Together we can help #StopSuicide
Over the course of the pandemic, people have become increasingly comfortable talking about their mental health. But the topic of suicide – when it comes up – is still scary for many people to think about.

In 2021, AFSP decided it was time to deepen the conversation.

By educating people more fully about what leads someone to suicide, the ways we can all help to prevent it, and what resources are available – and helping people not be afraid to ask when they’re worried about someone, or for help when they need it themselves – we empower communities to address this leading cause of death.
I want to see our suicide rates drastically reduced. We all need to be open, and know it’s okay not to be okay sometimes.

Tabitha Childers  
Arkansas Chapter  
p. 70

Over the last few years I’ve learned how to take better care of my own mental health through therapy, journaling, walks, and sharing my story with others. Sharing my story is a way of bringing truth to the surface.

Ihsan Hines  
Geater Philadelphia Chapter  
p. 14

I came to AFSP because I wanted to be part of an experience that balanced honoring those we’ve lost with supporting suicide loss survivors and those who struggle, and infusing that work with hope.

Jennifer Butler  
South Carolina Chapter  
p. 77
I don’t want anyone to feel alone when they grieve a loved one lost to suicide. I don’t want anyone to feel like they have to live in shame. I want people to know you can learn how to survive and also thrive.

Amy Grosso
Central Texas Chapter
p. 82

I hope to see a world where mental health is treated the same as physical health, with science-based treatment options and educational programs that give children the coping tools they need that they will continue to use throughout their lives.

Tim Krivanek
Michigan Chapter
p. 62

We all have mental health – and no one’s mental health is fully supported until everyone’s mental health is fully supported. It’s time we take the next step, spread awareness of #MentalHealth4All, ask more deeply about what someone is experiencing, and if we need it, find help together.

Together, we can help #StopSuicide.
As 2021 comes to a close, we can’t help but reflect on the past two years and the unprecedented upheaval we all have experienced personally, professionally, and socially due to the global pandemic. While we have faced unexpected challenges and stressful uncertainties, one thing we are grateful for is how we have come together as a nation to #StopSuicide.

While we recognize the pandemic has impacted the emotional and economic well-being of many individuals and families, we remain hopeful that we will meet these challenges, and improve the mental health of all Americans. We can prevent loss of life from suicide 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 the pandemic is over.

In 2021, we made progress in our mission to save lives and bring hope to those affected by suicide. Here are a few highlights.

AFSP’s nationwide network of chapters delivered more than 2,000 programs virtually and in person. These programs included our signature program, Talk Saves Lives™: An Introduction to Suicide Prevention, which is now available in Spanish, and has specialized modules for older adults, workplace settings, firearms owners, and LGBTQ audiences.

We launched new programs, including It’s Real: Teens and Mental Health, which offers teens tips for self-care and on having a caring conversation with a peer; and an Introduction to Supporting Those At Risk, which provides information and resources for supporting a loved one who has struggled or attempted suicide. We also continued our Town Hall series on health disparities in communities of color.

Our Interactive Screening Program (ISP) increased to 168 sites and is now used by colleges and universities, medical schools, law enforcement agencies, healthcare systems, the VA, employee assistance programs, and more. Since its inception, ISP has connected over 200,000 people who are struggling to professional help.

International Survivors of Suicide Loss Day brings together those affected by suicide loss for connection, healing and support. This year, we reached over 25,000 loss survivors through hundreds of virtual and in-person events in the U.S. and around the world, and through a Facebook Live event. We also held our first “Day of Hope / Dia de Esperanza,” for loss survivors in the Latinx community.

AFSP funded 37 new studies, bringing our current investment in research to $23 million. New this year were nine studies addressing AFSP’s research priority on underrepresented communities. We also held a virtual International Research Summit in partnership with the International Academy for Suicide Research, that had over 550 researchers from 37 countries discussing the latest research findings.

We held a virtual Advocacy Forum where volunteer advocates met with more than 200 Congressional offices to urge support of access to tele-mental health, and increased federal funding.
for suicide prevention research, the National Suicide Prevention Lifeline, and implementation of the new 988 crisis call number. One outcome is that the Lifeline is receiving a major increase in funding and federal funds will be provided to states for support of local crisis services.

AFSP’s state advocacy work grew in 2021 with virtual State Capitol Days held in all 50 States. Advocates met with state legislators to champion passage of 174 bills on mental health and suicide prevention. Over 30 of these bills were signed into law.

Last year, AFSP’s public awareness campaigns reached tens of millions through our #MentalHealth4All campaign during Mental Health Awareness Month, and our Together, we can help #StopSuicide campaign during National Suicide Prevention Awareness Month. Our partnerships with media and entertainment provided safe and important messages to the public about mental health and suicide prevention.

Nothing captures #StopSuicide more than our bold goal to reduce the U.S. suicide rate 20% by 2025, and our Project 2025 work with healthcare systems, emergency departments, corrections and the firearm-owning community. We are making progress, as the U.S. suicide rate decreased 3% in 2020, and this is after a similar decrease in 2019, which was the first annual decline in two decades.

This decrease is encouraging and holds the promise of saving many more lives; but we can’t let up on our efforts, as suicide is showing signs of increase in some groups, such as young adults and youth of color, and we are still losing more than 45,000 people to suicide every year.

While we are proud of the incredible strides made in building strong, suicide safe communities, there is more to be done. We know we can’t do our lifesaving work alone, so we thank our volunteers, donors, Out of the Darkness walkers, researchers, advocates, and partner organizations for joining us as we lead the fight to prevent suicide.

Together, we will #StopSuicide.

Robert Gebbia  
Chief Executive Officer

James Compton  
Chair, Board of Directors
Suicide prevention starts with awareness. Awareness that we all have mental health, just as we all have physical health – and that while most people living with a mental health condition will not die by suicide, having a mental health condition may contribute to increased suicide risk.

AFSP builds awareness of what we know about suicide – the common risk factors and warning signs, and what leads someone to consider taking their own life – and what we can all do, as individuals and as a society, to be there for each other so that no one ever has to feel alone.

Through our Out of the Darkness Walks, our education programs, and our campaigns that help create a culture that’s smart about mental health, we raise awareness of this leading cause of death.
The Out of the Darkness Walks

When AFSP’s Out of the Darkness Walks first started in 2002, organizers wondered whether people would be willing to walk openly through the streets of their towns or cities to raise awareness for suicide in the same way they would for other leading causes of death.

The answer was a resounding “Yes!” Suicide is an issue that affects people everywhere. For the last 19 years, individuals in communities across the country have been willing to show up, and send the message that no one has to be alone – and that if we join together, our collective voices can truly make a difference.

The COVID-19 pandemic has raised perhaps the greatest challenge to the Walks since they began. Suicide prevention is especially critical during this challenging time. Could events that seemingly drew so much of their power by bringing people physically together continue when so much has shifted online due to safety concerns?

Miraculously, in a tribute to the steadfastness and resilience of our Walks family, our staff, volunteers and supporters rose to the challenge. Now more than ever, we are #TogetherToFightSuicide.

AFSP’s Community, Campus, and Overnight Walks continued this past year, providing one of the most inspiring moments in the history of these important events.
Bringing Communities Out of the Darkness

The Community Walks, held in hundreds of cities across the country, are the core of the Out of the Darkness movement, with friends, family members, neighbors and coworkers walking side-by-side, supporting each other and in memory of those we’ve lost.

In the midst of unprecedented challenges – from physical safety issues, to burnout, to limited funding and the many complexities that arose during a global pandemic – AFSP staff and the Walks community found creative and resourceful ways to keep these inspiring events going: mastering new platforms to stream live events and hosting recorded Walk programs, raising interest and keep participants engaged and motivated, and continuing to attract sponsorships and much-needed funds when resources are tight for potential partners.

Walks transformed into powerful, active virtual “Experiences,” supported by safe, in-person engagements throughout the season to foster an even stronger connection among our participants than ever before.

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

80K participants
13K teams  ~$12.8M raised  420 walks
Bringing Campuses Out of the Darkness

Young people represent the future of how our society understands and supports mental health. Teens, young adults, faculty and family members come together each spring to participate in AFSP Campus Walks at high schools, colleges and universities across the country.

School was different this year for so many - yet there was never any doubt that creative and dedicated students would rise to the occasion, spreading the message among their peers that suicide is something that must be faced together, with help and support available to anyone who needs it.

With only a few traditional, in-person events taking place in physically safe ways, most Campus Walks this year went virtual. Nevertheless, our young walkers and their supporters came through, staying engaged in clever ways, including a Campus Day of Action on April 24, with 38 events taking place and students sharing and posting their unique activities to spread hope and awareness of suicide prevention.
The Overnight

AFSP’s flagship fundraising event, The Overnight, traditionally brings thousands of people together to walk 16 miles from dusk to dawn in solidarity for this important, deeply personal cause. The connections people make last a lifetime, and the funds they raise save lives. It is an event that is powered by love, support, hugs and togetherness.

Pivoting once again this year to a virtual event due to the pandemic, the 2021 Overnight was a rousing success. Inspired and engaged, participants built their excitement leading up to the main Overnight Virtual Experience event by pledging to take #OvernightAction such as walking, running, journaling, bicycling, reading, yoga, and more to engage their friends and followers. Our Walkers stayed connected to each other along the way through a new, private Facebook Group, where they shared stories of hope and connection with each other.

Throughout June, we encouraged this year’s Overnight participants to truly “walk” virtually, through the innovative MoveSpring app, which recreated a traditional Overnight route using a custom map of New York City, allowing Walkers to move through Rest Stops, Midnight Snack, Cheering Stations and special Mindful Moments along the route, unlocking milestones as they completed their walk. Participants were able to communicate and chat with one another, sharing photos and stories, and supporting each other. A special Overnight Virtual Experience event program was held on June 26, featuring inspiring speeches, discussions, and videos about why the cause is so important, and keeping us all going until next year’s event, when we hope to gather in person once again.

We wish to thank this year’s Overnight sponsor Sunovion, for making this important event possible.

1,500+ registered participants

$938,000+ raised

Praise for This Year’s Overnight

“I am so grateful to this incredible organization, and The Overnight Staff, who make healing a little easier each year. The Overnight keeps me inspired by so many who share the mission to stop suicide!”

“AFSP did a great job pivoting to a virtual platform during the pandemic. I am so proud of everyone for their hard work to keep the walk going during this time. Thank you!”

“I gained personal comfort in my grief over the loss of my spouse. The Overnight gave me the courage to finally begin sharing with others.”
Volunteer Spotlight
Ihsan Hines
Greater Philadelphia Chapter

What first prompted you to participate in an AFSP Community Walk?
I have a double dose of connectivity to mental health and suicide. My younger brother Atif died from suicide on August 31, 2007, and I have personally battled depression and thoughts of suicide several times since his death.

When my brother died, my main desire every day was to wake up to a different world: one in which Atif was still alive. Even though his death was felt by each of his friends and my family, the loss impacted each of us in different ways. My mother lost a son, and I lost a brother. A special community surrounded his life, and we became a community seeking to move forward after his death.

I learned about the Philadelphia Walk, and formed a small team in memory of my brother. There were so many people walking in the same direction towards the Art Museum, many of whom, like us, were wearing garments honoring their lost loved ones. It was the first time I felt I was around people who could truly relate to my own experience. I could sense purpose in the air, and I could feel the love. There was a lot of smiling, some crying. Each part was necessary.

How have the Walks continued to be a part of your life?
The healing process for me includes the Walk here in Philadelphia each October. Thanksgiving and Christmas can be difficult moments when our loved ones aren’t alive to celebrate with us. So the Walk can be very encouraging prior to that time of year.

Because of the Walk, the Art Museum and the trails surrounding the area have become a safe space for me to visit year-round. It’s a necessary step in a lifelong journey of healing.
When my brother died, my main desire every day was to wake up to a different world: one in which Atif was still alive.

How has your connection with AFSP grown?
Through my experience with the Walk, I have found a powerful connection with this organization. I am a spoken word artist and songwriter, and when I was putting together an arts event in memory of Atif, the Philadelphia Area Director and other board members supported me with resources, and eventually encouraged me to join the Philadelphia Chapter as a board member. In January 2021 that became a reality.

Over the last few years I’ve learned how to take better care of my own mental health through therapy, journaling, going for walks, and sharing my story with others. The healing process has been an uphill climb, but it’s been so worth it. Sharing my story while still healing, myself, is a way of bringing truth to the surface.

What does the phrase #MentalHealth4All mean to you?
Maya Angelou once said in a poem: “We are more alike, my friends, than we are unalike.” That’s so true and beautiful.

When I envision my hope for the future, stigma around mental health will be a thing of the past. Fathers and mothers will heal properly from trauma, and teach children how to take care of their mental health at very young ages.

I plan to participate in the healing of our world by being transparent, and teaching others what I’ve learned through my times of struggle and triumph. I plan to change the world by loving my family properly and teaching my own children and other people in my community how to find hope.

When my brother died, my main desire every day was to wake up to a different world: one in which Atif was still alive.
Volunteer Spotlight
Nancy Cooper
Orange County Chapter

How and why did you first get connected to AFSP?
I lost my son Geoff in 2000, over 20 years ago. Ten years after his death, I was introduced to AFSP by volunteering with my daughter for an Out of the Darkness Community Walk. I found out there were people trying to form a chapter in Orange County. I met up with them and began my journey with AFSP. I was part of the founding board and am now the chapter chair.

When my son died, I didn’t know about the risk factors and warning signs. I often wonder how my life could have been different if only I had known. At some point, I decided I had to turn Geoff’s death into a positive. The best I can do is to help educate the public so that other families don’t experience the pain I did when I lost my son.

What does The Overnight mean to you?
The Overnight is such a profound event. The idea of walking in the dark of night and emerging into the sunrise is truly inspiring. Like all the walks, it gives people a chance to meet other people affected by suicide, and have the opportunity to support one another.

