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### Suicides in Maine 2015-2019

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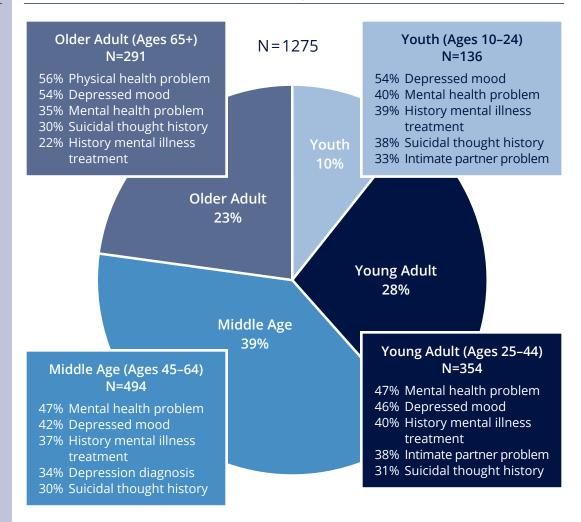
## Suicides in Maine 2015-2019

# **GENDER** Male: 79% Female: 21% METHOD BY GENDER or represents 25 individuals Firearm (n = 782)690 92 Poisoning (n = 243) 118 125 Hanging/Suffocation (n = 308)Other (n = 151)

1,275\* Lives Lost, Representing 32,940† Years of Life Lost

107

### CIRCUMSTANCES BY LIFE STAGE, WHEN KNOWN



#### HELP IS AVAILABLE

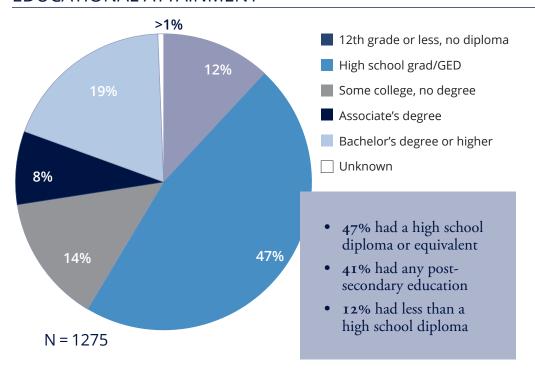
If you or someone you know is in crisis, contact:

- Maine Crisis Hotline—1-888-568-1112
- National Suicide Prevention Lifeline—1-800-273-TALK (8255)
- Chat with a Crisis Counselor online—https://www.suicidepreventionlifeline.org/gethelp/lifelinechat.aspx
- Northern New England Poison Center—1-800-222-1222
- Maine Help Line—Dial 211

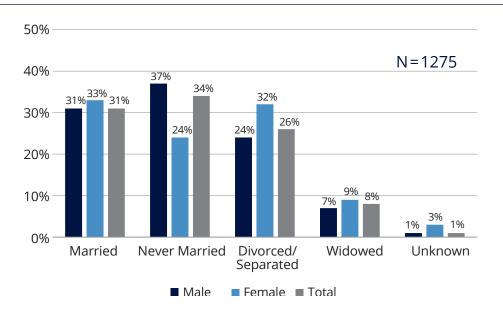
<sup>\*</sup>All rates are occurent ratios based on the number of resident and nonresident deaths that occurred in Maine per 100,00 resident population.

<sup>†</sup>Represents years lost before age 75.

#### **EDUCATIONAL ATTAINMENT**



#### **MARITAL STATUS**



#### **RACE & ETHNICITY**

Race/ethnicity	Percentage of 2018 census population	Percentage of 2015–2019 suicides
White	94.5	96.0
Black	1.3	1.2
American Indian/Alaskan native	.6	.9
Other Race	3.6	1.3
Ethnicity: Latino	1.6	.7

#### Suicide in Maine is

- 1st leading cause of death ages 15–19
- 2nd leading cause of death ages
   20–34
- 4th leading cause of death ages 35–54
- 9th leading cause of death overall

Maine has the 17th highest rate of suicide in the U.S.

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# Special Topics and Future Research

- Occupations at higher risk for suicide
- Suicides among current or past members of the military
- Suicides among older populations
- Characteristics of homicides in Maine over time
- Violent deaths in northern New England
- Increasing data availability to public stakeholders

#### **Contact Information**

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#### **About Us**

Maine Office of Chief Medical Examiner is Maine's centralized medical examiner system and has jurisdiction over all suspicious and unattended deaths in Maine. Maine OCME contracts with the Margaret Chase Smith Policy Center, an independent research unit of the University of Maine, to provide administrative and data collection support for MEVDRS.

