



Together, we #KeepGoing

2020 ANNUAL REPORT



American
Foundation
for Suicide
Prevention





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for Suicide
Prevention

2020 was a year full of challenges. As we all try to protect our mental health and cope with uncertainty, we've reminded people that it's more important than ever that we be there for each other, take steps to prevent suicide, and **#KeepGoing**. There are simple things we can all do to safeguard our mental health, and no one has to do it alone.

The American Foundation for Suicide Prevention has redoubled our efforts to achieve our mission: to save lives and bring hope to those affected by suicide.

Together, we #KeepGoing.

Message from the Chief Executive Officer and Chair, Board of Directors

This has been a challenging year for our country, suicide prevention and our organization. The global pandemic has impacted the emotional and economic well-being of many individuals and families, and left many of us to manage a variety of emotions, including feelings of uncertainty.

Since the onset of the pandemic, the need for mental health services has increased, and there has been a rise in requests for help to the National Suicide Prevention Lifeline and the Crisis Text Line. Surveys have reported higher than usual symptoms of anxiety and depression. Most alarming is that 1 in 10 respondents to a CDC survey reported having recent thoughts of suicide, with even higher findings for young adults.

However, there is reason for hope. Increases in suicide are not a foregone conclusion if we act now to lessen the risk and support the mental health of our friends, families, and communities. This is exactly what AFSP has been doing throughout the pandemic, and will continue to do long after it's over.

Our **#KeepGoing** campaign emphasizes the need to be there for each other and take steps to safeguard our mental health and prevent suicide. Through our national and chapter networks, the use of traditional and social media, and our many partners, we reached tens of millions of people in 2020, encouraging self-care, stressing the importance of seeking mental health treatment when needed, and reminding people that physical distancing does not mean social isolation.

The **#KeepGoing** theme also sums up who we are as an organization, as we

continue to advance suicide prevention research, programs and advocacy, in spite of the difficulty of raising funds due to the pandemic.

We had many encouraging moments this year. Here are just a few highlights:

- AFSP took steps to address mental health and suicide prevention among underserved populations, including launching a Town Hall series to bring attention to health disparities in communities of color; adopting a new research priority aimed at increasing suicide research in underrepresented communities; and forming a partnership with the National Latino Behavioral Health Association.
- We successfully advocated for passage of the National Suicide Hotline Designation Act, which designated 9-8-8 as the three-digit, easy-to-remember phone number for people in emotional distress. This new law also ensures states are able to increase support to local crisis centers to meet increased demand.
- We funded 43 new suicide prevention research studies, bringing our total current investment in research to \$20 million, with 100 current studies.
- We created a new program, Finding Hope, to provide guidance to families and others supporting someone who struggles, and moved quickly in the early days of the pandemic to ensure that our Talk Saves Lives™ education program continued to reach tens of thousands virtually. A new digital version of the program is being used in workplaces, through AFSP's partnership with Aetna/ CVS Health.

- As a part of National Suicide Prevention Week, we partnered with the National Action Alliance for Suicide Prevention to conduct a Harris Public Opinion Poll and found that 93% believe suicide can be prevented; 78% view mental health and physical health as equally important, and 95% of respondents said they would do something if someone close to them was thinking of suicide.
- We launched new Seize the Awkward Public Service Ads in partnership with the Ad Council and Jed Foundation to empower teens and young adults to help a friend who is struggling. The campaign has had 40 million views to date.
- Most promising is our bold effort to reduce the suicide rate in the US 20% by 2025 through Project 2025 and its work in healthcare systems, emergency departments, corrections and to reduce firearm suicide.

Our progress during this unprecedented time is a direct result of millions of people getting involved in our cause as champions, advocates, donors, and friends. And it is having an impact.

There is more reason for hope: the U.S suicide rate fell slightly in 2019, the first annual decline in two decades. It's a small decrease, the data is preliminary, and is for a period prior to the pandemic. Nonetheless, it is encouraging and holds the promise of saving many more lives.

We can't do our important work alone. We invite you to join us as we lead the fight to prevent suicide. Together, we **#KeepGoing**.



Robert Gebbia
Robert Gebbia
Chief Executive Officer

James Compton
James Compton
Chair, Board of Directors

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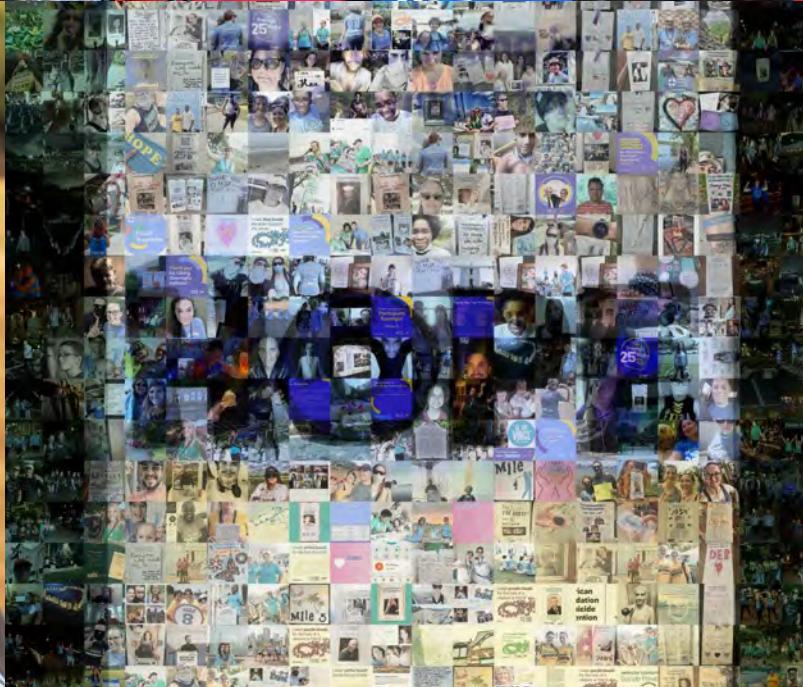
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Awareness

The more people know and understand about suicide prevention and mental health, the more they can do to help save lives. Together, we are raising awareness through our education programs and the efforts of our local chapters across the country.



Walking #TogetherToFightSuicide

Many people's introduction to AFSP comes through the Out of the Darkness Walks, taking place in cities nationwide. In our Community, Campus and Overnight Walks, those affected by suicide – and those who support them – raise awareness and much-needed funds, strongly sending the message that suicide is preventable, and that no one is alone.

This year, following the outbreak of COVID-19, our amazing volunteers and staff were determined to stay connected to one another. Our participants came #TogetherToFightSuicide as we transformed the remaining Walks into a variety of physically distanced creative activities known as Out of the Darkness Experiences.

These events, some virtual and some in person, brought our remarkable AFSP Family together in a whole new way, while inviting more people to join the cause.

Communities Coming Together



The Community Walks, held in hundreds of cities across the country, are the core of the Out of the Darkness movement, which began in 2004. Through the Community Walks, we give people across the United States the courage to open up about their own struggle or loss, and a platform to create a culture that's smarter about mental health. Friends, family members, neighbors and coworkers walk side-by-side, supporting each other and in memory of those we've lost.

We'd like to give thanks to our national sponsor, The Allergan Foundation, for its support of the Community Walks this year.

339K
participants

37K
teams

\$27M
raised

Hope Walks Here: Out of the Darkness Campus Events



Each spring, teens, young adults, faculty and family members participate in our college and university Campus Walks, spreading the message that mental health is just as important as physical health, and that help and support are always available.

This year's Campus Walks, which typically take place March through June, were transformed into virtual events as the pandemic reached the U.S. Yet despite that - with schools canceling events and kids moving home - creative, energetic students were even more determined to #KeepGoing, turning 140 out of 180 planned Campus Walks into virtual events. The results were remarkable, as students, families, teachers, and administrators showed together that **#HopeWalksHere**.

15K+
participants

\$1.1M+
raised

“Walking to Heal My Family”



“I discovered AFSP during my freshman year of college. My father had died by suicide in 2002, and we had also lost my uncle in 2009. I come from a large Hispanic family, and what had once been very close-knit, now had a sense of separation. Culturally, there was a stigma in which mental illness could be seen as a weakness or a flaw. That trauma can be passed down through generations.

It wasn’t until I got to college that I finally gave myself the opportunity to heal, and learn more. I helped bring our first Out of the Darkness Campus Walk to my college in 2011. It was a beautiful event, connecting with students who had shared experience with mental health. Each year, the event grew. In my final year before I graduated, I walked around my campus for two and a half miles with a hula hoop and 25 balloons. I was so proud and excited to see so many people come together for suicide prevention when it hadn’t been embraced just a few years prior. It felt so meaningful

to bring young adults together, not only to support them, but to encourage and empower them to continue to speak out and support the cause, and even become professionals or stakeholders who can make a difference.

I am now studying to get my master’s degree in social work, with a concentration in mental health and addiction. I have continued to be involved with AFSP and our Indiana chapter over the years. It all started with the Campus Walks, and now includes advocacy, as well as supporting those who have lost someone.

I have a passion for this cause because it is from my own personal experience. I am so proud to be the one in my family who was able to break the cycle of not talking about it, and bring us back together again.”

Watch Carmen share
her story on video at
annual2020.afsp.org/carmen

Our First Virtual Overnight Experience



3.3K+
participants in
22 countries and
five continents

\$1.7M raised

The Overnight Walk - set to be our 25th in-person event, with people walking over 16 miles from dusk till dawn in New York City - became a milestone of another sort as participants from around the world sprang into action and took part in our first Virtual Overnight Experience.

The event, which made it easy for people to participate wherever they are, featured social media activations and an activity tracking wellness challenge held throughout the month of June. Participants took daily actions, such as going for a walk around the neighborhood while wearing their Overnight t-shirts (and masks) to shed light on mental health in their own communities.

Using social media to share their #OvernightAction and to connect with each other, participants collectively logged 9,506 activities over 5,400 hours, including unique activities such as building an obstacle course, horseback riding, and making face masks. They walked 24,263 miles, took 50 million steps, and had 85 #RealConvos about mental health. The Overnight Experience culminated in a special online program connecting thousands of people over a weekend-long virtual event.

Not only did our dedicated Overnight community #KeepGoing, this new way of raising awareness allowed people to get involved in a welcoming and exciting way, and led to 1,500 more people registering after it was announced The Overnight would go virtual!

We wish to thank our Overnight sponsors Sunovion, Alkermes, Qumu, and Corporate Data & Voice Solutions for making the event possible.

We are so proud of our Out of the Darkness community for showing the strength, resilience and determination to make this year a success.

"The virtual experience of The Overnight this year was incredible. The video showing the worldwide participation in the event energized me, tugged at my heartstrings, and made me feel so proud and hopeful. Tears can bring a clearer focus, and during this time of worldwide pandemic, we all shared tears of sorrow for those affected by our cause, as well as tears of joy for what we can accomplish."

Read reactions to this year's Virtual Overnight Experience at annual2020.afsp.org/walks

Team Forever Young

Nancy Cook first became involved in The Overnight in 2010, after losing a dear friend to suicide. In his memory, she put a team together comprised of others affected by suicide in her community, who participated in the Boston Overnight under the name Team Forever Young. Since then, the team has grown, and Nancy has captained and led Team Forever Young through 11 Overnight Walks, seven Community Walks, and now, one Virtual Overnight Experience.

Nancy has become a leader in suicide prevention in her local Massachusetts community, helping to support first responders who are struggling. This year, determined not to let the pandemic stand in her way, she worked with her local police department to have a 10-mile route arranged so Team Forever Young could participate in a safe, physically distant mini-Overnight Walk.

To date, they have raised over half a million dollars - \$711,411.43 - for the Overnight Walk and AFSP. Together, they participate in memory of 30 family, friends, and loved ones, and stand with others as a reminder that they are not alone in their loss, their pain, or their struggle.





Changing Attitudes, Culture and Behavior Through Education

We all have a role to play in our communities – as family members, friends, coworkers and neighbors – when it comes to keeping the people we care about safe. Suicide can be prevented. Our evidence-informed education programs, delivered by our chapters throughout the country, use the latest science to pave the way in making sure more and more people understand why people take their lives, as well as how to spot the warning signs, and help those who are struggling.

Our chapters more than met the challenge to #KeepGoing in making sure our education programs continued to be available throughout the pandemic. Despite the global outbreak of COVID-19, we quickly adapted our education programs from in-person to virtual presentations, ensuring that even in uncertain times, we are still creating a culture that is smart about mental health.

In addition, a new presentation, *Enhancing Mental Health During COVID-19* was added to our menu of programs, with a focus on protecting our mental health during this uncertain time, and including practical self-care tips and helpful resources.

500
education programs
presented within
the first four months
of the pandemic,
reaching nearly
12k participants.

2K+
education
programs

115K
attendees
nationwide

130K+
people reached with
educational resources
via community outreach

Talk Saves Lives™

36K
participants

1K
presentations
this year

Since its launch in 2015, our signature education program Talk Saves Lives™: An Introduction to Suicide Prevention has reached over 150,000 people across the country. This year alone, over 1,000 Talk Saves Lives presentations reached over 36,000 participants.