How was this year’s event different because of the pandemic?
At first, I was hesitant about not being able to walk with other people as we normally do. But my Overnight Experience was amazing! Here it was 20 years since Geoff’s death, and this was by far the most meaningful and healing event I have participated in.

Since we were still unable to gather en masse because of COVID, I created my own special route in memory of Geoff. I got up on Saturday morning and walked
to the cemetery where Geoff is buried, and spent a little time there. I then walked past the schools he attended – grammar, middle and high schools. Then I headed home by way of our favorite place to eat – the local Jack-in-the-Box – and got a chicken fajita pita in his memory. They were our fav.

The total route took me about 3 hours and 15 minutes. I got home refreshed and feeling really good. While I look forward to the time when we can all walk together again, this year I was able to think and share my thoughts just with him. It was more comforting and healing than I expected.

I have a favorite quote about grief: “You just keep living, until you are alive again.” On that day, I truly felt alive after my walk.

What does the phrase #MentalHealth4All mean to you?

I would like to see a world without suicide, in which everyone takes care of their mental health, and all people support one another and are kind to each other. Everyone should have access to the mental health support and services that they need. And everyone should know how to reach out and help those who are struggling.
Creating a Safer World Through Education

AFSP’s prevention education and partnership programs, delivered by our local chapters throughout the country, inform people everywhere – families, friends, neighbors, and coworkers – of what they can do to make a difference in their communities. Building on what we’ve learned from research, and using the latest data, AFSP’s evidence-informed education programs give a clear understanding of what leads someone to consider suicide, providing participants with practical knowledge of how to spot the warning signs, talk safely and compassionately to those they care about, connect people to help and resources, and support at-risk individuals following an attempt.

This year, as the pandemic continued, AFSP created specialized virtual presentations, as well as making education programs like Talk Saves Lives, More Than Sad, and It’s Real available virtually. By providing these and other AFSP signature education programs, 1,300 presentations were delivered virtually reaching 30,000. In this way, we continued to provide life-saving information to individuals and groups throughout the country, in support of #MentalHealth4All.

Through this experience, and what we learn through innovative new ways of reaching people everywhere, our educational initiatives will continue to evolve and become stronger than ever going forward.
Talk Saves Lives™

Our signature education program, Talk Saves Lives: An Introduction to Suicide Prevention, covers the general scope of suicide, providing participants with a clear understanding of this leading cause of death, including the most up-to-date research and data on suicide prevention. Participants gain an understanding of the health, historical, and environmental factors that put individuals at risk, as well as guidance on behaviors to look for, and how to get help for someone in a suicidal crisis. The program also enlightens people to the protective factors known to proactively lower suicide risk.

Talk Saves Lives reaches a wide range of audiences, with specialized modules that have been created for particular segments of the population, including older adults, workplace settings, firearms retailers and range owners, and LGBTQ audiences. The standard presentation is also available in Spanish.

Since its launch in 2015, Talk Saves Lives has reached over 175,000 people across the country.

As the pandemic continued, AFSP adapted this important program to a virtual setting reaching over 24,000 participants.

2K education programs and resource events

101K participants
Talk Saves Lives™: An Introduction to Suicide Prevention in the LGBTQ Community

We all have a role to play in preventing suicide, and those in the LGBTQ community may face additional challenges and barriers to help because of discriminatory factors. The new program, Talk Saves Lives: An Introduction to Suicide Prevention in the LGBTQ Community, gives participants essential and lifesaving understanding of topics including:

- the latest research related to LGBTQ suicide prevention
- suicide risk and its unique considerations in LGBTQ communities
- how to recognize suicide risk factors and warning signs for LGBTQ people
- how to seek and offer support for yourself or others
- crisis resources and services for the LGBTQ community
- what communities can do to support LGBTQ people
New Programs Created During the Pandemic

Enhancing Mental Health During Covid
Our new program, Enhancing Mental Health During Covid, created specifically to reach audiences during this unprecedented time, provides a personalized introduction to AFSP as an organization, and lets people know how to best make use of the programming and resources made possible by their local AFSP chapter.

Designed for general audiences and for those age 15 and up, and available in both English and Spanish, the program meets people where they are today, showing them how they can put a focus on their own mental health, and support those they care about. The presentation includes practical self-care tips, and helpful resources we can all use as we take our mental health seriously and get through the pandemic, together.

Introduction to Supporting Those At Risk
When someone attempts suicide or experiences suicidal thoughts, it can be difficult to know how to best support them in their recovery. It is absolutely vital that we educate and provide support to those who are caring for someone at risk.

Developed to address this important topic, particularly during the pandemic when a virtual program was needed, Introduction to Supporting Those At Risk shares information with family members, friends and others on how to provide support to those with lived experience. The program covers:

- understanding behaviors and experiences related to suicide
- the recovery process for someone following a suicide attempt
- strategies for supporting a loved one’s recovery
- the importance of self-care for oneself, when supporting someone else

It’s Real: Teens and Mental Health
Teens experience a number of factors related to mental health as they develop into adults. The new program It’s Real: Teens and Mental Health – designed for high school students ages 14 or older – takes these considerations into account, as participants learn how best to care for their own mental wellness through a time of growth and challenges.

This program teaches youth to pay attention to the unique ways their mental health works, and the ways it can be optimized, including both positive and negative influences on their mental health and wellbeing. By learning about these patterns, participants can be empowered to make healthy decisions to improve their own resilience and mental health. Attendees learn:

- what mental health is and how it’s both similar to, and different from, physical health
- the interaction between brain, body, and life circumstances
- how to notice the signs of someone needing help
- tips and strategies for having a caring conversation with someone they are worried about
- methods of self-care for mind, body, soul, and surroundings
- how reaching out to a trusted adult can make all the difference
- examples of resources they can use for support

The program includes brief video narratives from Gen Z influencers, authentically sharing their own experiences with mental health.
What first made you interested in mental health and suicide prevention?
My interest in helping those with mental health challenges originated when I was working as a Registered Nurse in an inpatient psychiatric unit. I worked with families who struggled to understand the dynamics of their loved ones who were experiencing distress. This taught me the need for greater education and advocacy. When I moved from clinical nursing practice to academia, I had the privilege of teaching mental health nursing to future nurses. We see people in all care settings with mental health needs.

On a personal level, I had experienced a period of hopelessness and helplessness when I first moved to the U.S., after fleeing from my homeland in Sri Lanka due to the civil war. I have also seen students and close friends struggle. In recent years, learning about young people ending their own lives in our community made a deep impression in my heart. I wanted to do something to make a difference.

How did you first get involved with your local chapter?
I am intentional about incorporating mental health and resiliency into our nursing curriculum. I first reached out to my local AFSP chapter in 2017, because I wanted to bring the Talk Saves Lives program to campus. It was then that I became a volunteer, inspired by the Project 2025 goal of reducing the suicide rate by 20% by 2025. I chaired our first Out of the Darkness Campus Walk, and eventually became a board member, enabling me to focus more on bringing suicide prevention education to our community.

How have you used AFSP’s education programs on your campus?
In addition to being director of the first-year seminar program, I’m also an advisor for the Mental Health Advocate Team.
I worked with families who struggled to understand the dynamics of their loved ones who were experiencing distress. This taught me the need for greater education and advocacy.

(MHAT) on campus, which is a student-led club formed after a few students reached out to me after our first Out of the Darkness Campus Walk. I've incorporated both Talk Saves Lives and the It’s Real: College Students and Mental Health film on campus.

Through Talk Saves Lives, participants gain insight into why people reach a point where they want to end their lives and learn the warning signs and how to respond. It naturally leads to conversations about protective factors and building resiliency. I appreciate the research-based curriculum. The program is easy-to-understand, and the common language used to deliver the content helps make it accessible for participants.

I use the It’s Real documentary in my student leader training and first-year seminar classes. Learning about real stories of students across the country who thrive in college with mental health challenges is inspiring and emphasizes the importance of seeking help and utilizing available resources on campus.

What does the phrase #MentalHealth4All mean to you?

We are created as holistic beings, meaning we need to have a healthy balance of all the aspects of who we are: physical, spiritual, emotional, mental, and social. I think #MentalHealth4All means that if we neglect our mental health, it will affect our overall well-being, and we lose the ability to live a healthy and happy, balanced life.
Why is suicide prevention important to you?
I have known people who have attempted suicide - each of them in different periods of my life, but those experiences were unforgettable. My youngest daughter had a friend who made an attempt in middle school, and I realized that having conversations with both my daughters about suicide was important. I wanted to help them cope with what was going on, and also to make sure they felt comfortable talking to me about this subject. But it wasn’t until I first heard about AFSP, through my best friend, that I realized how many people were affected by suicide. I thought to myself, “What a great opportunity it would be to get involved with my local chapter, educate myself and my daughters, and make a difference in my community.”

What kinds of things do you think about when talking to your daughters about mental health?
When it comes to suicide prevention, education is so important. Being a single parent isn’t easy, but I believe that we as parents must educate ourselves and take care of our own mental health, as we are the lead example for our children. We also need to recognize how society and things like social media have changed from when we were growing up. This generation is dealing with so many different things than what we dealt with, but the important things - and the subjects we may be afraid to talk about - remain the same.
How have you been involved in bringing education to your community?

Mental health and suicide are topics that are not spoken about enough in the Latinx community, though suicide has always impacted us. It’s exciting to me that AFSP’s Talk Saves Lives education program is available in Spanish. The program teaches adults the warning signs, how suicide affects different people due to many different factors, and ways we can all help ourselves and others in the community. The presentation also includes suicide research, and gives people a better understanding of protective factors. Being able to deliver the program in Spanish helps me educate and bring awareness about suicide to the Latinx community and let them know about all the great resources AFSP has available. It’s a great way to make an impact.

What does the phrase #MentalHealth4All mean to you?

The questions people ask during a Spanish Talk Saves Lives program are very similar to when we do the presentation in English. At heart, people are one and the same. We just speak different languages.

This generation is dealing with so many different things than what we dealt with, but the important things - and the subjects we may be afraid to talk about - remain the same.
Spreading Awareness and Hope in the Fight to #StopSuicide

AFSP creates a culture that’s smart about mental health by sharing lifesaving information and generating important conversations through our campaigns and messaging throughout the year.

From social media, traditional journalism, television and film and beyond, AFSP raises awareness to let people in communities everywhere know we all have a role to play in keeping ourselves and those in our communities safe.

Mental Health Awareness Month

In May, for Mental Health Awareness Month, we sent the message that no one’s mental health is fully supported until everyone’s mental health is fully supported. That’s why for our #MentalHealth4All campaign, we asked people to take one simple action to encourage their friends, family, and community to take their own and others’ mental health seriously.

For some, it meant reaching out to someone on a personal basis. For others, it meant advocating for legislation that addresses the disparity in mental healthcare access for underrepresented communities; joining an Out of the Darkness Walk; or bringing suicide prevention education, research or support programs to their school or workplace. Everyone has different experiences with their own mental health, and their own preferred methods of care and support. Our May campaign gave people across the country many ways to support #MentalHealth4All.
Throughout the month, we amplified awareness by creating toolkits to engage our staff, volunteers and partners through email, social media and websites, including social media graphics, fundraising tools for streaming and Facebook, email signatures, profile pictures frames, GIFs and more.

We also partnered with Instagram to host live events featuring our content experts, and in partnership with organizations like The Confess Project and Kripalu.

Other creative partnerships generating exposure throughout May included collaborations with TikTok, Holler, Loop, Snap, Inc., and the Ad Council and GIPHY, which commissioned artists like Grovertoons, Megan Motown and Trap Bob to create conversation starter GIFs and Stickers young adults can send to a friend showing comfort and support.

Popular TikTok and Instagram creators including Bryce Xavier, Dani Donovan, GegetheJing, Joyce Wert, Liya Hizkias and Shahem, musical group lovelytheband and musicians Alaina Castillo, Daya, Elle Winter, Jensen McRae and Kat Cunning created original content through our Seize the Awkward campaign to share across their channels throughout the month, reaching an audience of over 7.8 million people.

5.5K followers gained in May across all social media channels

10K web page views
Seize the Awkward

Since its launch in January 2018, Seize the Awkward has garnered 57 million video views and over 2.2M sessions on SeizeTheAwkward.org, where 16-24 year-olds can explore resources and tools to help them start a conversation with a friend around mental health. The campaign is a joint effort with The Jed Foundation (JED) and the Ad Council.

In late August, the STA website relaunched with deeper resources to aid young people, and kicked off a September campaign that included guidance from popular Instagram and TikTok influencers Anna Wannquist, Donovan Beck, Jamie Grace, Maleah Whitten, Phillip Vu, Pink Sweat$, Sedona Prince, and Tessa Violet on navigating specific topics like grieving the loss of a loved one, and recognizing the signs that a friend may be struggling. The seven videos created by these influencers generated 653.8K total video views, 130.6K likes, and 857 shares. During the month of September, Instagram, Snap Inc., TikTok, and Initiative provided significant exposure for Seize the Awkward on their platforms.
National Suicide Prevention Awareness Month

In a year when many people experienced fear, anxiety, and uncertainty due to COVID-19 and other stressors, it became clearer than ever for many people that mental health is a fundamental aspect of all of our lives. It also became vitally important that we deepen the conversation, to ensure that people feel comfortable and confident being able to talk about suicide, if they are ever concerned for themselves or those they care about.

Many people are still afraid that by asking someone if they’re having thoughts of suicide, it will put the idea in the person’s head, or push them to take their lives. (Which research shows is not true.) Some are worried they won’t know what to do, or how to help, if the person tells them they are thinking about it.

In September, for National Suicide Prevention Awareness Month, we spread the message that, “Together, we can

16,000+ followers gained in September, pushing our total Instagram following to over 100K!

1M+ followers across AFSP National and Chapter social media accounts
help #StopSuicide.” Our September campaign empowered communities to address this leading cause of death by understanding what leads someone to suicide, the ways we can all help prevent it, available resources – and not being afraid to ask when we’re worried about someone, or for help when we need it, ourselves.

