males (11.2%).

More information on suicide prevention efforts can be found at:

**State Resource Partners**
N.C. Division of Mental Health, Developmental Disabilities and Substance Abuse Services
www.ncdhhs.gov/mhddsas
North Carolina Office of the Chief Medical Examiner
www.ocme.unc.edu
The Triangle Coalition for Suicide Prevention
Contact: Phil Morse
www.trianglesuicideprevention.org
N.C. Injury and Violence Prevention’s Youth Suicide Prevention Website

**National Resources**
The Suicide Prevention Resource Center
www.sprc.org
The American Foundation for Suicide Prevention
www.afsp.org
The National Suicide Prevention Lifeline
for suicide crisis calls
1-800-273-8255

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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. 2015 FINAL DATA 8/17

Please see the NC-VDRS 2015 Annual Report for additional data and technical information.