

Suicide-Related ED Visits Increased in 2025

August 2026

In 2025, the rate of suicide-related emergency department (ED) visits increased by 5%. This is a significant increase from 2024, which was the first year to have a decrease in the rate of suicide-related ED visits since 2017. Suicide-related ED visit data provides timely information that can support more direct and targeted suicide prevention interventions. A suicide-related ED visit includes a range of different visit types, including suicidal ideation, self-harm or suicide attempts. Suicide-related ED visit rates can include multiple visits for the same individual.

This data brief presents trends over time and between demographic groups for suicide-related ED visits in Vermont. For more information regarding the current rate of suicide-related ED visits and comparison between groups, visit the [Suicide Surveillance Dashboard](#) or view the [2025 Annual Suicide Data Report](#).

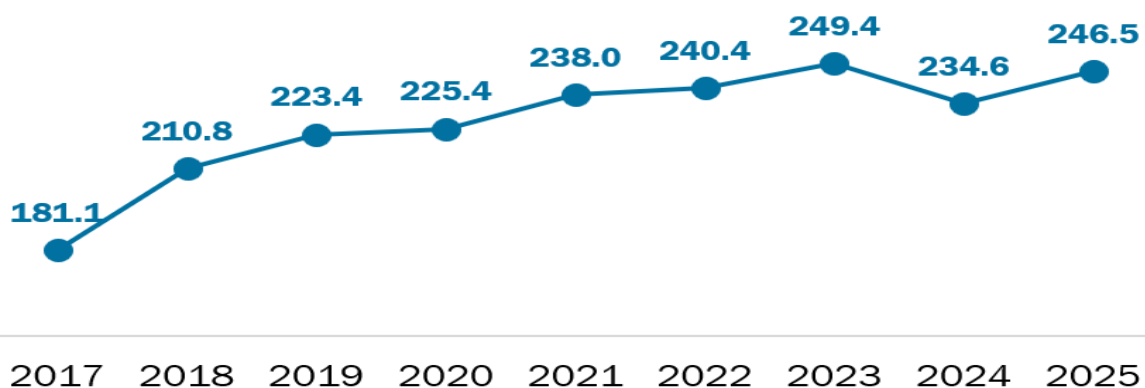
Key Points

- **The rate of suicide-related ED visits increased significantly in 2025.**
- **ED visits among Vermonters aged 25-64, male, and white non-Hispanic increased significantly in 2025.**

Suicide-Related ED Visits

In 2025, there were 6,369 suicide-related ED visits in Vermont, a rate of 246.5 per 10,000 ED visits. This is a statistically significant increase compared to 2024, which had a rate of 234.6 per 10,000 ED visits.

Suicide-related ED visits significantly increased in 2025 compared to 2024.
Rate per 10,000 ED Visits.



Source: Electronic Notification for the Early Notification of Community-Based Epidemics (ESSENCE), 2017 – 2025



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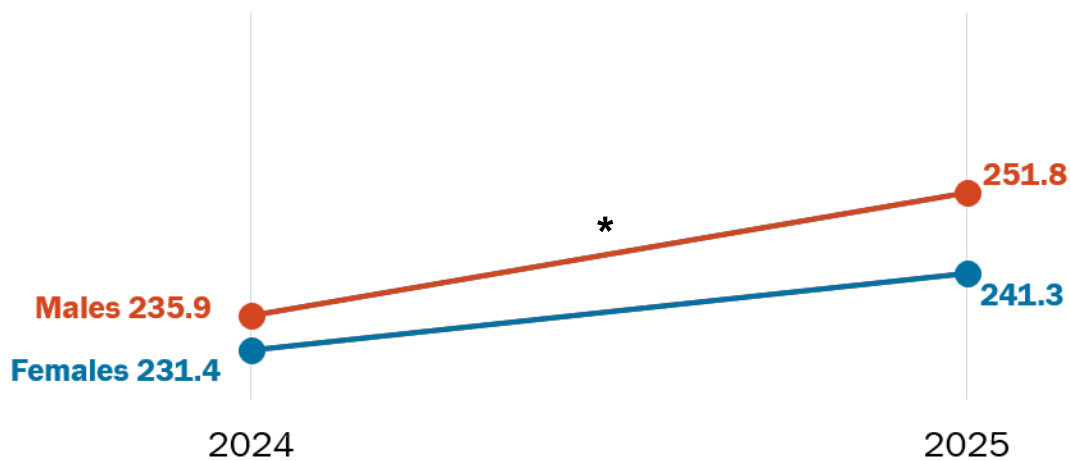


Demographic Trends: 2024 vs. 2025

Sex

Both males and females experienced an increase in suicide-related ED visits in 2025, but only males had a statistically significant increase of 7% from 2024 to 2025. Although the Vermont Department of Health recognizes genders beyond the binary, the data sources in this report are categorized as male or female only. For this reason, all data throughout this report will reference male or female only.

Suicide-related ED visit rates among males increased significantly in 2025 compared to 2024.



