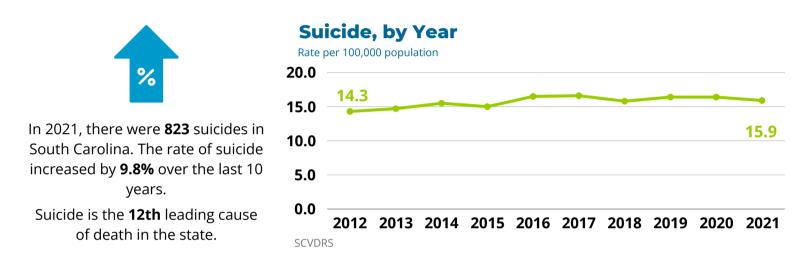
# Suicide

and Self-Inflicted Injuries in South Carolina

South Carolina Violent Death Reporting System

The South Carolina Violent Death Reporting System (SCVDRS) combines data from law enforcement reports, death certificates, and coroner/medical examiner reports (including toxicology) to pool data on violent deaths and their circumstances into one anonymous database. SCVDRS data includes decedents who were fatally injured and died within South Carolina whether or not they were South Carolina residents. South Carolina residents who were fatally injured or died outside of South Carolina are not included in this report. Therefore, SCVDRS death counts and rates may differ from South Carolina DHEC Vital Statistics and other death sources.

Suicide is a significant public health problem. Suicide rates continue to increase nationally and in South Carolina. In the United States, South Carolina ranks 29th in the nation in suicide rates, 26th in teen suicides ages 12-19, and 39th in drug-related suicides (CDC WISQARS - NVSS, 2021).

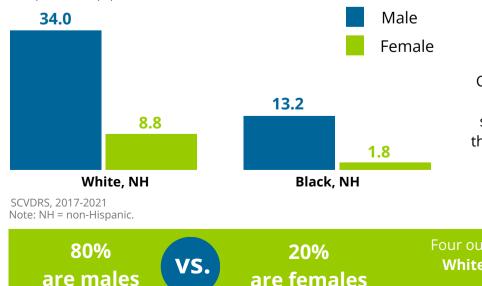


The South Carolina suicide rate is **26.6% higher** than the Healthy People 2030 target and **11.7% higher** than the national rate.

## **Suicide by Demographics**

#### Suicide, by Race/Ethnicity and Sex

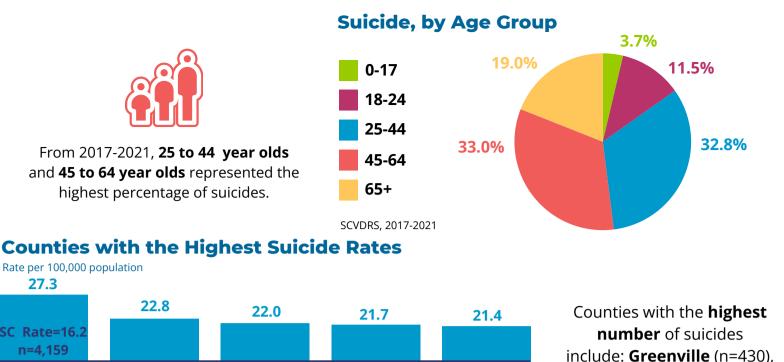




## 4,159

individuals died by suicide in South Carolina from 2017-2021. **Non-Hispanic White males** had the highest rate of suicide, which was over **3 times higher** than the suicide rate among non-Hispanic White females.

Four out of five suicide deaths were among males. White males aged 35-44 were the most at risk group.



# The Impact of Suicides and Self-Inflicted Injuries

Lee

n=18

Chester

n=35

Every day in South Carolina, on average, 12 emergency department visits and 5 inpatient hospitalizations occur for intentional selfharm injuries, and two people die by suicide.

Cherokee

n=65

Laurens

n=74



Hospital and ED charges for self-inflicted injuries in 2021 included: \$87.0 million in hospital inpatient charges with an average cost of \$51,130 \$31.5 million in ED charges with an average of \$6,980

Charleston (n=332), Horry (n=332), Spartanburg (n=292), and Richland (n=269).

