

October 2024

This report looks at firearm-related deaths, hospitalizations, and emergency department visits among Vermont residents. This report also contains firearm injury and death data categorized by demographics and examines why a firearm was used.

Definitions

- A firearm injury is an injury treated at a hospital caused by the discharge of a firearm but does not result in death. Injuries include emergency department visits and inpatient hospitalizations unless otherwise noted.
- A firearm death is a death caused by the discharge of a firearm.

KEY POINTS

- Most deaths involving a firearm are suicides (82%).
- Firearm injuries are statistically higher in 2022 compared to 2016.
- Most firearm injuries are accidental, while most firearm deaths are suicides.
- Male suicides account for 73% of all firearm deaths. Male firearm suicide deaths are highest for adults 25-44 years old.
- Out-of-state residents account for 25% of firearm homicide deaths in Vermont.

Any data involving nonresidents are noted. Statistically significant differences are noted with an asterisk.

Firearm Injuries and Deaths Over Time

There were 65 firearm-related injuries in 2022 and 83 deaths in 2023. The rate of firearm injuries statistically increased over the last six years (15.1 in 2016 vs 25.6 in 2022). The rate of deaths has not significantly changed over the past ten years. See the appendix for death numbers.

The rate of firearm injuries has increased, while deaths have remained stable over the past 10 years.

Injuries per 100,000 hospital visits, deaths per 100,000 Vermont residents



Source: Vermont Vital Statistics, 2014-2023; Vermont Uniform Hospital Discharge Data Set (VUHDDS), 2016-2022

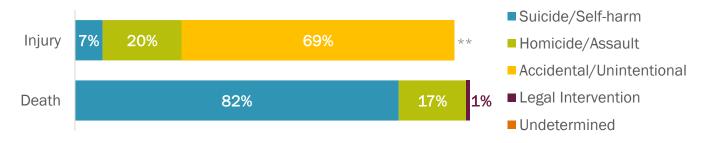
¹ As of October 2024, 2022 is the most recent data year available for the Vermont Uniform Hospital Discharge Data Set.

Intent of Firearm Use

Among hospital visits for firearm injuries, 69% are unintentional (accidents), 20% are the result of an assault, and 7% are intentional self-harm. The remaining categories (legal intervention and undetermined intent) result in fewer than six emergency visits and are suppressed.

Most firearm deaths are suicides (82%). Seventeen percent of firearm deaths are due to homicide and 1% are due to legal intervention.

The majority of firearm *injuries* are accidents, while the majority of *deaths* are suicides.



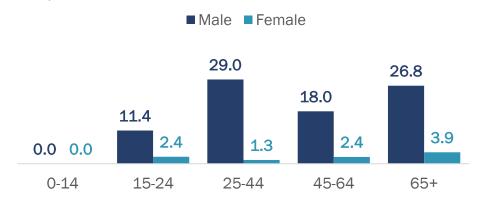
Source: Vermont Vital Statistics, 2023, legal intervention is included in homicide total; VUHDDS, 2021-2022. **Legal intervention and undetermined are suppressed due to fewer than six hospital visits

Suicide Deaths by Firearm

Male suicides make up 73% of firearm deaths in Vermont. The rate of firearm suicide deaths is highest among men 25-44 and 65 years or older.

Firearm suicide death rates are highest for 25-44 year old males.

Rate per 100,000 Vermonters



Men 25-44 are at least 7x more likely to die by firearm suicide than any woman in Vermont.

Source: Vermont Vital Statistics, 2023

Sex and Age

Men are statistically more likely to get hurt or die in a firearm incident.

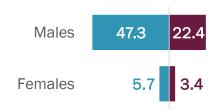
- Men are eight times more likely to have a firearm injury
- Men are six times more likely to die by a firearm.

Firearm injury rates in Vermont are highest among the 15-24 and 25-44 age groups. The combined 15-44 age group is also statistically higher than the rate among adults 45-64.

Firearm death rates are highest for adults 25-44 and 65 years or older. Rates among both those age groups are statistically higher than people 24 years or younger.

