

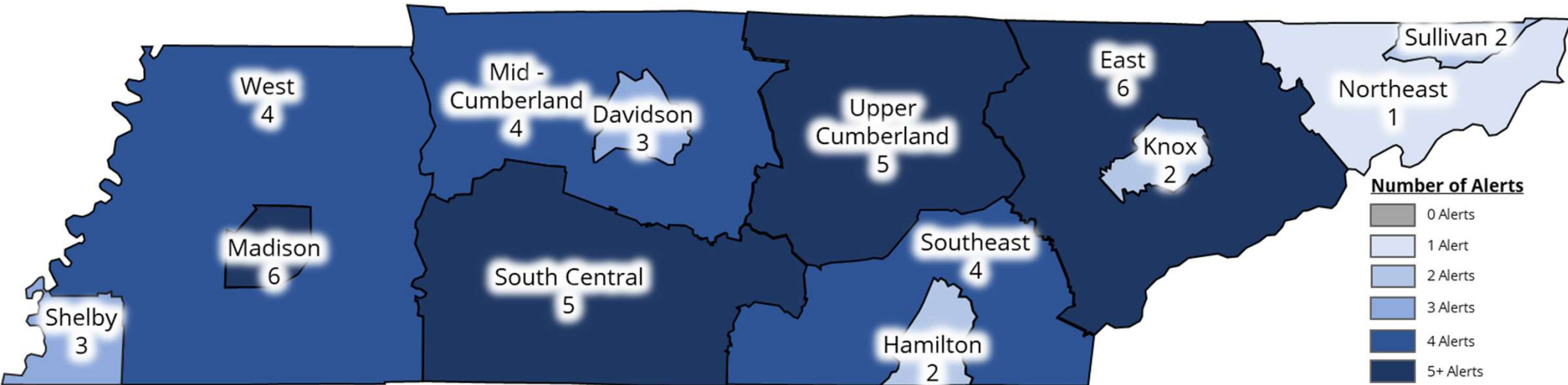


Suicide Syndromic Surveillance Quarterly Data Brief July 2025 – September 2025

Injury Prevention & Detection – Family Health and Wellness

Map of Suicide-Related Behavior ESSENCE Alerts, CY2025 Q3, 5-17 Years

Region/Metro ESSENCE Alerts*, Children (5-17 years)

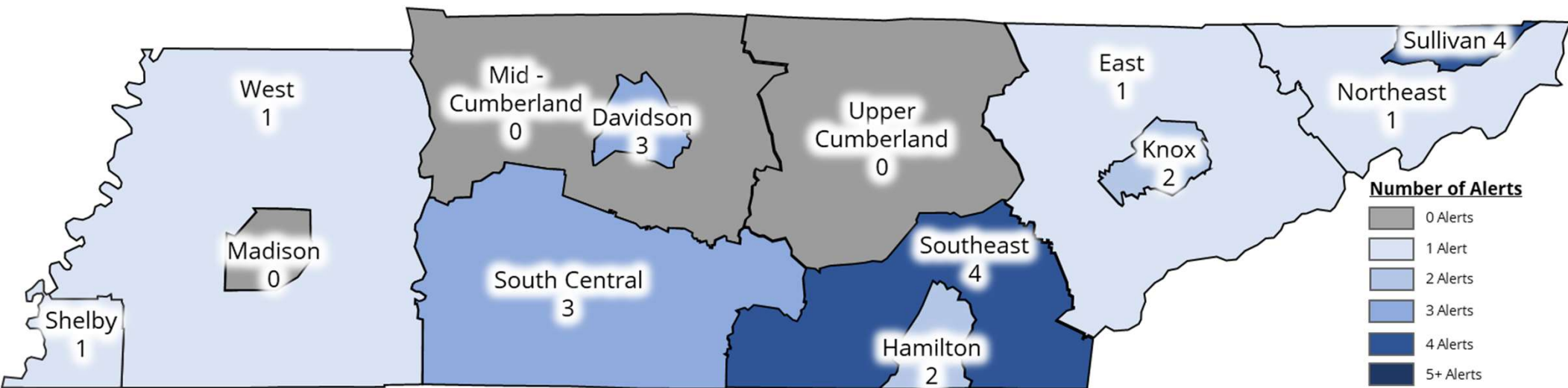


Madison, South Central, Upper Cumberland, and East Tennessee all had at least 5 alerts in the 5-17 age group.

* ESSENCE alerts are generated when the number of ED visits for suicide-related behavior on one day in the metro or region was statistically significant above the expected value based on the previous 28 days.

