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National Center for Injury Prevention and Control (NCIPC)

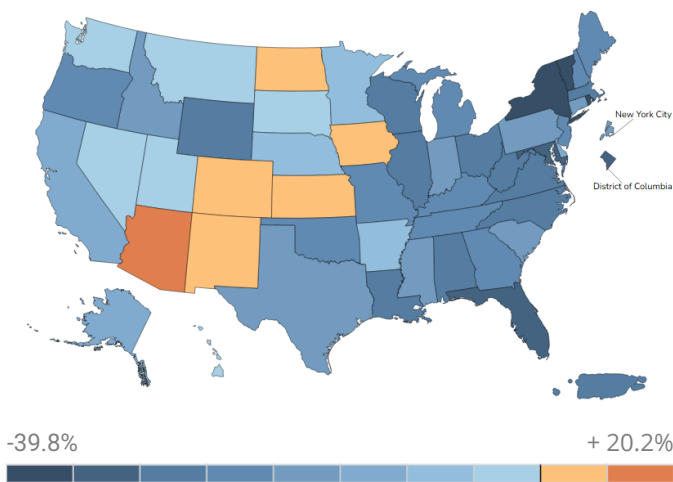
FY 2025 Injury Prevention Funding Overview



Injury is **the leading cause of death and hospitalization** for Americans ages 1-44, with more fatalities resulting from injuries and violence—such as overdose, suicide, motor vehicle crashes, drowning, and homicide—than any other single cause. **Annually, these issues cost the U.S. over \$4 trillion**, impacting workforce and community stability.

The Injury Center offers public health services that reduce the prevalence of injury and are not available through other federal agencies.

18.9% Reduction in Overdose Deaths Nationally



Percent Change in Predicted 12 Month-ending Count of Drug Overdose Deaths, by Jurisdiction:

September 2024 to September 2025

The Injury Center provides:



RESOURCES: More than 80% of NCIPC funding goes to communities to collect, analyze, and use local data to support prevention.



DATA: NCIPC operates the nation’s fastest, most comprehensive data systems that serve as a guiding force for prevention efforts.



EXPERTISE: NCIPC experts monitor changes in injury patterns, develop and evaluate prevention strategies, and provide injury-related guidance to state, local, tribal, and territorial partners.

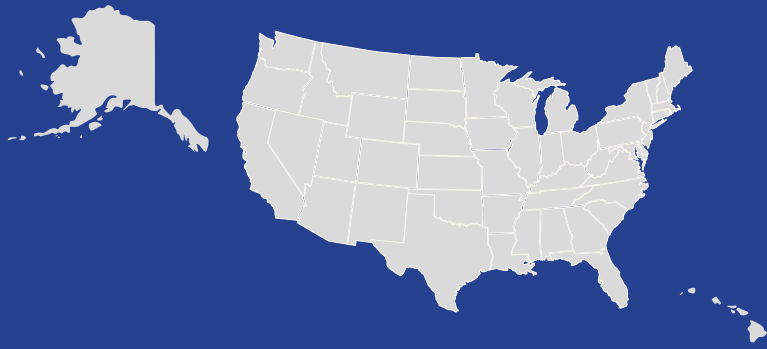


EMERGENCY RESPONSE: NCIPC provides no-cost technical and on-the-ground emergency assistance to combat local emergencies.

National Center for Injury Prevention and Control (NCIPC)

All 50 States, Washington D.C., & U.S. Territories

FY 2025 Funding Highlights



The below programs highlight the Injury Center's most significant external or community-based investments; not all funding is included.

<p>Overdose Data to Action in States (OD2A in States): \$192.0 million 49 state health departments and Washington D.C. funded to expand drug overdose surveillance and prevention efforts.</p>	<p>Injury Control Research Centers (ICRC): \$9.3 million 11 universities nationwide conduct research, outreach, and training to develop and evaluate new injury control interventions.</p>
<p>Overdose Data to Action: LOCAL (OD2A: LOCAL): \$87.2 million 40 local health departments funded nationwide to prevent overdoses through strong multisectoral partnerships.</p>	<p>Core State Injury Prevention Program (Core SIPP): \$7.4 million 26 recipients nationwide identify and respond to existing and emerging injury threats.</p>
<p>Drug-Free Communities (DFC): \$67.4 million (542 coalitions each receive up to \$125,000/year) DFC—funded by the White House’s Office of National Drug Control Policy and managed by CDC—is the nation’s leading effort to mobilize community organizations to prevent youth substance use.</p>	<p>Youth Violence Prevention Centers (YVPC): \$6.0 million 5 universities nationwide develop, implement, and evaluate innovative youth violence prevention strategies.</p>
<p>Overdose Response Strategy (ORS): \$5.3 million (61 public health experts each funded at ~\$87,416) All 50 states, Washington DC, Puerto Rico, and the US Virgin Islands participate in this unique public health-public safety collaboration working together to reduce overdose deaths.</p>	<p>Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$5.8 million 13 domestic violence coalitions nationwide decrease risk factors and increase protective factors related to intimate partner violence.</p>
<p>Comprehensive Suicide Prevention (CSP): \$20.7 million 23 programs nationwide implement and evaluate a comprehensive public health approach to suicide prevention.</p>	<p>Essentials for Childhood: Preventing ACEs through Data to Action (EfC: PACE D2A): \$5.7 million 12 recipients nationwide prevent adverse childhood experiences (ACEs) and promote positive childhood experiences to reduce risk for leading causes of death, such as overdose and suicide, and mental health challenges.</p>
<p>Veteran Suicide Prevention Evaluation (VSPE): \$150 thousand 2 veteran-serving organizations nationwide grow their capacity to implement suicide prevention programs.</p>	<p>Preventing Violence Affecting Young Lives (PREVAYL): \$2.0 million 8 recipients nationwide address youth violence, teen dating violence, and other ACEs that put communities at greater risk for violence.</p>
<p>Rape Prevention and Education (RPE): \$48.2 million All 50 state health departments, state-based, and territory-based sexual assault coalitions funded to implement and guide state sexual violence prevention efforts.</p>	<p>FASTER: AVERT: \$1.8 million 12 state health departments nationwide collect, analyze, and disseminate data on violence-related emergency department visits to respond to and prevent violence.</p>
<p>National Violent Death Reporting System (NVDRS): \$16.8 million All 50 states, Washington DC, and Puerto Rico submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.</p>	<p>Other Research Funding: \$33.7 million Non-profits, research institutes, and institutions of higher education in 26 states conduct innovative and rigorous research to inform prevention programs and policies.</p>



ALABAMA

FY 2025 Funding Highlights



The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$3,619,072

Funds the Alabama State Health Department to expand drug overdose surveillance and prevention efforts.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$1,557,500

Awards the Jefferson County Department of Health to prevent overdoses through strong multisectoral partnerships.

Rape Prevention and Education (RPE): \$793,979

Supports the Alabama State Health Department and an Alabama-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Drug-Free Communities (DFC): \$500,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 4 Alabama-based community coalitions to prevent youth substance use.

National Violent Death Reporting System (NVDRS): \$330,224

Enables Alabama to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Alabama received more than **\$6.8 million** in injury prevention funding.