Among many of the ways people could get involved, over 300 volunteer advocates sent over 3,000 “Together, we can help #StopSuicide”-themed Letters to the Editor to media outlets across the country, urging people to take action against this leading cause of death.

Media, celebrities, and other organizations helped amplify our message throughout September, including Pearl Jam, GIPHY, CVS Health, Katie Couric Media, TODAY, BET, Men’s Health and more.

**CVS Health Live: Preventing Suicide in Our Communities**

AFSP teamed with Aetna/CVS Health for the September panel conversation “CVS Health Live: Preventing Suicide in Our Communities.” The discussion, featuring AFSP’s Vice President of Mission Engagement, Dr. Doreen Marshall, focused on how to start tough but critical conversations that can lead people in need to the right interventions and resources.

Additionally, AFSP partnered with CVS Health for an Instagram Takeover on October 7, 2021. AFSP’s Chief Medical Officer Dr. Christine Yu-Moutier answered questions about suicide prevention and mental health. She shared resources on how to identify warning signs of suicide, how to help a loved one who may be at risk, and how individuals can help in their own community.

**World Suicide Prevention Day Live**

On September 10, World Suicide Prevention Day, AFSP hosted an all-day Facebook Live event from 12pm to 8pm ET. The event featured over 30 panelists and guests across research, entertainment, advocacy and more. Guests included actor Courtney B. Vance, Dr. Robin L. Smith, singer Normani, Kenneth Cole, Jari Jones, U.S. Rep. Chris Stewart, State Rep. Tina Orwall, and Dr. Alfiee M. Breland-Noble of The AAKOMA Project.

As part of our World Suicide Prevention Day Live event, we partnered with Sound Mind to host the panel “Men, Music, and Mental Health,” with guests Cameron Boyer from the band Weathers, Anthony Green and Brendan Ekstrom from Circa Survive, singer/songwriter Ricky Duran, and moderator Chris Bullard, Executive Director of Sound Mind, whose mission is to end the stigma that surrounds mental health and mental illness through the power of music.

The Nonprofits on Facebook page cross-promoted our event, helping to spread the reach of the program to their audience of over 1.1M followers.

**Partnering with Audacy**

This fall, AFSP grew our national partnership with multi-platform audio content and entertainment company Audacy, helping us reach over 170 million consumers each month through radio,
podcasts, news, music and sports. Through our partnership, we created an exclusive Out of the Darkness radio station to play at our walks, along with a Community Walks PSA radio campaign airing on Audacy stations across the country.

Dr. Yu-Moutier appeared as a guest on Audacy’s fifth annual I’m Listening special dedicated to sharing the mental health stories and advice from artists, athletes, and mental health professionals, airing on all Audacy stations and in the Audacy app. Other panelists included Billie Eilish, Lil Nas X, Lizzo, Doja Cat, Shakira, Justin Bieber, Cleveland Cavaliers’ Kevin Love, Rage Against the Machine’s Tom Morello, Jack Antonoff, and more.

AFSP’s CEO Robert Gebbia shared messages of hope and support at Audacy’s We Can Survive concert at Hollywood Bowl in October, with performances by Coldplay, the Black Eyed Peas, Doja Cat, Shawn Mendes, and more. AFSP had an on-site activation with fans featuring the key campaign artwork created by Brooklyn-based artist, Jessica Goldsmith, that was supported by the AFSP LA Chapter, and the Comms team led influencer engagement and a red carpet interview with Robert Gebbia. AFSP was named as the sole beneficiary and raised more than $800K.

**Self-Care Is For Everyone**

AFSP partnered with Self-Care Is For Everyone on a collection of mental-health themed t-shirts and apparel, with 100% of net profits benefiting AFSP raising more than $3,687.

In addition to the popular “Together We Can Help Stop Suicide” collection, we also co-created educational social content to help spread suicide prevention and mental health best practices, culminating in an Instagram Guide launch on World Mental Health Day.

**Media & Entertainment**

AFSP has provided advice on over a dozen upcoming TV, film, and other creative projects since December 2020, for entertainment platforms including Netflix, HBO, Comedy Central, Hulu, United Artists, Viacom/CBS, NBC/Universal, NPR Marketplace, and This American Life.

Our in-depth analysis – happening at various stages, from the earliest conception of a new series or film, to early script drafts, and rough cuts of footage – allows us to work behind the scenes with content creators to encourage safety when storylines involve suicide, and raise awareness and understanding of mental health for a large audience through the power of storytelling.

This past year we expanded on our 5-star partnership with Netflix, and delivered a special presentation, “Mental Health, Suicide and Storytelling: Making Entertainment Responsibly” for Netflix’s internal audience of content creators, marketing execs and leadership, through Netflix’s Inclusion Institute Initiative.

We also established new formal partnerships with WarnerMedia, Viacom/CBS and NBC/Universal to
The American Foundation for Suicide Prevention acknowledges that systemic racism and historical barriers and inequities have left particular ethnic, racial and minoritized populations facing trauma, loss, bias, social disparities and other unique challenges that have gone unsupported and largely unaddressed. We at AFSP are committed to rectifying this by working with diverse communities, organizations and policy makers to ensure that mental health resources that are culturally relevant are equitably available across the nation.

Let people in your life know you’re a safe person to talk to about mental health, and actively listen and engage when someone comes to you for help.
As part of AFSP’s strategic 3-year plan, we are committed to:

**Improving Cultural Competency and Organizational Diversity and Inclusion Practices** by expanding on our recruitment policies to increase diversity on our National and Chapter boards to better reflect the communities we serve, and implementing a cultural competency training curriculum for our staff.

**Building Partnerships and Program Implementation** through key relationships with external experts and organizations, and by creating a Diversity Programs Taskforce to ensure our educational programs are both culturally informed and evidence-based.

**Stimulating and Funding Research Related to Underrepresented Racial and Ethnic Groups** through a Priority Focus Area for suicide research related to underrepresented communities, health and mental health disparities and inequities, as well as researchers from underrepresented groups.

**Elevating the Voices in Our Field with Expertise in Diverse Communities** by convening leading experts in mental health and suicide prevention from diverse communities through our Elevating Voices for Long-Lasting Change Virtual Town Hall Series, which takes a closer look at mental health and suicide prevention in underrepresented communities, and improves public understanding of their range of experiences.

45K views of our Elevating Voices series since last July
Jennifer Johnson
Michigan Chapter

Do you have a personal connection to suicide?
My connection to suicide is through my Godfather, Kenny Harvard. Our families were close friends, and I looked up to him. I called him my Uncle Kenny, and I can still hear him call me by the nickname he gave me: “Puddin.”

Kenny moved away from our area in the Midwest and settled in Texas. Every night at 10 PM, he would call to speak with my mom and me. One night, he didn’t call. When the sun rose, we learned he had taken his life. That was in 1988. I was 17 at the time. No one said anything more about how my Uncle died, even to this day. I am now 51.

How did you first get connected with AFSP?
It was through my work with Michigan PTA, which is a child advocacy association. I was seeking resources for students and families who may be in crisis. I took the Talk Saves Lives training, then More than Sad. I began sharing the resources of AFSP’s Michigan chapter with my community as a whole, including a local LGBTQ community center, and social justice and racial equity organizations. Unexpectedly, my growing participation with the chapter helped me heal a wound, allowing me to grieve my Uncle Kenny while fostering advocacy.

What kind of cultural considerations do you think come into play with mental health?
I am a Black woman, and in our community, suicide is largely taboo. It is time for that mindset to be eradicated. I am doing my best to bring about the conversation of suicide prevention in our untapped populations, especially those of color.
I am now a member of the Michigan chapter’s DEI Committee. The need for suicide prevention in the DEI space is crucial. We strive to break down the barriers that impede the open discussion of suicide in all communities, particularly our underserved communities. We are engaging and building relationships with community organizations that also center within the DEI space with their focus populations, collaborating with them to provide effective resources for the community.

What does the phrase #MentalHealth4All mean to you? #MentalHealth4All means amplifying suicide prevention awareness so that it is on everyone’s radar. As a Black woman, I have made it my mission to share understanding about suicide prevention with my community and the various hues that make up our human race. The suicide of a loved one is forever etched within you. I do not wish for anyone to experience the pain my family and my godfather’s family endured. I do not wish for anyone to feel they have no one to talk to, regardless of their race, ethnicity, religion, lack of religion, age, gender, or identity.

In our Black and Brown communities, we must talk about suicide to prevent it. I am doing my best to bring about the conversation of suicide prevention in our untapped populations, especially those of color.
AFSP was founded by a group of families impacted by suicide, who banded together with scientists who wanted to learn more. Today, we are the largest private funder of suicide prevention research, attracting the participation of members of the scientific and clinical communities, who conduct groundbreaking research on suicide and its prevention thanks to our support.

AFSP advocates for the adoption of mental health and suicide prevention legislation and policies we know can help save lives. To do so, our public policy team in Washington, D.C. brings together volunteer Field Advocates across the U.S. to educate public officials at all levels of government about suicide and its prevention.

Through Project 2025, our bold goal to reduce the U.S. suicide rate 20% by 2025, we work with key partners to establish the programs, policies and interventions we know can prevent as many suicides as possible.
Prevention
Highlighting the True Connection Between Research and Suicide Prevention

Research has yielded a great deal of knowledge about suicide, providing insight into questions such as, “What might lead someone to take their life?” and, “Is there anything we can do to prevent suicide?” The answers are that it’s complex – no one takes their life for a single reason – and yes, research has revealed many ways we can help save lives. Yet many people don’t realize the powerful connection between scientific research and every facet of what we do as America’s leading suicide prevention organization.

As the largest private funder of suicide prevention research, AFSP shapes suicide prevention strategies around the world through our state-of-the-art research portfolio, and by funding, supporting, and influencing the most innovative, practical, and forward-thinking researchers and studies.

It’s scientific research that informs AFSP’s education programs that are presented in schools, workplaces, and other settings across the country. It’s through research that we are learning how to best support those who have been affected by suicide. All the awareness and knowledge we spread through events like the Out of the Darkness Walks are grounded in scientific research. Research forms the basis of our bold Project 2025 goal to reduce the national suicide rate 20% by the year 2025. Our volunteer Field Advocates fight for legislation that ensures funding for more research, so we can keep learning new ways to help people.

It’s our suicide prevention research that connects all those things – as well as connecting people together, united for a common cause.

AFSP was founded as a research organization dedicated to exploring how to save lives. Today, we continue to build on what we’ve learned, and seek answers to the most important question of all: how to create a world without suicide.
Investing in Knowledge

Each year, AFSP welcomes a broad range of applications from a diverse group of researchers. These applications are then rigorously reviewed by our international team of Scientific Advisors, our Research Grants Committee, Scientific Council, and finally, our Board of Directors.

Some areas examined by our newest grants include:

• enhancing suicide assessments and interventions for underrepresented and understudied communities
• the use of technology to identify or help people at risk
• the effectiveness of ketamine and other interventions and treatments for managing suicidal thoughts and behavior
• psychosocial factors related to suicidal thoughts and behaviors
• the maternal and perinatal transition as a risk factor for suicidal thoughts and behaviors
• the examination of brain and other biological functions
• firearm safety and suicide prevention

$23.7M in funding for all current studies $6.44M invested in new research in 2021
Championing Early Career Researchers

As part of our commitment to building future generations of researchers, our Young Investigator Grants offer early-career researchers the opportunity to develop and pursue their first independently funded study, under the guidance of a dedicated mentor. Since 1987, over 70% of these Young Investigators have gone on to secure large competitive federal grants from the National Institute of Mental Health (NIMH) and other sources to advance the work for which AFSP provided initial funding.

Serving as a significant milestone in the development of this next wave of researchers, AFSP’s Young Investigator Grants are a key part of our priority to further develop a strong scientific community devoted to suicide prevention research.

Dr. Jeffrey Bridge, Director of the Center for Suicide Prevention and Research at The Abigail Wexner Research Institute at Nationwide Children's Hospital, was a recipient of an AFSP Young Investigator Grant. He is now involved with the program once again, serving as a mentor for Dr. Arielle Sheftall, a current Young Investigator.

Dr. Jeffrey Bridge

“For my Young Investigator award project, in 2006, we conducted a case-control study that compared 40 adolescents with a recent history of suicide attempt and 40 adolescents with no lifetime history of suicidal ideation or behavior on levels of impulsivity, aggression, and impulsive aggression, assessed using a variety of laboratory-based and self-report measures. We found that decision-making deficits distinguished adolescents who attempted suicide from those who had no history of suicidal behavior.

Dr. Sheftall had played a key role in that study, serving as the project coordinator. I had first met Dr. Sheftall in 2007 when she joined my lab as a research associate. Recognizing Dr. Sheftall’s strong potential, I encouraged her to pursue her doctoral degree.

I have worked closely with Dr. Sheftall on the development of her current AFSP-funded Young Investigator research project, providing support and guidance. We meet regularly to discuss the progress of the project, and troubleshoot any concerns that may occur. Dr. Sheftall has developed into an astute investigator, conducting leading-edge research to identify early vulnerabilities in children at high risk of future suicidal behavior. I am honored to be a mentor to Dr. Sheftall as she continues to develop her independent line of research.”
“For my AFSP Young Investigator Grant, I am examining risk factors in children, ages 6-to-11 years old, associated with suicidal behavior. Literature concerning suicide risk in childhood is limited, but rates of suicide are increasing substantially for this age group. To gain insight, my study focuses on three sets of youth: children who have never been suicidal; children with a history of suicidal ideation only; and children with a history of suicide attempts. The risk factors we are examining include familial factors (e.g., parenting style), neurocognitive functioning (e.g., problem solving), and ADHD diagnosis. Discovering the presence of vulnerabilities to suicidal ideation and behavior at an early age could inform prevention and intervention efforts, assist with the creation of developmentally appropriate intervention programming, and prevent suicide in at-risk youth.

