

SUICIDE RELATED EMERGENCY DEPARTMENT VISITS:

Q4 2025 (OCTOBER 1, 2025-DECEMBER 31, 2025)

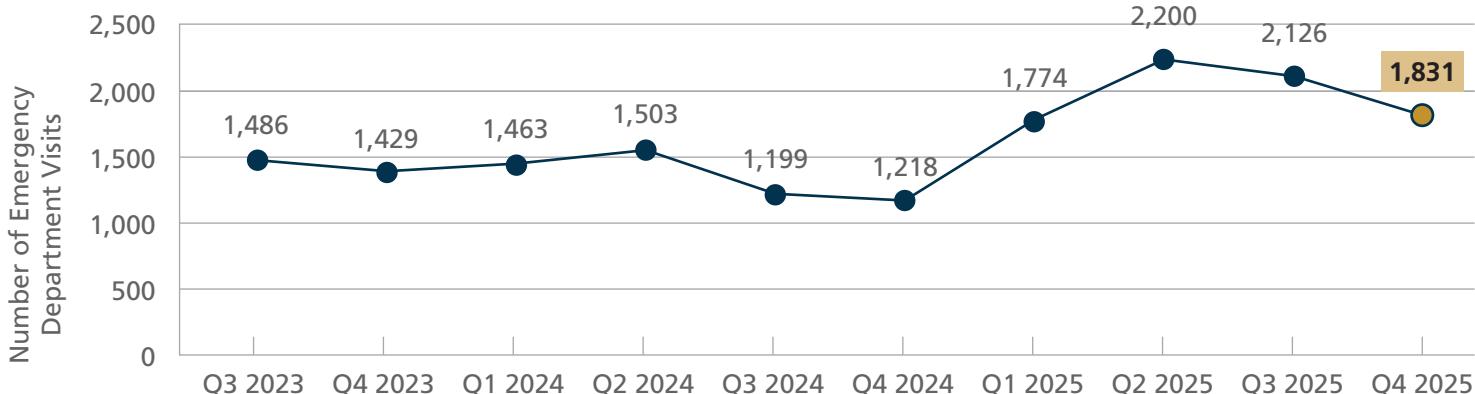
Data Source: Rhode Island's ten acute care hospital emergency departments (EDs) submit data to Rhode Island Department of Health's ESSENCE (Electronic Surveillance System for the Early Notification of Community-Based Epidemics) database for syndromic surveillance. These hospitals include Fatima Hospital, Kent Hospital, Landmark Hospital, Miriam Hospital, Newport Hospital, Rhode Island Hospital, Roger Williams Hospital, South County Hospital, Westerly Hospital, and Women and Infants Hospital. Specialty hospitals such as Bradley Hospital and Butler Hospital are not included in the data below.

Suicide Related Definition: Suicide Related Emergency Department visits includes nonfatal suicide related visits for Rhode Islanders 10 years of age and older including suicide ideation, self-harm/suicide attempt, or a combination of both. Additional information on syndromic surveillance can be found on the National Syndromic Surveillance Program (NSSP) website.

Limitations: Data completeness can change over time, so the data presented here should not be considered final or all inclusive. Other related data sources should be used in conjunction with syndromic surveillance data to help confirm the accuracy of the syndromic surveillance data and to guide policy and action decisions.

During Q4 2025, the Rate of Suicide Related Emergency Department visits was 22.7 per 1,000 ED visits. This means that about 23 emergency department visits out of every 1,000 were suicide related during October 1, 2025-December 31, 2025. The Rate of Suicide Related Emergency Department visits slightly increased from Q3 2025 to Q4 2025, however a lower number of suicide-related visits was observed in Q4. Due to a system-wide data transition, Kent County Hospital and Women and Infants Hospital did not report data during most of this Quarter, which likely influenced these results.