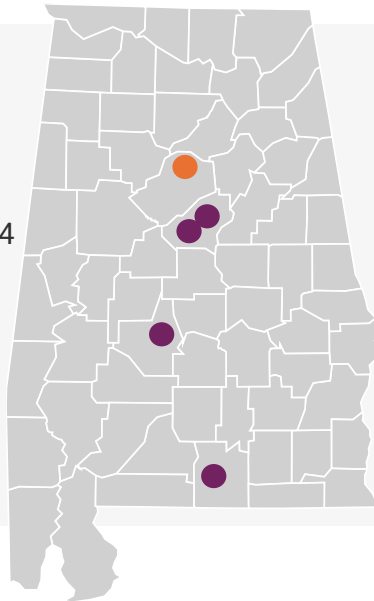
 **INJURY PREVENTION FUNDING BY LOCATION**

Statewide Program Funding

The below programs are funded through the state health department in **Alabama**.

- OD2A in States: \$3,619,072
- RPE: \$658,979
- NVDRS: \$330,224
- ORS: \$87,416 (average)

RPE awards an additional \$135,000 to the state sexual assault coalition in **Alabama**.

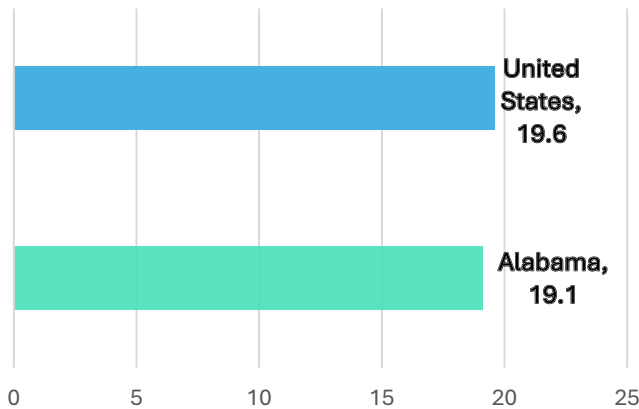


Local Program Funding

The below programs are funded through local communities in **Alabama**.

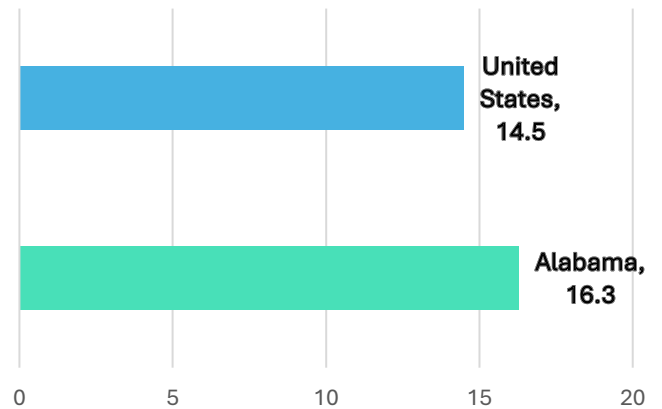
- OD2A: LOCAL: \$1,577,500
- DFC Coalitions: \$500,000

*In Alabama, the overdose death rate was **similar** to the U.S. average*



Rate per 100,000 persons
Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

*In Alabama, the suicide death rate was **13% higher** than the U.S. average*



Rate per 100,000 persons
Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



ALASKA

FY 2025 Funding Highlights



The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$2,692,878

Funds the Alaska State Health Department funded to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$375,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 3 Alaska-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$500,000

Invests in an Alaska-based domestic violence coalition to decrease risk factors and increase protective factors related to intimate partner violence.

Rape Prevention and Education (RPE): \$359,295

Supports the Alaska State Health Department and an Alaska-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Preventing Violence Affecting Young Lives (PREVAYL): \$250,000

Awards the Alaska State Health Department to address youth violence, teen dating violence, other adverse childhood experiences, and conditions that put communities at greater risk for violence.

Core State Injury Prevention Program (Core SIPP): \$248,656

Equips the Alaska State Health Department in identifying and responding to existing and emerging injury threats.

National Violent Death Reporting System (NVDRS): \$204,513

Enables Alaska to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.





The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Alaska received more than **\$4.7 million** in injury prevention funding.

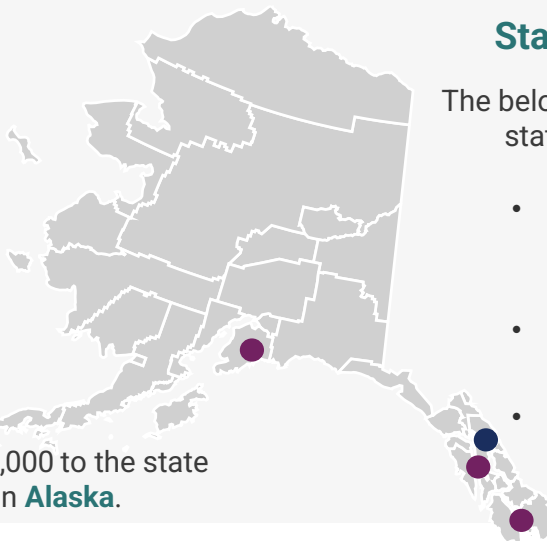
 **INJURY PREVENTION FUNDING BY LOCATION**

Local Program Funding

The below programs are funded through local communities in **Alaska**.

-  DELTA: \$500,000
-  DFC Coalitions: \$375,000

RPE awards an additional \$135,000 to the state sexual assault coalition in **Alaska**.

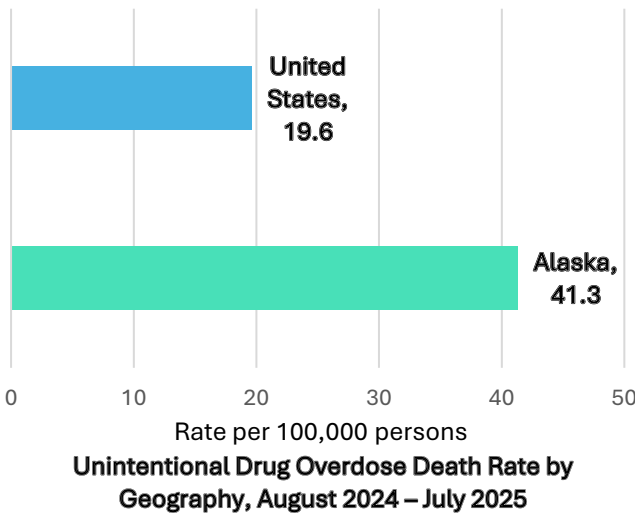


Statewide Program Funding

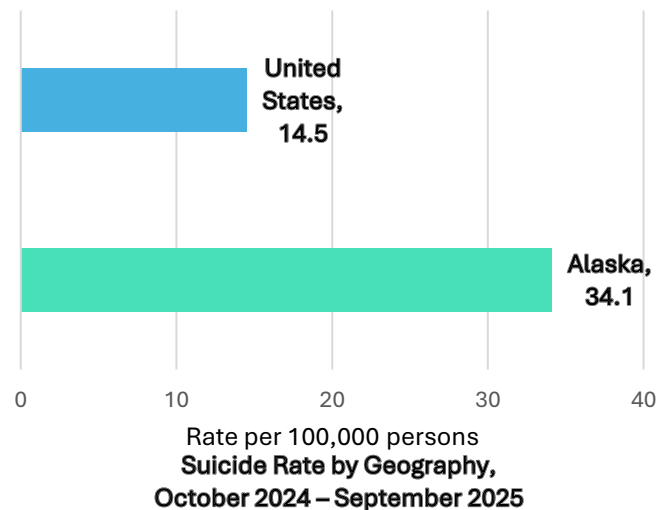
The below programs are funded through the state health department in **Alaska**.

