



SUICIDE RELATED EMERGENCY DEPARTMENT VISITS: Q4 2024 (OCTOBER 1, 2024-DECEMBER 31, 2024)

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 2024, the Rate of Suicide Related Emergency Department visits was 12.1 per 1,000 ED visits. Indicating, 12 emergency department visits out of 1,000 were suicide related from October 1, 2024- December 31, 2024.

Q4 2024 rate of suicide related emergency department visits slightly increased from Q3 2024 (11.6 per 1,000).

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

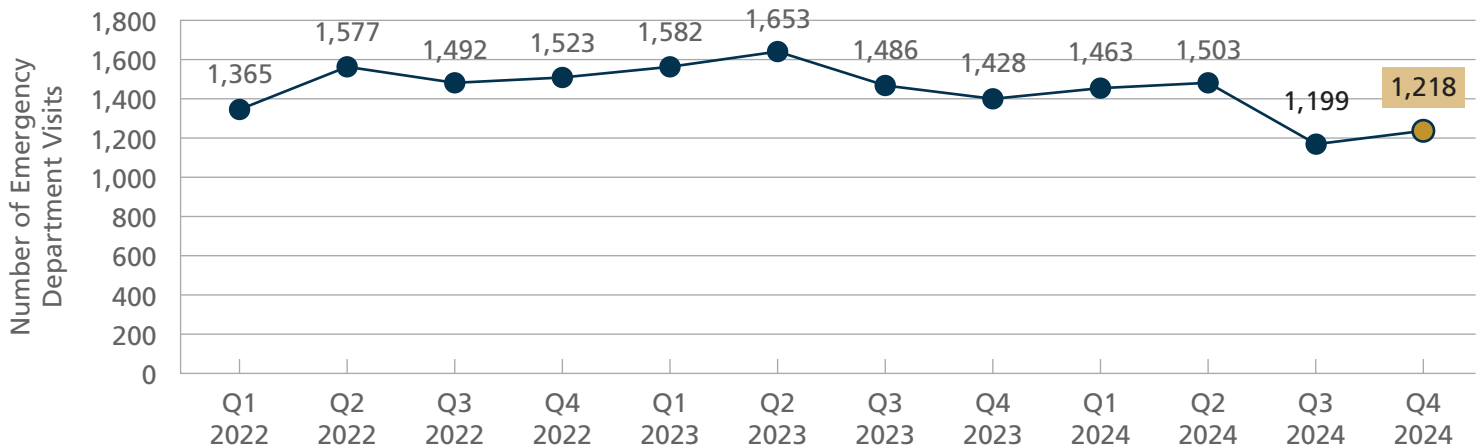


Figure 2. Number of Suicide Related Emergency Department Visits by Month

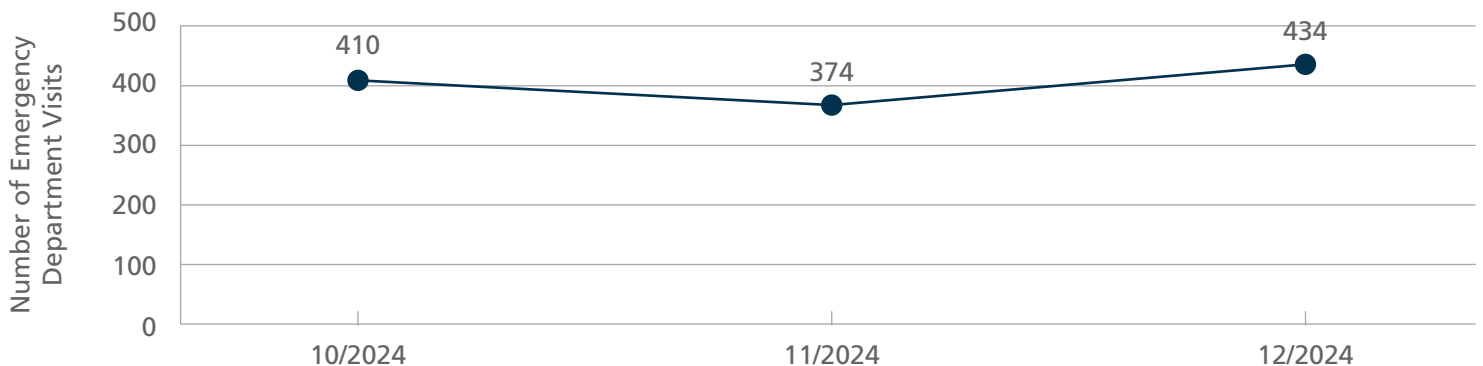


Figure 3. Percentage of Suicide Related Emergency Department Visits by Sex and Age Group

Female youth aged 10-18, followed by Males aged 35-44 had the greatest percentage of suicide related emergency department visits during Q4 2024. 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.