Map of Suicide-Related Behavior ESSENCE Alerts, CY2025 Q3, 18-24 years

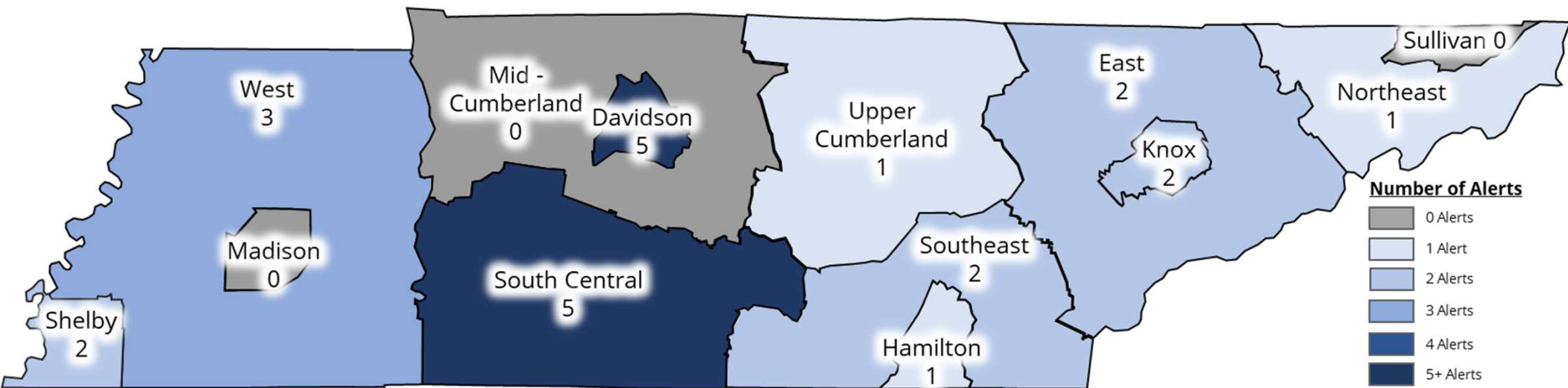
Region/Metro ESSENCE Alerts*, Young Adults (18-24 years)



Most alerts were in the Southeast region, and Sullivan metro for the 18-24 age group, with 4 alerts.

Map of Suicide-Related Behavior ESSENCE Alerts, CY2025 Q3, 25-44 years

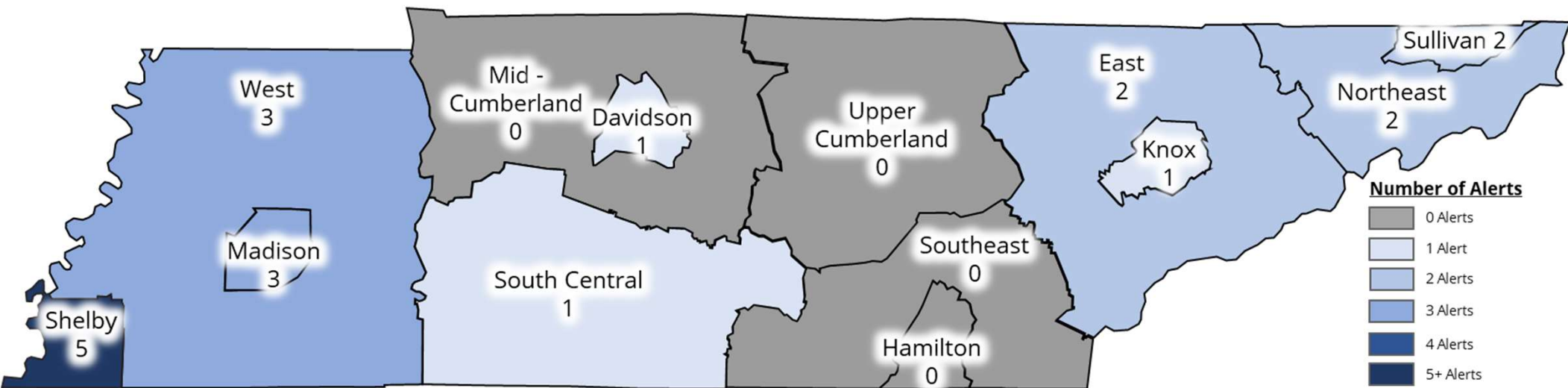
Region/Metro ESSENCE Alerts*, Adults (25-44 years)



Most alerts for the 25-44 age group were in the Davidson metro and the South Central region, with 5 alerts.