- OD2A in States: \$2,692,878
- PREVAYL: \$250,000
- Core SIPP: \$248,656
- RPE: \$224,295
- NVDRS: \$204,513
- ORS: \$87,416 (average)

In Alaska, the overdose death rate was **111% higher** than the U.S. average



In Alaska, the suicide death rate was **136% higher** than the U.S. average



Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)





ARIZONA

FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$5,436,875

Funds Maricopa County Public Health Department and Pima County Health and Community Services to prevent overdoses through strong multisectoral partnerships.

Overdose Data to Action in States (OD2A in States): \$4,703,386

Awards the Arizona State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$2,125,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 17 Arizona-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$1,009,476

Supports the Arizona State Health Department and an Arizona-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$370,210

Enables Alaska to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.

Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$287,653

Invests in an Arizona-based domestic violence coalition to decrease risk factors and increase protective factors related to intimate partner violence.

Firearm Injury Surveillance Through Emergency Rooms (FASTER): Advancing Violence Epidemiology in Real-Time (AVERT): \$150,000

Equips the Arizona State Health Department to collect, analyze, and disseminate data on violence-related emergency department visits to respond to and prevent violence.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Arizona received more than **\$14.1 million** in injury prevention funding.

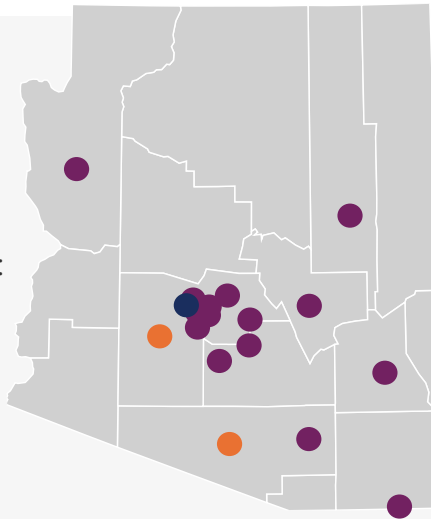
 **INJURY PREVENTION FUNDING BY LOCATION**

Statewide Program Funding

The below programs are funded through the state health department in **Arizona**.

- OD2A in States: \$4,703,386
- RPE: \$874,476
- NVDRS: \$370,210
- FASTER: AVERT: \$150,000
- ORS: \$87,416 (average)

RPE awards an additional \$135,000 to the state sexual assault coalition in **Arizona**.



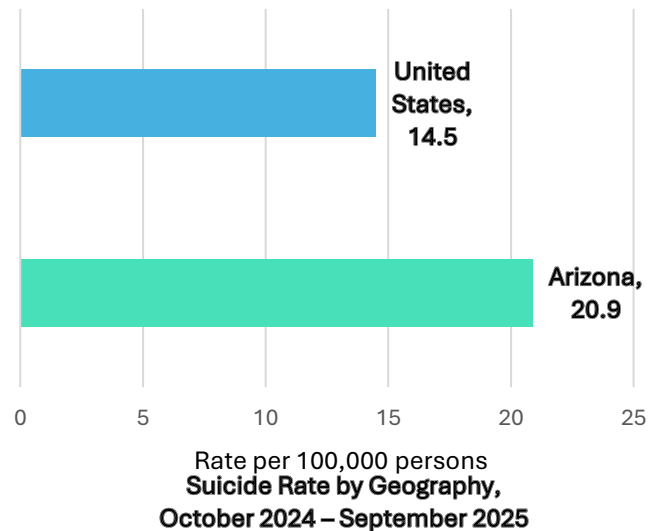
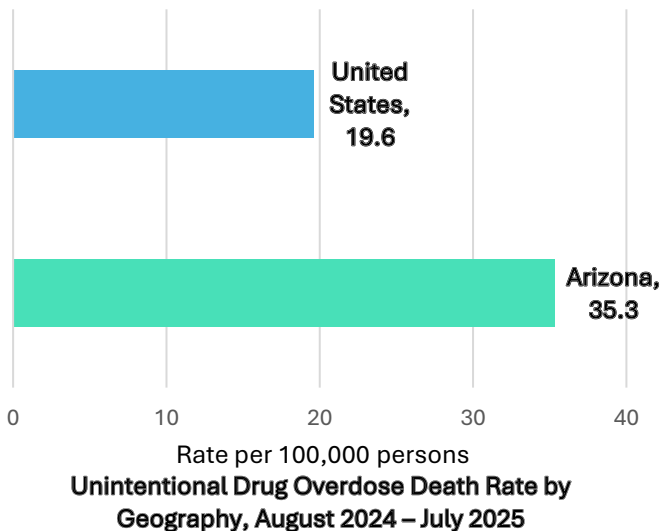
Local Program Funding

The below programs are funded through local communities in **Arizona**.

- OD2A: LOCAL: \$5,436,875
- DFC Coalitions: \$2,125,000
- DELTA: \$287,653

In Arizona, the overdose death rate was **81% higher** than the U.S. average

In Arizona, the suicide death rate was **45% higher** than the U.S. average



Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)





ARKANSAS

FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$2,155,910

Funds the Arkansas State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$1,375,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 11 Arkansas-based community coalitions to prevent youth.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$873,298

Supports the Arkansas State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$590,079

Awards the Arkansas State Health Department and an Arkansas-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$273,123

Enables Arkansas to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.




The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

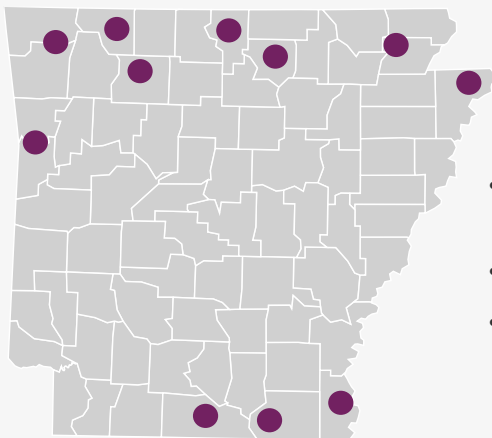
Arkansas received more than **\$5.3 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**

Local Program Funding

The below programs are funded through local communities in **Arkansas**.

 DFC Coalitions: \$1,375,000



Statewide Program Funding

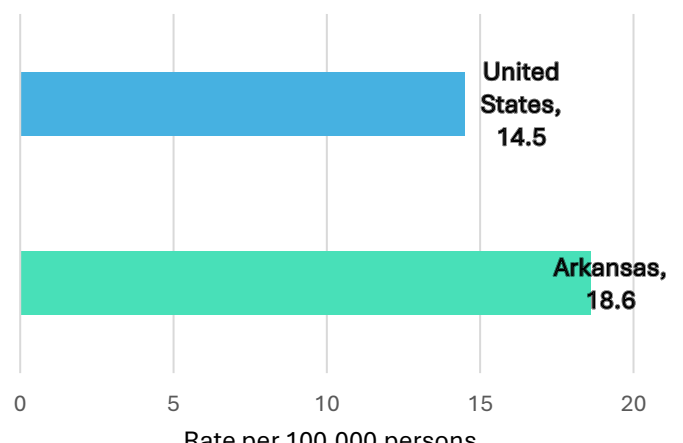
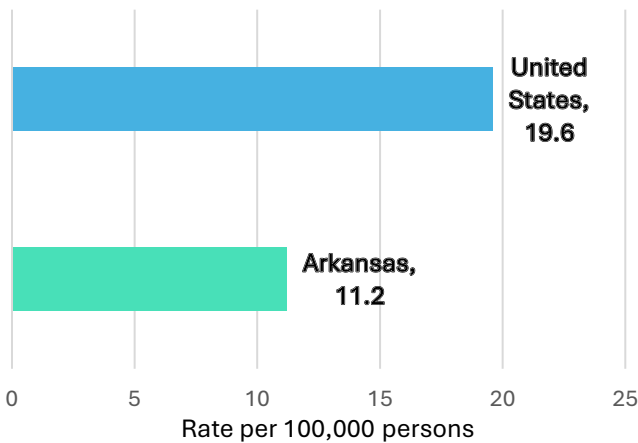
The below programs are funded through the state health department in **Arkansas**.

