

# INJURY IN CONNECTICUT A FACT SHEET – 2023 UPDATE

#### INJURY AND VIOLENCE SURVEILLANCE UNIT • OCTOBER 2024

### What We Know About Injury In Connecticut:

Injuries are a major cause of death and disability across the entire lifespan of Connecticut residents. The type, frequency, and degree of risk for a specific injury differs by age, sex, and race. Social, environmental, and economic factors of an injured resident are typically not reported with the injury outcome, making analysis of socioeconomic inequities difficult to assess.

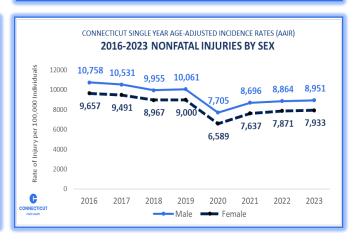
Intentional injuries are violence-related and include the categories of homicides, suicides, suicide attempts, assaults, domestic violence, sexual violence, and abuse of both adults and children. Intentional injuries accounted for 18.2% of injury-related deaths and 4.5% of injury-related hospital care.

Unintentional injuries are often referred to as accidental events that include the categories of drug overdose, motor vehicle crashes, falls, drownings, poisonings, burns, and sports-related injuries like concussions and broken bones. Intentional injuries can also be classified by some of these means and methods but are analyzed separately.

#### CONNECTICUT SINGLE YEAR AGE-ADJUSTED MORTALITY RATES (AAMR) 2016-2023 FATAL INJURIES BY SEX 140 122.7 105.2 120 98.9 93.3 100 80 per 45.9 60 40.0 36.4 35.8 35.2 40 Ę 2016 2017 2018 2019 2020 2021 2022 2023 Male - - Female

## **Key Points:**

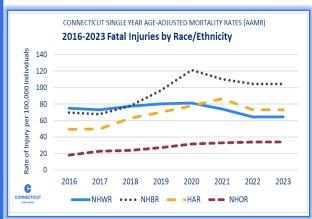
- In 2023, The age-adjusted incidence rate (AAIR) for Connecticut residents treated in the emergency department for their injuries was 8,050 per 100,000 (n=290,207), 405.5 per 100,000 (n=17,628) for residents admitted to the hospital for care, and 69.4/100,000 residents (n=2,732) who died from their injuries<sup>1</sup>.
- In 2023, Connecticut hospitals billed \$3.3 billion for treating victims of injury; \$2 billion for emergency department treat and release cases and \$1.3 billion for hospital admissions.
- Non-Hispanic Blacks carried a disproportionate burden of risk for fatal and non-fatal injury compared to Hispanics and Non-Hispanic Whites.
- Drug overdoses were the leading cause of fatal injury for Connecticut residents at an ageadjusted mortality rate (AAMR) of 34.2 per 100,000 (n=1,284).
- Falls were the leading cause of nonfatal injury for Connecticut residents at an AAIR of 2,156/100,000 (n=85,829).

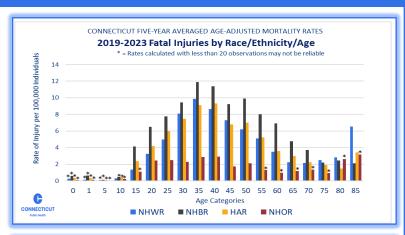


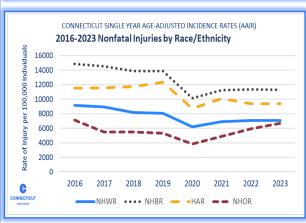


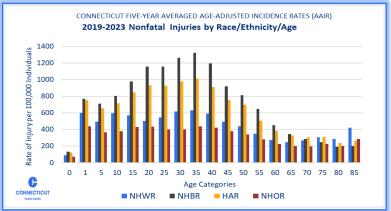
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### How to reduce your risk for injury:

- Become knowledgeable about the risks for various types of injury and practice safety.
  - · Think ahead.
  - Follow directions.
  - Be first-aid ready.
  - Slow down and pay attention.
  - Avoid dangerous situations.

- Be aware of your surroundings.
- Plan for the unexpected.
- · Let others know what you are doing.
- Report suspected/potential violence.
- Know where to get help.

For specific information on injury prevention, see topic-related injury fact sheets.

#### References

1 MacKay S, Ebert P, Harbidge C, Hogan DB. Fear of Falling in Older Adults: A Scoping Review of Recent Literature. Can Geriatr J. 2021 Dec 1;24(4):379-394. doi: 10.5770/cgj.24.521. PMID: 34912493; PMCID: PMC8629501.