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CDC-RFA-CE-25-0009

Comprehensive Suicide Prevention

Department of Health and Human Services

Centers for Disease Control - NCIPC

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FORECAST VERSION HISTORY RELATED DOCUMENTS PACKAGE

NOTE: This is a Forecasted Opportunity.

General Information

Document Grants Notice **Version:** Forecast 1

Type: Forecasted Aug 06, 2024

Opportunity CDC-RFA-CE-25- **Date:**

Number: 0009 **Last** Aug 06, 2024

Opportunity Comprehensive Updated

Title: Suicide Date:

Prevention **Estimated** Feb 03, 2025

Opportunity Discretionary **Post Date:**

Category: Estimated Apr 04, 2025

Opportunity Application Electronically

Category Due Date: submitted

Explanation: applications must

Funding Cooperative be submitted no later than 11:59 pm

Type: ET on the listed

application due Category of Health date.

Funding

Activity: Estimated Aug 01, 2025

Award Date: Category

Explanation: Estimated Sep 01, 2025

Project Start Expected 11

Date: Number of

Awards: Fiscal Year: 2025

93.136 -- Injury CFDA Archive May 04, 2025

Prevention and Number(s): Date:

> Control Research \$49,655,695 **Estimated**

and State and Total

Community Based **Program Programs**

Funding:

Cost Sharing No Award \$1,200,000 or Matching

Ceiling: **Requirement:**

\$650,000 Award

Floor:

Eligibility

Eligible Public housing authorities/Indian housing authorities

Applicants: Native American tribal organizations (other than Federally

recognized tribal governments)

Private institutions of higher education

For profit organizations other than small businesses

Special district governments

Public and State controlled institutions of higher education

State governments

Native American tribal governments (Federally recognized)

Independent school districts

Unrestricted (i.e., open to any type of entity above), subject to any clarification in text field entitled "Additional Information

on Eligibility"

County governments

Nonprofits that do not have a 501(c)(3) status with the IRS, other than institutions of higher education
Others (see text field entitled "Additional Information on Eligibility" for clarification)

Nonprofits having a 501(c)(3) status with the IRS, other than institutions of higher education
City or township governments

Small businesses

Additional
Information
on
Eligibility:

The award floor for this NOFO is \$650,000. The award ceiling is \$1,200,000. CDC will consider any application requesting an award lower than \$650,000 or higher than \$1,200,000 as nonresponsive and it will receive no further review. Eligible applications must include the following to be responsive:One (1) letter of Commitment (LOC): Obtain from the jurisdiction's health department leadership (state or territorial) on official letterhead, endorsing the proposed activities. One (1) letter of Support (LOS) and Preliminary Data Use Agreement (DUA) from the manager of suicide-related morbidity and mortality surveillance data on official letterhead, confirming data access for the applicant program's jurisdiction. Three (3) letters of Support (LOS) from Partnering Organizations: Gather 3 letters from organizations that will assist in implementing proposed activities, corresponding to each tier: Tier 1: Community-based interventionsTier 2: Healthcare-related interventionsTier 3: Upstream interventionsTwo (2) letters of Support from Multi-Sectorial Partners: Obtain 2 letters from prospective partners such as American Foundation for Suicide Prevention (AFSP) chapters, suicide prevention coalitions, or organizations working with survivors or those with lived experience. One (1) preliminary Program Organizational Chart: Provide a chart showing the required staff members:1 Full-Time Employee (FTE) or equivalent epidemiologist0.5 FTE communications specialist0.5 FTE evaluatorApplicants must submit the LOC, LOS, preliminary DUA and preliminary organizational chart, name the files "LOC", "LOS-DUA", "LOS-Tier Partners", "LOS-multi-sectorial partners" and

"Organizational Chart" and upload them as PDF files at www.grants.gov. Applications that do not meet the above criteria will be considered non-responsive and will not move forward for review.

Additional Information

Agency Name: Centers for Disease Control - NCIPC

Description:

This notice of funding opportunity (NOFO) builds on and expands the Injury Center's current Comprehensive Suicide Prevention program. The purpose of this NOFO is to implement and evaluate a comprehensive approach, with attention to one or more disproportionately affected populations (such as veterans, rural communities, tribal populations, LGBTQ, homeless, or others). These populations account for a significant proportion of the suicide burden and/or have suicide rates greater than the general population in a jurisdiction(s) (such as state, county, or tribe). Strategies and ActivitiesShort-term Outcomes (Year 2-3)Midterm Outcomes (Years 4-5)Long-term Outcomes (Years 5 and beyond)1. Within first six months, assess partnerships, data, and existing capacity for suicide prevention to inform comprehensive approach to suicide:Partnership - Assess existing and new partnerships (including those for syndromic surveillance) to create and implement a multi-sectoral partnership planData Utilization - Utilize surveillance (including syndromic) data to identify DAP and contributors to suicide morbidity and mortalityAsset and Gap Inventory -Create an inventory of existing suicide prevention programs in the jurisdiction to identify assets and gapsSelection of strategies/approaches – Utilize findings from activities 1A-C to select appropriate strategies/approaches from the CDC Suicide Prevention Resource for Action (see Appendix 1)Increased and sustained critical multisectoral partner

engagement in CSP programmatic and surveillance activities Increased recipient and partner awareness of DAPs, suicide contributors, and emergent trends Increased reach of suicide prevention strategies to address suicide burden among DAPs in jurisdiction Increased utilization of evaluation findings for continuous quality improvement and assessment of outcomes Increased partner awareness of CSP programmatic, data, and evaluation findingsImproved coordination of comprehensive suicide prevention among recipients and partners within jurisdiction Sustained recipient and increased partner use of surveillance data to inform suicide prevention and response Sustained recipient infrastructure to lead implementation of comprehensive suicide prevention in jurisdiction Decreased risk factors and increased protective factors among DAP(s) in jurisdiction Increased utilization of evaluation findings to identify promising practices to reduce and prevent suicideReduction in suicide morbidity and mortality among selected DAPs 2. Following Strategy 1 activities and no later than year 2, implement a comprehensive approach to suicide prevention:Partnership -Build and sustain partnerships to implement comprehensive suicide activitiesData Utilization - Utilize surveillance (including syndromic) data to assess suicide contributors, trends, and inform suicide prevention and responseAsset and Gap Inventory - Annually update the inventory of existing suicide prevention programs in the jurisdictionImplementation of strategies/approaches -Leverage partnerships to implement strategies/approaches from the CDC Suicide Prevention Resource for Action to address suicide contributors among DAPs and fill jurisdictional gaps3. Following Strategy 1 activities and no later than year 2, Evaluation all activities (1A-D and 2A-D) for continuous quality improvement, to assess sustained capacity for suicide prevention in jurisdiction, and to identify promising practices for suicide prevention from the field4. Following Strategy 1 activities and no later than year 2, Communication and dissemination of programmatic and

data findings to inform partner programmatic decision-

making

Link to Additional Information:

Grantor Comprehensive Suicide Prevention Mailbox

Contact 770-488-3835

Information:

csp@cdc.gov

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