Map of Suicide-Related Behavior ESSENCE Alerts, CY2025 Q3, 45-64 years

Region/Metro ESSENCE Alerts*, Adults Middle Aged (45-64 years)

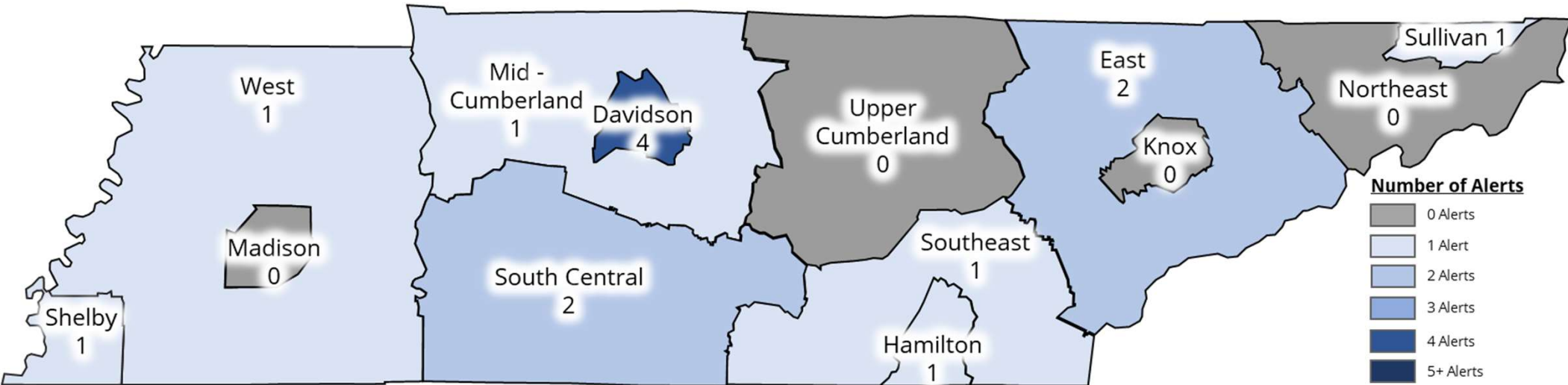


Most alerts for the 45-64 age group were in Shelby metro, with 5 alerts.

* ESSENCE alerts are generated when the number of ED visits for suicide-related behavior on one day in the metro or region was statistically significant above the expected value based on the previous 28 days.

Map of Suicide-Related Behavior ESSENCE Alerts, CY2025 Q3, 65+ years

Region/Metro ESSENCE Alerts*, Older Adults (65+ years)



Most alerts for the 65+ age group were in the Davidson metro, with 4 alerts.

* ESSENCE alerts are generated when the number of ED visits for suicide-related behavior on one day in the metro or region was statistically significant above the expected value based on the previous 28 days.

Suicide-Related ESSENCE Alerts: CY2025 Q3

Regions/Metros Seeing the Most Alerts

Age Group	Regions/Metros	Number of Alerts
Children (5-17)	East Tennessee, Madison	6
Young Adults (18-24)	Sullivan, Southeast	4
Adults (25-44)	South Central, Davidson	5
Adults Middle-Aged(45-64)	Shelby	5
Older Adults (65+)	Davidson	4

