



8/12/2025

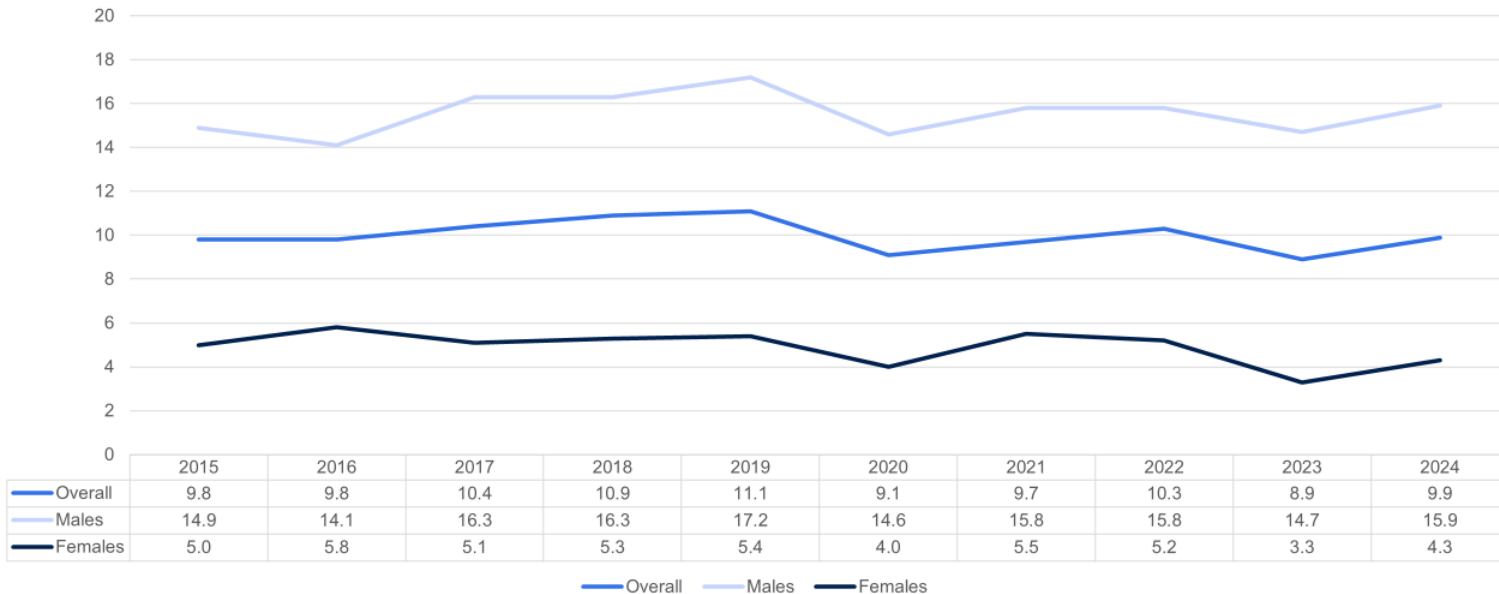
Summary of CTVDRS Data for CTVDRS Advisory Board Meeting

**Presenter: Michael Makowski, MPH
Epidemiologist 3
Injury and Violence Surveillance Unit
Connecticut Department of Public Health**

Suicide Trends

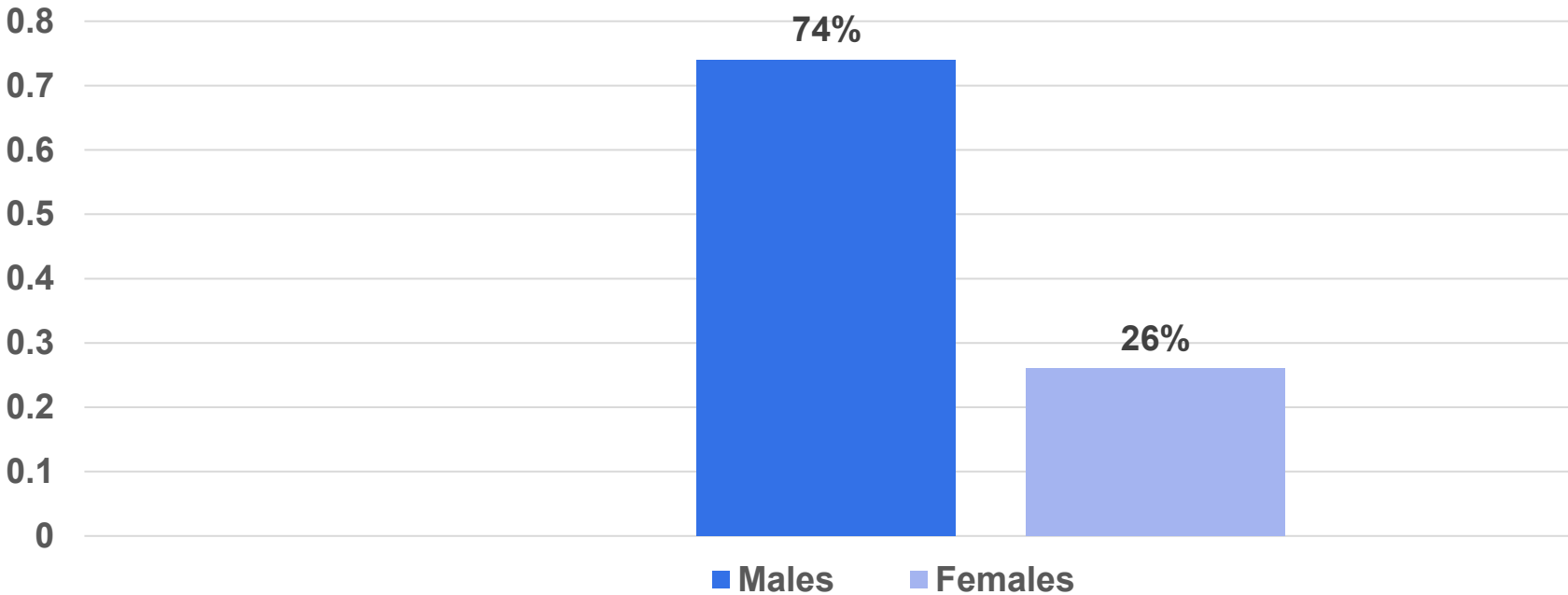
Suicide Trends in Connecticut 2015 to 2024*

CT Age-Adjusted Suicide Rates per 100,000 Connecticut pop.