Figure 1. Number of Suicide Related Emergency Department Visits by Quarter



Data Source: RI ESSENCE Syndromic Surveillance Database, RIDOH

Figure 2. Number of Suicide Related Emergency Department Visits by Month

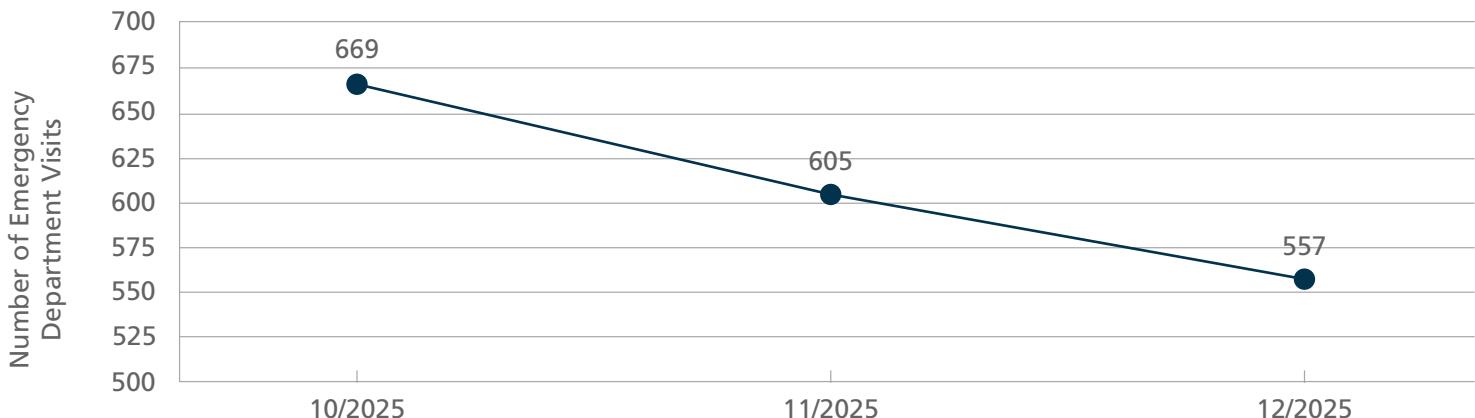


Figure 3. Percentage of Suicide Related Emergency Department Visits by Sex and Age Group

For both males and females, the greatest proportion of suicide related emergency department visits during Q4 2025 was observed among those aged 10-18. Compared to Q3 2025, this proportion increased from 20.4% to 36.8% for females and from 12.3% to 20.3% for males. Males aged 25 and older made up a greater proportion of suicide related emergency department visits than Females aged 25 and older in the same age group categories, except for 65+ where the percentage is about the same.

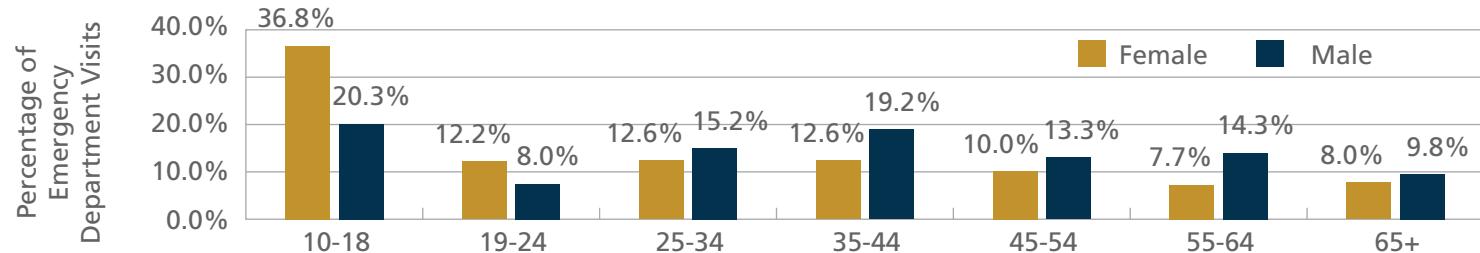
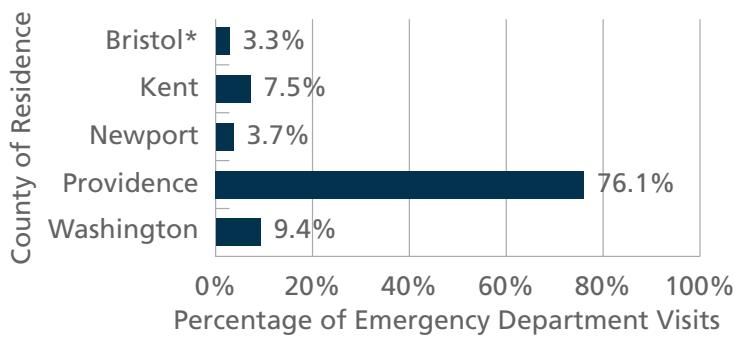