- OD2A in States: \$2,155,910
- CSP: \$873,298
- RPE: \$455,079
- NVDRS: \$273,123
- ORS: \$87,416 (average)

RPE awards an additional \$135,000 to the state sexual assault coalition in **Arkansas**.

In Arkansas, the overdose death rate was **43% lower** than the U.S. average

In Arkansas, the suicide death rate was **29% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



CALIFORNIA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing – rather than treating – non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$13,109,000

Funds Alameda County Health Care Services Agency, Santa Clara County Public Health, Riverside University Health System–Public Health, Los Angeles County Department of Public Health, and the San Francisco Department of Public Health to prevent overdoses through strong multisectoral partnerships.

National Violent Death Reporting System (NVDRS): \$962,085

Enables California to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.

Overdose Data to Action in States (OD2A in States): \$5,094,718

Awards the California State Health Department to expand drug overdose surveillance and prevention efforts.

Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$499,964

Invests in a California-based domestic violence coalition to decrease risk factors and increase protective factors related to intimate partner violence.

Drug-Free Communities (DFC): \$1,874,995

Manages the nation’s leading effort administered by the White House Office of National Drug Control Policy to mobilize 15 California-based community coalitions to prevent youth substance use.

Essentials for Childhood: Preventing ACEs through Data to Action (EfC: PACE D2A): \$485,000

Provides funding to the California State Health Department to prevent adverse childhood experiences (ACEs) and promote positive childhood experiences to help reduce leading causes of death, such as overdose and suicide, and mental health challenges.

Overdose Response Strategy (ORS): \$349,664 (average)

Empowers four public health experts as part of the ORS’s unique public health-public safety collaboration working together to reduce overdose deaths.

Core State Injury Prevention Program (Core SIPP): \$250,000

Supports the California State Health Department in identifying and responding to existing and emerging injury threats.

Comprehensive Suicide Prevention (CSP): \$1,033,000

Supports the California State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Preventing Violence Affecting Young Lives (PREVAYL): \$250,000

Funds the Monterey County Department of Health to address youth violence, teen dating violence, other adverse childhood experiences, and conditions that put communities at greater risk for violence.

Rape Prevention and Education (RPE): \$4,290,379

Equips the California State Health Department and a California-based sexual violence coalition to implement and guide state sexual violence prevention efforts.


Other Research Funding: \$3,040,067

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

California received more than **\$31.2 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**

Statewide Program Funding

The below programs are funded through the state health department in **California**.

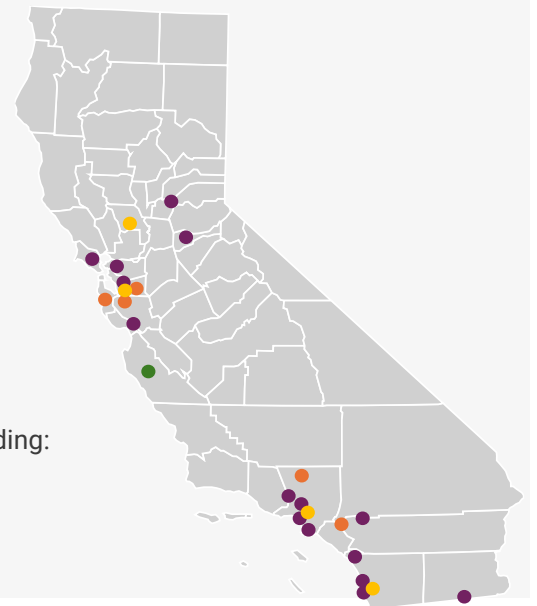
- OD2A in States: \$5,094,718
- RPE: \$4,155,379
- CSP: \$1,033,000
- NVDRS: \$962,085
- EfC: PACE D2A: \$485,000
- ORS: \$349,664 (average)
- Core SIPP: \$250,000

RPE awards an additional \$135,000 to the state sexual assault coalition in **California**.

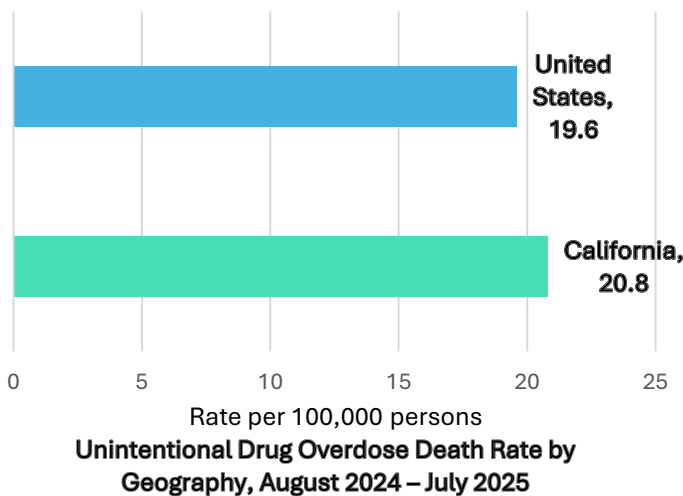
Local Program Funding

The below programs are funded through local communities in **California**.

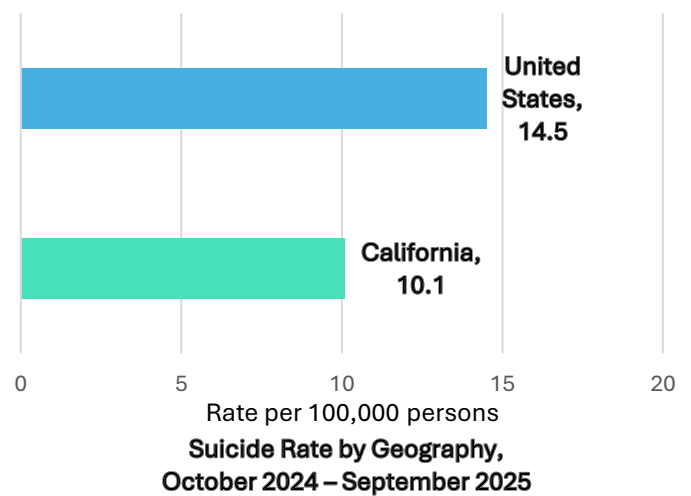
- OD2A: LOCAL: \$13,109,000
- DFC Coalitions: \$1,874,995
- PREVAYL: \$250,000
- Injury/Violence Research Funding: \$3,040,067



In California, the overdose death rate was **similar** to the U.S. average



In California, the suicide death rate was **31% lower** than the U.S. average



Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



COLORADO

FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,307,759

Funds the Colorado State Health Department to expand drug overdose surveillance and prevention efforts.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$1,807,494

Awards the Denver Department of Public Health and Environment to prevent overdoses through strong multisectoral partnerships.