Talk Saves Lives gives people potentially life-saving information by covering the general scope of suicide and the latest research on prevention. After attending a Talk Saves Lives presentation, participants gain an understanding of the complexities of why people take their lives, and what we all – as individuals, communities, and as a culture – can do to save lives.

Available both in-person and virtually, the program reaches a wide range of audiences, including community audiences, senior centers, and a growing number of workplace settings, including hospitals and health care offices, law enforcement and first responder stations, and construction sites – in short, anyone who wants to learn more about suicide prevention. In addition to the standard Talk Saves Lives presentation*, specialized modules are also available for older adults*, LGBTQ audiences, and firearms retailers and range owners.

To help increase our capacity to deliver programs and expand our reach within communities, this past year we developed Talk Saves Lives: Training for Presenters, an internal program for chapters to train new presenters to deliver the Talk Saves Lives program. By preparing more people to train others in Talk Saves Lives, we will be able to reach more people than ever before, making communities everywhere safer.



* General and older adult modules are available in Spanish.

Finding Hope: Guidance for Supporting Those at Risk

The new program Finding Hope: Guidance for Supporting Those at Risk gives people who are caring for someone at risk the strategies and understanding they need to keep their loved one safe. The program provides participants with a general understanding of suicide, and gives them insight into what may be happening for someone during a time of crisis. It explores the recovery process after a suicide attempt or mental health crisis, focusing on specific ways participants can recognize warning signs and help support someone's treatment and plan for safety. Participants are also highly encouraged to practice self-care while in the process of supporting their loved one.

The complexity and sensitive nature of this much-needed program demands careful consideration for the needs of this specific audience. Initially piloted by seven chapters, Finding Hope has now begun the process of training presenters, to ensure those delivering the program be fully equipped to the specific needs of both participants and the people at risk. After a rigorous approval process, 24 chapters were selected in round one to host Finding Hope, with over 50 presenters being trained. The program is expected to launch nationwide, post-pandemic, in 2021 as in-person trainings.



More Than Sad

250
More Than Sad
programs this year
with nearly 30,000
participants

Since 2010, the More Than Sad program has taught over a million students and educators how to be smarter about mental health. With separate modules directed toward high school students, parents, and teachers, the program teaches:

- teens to recognize the signs of depression in themselves and others; challenges existing stigma surrounding depression; and demystifies the treatment process
- parents to recognize signs of depression and other mental health problems, initiate a conversation about mental health with their child, and get help
- educators to recognize signs of mental health distress in students, and refer them for help

Findings have shown that teachers who've received our More Than Sad training had increased engagement with struggling students, and increased referrals of students to needed help, as compared to those without the training.

MOORE
THAN SAD

Model School Policy

According to the most recent data, suicide is the second leading cause of death among young people ages 10-19.

It's vital that our schools are prepared to respond in the event that a student needs help, or in the event that a suicide does occur. Many states now have laws that require K-12 school districts to have a suicide prevention policy in place. The Model School Policy on Suicide Prevention, produced in collaboration with the American School Counselor Association, the National Association of School Psychologists, and The Trevor Project, is a comprehensive guidebook for school administrators and policy makers containing best practices in suicide prevention, intervention and postvention policies for K-12 schools.

It is critically important that school districts have policies and procedures in place to prevent, assess the risk of, intervene, and respond to youth suicidal behavior. This clear handbook, updated last year, outlines best practices for school districts to follow to protect the health and safety of all students.

Download the Model School Policy at
afsp.org/modelschoolpolicy

Signs Matter: Online Suicide Prevention Training for K-12 Educators

Educators can play a critical role in the fight against suicide. They don't have to be mental health experts, but it is important that they understand and recognize the signs that a student is at risk for suicide. Signs Matter: Early Detection presents scientifically based information on a variety of topics related to youth suicide, alongside best practice recommendations drawn from experts in the mental health and education fields.

This online program, which fulfills many states' requirements for educators to have two hours of instruction on suicide prevention and bullying, sheds light on key questions of risk and protective factors for youth suicide, as well as the most common behavioral presentations expressed by at-risk youth. Participants will also receive recommendations for school personnel roles, support, referrals, and interventions.

Volunteer Spotlight
Heidi Day

“I Had Lost Five Students to Suicide”



A Teacher’s Perspective

“I first became connected to AFSP because I lost my son. It was June 18th of 2018, and I pretty much rolled into a ball. My birthday is in July, and I hadn’t left the house much. One of my girlfriends came and got me and said, “I’m taking you out to get a pedicure.” So she dragged me out of the house, and we were sitting there and I said, “I feel the need to do something with all this sadness.” She said, “Well, maybe we could do that Out of the Darkness Walk.” And I was like, “I have no idea what you’re talking about.” She knew about it because a few years earlier, we had lost a student at the high school I was teaching at. And he happened to be a really close friend of her son. I ended up doing a fundraiser for my birthday online, and there was such an outpouring of support and love. I was really surprised and grateful.

We’ve lost so many children in our rural community here in Maine. As a teacher, I had lost five students to suicide. Schools

are often uncertain how to proceed with this type of loss. They’re afraid that giving too much attention to it would bring on contagion. So I was really excited to bring in AFSP resources like After a Suicide: A Toolkit for Schools, and the Model School District Policy on Suicide Prevention, which outlines how educators and school administrators can implement suicide prevention policies.

There are still taboos that exist for some people in our community where you don’t really talk about mental health or suicide. AFSP’s community-based Talk Saves Lives program (for adults 18+) is another way of engaging people. It provides a great overview of suicide: the statistics, and the things we can do together as a community to prevent it. Because obviously, prevention is the key: so fewer and fewer people will lose someone in the first place.”

Watch Heidi share her story on video at annual2020.afsp.org/heidi

“Bringing Mental Health to My College Campus”



A Student’s Perspective

“I first got involved with AFSP in college through volunteering for the San Francisco Community Walk. My partner lost his best friend to suicide and I wanted to find ways to support him. I hadn’t known anyone who had been affected by suicide, so this was completely new territory to me. After attending the Walk, I felt such a huge sense of community. Through this event, I was able to get an introduction to suicide prevention. I realized how important the human connection is to those affected.

After this event, I wanted to bring mental health education to my college campus. I worked with my local AFSP chapter to set up a Talk Saves Lives event. My AFSP chapter walked me through everything: setting up the event, arranging for a speaker, and providing me with materials to offer college students. I was able to partner with other on-campus organizations and we were able to get 100 people to attend! This event

brought to light how talking to someone you care about can affect the course of their life. A lot of students stayed afterward to ask questions, and even more stayed just to listen. It felt like this wouldn’t have happened even a year or two earlier.

That’s how my involvement with AFSP started. I didn’t have a direct connection to suicide. One of the people I cared about was affected by a loss, and that spurred me to become part of this organization on a bigger scale. After I graduated, I moved back to my hometown. I connected to my local AFSP chapter because I wanted to stay involved. Now, I’m on the AFSP Board for the Greater San Francisco Bay Area. I’m proud to know the work we do makes a huge difference in my community.”

Watch Sarah share
her story on video at
annual2020.afsp.org/sarah

Everyone can have a #RealConvo. You got this.

JOIN THE #REALCONVO CHALLENGE

We can find **support & hope** by having honest conversations with one another.

Don't Underestimate the Value of a #RealConvo

#REALCONVO CHALLENGE:

- 1 Tag a friend to chat with
- 2 Talk about the tough stuff
- 3 Share your experience to encourage others

WE ALL DESERVE TO FEEL HEARD

SHARE YOUR VIRTUAL #REALCONVO EXPERIENCE

- 1 Screenshot your video call
- 2 Post to social media using #RealConvo
- 3 Nominate others to have a #RealConvo

Even the Strongest People Need Support Sometimes

WE ALL need support SOMETIMES

Reaching Out for Support Takes Strength

SHARE HOW YOU START A #REALCONVO

HOW TO SHARE YOUR #REALCONVO:

- 1 Make sure you feel ready to share
- 2 Be open, authentic, and hopeful
- 3 Express that help is always available

(n.) An **open, honest conversation** about one's mental health and the support they need.

Creating A Culture That's Smart About Mental Health

In our campaigns throughout the year, and in our messaging on social media and beyond, we create a culture that's smart about mental health, and bring suicide out of the darkness.

Having a #RealConvo for Mental Health Awareness Month

6.2K

followers gained across all social media channels over the course of the month

15K
web page views throughout the month

3.8K
Real Convo t-shirts sold

102
new digital marketing graphics

For Mental Health Awareness Month in May, we inspired people to have open, honest conversations about mental health by building on our #RealConvo campaign. We partnered with top influencers and celebrities including Rebecca Black, ALOK, and Andy Lassner, and created short animated videos to introduce our newly designed **#RealConvo Guides** (available in English and Spanish), which offer practical advice on how to talk to someone you care about.

Social media was a great way to engage our audience throughout the course of the month. We partnered with Instagram to use a new product, the Challenge Sticker, through which users could nominate their friends on Instagram Stories to participate in the challenge to have a #RealConvo! Our illustrator friend Holly Chisholm created a custom Augmented Reality (AR) #RealConvo filter for Instagram Stories, which by the end of the month had been used nearly 5K times. We also gave our AFSP audience a new way to engage their followers across social media with custom GIPHY stickers. Lady Gaga used one of the custom stickers on her Instagram, bringing attention to mental health awareness for her 42.8M followers!

Our partners for the month included Netflix, Universal Music Group, Stamp Out Stigma, Now This, Bloomberg News, Dow Jones, and many more. Our May web page included resources, graphics, stories, and a calendar of events throughout the month, including Twitter Chats and media appearances by AFSP experts Dr. Christine Moutier, Dr. Doreen Marshall and Dr. Jill Harkavy-Friedman.

National Suicide Prevention Awareness Week

20K
new social media followers in September



A national Harris Poll co-sponsored by AFSP showed that more than half of all Americans have become more open to talking about mental health since the start of the pandemic, and 81% said that as a result of the pandemic, it is more important than ever to make suicide prevention a national priority. For National Suicide Prevention Awareness Week in September, our #KeepGoing campaign let people know they don't have to be a mental health professional to make a difference in the fight against suicide.

From learning the warning signs for suicide and what to do if you are worried someone is struggling, to advocating for smart suicide prevention legislation, to having a #RealConvo about your own or others' mental health, to bringing education programs to your community, we can all learn new ways to help each other save lives. Together, we #KeepGoing.

Collaborating with public figures including Dominique Jackson, Theo Rossi, Rebecca Black and others throughout the month, we launched a new #KeepGoing Instagram Guide filled with inspiring content from social influencers. Our packed calendar of events throughout the month included a panel discussion in collaboration with Aetna/CVS Health on the growing rates of suicide across America; an appearance from Dr. Christine Moutier on "I'm Listening," a live two-hour special bringing together artists and athletes including Katy Perry and Jon Bon Jovi to discuss mental health, which was broadcast across more than 230 Entercom stations and RADIO.COM livestream; and a special roundtable also featuring Dr. Moutier with Universal Music Group for a discussion of mental health in the Hispanic and Latinx communities.

Other highlights for the month included:

- Our #KeepGoing-theme Twitter chat with the National Alliance on Mental Illness, the JED Foundation, the Human Rights Campaign, Movember, and the American Association of Suicidology = 26.7M impressions
- An Instagram Live presentation in collaboration with Self Care is for Everyone, featuring Dr. Doreen Marshall = 19.2K views
- During National Suicide Prevention Month, we reached 100K followers on our national Twitter account!

Seize the Awkward

40M

total video views

29.4K
Instagram followers

1.7K
video likes

64K
video shares

Our Seize the Awkward campaign, in partnership with The Jed Foundation (JED) and the Ad Council, launched brand new resources to help young people manage their mental health and be there for their peers during the coronavirus pandemic. The campaign released a music video, "Whatever Gets You Talking," featuring rapper Akinyemi, pop icon Meghan Trainor and music and digital stars Addison Rae, Avery Cyrus, and others.

Seize the Awkward, which won a Shorty Award for a video featuring pop star Billie Eilish, also premiered a new video this year in which musician Noah Cyrus spoke openly about a difficult period in her life, and how she got through it.



Offering Strength, Understanding and Hope Through the Pandemic

80K+
page views since
May 2020

When the COVID-19 pandemic struck the U.S. in March, it quickly became clear what role we needed to play. AFSP soon became a source of information, understanding and support as we all, as a nation, collectively weathered the strains on our mental health caused by the pandemic.

Just as suicide is never a foregone conclusion, we knew there was reason for hope. We have never been through a situation exactly like the one the world is experiencing now. The effects of the virus on our daily lives - from quarantine and the need for physical distancing, to concerns about job security, school, and other aspects of our lives - put a toll on our mental health, and may well have exacerbated the symptoms experienced by those already living with mental health conditions. But by spreading education and awareness, and encouraging people to be proactive about their own mental health and that of the people around them, we knew we could play an important role in keeping people safe.

Our Mental Health and COVID-19 webpage toolkit offered guidance, messages of hope and resilience, and virtual programs to help communities and workplace employees stay connected.

