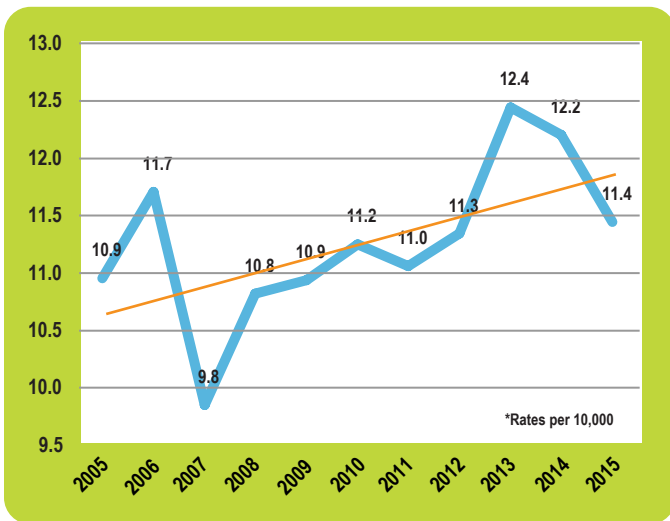# Suicidal Behavior in Connecticut: A Brief Report
Suicidal Behavior Among Youth 2005-2015

According to the CDC, suicide is the second leading cause of death among youth aged 10-24 in both Connecticut and the US. Hospitalizations for suicide attempts are an important surveillance tool for monitoring trends in suicidal behavior. This report presents an analysis of trends in suicidal behavior among Connecticut youth from fiscal years 2005–2015 using data from the state's Hospital Inpatient Discharge Database.
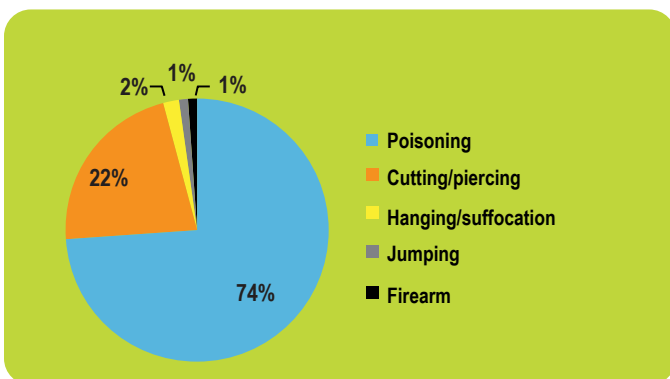
Hospitalizations For Suicide Attempts 2005 – 2015

Hospitalizations following suicide attempts among Connecticut youth aged 10-24 have increased substantially over the past decade. This is consistent with data from the CDC showing rates of death by suicide increasing nationally by over 20% since 1999 (NCHS Data Brief No. 241, April 2016).
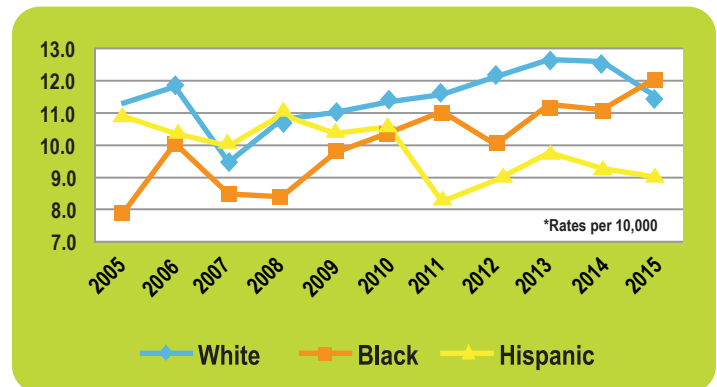

*Rates per 10,000

Methods of Suicide Attempts 2015

Methods of suicide attempts requiring hospitalization have remained stable over the past decade. Three quarters of admissions in 2015 were the result of poisoning, followed by cutting or piercing (22%).

- Poisoning 74%
- Cutting/piercing 22%
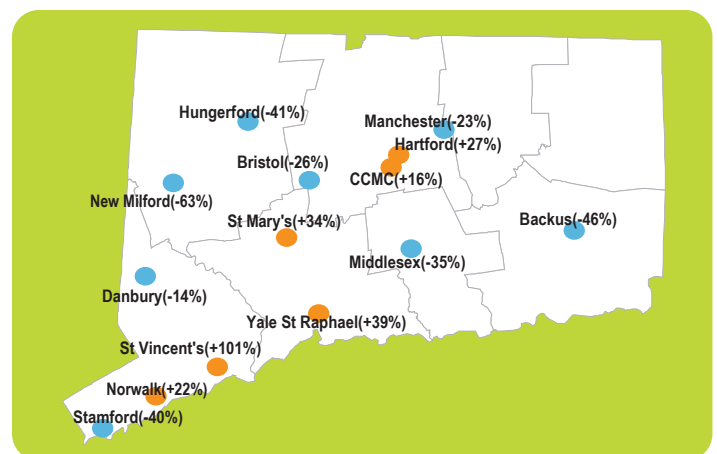- Hanging/suffocation 2%
- Jumping 1%
- Firearm 1%

Race and Ethnic Differences in Suicidal Behavior 2005–2015

Rates of hospitalization for suicide attempts among Black youth ages 10-24 in Connecticut increased sharply from 2005–2015, while rates among Hispanic youth declined.

*Rates per 10,000

White   Black   Hispanic

Increases in Attempts Among Urban Hospitals

Increases in hospitalizations for suicide attempts over the past 3 years (2013-2015) were concentrated in the state's major urban areas. The New Haven/Bridgeport area had several facilities seeing substantial increases in suicide attempts requiring hospitalization.

Hungerford(-41%)
Manchester(-23%)
Hartford(+27%)
Bristol(-26%)
CCMC(+16%)
New Milford(-63%)
St Mary's(+34%)
Backus(-46%)
Middlesex(-35%)
Danbury(-14%)
Yale St Raphael(+39%)
St Vincent's(+101%)
Norwalk(+22%)
Stamford(-40%)

Note: The percent change in the number of suicide attempts in 2013-2015 compared to 2010-2012 is presented. Blue shaded dots indicate hospitals with reduced numbers of attempts in 2013-2015; orange shaded dots indicate hospitals with increased numbers of attempts. Hospitals with fewer than 10 hospitalizations in 2013-2015 were omitted from the chart.