Firearm injury and death rates are significantly higher for men.*

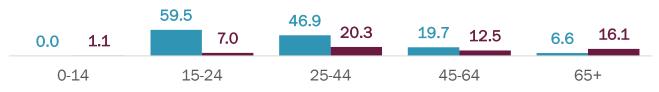
Injuries per 100,000 hospital visits, deaths per 100,000 Vermont residents



Source: Vermont Vital Statistics, 2023; VUHDDS, 2021-2022

Firearm injuries are highest for people aged 15 to 44. Firearm deaths are highest for adults 25 to 44 and 65 years and older.

Injuries per 100,000 hospital visits, deaths per 100,000 Vermont residents



Source: Vermont Vital Statistics, 2023; VUHDDS, 2021-2022

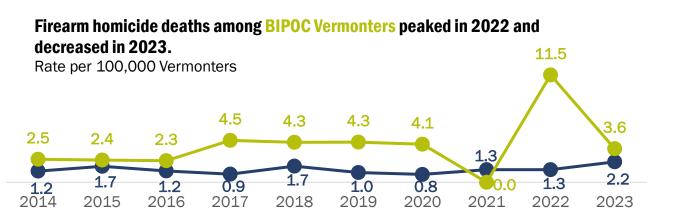
Race and Ethnicity

Between 2014 and 2023, white, non-Hispanic Vermonters are more than 1.5 times more likely to die by firearm than Vermonters identifying as Black, Indigenous, or a Person of Color (BIPOC) (12.4 vs 7.7 firearm deaths per 100,000). It is important to examine firearm deaths by intent (or why the gun was discharged) to further understand this difference in risk:

- White, non-Hispanic Vermonters are three times more likely to die by **firearm suicide** than BIPOC Vermonters (10.9 vs 3.6 firearm suicide deaths per 100,000).
- However, BIPOC Vermonters are three times more likely to die by **firearm homicide** than white, non-Hispanic Vermonters (4.1 vs 1.3 firearm homicide deaths per 100,000).

Firearm suicide deaths are highest among white, non-Hispanic Vermonters.





Source: Vermont Vital Statistics, 2014-2023

County of Residence

- Firearm injury rates are highest in Essex, Orleans, and Rutland Counties. However, all Vermont counties are statistically similar to the Vermont rate.
- Firearm death rates are highest in Essex, Orleans, and Caledonia Counties. Only the Orleans County rate is statistically higher than Vermont overall.

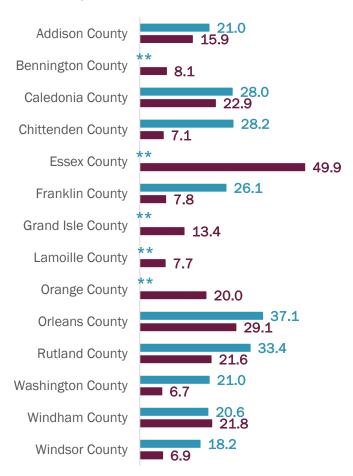
Of note, Essex, Orleans, and Caledonia are the three counties that make up the Northeast Kingdom, which is one of the most rural areas of Vermont. Additionally, while Essex County's firearm injury and death rates are nearly double any other county, due to the county's small population this difference is not statistically significant.

Firearm Deaths and State Residency

While the rate of firearm deaths has not statistically increased over time, the number of firearm deaths that happen in Vermont has been increasing each year from 2019 to 2022 (72 to 92). This is due to an increase in out-of-state resident homicides in Vermont, particularly in 2022.

County firearm injury and death rates.

Rate per 100,000 Vermonters



Source: Vermont Vital Statistics, 2023; VUHDDS, 2021-2022

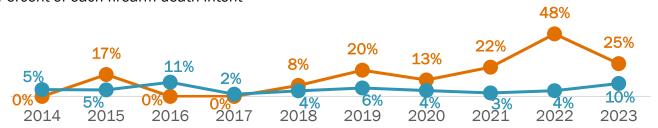
**Data suppressed, fewer than six hospital visits

 The rate of firearm deaths among out of state residents has more than doubled from 6% between 2014-2021 to 15% between 2022-2023.