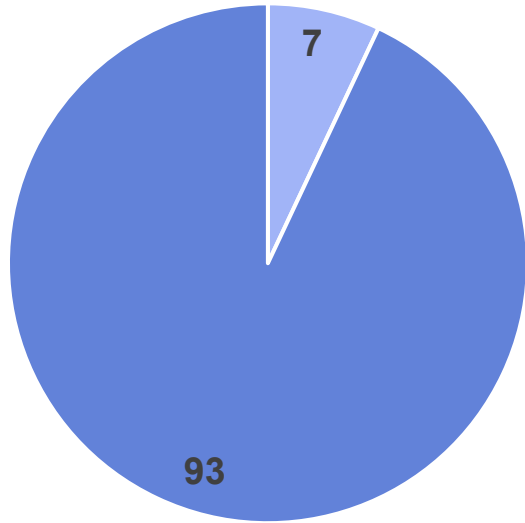
Data Source: Connecticut Violent Death Reporting System; used 2022 population data to calculate rates;* 2024 data are preliminary

Demographics (Percentage of Suicides) in CT by Sex 2015 to 2024*

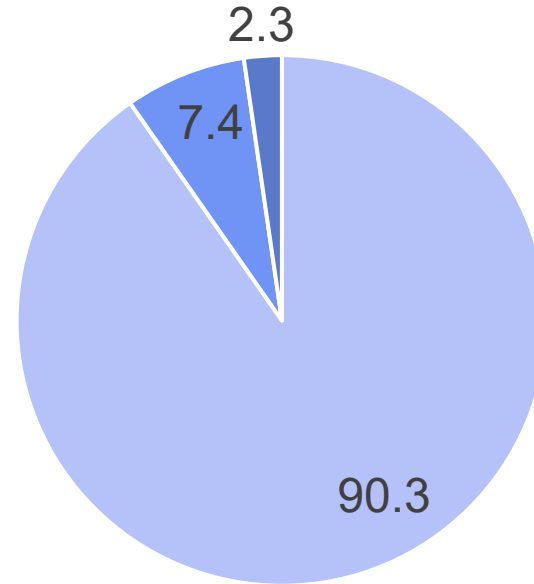


Data Source Connecticut Violent Death Reporting System; * 2024 data preliminary

Demographics of Suicides (By Percentage) in Connecticut, by Race and Ethnicity 2015 to 2024*



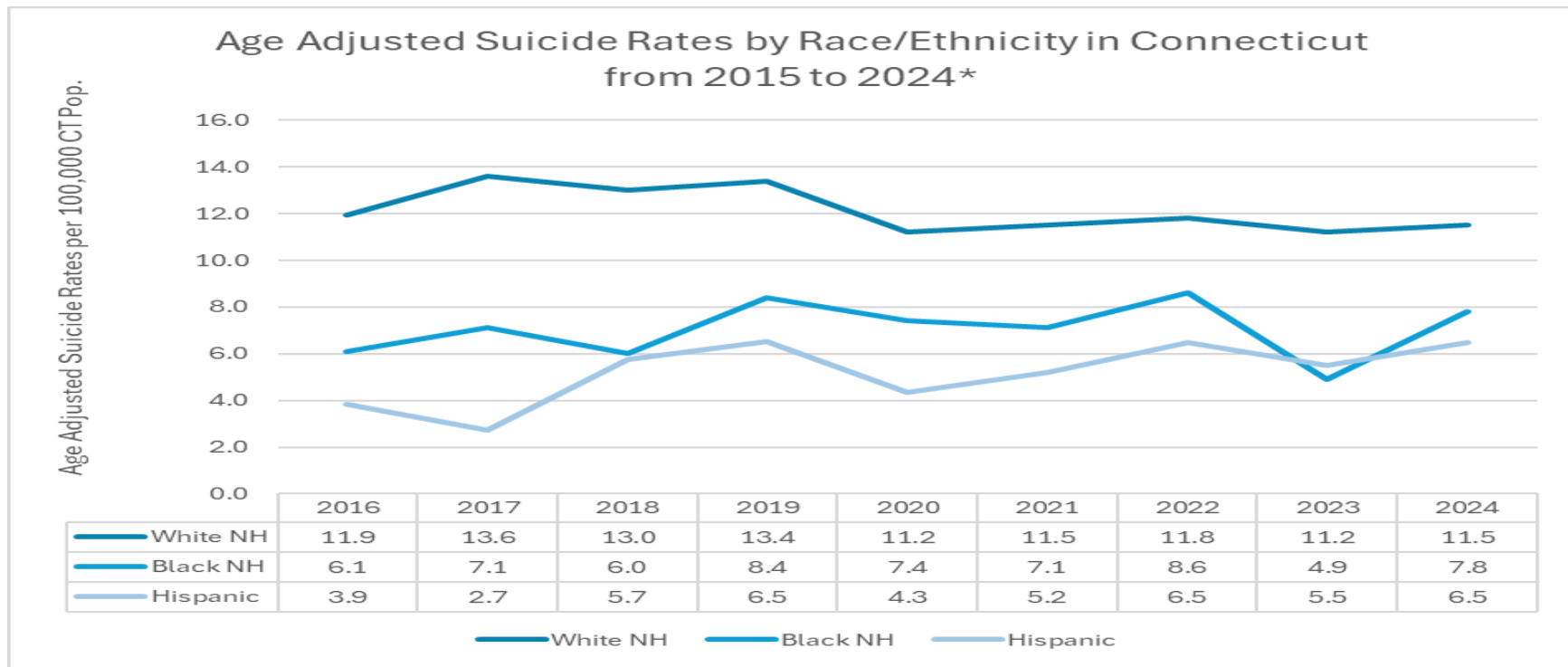
■ Hispanic ■ Non-Hispanic



■ White ■ Black ■ Other

Data Source Connecticut Violent Death Reporting System; * 2024 data are preliminary

Demographics of Suicides in Connecticut, by Race and Ethnicity 2015 to 2024*



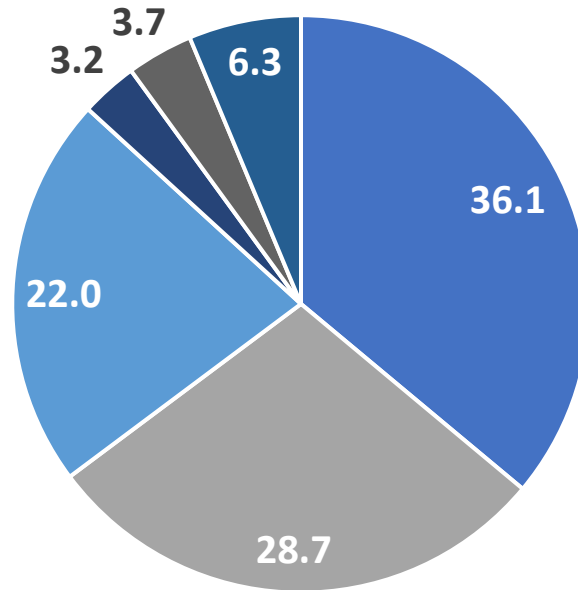
Data Source Connecticut Violent Death Reporting System; **For Black NH, 2015, 2016 and 2023** counts were ≥ 11 but < 25 and rates should be viewed with caution due to instability; **For Hispanic, 2015, 2016 and 2017** counts were ≥ 11 but < 25 and rates should be viewed with caution due to instability . * 2024 data are preliminary

Age Specific Suicide Rates 2020 to 2024*

Age Group (in years)	Number of Suicides 2020-2024*	Yearly 5- Year Average (2020-2024)	Age-Specific Rate 2020-2024* per 100,000 CT pop.
10-17	52	10	2.9
18-24	136	27	8.0
25-44	546	109	12.0
45-64	715	143	14.8
65+	431	86	12.9

Data Source Connecticut Violent Death Reporting System; Used 2023 population data for 2024 rates; * 2024 data are preliminary