As my mentor, Dr. Bridge and I discuss the research project’s recruitment strategies, research assessment protocol, concerns brought to my attention from staff, and other study-related concerns. We also discuss how my research agenda will progress in the future.

AFSP’s Young Investigator Grants are not only a great mechanism to gather pilot data for future funding opportunities – they also provide an opportunity to establish a relationship with a more senior researcher to help guide and encourage you through the world of academia and research.”
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 2021 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.

Long-Term Maintenance with Ketamine Infusions for Reduction of Suicide in High-Risk Patients with Depression

Cristina Cusin, M.D.
Massachusetts General Hospital
$1,338,411
Grant Type: Short Term Risk Focus

Ketamine rapidly decreases depression and suicidal ideation. However, its effects on suicidal behaviors are unclear. Patients admitted to the hospital for suicidal ideation and behavior are at high risk for attempting suicide after discharge. This study will investigate the effectiveness of maintenance treatment with intravenous ketamine for 6 months. Outcomes will be compared with standard care for patients admitted to inpatient units for suicidal ideation and behavior and with an historical comparison group with no suicidal ideation or behavior.

Reducing Suicide Risk in Adolescents and Young Adults via a Psychobehavioral Intervention to Regularize Daily Rhythms and Improve Brain Circuitry Functioning

Hilary Blumberg, M.D.
Yale School of Medicine
$1,500,000
Grant Type: Short Term Risk Focus Grant

To address irregularities in sleep and other daily rhythms - which are robust suicide risk factors - Brain Emotion Circuitry Targeted Self-Monitoring and Regulation Therapy for Daily Rhythms (BE-SMART-DR) will be administered via telehealth to adolescents and young adults with mood disorders at high risk for suicide. State-of-the-art digital technology (wearable and smartphone) real time data on behaviors and symptoms, and neuroimaging on brain functioning, will provide unique opportunities to identify early indicators and brain mechanisms of risk reduction.
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.

**Predicting Suicidal Thoughts and Behaviors by Tracking Digital Experiences in Adolescents who were Depressed as Preschoolers**

Joan Luby, M.D.
Washington University

Deanna Barch, Ph.D.
Washington University

Nicholas Allen, Ph.D.
University of Oregon

$450,000
Grant Type: Linked Standard Research Grant

Little is known about the daily social interactions that children have that might increase risk or protect from suicidal thoughts and behaviors (STB). In a group of children who expressed suicidal thoughts and behaviors in early childhood, we will study cell phone communications and activity patterns to investigate if, and how, they might be related to expressions of STB. We will also explore whether exposure to certain types of media impacts these mental states.

**A Longitudinal Study of Maternal Self-Injurious Thoughts and Behaviors at the Perinatal Transition**

Maureen Zalewski, Ph.D.
University of Oregon

Sheila Crowell, Ph.D.
University of Utah

$446,999
Grant Type: Linked Standard Research Grant

Pregnancy and motherhood are often viewed as protective factors against self-injurious thoughts and behaviors. However, suicide accounts for 20-30% of perinatal deaths the year after birth. We will interview women who experience suicidal ideation during the 3rd trimester and then again at 6 weeks and 4 months postpartum. We will learn about suicidal thoughts or experiences and about risk and protective factors during the transition to motherhood.

**Mediating Effect of Genome-Wide Methylation in Conferring Risk for Suicide in Schizophrenia: A 1-year Follow-Up Study Monitoring Stress Exposure**

Vincenzo De Luca, M.D., Ph.D.
Centre for Addiction and Mental Health (Canada)

$99,712
Grant Type: Standard Research Grant

Genes play a role in how one manages stress and may relate to suicidal ideation and behavior. This study will investigate molecular mechanisms that mediate the effect of stress exposure
in contributing to suicidal ideation in patients with schizophrenia. The main outcome of this grant would be to learn about the molecular mechanisms that link stress to suicidal ideation. Our proposed study will highlight novel and potentially treatable molecular targets for the treatment of suicidal ideation in people with schizophrenia.

**Neurophysiological Responses to Stress: A Biomarker of Risk for Suicide in Bipolar Disorder**

Elizabeth Lippard, Ph.D.  
University of Texas at Austin  
$99,024

**Grant Type: Standard Research Grant**

Brain regions that are sensitive to stress—and regulate physiological responses to stress—are implicated in suicide behavior. In bipolar disorder, greater sensitivity to stress and changes in brain regions that underlie stress response emerge over adolescence. How the brain responds to stress could contribute to risk for suicidal thoughts and behavior. This study investigates neurophysiological responses to stress as a risk factor for suicide in youth with bipolar disorder to inform suicide prevention efforts.

**Household Handgun Divestment and Suicide Risk**

Sonja Swanson, Sc.D.  
Erasmus Medical Center (Netherlands)  
$99,902

**Grant Type: Standard Research Grant**

Access to firearms increases risk of death by suicide, yet little is known about how voluntary divestment from firearms may reduce suicide risk. Building upon prior work supported by AFSP examining how personal divestment affects handgun owners’ own risk, the goal in this study is to learn more about how divestment may also affect the suicide risk for other household members, beyond gun owners.

**A Systems Approach to Perinatal Opioid Exposure and Maternal Suicidality**

Jangho Yoon, Ph.D., MSPH  
Uniformed Services University for the Health Sciences  
$99,699

**Grant Type: Standard Research Grant**

Suicide is the leading cause of death for women during pregnancy and in the first year postpartum. Using data from a population of women enrolled in Oregon Medicaid for low-income families and individuals with disabilities, we plan to investigate the impact of perinatal opioid use on suicide attempt and death. We also examine whether a unique value-based health care system implemented in Oregon Medicaid, known as Coordinated Care Organizations, may contribute to preventing maternal opioid misuse and suicide attempt and death.

**Mindful Self-Compassion to Reduce Suicide Ideation in Transgender Adolescents**

Karen Bluth, Ph.D.  
University of North Carolina, Chapel Hill  
$98,857

**Grant Type: Standard Research Grant**

Transgender teens are at heightened risk for suicide ideation. Self-compassion, linked to lower depression and anxiety, can be cultivated through interventions that teach teens skills to treat
themselves with greater kindness and acceptance. This study will test the feasibility of an online self-compassion program tailored to the unique needs of transgender adolescents that is targeted to reduce suicide ideation. We will also explore whether specific transgender characteristics, such as being transmale, transfemale, or non-binary, influence outcomes.

Factors that Modify the Relationship Between Adversity and Suicide Attempt in a Brazilian Birth Cohort

Ian Colman, Ph.D.
University of Ottawa (Canada)
$98,862
Grant Type: Standard Research Grant

Although low- and middle-income countries account for much of the global suicide burden, factors linked with suicidal ideation and behavior are understudied in these countries. The aim of this project is to identify factors that increase or reduce the association between adversity and suicidal ideation and behavior by studying a cohort of Brazilians followed since their birth in 1993. This research will help identify potential interventions based on modifiable factors associated with reduction of suicidal ideation and behavior appropriate for a lower-income setting.

The Etiology of Suicidal and Non-Suicidal Self-Injury in a Population-Based Sample

Alexis Edwards, Ph.D.
Virginia Commonwealth University
$97,858
Grant Type: Standard Research Grant

Non-suicidal self-injury (NSSI) and suicidal behaviors are correlated, but distinct outcomes and how they are related remains unclear. This study aims to assess how a range of sociodemographic, behavioral, and environmental predictors are similarly or differentially related to NSSI and suicidal attempt in a large, population-based study. We will further assess the contributions of aggregate or combined genetic risk for related outcomes such as substance misuse, major depression, personality.

Collaborating with Immigrant Parents and Community Health Workers for Youth Suicide Prevention

Kiara Alvarez, Ph.D.
Massachusetts General Hospital / Harvard Medical School
Mentor: Lisa Fortuna, Ph.D., MPH
University of California, San Francisco
$90,000
Grant Type: Young Investigator Grant

Immigrant-origin youth experience barriers to mental health treatment and specific risk and protective factors for suicidal behavior. Community health workers (public health workers who are often part of the community they serve) are uniquely positioned to provide accessible and culturally responsive suicide prevention programming to families. In this project, clinician-researchers and community partners will collaborate to adapt and pilot-test a youth suicide prevention program for delivery by community health workers to Latinx immigrant parents.
Impact of Ketamine on Surrogate Markers of Suicide Risk

Elizabeth Ballard, Ph.D.
National Institute of Mental Health
Mentor: Carlos Zarate, M.D.
National Institute of Mental Health
$72,724
Grant Type: Young Investigator Grant

The week after psychiatric hospitalization is a high-risk time for suicidal behavior. However, clinicians have few treatments with rapid onset. Ketamine has been associated with rapid changes in suicidal thoughts within hours to days, but the impact on suicide attempts or behavior is unknown. This project will use magnetoencephalography (MEG) to measure brain function before and after ketamine administration to understand the relationship of ketamine to the desire to make a suicide attempt.

Development and Feasibility Testing of a Suicide Prevention Intervention for Sexual and Gender Minority Youth

Candice Biernesser, Ph.D.
University of Pittsburgh
Mentor: Tina Goldstein, Ph.D.
University of Pittsburgh
$79,821
Grant Type: Young Investigator Grant

Cyberbullying can impact youth in many ways, the most serious of which is an increased risk for suicidal thoughts and behaviors. Sexual and gender minority (SGM) youth particularly experience high rates of cyberbullying and suicidal thoughts and behaviors. We will develop a digital intervention to aid coping in the moment that SGM youth experience cyberbullying to prevent increased suicidal risk. If effective, this intervention could fill a critical gap in suicide prevention services for SGM youth.

Enhancing Suicide Risk Assessment and Prevention Among Diverse Adolescents Using Virtual Human Interaction

Sarah Bloch-Elkouby, Ph.D.
Icahn School of Medicine at Mount Sinai
Mentor: Igor Galynker, M.D.
Icahn School of Medicine at Mount Sinai
$90,000
Grant Type: Young Investigator Grant

Over the last couple of years, the rates of child and adolescent suicide continue to rise, especially among ethnic, racial, and sexual minorities. The study will assess the effectiveness of a novel clinician training tool, the Virtual Human Interaction (VHI), to enhance clinical training in the assessment of imminent suicidal risk among diverse adolescent populations.
Suicide Risk Associated with Subjective Cognitive Decline in Community-Dwelling Older Adults

Emily Bower, Ph.D.
Pacific University
Mentor: Kimberly Van Orden, Ph.D.
University of Rochester School of Medicine
$89,889
Grant Type: Young Investigator Grant

Aging is associated with increased risks for suicide and dementia. Suicide risk is high during early stages of dementia, but the reason for this is unknown. We will assess suicide risk factors, examine attitudes toward hastening death, and test a method to measure daily changes in suicidal thoughts among older people who are at risk for dementia because they experience cognitive problems. Findings will inform risk assessment and suicide prevention approaches for older adults with cognitive decline.

Understanding Suicide through Postmortem Targeted Brain Multi-omics

Matthew Girgenti, Ph.D.
Yale School of Medicine
Mentor: John Krystal, M.D.
Yale School of Medicine
$90,000
Grant Type: Young Investigator Grant

The majority of epidemiologic studies have shown PTSD is associated with an increased risk of suicide. However, the molecular determinants of both traits are not well understood and predictive biomarker discovery as well as therapeutic development in this area is still in its infancy. The goal of this project is to elucidate the molecular determinants that contribute to the development of PTSD and suicidal behavior using single cell genomics in postmortem brain tissue.

The Neuronal Transcriptome of Suicide in Bipolar Disorder

Gabriel Fries, Ph.D.
University of Texas, Houston
Mentor: Jair Soares, M.D., Ph.D.
University of Texas, Houston
$90,000
Grant Type: Young Investigator Grant

People diagnosed with bipolar disorder are at a significantly higher risk of suicide attempts and deaths. This study will investigate changes in the expression of genes in neuronal cells and the role of genetic risk for both suicide attempts and bipolar disorder. Identifying biological changes associated with suicidal behavior in this population will help pinpoint targets for prevention and better treatment.

Neurometabolite Markers of Suicide-Related Cognition in Adolescents

Charles Lewis, M.D.
University of Minnesota Medical School
Mentor: Daniel Dickstein, M.D.
Harvard Medical School
$90,000
Grant Type: Young Investigator Grant

Brain-based mechanisms of suicidal thoughts and behaviors remain poorly understood. Preliminary research suggests that adolescents with suicidal thoughts have altered neurochemistry in brain regions involved in emotional regulation, self-perception, and implicit thoughts. This project will use magnetic resonance spectroscopy, a brain imaging technique, to measure brain...
chemicals that excite and inhibit other neurotransmitters in youth with and without suicidal behavior. We will also examine how differences in brain chemistry correspond to the strength of adolescents’ implicit thoughts about death and suicide.

**THRIVE: Pilot Study of a Brief, Recovery-Focused Intervention for Crisis Stabilization Centers**

Jennifer Lockman, Ph.D.
Centerstone Research Institute
Mentor: Anthony Pisani, Ph.D.
University of Rochester Medical School
$89,868
**Grant Type: Young Investigator Grant**

Crisis Stabilization Centers (CSCs) have a unique role to play in Emergency Department diversion and suicide-specific care. However, brief interventions tailored for CSC settings are needed. This study will examine a new, 60-minute, narrative, technology-based, recovery-oriented intervention called THRIVE. THRIVE may help people make meaning of their suicide crisis, reduce suicidal ideation, and increase their recovery compared to usual care. If effective, THRIVE will help CSCs deliver better recovery-focused care.

