



Suicide Prevention Priorities Statement from the National Council for Suicide Prevention

June 22, 2025

In 2023, more than 49,000 people in the United States died by suicide — approximately one death by suicide every 11 minutes. Some populations, including white males, people in rural communities, veterans, youth and LGBTQ+ youth, first responders, and others have a higher risk of suicide. Suicide is also the second-leading cause of death in the U.S. for people ages 10 to 34. Beyond the immeasurable human cost, suicide creates an economic burden exceeding \$510 billion annually through healthcare expenses, lost productivity, and reduced quality of life (CDC, 2020). Therefore, it is in the national economic interest to increase investments in preventing suicide.

As the leaders of the National Council for Suicide Prevention (NCSP), we serve millions of Americans touched by mental illness and suicide, including those directly affected, their families, and survivors. We also support researchers and healthcare professionals working to understand, treat, and prevent these critical issues. Every advance in the science and understanding of suicide prevention saves lives, restores hope, and strengthens communities across our nation.

A comprehensive approach to suicide prevention is necessary to reduce the burden of suicide in America and a comprehensive healthcare system requires federal and state agencies to prioritize mental health and suicide prevention together. By coordinating services strategically across government levels, we can support all citizens and eliminate gaps in care while maintaining uninterrupted access to lifesaving support. These include:

- **988 Suicide & Crisis Lifeline**: The national 988 network of more than 200 crisis call centers across the nation is critically important for those in imminent crisis or experiencing emotional distress. Interconnected with 988 are hundreds of other crisis and support services that respond to inquiries from Americans 24/7/365. Since its launch in July, 2022, the 988 network has responded to [more than 14.5 million](#) calls, texts, and chats initiated by people in need (<https://www.samhsa.gov/mental-health/988/performance-metrics>). The routing network has proved critical to connecting individuals with trained counselors who can engage with and respond to their specific needs, saving lives every day in the United States. Having a national system that provides and supports crisis services for everyone is integral to suicide prevention. Importantly, in support of research that shows services provided by those of a similar background are more effective, the 988 Suicide & Crisis Lifeline includes specialized services for veterans who have a suicide rate that is 60% greater than that of their non-veteran peers and for LGBTQ+ youth who are 4 times more likely to attempt suicide than straight peers.



- Medicaid: Over 80 million Americans have healthcare benefits through Medicaid, 35% of whom have a mental illness diagnosis and 20% of whom have a substance use disorder. Reducing access to or the size of Medicaid benefits increases the risk of significant and negative harm to those who are struggling with mental health challenges, while also increasing the risk of suicide to those most vulnerable.
- Data collection: Researchers and public health professionals need data on hospital admissions for self-harm and suicide deaths to develop effective prevention strategies. Eliminating programs or restricting data collection of demographic variables, or significantly reducing costs for programs that collect and analyze this data could leave the country without an effective way to understand how suicide and suicide-related behaviors are impacting the country. Effective suicide prevention relies heavily on data collection systems sponsored by the federal government.

We urge legislators and policymakers to act now to protect two critical resources under immediate threat. First, we must preserve Medicaid coverage for the 80 million Americans who depend on it, including the millions living with mental illness and substance use disorders. Any cuts to Medicaid will directly result in lost lives, as vulnerable populations lose access to treatment and crisis intervention. Second, it is crucial to keep operating 988 providing services to all Americans and specialized LGBTQ+ youth support services. These are vital resources that will determine whether thousands of Americans receive help or face their crises alone.

We ask our respective constituents to contact state and federal policymakers and other leaders in support of retaining these critical services, which play a vital role in preventing suicide and saving lives.

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