We created an easily shareable social media guide featuring content created by AFSP experts to help spread positive messages of hope, compassion, mental health care and suicide prevention.

Explore our COVID-19 resources at afsp.org/covid19

Self-Care Strategies During Uncertain Times

Activities for your Mind, Body, Soul and Surroundings to help you take a step back, breathe, and focus on your well-being.

SWIPE TO EXPLORE 



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Body

- Walk, exercise, go outside if you can
- Set a sleep routine, giving yourself time to rest and restore
- Practice meditation and yoga
- Take deep, slow breaths
- Take a bath or shower
- Eat something healthy
- Drink a cup of tea
- Limit your caffeine and alcohol intake
- Put on your favorite song and dance

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Soul

- Ask for help
- Donate to a cause
- Tell someone you love them
- Reach out to someone who may need you
- Follow "feel good" social media
- Set boundaries for yourself
- Write a poem or short story
- Share something special
- Connect with whatever inspires you

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American Foundation for Suicide Prevention

Our Experts Became Much-Needed Sources of Guidance as the Pandemic Continued



900K+
times blog shared
on Facebook alone

25K
reached by livestream
with 7K views

364M
reached on Instagram

Dr. Christine Moutier, AFSP's Chief Medical Officer, suggested mental health tips for those coping with COVID-19 during several CNN Town Hall specials with Anderson Cooper and Dr. Sanjay Gupta.

Dr. Christine Moutier also hosted a livestream with NowThis to discuss how to protect your mental health during COVID-19, which was viewed 72K times and reached over 300K people.

Also in the early days of the pandemic, Dr. Moutier and Dr. Jill Harkavy-Friedman, our Vice President of Research, co-authored an important paper featured in *The Lancet* regarding suicide risk and prevention during the time of COVID-19.

The blog article *Protecting Your Mental Health During the Coronavirus Outbreak*, written by Dr. Doreen Marshall, our Vice President of Mission Engagement, was our top performing Instagram post in March. Dr. Marshall also went live on Instagram with NowThis to answer questions regarding how to cope with uncertainty and protecting your mental health during the pandemic.

Instagram included AFSP as one of their expert organizations to introduce its new Guides product on their owned channels, and shared AFSP's #RealConvo and Mental Health and COVID-19 Guides on the main Instagram account as part of the launch.

AFSP was highlighted in Facebook's public toolkit, shared with account managers as best-in-class examples for COVID-19 activation for other advertisers.

We also partnered with other mental health organizations on Kenneth Cole's 'How Are you Really' campaign, which leverages the voices of celebrities, influencers and advocates, and popular culture to discuss mental health in an open, authentic and provocative way.

Making Diversity and Inclusion a Priority

The American Foundation for Suicide Prevention condemns racism and prejudice of all types, and we are actively working to eliminate injustice in our field of mental health and suicide prevention. As an organization, we acknowledge that institutional racism, systemic poverty, blatant discrimination, and unconscious bias impact the daily lives of Black families and people of color, and that this directly impacts their mental health.

We are committed to addressing the disparity in mental healthcare access, advocate for ending these disparities, and stimulate new suicide research to support underrepresented communities.



The AFSP family has reflected on what we can do to affect positive change in diversity and inclusion, and we have taken the following initial steps:

Improving Cultural Competency and Organizational Diversity and Inclusion Practices. We are implementing a cultural competency training curriculum for our staff, and will be extending that training to chapter volunteer leaders. We have also expanded on our recruitment policies to increase diversity on our National and chapter boards to better reflect the communities we serve.

Building Partnerships and Program Implementation. We have launched a renewed effort to collaborate with external experts and organizations from underrepresented groups to help us address implementation of the goals and strategies on diversity and inclusion as outlined in our three-year strategic plan. A Diversity Programs Taskforce was organized in 2019, and is actively working to ensure that our educational programs for the Black community and other underrepresented groups are both culturally informed and evidence-based.

Stimulating and Funding Research Related to Underrepresented Racial and Ethnic Groups.

With the support of AFSP's Scientific Council, for the 2020-2022 AFSP Research Grants Cycle, we are including a new Priority Focus Area for suicide research related to underrepresented communities, health and mental health disparities and inequities, as well as researchers from underrepresented groups who are proposing research on understanding and preventing suicide.

Elevating the Voices in Our Field with Expertise in Diverse Communities. We are convening leading experts in mental health and suicide prevention from diverse communities to help elevate voices, improve public understanding of their range of experiences, and support their unique needs.

We have much more work ahead of us and are committed to a long-term effort to change our culture and reverse the impact of systemic racism within the field of mental health.

Volunteer Spotlight
Tiffany Hall

“We Can Talk About It”



“We have a long history of not talking about mental health within the African American community. We rely a lot on our faith. You know, pray about it, go to church, talk with the pastor, and that’s great. But I truly believe you can have Jesus, and therapy, too. They go hand in hand. After you pray, you need to go do something about your mental health. We need to look at mental health the same as we do any physical illness.

What first brought me to AFSP was the support it provides within the community. AFSP has done a really good job of bringing its education trainings to churches, and community centers, and allowing a space where people can come in and learn about mental health and suicide prevention, as well as being space for those who have lost a loved one to be able to talk about it. Within my state of North Carolina, suicide is the second leading cause of death for those from ages 15- to 35-years old.

African Americans are not immune to that, but we don’t acknowledge it, either.

I’ve spoken at several churches within my community about mental health. People often stop me on my way out and say, “I’m concerned about my son. Do you have some information?” or, “I lost a family member to suicide.” They often still do that off to the side.

But I’m hopeful that by getting out and talking more, we can encourage people to seek help, learn the warning signs for suicide, know where to access help, and know how to help others. We all need help at some point. It’s important to openly acknowledge that, and be able to say, “You know, it’s okay that you’re not okay, but we can talk about it, and I can listen.”

**Watch Tiffany share
her story on video at
annual2020.afsp.org/tiffany**

Continuing the Conversation

27.3K

total views
received by
the series

We launched a new town hall series, *Elevating Voices for Long-Lasting Change*, a series of live discussions addressing the unique mental health and suicide prevention needs of underrepresented communities. Moderated by our Chief Medical Officer, Dr. Christine Moutier, and including special guests, topics have included "Mental Health in the Black Community," "Supporting Mental Health in Communities of Color: Ways Forward," and the role of advocacy and policy in supporting inclusivity in the realm of mental health.

A special episode of Ask Dr. Jill, in partnership with The Mighty on Facebook Live, hosted by Vice President of Research Dr. Jill Harkavy-Friedman, with guest Dr. Rhonda Boyd from Children's Hospital of Philadelphia, concentrated on the topic "Addressing Mental Health in Diverse Communities."

Dr. Moutier also participated in a Viacom/CBS Inclusion Week panel, "The Stigma: It's Okay Not to Be Okay," alongside KCBS news anchor Pat Harvey, actor Wayne Brady, and others, on fostering communication about mental health in diverse communities.





Prevention

Suicide can be prevented. By advocating for mental health and suicide prevention policies, our volunteers make an impact at the local, state and federal level, while our innovative research program helps reveal how we can save lives. We continue to make strides in our bold Project 2025 goal to reduce the annual suicide rate in the U.S. 20% by 2025.

Scope: A Qualitative Case Study and Content Analysis of Letters by a Veteran During Operation Desert Shield and Desert Storm

Christopher Hughes Spencer
Graduate Student
The University of Alabama

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Methods

The methodology used was a bounded case study which included a systematic content analysis of the letters received during deployment.

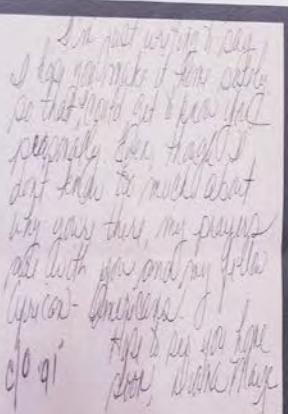
The soldier received a total of 125 letters within a six-month period.

The letters came from four different groups during his deployment which included family, friends, co-workers, and students.

Two sets of coding themes were identified to apply to the written text.

- One coding category was faith words or phrases.
- The second coding category was support words or phrases.

The manifest coding method was applied to measure the indicators and themes in the text.

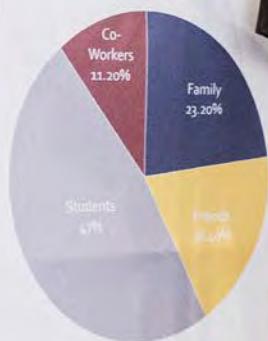


Excerpt from student letter
January 17, 1991

Results

The coding of the written text revealed that the soldier had family, friends, co-workers, and students that emphasized faith words and phrases while communicating with the soldier during war. It also revealed that the soldier had a great level of positive social support from individuals while being deployed in Operation Desert Shield and Operation Desert Storm. The three most frequently used faith words/phrases were hope (147 times), pray (110 times) and either God, Lord, Jesus, or Jesus Christ. The three most frequently used support words/phrases were home (79 times), love (78 times), and safe (41 times).

Groups



Keywords or Phrases: hope, pray, praying, God, Lord, Jesus, home, return home, love, safe, safe return, miss and miss you.

Conclusions/Significance

The soldier did reveal that the letters from family, friends, co-workers, and students during deployment, this text also helped build a sense of being, providing positive social support. This deployment has been measured as positive because the member in this study has had more support from their family members than from their co-workers. The letters of hope received during the deployment were filled with God words and positive support words. Deus Vult! (God wants it) or other religious references. The analysis suggests that veterans who have positive social support and spiritual beliefs are less likely to have nightmares than those without any support and continual belief.

Directions

Further research is needed on service members' support on deployment and its impact on suicide prevention. Future research can include case studies on service members' support before, during, and after deployment.

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Learning About How to Save Lives

Have you ever wondered what leads someone to make a suicide attempt, or how thinking may be different for the suicidal person? Does suicide run in families? How are genes related to suicide? These are the kinds of questions we attempt to answer through our state-of-the-art research portfolio.

AFSP was founded as a research organization dedicated to exploring how to save lives. Over 30 years later, we remain the largest private funder of suicide prevention research, shaping suicide prevention strategies around the world. We do so by working diligently to fund the most innovative, impactful and methodologically sound research. Each year, we welcome a broad range of applications from a diverse group of researchers. Once submitted, applications are reviewed by at least two experts from our international Scientific Advisors. The most promising applications from the first round are sent for a second, even more rigorous round of review by members of our Research Grants Committee. The top scoring applications from this review are then discussed and scored by the committee at a two-day in-person or virtual meeting. The best scoring grants are recommended to the Scientific Council and then the Board of Directors of AFSP.

Our 2020 Research Investment

\$5.5M

invested in new research in 2020

\$22M

in funding for all current studies

Some areas examined by our newest grants include:

- the use of technology to identify or help people at risk
- factors leading to suicide attempts
- the role of racial discrimination and inequity on suicide risk
- the effectiveness of various interventions and treatments for managing suicidal thoughts and behavior
- the link between opioids and suicide

By working with other national and international research organizations, and sharing the findings of our researchers through conferences and Research Connection Programs in local communities, we spread knowledge, and help to shape the agenda for future suicide prevention research.

Bringing Together the World's Leading Suicide Prevention Researchers

This past October, in partnership with the International Academy of Suicide Research, AFSP co-hosted the bi-annual International Summit on Suicide Research in Miami, Florida, where over 450 of the world's top suicide prevention researchers from 28 countries across the globe came together to share the latest research findings.

During the four-day conference, leading researchers presented their most recent findings. Attendees had the opportunity to choose from 218 individual presentations and view over 180 posters. Some of the sessions held during the conference focused on opioids and suicide, youth suicide prevention, genetics and suicide, and many other topics.

By providing a forum for sharing research findings, exchanging innovative ideas and forming new collaborations, AFSP is helping lead the way to discover exciting and practical new strategies for lowering the suicide rate in the United States, as well as the rest of the world.

Bringing Understanding to Communities Through the Research Connection Program



"Suicide prevention is important to me because I want to be a voice for people who don't have that voice.

I know what it's like to be a queer kid growing up feeling different in school: struggling with their feelings, and not knowing what their identity is or how to process the feelings they're experiencing. It can be extremely isolating, and really easy to feel alone. When I found AFSP, it was an opportunity for me to be a beacon of hope: a warrior and an advocate for people who really need that.

I'm passionate about research. So in my chapter in Central Texas, we arranged to have our first **Research Connection program**, which brings thought leaders in the world of suicide prevention research to local communities to speak on a topic that is relevant to their expertise and to that community. In our case, Dr. Steven Russell spoke to our local audience on how to reduce suicide risk in LGBTQ+ youth. A really groundbreaking, lightbulb moment

was when Dr. Russell shared that simply by calling a transgender child by their chosen name, it can drastically reduce suicide risk with that child. You could almost hear a pin drop in that room. Even small facts like that can have a massive impact on our communities, and change someone's mindset.

But we aren't just doing Research Connections for the queer community. For instance, we've just scheduled one on the topic of reinforcing resilience in youth, with Dr. Jennifer Hughes from the University of Texas Southwestern Medical Center. I consider my experience with AFSP to be a joyful and triumphant journey. I feel like it's my mission to bring hope, joy and understanding into people's lives through the work we do in our chapter, and beyond."