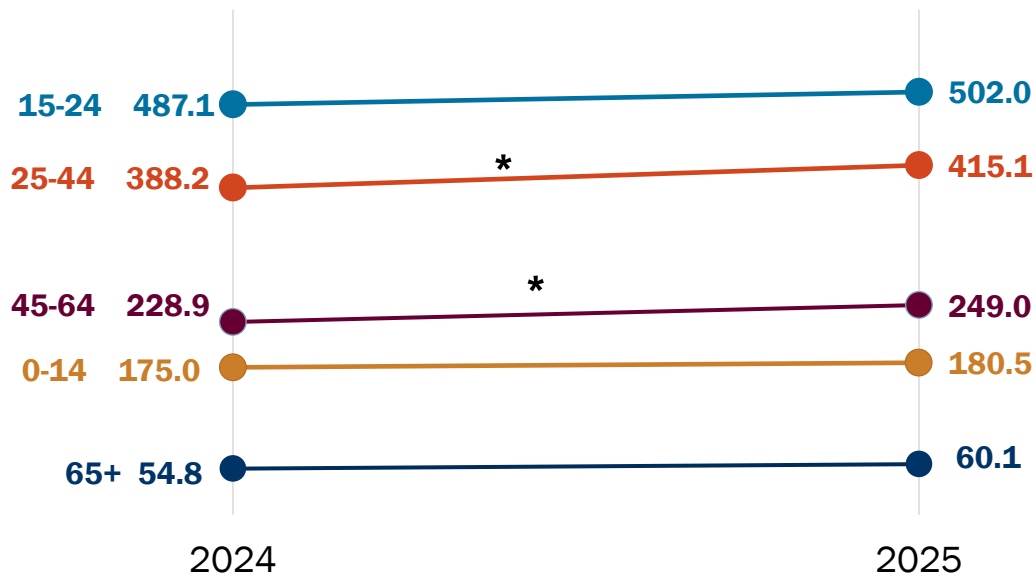
Source: ESSENCE, 2024 – 2025

*Statistically significant increase between 2024 and 2025

Age

Suicide-related ED visits increased significantly among Vermonters aged 25-44 and 45-65 in 2025 compared to 2024. Visits to the ED for suicide-related reasons increased by 8% for Vermonters aged 25-64 in 2025. All other age groups saw a slight increase in suicide-related ED visits in 2025, but these increases were not statistically significant.

Suicide-related ED visits rates among Vermonters aged 25-64 years significantly increased in 2025 compared to 2024.



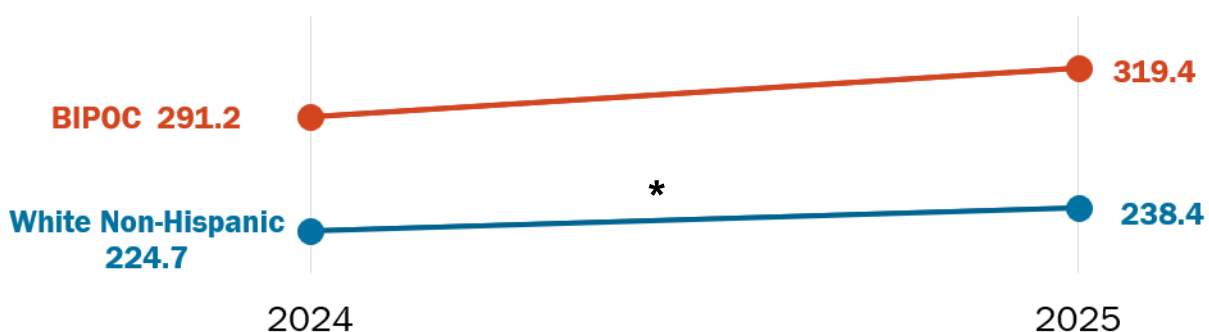
Source: ESSENCE, 2024 – 2025

*Statistically significant increase between 2024 and 2025

Race/Ethnicity

Suicide-related ED visits increased by 6% among white, non-Hispanic Vermonters in 2025. While the rate of suicide-related ED visits among Black, Indigenous, and people of color (BIPOC) Vermonters had large changes from 2024 to 2025, this difference is not statistically significant, due to comparatively small populations and numbers of visits. BIPOC includes Black or African American; Native American, Indigenous or First Nation; Pacific Islander; Asian; two or more races; and Hispanic people.

Suicide-related ED visit rates among white Vermonters significantly increased in 2025 compared to 2024.



