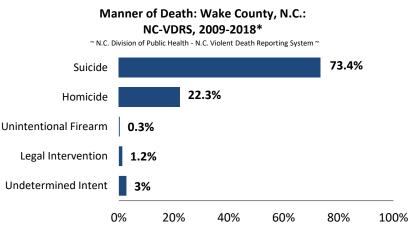
NC DEPARTMENT OF HEALTH AND HUMAN SERVICES North Carolina Injury & Violence Prevention Branch

VIOLENT DEATH IN NORTH CAROLINA: WAKE COUNTY INCIDENTS, 2009-2018

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 occurrent 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 Wake County for the years 2009-2018.



• For the years 2009-2018, there were 1207 violent deaths from injuries sustained in Wake County. Of these 1207 deaths, 1182 were N.C. residents (97.9%) and 1101 were Wake County residents (91.2%).

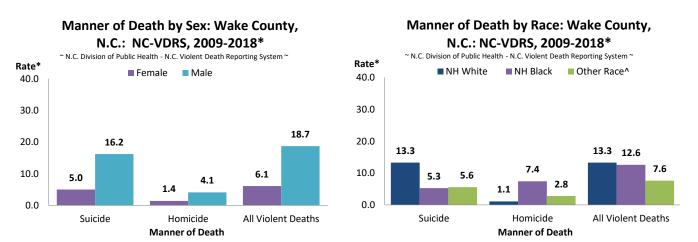
• There were 886 suicides (73.4%), 269 homicides (22.3%), four unintentional firearm deaths (0.3%), 15 deaths from legal intervention (1.2%), and 33 deaths of undetermined intent (2.7%).

*Based on the county of injury occurrence.

• In Wake County, the suicide ratio was 3.2 times higher in males than in females, and the homicide ratio was 2.9 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 non-Hispanic Black. NH whites had 13.3 suicides per 100,000 population versus 5.3 suicides per 100,000 population in NH Blacks. All other racial groups combined had 74 suicides.

• In contrast, NH Blacks had 7.4 homicides per 100,000 population as opposed to NH whites who had 1.1 homicides per 100,000 population. All other racial groups combined had 46 homicides.

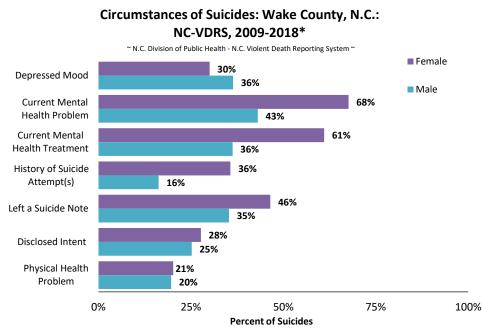


*Rate per 100,000 (number of occurrent injuries resulting in death per 100,000 population; based on the county of injury occurrence. ^Other race refers to Hispanics, American Indians, Asians, other races, and unspecified or unknown race. • Suicides and homicides displayed dissimilar age patterns. Homicides peaked among those aged 20-24 with 7.7 homicides per 100,000, where suicides peaked among those aged 85 and older with 18.4 suicides per 100,000.

• More than half of homicides (67.7%) and nearly half of suicides (44.6%) were committed using firearms.

• Suspicion of intoxication was reported in 20.4% of homicides and 21.3% 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 (77.2%) than for male (54.6%) victims.

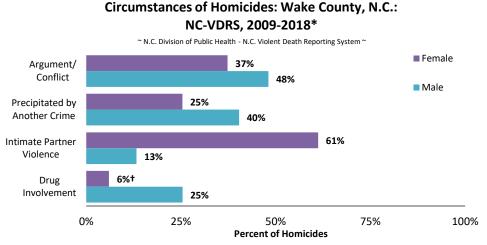


 Thirty-seven percent (36.4%) of male and 30.1% of female Wake County suicide victims with circumstance information were characterized as being currently depressed when they completed suicide.

 Sixty-eight percent (67.6%) of female and 43.1% of male suicide victims were characterized as having a current mental health problem.

• Females (35.7%) were more likely to have attempted suicide in the past as compared to males (16.3%).

*Based on the county of injury occurrence, 93.5% of cases had circumstance information. Seven females and 51 males were missing circumstance information.



 Arguments or conflicts were more likely to be a contributing factor for male homicides (48.1%) than for female homicides (37.3%).

• Twenty-five percent (25.4%) of female homicides and 40.3% of male homicides were precipitated by another crime such as robbery, burglary, or drug trafficking.

 Intimate partner violence was a contributing factor in 61.2% of female homicides, but only in 13.3% of male homicides.

*Based on the county of injury occurrence, 92.2% of cases had circumstance information. Three females and 18 males were missing circumstance information. + There were fewer than 5 deaths

The North Carolina Violent Death Reporting System is supported by Cooperative Agreement 5 NU17CE924955-02-00 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 North Carolina Violent Death State of North Carolina / Department of Health and Human Services / www.ncdhhs.gov N.C. DHHS is an equal opportunity employer and provider. 2018 FINAL DATA 8/24 Reporting System

Please see the NC-VDRS 2018 Annual Report for additional data and technical information.

NORTH CAROLINA INJURY AND VIOLENCE PREVENTION

C DEPARTMENT OF

EALTH AND

www.injuryfreenc.ncdhhs.gov 9/20