Watch Bradley share his story on video at annual2020.afsp.org/bradley

Suicide Prevention Research Grants

Much of what is known about suicide comes from studies that AFSP has funded. Our studies open up new areas of inquiry, and our council of scientific advisors helps set the national research agenda.

In addition to addressing the research priorities identified by the National Action Alliance for Suicide Prevention, our 2020 Grants cover one or more of the following six content categories:

- N Neurobiological** How do brain structure and neurochemical function contribute to suicide?
- P Psychosocial** What are the risk factors and warning signs for suicide?
- G Genetic** What genetic pathways are associated with suicide risk, and can we develop biological interventions and treatments?
- T Treatment** What treatments – like therapies and medications – are effective at reducing suicide?
- C Community** What universal prevention programs – like hotlines, gatekeeper training, and community-based programs – are the most effective?

Focus Grants

Focus Grants are targeted, novel and potentially high-impact studies focusing on designated areas of study. This year, AFSP has funded one new Blue Sky Focus Grant.

Blue Sky Focus Grants are those which are open to all fields, supporting innovative and potentially impactful novel areas of suicide prevention research that are beyond the scope of our Innovation Grants.



Madhukar Trivedi, M.D.

University of Texas Southwestern Medical Center

Characterizing Inflammatory Profiles and Suicidal Behavior in Adolescents

\$1,495,939

GRANT TYPE: Blue Sky Focus Grant

RESEARCH AREA: **N**

Despite increasing suicide rates among adolescents, approaches are available to prevent re-attempts. Understanding the biological factors that play a role is key in preventing suicide among youth. Evidence suggests that inflammation and immune system dysfunction may be linked to suicide. This study seeks to better characterize the immune profiles of adolescents with suicidal behavior. The goal is to inform the development of tools for suicide prevention among adolescents.

Innovation Grants

Through the funding of Innovation Grants, AFSP supports pioneering work that will increase our understanding of suicide with an array of promising new areas of research.

Risks and Benefits of ADHD Medication for Suicidal Behavior: A National Study of At-Risk Youth

\$124,984

GRANT TYPE: Distinguished Investigator Grant

RESEARCH AREA: P, T

Individuals with attention-deficit/hyperactivity disorder (ADHD) are at increased risk for suicide and more youth with ADHD are being treated with medication. Medicaid healthcare claim data will be used to explore the benefits and/or risks of ADHD medication for suicidal behavior. Findings can inform medical practice for youth at high risk of suicidal behavior, especially for those with psychiatric conditions, in underrepresented racial and ethnic groups, in rural communities, and in foster care.



Brian D'Onofrio, Ph.D.
Indiana University

Suicide Risk during Employment and Housing Transitions in Mid- and Late-Life

\$124,880

GRANT TYPE: Distinguished Investigator Grant

RESEARCH AREA: P

Major life transitions in employment and housing may be related to suicidal behavior among middle-aged and older adults. Applying machine learning/artificial intelligence statistical tools to data from the National Violent Death Reporting System and the Health and Retirement Study can lead to a better understanding of how the contexts and characteristics in which people live and work relate to suicide risk. The findings can be used to inform policy and practices for preventing suicide during life transitions.



Briana Mezuk, Ph.D.
University of Michigan



Barbara Stanley, Ph.D.
Columbia University

Enhancing the Role of Peer Specialists in Suicide Prevention

\$125,000

GRANT TYPE: Distinguished Investigator Grant

RESEARCH AREA: **T**

The Safety Planning Intervention (SPI) is an evidence-based intervention shown to prevent suicidal crises. Typically, clinicians and individuals work together to develop a safety plan. This is a first step towards incorporating peer-specialists in suicide prevention interventions. Specialized training will be provided to peer-specialists, and researchers will assess their comfort and/or distress in delivering SPI and evaluate the feasibility and acceptability of peer-led SPI.



Fabrice Jollant, M.D., Ph.D.
University of Paris (France)

Gerd Wagner, Ph.D.
Jena University Hospital
(Germany)

The Choice of a Violent Suicidal Means: A MRI Study with Computational Modeling of Decision-Making

\$299,980

GRANT TYPE: Linked Standard Research Grant

RESEARCH AREA: **N**

People who attempt suicide using a violent means are at very high risk for future suicide death. Individuals who have attempted suicide using a violent means may show particular brain and cognition characteristics – notably more risky decision-making and lesser cognitive control – that may contribute to increased suicide risk. Using brain imaging and advanced statistical analyses, these neurocognitive factors will be explored. Findings can inform treatments focused on improving cognitive function to prevent suicide.



Margaret Sugg, Ph.D.
Appalachian State University

Exploring Place-Based Differences in Adolescent Suicide, Mental Health, and Suicide Mechanism

\$99,990

GRANT TYPE: Standard Research Grant

RESEARCH AREA: **P**

There are geographic differences in suicide rates, with higher rates found in rural areas than urban areas. Efforts will focus on identifying social, environmental, and economic risk factors for adolescent suicide at the individual and community level for specific locations. This may lead to better understanding of rural-urban disparities in suicide rates.

Advancing Short-Term Prediction of Suicidal Behavior Among High-Risk Youth: Real-Time Monitoring of Suicide Risk After Psychiatric Emergency Department Visits

\$99,808

GRANT TYPE: Standard Research Grant

RESEARCH AREA: **P**

Mobile phones and wearable physiological monitoring devices (wearable sensors) will be used to improve the prediction of short-term suicide risk among youth ages 18 to 24 who have recently been discharged from a psychiatric emergency department. Feasibility and initial predictive utility data for a multi-modal assessment model combining mobile phone and wearable sensor technology with real-time ecological momentary assessment will be obtained. Findings will be used to develop accessible methods for identifying early warning signs of suicide risk that can inform personalized interventions.



Ewa Czyz, Ph.D.
University of Michigan

Suicide by Paraquat Poisoning in Taiwan and Potential Prevention Strategies

\$99,921

GRANT TYPE: Standard Research Grant

RESEARCH AREA: **C**

Pesticide ingestion accounts for one-fifth of global suicides. Paraquat, a weed killer that is highly lethal when ingested and accounts for about 200 suicide deaths each year in Taiwan, was banned in February 2020. By studying the effectiveness and cost-effectiveness of such a ban on reducing suicide, lessons can be learned to inform strategies for reducing pesticide suicide, as well as suicide by other highly lethal means.



Shu-Sen Chang, M.D., Ph.D.
National Taiwan University
(Taiwan)

Impact of a National Media Engagement Strategy in Canada on Suicide-related Media Reporting, Social Media Content and Suicide Rates

\$99,993

GRANT TYPE: Standard Research Grant

RESEARCH AREA: **C,P**

Media reporting about suicide can have an impact on suicide rates. Stories emphasizing death and hopelessness can lead to more suicides while stories of resilience and hope can have a positive effect. The impact of a comprehensive media engagement strategy initiated in Canada in 2015 on traditional and social media reporting will be evaluated. Understanding the impact of the media strategy and of different story narratives on suicide rates can inform future reporting.



Mark Sinyor, M.D., FRCPC.
University of Toronto/
Sunnybrook Research Institute
(Canada)



Patrick Quinn, Ph.D.
Indiana University

A Population-Based, Genetically Informed Study of the Effects of Chronic Pain on Suicidal Behavior

\$98,794

GRANT TYPE: Standard Research Grant

RESEARCH AREA: **P**

Chronic pain is common and increases an individual's risk for suicide. However, it is not yet known whether suicide risk is similar among all chronic pain conditions or whether the different factors influence suicidal ideation and chronic pain. By comparing suicidal behavior between twins who differ in their pain but share genes, families, and many other social characteristics, the study aims to identify potential contributors to increased suicide risk among individuals with chronic pain.



Jennifer Funderburk, Ph.D.
Central New York Research Corporation

Adjunctive Team Enhanced Intervention to Improve Suicide Prevention Evidence-Based Practices in Primary Care

\$99,870

GRANT TYPE: Standard Research Grant

RESEARCH AREA: **C**

About one-third of individuals who die by suicide visit a primary care provider within the month before their death. While evidenced-based recommendations for preventing suicide through primary care exist, successful implementation of guidelines for clinical practice often depends on primary care team members working together. Demonstrating the feasibility, acceptability, and effectiveness of an educational intervention called Team Education for Adopting Changes in Healthcare (TEACH) may lead to improvements in evidence-based suicide prevention in primary care.



Oscar Jimenez-Solomon, MPH
Research Foundation for Mental Hygiene/New York State Psychiatric Institute

From Hardship to Hope: A Peer-led Intervention to Reduce Financial Hardship & Suicide Risk

\$99,998

GRANT TYPE: Standard Research Grant

RESEARCH AREA: **T, P**

While there is never one single cause for suicide, financial hardship has been documented as a significant contributor. An intervention which focuses on empowering participants to manage their finances in order to decrease suicidal ideation and behaviors will be delivered by individuals with lived experience. It will be determined if it is appropriate and usable for individuals experiencing financial hardship. If effective, this intervention would provide a new strategy for fostering hope and reducing participants' risk for suicide.

Developing and Evaluating a Scalable Suicide Prevention Gatekeeper Training Program for Community Pharmacy Staff

\$100,000

GRANT TYPE: Standard Research Grant

RESEARCH AREA: C

Although many community pharmacists and pharmacy technicians have interacted with people who exhibit suicide warning signs, less than 10% say they have the necessary training or resources to support patients who are at risk for suicide. A brief suicide prevention training program for pharmacy staff (SAVE-Pharm) will be developed and then tested to evaluate whether staff who complete SAVE-Pharm are more likely to discuss suicide prevention with at-risk patients.



**Delesha Carpenter,
Ph.D., MSPH**

University of North Carolina
at Chapel Hill

Gathering Stakeholder Perspectives and Modeling Emotion Regulation to Predict Youth Suicidal Behavior

\$100,000

GRANT TYPE: Standard Research Grant

RESEARCH AREA: P, T

Dialectical behavior therapy (DBT) is an effective treatment to decrease suicidal behaviors. During DBT, patients complete daily diary cards to track behaviors and emotions related to their treatment goals. This information will be combined with medical records and treatment outcome evaluations to determine predictors of youth suicidal behaviors. By gathering input from providers and individuals with lived experience, models that are useful for treatment planning, keeping youth safe, and preventing suicide can be identified.



Sabrina Darrow, Ph.D.
University of California,
San Francisco

Suicidal Ideation and Behavior Following Moral Injury Among Combat Veterans: Toward an Empirically Based Integrative Model

\$99,970

GRANT TYPE: Standard Research Grant

RESEARCH AREA: P

Morally injurious events--events that violate an individual's moral beliefs--can have long-term harmful effects on combat veterans, a group at high risk for suicide. The study focuses on identifying psychological risk and resilience factors for morally injurious events and understanding the psychological mechanisms that link moral injuries with suicidal ideation and behavior among Israeli combat veterans. Findings may lead to more effective screening, as well as suicide prevention and intervention programs tailored to at-risk veterans.



Yossi Levi-Belz, Ph.D.
Ruppin Academic Center
(Israel)



Anthony Ruocco, Ph.D.
University of Toronto
(Canada)

A Neurocomputational Approach to Discriminate Between Suicide Ideators and Attempters

\$100,000

GRANT TYPE: Standard Research Grant

RESEARCH AREA: **N, P**

Many people think about suicide, but only a fraction attempt it. A critical step toward understanding what leads someone from suicidal ideation to suicide attempt may emerge from the development of a “risk algorithm,” or risk calculator. The study combines clinical, behavioral, and brain-based risk factors that are distinctively related to suicide attempt to develop such a risk calculator. Ultimately, a risk algorithm may help clinicians to evaluate individual risk during an office visit and inform intervention plans.



Craig Stockmeier, Ph.D.
University of Mississippi
Medical Center

Epigenetic Risk Factors for Suicide in Comorbid Depression and Alcoholism

\$100,000

GRANT TYPE: Standard Research Grant

RESEARCH AREA: **G**

When an individual suffers from alcohol use disorder (AUD) and depressive disorder (DEP) at the same time, they experience a worse course of illness and higher risk for suicide than either disorder alone. Individuals who die by suicide with concurrent AUD plus DEP may also experience greater changes in their brain (orbitofrontal cortex) and this is what this study investigates. Understanding these changes may improve the treatment and prevention of suicide among those with AUD and DEP.



Timothy Schmutte, Psy.D.
Yale University

MENTOR: Steven Marcus, Ph.D.
University of Pennsylvania

Hospital Management of Suicidal Older Adults and Subsequent Mortality in Medicare and Medicare Advantage Enrollees

\$88,548

GRANT TYPE: Standard Research Grant

RESEARCH AREA: **P, T**

Older adults are the fastest growing age group seeking emergency care for suicidal ideation and have the highest suicide rate following hospital management of suicidal thoughts and behaviors. However, we lack information about the quality of mental health care and differences in suicide mortality among older adults enrolled in Medicare. The investigators will combine healthcare data from national Medicare claims with interviews of older adults and clinicians. The goal is to improve quality of care and post-discharge support for suicidal older adults.

