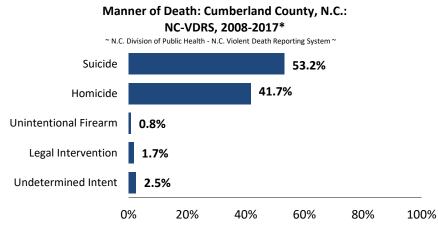
North Carolina Injury & Violence

VIOLENT DEATH IN NORTH CAROLINA: CUMBERLAND COUNTY INCIDENTS, 2008-2017

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. All deaths reported in this document are based on location of occurrence rather than residence and, instead of a rate, the ocurrent ratio is reported. This statistic is derived from the total number of violent deaths resulting from injuries in a specified geographic region divided by the number of residents in this region. This document summarizes all fatal injuries from violence that occurred in Cumberland County for the years 2008-2017.



• For the years 2008-2017, there were 865 violent deaths from injuries sustained in Cumberland County. Of these 865 deaths, 838 were N.C. residents (96.9%) and 790 were Cumberland County residents (91.3%).

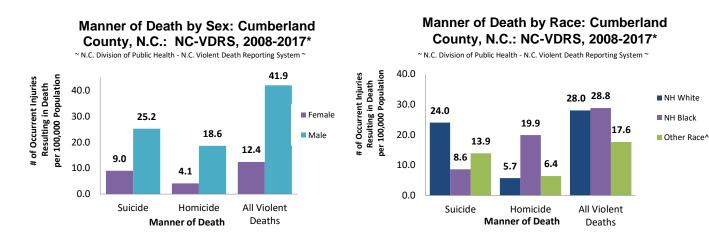
• There were 460 suicides (53.2%), 361 homicides (41.7%), 7 unintentional firearm deaths (0.8%), 15 deaths from legal intervention (1.7%) and 22 deaths of undetermined intent (2.5%).

*Based on the county of injury occurrence.

• In Cumberland County, the suicide ratio was 2.8 times higher in males than females, and the homicide ratio was 4.5 times higher in males than in females.

• Patterns of suicide and homicide differed by race. Suicide victims were more likely to be non-Hispanic (NH) white than NH black. NH whites had 24.0 suicides per 100,000 population versus 8.6 suicides per 100,000 population in NH blacks. All other racial groups combined had 52 suicides.

• In contrast, NH blacks had 19.9 homicides per 100,000 population as opposed to NH whites who had 5.7 homicides per 100,000 population. All other racial groups combined had 30 homicides.



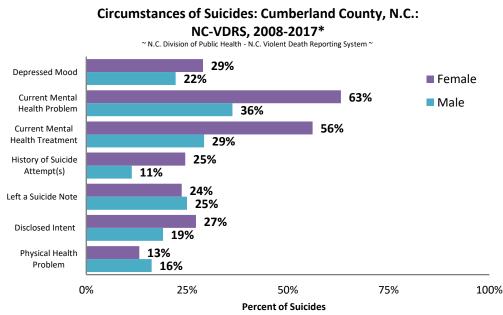
*Based on the county of injury occurrence.

^Other race refers to Hispanics, American Indians, Asians, other races, and unspecified or unknown race.

• Suicides and homicides displayed dissimilar age patterns. Homicides peaked among those 25-34 with 21.9 homicides per 100,000 (confidence Interval: 8.2, 45.2), where suicides peaked among those 85 and older with 27.0 suicides per 100,000.

- The majority of homicides (75.3%) and suicides (62.4%) were committed using firearms.
- Suspicion of intoxication was reported in 26.6% of homicides and 22.2% of suicides.

• For homicide incidents where one or more suspects were identified, the relationship of the victim to the suspect was known (current or former spouse/boyfriend/girlfriend, family, friend or acquaintance) more frequently for female (76.8%) than male (50.9%) victims.



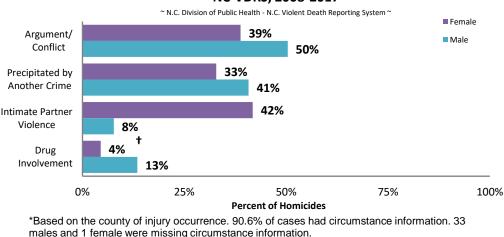
• 22.2% of male and 29.0% of female Cumberland County suicide victims with circumstance information were characterized as being currently depressed when they completed suicide.

• 63.2% of female and 36.3% of male suicide victims were characterized as having a current mental health problem.

• Females (24.6%) were more likely to have attempted suicide in the past as compared to males (11.3%).

*Based on the county of injury occurrence. 86.5% of cases had circumstance information. 13 females and 49 males were missing circumstance information. †There were less than or equal to 5 deaths

Circumstances of Homicides: Cumberland County, N.C.: NC-VDRS, 2008-2017*



†There were less than or equal to 5 deaths

PARTMENT OF

HEALTH AND HUMAN SERVICES • Arguments or conflicts were more likely to be a contributing factor for male homicides (50.4%) than for female homicides (38.8%).

• 32.8% of female homicides and 40.8 % of male homicides were precipitated by another crime such as robbery, burglary or drug trafficking.

• Intimate partner violence was a contributing factor in 41.8% of female homicides, but only 7.7% of male homicides.

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).

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. 2017 FINAL DATA 5/19 Please see the NC-VDRS

2017 Annual Report for additional data and technical information.

Reporting System

North Carolina Violent Death

NORTH CAROLINA INJURY AND VIOLENCE PREVENTION