



NVDRS Provides Critical Data for Suicide Prevention Policies

Although it is preventable, more than 30,000 Americans die by suicide each year, and another 1.4 million Americans attempt it, costing more than \$3.8 billion in hospital expenses and \$13 billion in lost earnings.

In the United States, there is no comprehensive national system to track suicides. However, the National Violent Death Reporting System (NVDRS), established by the Centers for Disease Control and Prevention (CDC) in 2002, is under way in 17 states, which can now share data on violent deaths — including suicide — so that effective violence prevention policies may be developed. At least six of the 17 states currently participating in NVDRS have released comprehensive suicide prevention plans based on NVDRS data.

While the program is still in its early stages, the benefits of NVDRS are already evident. For example, NVDRS data from 13 states uncovered significant racially and ethnically based differences in mental illness diagnosis and treatment among those who died by suicide. Whites were more likely to have been diagnosed with depression or bipolar disorder, while blacks were more likely than other groups to have been diagnosed with schizophrenia. Hispanics were less likely to have been diagnosed with a mental illness or to have received treatment at all, although the family reports of depression were comparable to other racial groups.

Additionally, NVDRS data from all 17 states show that veterans accounted for 26 percent of the males who died by suicide in 2004; veterans also accounted for 26 percent of the male U.S. population (according to the 2000 U.S. Census). While veterans may not be over-represented among suicide decedents, the data point to the importance of veteran administration services as venues for potentially identifying and treating at-risk individuals.

Following are some examples of the ways in which state health officials are using NVDRS data to develop suicide prevention plans.

Oregon Draws on NVDRS Data to Create Elder Suicide Prevention Plan

With the sixth-highest rate of elder suicide in the nation, Oregon tailored its NVDRS data to develop an epidemiological profile of victims and establish an elder suicide prevention plan. NVDRS data indicated that most victims of elder suicide in Oregon had been suffering from physical illness, and that 37 percent had visited a doctor in the 30 days prior to their death. As a result of this NVDRS data, the state developed an elder suicide prevention plan that calls for better integration of primary care and mental health services, so that potential suicide victims can be better identified and treated. The plan also calls for training primary health care providers, integrating mental health care into primary care and educating family members about the risks of suicide and warning signs of depression.

Virginia Data Reveals that Veterans are at Risk

In Virginia, NVDRS data found that one in four of Virginia's suicide victims had served in the military. Among male victims older than 65, more than 60 percent were veterans. These findings indicate that the state's suicide prevention and education efforts must extend to veterans' hospitals and service providers.

Massachusetts Tracks Children at Risk

With data generated by NVDRS, state health officials in Massachusetts have been able to monitor suicides more accurately among specific populations, such as foster children and youths in custody. The NVDRS data has been used to secure grants for violence prevention programs for these special populations, about whom data had previously been impossible to obtain.

Alaska Tackles Highest Suicide Rate in the Nation

Among the early findings of NVDRS data in Alaska is the high risk for suicide among victims of domestic violence, particularly during a break-up. As such, Alaska's researchers and injury prevention specialists are focusing their attention on prevention strategies for victims of domestic violence.

Colorado Data Finds High Risk for Construction Workers and Arrestees

In Colorado, a review of NVDRS data found that the most frequently noted occupation of suicide victims was construction, accounting for 14 percent of cases in which the victim was 18 years or older. The information from NVDRS can now provide guidance on ways to reach a significant number of potential victims: suicide prevention education programs undertaken by labor unions and construction employers. The NVDRS data also found that many victims over the age of 18 completed suicide during an arrest attempt or while in police custody, demonstrating a need to partner with law enforcement about strategies to minimize suicide risk.

South Carolina Integrates Suicide Prevention Plan and Mental Health Care

NVDRS data provides state health officials with vital information that indicates behavior patterns and enables health officials to identify individuals at risk and intervene early with appropriate preventive measures. In South Carolina, after NVDRS data showed that more than 40 percent of suicide victims were currently or formerly receiving mental health treatment or tested positive for psychiatric medication, the state established its first-ever suicide prevention plan, which also included the formation of a Suicide Prevention Task Force.

Implement NVDRS in all 50 States

While state-specific information provides enormous value to local public health and law enforcement officials, national data from all 50 states, the U.S. territories and the District of Columbia must be obtained to complete the picture and establish effective national suicide prevention policies and programs.

At an estimated annual cost of \$20 million, NVDRS is a relatively low-cost program that yields high-quality results. The National Violence Prevention Network, a coalition of national organizations who advocate for health and welfare, violence and suicide prevention and law enforcement, is asking Congress to provide no less than \$7.5 million for this critical program for fiscal year 2009. The cost of not implementing the program is much greater: without national participation in the program, thousands of American lives remain at risk.