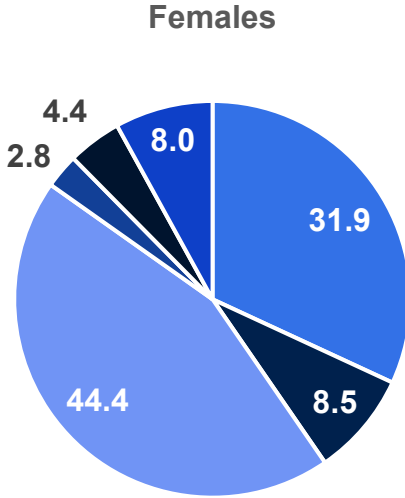
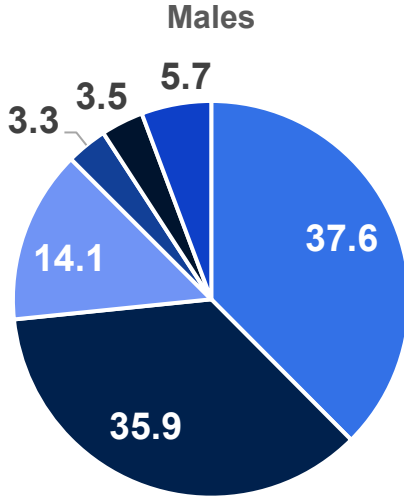
Lethal Means (Percentage of Suicides) 2015 to 2024*



■ Hanging -Strangulation ■ Firearm ■ Poisoning ■ Sharp Instrument ■ Fall ■ Other

Data Source Connecticut Violent Death Reporting System; *2024 data are preliminary

Lethal Means for Suicides by Sex 2015 to 2024*



- Hanging -Strangulation
- Firearm
- Poisoning
- Sharp Instrument
- Fall
- Other

- Hanging -Strangulation
- Firearm
- Poisoning
- Sharp Instrument
- Fall
- Other

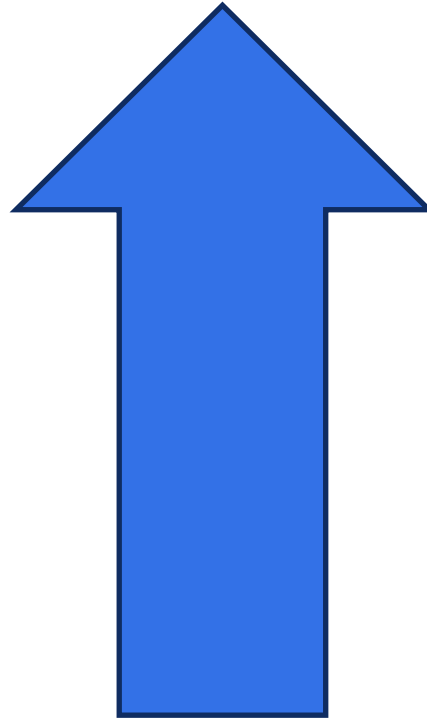
Data Source Connecticut Violent Death Reporting System; *2024 data are preliminary

Counseling for Lethal Means (CALM)

- It is all about saving a life
- From CTVDRS data, 50% of suicides death are attributable to medications and firearms
- It is important to limit access to these lethal means
- Firearms temporarily removed until suicidal thoughts subside

Lethality of Suicide Attempts

- **Most lethal** - Firearms
- Jumping from height/lying in front of moving object
- Hanging/Carbon Monoxide Poisoning
- Overdose
- **Least lethal** - Cutting



Risk Factors for Suicide 2015 to 2023

98% (N=3,326) of risk factors or circumstances are known

Most Common Risks – if known, not mutually exclusive:

- 1) Mental Health Problem 41.3% (N=1,375); W/ Diagnosis:
 - a) Depression 66.2% (N=911);
 - b) Bipolar Disorder 9.6% (N=132);
 - c) Anxiety 5.6% (N= 77);
 - d) Schizophrenia 4.5% (N=63)
- 2) Substance Misuse-Reported as Alcohol & Substance Misuse 34.0% (N=1,144)
- 3) Physical Health Problem (Acute, Chronic, Terminal Illness or Pain) 21.7% (N=722)
- 4) Intimate Partner Problem (divorce; break-up) 18.2% (N=606)
- 5) History of Suicidal Ideation 17.6% (N=586)
- 6) Previous Suicide Attempt(s) 16.0% (N= 532)

Data Source Connecticut Violent Death Reporting System

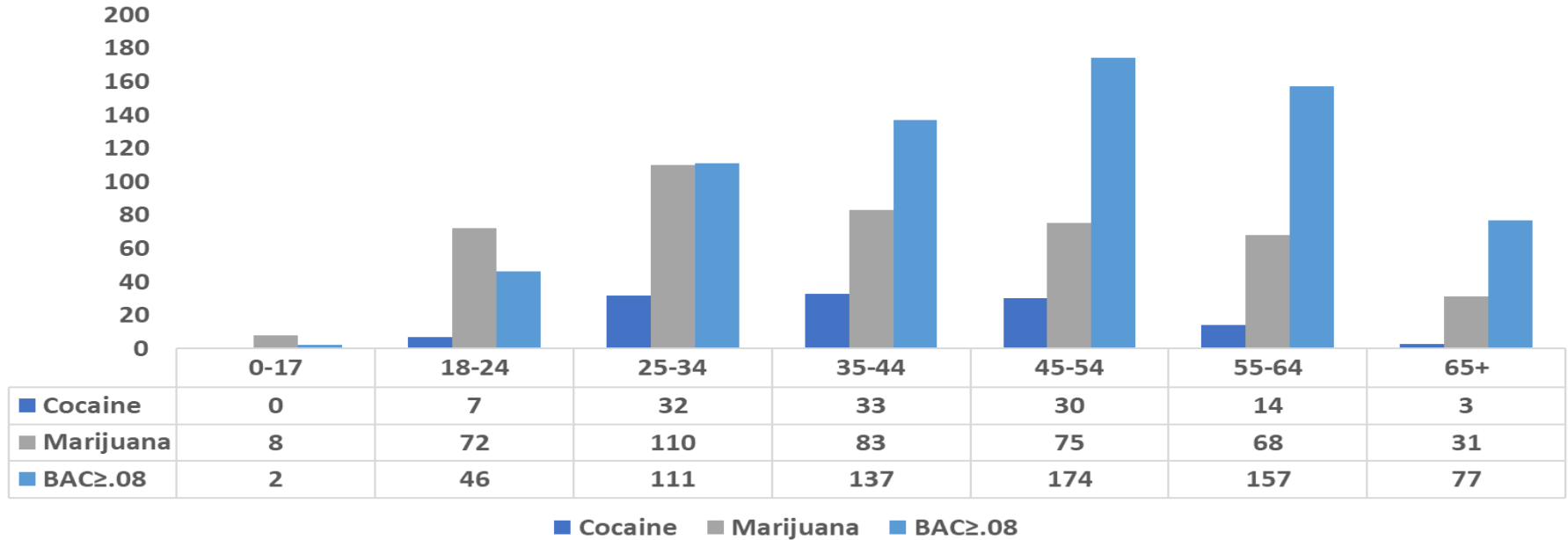
Most Frequent Substances Found in Blood at Autopsy for Suicides 2015 to 2023

Very Common to Have Multi-Drug Ingestion

Substance	Number of Incidents	Percentage of Substances Found at Autopsy
Alcohol	946	26.7
Alcohol BAC \geq .08	704	75% were above legal limit
Benzodiazepines	565	16.0
Opiates	551	15.8
Marijuana	484	13.8
Cocaine	144	4.3

