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 2006 - 2015.

**YOUTH SUICIDE IN NORTH CAROLINA, 2006 - 2015**

From 2006 to 2015, 3,126 North Carolina residents ages 10 to 24 died as a result of violence. Of these violent deaths, 1,476 (47.2%) 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 171 suicides and for females at age 24 with 37 suicides.

Seventy-four percent of all youth suicide victims were identified as non-Hispanic (NH) white, 16.7 percent as NH black, 6.2 percent as Hispanic, and 3.7 percent as belonging to another racial/ethnic group.

Overall, the most common method of suicide among youth was firearms (54.0%), followed by hanging/strangulation/suffocation (34.3%) and poisoning (6.4%).

Only five percent of suicides were completed using a method other than firearms, hanging or poisoning.
The North Carolina Violent Death Reporting System is supported by Cooperative Agreement 5U17/CE002613-04 from the Centers for Disease Control and Prevention (CDC).

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

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- Mental Health
  - Current Mental Health Problem: 35% Males, 47% Females
  - Current Mental Health Treatment: 30% Males, 42% Females
  - Current Depressed Mood: 31% Males, 30% Females

- Interpersonal
  - Intimate Partner Problem: 32% Males, 36% Females
  - Other Relationship Problem: 9% Males, 12% Females

- Life Stressor
  - Physical Health problem: 3% Males, 4% Females
  - Recent criminal legal problem: 5% Males, 6% Females
  - School Problem: 8% Males, 6% Females

- Suicide Event
  - History of suicide attempts: 14% Males, 26% Females
  - Disclosed intent to commit suicide: 24% Males, 26% Females
  - Left a suicide note: 26% Males, 29% Females

- Forty-seven percent of female and 34.7 percent of male suicide victims were characterized as having a current mental health problem when they completed suicide.

- A similar trend was seen for mental health treatment. Females (42.2%) were more likely than males (29.5%) to be receiving treated for a mental health problem at the time of suicide.

- Thirty-six percent of female and 32.2 percent of male suicide victims had an intimate partner problem.

- Twenty-six percent of female and 24.4 percent of male victims had disclosed their intent to commit suicide to someone else.

- Females (29.1%) were more likely to leave a suicide note than males (26.2%).

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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/mhddas
- North Carolina Office of the Chief Medical Examiner
  - www.ocme.dhhs.nc.gov
- The Triangle Consortium for Suicide Prevention
  - Contact: Phil Morse
  - www.trianglesuicideprevention.org
- N.C. Injury and Violence Prevention’s Youth Suicide Prevention Website
  - www.itsok2ask.com

**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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*Circumstances are known for 88% of males (n=1067) and 92% of females (n=244)*