

Investment in research saves lives and money



facts about:

Suicide

"If you think research is expensive, try disease."

- Mary Lasker 1901-1994

Today:

- ❑ In 2010, there were 105 suicides in the United States daily, resulting in over 35,000 deaths that year.*
- ❑ In 2012, an estimated 9 million Americans had serious thoughts of suicide, and an estimated 1.3 million attempted suicide.**
- ❑ Veterans account for an estimated 20% of the deaths caused by suicide.*
- ❑ In 2009, the number of deaths caused by suicide surpassed the number of deaths caused by vehicle accidents.*
- ❑ In 2011, almost 16% of students in grades 9 to 12 reported considering suicide, half reported those thoughts led to at least one suicide attempt in the past year.*
- ❑ Males make up 79% of suicides and are four times more likely to commit suicide than females.*

The Cost:

- ❑ Suicide costs Americans an estimated \$34.6 billion in medical bills and lost productivity annually. The total economic burden from suicide and self-inflicted injuries is estimated to be over \$41 billion annually.*
- ❑ A single suicide costs an estimated \$1 million in medical costs and lost productivity.*
- ❑ In 2011, almost 500,000 people needed emergency medical care for self-inflicted injuries, costing an estimated \$6.5 billion in medical costs and lost productivity.*

SOURCES: * CENTER FOR DISEASE CONTROL AND PREVENTION. <WWW.CDC.GOV>
 **SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION. <WWW.SAMHSA.GOV> 2013.

SAVING LIVES

SAVING MONEY

HOW RESEARCH SAVES LIVES:

- ❑ Approximately 7% of the U.S. population experienced a loss from suicide in 2013. Having a family or friend commit suicide puts one at risk for committing suicide themselves. Reducing the prevalence of suicide does not only save the lives of those directly at risk, but also of friends and families. By identifying those who have been exposed to suicide as a risk factor, preventive actions can be taken to save lives.*
- ❑ Clozapine, an antipsychotic medication, has been shown to reduce the risk of suicide attempt reoccurrences in patients with Schizophrenia or Schizoaffective disorder.**
- ❑ An NIH study found that behavioral outpatient therapies, like Multisystemic Therapy, reduce suicidal thoughts and reoccurrences in high-risk adults. This family and community based intervention can be done while a patient continues with their daily routine, aiding in the renormalization and reducing the need to commit them into observational facilities.**

HOW RESEARCH SAVES MONEY:

- ❑ If the prevalence of suicide were decreased by just 10%, the United States would save \$3.5 billion per year in medical costs and lost productivity. That amount would support all NIH funded suicide research for nearly 95 years.*+
- ❑ A randomized control study found that there was a 40% drop in suicide attempts in schools that implemented the Signs of Suicide Prevention Program (SOS). The high school kit for this program costs less than \$400, which is 2,667 times less than the cost of a single suicide.*++~

SOURCES:
 * CENTER FOR DISEASE CONTROL AND PREVENTION. <WWW.CDC.GOV>
 ** NATIONAL ACTION ALLIANCE FOR SUICIDE PREVENTION. 2014. <WWW.SUICIDE-RESEARCH-AGENDA.ORG>
 + NATIONAL INSTITUTES OF HEALTH. RePORT. 2014. <WWW.REPORT.NIH.GOV>
 ++ SUBSTANCE ABUSE AND MENTAL HEALTH SERVICE ADMINISTRATION. 2014. <WWW.NREPP.SAMHSA.GOV>
 ~ SCREENING FOR MENTAL HEALTH. 2010. <WWW.MENTALHEALTHSCREENING.ORG>

survivor:



NAME: Pua Kaninau
 AGE: 64
 CIRCUMSTANCE: Son's Suicide

Pua Kaninau's life changed on April 5, 2003 when her son Kaniela committed suicide just five days after his 18th birthday. Now trained to assess suicide risk, Pua recognizes that Kaniela was depressed. His grades declined, his sleep was irregular and he seemed rebellious.

On the day of Kaniela's death, his sister was so concerned about him after a crisis at school that she alerted their mom and dad. Pua and her family talked to Kaniela but brushed aside the possibility of suicide and let him go with his friends. Kaniela's friends called later to report he was missing.

Kaniela's death inspired Pua to learn more about suicide and help other families. She earned a master's degree in social work in 2007, which includes research on teens and suicide. Pua is recognized statewide as an advocate, founding the Hawaii Suicide Prevention Education, Awareness, Research (SPEAR) Foundation and co-chairing the state's Suicide Prevention Steering Committee for three years.

"We absolutely need more funding for suicide prevention and research," says Pua. As a Native Hawaiian, she particularly wants to see more research in her community since Native Hawaiians are at an elevated risk for suicide among all youth groups. "Because of the Garrett Lee Smith Memorial Act we have more states involved, but we need clinical and other research on suicide in every state."

facts about: } Suicide

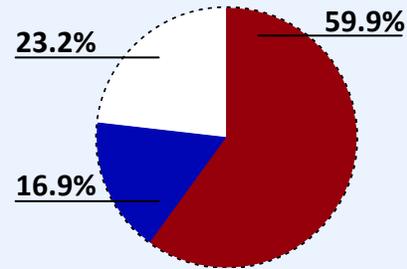
Hope for the Future:

- In 2012, the [National Strategy for Suicide Prevention](#) details four “Strategic Directions:” “Healthy Empowered Individuals, Families and Communities,” “Clinical and Community Preventive Services,” “Treatment and Support Services” and “Surveillance, Research, and Evaluation.” These four directions have their own set of goals, objectives and plans of action to reduce the prevalence of suicide in the United States. Implementation of these plans is expected to lower the incidence of suicide in the U.S.*
- A study found that a stressful environment at a young age causes physical changes within the brain that increases the risk for depression and suicide. The specific mechanisms that are altered by stress have been identified making it possible to target those areas for therapeutic interventions in the future. By increasing the knowledge around the causes of suicide, researchers should be able to develop more effective treatments to reduce the incidence of suicide.**
- The suicide Prevention Resource Center compiled a Best Practices Registry to be used as a resource for the public to educate themselves about their options for prevention programs. The registry supplies information about the type of program, the founding organization and a factsheet on each program. These resources educate the public on interventions to combat the incidence of suicide while simultaneously attempting to remove the stigma by offering guidance and support. Wide distribution of these materials will aid in the national prevention effort.†

National Poll: Value in Research

Do you believe there is value in conducting research to better understand and prevent injury and violence caused by preventable accidents, deliberate acts and negligence?

- Yes
- No
- Not Sure



SOURCE: A NATIONAL RESEARCH!AMERICA POLL OF LIKELY VOTERS CONDUCTED IN PARTNERSHIP WITH ZOGBY ANALYTICS IN 2013.

SOURCES:

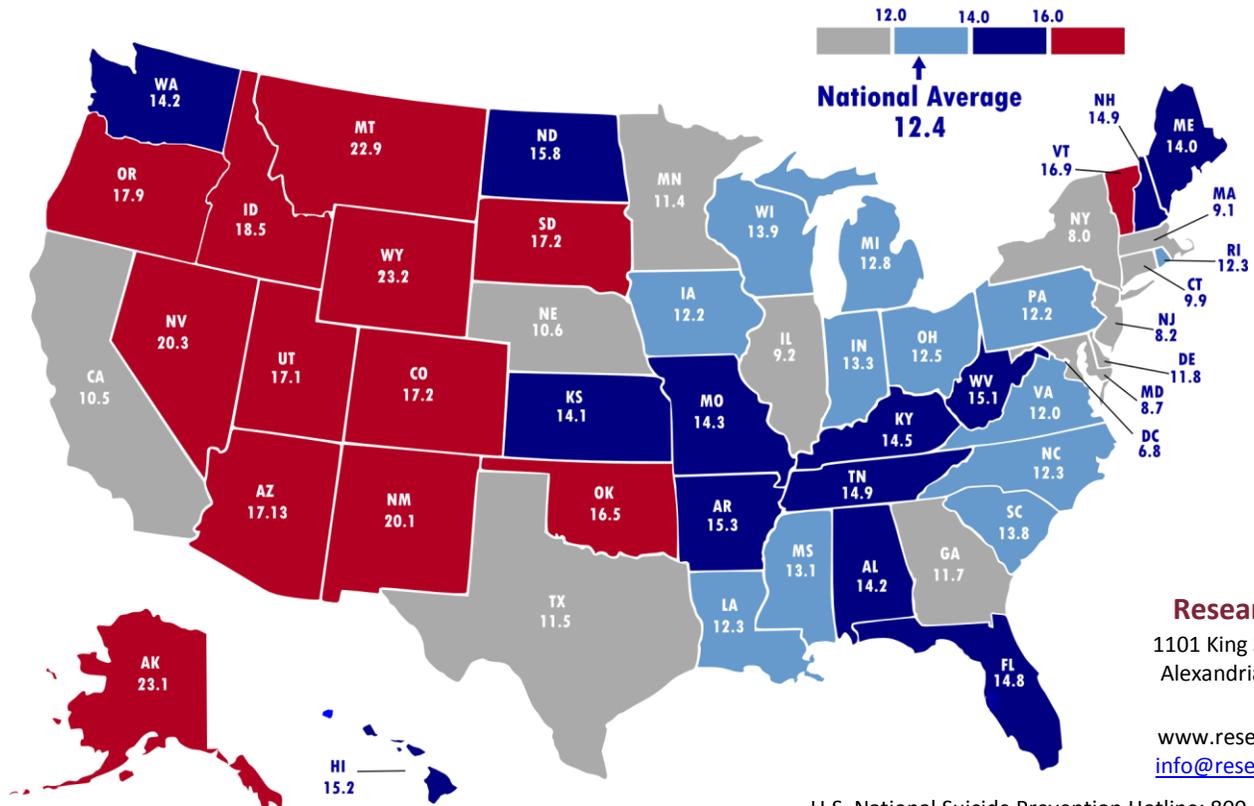
- + U.S. SURGEON GENERAL AND ACTION ALLIANCE. 2012. <WWW.SAMHSA.GOV/NSSP>
- ** NATIONAL ACTION ALLIANCE FOR SUICIDE PREVENTION. 2014. <WWW.SUICIDE-RESEARCH-AGENDA.ORG>
- + SUICIDE PREVENTION RESOURCE CENTER. 2012. <WWW.SPRC.ORG/BPR>

The Bottom Line:

Suicide is a preventable public health problem and a leading cause of death in the United States. Greater investment in suicide prevention research is needed to stop the untimely deaths of thousands of Americans each year.

Suicide Death Rate per 100,000 people, 2010

SOURCE: AMERICAN ASSOCIATION OF SUICIDOLOGY



Research!America

1101 King Street, Suite 520
 Alexandria, Virginia 22314
 703.739.2577
www.researchamerica.org
info@researchamerica.org

U.S. National Suicide Prevention Hotline: 800-273-TALK (8255)

The Albert and Mary Lasker Foundation is a founding partner in this series of fact sheets. www.laskerfoundation.org