Source: ESSENCE, 2024 – 2025

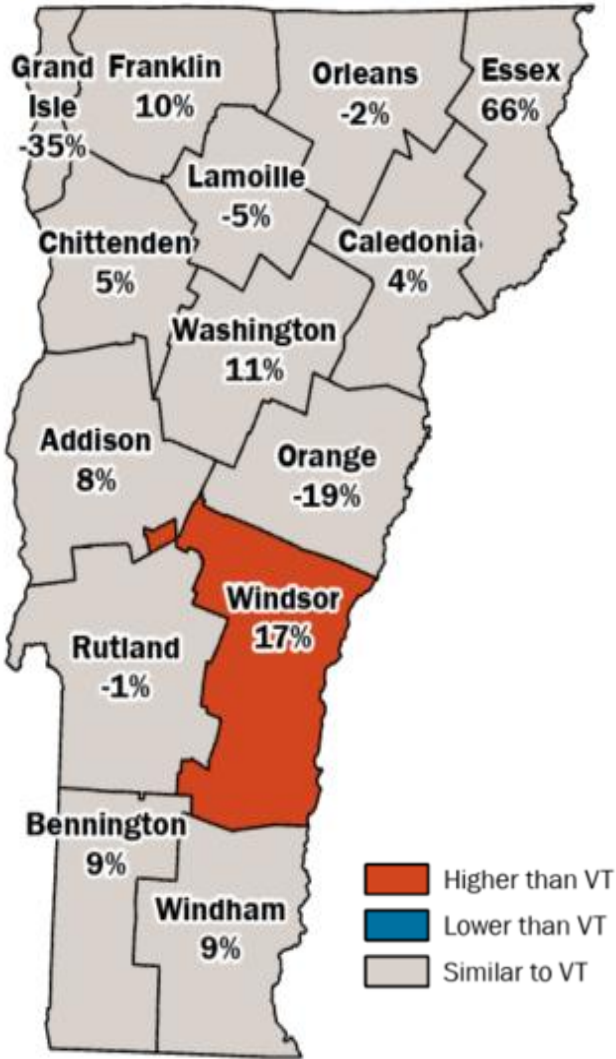
*Statistically significant increase between 2024 and 2025

County

The rate of suicide-related ED visits significantly increased among residents of Windsor County in 2025. The suicide-related ED visit rates for all other counties remained statistically similar.

While counties like Grand Isle and Essex had large changes in the rate of suicide-related ED visits between 2024 and 2025, these differences are not statistically significant. These counties have small populations and numbers of visits, so changes in rates and percentages often seem more dramatic.

Suicide-related visit rates among residents of Windsor County increased significantly in 2025.



Comparison of the Rate of Suicide-Related ED Visits between 2024 and 2025

County	2024 Rate	2025 Rate	Relative Percent Change Between 2024 and 2025
Addison	133.3	143.5	8%
Bennington	262.0	285.4	9%
Caledonia	254.3	264.7	4%
Chittenden	269.1	282.3	5%
Essex	143.1	237.6	66%
Franklin	166.1	182.9	10%
Grand Isle	166.4	108.6	-35%
Lamoille	147.0	139.4	-5%
Orange	206.1	167.1	-19%
Orleans	185.5	181.0	-2%
Rutland	311.0	309.1	-1%
Washington	182.5	203.5	11%
Windham	353.2	383.7	9%
Windsor	215.5	252.6	17%

Rates are per 10,000 ED visits.

Source: ESSENCE, 2024 – 2025

Key Takeaways

- The rate of suicide-related ED visits in Vermont significantly increased in 2025 compared to 2024.
- The rate of suicide-related ED visits significantly increased among Vermonters aged 25-64 years old, white, non-Hispanic Vermonters, and males in 2025 compared to 2024.
- Suicide-related ED visits significantly increased among residents of Windsor County from 2024 to 2025.

Resources to Get Help

- If you or someone you know is thinking about suicide, call or text the Suicide and Crisis Lifeline at 988, or chat at 988lifeline.org.
- For more information about getting support, helping others who may be struggling, and getting involved in suicide prevention in Vermont, go to FacingSuicideVT.com.
- [Man Therapy](#) is a men's mental health campaign that uses practical tools and resources to help men address mental health concerns, reduce stigma, and connect with support before reaching a crisis.
- The [Vermont Network](#) has a statewide hotline for domestic abuse that can be reached at 800-228-7395.
- For more information about secure storage, free gun locks, and options for temporary storage, go to GunSafeVT.org or [Firearm Safety](#).

Methods and Limitations

This analysis uses ED data that is reported through the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE), a [syndromic surveillance](#) system that tracks real-time healthcare visit data. ESSENCE captures every ED visit from all medical hospitals in Vermont but does not include psychiatric hospitals, the Veterans Affairs hospital, or hospitals outside of Vermont, even if they are part of the UVM Health Network. This analysis uses electronic medical records (EMR), specifically a patient's chief complaint and discharge diagnosis fields. These fields are not always accurate and are sometimes missing. Please keep in mind suicide-related ED visit rates do not always correlate with suicide death rates. All analyses were done in R Studio 4.5.3.

The Health Department recognizes that many social, economic and environmental inequities made worse by structural oppression, marginalization and racism influence the data we collect and report. We continuously work to better collect and share data that reflect the lived experiences of all Vermonters. If you have questions or concerns, please check our [Data Encyclopedia](#) for more information, including who to contact.

If you need help accessing or understanding this information, contact ahs.vdh-suicidedata@vermont.gov.