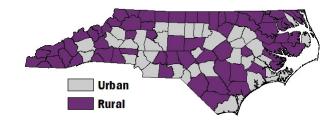
NC Violent Death Reporting System

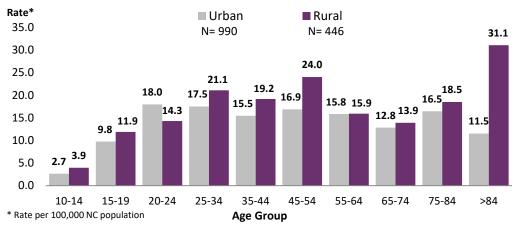
SUICIDE IN RURAL AND URBAN NORTH CAROLINA, 2020

- Of North Carolina's 100 counties, 61 (61%) are classified as rural. Although most counties are considered rural, they are home to only 27.4% of the total state population.
- 736 (30.4%) of 2,423 violent deaths occurred among rural NC residents. Most rural violent deaths were suicides (60.6%).



The suicide rate in 2020 was 1.2 times higher among rural residents than urban residents.

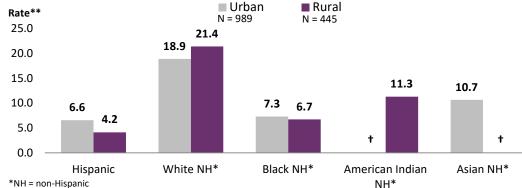
Rates of Suicide by Age Group in Rural vs Urban Counties: Ages 10 and older, 2020



- 80.0% of rural suicide victims were males. The rate among male rural victims was 4.2 times that of female rural victims (28.4 and 6.7 per 100,000 respectively).
- Similarly, rates of suicide among rural female victims was 3.8 times higher than urban female victims (23.6 and 6.3 per 100,000 respectively).
- Most suicides in NC involve firearms (60.7%). Firearms were more commonly used in rural suicides (65.3%) than urban suicides (58.6%).

After Non-Hispanic (NH) White victims, NH American Indian victims died by suicide at a higher rate than other race/ethnicities in rural NC counties.

Rates of Suicide by Race/Ethnicity in Rural vs Urban Counties: Ages 10 and older, 2020



**Rate per 100,000. † Rate suppresed, 1-4 deaths. Chart excludes two deaths of unknown race/ethnicity.

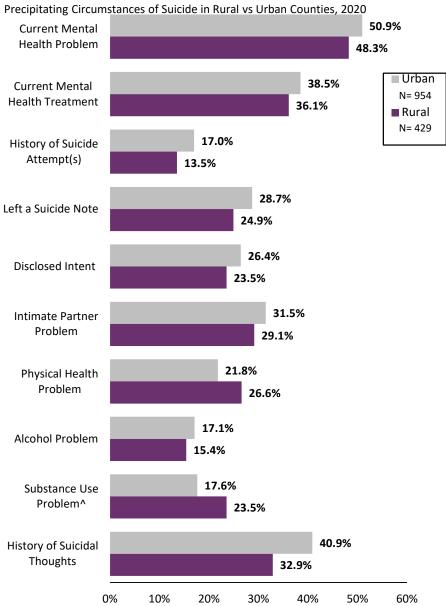
- The 2020 suicide rate among rural residents was 1.2 times higher than for urban residents (17.3 and 14.6 per 100,000, respectively), and was also higher than the state suicide rate (15.3 per 100,000).
- Rural county suicide rates were consistently higher than urban county suicide rates across all age groups, with the exception of those ages 20 to 24.
- The suicide rate was highest for rural victims ages 85 and older with a rate of 31.1 per 100,000. This was 2.7 times higher than the rate for urban county suicides among the same age group.



- Non-Hispanic (NH) White residents experienced the highest rates of suicide in both urban (18.9 per 100,000) and rural (21.4 per 100,000) counties.
- The second highest suicide rate for residents of rural counties was among NH American Indian (11.3 per 100,000) victims. The second highest rate of suicide in urban counties was among NH Asian (10.7 per 100,000) residents.

The North Carolina Violent Death Reporting System (NC-VDRS) is a CDC-funded statewide surveillance system that collects detailed information on violent deaths that occur in North Carolina including: homicide, suicide, unintentional firearm deaths, legal intervention, and deaths of undetermined intent. NC-VDRS triangulates information from death certificates, medical examiner reports, and law enforcement reports to understand and aid in the prevention of violent deaths. For more information, please visit https://www.injuryfreenc.ncdhhs.gov/About/ncVDRS.htm.

Circumstances* surrounding urban and rural county suicides.



^{*} Chart excludes 53 deaths that did not have reported circumstance information. 96.2% of rural cases had circumstance information. Similarly, 96.4% of urban cases had circumstance information.

^ Non-alcohol substance use problem

- Slightly fewer suicide victims of rural NC counties currently had a mental health problem (48.3%) than urban suicide victims (50.9%).
- Although 48.3% of rural suicide victims currently had a mental health problem, 36.1% were known to be currently receiving mental health treatment.
- A smaller proportion of rural suicide victims had a history of suicide attempt(s) (13.5%), and fewer a history of suicidal thoughts (32.9%) compared to urban suicide victims (17.0% and 40.9% respectively).
- Rural suicide victims were slightly less likely to have an alcohol problem (15.4%) than urban victims (17.1%), yet rural suicide victims were more likely to have another substance use problem (23.5%) than urban suicide victims (17.6%).
- Slightly less rural suicide victims had an intimate partner problem (29.1%) than urban suicide victims (31.5%).
- Rural suicide victims were less likely to have left a suicide note (24.9%), and less likely to have disclosed their suicide intent (23.5%) than urban victims (28.7% and 26.4%, respectively).
- Rural suicide victims were more likely to have a physical health problem (26.6%) than urban suicide victims (21.8%).

More information on suicide prevention efforts can be found at:

State Resource Partners

NC Division of Mental Health,

Developmental Disabilities and Substance Abuse Services

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

North Carolina Office of the Chief Medical Examiner

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

NC Injury and Violence Prevention's Suicide Prevention Website

https://injuryfreenc.dph.ncdhhs.gov/preventionResources/Suicide.htm

NC Division of Child and Family Wellbeing

https://www.ncdhhs.gov/divisions/division-child-and-family-well-being

National Resources

The Suicide Prevention Resource Center

http://www.sprc.org/

The American Foundation for Suicide Prevention

https://afsp.org/

The National Suicide Prevention Lifeline

call or text 988

or chat 988lifeline.org

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).

NC Division of Public Health / www.publichealth.nc.gov / Injury Epidemiology & Surveillance Unit/ 919-707-5425 NC Violent Death Reporting System / 919-707-5432

State of North Carolina / Department of Health and Human Services / www.ncdhhs.gov

NC DHHS is an equal opportunity employer and provider.

2020 FINAL DATA 6/20/22

Please see the NC-VDRS 2020 Annual Report for additional data and technical information:

https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/ViolentDeathData.htm