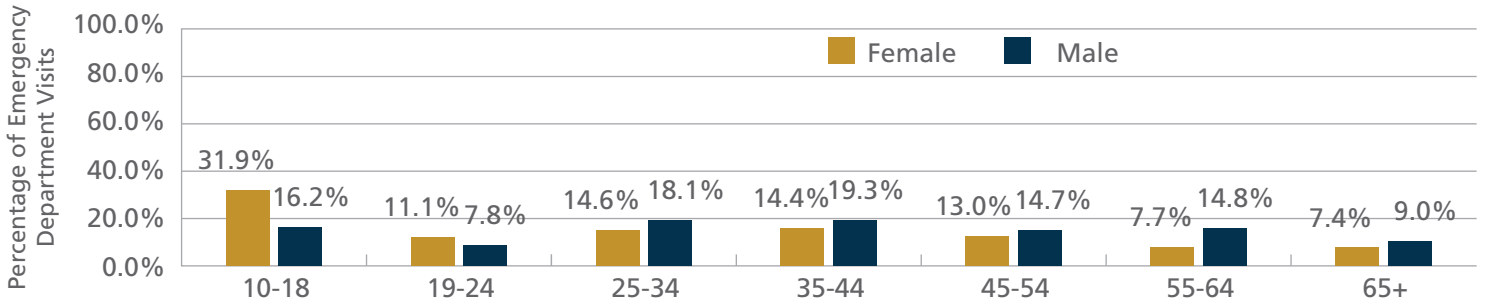
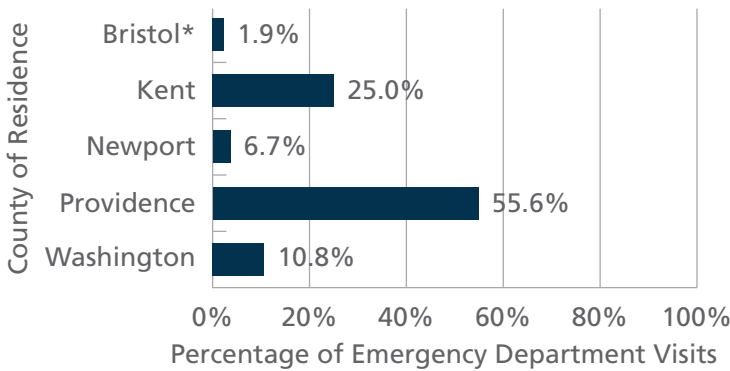


Figure 4. Suicide Related Emergency Department Visits by County of Residence

Providence County accounted for the greatest percentage of suicide related emergency department visits during Q4 2024. The percentage of emergency department visits increased from Q3 2024 to Q4 2024 in both Providence County (51.9% to 55.6%) and Newport County (5.8% to 6.7%)

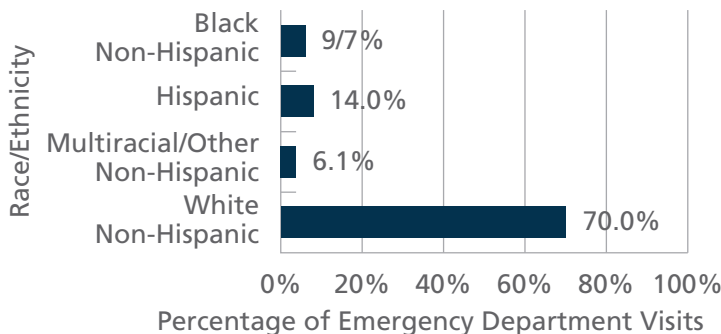


Q4 2024 Top 5 zip codes with the greatest percentage of suicide related emergency department visits:

- 02895 – Woonsocket (7.4%)
- 02816 – Coventry (5.6%)
- 02893 – West Warwick (5.3%)
- 02886 – Warwick (4.3%)
- 02908 – Providence (4.0%)

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 2024. The percentage slightly decreased from Q3 2024 (72.6%) to Q4 2024 (70.0%).



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: NSSP ESSENCE Syndromic Surveillance Database

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. 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.