Data Source Connecticut Violent Death Reporting System

Non-Therapeutic Substances found in Suicides at the Time of Autopsy by Age Group 2015 to 2023



Data: Connecticut Violent Death Reporting System; substances are not mutually exclusive

Drug Overdose Involved Suicides 2015 to 2023

Most Drug Overdoses Involve Multi-drug Ingestion

Substance Class That Caused Death	Number of Incidents	Percentage of Fatal Overdose	Major Drug
Opiates	133	19.0	Oxycodone
Alcohol with other drugs	75	11.0	
Antidepressants	64	9.0	
Benzodiazepines	62	9.0	
Antihistamines	56	8.0	Benadryl
Cardiovascular	41	6.0	
Analgesics	30	4.0	Acetaminophen
Antipsychotic	25	4.0	
Anticonvulsant	23	4.0	Gabapentin
Non-drug (Carbon Monoxide Poisoning)	81	12.0	

Data Source Connecticut Violent Death Reporting System

Suicide Rates of Connecticut Cities and Towns by *Residence City* 2020-2024*

- Data Source: Connecticut Violent Death Reporting System
- Rates based on counts ≥ 25 suicides
- Rates based on 2020 provisional town data

*2024 data are preliminary

Residence City	Counts	Suicide Rate per 100,000 City Population
Windsor	26	18.0
Groton	28	14.3
Norwich	26	13.2
Meriden	36	12.0
Middletown	27	11.6
Fairfield	35	11.3
Waterbury	58	10.7
Bristol	32	10.6
Manchester	29	10.0
West Hartford	31	9.8
West Haven	27	9.8
Danbury	41	9.6
Hamden	29	9.5
New Haven	61	9.3
Norwalk	41	9.2
New Britain	33	9.1
West Haven	27	9.0
Stamford	50	7.6
Bridgeport	55	7.5
Hartford	41	6.8

Suicide Rates of Connecticut Cities and Towns by *Injury City* 2020-2024*

- Data Source: Connecticut Violent Death Reporting System
- Rates based on counts ≥ 25 suicides
- Rates based on 2020 provisional town data

*2024 data are preliminary

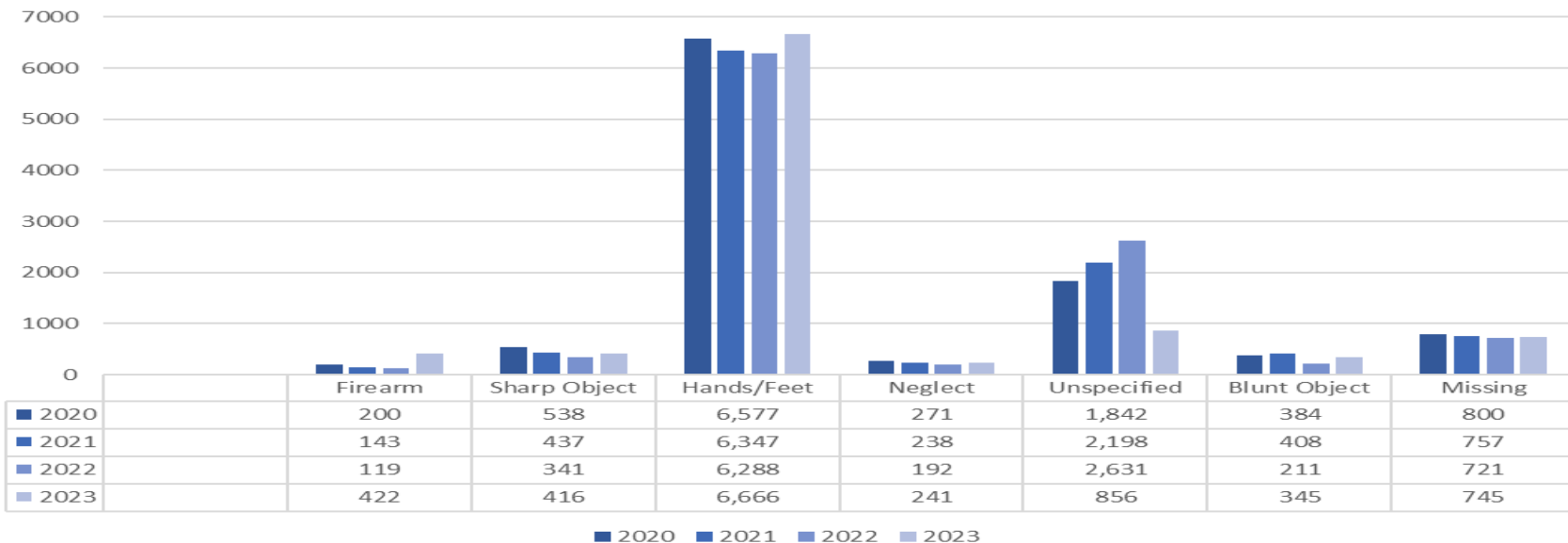
Injury City	Counts	Suicide Rate per 100,000 City Population
Groton	36	18.4
Vernon	26	17.8
Windsor	25	17.3
Torrington	25	14.5
Middletown	29	12.5
Hamden	35	11.4
West Hartford	35	11.1
Meriden	33	11.0
Manchester	31	10.7
West Haven	29	10.6
Waterbury	56	10.3
New Haven	63	9.6
Fairfield	29	9.3
Bristol	28	9.3
Norwalk	40	9.0
Danbury	38	8.9
New Britain	31	8.5
Greenwich	26	8.3
Bridgeport	59	8.1
Hartford	47	7.8

Connecticut Nonfatal Assault Injuries

Connecticut Public Health

Number of Assault related Emergency Department Visits and Hospitalizations by Weapon Type, Connecticut 2020-2023

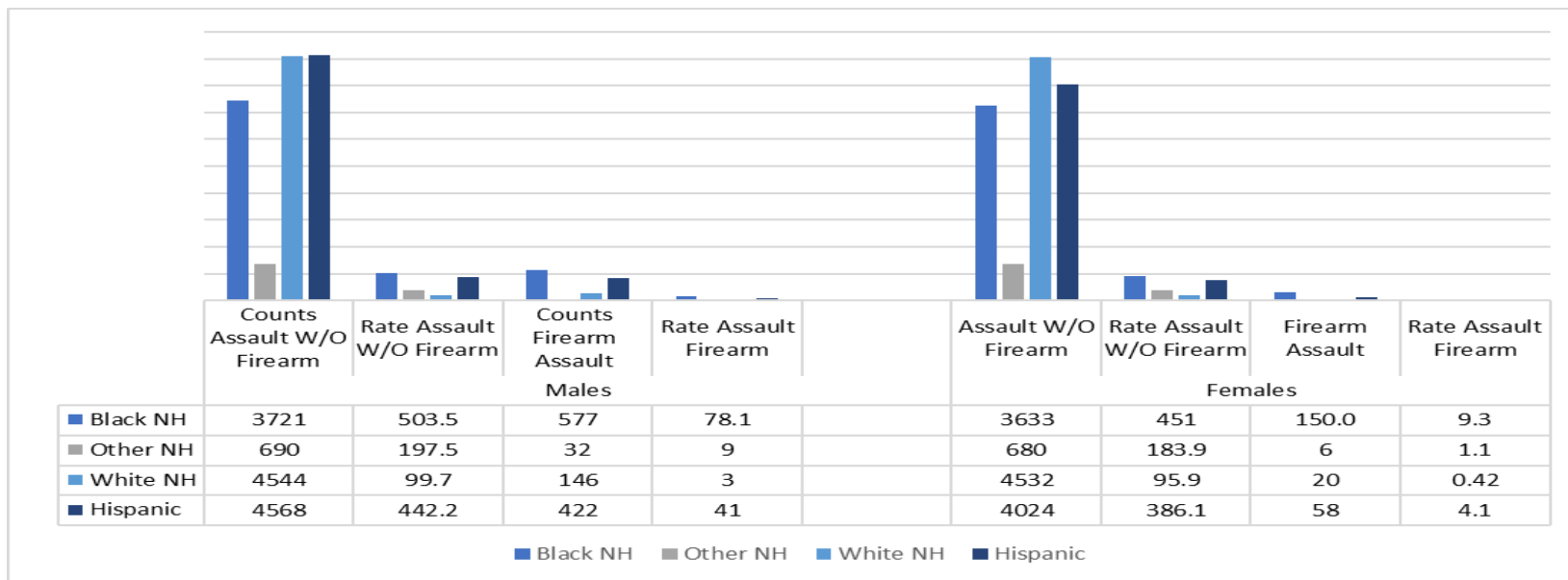
CHIME Data for Assaults 2020- 2023 by Weapon Type



