



**Suicide Prevention
Centers for Disease Control and Prevention (CDC)
National Center for Injury Prevention and Control
FY 2022 Labor HHS Appropriations Bill**

	FY 2020	FY 2021	FY 22 President's request	FY 22 TFAH
Suicide Prevention	\$10,000,000	\$12,000,000	TBD	\$36,000,000

Background: Suicide is a public health crisis. It is the tenth leading cause of death for all ages and the second leading cause of death among individuals between the ages of 10 and 34 in the U.S. In 2019 suicide took 47,500 lives, and rates increased by 33 percent between 1999 and 2019.¹ The COVID-19 pandemic could heighten the risk for suicide. An August 2020 report by the Centers for Disease Control and Prevention (CDC) found 40 percent of U.S. adults reported struggling with mental health or substance use during the height of the pandemic, with 11 percent seriously considering suicide in the 30 days before completing the survey.²

However, suicide can be prevented. The complex nature of this issue requires a comprehensive program that focuses on vulnerable populations, data collection to inform efforts, and research on risk factors. CDC was first funded to engage in suicide research and prevention in FY2020. This work helps identify and disseminate effective strategies for preventing suicide, from strengthening access and delivery of suicide care to promoting policies and programs that reduce the risk.

Impact: The CDC Suicide Prevention program funds states, communities, and tribes to implement comprehensive suicide prevention plans. It currently funds 9 sites to implement and evaluate a comprehensive public health approach to suicide prevention, with attention to vulnerable populations. The programs consist of multisector partnerships, use of data to identify vulnerable populations and risk and protective factors, leveraging existing suicide programs and filling gaps through complementary strategies and effective communications. The programs seek to reduce suicide and suicide attempts by 10 percent and build toward a national goal of reducing suicide by 20 percent by 2025. Increased funding for CDC's innovative work would:

- **Address large demand for suicide prevention funding.** Outside of the 9 sites that are currently funded there are 74 approved but unfunded applicants that could be funded with additional appropriations.

¹ CDC Injury Center, <https://www.cdc.gov/suicide/>

² MMWR Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic. <https://www.cdc.gov/mmwr/volumes/69/wr/mm6932a1.htm>

- **Increase data collection to inform prevention.** CDC currently supports data collection of nonfatal suicide related outcomes through syndromic surveillance in 10 states. This data rapidly identifies spikes in suicide, suicide attempts, and self-harm to inform local responses.
- **Expand research to fill gaps.** There is a great need to expand our understanding of how certain factors increase the risk or protect against suicidal behaviors in different populations. Furthering CDC’s investments in research of these areas, with a focus on vulnerable populations, will enable more effective targeted interventions.



The four priorities for the Injury Center’s Suicide Prevention Strategic Plan

Recommendation: TFAH urges the Committee to provide \$36 million in FY22 to address the increased risk of suicide exacerbated by the COVID-19 pandemic. This funding would expand the innovative prevention activities led by the Injury Center to an estimated 25 sites. Funding would support state health departments as they develop and implement comprehensive suicide prevention plans. The increased funding would also address the large demand for this work, increase data collection to inform local responses, and expand research.