Determining the Effects of Protective Suicide Content in the Print Media in India

\$98,758

GRANT TYPE: Standard Research Grant

RESEARCH AREA: C, P

Suicide rates are high in India and media reporting on suicide is often unsafe. This study aims to improve media content about suicide by focusing on stories from individuals with lived experience of a suicide crisis, and implementing the World Health Organization guidelines for suicide prevention messaging in print, in India. Findings can inform the development of media-based approaches to writing about suicide.



Gregory Armstrong, Ph.D.

University of Melbourne
(Australia)

Air Quality and Suicide

\$90,000

GRANT TYPE: Young Investigator Grant

RESEARCH AREA: P

Air pollution has been demonstrated to affect health, including increases in depressive symptoms, and social factors. This study will be the first to examine the relationship between air pollution and suicide. Data from death certificates in the United States will be used to estimate the impact of days with high air pollution on suicide rates compared to other days in the same month, year, and county with lower air pollution. Findings could inform suicide prevention resources and policy efforts in order to reduce the rate of suicide.



Claudia Persico, Ph.D.

MENTOR: Dave Marcotte, Ph.D.
American University

Mobile Crisis for Suicidal Youth

\$89,965

GRANT TYPE: Young Investigator Grant

RESEARCH AREA: P

Though mobile crisis teams play a key role in suicide prevention, little is known about best practices for mobile crisis suicide prevention activities. A large crisis services clinical database will be analyzed to determine which demographic and socioeconomic factors are associated with referral to different levels of care among youth under age 18 with suicidal symptoms who have utilized a crisis call center or mobile crisis team. This information will advance suicide prevention in crisis services.



Matthew Goldman, M.D.

San Francisco Department of
Public Health

MENTOR: Brian Ahmedani, Ph.D.
Henry Ford Health System


Ashley Hagaman, Ph.D., MPH

Yale University

MENTOR: Lakshmi Vijayakumar,
DPM, Ph.D.
Voluntary Health Services
Hospital (India)

**Integrating Suicide Prevention Packages
into Task-Shifted Mental Health Interventions
in Low-Resourced Contexts**

\$90,000

GRANT TYPE: Young Investigator Grant

 RESEARCH AREA: **T, C**

Although three-quarters of suicide deaths occur in low- and middle-income countries, effective strategies for early identification and prevention of suicide in low-resource, culturally diverse settings are lacking. Development of a package of evidence-based suicide prevention practices which can be integrated into the health system in rural Nepal is urgently needed and will be developed and may ultimately be adapted to be utilized in diverse and disadvantaged settings around the world.


Matthew Klein, M.D., Ph.D.

Mount Sinai School of Medicine

MENTOR: Murray Stein, M.D., MPH
University of California, San Diego

**Identifying EEG-Biomarkers of Target Engagement
by Intramuscular Ketamine in the Treatment of
Acute Suicidality**

\$90,000

GRANT TYPE: Young Investigator Grant

 RESEARCH AREA: **T, N**

Ketamine is increasingly used as a rapid antidepressant, and there is growing evidence that ketamine may have additional anti-suicidal properties distinct from its effects on depression. Patterns of electrical activity in the brain will be studied to determine intramuscular ketamine's effectiveness in treating acute suicidal thoughts and behaviors. This work seeks to inform an understanding of the mechanism of ketamine's effects on suicidal ideation and identify whether treatment responses can be predicted from brain activity.


Leslie Adams, Ph.D., MPH

 Johns Hopkins Bloomberg
School of Public Health

MENTOR: Sean Joe, Ph.D.
Washington University at St. Louis

**Real-Time Assessments of Suicidality Among
Black Men: A Mixed Methods Approach**

\$90,000

GRANT TYPE: Young Investigator Grant

 RESEARCH AREA: **P**

Black men are experiencing increasing rates of suicide in recent years, signaling an emerging public health crisis. Little is known about how racial discrimination functions as a potentially important risk factor for suicide in this population. By integrating digital health strategies, such as ecological momentary assessment (EMA) using smartphones, to assess individuals' experiences in social environments, including instances of racial discrimination, the goal is greater understanding of experiences that increase Black men's risk for suicide.

Opioid Use in People with Chronic Pain and Associations with Suicidal Behaviours and Suicide: A Population-Based Data Linkage Cohort Study

\$89,959

GRANT TYPE: Young Investigator Grant

RESEARCH AREA: P

In the last two decades, there has been a substantial increase in the prescription of pharmaceutical opioids, particularly for chronic non-cancer pain. One of the most recent concerning trends has been the increasing association between increased opioid prescribing and suicide. In this study, new machine learning/artificial intelligence techniques will be used to study a population of patients with chronic pain who were prescribed opioids. Findings may shed light on the relationship between opioid deaths and suicide.



Gabrielle Campbell, Ph.D.

University of New South Wales
(Australia)

MENTOR: Brian Draper, M.D.
Prince of Wales Hospital
(Australia)

Profiles of Poly-Victimization and Suicide Risk among Young Adults

\$90,000

GRANT TYPE: Young Investigator Grant

RESEARCH AREA: P

Experiences with violence and trauma are often contributors to suicidal behavior in young adults. However, a better understanding of the types of trauma young adults experience, how such experiences contribute to overall suicide risk, and to what extent these patterns vary across youths' demographic identities, including race, ethnicity, gender, and sexual orientation, is needed. A national survey with a diverse sample of young adults ages 18 to 24 will be examined to identify protective factors for suicide that promote resilience among young adults, particularly those most at-risk.



Lisa Fedina, Ph.D., MSW

MENTOR: Cheryl King, Ph.D.
University of Michigan

Suicidality in Youth with Autism Spectrum Disorder: Interaction Between Biological Vulnerabilities and Cognitive Dysfunction

\$89,357

GRANT TYPE: Young Investigator Grant

RESEARCH AREA: P, N

Youth with autism spectrum disorder (ASD) experience suicidal thoughts and behaviors, but the contributors are not well known. The biological response to a stressful situation and its interaction with cognitive (thought) processes will be studied to gain insight into potential biological and psychosocial risk factors for suicide among youth with ASD.



Carly McMorris, Ph.D.

University of Calgary (Canada)

MENTOR: David Klonsky, Ph.D.
University of British Columbia
(Canada)


Elizabeth Karras, Ph.D.

Department of Veterans Affairs

 MENTOR: Robert Bossarte, Ph.D.
 West Virginia University

Public Messaging Strategies to Facilitate Help Seeking Among Those at High Risk for Both Suicide and Opioid Overdose

\$89,951

GRANT TYPE: Young Investigator Grant

 RESEARCH AREA: **C**

The risk for suicide is often higher among individuals with opioid use disorder (OUD). Veterans treated by the Veterans Health Administration are one high-risk group for both suicide and opioid use. To determine what public messaging strategies are effective at encouraging people at risk for both suicide and opioid overdose to disclose distress and seek out mental health treatment, VA patients will be interviewed and asked how they think and feel about different types of suicide prevention messages.


Pierre-Eric Lutz, M.D., Ph.D.

 Institute of Cellular and
 Integrative Neurosciences
 (France)

 MENTOR: Gustavo Turecki, M.D.,
 Ph.D., McGill University
 (Canada)

Epigenetic Plasticity in Suicidal Behaviors and the Vulnerability to Social Stress

\$90,000

GRANT TYPE: Young Investigator Grant

 RESEARCH AREA: **G, N**

Biological responses to social interactions inform the mechanisms through which negative social experiences increase an individual's risk for suicide. Epigenetics, which are molecular processes that control the functioning of genes in response to life experiences, are proposed to play a role in the biological mechanisms which contribute to suicidal behaviors. This investigation of changes in genetic functioning in the brain and blood, and their relationship with stress, shows promise for providing greater understanding of suicide risk.


Elizabeth Thompson, Ph.D.

 MENTOR: Shirley Yen, Ph.D.
 Rhode Island Hospital

A Qualitative Study of Psychosis and Suicidality to Inform Safety Planning for High-Risk Teens

\$90,000

GRANT TYPE: Young Investigator Grant

 RESEARCH AREA: **P, T**

Youth with early psychosis (e.g. having unusual thoughts or sensory experiences) have a markedly elevated risk for suicide. In-depth interviews will be used to explore how psychosis experiences influence suicidal thoughts and behaviors among teens hospitalized for safety concerns. This information will then be used to develop a safety plan tailored to the needs of teens experiencing psychosis and suicidal thoughts and behaviors. Feedback from teens, parents, and clinicians will inform safety planning guidelines for future use.

Randomized Controlled Trial of a Strategic Disclosure Intervention for Suicide Attempt Survivors

\$90,000

GRANT TYPE: Young Investigator Grant

RESEARCH AREA: T

The disclosure of suicidal thoughts and behaviors can lead to increased support and opportunities for self-reflection, which are important for preventing suicide. However, those who talk about their suicidal thoughts and behaviors sometimes face negative responses from the people they tell. The 2Share Program, which offers a peer-led intervention focusing on disclosure among those who survived a suicide attempt, will be studied. Improvements in social outcomes and disclosure behaviors, as well as reductions in suicidal thoughts and behaviors, depression, and stigma are the studied outcomes.



Lindsay Sheehan, Ph.D.

Illinois Institute of Technology

MENTOR: Julie Cerel, Ph.D.

University of Kentucky

Suicidal Behavior in Elementary School-Aged Youth: Assessment of Familial Factors and Neurocognitive Functioning

\$90,000

GRANT TYPE: Young Investigator Grant

RESEARCH AREA: P

Research suggests that suicide risk factors differ between younger children who die by suicide compared to older youth. This study will examine neurocognitive (brain) functioning and factors associated with family behaviors and relationships in children ages 6 to 11 years, with and without a history of suicidal behavior. An understanding of the risk factors for suicidal behavior in childhood can be used to inform relevant child-specific suicide prevention and intervention programs.



Arielle Sheftall, Ph.D.

MENTOR: Jeffrey Bridge, Ph.D.

The Abigail Wexner Research Institute at Nationwide Children's Hospital

**Abigail Ross, Ph.D., MSW, MPH**

MENTOR: Dana Alonzo,
Ph.D., MSW
Fordham University

**The Family Based Crisis Intervention:
Adaptation for Inpatient Psychiatric Settings**

\$89,975

GRANT TYPE: Young Investigator Grant

RESEARCH AREA: **T**

Family bonds and connection (adhesion and cohesion) and the resulting support and sense of connection or attachment can serve as protective factors against suicide when experienced by youth at risk for suicide. The investigators will adapt and then implement a brief evidence-based intervention for suicidal adolescents and their families, the Family-Based Crisis Intervention (FBCI). This intervention will be provided on inpatient psychiatric units with the aim of reducing suicidal behavior and rehospitalization rates in the six months following discharge, particularly in comparison to treatment as usual. If effective, hospitals will be able to improve care delivery to adolescents at risk for suicide and their families.

**Vera Vine, Ph.D.**

MENTOR: Stephanie Stepp, Ph.D.
University of Pittsburgh
School of Medicine

**Investigating an Interoceptive Model of
Adolescent Suicidal Thoughts and Behaviors**

\$89,998

GRANT TYPE: Young Investigator Grant

RESEARCH AREA: **N, P**

Suicide is the second leading cause of death among U.S. adolescents and has been associated with difficulties in self-perception and understanding, or emotional self-awareness. In the human body, the heart constantly communicates information to the brain which is critical for emotional health and awareness. Interviews, reports of daily experiences, and neurophysiological (brain-body) techniques, including recording the brain's responses to heartbeats, will be collected and integrated to investigate the role of miscommunication between the heart and brain in adolescents' suicidal thoughts and behaviors.

Sociodemographic Factors, Clinical Profiles and Social Determinants of Suicides Involving Opioids

\$90,000

GRANT TYPE: Young Investigator Grant

RESEARCH AREA: **P**

A better understanding is needed of the social, demographic, and clinical factors which characterize people who died by suicide with opioids involved. This study will use statistical methods to identify characteristics specific to individuals and to neighborhoods. The contributions of age, sex, and race will be examined using mortality data and medical records from Maryland. Findings could help to inform our understanding of suicide deaths that involve opioids.



Ryoko Susukida, Ph.D.

MENTOR: Holly Wilcox, Ph.D.
Johns Hopkins University

Positive Identity and Interpersonal Supports as Protective Factors Against Suicide Ideation for Young Transgender and Gender Nonbinary Young Adults

\$90,000

GRANT TYPE: Young Investigator Grant

RESEARCH AREA: **P**

Transgender or gender nonbinary young adults are more likely to report suicidal ideation and attempts than their peers. Stress encountered because of sexual orientation or gender identity (i.e., minority stress) is thought to play a role. This study will investigate protective factors which may help mitigate the impact of minority stress on transgender and gender nonbinary individuals in relation to suicidal ideation. Identifying protective factors is key for suicide prevention.