Drug-Free Communities (DFC): \$750,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 6 Colorado-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$901,139

Supports Colorado State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Youth Violence Prevention Centers (YVPC): \$1,199,766

Supports the University of Colorado Boulder in partnering with its local community to identify, develop, and test innovative youth violence prevention strategies.

Rape Prevention and Education (RPE): \$869,900

Equips the Colorado State Health Department and a Colorado-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Injury Control Research Centers (ICRC): \$849,522

Provides funding to the University of Colorado Anschutz Medical Campus to conduct research, outreach, and training to develop and evaluate new injury control interventions.

Core State Injury Prevention Program (Core SIPP): \$400,000

Supports the Colorado State Health Department in identifying and responding to existing and emerging injury threats.

National Violent Death Reporting System (NVDRS): \$333,405

Enables Colorado to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.

Other Research Funding: \$141,158

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



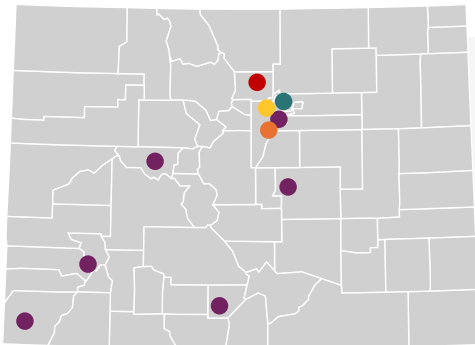


The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Colorado received more than **\$11.6 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION



Statewide Program Funding

The below programs are funded through the state health department in **Colorado**.

- OD2A in States: \$4,307,759
- CSP: \$901,139
- RPE: \$734,900
- Core SIPP: \$400,000
- NVDRS: \$333,405
- ORS: \$87,416 (average)

Local Program Funding

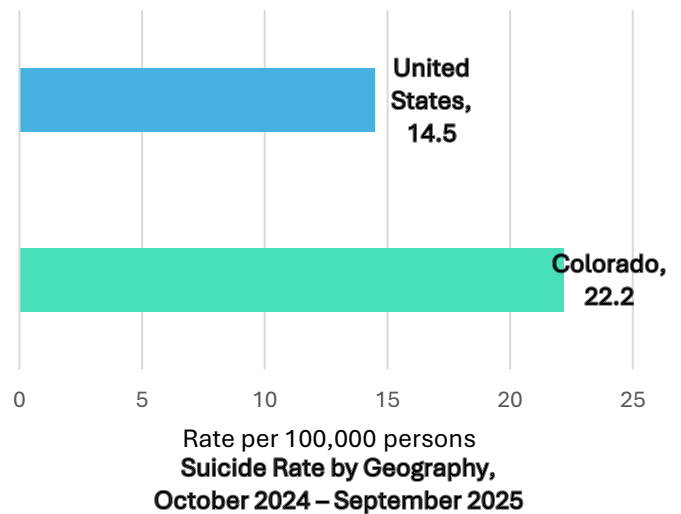
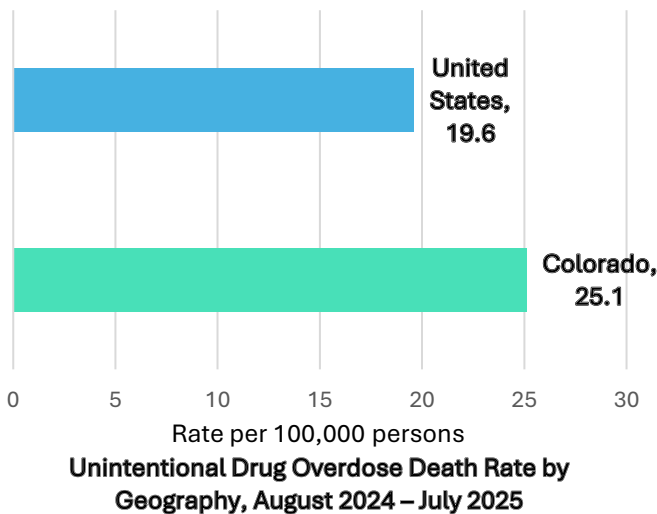
The below programs are funded through local communities in **Colorado**.

- DFC Coalitions: \$750,000
- OD2A: LOCAL: \$1,807,494
- YVPC: \$1,199,766
- ICRC: \$849,523
- Injury/Violence Research Funding: \$141,158

RPE awards an additional \$135,000 to the state sexual assault coalition in **Colorado**.

In Colorado, the overdose death rate was **29% higher** than the U.S. average

In Colorado, the suicide death rate was **54% higher** than the U.S. average



Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data



CONNECTICUT



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,452,788

Funds the Connecticut State Health Department to expand drug overdose surveillance and prevention efforts.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$2,869,479

Awards the City of New Haven Health and Human Services and City of Hartford Health and Human Services to prevent overdoses through strong multisectoral partnerships.

Drug-Free Communities (DFC): \$2,000,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 16 Connecticut-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$700,000

Supports the Connecticut State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$650,296

Equips the Connecticut State Health Department and a Connecticut-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$285,000

Invests in a Connecticut-based domestic violence coalition to decrease risk factors and increase protective factors related to intimate partner violence.

National Violent Death Reporting System (NVDRS): \$234,676

Enables Connecticut to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.





The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

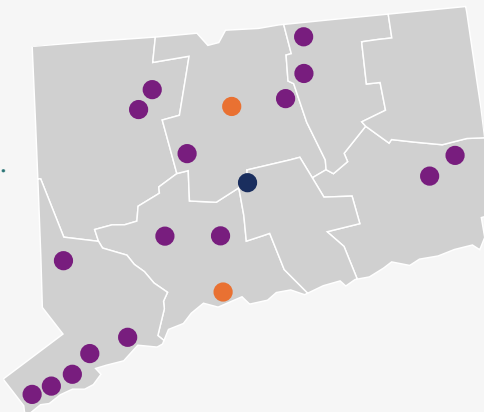
Connecticut received more than **\$11.2 million** in injury prevention funding.

INJURY PREVENTION FUNDING BY LOCATION

Local Program Funding

The below programs are funded through local communities in **Connecticut**.

- OD2A: LOCAL: \$2,869,479
- DFC Coalitions: \$2,000,000
- DELTA: \$285,000



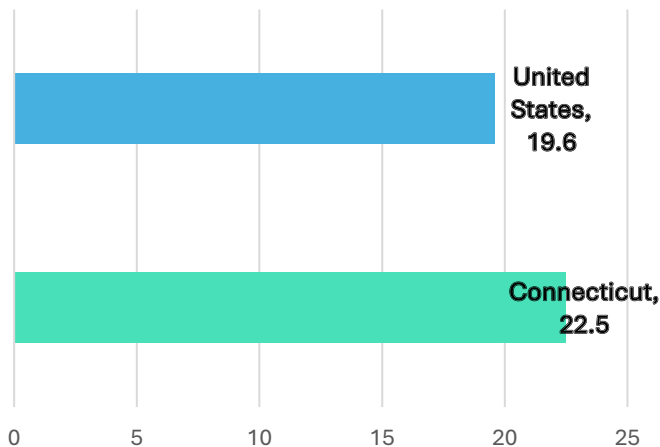
RPE awards an additional \$135,000 to the state sexual assault coalition in **Connecticut**.