Data source: Connecticut Hospital Discharge Data

NONFATAL FIREARM INJURIES AND ASSAULT

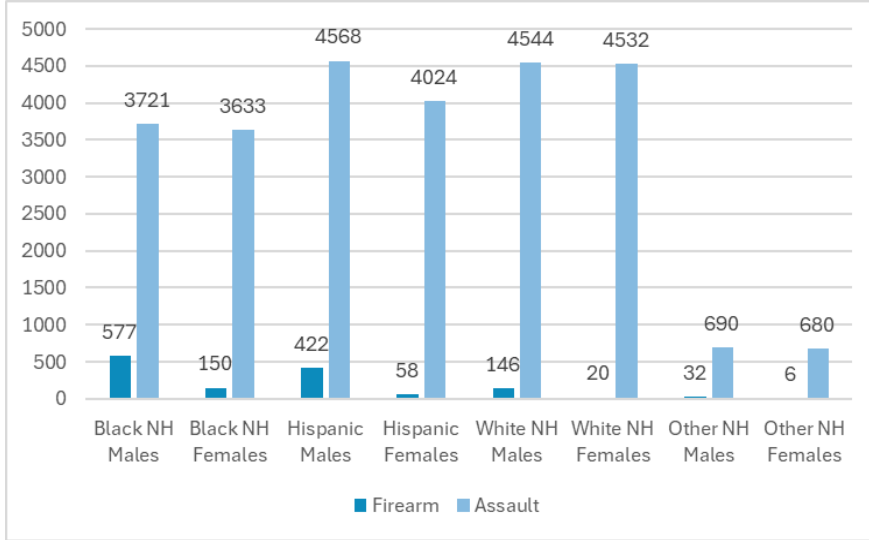
Number of Nonfatal Assault and Firearm Assault related Emergency Department Visits and Hospitalizations, by Race/Ethnicity and Sex, Connecticut 2020-2023



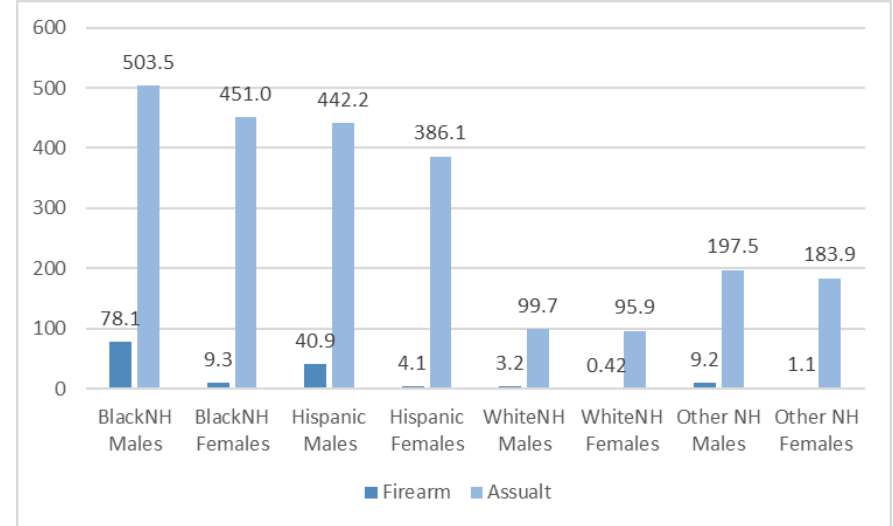
Data source: Connecticut Hospital Discharge Data

NONFATAL FIREARM INJURIES AND ASSAULT

Count of Nonfatal Assault and Firearm Assault related Emergency Department Visits and Hospitalizations per 100,000 Connecticut Population, by Race/Ethnicity and Sex, 2020-2023

