The Centers for Disease Control and Prevention (CDC) is committed to ensuring all Americans, especially those at risk for suicidal behavior, live their lives to their fullest potential. Our key strategy in preventing suicidal behavior is promoting and strengthening connectedness at personal, family and community levels.

**Suicide as a Public Health Problem**

Self-directed violence, including acts of suicidal behavior (fatal and nonfatal attempts), suicidal ideation (thinking about, considering, or planning for suicide), and nonsuicidal intentional self-harm (behaviors with the intention not to kill oneself, as in self-mutilation), is a serious public health problem in the United States and around the world. Fatal and nonfatal suicidal behavior has the most pronounced morbidity and mortality, and is thus the focus of CDC’s strategic direction.

- 32,637 suicides occurred in the United States in 2005—this means that there is a suicide every 16 minutes.
- 11th leading cause of death for all Americans.
- 535,000 visits to hospital emergency departments for self-directed violence in 2004.
- Lifetime cost of nonfatal injury and deaths due to suicidal behavior was estimated at $33 billion in 2000.
- Populations with high rates of suicide include youth, veterans, and people over the age of 65.

**CDC’s Role in Preventing Suicidal Behavior**

The mission of the Centers for Disease Control and Prevention’s (CDC) Division of Violence Prevention (DVP) is to prevent violence through surveillance, research and development, and capacity building. The Division’s public health approach to violence prevention complements the methods used by the criminal justice and mental health systems. Its unique features include:

- **An emphasis on primary prevention.** CDC seeks to stop suicidal behavior before it occurs. This involves reducing the factors that put people at risk for experiencing violence. It also includes increasing the factors that protect people or buffer them from risk.

- **A commitment to developing a rigorous science base.** CDC’s approach includes defining the problem through surveillance, using research to identify risk and protective factors, developing and evaluating new prevention strategies, and ensuring widespread adoption of effective programs.

- **A cross-cutting perspective.** Public health encompasses many disciplines and perspectives, making its approach well suited for examining and addressing complex problems like suicidal behavior.

- **A population approach.** Part of public health’s broad view is an emphasis on population health—not just the health of individuals.
CDC’s Strategic Direction for Suicide Prevention

Promoting and strengthening individual, family, and community connectedness to prevent suicidal behavior.

Components of Connectedness:

- **Connectedness between individuals.** Greater degrees of social integration (e.g., number of friends, high frequency of social contact, low levels of social isolation or loneliness) serve as protective factors against suicidal thoughts and behaviors.

- **Connectedness of individuals and their families to community organizations.** Positive attachments to community organizations like schools and churches can increase an individual’s sense of belonging, foster a sense of personal worth, and provide access to a larger source of support.

- **Connectedness among community organizations and social institutions.** Formal relationships between support services and referring organizations help ensure that services are actually delivered and promote a clients’ well-being—as in the case of the primary care system and the mental health system.

CDC’s Strategy:

DVP’s strategy to prevent fatal and nonfatal suicidal behavior is organized around four general areas of public health research and practice: measuring impact, creating and evaluating new approaches to prevention, applying and adapting what we know, and building community capacity for implementing prevention strategies.

**Measuring Impact**

- Expand the National Violent Death Reporting System (NVDRS) to all 50 states.
- Develop a system for monitoring nonfatal suicidal behavior among adults.
- Improve operationalization, measurement, and monitoring of connectedness.

**Creating and Evaluating New Approaches to Prevention**

- Identify and evaluate strategies that prevent suicidal behavior by promoting connectedness.
- Identify and evaluate strategies that interrupt the development of suicidal behavior by enhancing connectedness.
- Evaluate the impact of interpersonal violence prevention strategies on suicide behavior to develop more comprehensive and efficient prevention strategies.

**Applying and Adapting What We Know Works**

- Accelerate the adoption and adaptation of evidence-based strategies for preventing suicidal behavior.

**Building Community Capacity**

- Build community capacity to implement evidence-based prevention approaches.
- Develop prevention and strategy guidance products for communities.
- Establish partnerships that facilitate the dissemination and implementation of prevention strategies.

For more information:

Centers for Disease Control and Prevention
National Center for Injury Prevention and Control
4770 Buford Hwy, NE, MS F-64
Atlanta, GA 30341-3717

1-800-CDC-INFO (232-4636)  cdcinfo@cdc.gov  www.cdc.gov/injury