**Biomarker Driven, Parcel-Guided TMS for Suicidal Thoughts and Behaviors in Depression**

Marta Moreno-Ortega, Ph.D.
Columbia University
Mentor: Ramin Parsey, M.D., Ph.D.
Stony Brook University
$90,000
**Grant Type: Young Investigator Grant**

Patients with suicidal thoughts and behaviors (STBs) often report suicide-related imagery during a crisis. Mounting evidence suggests that brain function and connections between the frontal and visual parts of the brain are disrupted in patients with STBs. There is growing interest in the use of Transcranial Magnetic Stimulation (TMS) as a treatment for STBs. We aim to test a new TMS treatment, targeting the fronto-visual pathway in patients with treatment resistant depression and active STBs to relieve suicidal ideation and behavior.

**Adverse Events During In-Utero and Perinatal Periods and Suicidal Behavior: An Early Start to Suicide Prevention**

Massimiliano Orri, Ph.D.
McGill University (Canada)
Mentor: Annette Erlangsen, Ph.D.
Psychiatric Center Copenhagen
$89,990
**Grant Type: Young Investigator Grant**

For women who are pregnant, events occurring during the intrauterine and perinatal periods may have profound impacts on neurodevelopment, in turn increasing later susceptibility to suicide. This project will investigate associations between adverse in-utero and perinatal events (including maternal infections and obstetric complications) and suicidal behavior in the lifespan using population-based data from the Danish nationwide registers. Our findings will advance knowledge of the developmental origins of suicide and may ultimately open new avenues of preventing suicidal behavior early in life.
Testing a Neural Diathesis-Stress Model to Differentiate Adolescent Suicide Ideators and Attempters

David Pagliaccio, Ph.D.
Research Foundation for Mental Hygiene
Mentor: Randy Auerbach, Ph.D.
Research Foundation for Mental Hygiene
$90,000

Grant Type: Young Investigator Grant

Adolescent suicidal thoughts and behaviors are a public health crisis and definitive brain-based markers of risk have not been identified. We will test how alterations in three brain systems (midbrain dopamine, social processing, and inhibitory control) contribute to suicide risk in the face of social stress. Magnetic resonance imaging (MRI) will be combined with smartphone and interview measures of stress to predict longer-term risk for suicidal behaviors among high-risk adolescents.

Development of a Decision Aid to Prevent Firearm Suicide Among Older Adults with Mild Cognitive Impairment/Early Dementia

Laura Prater, Ph.D., MPH
University of Washington
Mentor: Marian Betz, M.D., MPH
University of Colorado
$90,000

Grant Type: Young Investigator Grant

Serious health concerns are a known risk factor for suicide, and dementia is a major source of health-related disability among older adults. Little is known about suicidal desires and behaviors among older adults with dementia or cognitive impairment. We do know that many deaths by suicide among older Americans involve firearms. Using qualitative interviews of patients, family caregivers and health care providers, we will learn about decision-making needs to support the development of a firearm safe storage decision-making tool for use in a clinical setting.

Real Time Assessment of Emotion Regulation and Suicidal Ideation among Individuals with First-Episode Psychosis

Heather Wastler, Ph.D.
Ohio State University
Mentor: Craig Bryan, Psy.D.
Ohio State University
$88,800

Grant Type: Young Investigator Grant

Individuals with psychotic disorders are at increased risk for suicide and little is known about the mechanisms that contribute to this risk. Ecological momentary assessment (daily surveys using a smartphone application) will be used to examine emotion regulation as a mechanism for suicidal ideation among individuals with psychosis. This work has the potential to advance efforts to predict the acute onset of suicidal thoughts and develop novel preventative interventions for this high-risk population.
Multi-Informant Assessment of the Suicide Crisis Syndrome in Adolescents Presenting to an Emergency Department

Shira Barzilay, Ph.D.
Schneider Children’s Medical Center (Israel)
Mentor: Alan Apter, M.D.
Schneider Children’s Medical Center
$89,950
Grant Type: Young Investigator Grant

There has been an alarming increase in the rates of adolescents presenting to Emergency Departments with suicidal thoughts and behaviors. This project aims to test an instrument for the assessment of near-term suicide risk among youth. This assessment instrument is designed to capture a mental state preceding suicidal behaviors termed “The Suicide Crisis Syndrome.” The study combines multi-informant reports by youth, parents, and clinicians to improve clinical decision-making in the Emergency Departments.

Leveraging Computer Vision to Augment Suicide Risk Prediction

Taylor Burke, Ph.D.
Massachusetts General Hospital
Mentor: Richard Liu, Ph.D.
Massachusetts General Hospital
$90,000
Grant Type: Young Investigator Grant

A history of prior self-injury is the strongest predictor of future suicidal behavior, with evidence suggesting that the more severe such behaviors are, the greater the risk for future self-injury. This study will use computer vision and machine learning approaches to analyze images of self-injury to develop an objective means of assessing whether severity of prior self-injury can predict future suicidal behavior. Results from this work may help in the development of a clinical decision-support tool for use in medical care settings.

The Adenosine System as a Novel Target Substrate in Suicide

Sinead O’Donovan, Ph.D.
University of Toledo
Mentor: Cheryl McCullumsmith, M.D., Ph.D.
University of Toledo
$80,000
Grant Type: Young Investigator Grant

The adenosine system regulates basic functions of the body such as sleep, by slowing down the nervous system. Disruption of the adenosine system is associated with many risk factors for suicide, including severe mental illness and impulsivity, but its specific role has yet to be explained. This study will determine how the adenosine system is dysregulated in people with depression who died by suicide. Understanding how the adenosine system is altered in different cell-types in the brain will provide insight into the neurobiology underlying suicide.
Functional Connectivity Alterations in Suicidal Patients Among Opioid Users

**Hyuntaek Oh, Ph.D.**
Baylor College of Medicine
Mentor: Ramiro Salas, Ph.D.
Baylor College of Medicine
$90,000
**Grant Type: Young Investigator Grant**

Suicide by opioid overdose is a significant problem, especially during the opioid epidemic. Identifying the brain biology underlying increased risk for suicide in problematic opioid users is of public health relevance. This study will examine the link between opioid use and suicide risk using Transcranial Magnetic Stimulation (TMS) as a treatment and brain imaging using fMRI to investigate therapeutic efficacy of TMS in opioid-using suicidal patients. Findings will provide a step forward in developing neural-circuit based brain treatments for people using opioids and at risk for suicide.

Biological Stress Responses and Risk for Suicidal Behavior among Transgender Adolescents: A Pilot Study

**Brian Thoma, Ph.D.**
University of Pittsburgh School of Medicine
Mentor: Nadine Melhem, Ph.D.
University of Pittsburgh School of Medicine
$89,965
**Grant Type: Young Investigator Grant**

Transgender adolescents have high risk for suicidal behavior, and elevated rates of suicidal ideation and behavior in this population likely result from disproportionate experiences of psychosocial stress endured by transgender youth. We will examine the biology of risk for suicidal behavior over time among transgender youth, including how psychosocial stressors and biological dysregulation in the hypothalamic-pituitary-adrenal (HPA) axis and inflammatory pathways contribute to risk for suicidal behavior within this vulnerable population.

Integrated Suicide and Substance Use Intervention for Adolescents in Substance Use Treatment

**Christina Sellers, Ph.D., LCSW**
Simmons University
Mentor: Anthony Spirito, Ph.D.
Brown University
$89,992
**Grant Type: Young Investigator Grant**

Suicide and substance use are often interrelated and worsen each other. Adolescents with problematic substance use typically receive outpatient substance use treatment, where suicidal thoughts and behaviors are rarely fully addressed. A comprehensive, integrated suicide and substance use intervention for outpatient substance use treatment will be developed collaboratively with clinicians and patients. Next, the intervention will be assessed for feasibility, acceptability, and preliminary effects on suicide and substance-related outcomes.
Promoting Equity in Firearm Safety and Suicide Prevention to Reduce Suicide in Black Youth

Katelin Hoskins, Ph.D.
University of Pennsylvania
Mentor: Rinad Beidas, Ph.D.
University of Pennsylvania
$117,753
Grant Type: Postdoctoral Fellowship

Suicide rates in Black youth are rising, and evidence-based interventions that center on health equity are urgently needed. This study leverages a large implementation trial in Michigan and Colorado to examine if implementation of an evidence-based safe firearm storage program as a universal suicide prevention strategy in pediatric primary care differs across racial groups, as well as factors that may moderate potential disparities. This study will also explore Black parents’ experiences with program receipt and firearm storage decision-making processes.

The Pattern and Risk Factors for Suicide Ideation Among In-School Adolescents in Nigeria

Olumide Abiodun, MPH
Babcock University (Nigeria)
$15,000
Grant Type: Pilot Research Grant

Adolescent suicidal ideation, though prevalent in low and middle-income countries (LMICs), is grossly under-researched. This study will identify and compare psychometric properties such as the reliability and validity of suicidal ideation tools to promote more accurate identification of suicidal thoughts in non-clinical contexts. The research seeks to clarify the risk factors, while investigating factors that could be protective in a holistic manner. These data are essential to provide evidence for awareness creation, advocacy, policy, planning, and implantation of interventions.

Suicide Risk and Protective Factors Among Black Marylanders

Alison Athey, Ph.D.
Bloomberg School of Public Health
$29,983
Grant Type: Pilot Research Grant

Suicide is a leading cause of death among Black Americans. This study explores suicide risk and protective factors among Black Marylanders. We will explore individual, family, and community differences between Black suicide decedents and White suicide decedents and Black Marylanders who died by other manners. We will also explore the association between historical events (the killing of Freddie Gray, the COVID-19 pandemic, and the 2020 racial injustice protests) and suicide rates among Black Marylanders.
Personalizing Nudges: Towards Precision Messaging for Suicide Prevention

Brian Bauer, M.S.
University of Southern Mississippi
$29,384
Grant Type: Pilot Research Grant

Nudges are behavioral economic interventions used in marketing to subtly alter decision-making environments to use mental shortcuts and ultimately influence behaviors without restricting autonomy. However, certain nudges work better for different people, and using nudges that work best for the majority excludes underrepresented populations. This study examines if tailoring mental health nudges by identifying specific groups from the data increases engagement with crisis resources on popular social media platforms. Further, this study will produce cost-benefit estimates for using personalized nudges versus a one-size-fits-all approach.

Telehealth-Delivered Brief Cognitive Behavioral Therapy to Prevent Suicides in People with Physical Disabilities

Lauren Khazem, Ph.D.
Ohio State University
$30,000
Grant Type: Pilot Research Grant

People with physical disabilities report higher rates of suicidal ideation and suicide attempts when compared to the general population. However, no current interventions for suicide prevention are specifically designed to address the psychosocial and access needs of this population. The effectiveness of telehealth-administered Brief Cognitive Behavioral Therapy for Suicide Prevention, adapted for people with physical disabilities (BCBT-PWD), will be evaluated, and stakeholder feedback will be used to improve the accessibility and content of the intervention.

Predicting Suicide and Self-Harm Risk in Linked Administrative Data

Leah Richmond-Rakerd, Ph.D.
University of Michigan
$30,000
Grant Type: Pilot Research Grant

Many individuals who attempt suicide have received a mental-health diagnosis, obtained treatment, appeared in emergency rooms, or received prior clinical care for other types of self-harm behavior. These are crucial prevention opportunities, but it is difficult to accurately predict suicide risk using traditional clinical methods. To improve assessment of risk for suicide attempt and self-harm, statistical computational-modeling approaches will be applied to a broad range of health and social variables obtained from nationwide, linked administrative records.
Advocacy

Advocating for Suicide Prevention

Each year, AFSP’s Public Policy team mobilizes energetic volunteer Field Advocates across the country to urge public officials to prioritize suicide prevention and mental health. Together, we make bold strides at the federal, state, and local levels to pass suicide prevention policies that can save lives.

Our efforts this fiscal year resulted in the successful passage of six federal bills and 43 state bills that will make a difference in how we as a nation combat this leading cause of death.
Federal Advocacy for Suicide Prevention

AFSP continues to be at the forefront of the movement to make crisis services more accessible across the U.S. This past year, AFSP played a leading role in supporting passage of the National Suicide Hotline Designation Act (S.2661), which designated 988 as the future universal phone number for the National Suicide Prevention Lifeline. From meeting with members of Congress and federal agencies behind the scenes, to leading coalition activities and facilitating discussions with the telecom industry, AFSP ensured that S.2661 was a top priority for federal decision makers in 2020.

AFSP’s volunteer Field Advocates joined together with mental health and suicide prevention organizations across the U.S. in a Day of Action to urge Congress to move S.2661 forward. Our advocates sent 1,886 emails to members of Congress and 1,310 letters to media outlets across the country, demonstrating widespread public support for the National Suicide Prevention Lifeline’s transition to 988 and influencing the unanimous passage of the bill before it was signed into law by the President in October.

AFSP also advocated for vital increases in federal suicide prevention funding during the Fiscal Year 2021 Appropriations Process and through COVID-19 relief funding. Many of these increases were ultimately passed, including:

- $24 million for the National Suicide Prevention Lifeline ($5 million increase over FY 20)
- $12 million for suicide prevention at the Centers for Disease Control and Prevention ($2 million increase over FY 20)
- $9 million for the Garrett Lee Smith Suicide Prevention Resource Center ($1.02 million increase over FY 20)
- Increased funding to the National Institute of Mental Health for research
- Inclusion of suicide prevention for the first time as a research topic in the Department of Defense’s Congressionally Directed Medical Research Program
- Funding for community-based mobile crisis intervention services through Medicaid, and youth suicide prevention programs at the Substance Abuse and Mental Health Services Administration through the American Rescue Plan
Annual Advocacy Forum

The 12th Annual Advocacy Forum was held in June 2021, reaching over 10K people via Facebook Live. This year’s event featured 14 content experts including those from the Centers for Disease Control and Prevention, U.S. Department of Defense, National Institute of Mental Health, and the National Association of State Mental Health Program Directors. Virtual attendees were educated on 10+ policy areas including federal funding for suicide prevention research; 988 and the continuum of crisis care; bridge barriers; suicide prevention in health systems; and tele-mental health.