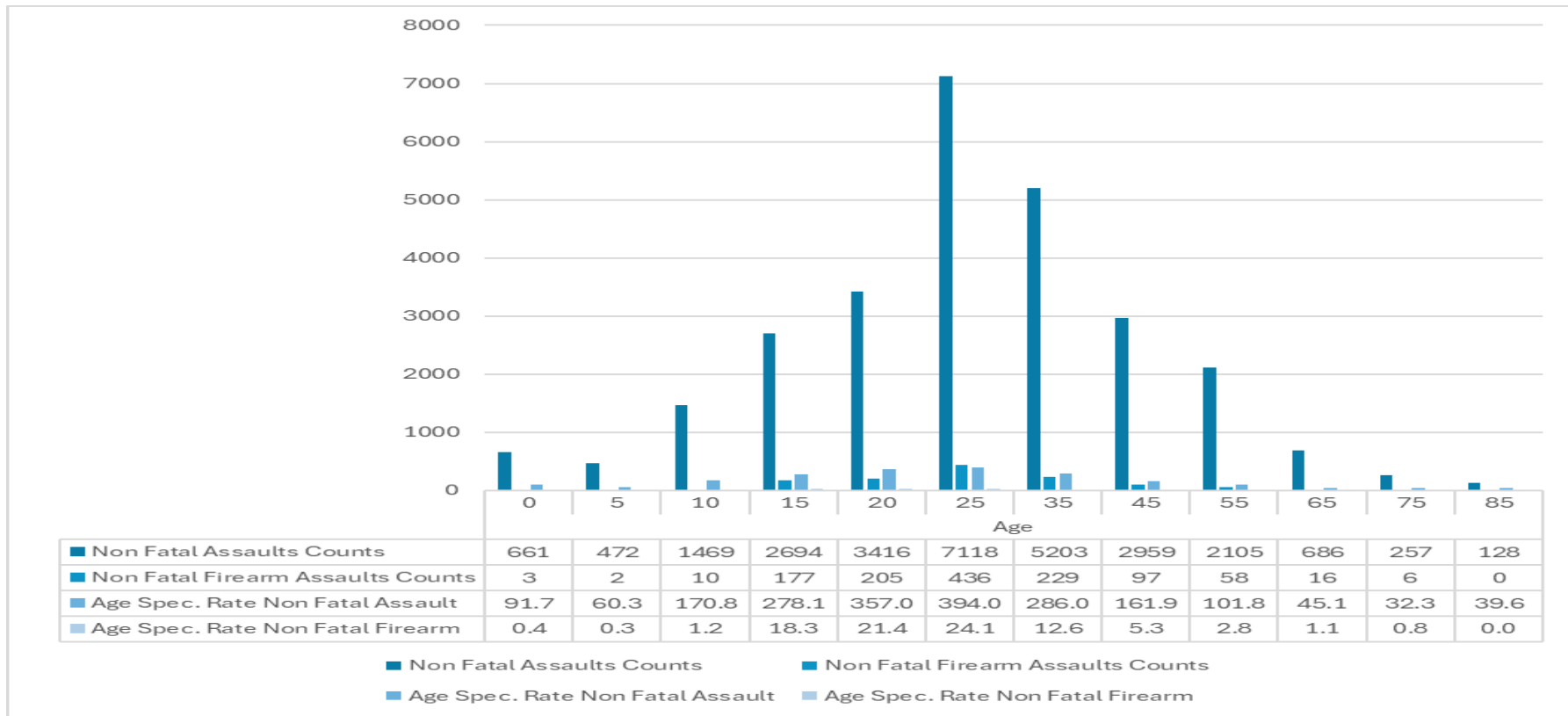


Rate of Nonfatal Assault and Firearm Assault related Emergency Department Visits and Hospitalizations per 100,000 Connecticut Population, by Race/Ethnicity and Sex, 2020-2023



Data source: Connecticut Hospital Discharge Data ; Other NH includes Asian, Native American, and Pacific Islander

2020- 2023 Hospital Discharge Data for Non-Fatal Assaults and Firearm Assaults by Age Group in Connecticut



CONNECTICUT CITIES (RESIDENCE CITY) RANKED BY NONFATAL ASSAULT RATE, 2018 TO 2023

Residence City	Nonfatal Firearm Assault Age-Adj. Rate per 100,000 City Population* (95%CI)		Nonfatal All Assault Age-Adj. Rate per 100,000 City Population* (95%CI)
Hartford	38.3 (34.1 - 42.5)		1 685.5 (666.7 - 703.8)
Bridgeport	33.1 (29.5 - 36.7)		4 479.5 (465.3 - 493.7)
New Haven	37.3 (33.4 - 41.2)		2 640.0 (622.5 - 657.5)
Waterbury	30.3 (26.0 - 34.7)		3 576.9 (555.3 - 595.5)
Meriden	13.5 (9.6 - 17.4)		6 323.4 (304.5 - 342.3)
Hamden	17.1 (12.7 - 21.5)		7 257.8 (240.9 - 274.7)
New Britain	12.7 (9.4 - 16.0)		5 387.6 (369.3 - 405.9)
Stamford	5.3 (3.7 - 6.9)		8 217.1 (206.6 - 227.6)

* Used 2023 provisional population data for rates.

Table includes cities with 40 or more residents who were injured by firearm assault between 2018 and 2023.

Data Source: Connecticut Hospital Discharge Data

**CONNECTICUT CITIES RANKED BY CURRENT NONFATAL FIREARM AND VIOLENCE INJURY RATES,
JUNE 2024 TO JUNE 2025**

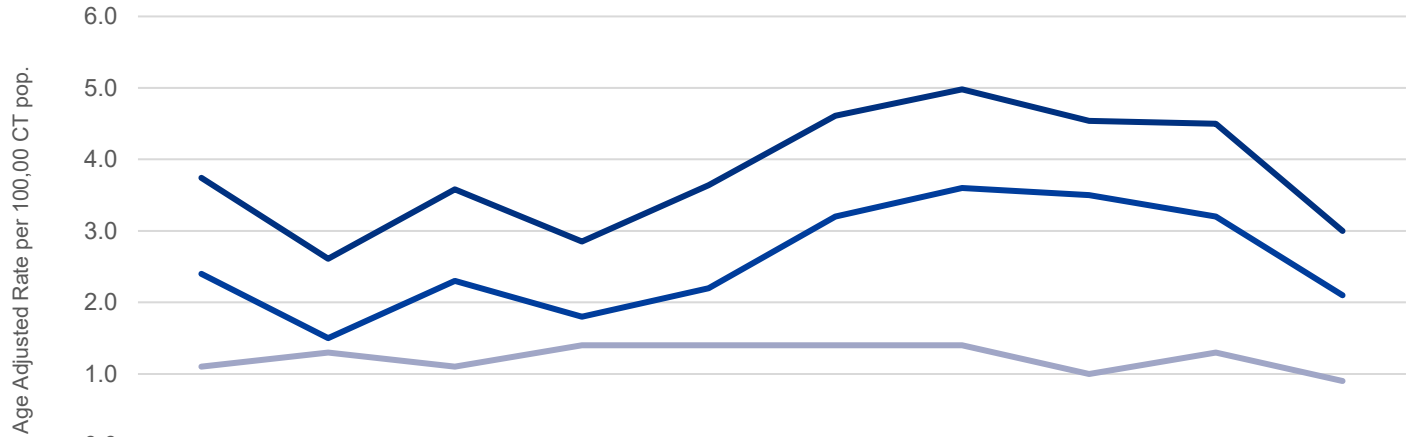
Residence City	Firearm Counts	One-Year Nonfatal Firearm Injuries Age-Adj. Rate per 100,000 City Population*	Residence City	All Assault Counts	One-Year Nonfatal All Assault Injuries Age-Adj. Rate per 100,000 City Population*
New Haven	143	92.5	New Haven	1196	816.84
Bridgeport	46	29.1	Bridgeport	710	466.54
Hartford	33	25.4	Hartford	421	311.28
Waterbury	24	20.8	Danbury	418	308.94
Danbury	19	21.6	Stamford	205	151.5

* Used 2023 provisional population data for rates.
 Analysis period: June 1, 2024 – June 30, 2025 (near real-time data)
 Data Source: Syndromic surveillance data

Connecticut Homicide Data

HOMICIDE RATES

Age Adjusted Homicide and Firearm Rates 2015 to 2024*

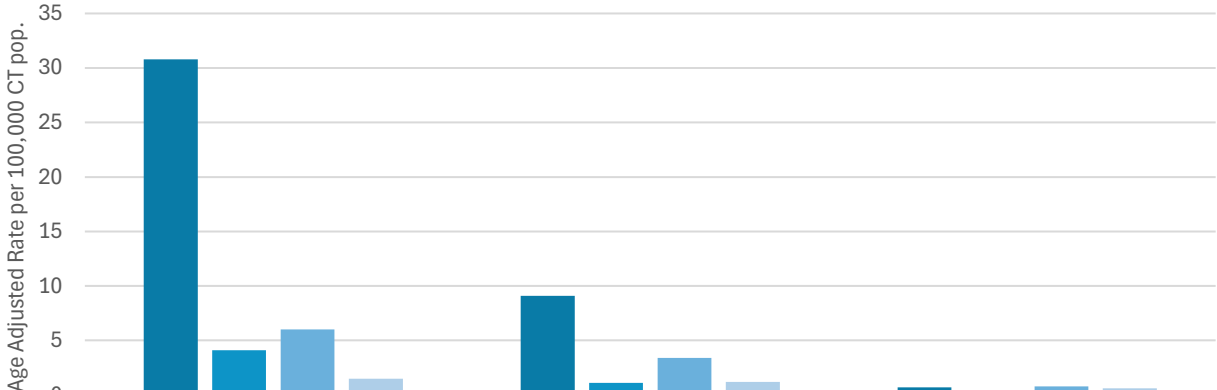


	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
— Homicide Age Adj Rate	3.7	2.6	3.6	2.9	3.6	4.6	5.0	4.5	4.5	3.0
— Firearm Age Adj Rate	2.4	1.5	2.3	1.8	2.2	3.2	3.6	3.5	3.2	2.1
— Non Firearm Age Adj Rate	1.1	1.3	1.1	1.4	1.4	1.4	1.4	1	1.3	0.9

* 2024 data are preliminary; Used 2023 provisional population data for rates.