Lindsay Taliaferro Ph.D., MPH

University of Central Florida

MENTOR: Jennifer Muehlenkamp, Ph.D., University of Wisconsin-Eau Claire

Frontal-Limbic Abnormalities and Early Life Stress in Susceptibility and Resilience to Suicide

\$89,996

GRANT TYPE: Young Investigator Grant

RESEARCH AREA: **N, P**

Some individuals with a family history of suicide die by suicide while others do not. Researchers will use brain imaging and childhood adversity data to investigate the neurobiological and environmental factors which influence whether individuals with a family history of suicide experience suicidal ideation or attempt suicide (i.e. susceptibility) or do not (i.e. resilience). The goal is to identify characteristics specific to susceptibility and resilience among individuals with high familial risk for suicide.



Milenna van Dijk, Ph.D.

MENTOR: Myrna Weissman, Ph.D., MSW, New York State Psychiatric Institute



Ali Bani-Fatemi, Ph.D.
MENTOR: Ariel Graff, M.D., Ph.D.

Centre for Addiction and
Mental Health (Canada)

Imaging of the Suicidal Brain in Schizophrenia

\$112,000

GRANT TYPE: Postdoctoral Fellowship

RESEARCH AREA: **N**

Brain imaging is a non-invasive way to directly estimate the brain's structure and functioning. Analyzing brain structure in patients with schizophrenia at either very high risk or very low risk for suicide can provide information to understand suicide risk better. Identifying biological features and mechanisms that influence suicidal ideation and behavior in people with schizophrenia is critical for saving lives of those affected with schizophrenia.



Hannah Lawrence, Ph.D.
MENTOR: Richard Liu, Ph.D.
McLean Hospital/Harvard
Medical School

Understanding Suicide Risk in Adolescents: The Unique Role of Imagery

\$112,000

GRANT TYPE: Postdoctoral Fellowship

RESEARCH AREA: **P**

Whereas suicidal mental imagery is potentially a powerful predictor of suicidal behavior, the ability to form positive mental imagery may be a protective factor. Examining mental imagery in adolescents is critical, especially since these abilities peak at this age. This study examines suicidal mental imagery as a risk factor that could be assessed to improve clinical decision-making and the development of interventions that use positive mental imagery to prevent suicide.



Juliet Edgcomb, M.D., Ph.D.
University of California,
Los Angeles

Electronic Health Record Phenotyping for Cohort Discovery of New-onset Suicidality in Youth

\$30,000

GRANT TYPE: Pilot Research Grant

RESEARCH AREA: **P**

Electronic health records convey information that is used for the provision of health care services. It is also an excellent source of information from which to learn about the different ways that children and adolescents with suicidal thoughts and behaviors may present to an emergency department. There are many pathways to suicide risk, and machine learning/artificial intelligence will be used to identify different groups of youth at risk for suicide seeking services at emergency departments.

Development and Initial Testing of a Couple-Based Intervention to Optimize Suicide and Self-Injury Treatment: COMPASS (Connecting, Overcoming, and Moving Past Suicide and Self-Injury)

\$30,000

GRANT TYPE: Pilot Research Grant

RESEARCH AREA: **T**

Suicidal thoughts and behaviors are often influenced by difficulties in emotion regulation and problems regarding intimate relationships. While current interventions for suicidal ideation and behaviors typically focus on emotion dysregulation, it is important to also address intimate relationship issues. The COMPASS (Connecting, Overcoming, and Moving Past Suicide and Self-Injury) intervention, the approach to be tested, is a new treatment for couples for whom suicidal ideation and behaviors are present and can be a focus for change.



Skye Fitzpatrick, Ph.D.
York University (Canada)

Computational Markers of Suicidal Ideation from Loss Narrative Recordings: A Proof of Concept Study

\$30,000

GRANT TYPE: Pilot Research Grant

RESEARCH AREA: **P**

The loss of a spouse is among life's most painful experiences, associated with significant distress, grief, and elevated risk for suicide. To improve assessment of potential suicide risk factors following loss, machine learning/artificial intelligence methods will be used to examine indicators of stress in speech and language from interviews with bereaved individuals. Using these stress indicators, a model will be developed and tested to predict future suicidal ideation and long-term adjustment following the loss of a spouse.



Matteo Malgaroli, Ph.D.
New York University
School of Medicine

Increasing Engagement of College Students At-Risk for Suicide in Online Intervention

\$30,000

GRANT TYPE: Pilot Research Grant

RESEARCH AREA: **T, C**

While many college students experience suicidal ideation and may attempt suicide, reluctance to seek mental health services online often leads to low enrollment and high drop-out rates. This study will explore the barriers and preferences of college students towards online interventions. An engagement strategy will be developed and used to test the effectiveness of Enhanced Therapist Assisted Online. The goal is to facilitate the use of online mental health services among college students.



Jazmin Reyes-Portillo, Ph.D.
Montclair State University



Speaking Out in the Fight to Stop Suicide

One way we lead the fight to stop suicide is by advocating at the federal, state, and local level to pass suicide prevention policies that can save lives. That is why we empower volunteer Field Advocates across the country to urge public officials to prioritize suicide prevention and mental health.

Thanks to the hard work of our volunteers and staff, this year we saw the successful passage of five federal bills and 27 state bills in support of our top public policy priorities.

Advocating on the State Level for Suicide Prevention



27
state bills
became law

3
new State
Capitol Day
events

AFSP chapters held 38 State Capitol Day events this year, where volunteers met with state and local public officials to educate them about our cause and encourage them to pass legislation making suicide prevention a priority. This year's efforts engaged over 2,000 advocates and included 13 online events, as well as three first-year events in Kansas, Kentucky, and New Hampshire.

Our state advocacy successes this year include:

- Increased reporting on and enforcement of mental health parity in Arizona
- Adoption of the Kentucky Mental Health First Aid Training Program
- Expansion of suicide prevention-related state programs in Florida, including prioritization of Veterans, bridge barriers, and crisis response
- A ban on the practice of conversion therapy in Virginia
- Requiring mental health and suicide prevention policies for all North Carolina schools
- Reinstatement of the Jason Flatt Act to train educators and other school employees in suicide prevention across West Virginia

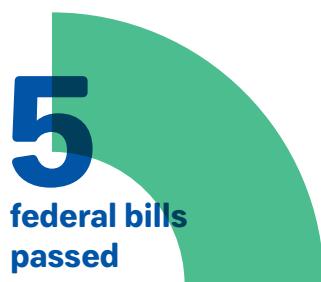
Annual Advocacy Forum

Personal stories shared with 1000+ media outlets

In 2020, AFSP hosted our 11th annual and first completely online Advocacy Forum, where we connected thousands of advocates from across the country with public officials and top experts in suicide prevention research and policy.

As part of the event, advocates shared their own stories and emailed members of Congress to urge support for funding and policies that aim to improve mental health and prevent suicide.

Advocating on the Federal Level for Suicide Prevention



42K+
emails sent by
our volunteers
to public
officials

Throughout the year, our volunteer Field Advocates played a key role in the successful passage of important suicide prevention and mental health legislation, including the Law Enforcement Suicide Data Collection Act, the Supporting and Treating Officers in Crisis Act, and the Sustaining Excellence in Medicaid Act.

Together, we continued to make strides in fighting for:

Increased federal funding for suicide prevention research and programs This year we successfully advocated for:

- \$2 million increase for the Garrett Lee Smith – Suicide Prevention Resource Center, to support suicide prevention work in campus, state, and tribal communities
- A new \$10 million investment for suicide prevention at the Centers for Disease Control and Prevention
- Increased funding to the National Institute of Mental Health for suicide prevention research
- \$7 million increase for the National Suicide Prevention Lifeline

Prioritization of suicide prevention for Veterans, Servicemembers, and their families AFSP supported and saw passage of the Support for Suicide Prevention Coordinators Act, which will require greater oversight of suicide prevention coordinators at the U.S. Department of Veterans Affairs.

Designating 9-8-8 as the number for the National Suicide Prevention Lifeline AFSP has helped lead the effort to make a 3-digit dialing code for the National Suicide Prevention Lifeline a reality. We provided public comment to the Federal Communications Commission, met with members of Congress, activated our grassroots network, and partnered with other leaders in mental health to move this effort forward.



Recognizing Our Champions for Suicide Prevention

SANDY MARTIN AWARDS The Sandy Martin Grassroots Award recognizes our volunteer Field Advocates who have devoted their time and energy working to build relationships with public officials, network with state and local agencies and organizations, recruit others to work for the cause, and further the public policy priorities we know can save lives.

Ken Brown **AFSP Louisiana Chapter**

Ken is a current Board Member with the AFSP Louisiana Chapter and has been a driving force behind the suicide prevention movement as a grassroots volunteer. Ken has demonstrated the true impact that advocacy can have on the state and local level. He worked to ensure all K-12 teachers across Louisiana receive suicide awareness training and pushed further for adequate reporting requirements to strengthen existing state law. Ken has been instrumental in the effort to make public officials prioritize suicide prevention legislation nationally and throughout Louisiana.

Jennifer Preble **AFSP Montana Chapter**

As Chair of the AFSP Montana Chapter Public Policy & Advocacy Committee, Jen works tirelessly as a voice for mental health and suicide prevention. As a member of the AFSP National Public Policy Council, she has shared her knowledge and expertise as a Licensed Clinical Social Worker and positively influenced the Council's efforts. She is passionate about improving the health care system and increasing access for those who struggle with their mental health. Jen has made an impact legislatively on the national level and across the state of Montana. She is a true embodiment of AFSP's mission to save lives and bring hope to those affected by suicide.

Susan Maskaleris **AFSP Maryland Chapter**

Sue serves as the Advocacy Chair of the AFSP Maryland Chapter and is being honored for her years of dedication and service as a grassroots suicide prevention advocate. She has gone above and beyond to motivate and engage her fellow AFSP Maryland Chapter members in the legislative process, raising the profile of the suicide prevention movement nationally and across Maryland. Sue has been an example of the impact advocacy can have, from providing testimony and letters of support, to meeting with legislators and the Governor to share her knowledge and passion for suicide prevention.

ALLIES IN ACTION AWARDS AFSP's Allies in Action Awards honor leaders who are working tirelessly at all levels of government to improve mental health and reduce suicide in our country. This award is in recognition of their longstanding and steadfast support of, and leadership in, suicide prevention and mental health.

Marcus Garza

Senior Legislative Assistant

Office of U.S. Representative José Serrano

Marcus has been on Capitol Hill since 2016 and has been an ally to AFSP in promoting suicide prevention legislation, efforts, and funding priorities within his office and to additional Congressional offices. Within the office of Representative José Serrano, Marcus oversees a portfolio including health, education, labor, the environment, Veterans, and financial services.

Olivia Hussey

Legislative Assistant

Office of U.S. Representative Seth Moulton

As a Congressional Health Staffer since 2017, Olivia has partnered with AFSP to introduce legislation to prioritize mental health for all Americans. Working under Representative Seth Moulton, Olivia has been at the forefront to reduce the rate of suicide amongst the Veteran and Servicemember communities and has been a leading champion in the designation of 9-8-8 on Capitol Hill.

Megan Axelrod

Legislative Assistant

Office of U.S. Senator Cory Gardner

Megan has worked in the U.S. Senate since 2017 and has been instrumental in promoting legislation to bring suicide prevention services and training to K-12 schools and to improve access to mental health care in rural communities. Within the office of Senator Cory Gardner, Megan has been a leader for the passage of the National Suicide Hotline Designation Act of 2019 in the Senate and making 9-8-8 a reality.

Cam Madsen

Legislative Director

Office of U.S. Representative Chris Stewart

Serving in Representative Chris Stewart's office since 2013, Cam has been a key partner for AFSP, collaborating on the National Suicide Hotline Improvement Act of 2018 and the continued push to designate 9-8-8 as the number for the National Suicide Prevention Lifeline. Cam has also overseen the introduction of legislation to bring suicide prevention services and training to emergency departments and health professionals across the country.



PERSPICACITY AWARDS Perspicacity is the quality of keen understanding, of uncommon insight into the world we live in and the issues at hand. AFSP honors select volunteers for their outstanding dedication to promoting suicide prevention and mental health, becoming a nationally recognized resource for the suicide prevention movement, and influence as a grassroots volunteer at the federal, state, and local levels.

Gordon Doughty
San Francisco Bay Area Chapter

Gordon Doughty is a former San Francisco Bay Area Chapter Board Chair and member as well as a member of the Chapter Leadership Council. Gordon has been a volunteer and supporter of AFSP since 2005 and made a positive impact for the suicide prevention movement at every level of government. He has provided legislative testimony and letters of support throughout the years and serves on numerous state and local level task forces and working groups that focus on suicide prevention and mental health.

In California, he was a powerful advocate over several years to expand suicide prevention training for mental health professionals and school personnel. At the federal level, Gordon has attended every AFSP Advocacy Forum and become a true resource, friend, and wealth of knowledge for members of Congress and his fellow AFSP California volunteer advocates.

Rick Kirchhoff, DDS
Illinois Chapter

Dr. Rick Kirchhoff is a current member of the AFSP National Public Policy Council and is Co-Chair of the Illinois Chapter Board of Directors. Rick has been a true leader of AFSP's mission of saving lives and bringing hope to those affected by suicide. Over the years, Rick has served as the Chair and Vice Chair of the National Public Policy Council, Chair of the National Leadership Council, and as a member of the National Board of Directors and Executive Committee.