Following the virtual presentation, AFSP’s volunteer advocates across all 50 states and D.C. met online or over the phone with over 200 members of Congress to urge support for AFSP’s top federal priorities.
State Advocacy for Suicide Prevention

Our advocacy for 988 and crisis services continued into 2021 on the state level, as every AFSP chapter across the country supported efforts to fund 988 and local crisis call centers as part of their State Capitol Day event. Together, our state efforts reached all corners of the country, with a State Capitol Day held in all 50 states and D.C., including three first-time events in Hawaii, Nevada, and Washington. Thousands of advocates participated in these events virtually, meeting with state public officials in support of 174 state bills in AFSP priority areas. Over 30 of these bills were signed into law by June 30, 2021. Some highlights include:

- Nebraska, West Virginia, and Wisconsin extended workers’ compensation benefits to first responders suffering from Post-Traumatic Stress Disorder (PTSD)
- Alabama, Kentucky, Louisiana, Nevada, Oklahoma, South Dakota, Texas, and Utah established programs to provide first responders with access to crisis services, peer support, and/or treatment for mental health conditions
- Arkansas, Maryland, South Carolina, and Texas enacted requirements for school districts and colleges/universities to include suicide prevention hotline information on all student ID cards
- Oklahoma now requires that all school districts adopt suicide awareness and prevention policies and provide suicide awareness and prevention training to staff every 2 years
- Colorado, Nevada, Virginia, and Washington put telecom user fees in place to fund 988 the same way as 911 and support local crisis call centers and response services
- Oregon now requires mental health providers to complete regular suicide risk assessment, treatment, and management training
- Missouri now requires health benefit plans that provide coverage for mental health conditions to meet the requirements and regulations of the federal Mental Health Parity law

In total, from July 1, 2020 - June 30, 2021, AFSP volunteer Field Advocates created awareness and action regarding suicide prevention and mental health across the country, sending:

- 21,051 emails to members of Congress
- 2,475 emails to state legislators
- 6,373 letters to the editors of local media outlets
You have attended six Advocacy Forums. What is advocacy, and what does it mean to advocate for suicide prevention?

Advocacy means asking your representatives for their support of legislation that relates to a cause you believe is important, like suicide prevention. AFSP’s annual Advocacy Forum is a great way to gain knowledge of any new or current legislation we want to push for, meet other volunteer Field Advocates across the nation just like you, and discover what has or has not worked for them in their own districts. You also get tips on how to speak with a representative regarding the purpose of your visit. AFSP’s Policy Team sets all the volunteers up for success.

What kind of legislation do you personally think is important?

As an Army veteran, knowing that AFSP supports legislation that makes suicide prevention a priority for Veterans, Servicemembers, and their families is very important to me. The military trains you to “suck it up,” and the silent struggles are often ignored. This atmosphere doesn’t go away when you transition back into the civilian world. No one understands what you have witnessed, felt, or were subjected to. It’s hard to explain to your loved ones, and it’s even harder for them to understand how to help you when you are trapped in your own mental turmoil. Knowing that AFSP is fighting for me, for my fellow active duty Servicemembers and our
families, gives me hope that change will come, and more Veterans will see that asking for help is the exact opposite of weakness. It is actually a strength.

What does the phrase #MentalHealth4All mean to you?
I lost my beautiful mom at the young age of 50 in 2011. She had battled depression since she was in her teens. #MentalHealth4All means changing things for future generations. I have been open with my daughters since day one of losing my mom, their “nanna Di.” I have shown them compassion and empathy through my involvement with AFSP, taught them the warning signs, and let them know, “It’s okay not to be okay.” I brought my two older daughters along with me to meetings on “The Hill” during past Advocacy Forums. My hope is that they will be even better advocates than I am. Throughout my AFSP journey, they have witnessed how impactful just one voice can be. They know their voice is powerful. If our representatives see the need, they will listen. Every voice is loud, but together we are LOUDER!

As an Army veteran, knowing that AFSP supports legislation that makes suicide prevention a priority for Veterans, Servicemembers, and their families is very important to me.
What personally inspires you and your family in the fight to #StopSuicide?
When our 15-year-old daughter, Nina, died by suicide in September 2016, my wife Dawn and I could have hidden the cause of her death and remained silent. Instead, we chose to bring our story out of the darkness to help others. We are now focused on changing our culture so mental illness is treated with the same care and respect as physical illness. We do this to help others, and to honor Nina and the wonderful 15 years she gave to everyone whose lives she touched.

How have you and your family been involved in suicide prevention advocacy?
I have served on the board of directors of the Washington State Chapter since 2018, and currently lead our chapter’s advocacy efforts. Advocacy is a simple way for us to make a difference by supporting changes to laws (and pushing for new ones) that will bring mental health and suicide prevention into our regular conversations and help save lives. I could see the power of advocacy after attending AFSP’s annual Advocacy Forum in 2019. This year, I led the first-ever State Capitol Week event in Washington state, where we held a virtual kick-off event on State Capitol Day to educate our volunteer advocates on the policies that need support in their state, and give them the opportunity to hear from and speak to local legislators. This was followed throughout the week with Zoom meetings, phone calls, and e-mails to members of the state legislature. AFSP’s National Policy Team, along with the support of other volunteer
We are now focused on changing our culture so mental illness is treated with the same care and respect as physical illness.

Field Advocates like myself across the country, were instrumental in passing a bill which will fund 988, the National Suicide Prevention Lifeline, and our local crisis call centers the same way as the 911 number. This critical piece of legislation was signed by the governor in May.

What does the phrase #MentalHealth4All mean to you?
I hope to see a world where mental health is treated the same as physical health, with science-based treatment options, and educational programs that give children the coping tools they need at that young age, and that they will continue to use throughout their lives. It’s important that we ensure our schools have the training and resources to support this. I also know how powerful it can be to advocate for legislation that addresses the disparity in mental healthcare access for underrepresented communities.

We are focused on honoring Nina’s legacy, and I can’t imagine a better way to do so than to bring suicide prevention out of the darkness.

We are now focused on changing our culture so mental illness is treated with the same care and respect as physical illness.
We Can Do This Together: Reducing the Annual Suicide Rate 20% by 2025

The American Foundation for Suicide Prevention launched Project 2025 to lead a plan of action aimed at the bold goal of reducing the annual suicide rate 20% by 2025. It was the first large-scale, comprehensive effort to determine where we can reduce suicide through the most promising programs and interventions.

To do so, we assembled the top minds in the field, and used dynamic data modeling to determine which prevention methods could have the greatest impact. Based on those initial findings, we identified four critical areas to save the most lives in the shortest amount of time:

- Firearms
- Healthcare Systems
- Emergency Departments
- Corrections Systems

Our findings revealed that our task was achievable – but we can’t do it alone. By engaging in key strategic partnerships within these four critical areas, we can achieve meaningful systemic change.

Together, we are mobilizing institutions, associations and individuals in a collective effort to employ evidence-based practices and research to drive policy, increase understanding of mental health, and save lives.
Our free education program Talk Saves Lives: An Introduction to Suicide Prevention for Firearms Owners has been presented 40+ times in communities across the country, with 600+ participants.

**Firearms**

Nearly 23,000 people are lost each year to suicide by firearm. 51% of all suicides in the U.S. are by firearm, and 60% of all firearms deaths are suicides.

It’s crucial that we make suicide prevention education a basic component of firearms ownership.

It’s been estimated that if half the people who purchase firearms are exposed to suicide prevention education, we can expect an estimated 9,500 lives saved through 2025.

Through Project 2025, we educate the firearms owning community on how to spot signs of suicide risk, implement safe storage practices, and promote help seeking at times of distress.

We’ve partnered with the National Shooting Sports Foundation to distribute suicide prevention materials to its national network of retailers and ranges, as well as forging partnerships with other firearm organizations that want to save lives from suicide.

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**2014**

CEO Robert Gebbia and Board Chair Nancy Ferrell decide to lead a plan of action aimed at the bold goal of reducing the annual suicide rate 20 percent by 2025.

**2015**

An advisory committee of the leading experts in the field of suicide prevention is formed to establish priorities and guide the project.
**Healthcare Systems**

Up to 45% of people who die by suicide visit their primary care physician in the month prior to their death.

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, it’s been estimated that we can save 9,200 lives saved by 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.

**Prevention Training for Primary Care**

AFSP has partnered with SafeSide Prevention, founded by Dr. Tony Pisani, suicide prevention expert and primary care psychologist, to offer video-based suicide prevention training for primary care through our local chapters across the county. The SafeSide Prevention CARE training provides primary care providers a framework for responding to suicide concerns within the time and resource constraints of their primary care practice, establishing a common language and process for clinicians and staff. For organizations implementing a Zero Suicide approach, which aims to create a health system that is smarter and safer for suicide care, the SafeSide framework will fulfill their need to build a competent, caring workforce.

Since 2019, we have partnered with SafeSide Prevention to provide training to 51 primary care practices, reaching 738 physicians, nurses, and staff across the country, including locations in Georgia, North Dakota, New York, South Carolina, Oregon, and California.
We have recently partnered with our first large healthcare system - Lexington Medical Center (LMC) in West Columbia, South Carolina. The system, which includes three community medical centers, with a staff of more than 7,800 health care professionals, provides care to roughly 322,000 patients each year, and operates one of the busiest emergency departments in South Carolina.

Through a grant co-funded by AFSP’s South Carolina Chapter and the Lexington Medical Center Foundation, the LMC Physician Network is providing SafeSide Primary CARE training in 34 physician practices (which includes roughly 500 providers, clinical staff and administrative staff) as the health system works to integrate mental health into their organizational culture.

AFSP has collaborated with the National Action Alliance for Suicide Prevention to publish “Recommended Standard Care for Suicide Prevention in Healthcare,” which provides guidelines for suicide prevention best-practices in various healthcare settings including primary care, behavioral health, and emergency departments.

Through our advocacy work, we are also supporting state-level legislation and regulatory efforts for training of health professionals in suicide assessment, treatment, and management to be required in all 50 states and the District of Columbia.
Emergency Departments

Thirty-nine percent of people who die by suicide make an emergency department visit in the year prior to their death. Therefore, emergency departments present another key setting with a tremendous opportunity to save lives.

By educating and equipping emergency department physicians and staff with the suicide prevention tools they need to better screen and care for at-risk patients in EDs and other acute care settings, we can provide a safety net. It’s been estimated that by screening one out of five people seen in emergency departments, and providing short-term interventions such as Safety Planning and follow-up care, we can expect an estimated 1,100 lives saved through 2025.

One of the biggest challenges to suicide prevention in EDs is the absence of a quick and easy-to-follow procedure for emergency physicians to assess for suicide risk and to provide immediate care. AFSP has partnered with the American College of Emergency Physicians (ACEP) to develop and deliver a rapid suicide risk assessment and suicide prevention intervention tool called “I Care Too” (ICAR2E). The tool is freely available online for use by any emergency physician, nurse, or medical student.

This year, we also honored the developers of the Emergency Psychiatric Intervention (EPI), a new toolkit of best practices for patients with psychiatric emergencies. EPI was developed by a team of experts on the frontlines of emergency medicine and acute psychiatry with Vituity, a physician-owned-and-led multi-specialty partnership. The toolkit prepares emergency physicians and staff to quickly evaluate and treat patients who may be experiencing a mental health emergency or showing signs of suicidal thoughts or behaviors. EPI provides guidance for care teams in areas from initial diagnosis and treatment to discharge protocols, which could include outpatient referrals, prescription refills, or other important information.

After several months of using the new tool, average wait times for lower-risk patients were cut by 40%, and patients who were assessed by teams who had rolled out the EPI bundle had yet to revisit the hospital.

The ICAR2E Tool has been made available to ACEP’s 40,000+ members

2018
AFSP funds additional Project 2025-focused research grants, reaching a $11.2 million investment

2019
Phase 2 of Project 2025 launches, with new partnerships with organizations including Aetna, the American College of Emergency Physicians (ACEP), the Coalition on Psychiatric Emergencies, the National Commission on Correctional Health Care (NCCH), and SafeSide Prevention, and the debut of a new interactive website
Corrections Systems

Suicide is the leading cause of death in jails, and has increased 30% in prisons in recent years.

Incarcerated people are particularly vulnerable to suicide, for a variety of complex reasons. It’s been estimated that by screening for and identifying 50% of at-risk individuals at key points within the corrections system, such as at times of entry and exit - and delivering comprehensive care that addresses both physical and mental health - we can expect an estimated 1,100 lives saved through 2025.

Project 2025 provides the tools to help leaders and staff in corrections settings best care for and respond to at-risk adults in custody, as well as better care for their own mental health.

AFSP has partnered with The National Commission on Correctional Health Care to create a comprehensive guide, “Suicide Prevention Resource Guide: National Response Plan for Suicide Prevention in Corrections,” for preventing inmate suicide impacting the nearly 500,000 people served in NCCHC accredited facilities every day. The guide, which is also available to the public, provides a road map for navigating the complexities of suicide prevention in correctional settings, including assessment, intervention, and training.

This past year, we piloted the new education program Talk Saves Lives for Corrections Staff in Massachusetts, to four separate audiences within the state. The program introduces those who work in corrections to suicide risk factors and warning signs, and best practices for safety, with a specific, customized focus on the correctional environment. Participants learn how to care for adults in custody, while also attending to their own wellbeing, in consideration of the unique stresses and challenges involved in working in a correctional facility. The pilot program received extraordinary feedback, with the full program expected to officially launch in 2021.

2020

CDC increases suicide prevention funding by $10 million, with many state plans using CDC’s guidance incorporating the Project 2025 focus areas

2021

CVS-AETNA supports Project 2025 by setting its own goal to reduce suicide attempts 20% by 2025
How and why did you first get connected to AFSP? Do you have a personal connection to the cause?
I lost my grandfather to suicide on May 1, 2012. Not only did he die by suicide, but I’m an E.R. nurse, and he died in my emergency room. It was while I was processing my grief and trauma that I participated in an Out of the Darkness Walk in Batesville, Arkansas. After that walk, I got involved with my local chapter. Eventually, I was asked to join the chapter board.