Data Source: Connecticut Violent Death Reporting System

HOMICIDE RATES BY SEX, RACE, AND ETHNICITY, 2015 to 2024*



	Black NH	Hispanic	White NH
Age Adjusted Rate Firearm Homicides Male	30.8	9.1	0.7
Age Adjusted Rate Firearm Homicides Females	4.1	1.1	0.2
Age Adjusted Rate Non Firearm Homicide Males	6.0	3.4	0.8
Age Adjusted Rate Non Firearm Homicides Females	1.5	1.2	0.6

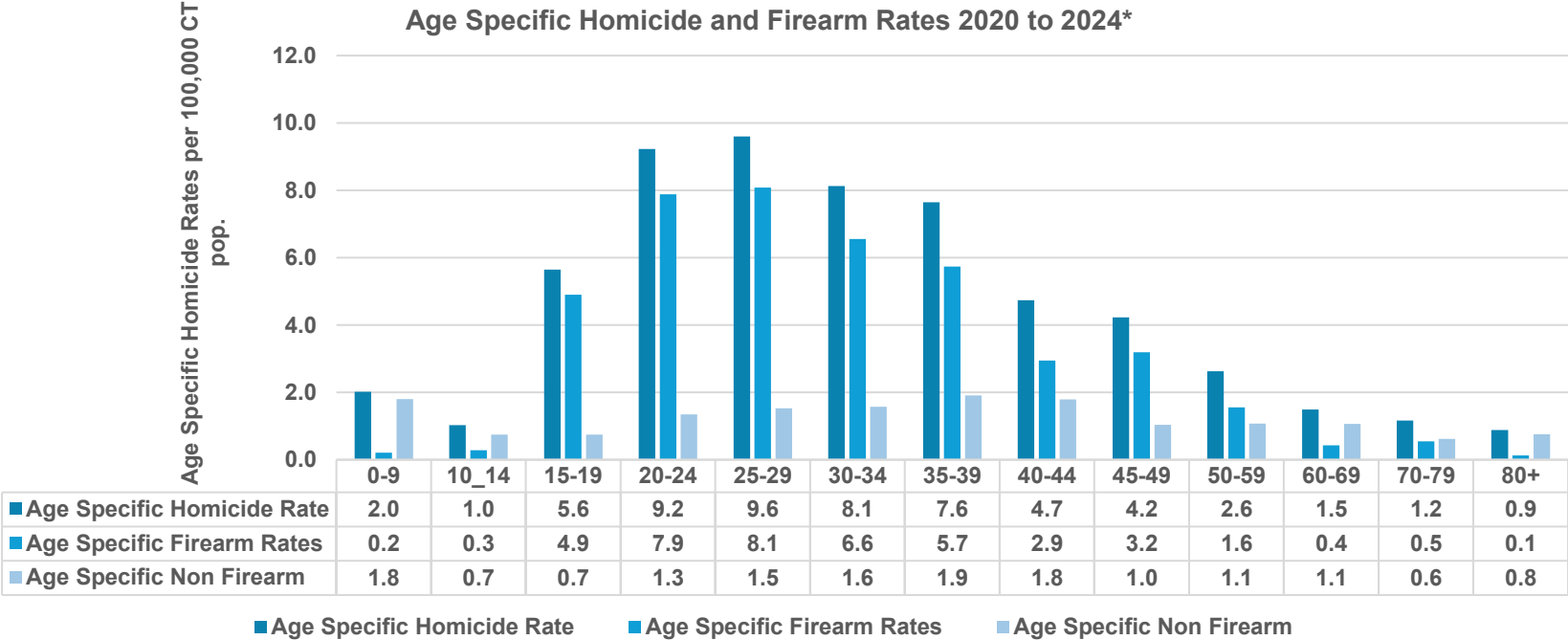
Race and Ethnicity

* 2024 data are preliminary; Used 2023 provisional population data for rates

NH is non-Hispanic

Data Source: Connecticut Violent Death Reporting System

Homicide Rates by Age Group



*2024 data are preliminary; used 2023 provisional data to calculate rates
 Data source Connecticut Violent Death Reporting System

COMPARISON OF HOMICIDE RATES PER 100,000 POPULATION BY RACE AND ETHNICITY FOR TWO TIME PERIODS

Race/ Ethnicity	5-Year Avg. No. of Homicides	Age-Adj. Rate (95% CI)	5-Year Avg. No. of Homicides	Age-Adj. Rate (95% CI)	Rate Ratio
	2015-2019	2015-2019	2020-2024*	2020-2024*	
Non-Hispanic Black	51	13.4 (11.8 - 15.1)	75	18.9 (17.0 - 20.8)	1.41#
Non-Hispanic White	33	1.4 (1.2 - 1.6)	28	1.2 (1.0 - 1.4)	1.16!
Hispanic	27	4.6 (3.8 - 5.4)	40	5.8 (5.7 - 5.9)	1.26#

*2024 data are preliminary; Used 2023 provisional population data for rates.

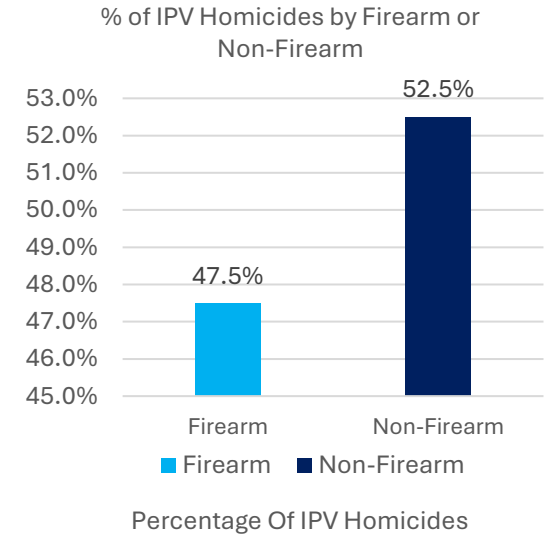
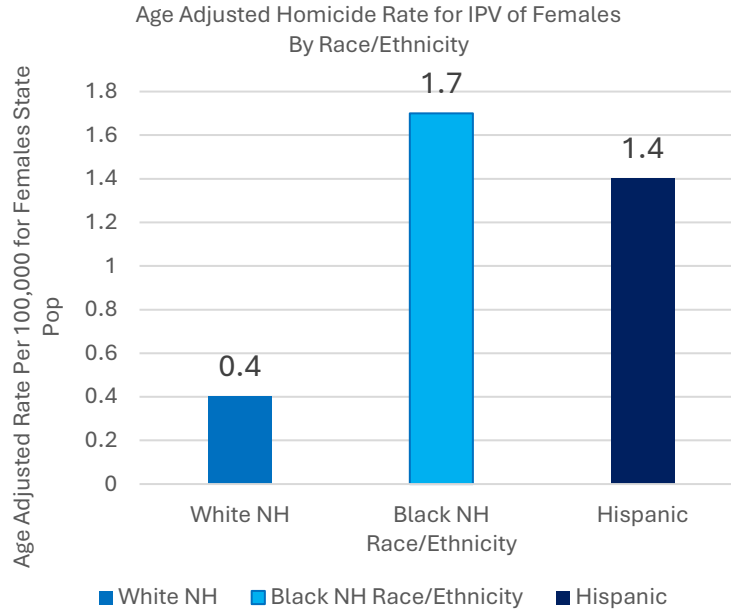
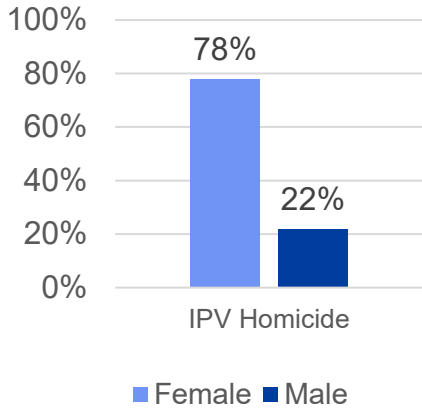
Rates in period 2 (2020-2024*) are significantly higher than in period 1 (2015-2019); ! Rates in period 2 are lower than period 1(2015-2019)