Statewide Program Funding

The below programs are funded through the state health department in **Connecticut**.

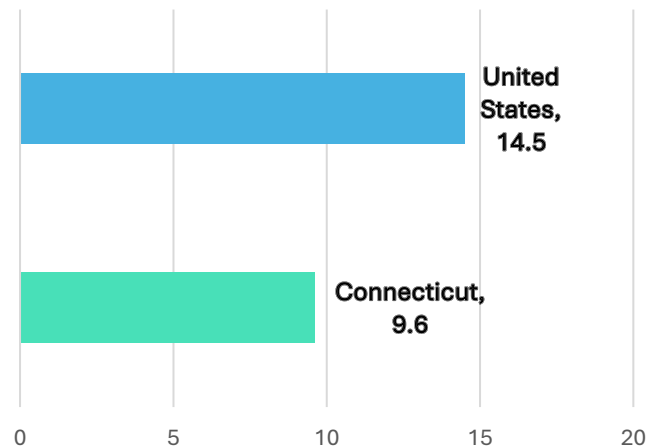
- OD2A in States: \$4,452,788
- CSP: \$700,000
- RPE: \$515,296
- NVDRS: \$234,676
- ORS: \$87,416 (average)

In Connecticut, the overdose death rate was **15% higher** than the U.S. average



Rate per 100,000 persons
Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

In Connecticut, the suicide death rate was **34% lower** than the U.S. average



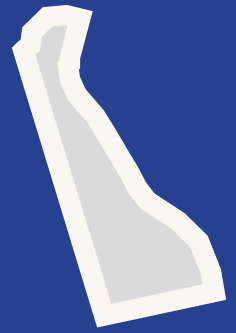
Rate per 100,000 persons
Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data





DELAWARE

FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$3,327,587

Funds the Delaware State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$375,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 3 Delaware-based community coalitions to prevent youth.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$497,916

Invests in a Delaware-based domestic violence coalition to decrease risk factors and increase protective factors related to intimate partner violence.

Rape Prevention and Education (RPE): \$385,286

Supports the Delaware State Health Department and a Delaware-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$183,314

Enables Delaware to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.

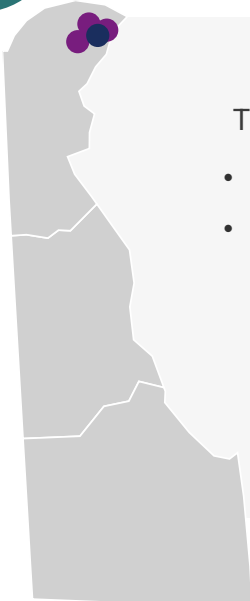




The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Delaware received more than **\$4.8 million** in injury prevention funding.

INJURY PREVENTION FUNDING BY LOCATION



Statewide Program Funding

The below programs are funded through the state health department in **Delaware**.

- OD2A in States: \$3,327,587
- NVDRS: \$183,314
- RPE: \$250,286
- ORS: \$87,416 (average)

Local Program Funding

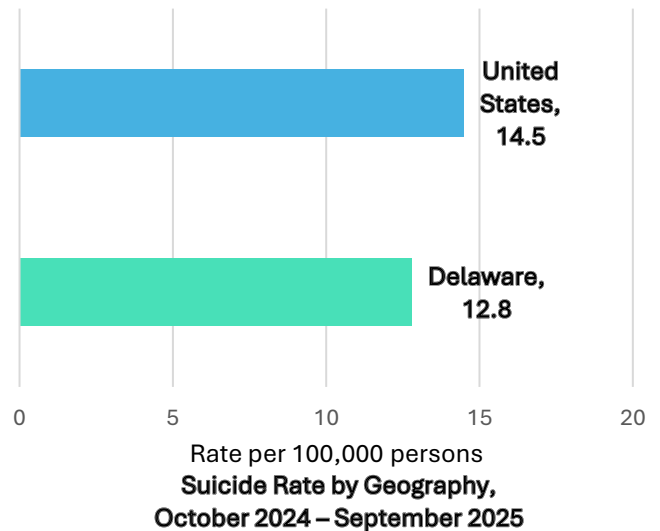
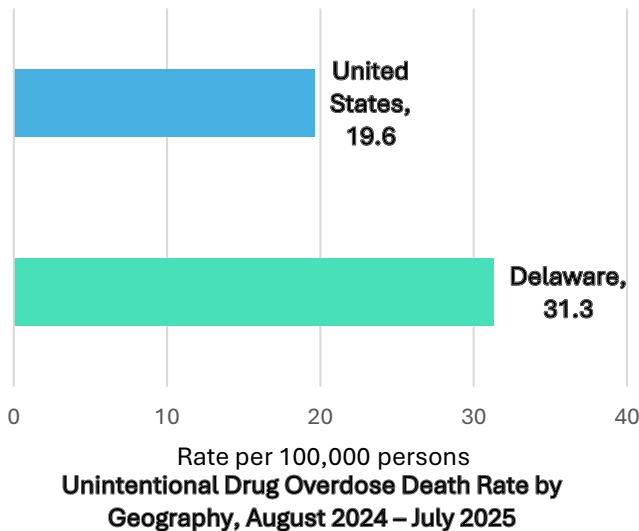
The below programs are funded through local communities in **Delaware**.

- DELTA: \$497,916
- DFC Coalitions: \$375,000

RPE awards an additional \$135,000 to the state sexual assault coalition in **Delaware**.

In Delaware, the overdose death rate was **60% higher** than the U.S. average

In Delaware, the suicide death rate was **12% lower** than the U.S. average



Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)





FLORIDA

FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$9,367,500

Awards the Florida State Health Departments in Broward, Palm Beach, and Duval County to prevent overdoses through strong multisectoral partnerships.

Overdose Data to Action in States (OD2A in States): \$5,823,539

Funds the Florida State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$1,750,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 14 Florida-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$262,248 (average)

Empowers 3 public health experts as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$974,000

Supports the Florida State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$2,466,904

Equips the Florida State Health Department and a Florida-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$709,468

Enables Florida to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.