Figure 4. Suicide Related Emergency Department Visits by County of Residence

Providence County accounted for the greatest percentage of suicide related emergency department visits and increased from 68.5% in Q3 2025 to 76.1% in Q4 2025. The proportion of suicide related visits from residents of Kent County decreased from 15.1% during Q3 2025 to 7.5% during Q4 2025. Kent County Hospital did not report data for most of Q4 2025, which may explain this observed change.

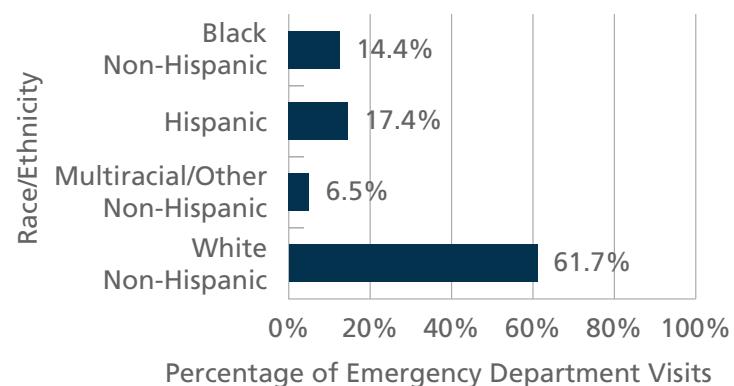


Q3 2025 Top 5 zip codes with the greatest percentage of suicide related emergency department visits:

- 02895 – Woonsocket (7.8%)
- 02860 – Pawtucket (6.9%)
- 02908 – Providence (6.5%)
- 02904 – Providence (5.4%)
- 02909 – Providence (5.2%)

Figure 5. Percentage of Suicide Related Emergency Department Visits by Race/Ethnicity

Rhode Islanders who identify as White Non-Hispanic had the greatest percentage of suicide related emergency department visits during Q4 2025 (61.7%), which represented a slight decrease from Q3 2025 (66.8%). The proportion of suicide related emergency department visits increased slightly for Black Non-Hispanic (14.4% to 17.4%) and Hispanic individuals (14.3% to 17.4%) in Q4 2025 compared to Q3.



The graphs share sensitive information about suicide. If you or someone you know are having thoughts of suicide; experiencing a mental health or substance use crisis; or are in emotional distress, you can call or text 988 or chat with 988 at 988lifeline.org. Trained crisis counselors are available 24/7 to listen, support, and help.



Data Source: RI ESSENCE Syndromic Surveillance Database, RIDOH

Data Notes:

- Data above are representative of suicide-related ED visits in Rhode Island for Rhode Island residents 10 years of age or older. This data is excluding specialty hospitals.
- In October 2025, Kent County Hospital and Women and Infants Hospital changed health record systems and were not able to report data for most of Q4 2025. Suicide-related ED Visits include a Chief Complaint and Discharge Diagnosis category of SDC Suicide Related v1.
- *Data for smaller racial and ethnic groups including Asian, American Indian Alaska Native, Native Hawaiian and Pacific Islander and data for smaller counties are sometimes excluded or added to other groups. This kind of reporting may make it feel like groups are invisible or excluded. When groups are small, changes in their data may look bigger or more severe than they are. RIDOH's small number's policy is in place to prevent making comparisons that are inaccurate or that could do harm to smaller populations, interpret data with caution (RSE 20-30%).
- Unknown/ Not Reported Sex and Unknown/Not Report Race/Ethnicity were excluded from percentage calculations due to RIDOH's small number policy.