Data Source: Connecticut Violent Death Reporting System

INTIMATE PARTNER VIOLENCE STATISTICS

- There were 141 intimate partner violence (IPV) homicides between 2015 and 2024*
- Average of 14 to 16 IPV homicides per year

% of Females and Males Among Those Who Died by IPV Homicide



Note: Of the non-firearm IPV homicides, 29.1% were due to stabbing.

*2024 data are preliminary; used 2023 provisional data to calculate rates
Data Source: Connecticut Violent Death Reporting System

CONNECTICUT CITIES (INJURY CITY) RANKED BY FIREARM HOMICIDE RATE, 2018 TO 2024*

Injury City**	All Homicide Counts	All Homicide Age-Adj. Rate per 100,000 City Population***	Firearm Homicide Counts	Firearm Homicide Age-Adj. Rate per 100,000 City Population	Non-Firearm Homicide Counts	Non-Firearm Homicide Age-Adj. Rate per 100,000 City Population
Hartford	211	23.2 (20.0 - 26.4)	169	19.3 (16.4 - 22.2)	42	5.3 (3.8 - 6.8)
New Haven	130	15.8 (13.1 - 18.5)	103	12.4 (12.0 - 14.8)	27	3.4 (2.1 - 4.7)
Bridgeport	123	11.7 (9.6 - 13.8)	98	9.3 (7.4 - 11.2)	25	2.4 (1.5 - 3.3)
Waterbury	85	10.9 (8.6 - 13.2)	63	8.2 (6.2 - 10.2)	22	2.9 (1.7 - 4.1)**

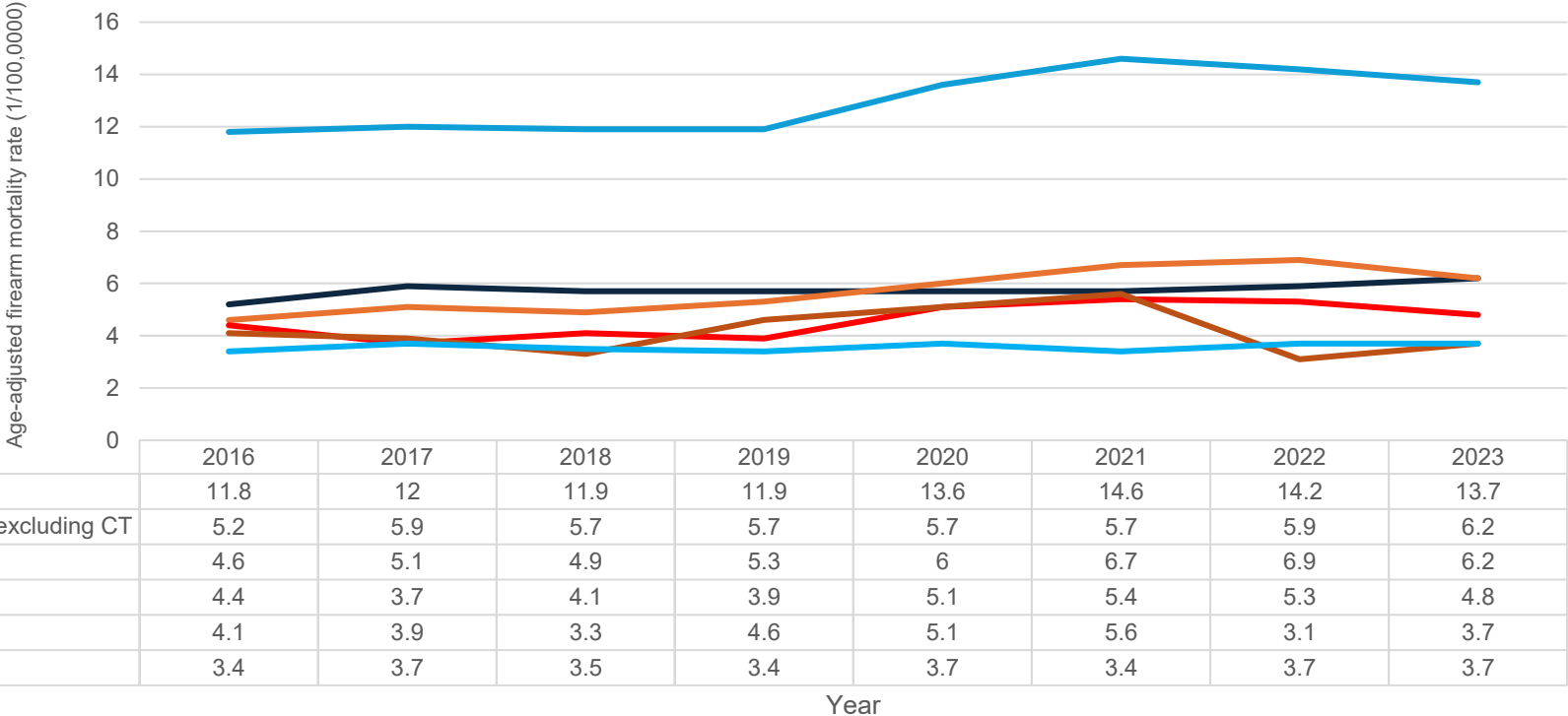
* 2024 data are preliminary; Used 2023 provisional population data for rates.

**Table includes injury cities with 15 or more homicides from 2018 to 2024.

*** Rates calculated from counts less than 25 should be viewed with caution because of statistical unreliability.

Data Source: Connecticut Violent Death Reporting System

Comparison of Age-adjusted Firearm Mortality Rate by National, New England Region To Connecticut, From 2016 to 2023



Data Source: CDC Wonder

Questions

Please reach out to:
Mike Makowski, Epidemiologist 3
Injury and Violence Surveillance Unit
CT Department of Public Health
Michael.Makowski@ct.gov