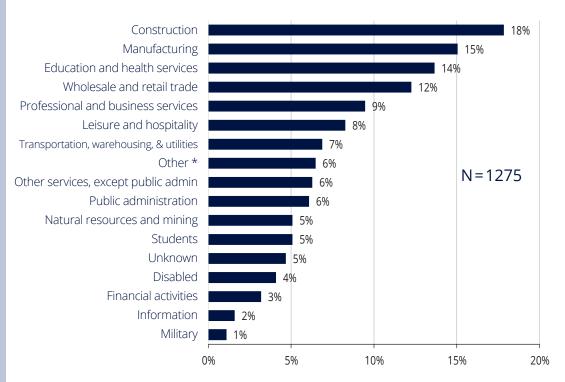
#### https://mcspolicycenter. umaine.edu/

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## For more information: um.rural.epi@maine.edu

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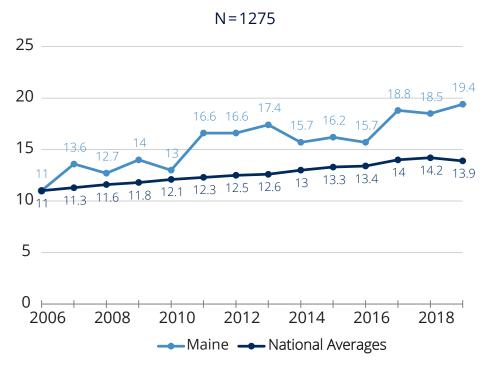
#### SUICIDES BY INDUSTRY OF EMPLOYMENT



<sup>\*</sup>Other includes industries such as homemaker, unspecified self-employment, and various laborers.

# MAINE SUICIDE RATE COMPARED WITH THE NATIONAL AVERAGES

(age-adjusted rate per 100,000)



Source: https://wisqars-viz.cdc.gov

#### PURPOSE OF NVDRS

Established in 2002, with 18 states, the National Violent Death Reporting System is a state-based public health surveillance system that collects comprehensive data on circumstances surrounding violent deaths. Data are collected from three primary sources: death certificates, medical examiner reports, and law enforcement reports. By combining information on a violent death from these three sources, NVDRS builds a comprehensive picture of the circumstances in victims' lives that have led to or contributed to their deaths.

In 2014, the Maine Office of Chief Medical Examiner (OCME), on behalf of the, Maine Department of Health and Human Services, was funded to establish the Maine-Vermont Violent Death Reporting System. At this time NVDRS increased from 18 states to 32, and Maine and Vermont, with their similar populations and chief medical examiner systems, thought it would be advantageous to submit a joint application. The Maine OCME, in partnership with the Vermont Department of Health, the Vermont OCME, and the University of Maine's Margaret Chase Smith Policy Center, collected data on all violent deaths which occurred from 2015 to 2018 in both states.

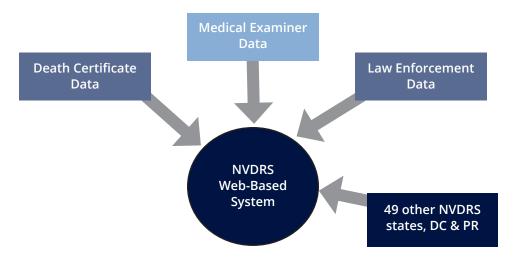
In large part due to the success of the funded states, Congress recently appropriated funds to expand NVDRS to all 50 states, the District of Columbia, and Puerto Rico. As of 2019, Maine and Vermont have separate Violent Death Reporting Systems, that will continue to closely collaborate. By collaborating with Vermont, and neighboring New Hampshire, Maine will continue to provide data and information crucial to the creation of evidence-based prevention strategies aimed at reducing violent death.

Occurence of a violent death event

Data collection initiated by MEVDRS in 120 days

Data entry completed within 16 months of death

### Overview of the Maine Violent Death Reporting System



## MEVDRS Case Definition

The Maine Violent
Death Reporting System
collects information
on "deaths that result
from the use of force or
power against oneself or
another person." This
definition encompasses
homicides, suicides, deaths
from legal intervention,
undetermined intent,
and deaths resulting
from the accidental
discharge of a firearm.

#### Goals

- Collect and analyze timely, high-quality data on violent deaths in Maine
- 2. Ensure MEVDRS partners and the public receive high-quality data to inform policy and prevention activities
- 3. Better understand factors affecting rural suicide
- 4. Better understand factors surrounding intimate partner violence
- 5. Better understand factors surrounding deaths of undetermined intent

## MEVDRS Data Collection

Over 600 variables may be collected on a single violent death incident. General circumstance data are collected for each death, while specific circumstances are collected on homicides, suicides, and deaths of undetermined intent.