Fast forward a few years, and my daughter began her social transition. I was thankful to have my AFSP family help me navigate being the parent of a transgender child and find the mental health resources she needed at the time. I’m also very passionate about our Veterans community: my grandfathers, husband and son all served. Being involved with AFSP has enabled me to help expand much needed mental health services for both the LGBTQ and Veterans communities.

You’re a Project 2025 Champion. Could you explain what that means?
There are a number of reasons why I wanted to be involved with Project 2025. Firstly, coming from a military family, guns are a way of life. I will always advocate for safe gun ownership. It’s so crucial that we spread suicide prevention education and awareness to the firearms owning community, teaching them about safe storage, and making that a part of being a responsible gun owner.

Secondly, I am a nurse and healthcare leader. I have watched as patients were shuffled through the system and still unable to receive the care they deserve. It is my desire for our healthcare system to
It is my desire for our healthcare system to do better, and Project 2025 is a wonderful in-road to help make that happen.

Being a Project 2025 Champion means being a spokesperson and primary point of contact for Project 2025 efforts in our local area. For instance, we’re working with a major healthcare system and the hope is to obtain a grant to support these efforts. Our chapter is also training law enforcement officers in suicide prevention. To reduce the rate of suicide, we depend on these kinds of partnerships in our communities. Being a Project 2025 Champion means I get to be involved in helping to make that happen.

**What does the phrase #MentalHealth4All mean to you?**

To me, #MentalHealth4All means that everyone has access to support, and that we normalize making the time and space to ask our friends and family how their mental health is doing.

I work with physicians and when they go through the process of periodically reviewing and verifying their professional credentials, they are asked whether they’ve had treatment for mental health conditions. Our doctors need to be able to admit that they sometimes need help, too. I want to see our suicide rates drastically reduced. That means we all need to be open and know it’s okay not to be okay sometimes.

We are focused on honoring Nina’s legacy, and I can’t imagine a better way to do so than to bring suicide prevention out of the darkness.
Support is crucial in both saving lives and providing much-needed care for those who have been affected by this leading cause of death.

AFSP’s Interactive Screening Program (ISP) provides a confidential platform schools and organizations can use to encourage individuals to screen for stress, depression, and other mental health concerns, have an anonymous electronic dialogue with a counselor, and connect with available services in a way that is comfortable for them.

Our Loss & Healing team, through events and programs like International Survivors of Suicide Loss Day and Healing Conversations, creates a safety net for survivors of suicide loss at a time when they need it most, offering them resources and understanding that set them on a path toward healing and hope.
The Interactive Screening Program

AFSP’s Interactive Screening Program (ISP) offers a safe and anonymous way for individuals to connect with the resources and support they need. The personal connection made between participants and counselors is the most important aspect of ISP. Individuals experiencing mental health concerns often feel shame, fear, and embarrassment, which may prevent them from seeking help. ISP’s customized, web-based platform is being 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, to connect with individuals who are not being reached by other methods.

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.
Words of Thanks from ISP Participants:

You saved my life because I didn’t know where else to turn.

This platform and your thoughtful, empathic, and personal responses have really helped. I so appreciate having felt heard for the first time in a long while. Also, it has helped me to finally find out what my options are and to make an appointment. I’m grateful. What a beautiful thing you deliver: hope!

200K people connected to professional help

Used by 160+ schools and organizations
On November 1, 2020, the South Carolina Department of Mental Health (SC DMH) and the South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS) launched AFSP’s Interactive Screening Program to all South Carolina residents 18 years of age or older. All participants take a Self-Check Questionnaire and receive a personal response from a professional counselor who offers guidance, support, and resources to help participants connect with mental health and addiction services.
Do you have a personal connection to the cause?
As a teen, I experienced depression and a cloud of darkness that felt overwhelming at times. I felt alone in that journey of finding my way towards the world’s light. Luckily, I was able to get help. As an adult, working as a social worker in a mental health setting, I lost a colleague to suicide. It made me realize that suicide can affect anyone – even a mental health provider may struggle. That’s why it’s so important to be there for other people and make it easy for those in distress to reach out for help.

Is there any particular way you feel your involvement with AFSP has made an impact?
I joined AFSP’s South Carolina chapter board in 2015 after being a walker and volunteer. I have served as chapter president for the last few years. I came to AFSP because I wanted to be part of an experience that balanced honoring those we’ve lost with supporting suicide loss survivors and those who struggle, and infusing that work with hope.

In my role as Program Director for the South Carolina Department of Mental Health’s Office of Suicide Prevention, I’ve been working on building suicide prevention programming across the state. I’ve made it my mission to help bring AFSP’s Interactive Screening Program to South Carolina. ISP is wonderful in that it provides individuals with an online platform where they can reach out anonymously, receive one-on-one connection and validation from a program counselor, and be connected to the level of resource or care they need in that moment. ISP is a screener, a lifesaver, a lifeline, an encourager, a hope builder, a connector, and an opportunity. ISP fosters connection. To me, that’s the secret sauce.

What does the phrase #MentalHealth4All mean to you?
I believe we are all wonderfully human. We are all vulnerable to having darkness overwhelm our ability to cope on any given day. I believe we are made to need each other and support individual journeys. The phrase #MentalHealth4All is a call to action encouraging advocacy for access to appropriate and better care, but also to speak up when we are concerned about someone, or when we ourselves are in need of support. It’s about the opportunity to unify and collectively heal through connection and equity. I feel less alone knowing we have the same heart and mission.
Supporting Those Who’ve Lost a Loved One to Suicide

Many suicide loss survivors had a particularly challenging time processing their loss during the COVID-19 pandemic, with many traditions commonly helpful toward grieving not as readily available.

This past year, AFSP’s Loss & Healing team have ensured that the important programs and resources that survivors of suicide loss so desperately need continue to be delivered through our local chapters across the country. Through these efforts, we provide love and understanding to help new loss survivors heal from the experience, and perhaps one day even provide the same kind of support to others.
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.

AFSP supports hundreds of large and small Survivor Day events around the world each year. At these informative and caring events – the majority of which were made virtual this past year – survivors of suicide loss came together to find connection, understanding, and hope through their shared experience. While each event was unique, all featured an AFSP-produced documentary that offered a message of growth, resilience, and connection. Just as they always have, this year’s events brought people together to support each other, as they find a way to heal together.

In addition to our local Survivor Day events, AFSP hosted its annual International Survivors of Suicide Loss Day Facebook Live event, which included an AFSP-produced documentary, followed by a discussion moderated by AFSP’s Director of Loss and Healing Programs, Brandon English, joined by suicide loss survivors and AFSP volunteers Wykisha McKinney, Jason Tomkins and Tracy Rassley. This event, through our national social media channel, was preceded one day before by our very first “Day of Hope / Dia de Esperanza,” specifically focused on serving suicide loss survivors in the Latinx community.
Healing Conversations

When a person loses someone to suicide, it’s important that they speak to someone who knows what it’s like to go through such a heartbreaking, often confusing experience.

AFSP’s Healing Conversations program 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 volunteers listen openly and without judgement, while also providing resources, comfort and encouragement for the path ahead. What transpires is a warm, supportive conversation designed to help the person cope during what may be the early stages of grief after a suicide.

The program, which is available in person, on the phone or by video chat, received nearly 1,000 requests this year, a 10% increase over the previous year, showing a strong need for this personal connection.
Suicide Bereavement Clinician Training

This past year, over 620 mental health professionals participated in AFSP’s Suicide Bereavement Clinician Training Program (SBCT), which is designed to increase their clinical knowledge of the specific needs of working with those bereaved by suicide. Thanks to the possibility of live remote training, AFSP chapters were able to reach a greater number of participants than ever before, helping to ensure that more mental health professionals know how best to support survivors of suicide loss.

Reaching More Suicide Loss Survivors, and the People Who Care for Them

There is no set timetable for how a person may experience grief-related emotions. We do know, however, that the intensity of those emotions (i.e. how strongly they are felt) does tend to change over time. This year, AFSP hosted two “Healing Milestones” webinars focused on recognizing and understanding the concept of “complicated grief,” in which an individual may seem “stuck” at the same level of intensity of emotions related to their loss over a long period of time: at least six months or more. The webinars, featuring Dr. Katherine Shear of The Center for Complicated Grief at Columbia University, and Wendy Resnick, R.N., M.S., C.S., an AFSP Support Group Facilitator trainer and psychiatric nurse, provided strategies to help those contending with complicated grief to more fully process their loss, and embark on a path toward healing.

AFSP reached over 300 suicide loss survivors through the “Workshop for Suicide Loss Survivors” presented by Dr. Jack Jordan, an expert on suicide bereavement research and clinical practice. The workshop, which included time for Q&A from participants, explored how grief after a suicide can be different than for other types of loss, the family impact of a suicide loss, the types of support available for suicide loss survivors, and different paths toward healing.

As many support groups for suicide loss survivors moved virtual, we comprehensively updated our free listing of support groups to reflect the many virtual options offered both locally and nationally for suicide loss survivors. We also created notable web content to help guide support group facilitators in a virtual environment, through an online webinar presented by Dr. Pamela Gabbay, a trainer in our Suicide Bereavement Support Group Facilitator Training program, which focused on the nuances of running and managing a suicide loss support group virtually.
Volunteer Spotlight

Amy Grosso
Central Texas Chapter

As a survivor of suicide loss, how did you first begin to heal?
I lost my mom to suicide the day after my 19th birthday, in 1998. At that time, suicide was not an open topic. My grief, and the shame I felt around my mother’s suicide, were held close to my heart for almost two decades, until 2015. My sister and I heard about AFSP’s Overnight Walk in Dallas, and formed a walk team. After being introduced to the AFSP family through that event, I got very involved with the Central Texas Chapter. Getting to know other survivors of suicide loss, I started to not only focus on how my mom’s life ended, but more on how she lived her life. I began to understand that my mom’s suicide wasn’t the end of my life, but the beginning of me finding my purpose. I am now the Board Chair for the Central Texas Chapter.

How are you and your chapter helping more recent survivors of suicide loss?
Over the last few years, we have expanded our local Survivor Day events and implemented the Healing Conversations program. Expanding Healing Conversations in our area was critical, so that those who have lost someone can talk with one of our experienced volunteers in the weeks and months following the loss. Through these programs, we are not only helping those who have lost someone to healthily grieve, we are also providing them an avenue to start to heal.
What comes to mind when you think back to yourself as a teenager, losing your mom?
I often wonder what it would have been like if there had been Survivor Day events or the Healing Conversations program back when my mom died. I wonder if I would not have felt so alone with my grief and my shame. These thoughts are what motivate me to volunteer with AFSP. I don’t want anyone to feel alone when they grieve a loved one lost to suicide. I don’t want anyone to feel like they have to live in shame. I want people to know you can learn how to survive and also thrive.

What does the phrase #MentalHealth4All mean to you?
My mom’s death is what brought me to AFSP. I stay because it is critical that we help not only with loss, but also with healing. I view all the things AFSP does as a way for all those who have been affected by suicide to find healing. Some find healing through a walk, others find it through our education programming, while still others find it through our advocacy work. We all heal differently, and AFSP is here to help guide all of us on our journey.

We all heal differently, and AFSP is here to help guide all of us on our journey.
Together, we can help #StopSuicide.

The movement to create a world without suicide is growing. Through our local chapters in every state, AFSP volunteers and staff come together in communities across the country to share their experiences and spread the message that no one has to be alone.

Whether you’re someone who has lost a loved one to this leading cause of death, or live with a mental health condition, AFSP chapters provide an introduction to others in your community who understand. Together, our volunteers unite to send a message of love, awareness, prevention, and support throughout the United States.
Community
Honoring Our Chapters’ Resilience

Each year, hundreds of our passionately engaged volunteers join together with AFSP staff for our annual Chapter Leadership Conference. Serving as a chance to share experiences and ideas, and learn what’s on the horizon for the organization, it’s also an opportunity to look back on the past year’s accomplishments, charge our batteries and renew our enthusiasm for our mission: to save lives and bring hope to those affected by suicide.

This past year, both volunteers and staff proved remarkably flexible in pivoting strategy and learning new ways to continue our work in communities everywhere, in physically safe ways. The pandemic provided surprising new opportunities, showing us just how strong and united we truly are in this important work. It also enabled us to expand this year’s conference to include a larger number of dedicated board members and volunteers.

The four-day event, held virtually and organized around the theme of #KeepGoing, culminated in an exuberant awards ceremony recognizing some of the outstanding achievements our local chapters in the past year, including overall Chapter of the Year, Georgia, the first chapter to transition an Out of the Darkness Campus Walk to a virtual walk; start a chapter-level Individual Giving Program; host a virtual Research Connection program; and plan and execute a statewide Out of the Darkness Experience.

It is through our volunteers and chapters that we reach local communities in so many different ways. This year’s Chapter Leadership Conference enabled us to recognize and celebrate the enormous impact we all make through our passion and dedication across the country.

Read more about this year’s Chapter Leadership Awards winners at afsp.org/2021CLC
The 32nd Annual Lifesavers Gala

AFSP’s annual Lifesavers Gala reminds us that when we join together for a cause, we can accomplish great things. Held virtually on May 19, this year’s Gala was a night of inspiration and action as we honored those who bring hope in the fight against suicide. Hosted by comedian Hasan Minhaj, the event was an opportunity for our supporters across the country to come together and recognize the past year’s accomplishments.

Our distinguished guests – which included actor Courtney B. Vance, Olympic runner Alexi Pappas, filmmaker Zack Snyder, football star Dak Prescott, David Axelrod and Karl Rove, and many others – shared inspiring and informative stories about how suicide has affected them, and their valiant and passionate efforts to fight it. Gala honorees have gone above and beyond in drawing attention to the cause of suicide prevention, elevating public discourse around mental health and suicide, and successfully creating real change within our society as a means to ending this leading cause of death.