Other Research Funding: \$915,876

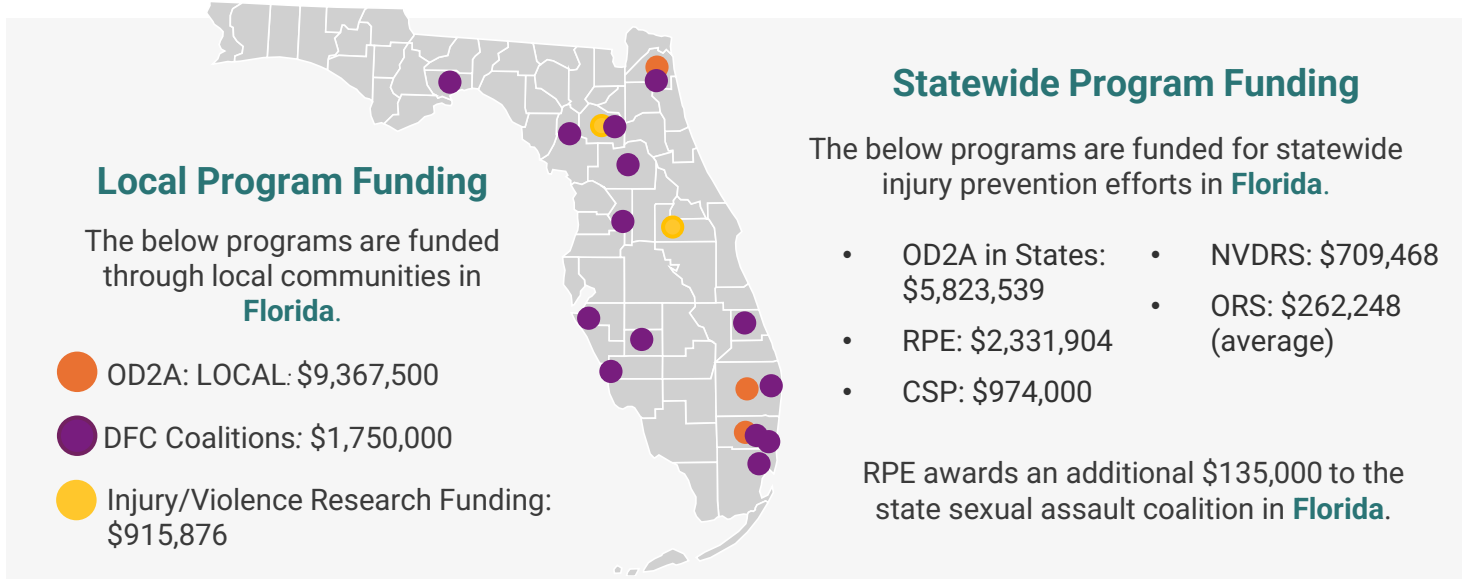
Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

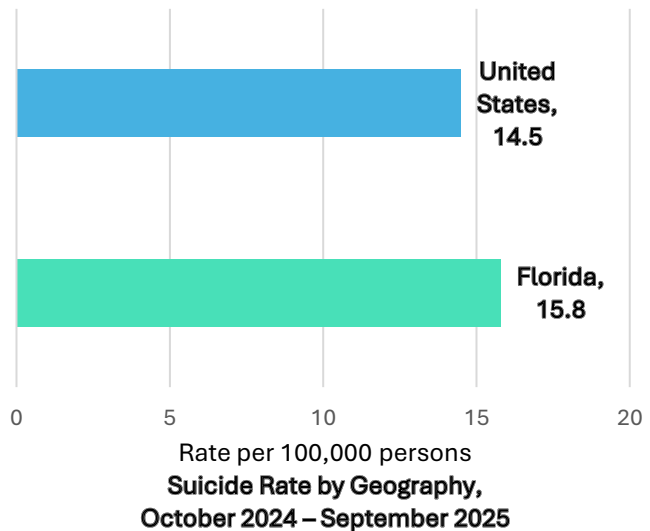
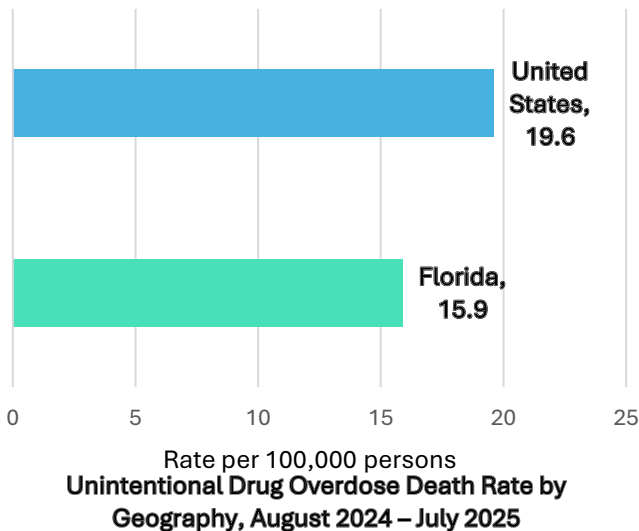
Florida received more than **\$22.2 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**



In Florida, the overdose death rate was **19% lower** than the U.S. average

In Florida, the suicide death rate was **similar** to the U.S. average



Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



GEORGIA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing – rather than treating – non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,245,286

Funds the Georgia State Health Department to expand drug overdose surveillance and prevention efforts.

Essentials for Childhood: Preventing ACEs through Data to Action (EfC: PACE D2A): \$485,000

Provides funding to the Georgia State Health Department to prevent adverse childhood experiences (ACEs) and promote positive childhood experiences to help reduce leading causes of death, such as overdose and suicide, and mental health challenges.

Drug-Free Communities (DFC): \$2,373,770

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 19 Georgia-based community coalitions to prevent youth substance use.

National Violent Death Reporting System (NVDRS): \$432,712

Enables Georgia to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the Georgia State Health Department in identifying and responding to existing and emerging injury threats.

Comprehensive Suicide Prevention (CSP): \$871,730

Supports the Georgia State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Preventing Violence Affecting Young Lives (PREVAYL): \$250,000

Awards the Georgia State Health Department to address youth violence, teen dating violence, other adverse childhood experiences, and conditions that put communities at greater risk for violence.

Veteran Suicide Prevention Evaluation (VSPE): \$75,000

Provides funding to the CDC Foundation for grants to a Georgia-based veteran-serving organization to grow their capacity to implement suicide prevention programs.

Firearm Injury Surveillance Through Emergency Rooms (FASTER): Advancing Violence Epidemiology in Real-Time (AVERT): \$149,999

Equips the Georgia State Health Department to collect, analyze, and disseminate data on violence-related emergency department visits to respond to and prevent violence.

Rape Prevention and Education (RPE): \$1,370,159

Supports the Georgia State Health Department and a Georgia-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Other Research Funding: \$977,094

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.


Injury Control Research Centers (ICRC): \$850,000

Provides funding to Emory University to conduct research, outreach, and training to develop and evaluate new injury control interventions.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

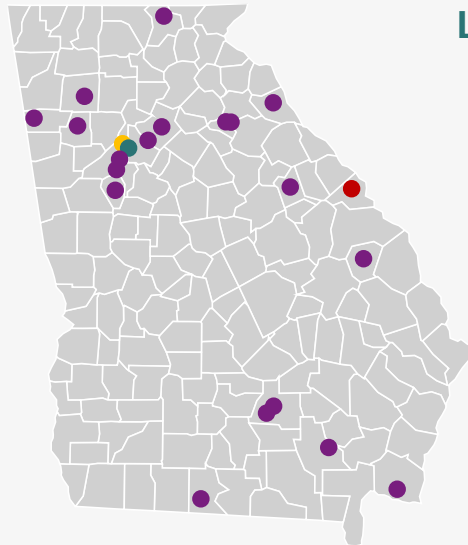
Georgia received more than **\$12.4 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**

Statewide Program Funding

The below programs are funded through the state health department in **Georgia**.

- OD2A in States: \$4,245,286
- RPE: \$1,235,159
- CSP: \$871,730
- EfC: PACE D2A: \$485,000
- NVDRS: \$432,712
- Core SIPP: \$250,000
- PREVAYL: \$250,000
- FASTER: AVERT: \$149,999
- ORS: \$87,416 (average)



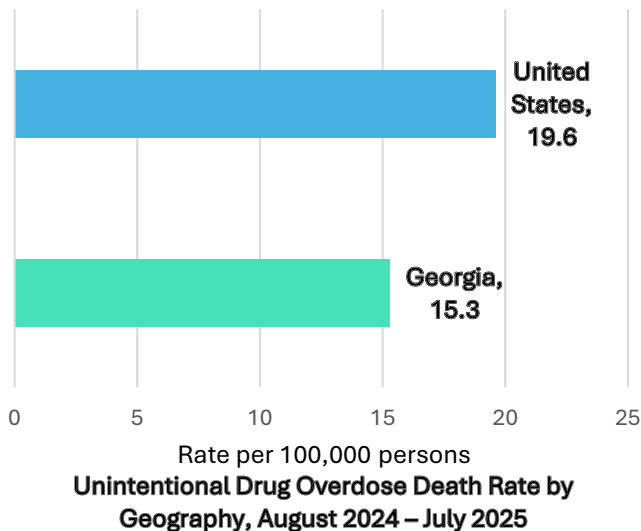
Local Program Funding

The below programs are funded through local communities in **Georgia**.