- In 2022, nearly half of all firearm homicide deaths in Vermont were out-of-state residents. This percentage decreased in 2023 (48% to 25%) however, this difference is not statistically significant.
- In 2023, 10% of firearm suicide deaths were among out-of-state residents, double the average of the previous nine years, however, this difference is not statistically significant.

The percent of out-of-state resident firearm homicide deaths decreased in 2023. The percent of out-of-state resident firearm suicide deaths has increased in the past two years.

Percent of each firearm death intent



Source: Vermont Vital Statistics, 2014-2023

Key Takeaways

While the number of firearm injuries and deaths are relatively small in Vermont, they greatly impact our communities and families are preventable through education and policy. We know that <u>44% of Vermont households</u> have a firearm, which places them at <u>higher risk for firearm injury and death</u>. Additionally, firearm injuries and deaths are primarily related to unintentional injury, suicide, and domestic violence related homicide. Vermont's <u>Domestic Violence</u>

Most firearm deaths are suicides.

<u>Fatality Review Commission</u> also reports that 55% of domestic violence-related homicides between 1994-2022 involved a firearm.



Best practice is to have firearms unloaded and locked in a secure location that is separate from ammunition, which should also be locked away. If someone in your household is experiencing a crisis, firearms should be <u>stored in a temporary location</u> outside of the home. Learn more about <u>firearm injury prevention</u> and how to access free gun locks.

Resources

- If you or someone you know is thinking about suicide, call, text, or chat the <u>988 Suicide and</u> Crisis Lifeline.
- For more information about getting support, helping others who may be at risk for suicide, and getting more involved in suicide prevention in Vermont, go to FacingSuicideVT.com.
- The <u>Vermont Network</u> has a statewide hotline for domestic abuse that can be reached at 800-228-7395.
- For more information about firearm safety, free gun locks, and options for temporary storage, go to <u>GunSafeVT.org</u>.

Methodology

Firearm injuries are defined using hospital billing (ICD-10) codes from emergency department visits and hospitalizations. Only non-fatal firearm visits among Vermont residents treated at Vermont hospitals are included. Injury rates are calculated using 2021 and 2022 combined due to small numbers.

Firearm deaths are defined using ICD-10 codes. The death statistics in this brief are among Vermont residents unless otherwise specified.

New in this update, rates of death are the unadjusted rate per 100,000 residents in the population to which the rate refers, while rates of injury are the unadjusted rate per 100,000 hospital visits.

For more information: AHS.VDHSuicideData@vermont.gov

Appendix

Number of Firearm Deaths Among Vermont Residents, 2018-2023*						
County of Residence	2018	2019	2020	2021	2022	2023*
Addison	3	6	2	8	7	6
Bennington	3	4	7	5	6	3
Caledonia	8	2	4	5	6	7
Chittenden	14	10	11	12	18	12
Essex	1	1	1	1	3	3
Franklin	6	8	6	6	5	4
Grand Isle	1	1	0	2	1	1
Lamoille	1	1	2	4	5	2
Orange	7	8	6	7	6	6
Orleans	4	2	8	7	4	8
Rutland	9	8	11	3	7	13
Washington	11	6	6	9	4	4
Windham	6	2	3	4	2	10
Windsor	8	8	9	9	10	4
Total Firearm Deaths	82	67	76	82**	84	83
Firearm / Suicide	70	59	69	74	69	68
Firearm / Homicide	12	8	7	8	14	15
Firearm / Legal Intervention	2	3	0	1	1	1
Age Group						
0-14 years	0	0	2	2	2	1
15-24 years	8	9	10	8	5	6
25-44 years	31	20	23	26	31	32
45-64 years	27	18	23	26	19	21
65+ years	16	20	18	21	27	23
Sex						
Female	69	62	68	76	76	72
Male	13	5	8	7	8	11

^{*2023} data are preliminary and subject to change.

^{**1} firearm death was missing county of residence in 2021.