The night, which included a silent auction and raffle, raised over $400,000 for the fight against suicide. Over 500 people attended the Gala this year. Though we couldn’t all be together in person, it was wonderful to know we are all still deeply connected in our commitment and passion for this important cause.

We wish to thank this year’s Gala chair, Dr. Antony Loebel, and our sponsors: Sunovion Pharmaceuticals, Inc.; Janssen Research & Development, LLC; Otsuka; Lundbeck; Acadia Pharmaceuticals Inc.; Aetna; Cohen Veteran’s Network; DonorDrive; IDEA Pharma; Real Chemistry; SCYNEXIS, Inc.; Troutman Pepper; and Viatris.
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Gerald Appelstein
Paul Chin

Northwest Arkansas Experience
Jim Tull

Pittsburgh Experience
Deb Smith
Des & Franny O’Connor

Polk County Experience
Gayle Thompson

Rochester NY Experience
Connor Dickman

Salem Out of the Darkness Experience
Team Adult Shop

Salt Lake City Experience
Lisa Jungemann

San Antonio Experience
Christian Bove

San Diego Out of the Darkness Experience
Kim McKewon

Santa Rosa Out of The Darkness Experience
Frances Templin

St. Louis Experience
7th Annual Gentleman Jake Memorial Cornhole Tournament
Mark, Kymberly, Mitchell & Anna LoCigno

Twin Cities Experience
Colin Taft

Washington DC Experience
Team Leidos
Noelle Shema

2020 Washington State Out of the Darkness Experience
Iris Elton

Willmar Experience
Mike Ahl
Memorial Funds

Abbie Jones Memorial Fund
Niccocle Calabria

Alexander Cole Memorial Fund
Trevor Cole

Andrea Heffron Surette
Brian & Renee Heffron

Austin Michael Kahler Memorial Fund
David McMillan

Autumn Snyder Tribute Fund
Snyder Family

Ben Partida’s Memorial Fund
Lindsay Leslie

Braydon James Chambers Memorial Fund
William Chambers

Brian Zinn Memorial Fund
Brandon Zinn

Brycen S Gray Memorial Fund
Patrick Gray

Carter Anderson Schade Memorial Fund
The Schade Family

Cesar Carrera: Memorial Fund
Kristen Barnfield

Chris Quadrino Memorial Fund
Steven Laurelli

Daniel Volpe Memorial Fund
Christine Volpe

Deb Nelson Memorial
Tess Nelson

Douglas B Jones Memorial Fund
Richard Jones

Dr. James Kevin Culberson Memorial Fund
Dillon Blood

Eric Batzdorff’s Memorial Fund
Lisa Kearns

Fly, Elaniv Fly
Tania Gainza-Burnett

Gavin Harbaugh Memorial Fund
Karen DeArana

Help and Awareness
Arlene Thurston

Ian Prout Forever
Ashley McAvey

In Honor of Kyle Thomas
Amanda Davison

In Memory of Hang Ning (Henry) Lee
Raymond Lee

In Memory of Josiah Epps
Alexis Epps

Jeremiah Palmisano Memorial Fund
Palmisano Family

Joe Casten’s Memorial Fund
Beth Casten
John Bernard Braskamp
Ana Braskamp
Jonathan Jackson Memorial
Terry Jackson
Joseph Allen Rodgers
Joe Rodgers
JR Santiago’s Memorial Fund
Nellie Webb
Julian Thomas Lasher Memorial Fund
Barbara Lasher
Ka’tiauna Morris Memorial Fund
Brandon Morris
Kaden’s Fund
Taryn Anderson
Kameron Eichert Memorial Fund
Alice Eichert
Katie by Design
Patricia DeAngelis
Katie Dougherty Memorial
Christina Dougherty
Kevin Kuczo Memorial Fund
Kimberly Barlow Cook
Love Yourself
Alexander Halbeisen
Making An Impact Through Project 2025
Cara Levinson
Mark Grillo Memorial Fund
Paige Reinis
Meghan (Eaves) Smith Memorial Fund
Kimberly Gelb
Michael Hong’s Memorial Fund
Ellen Hong
Michael Trottier Memorial Fund
Terry Trottier
Michael Warner Memorial Fund
Anthony Lenzo
Mike Schroeder 8-Bit Memorial Fund
Michael Bartone
Nicholas J. Casey (Team NJC)
TJ Casey
Nick Ciullo’s Memorial Fund
Bob Ciullo
Nick Panetta
Lia Panetta
Nicole Ebaugh Memorial Fund
Ariel Ebaugh
Page Petersen is NEVER ALONE
Alan Stuart
Remelinda Tecson Memorial Fund
Ashley Tecson
Remembering Jerry
Christina Wilty
Ride to Fight Suicide
Tim Paul
Riding to Prevent Suicide
Kevin Minassian
Ryan Alexander Cussnick Memorial
FWPD Roberry Unit
Ryan Attryde AFSP Memorial Fund
Kristina Attryde
Ryan Michael Waple
Donna Gray

Sabrina Eve Ross Memorial Fund
Barry Ross

Samona Andrews
Janine Koeneke

Scott Dansker
Lisa Grippo

Stuart D. Hunter Memorial Fund
Kurt Hunter

Support Project 2025
Brookie Mcilvaine

Tara McMahon’s Memorial Fund
Catherine Miles

Team Sunny SafePlace
Ashten Fournier

Ted Arnold Memorial Fund
Kenneth Arnold

The Katie Whysong Memorial Fund
John Dick

The Keith Milano Memorial Fund
Denise Sprung

Thomas B. Dinsmore Memorial
Thomas Dinsmore

Thomas E Kanczuzewski Memorial Fund
Lyrin Kanczuzewski

Tommy Ten Hagen Memorial Fund
John Ten Hagen

Trevor Berry Memorial Fund
Alison Cusenbary

With Love for Ruffin King
Alexandra King

Personal Campaigns

#ReleaseTheSnyderCut Movement

100-Mile Treadmill Run
Christopher Malenab

Delbarton School’s Raising Hope Walk, 2020-2021
Angela Brown

Fraternity and Sorority Life - University of Tampa
Tara Larsen

HCA Film Awards American Foundation for Suicide Prevention Fundraiser
Scott Menzel

Holdens Ironman 2021 for Suicide Prevention
Holden Ottolini

Mental Health & Matrimony
Blair Bigelow

Run the World with Sabrina
John Ferrara

Ryann’s 29th Birthday
Ryann Hart

Shine A Light
Stacey Lichtenthal

Strides for Suicide Prevention
Jackson Hobgood

The Friendship Classic
Garrett Williamson
The Samuel L. Asbury Foundation Fundraiser
John Michael Klopfenstein

Why Suffer Alone? 2020 Challenge
Jessica Schulz

World Mental Health Day 2020
Katelyn Hennessy

Endowed Funds

Joanne B. Simches Endowed Fund

The John Terry Maltsberger Endowment for Clinical Education
## Statement of Financial Position  (Year End June 30, 2020)

### Assets

**Current assets:**
- Cash $16,956,924
- Investments 37,753,843
- Unconditional promises to give and other receivables 927,114
- Prepaid walk material and inventory 3,928,230
- Other prepaid expenses 915,993

**Total current assets** 60,482,104

**Property and equipment:**
- Property and equipment, at cost 4,711,330
- Less accumulated depreciation 1,381,182

**Property and Equipment, at cost less depreciation** 3,330,148

**Other assets:**
- Restricted cash 707,576
- Restricted investments 2,055,220
- Investments - board-designated 3,187,320
- Educational films, net 33,583
- Security deposits 29,896

**Total other assets** 6,013,595

**Total assets** $69,825,847

### Liabilities and Net Assets

**Current liabilities:**
- Grants payable $959,394
- Accounts payable and accrued expenses 1,904,263
- Refund advance 2,272,910
- Deferred event revenue 2,215,993

**Total current liabilities** 7,352,560

**Noncurrent liabilities and deferred credits:**
- Refund advance 2,000,000
- Deferred rent credit 2,716,273

**Total liabilities** 12,068,833

**Net assets without donor restrictions:**
- General operating 49,990,434
- Board-designated 3,187,320

**Total net assets without donor restrictions** 53,177,754

**Net assets with donor restrictions** 4,579,260

**Total net assets** 57,757,014

**Total liabilities and net assets** $69,825,847
<table>
<thead>
<tr>
<th>Functions</th>
<th>Without Donor Restrictions</th>
<th>With Donor Restrictions</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenues</td>
<td>$18,763,305</td>
<td>–</td>
<td>$18,763,305</td>
</tr>
<tr>
<td><strong>Net function income</strong></td>
<td>16,425,152</td>
<td>–</td>
<td>16,425,152</td>
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<tr>
<td>Donations</td>
<td>13,792,063</td>
<td>767,334</td>
<td>14,559,397</td>
</tr>
<tr>
<td>Other revenues, net</td>
<td>920,618</td>
<td>84,380</td>
<td>1,004,998</td>
</tr>
<tr>
<td>Investment income</td>
<td>8,932,197</td>
<td>451,630</td>
<td>9,383,827</td>
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<tr>
<td>Net assets released from restrictions</td>
<td>445,164</td>
<td>(445,164)</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total revenues, gains and other support</strong></td>
<td>40,515,194</td>
<td>858,180</td>
<td>41,373,374</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenses</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Program services</td>
<td>24,874,206</td>
<td>–</td>
<td>24,874,206</td>
</tr>
<tr>
<td>Management and general</td>
<td>2,068,353</td>
<td>–</td>
<td>2,068,353</td>
</tr>
<tr>
<td>Fundraising</td>
<td>4,005,256</td>
<td>–</td>
<td>4,005,256</td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td>30,947,815</td>
<td>–</td>
<td>30,947,815</td>
</tr>
</tbody>
</table>

| Change in net assets                     | 9,567,379                | 858,180                 | 10,425,559     |

<table>
<thead>
<tr>
<th>Net assets</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning</td>
<td>43,610,375</td>
<td>3,721,080</td>
<td>47,331,455</td>
</tr>
<tr>
<td><strong>Ending</strong></td>
<td><strong>$53,177,754</strong></td>
<td><strong>$4,579,260</strong></td>
<td><strong>$57,757,014</strong></td>
</tr>
<tr>
<td></td>
<td>Research</td>
<td>Prevention and Education</td>
<td>Loss and Bereavement Programs</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>-----------------</td>
<td>--------------------------</td>
<td>------------------------------</td>
</tr>
<tr>
<td>Grants</td>
<td>$6,233,180</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Salaries and Wages</td>
<td>693,781</td>
<td>4,022,166</td>
<td>2,625,678</td>
</tr>
<tr>
<td>Employee Health &amp; Retirement Benefits</td>
<td>125,398</td>
<td>726,988</td>
<td>474,579</td>
</tr>
<tr>
<td>Research, Educational and Survivor Conferences and Programs</td>
<td>30,247</td>
<td>1,020,519</td>
<td>536,587</td>
</tr>
<tr>
<td>Out of Darkness Programs</td>
<td>–</td>
<td>331,683</td>
<td>398,019</td>
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<tr>
<td>Office</td>
<td>45,186</td>
<td>793,903</td>
<td>382,930</td>
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<tr>
<td>Occupancy</td>
<td>100,061</td>
<td>580,097</td>
<td>378,689</td>
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<tr>
<td>Telecommunications and Internet</td>
<td>3,682</td>
<td>40,168</td>
<td>28,693</td>
</tr>
<tr>
<td>Equipment Rental and Maintenance</td>
<td>22,941</td>
<td>134,603</td>
<td>88,091</td>
</tr>
<tr>
<td>Travel</td>
<td>1,674</td>
<td>41,567</td>
<td>13,721</td>
</tr>
<tr>
<td>Consultants</td>
<td>184,797</td>
<td>1,434,220</td>
<td>581,631</td>
</tr>
<tr>
<td>Professional Fees</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Depreciation</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>7,440,947</strong></td>
<td><strong>9,125,914</strong></td>
<td><strong>5,508,618</strong></td>
</tr>
</tbody>
</table>
## 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

<table>
<thead>
<tr>
<th></th>
<th>Program Services</th>
<th>Supporting Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Services</td>
<td>$24,874,206</td>
<td>$6,073,609</td>
</tr>
<tr>
<td>Administrative Costs</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Table

<table>
<thead>
<tr>
<th>Program Services and Administrative Costs</th>
<th>Total Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advocacy Programs</td>
<td>$6,233,180</td>
</tr>
<tr>
<td>Total Program Services</td>
<td>$8,773,878</td>
</tr>
<tr>
<td>Management and General</td>
<td>919,651</td>
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<tr>
<td>Fundraising</td>
<td>2,142,219</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>$11,835,748</td>
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<tr>
<td>Total Expenses</td>
<td>$2,139,257</td>
</tr>
<tr>
<td>Administration and General</td>
<td>152,589</td>
</tr>
<tr>
<td>Fundraising</td>
<td>366,423</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>1,096,125</td>
</tr>
<tr>
<td>Research, Educational and Survivor</td>
<td>74,801</td>
</tr>
<tr>
<td>Conferences and Programs</td>
<td>180,754</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>1,631,342</td>
</tr>
<tr>
<td>Out of Darkness Programs</td>
<td>308,962</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>1,707,013</td>
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<tr>
<td>Office</td>
<td>141,180</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>3,269,022</td>
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<tr>
<td>Telecommunications and Internet Equipment</td>
<td>373,923</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>164,562</td>
</tr>
<tr>
<td>Equipment Rental and Maintenance</td>
<td>164,562</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>30,947,815</td>
</tr>
</tbody>
</table>

20% is spent on Administrative Costs, 80% on Program Services.
Together we can help #StopSuicide