In his home state of Illinois, Rick served on the advisory council for the organization responsible for the development of the Illinois Violent Death Reporting System and served for many years as a member of the Illinois National Guard Suicide Prevention Task Force. Rick's personal philosophy is to use his time and energy to help others and "pay the support and help forward" – a philosophy which is evident in his tireless work for AFSP. Throughout his years with the organization, Rick has shown outstanding dedication and leadership for suicide prevention and mental health policies nationally and throughout Illinois.

Boots on the Ground: Advocating for Suicide Prevention in the Military, and Beyond



"My connection to the cause started when I was offered a position as Suicide Prevention Program Manager with Fort Bragg. I then went to Forces Command, which is big army. Every suicide that occurred came across my desk every day.

Sometimes it's hard for someone who's not a part of the military to understand the challenges military service members and their families have. I wanted to see more education made available to service members as well as their families. Getting involved with my local AFSP chapter enabled me to bring in education programs like Talk Saves Lives.

I didn't know what I had to contribute to AFSP's advocacy efforts until I went to a State Capitol Day event, and was boots on the ground talking to our legislators. A lot of people feel intimidated, saying, "I don't know what to say to them." But AFSP's national policy office prepares us with packets to give to our legislators. We then meet them in person, and share our story, and give them information on important advocacy efforts, like passing a

bill mandating for teachers to get trained in suicide prevention, or allocating money for suicide prevention research.

I've also had the privilege of attending AFSP's annual Advocacy Forum in Washington, D.C. But anyone can become a volunteer Field Advocate and get emails from AFSP's Action Center, which allows you to take action on federal and state bills that need your support. It only takes about two minutes to fill in a form and send a message to your representatives. It's literally click, click, click, and you're done. You've sent a letter to your legislators, letting them know we need their help and their support in getting a bill passed.

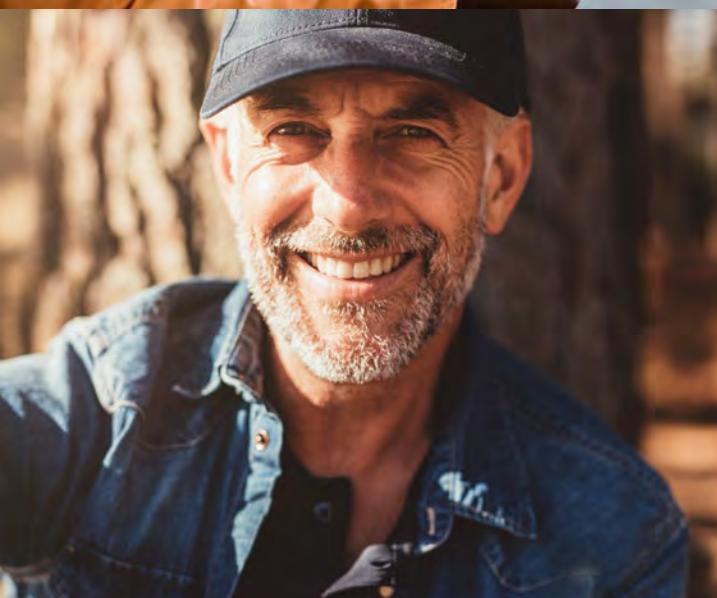
 Suicide prevention is personal to me. I have friends who struggle. We need to be their mouthpiece. We've got to advocate for them, and put laws in place that will move suicide prevention away from being this abstract thing, to what it actually is, which is a public health problem."

Watch Kenya share her story on video at annual2020.afsp.org/kenya



PROJECT **2025**

AFSP.ORG/PROJECT2025



Our Nationwide Initiative to Reduce the Annual Rate of Suicide in the U.S. 20% by 2025

Despite the fact that more is being done today to prevent suicide than at any other time in history, suicide is still the tenth leading cause of death in the U.S. Together with guidance from the top minds in the field and by using dynamic data modeling, we understand the programs, policies and interventions that will prevent as many suicides as possible. Using data that specify who we are losing to suicide and how we are losing them, AFSP's board of expert advisors has honed a comprehensive plan to save lives.

We know that we can't do it alone, but we can have a tremendous impact on the rate of suicide by partnering with organizations in four critical areas identified to save the most lives in the shortest amount of time: firearms settings, healthcare systems, emergency departments, and corrections systems.

Through our chapters throughout the country, volunteers known as our Project 2025 Champions are helping to reach these partners in their own local communities. Together, we can #KeepGoing and dramatically reduce the suicide rate.

Firearms & Safe Storage



51% of all suicides in the U.S. are by firearm, and 85-90% of firearm suicide attempts are lethal. It's crucial that firearms owners are aware of safe storage practices and other elements of suicide prevention. To help make suicide prevention education a basic component of firearms ownership, we've partnered with the National Shooting Sports Foundation (NSSF) to help distribute materials to its national network of retailers and ranges. This year, we've also created a special module of our Talk Saves Lives education program, specific to suicide prevention and firearms safety.

Partnering with the U.S. Department of Veterans Affairs and the National Shooting Sports Foundation

In May, AFSP joined the U.S. Department of Veterans Affairs and the National Shooting Sports Foundation (NSSF) for a webcast about "Protecting Mental Health and Preventing Suicide During COVID-19," which aired on the YouTube Channel of the U.S. Concealed Carry Association (USCCA), one of the largest firearms-owner groups in the country.



AFSP's Chief Medical Officer Dr. Christine Moutier, together with Dr. Matthew Miller, Executive Director of Suicide Prevention for the VA, and Joe Bartozzi, NSSF's President and CEO, delivered the message that securely storing firearms, and other methods of harming oneself, can play a huge role in deterring suicide. Creating time and space between a person with suicidal thoughts and access to a means of self-harm, such as a firearm, can create a moment of pause, allowing the period of heightened risk to pass. Suicide is not inevitable, and reaching out to someone to have a "brave conversation" can be lifesaving.

Healthcare Systems



Large healthcare systems spanning both primary and behavioral care are a critical setting where coordinated suicide prevention strategies can have a dramatic impact on lives saved. By identifying one out of every five at-risk people in large healthcare systems – such as during primary care and behavioral health visits – and providing them with short-term intervention and better follow-up care, we can expect an estimated 9,200 lives saved through 2025. Project 2025 is collaborating with the country's largest healthcare systems and accrediting organizations to accelerate the acceptance and adoption of risk identification and suicide prevention strategies we know work.

This year, we expanded our partnership with SafeSide Prevention, which provides video-based suicide training for doctors across the country. Through AFSP's work with SafeSide Prevention, doctors are educated as to the best practices for how to ensure that patients and others in the healthcare environment get help when they need it. Pilot evaluation from the partnership this past year showed that primary care providers who received SafeSide training reported significant gains in knowledge around managing patients at risk for suicide, and nearly 100% would recommend the training to colleagues.

Emergency Departments



Emergency Departments present a key opportunity to identify and treat the individuals at the highest and most immediate risk for suicide. Basic screening and interventions can provide a safety net for at-risk patients seen in emergency departments. Project 2025 is educating emergency medicine providers, and collaborating with key accrediting and professional organizations, to improve the acceptance and adoption of suicide screening and preventative intervention as the standard in emergency care.

By screening one out of five people seen in ERs, and providing short-term interventions such as Safety Planning and follow-up care, we can expect an estimated 1,100 lives saved through 2025.

INNOVATIONS IN SUICIDE AWARDS

AFSP is proud to partner with the American College of Emergency Physicians to present the Innovations in Suicide Awards. These awards highlight individuals in the acute care setting who are taking on the remarkable effort of developing innovative systems, models and interventions to improve the care of patients with suicidal ideation or behavior.



Marian (Emmy) Betz, MD, MPH

Dr. Betz is receiving this award on behalf of the team behind "Lock to Live," an innovative, patient-centered online tool that augments provider-delivered counseling. The Lock to Live tool helps suicidal adults and their families think through decisions and personal preferences about the storage of firearms, medications, and other potentially harmful items. The process of developing and testing the innovative "Lock to Live" tool contributed to the science and practice of both lethal means safety for suicide prevention and the field of decision science. We know that limiting access to lethal means when someone is in distress can save lives, making this a key tool for suicide prevention.



Stephen H. Anderson

Dr. Anderson and the city of Auburn are receiving this award for their creation of the R.E.A.D.Y program. In 2015, a King County Community Health Needs Assessment showed parts of south King County, including Auburn, as the most negatively impacted areas in the state for health, housing, and economic opportunity measures. The R.E.A.D.Y. program, which is reproducible and can be customized for any community, provides information about common mental/behavioral health issues, and basic tools to use in emergent situations. The program fills the gap before 911 can respond and prepares participants for what to expect when they arrive at an emergency department. The R.E.A.D.Y. program has been seen by over 3,000 citizens/organizations in King County and across the state. Thank you, Dr. Anderson and the city of Auburn, for all you are doing to prevent suicide.

Corrections Systems



According to the U.S. Department of Justice, suicide is the leading cause of death in jails, and the suicide rate in prisons continues to increase. Incarcerated people are particularly vulnerable to suicide, for a variety of complex reasons. Research tells us that people in times of transition are at especially high-risk for suicide, and that there are particularly critical windows during which we can provide effective, life-saving suicide prevention interventions. We need to change the culture of suicide prevention in our country's jails and prisons.

To do so, we worked with the National Commission on Correctional Health Care (NCCHC) to create an authoritative resource on preventing suicide in correctional facilities: the Suicide Prevention Resource Guide, which provides a road map for navigating the complexities of suicide prevention in correctional settings. The guide educates people who work in jails and prisons on how to better identify and help inmates at risk for suicide; safely manage those identified as high risk; and provide consistent, comprehensive training to all involved personnel.

Working together with NCCHC, we are educating both correctional staff, and health care professionals who work in the correctional system, about suicide risk and how to identify and care for the suicidal inmate-patient, to help save lives.

Volunteer Spotlight
Tandra Rutledge

“We’re Doing This!”



“I am a mental health professional and I work at the largest behavioral health hospital in the State of Illinois. I have been a mental health advocate all of my life. The work we do is so important at the hospital. We are focused on giving people hope, connecting people to resources they need, and building resiliency. We want to send the message that if you’re struggling, recovery is possible.

In the midst of our journey toward providing suicide safer care, I had the opportunity to learn about AFSP’s Project 2025, and got really excited because here was this national effort to reduce the suicide rate in our country 20% by the year 2025, and one of its four main areas was healthcare systems. It was almost like I raised my hand to say, “We’re doing this!” I knew without a doubt that working with AFSP on Project 2025 was something our hospital had to do.

We connected with AFSP’s Illinois Chapter, and planned the first summit of its kind in the nation to highlight AFSP’s Project 2025. We had national speakers come to the Chicagoland area to talk about the four critical areas of Project 2025. It was such a success that many of our partners who joined us in that inaugural summit committed to supporting us in hosting the summit for the next four years, each year focusing on one of the critical areas. Through our ongoing collaboration with AFSP and Project 2025, I am confident that we can reduce the suicide rate and give hope to those affected by suicide.”

Watch Tandra share her story on video at annual2020.afsp.org/tandra

Support

No one affected by suicide – whether they have lost someone, support someone who is struggling, or struggle themselves – has to feel alone. We create a safety net of support through our programs, and through the individuals who make up our AFSP family in local areas across the country.



Connecting People to Help

People in need of help are not always ready to connect to mental health services. AFSP's Interactive Screening Program (ISP) provides individual members of school and workplace communities with a safe and anonymous way to connect with the resources and support they need.

A Safe and Confidential Screening Platform

180K
people
connected to
professional help

Used by **145+**
schools and organizations

"ISP is such a valuable resource to have in our toolkit. It truly provides a unique channel of access for people who would otherwise not reach out for mental health services."

— ESPYR

Even when people know about available mental health services, shame, fear, and embarrassment often prevent them from seeking help. ISP is a customized, web-based platform utilized by mental health services at institutions of higher education, including medical and professional degree schools, hospitals and health systems, law enforcement agencies, and other workplace settings through Employee Assistance Programs (EAPs).

Through the platform, ISP provides a safe and confidential way for people to take a brief screening for stress, depression, and other mental health conditions. Individuals can then anonymously communicate with a program counselor to receive recommendations, feedback, and support for connecting to available mental health services. ISP is listed as a best practice for suicide prevention by industry leaders.

Since 2015, AFSP has been partnering with Espyr – a leading behavioral health company providing Employee Assistance and Student Assistance programs – to offer the Interactive Screening Program to create greater awareness of mental health needs and to intervene to reduce the risk of death by suicide. In 2020, Espyr extended ISP to new populations beyond their Employee Assistance Program (EAP) services for law enforcement clients to reach other known risk groups such as students, farmers and professional drivers.



Being There for Those Who've Lost Someone

Losing someone to suicide is different than other types of loss. Often there are questions, many of which may never receive a satisfactory answer. Survivors of suicide loss may experience feelings of loneliness and isolation, or even perceive that no one else could possibly understand the complexity and variety of emotions they are feeling.