Statewide Change in Suicide Related ED Visits

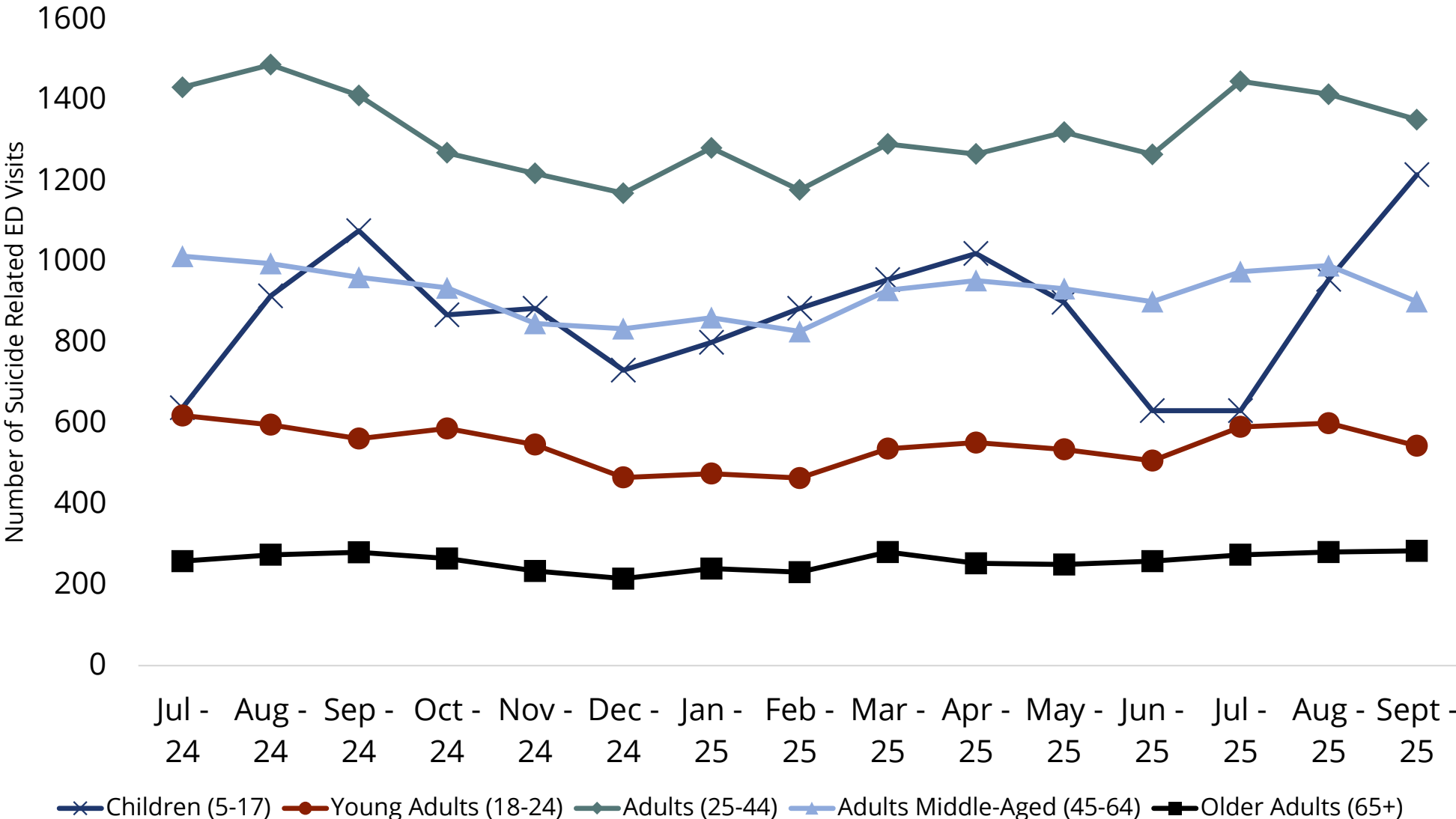
Age Group	Total ED Visits	Percent Change in a Quarter
Children (5-17)	2802	9.5%
Young Adults (18-24)	1735	8.3%
Adults (25-44)	4211	9.1%
Adults Middle-Aged (45-64)	2866	2.1%
Older Adults (65+)	839	9.2%

Blue = Decrease from the previous quarter

Red = Increase from the previous quarter

Grey = No Change

Number of Suicide-Related ED Visits, July 2024 - September 2025



Highlighted Risk Factors: CY2025 Q3

Risk Factors

- **Children (5-17): Family abuse, Hallucination, Interaction with the judicial system, Impulse control disorder, Bullying, Sexual assault**
- **Young Adults (18-24): Schizophrenia, Family conflict, Insomnia, Loss of friends**
- **Adults (25-44): Homelessness, substance misuse, Anxiety, Schizophrenia, Loss of child, Traumatic brain injury**
- **Adults Middle Aged (45-64): Seizure, Loss of loved one, Emotional abuse, Delusion disorders, Detoxing, Sexual assault**
- **Older Adults (65+): Depression, Pain, Mobility disability, Hallucinations**

Highlighted Self-Harm Methods: CY2025 Q3

Intentional Self-Harm and Suicidal Behavior

- **Children (5-17): Intentional overdose, Poisoning, Firearm, Hanging**
- **Young Adults (18-24): Jumping from a height, Firearm**
- **Adults (25-44): Suffocation, Intentional overdose**
- **Adults Middle Aged (45-64): Intentional overdose, Firearm**
- **Older Adults (65+): Intentional overdose, Firearm**

Contact Information

Tennessee Department of Health Suicide Prevention Program

Melissa Muñoz
Suicide Prevention Program Director
Melissa.Munoz@tn.gov

William Thomson
Epidemiologist
William.T.Thomson@tn.gov

This publication was supported by the grant number 6 NU50CE002589-05-01 funded by the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official view of the CDC or the Department of Health and Human Services.