SCVDRS, 2021; SC RFA, 2021

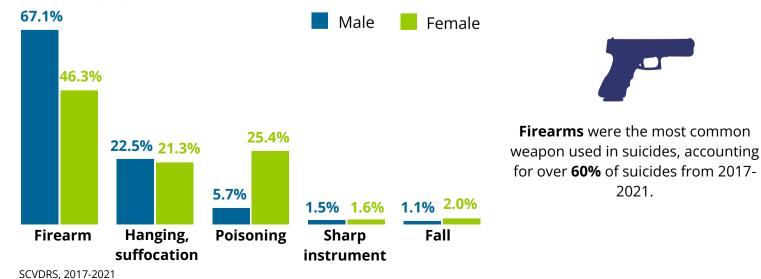
**McCormick** 

n=13

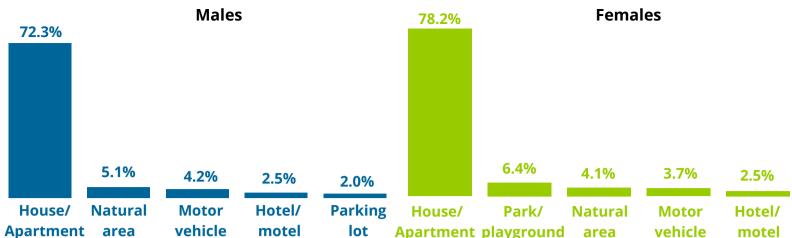
SCVDRS, 2017-2021

## **Incident Characteristics of Suicides**

#### **Top 5 Injury Mechanisms of Suicides**



### **Top 5 Injury Locations of Suicides**



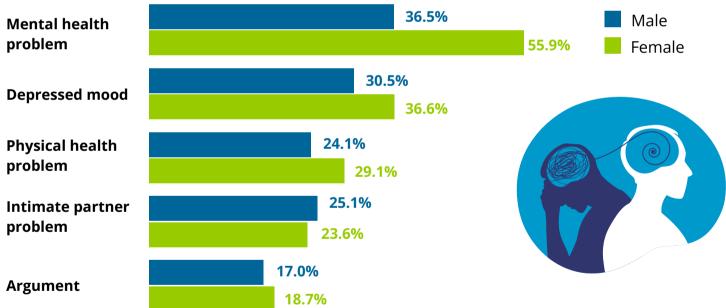
SCVDRS, 2017-2021

Note: Injury location type was unknown for 4.2% of suicide decedents.



Over three quarters of suicide decedents were injured in a house or apartment. Among non-residential injury locations, natural area was more common among males and park/playground was more common among females.

#### Most Common Circumstances Related to Suicide, by Sex



SCVDRS, 2017-2021

Note: Among suicide decedents with at least 1 known circumstance; circumstances were known for 76.1% of decedents. Decedents may have more than one known circumstance.

**Mental health problem** is the most common circumstance for both males and females. Over **half** of suicides among **females** and over a **third** of suicides among **males** involved **mental health problems** as a related circumstance. Nearly **1/4** of suicide decedents (24.1%) were experiencing a **crisis** at the time of their death.

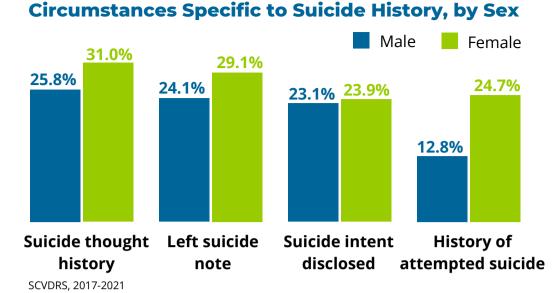
**Female** suicide was **more** likely than male suicide to be related to depressed mood or problems with mental health, physical health, substance abuse, or family relationships.



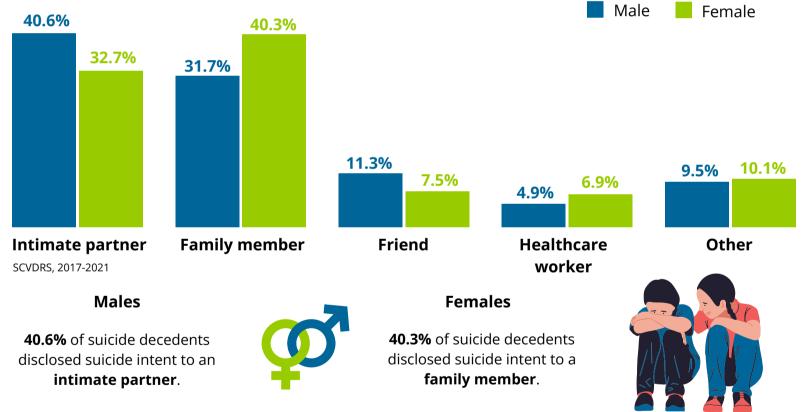
**Male** suicide was **more** likely than female suicide to be precipitated by another crime, perpetration of interpersonal violence, a recent criminal legal problem, job problem, or alcohol problem.

## **History and Disclosure of Suicide Decedents**

Females were **2 times more likely** to have a history of suicide attempts than males.



## **Top 5 Disclosure Recipients, by Sex**



## **SCVDRS Data Limitations**

- Known circumstances leading to the suicide event are subject to the knowledge of family members, friends, and others who report to coroners and law enforcement during investigations.
- Availability of law enforcement and coroner reports for 2020 and 2021 were impacted by the pandemic, therefore, known circumstances may be underreported.

#### Support:

SCVDRS is supported by funds from the National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (DHHS) under Cooperative Agreement 5 NU17CE010146-02-00. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by the NCIPC, CDC, DHHS or the U.S. Government.

#### Sources:

Web-based Injury Statistics Query and Reporting System (WISQARS) Fatal Injury Data, National Vital Statistics System (NVSS), 2021South Carolina Violent Death Reporting System (SCVDRS), 2012-2021South Carolina Revenue and Fiscal Affairs Office (SC RFA) Emergency Department Visit and Hospital Discharge Data, 2017-2021CR-0123656/24