Our chapters in every state are a testament to the fact that no one who has lost someone to suicide needs to feel alone. In our local communities, there are people who do understand – and through our Loss & Healing programs, they are ready to provide resources, support and understanding to help others heal.

International Survivors of Suicide Loss Day



Also known as "Survivor Day," International Survivors of Suicide Loss Day began in 1999, when Senator Harry Reid, who lost his father to suicide, introduced a resolution to the United States Senate that led to the creation of a day each year in which those affected by suicide could join together for healing and support. As the holidays are often a difficult time for suicide loss survivors, it was decided that Survivor Day would always fall on the Saturday before American Thanksgiving.

We support hundreds of large and small Survivor Day events around the world each year. At these informative and caring events, survivors of suicide loss come together to find connection, understanding, and hope through their shared experience. While each event is unique, all feature an AFSP-produced documentary which offers a message of growth, resilience, and connection. At events both large and small, it is incredible to see people coming together to support each other, as they find a way to heal together. The program had a 55% increase in attendees from the previous year.

Volunteer Spotlight
Laura Hughes

“My Sister Knew We Needed Some Help”



“When I lost my sister Alison to suicide in 2009, my other sister, Deb, knew we needed some help. We had recently lost our father to cancer, and our mom had been gone for about 20 years. So, it was just the two of us. We were both grieving in different ways. Deb felt more passionately about reaching out, so she attended the local International Survivors of Suicide Loss Day event in Long Island, NY.

I was more withdrawn. I felt that nobody could help me, and that nobody could understand. So, I refused to go that first year – which is ironic, since I now run the event.

I attended Survivor Day for the first time the following year. I expected everyone to be crying and sad. But I loved it. I understood instantly that I was in a room with people who knew exactly how I felt.

It was eye-opening to be in a place where so many people were sharing about their experiences. There are people who are many years out from their loss, and there

are people whose grief is more recent. It was the first time it clicked for me that not only are there others who know how I feel, but I could look at them and they were five years down the road, and they were okay. That meant I was going to be okay, too. And that was probably not something I had thought possible until I was in that room with those people on that day. It was amazing. It really was.

I've been running our local event for about four years now. In a recent one, someone came up to me and said, “I have never felt more understood than I have in the last twenty minutes, in this room.” And she had just walked in. It was so empowering, because that's what it's all about.”

**Watch Laura share
her story on video at
annual2020.afsp.org/laura**

Healing Conversations

Nearly
900
requests this year

Healing Conversations gives those who have lost someone to suicide the opportunity to talk with our trained volunteers, who have experienced suicide loss themselves, and know firsthand the pain associated with this type of loss. The program provides the bereaved, who may be in the early stages of grief, the opportunity to engage in a supportive, warm conversation with fellow suicide loss survivors. The volunteers are available to listen openly and without judgement, while providing resources, comfort and encouragement for the path ahead.

The program, which is available in person, on the phone or by video chat, received nearly 900 requests this year, nearly a **20% increase over the previous year**, showing a strong need for this unique connection.

Training the People Who Provide Support

Over the last year, 160 mental health professionals participated in AFSP's **Suicide Bereavement Clinician Training Program** to increase their clinical knowledge of the unique needs of working with those bereaved by suicide.

Nearly 100 loss survivors, mental health professionals and those seeking to lend support attended our **Suicide Bereavement Support Group Facilitator Training Program** to become suicide bereavement support group facilitators this past year.

Volunteer Spotlight
Vicky Mennare

“It Was Okay to Say It”



“I got involved with the American Foundation for Suicide Prevention in 2011 after I lost my dad to suicide. At first, I didn’t use the word suicide when I was telling people that my dad had passed away. But shortly after that, I realized there’s nothing to be ashamed of. It’s not a secret. I wouldn’t be afraid to say if he had died from a car accident or cancer. It was okay to say it. I also struggle with depression, myself, so that realization was especially powerful.

I understand mental health a lot better now than I did then. By volunteering with AFSP, I’m able to help people who are fairly new survivors of suicide loss. The Healing Conversations program is absolutely amazing because it arranges a visit between a person who’s recently lost someone to suicide with a volunteer who’s been through

it, themselves. That’s magical, honestly. I didn’t have that when my dad passed. So to be able to offer this, now, to other people, is super cool.

A lot of people still don’t feel comfortable saying the word suicide. Even people who are worried about someone, they can be afraid to say it. But once you start saying it, you take ownership of it and you realize it’s okay. Being able to talk about it is how we’re going to save lives, and help people understand, and help people heal. Saying it can change the world.”

Watch Vicky share
her story on video at
annual2020.afsp.org/laura

Community

We are stronger together.
Through our volunteers, and local chapters in communities across the country, we are united in the goal to spread hope and #StopSuicide.

Shining a Spotlight on Our Chapters and Volunteers

Volunteers and staff members from our local chapters across the country came together this past January in Denver, Colorado for the 15th Annual Chapter Leadership Conference. With the theme “Saving Lives in Your Community,” the three-day event was an exciting look ahead, as well as an opportunity to celebrate the efforts of our chapters throughout the past year. Presentations included a panel discussion on diversity within our chapters, discussions of public policy goals, updates on our programs, and a talk outlining the science behind our Project 2025 initiative.

The conference shined a spotlight on the work of our volunteers, and formally recognized those chapters that have gone above and beyond in their efforts this past year. Arapahoe High School Walk was recognized for its fundraising efforts as the highest-earning Campus Walk, while the Chicagoland Community Walk was recognized for its work in raising over a million dollars, after becoming the first Community Walk ever to do so last year. AFSP’s Illinois Chapter was recognized as Overall Chapter of the Year in acknowledgement of the education programs delivered, awareness building in their community, and including the success of their Chicagoland Walk.

As always, the event gave our volunteers and staff the opportunity to share their experiences, and leave feeling more inspired than ever to continue our important work.

Running in Support of Suicide Prevention



"In May of 2014, when I was in my early 30s, I lost one of my best friends from high school to suicide. The following August, less than four months later, I lost another friend to suicide. I was kind of lost, trying to figure things out. I had always had the idea in the back of my mind that I wanted to run in the L.A. Marathon. My mom and sister had both done it, so I knew at some point I had to do it!"

My roommate was running, and he told me I could do it for a charity. I saw that the American Foundation for Suicide Prevention was listed, and I had a moment of clarity. I thought, well, okay, I'm running a marathon now. I will be able to run in honor of my friends.

I had a couple of months to physically train. It was also the first time I was doing a fundraising campaign. That was challenging in itself, because it meant sharing my story with others on social media, and I wasn't quite comfortable with that yet. But once I started letting people know why I was running, the support that came in was amazing.

Running with my friends' pictures on my back, and crossing the finish line, was the most empowering experience I had ever been a part of. Running with our Team AFSP gear on, we got lots of positive comments like, "Thanks for what you're doing!"

I look back on that experience as a turning point, because it was a catalyst for tremendous personal growth. I wanted to stay involved, so I went to the Campus Walk at UCLA, met some of the volunteers, and became a volunteer myself. I was asked to be the co-captain for Team AFSP in the L.A. Marathon the following year. It's been six years now, and we just keep doing it! Each year, we have more runners and raise more money and more awareness. This past year we raised \$73 thousand. Now I'm on my local AFSP chapter's board of directors, and it all started with the marathon."

Learn more about how you can join a Team AFSP event in your area at afsp.org/team-afsp

Chapters of the Year

Our Chapter Leadership Conference gave us the chance to recognize the outstanding accomplishments of our chapters over the past year. It is through their efforts that we are making a difference in communities across the country.





North Carolina
Chapter of the Year, Mid-Size Market



Western New York
Chapter of the Year, Mid-Size Market



Maryland
Chapter of the Year, Mid-Size Market



Eastern Missouri
Chapter of the Year, Large Market



Georgia
Chapter of the Year, Large Market



Orange County, California
Chapter of the Year, Large Market

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2020 Overnight North Stars

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Statement of Financial Position (Year Ended June 30, 2020)**Assets**

Current assets:

Cash	\$ 12,533,439
Investments	29,179,677
Unconditional promises to give and other receivables	942,607
Prepaid walk material	5,108,015
Other prepaid expenses	1,084,586
Total current assets	48,848,324
Property and equipment:	
Property and equipment, at cost	4,498,641
Less accumulated depreciation	956,454
Property and Equipment, at cost less depreciation	3,542,187
Other assets:	
Restricted cash	707,576
Restricted investments	1,603,590
Investments - board-designated	2,489,510
Educational films, net	59,583
Security deposits	29,896
Total other assets	4,890,155
Total assets	\$ 57,280,666

Liabilities and Net Assets

Current liabilities:

Grants payable	\$ 5,176,913
Accounts payable and accrued expenses	1,712,667
Paycheck Protection Program loan payable - current portion	649,403
Deferred event revenue	2,379,006
Total current liabilities	9,917,989

Noncurrent liabilities and deferred credits:

Grants payable	3,134,927
Paycheck Protection Program loan payable - long term portion	1,623,507
Deferred rent credit	2,813,259
Total liabilities	17,489,682

Net assets without donor restrictions:

General operating	33,580,394
Board-designated	2,489,510
	36,069,904
Net assets with donor restrictions	3,721,080
Total net assets	39,790,984
Total liabilities and net assets	\$ 57,280,666

Statement of Activities (Year Ended June 30, 2020)

	Without Donor Restrictions	With Donor Restrictions	Total
Revenues, gains and other support			
Functions			
Revenues	\$ 32,873,233	–	\$ 32,873,233
Direct expenses	(4,930,213)	–	(4,930,213)
Net function income	27,943,020	–	27,943,020
Donations	12,288,554	1,362,231	13,590,785
Other revenues, net	373,781	68,620	442,401
Investment income	809,509	52,742	862,251
Net assets released from restrictions	96,036	(96,036)	–
Total revenues, gains and other support	41,450,900	1,387,557	42,838,457
Expenses			
Program services	27,895,680	–	27,895,680
Management and general	2,435,188	–	2,435,188
Fundraising	4,549,208	–	4,549,208
Total expenses	34,880,076	–	34,880,076
Change in net assets	6,570,824	1,387,557	7,958,381
Net assets			
Beginning	29,499,080	2,333,523	31,832,603
Ending	\$ 36,069,904	\$ 3,721,080	\$ 39,790,984

Statement of Functional Expenses (Year Ended June 30, 2020)

	Research	Prevention and Education	Loss and Bereavement Programs
Grants	\$ 6,336,803	—	—
Salaries and Wages	648,450	3,890,694	2,383,737
Employee Health & Retirement Benefits	121,527	729,162	446,740
Research, Educational and Survivor Conferences and Programs	65,267	1,646,106	603,208
Out of Darkness Programs	—	776,607	931,929
Office	52,069	857,314	424,822
Occupancy	105,915	635,492	389,351
Telecommunications and Internet	3,469	46,908	33,297
Equipment Rental and Maintenance	29,010	190,550	120,322
Travel	47,543	687,497	388,880
Consultants	203,325	1,891,743	659,093
Professional Fees	—	—	—
Depreciation	—	—	—
Total	7,613,378	11,352,073	6,381,379

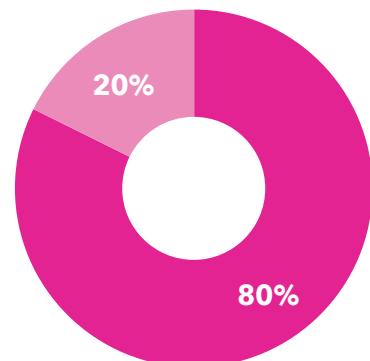
Program Services		Supporting Services		
Advocacy Programs	Total Program Services	Management and General	Fundraising	Total Expenses
–	\$ 6,336,803	–	–	\$ 6,336,803
1,185,442	8,108,323	1,043,161	2,139,083	11,290,567
222,166	1,519,595	195,501	400,889	2,115,985
120,967	2,435,548	–	109,418	2,544,966
–	1,708,536	–	672,050	2,380,586
196,784	1,530,989	52,370	197,846	1,781,205
193,626	1,324,384	170,386	349,390	1,844,160
24,551	108,225	3,099	15,608	126,932
70,215	410,097	45,274	97,473	552,844
135,935	1,259,855	91,586	143,688	1,495,129
399,164	3,153,325	182,156	423,763	3,759,244
–	–	259,124	–	259,124
–	–	392,531	–	392,531
2,548,850	27,895,680	2,435,188	4,549,208	34,880,076

Program Services and Administrative Costs

We invest our resources wisely to put more of every dollar toward research, education, advocacy, and support for those affected by suicide. This past year we kept administrative and fundraising costs to 20%, well below the industry standard of 35%.

Expenses

■ Program Services	\$27,895,680
■ Administrative Costs	\$6,984,396



In challenging and uncertain times, it is more important than ever that we take steps to prevent suicide, and be there for those affected.

Thank you for helping us to #KeepGoing, stronger than ever, as we continue to build momentum in the movement to **#StopSuicide**.



**View the 2020 Annual
Report online at
annual2020.afsp.org**



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Foundation
for Suicide
Prevention**

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