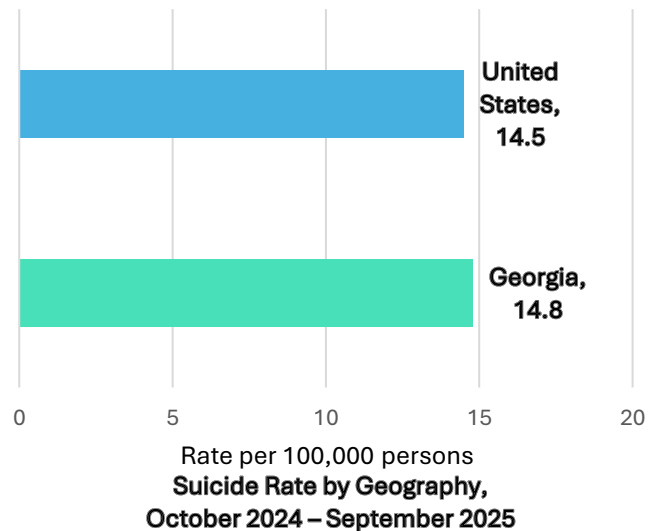
- DFC Coalitions: \$2,373,770
- Injury/Violence Research Funding: \$977,094
- ICRC: \$850,000
- VSPE: \$75,000

RPE awards an additional \$135,000 to the state sexual assault coalition in **Georgia**.

In Georgia, the overdose death rate was **22% lower** than the U.S. average



In Georgia, the suicide death rate was **similar** to the U.S. average



Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



HAWAII

FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$2,748,281

Funds the Hawaii State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$250,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 2 Hawaii-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$297,425

Supports the Hawaii State Health Department to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$195,908

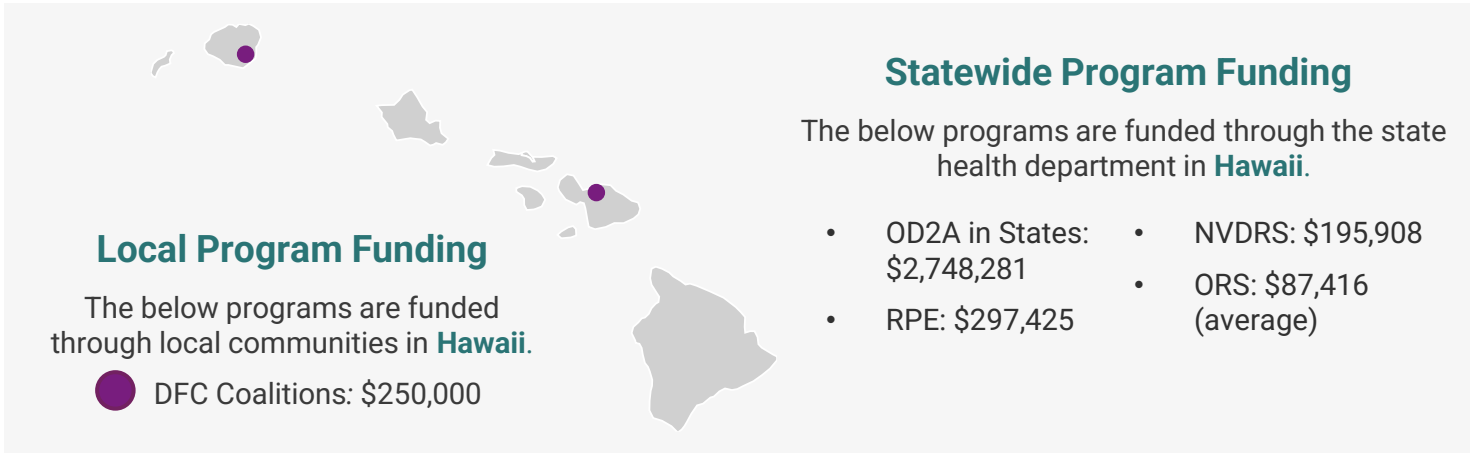
Enables Hawaii to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.



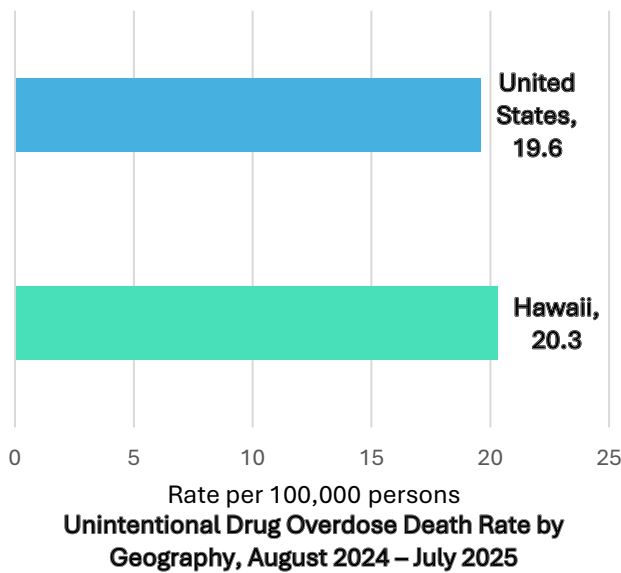
The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Hawaii received more than **\$3.5 million** in injury prevention funding.

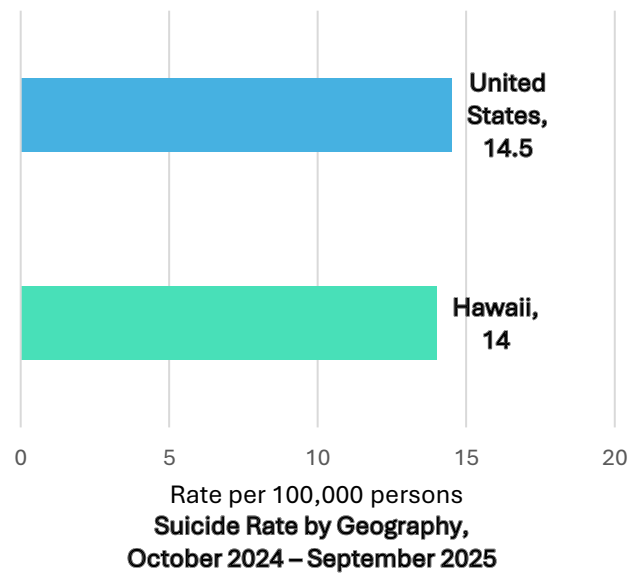
 **INJURY PREVENTION FUNDING BY LOCATION**



*In Hawaii, the overdose death rate was **similar** to the U.S. average*



*In Hawaii, the suicide death rate was **similar** to the U.S. average*



Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



IDAHO



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$2,041,935

Funds the Idaho State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$375,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 3 Idaho-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$336,309

Supports the Idaho Department of Health and Welfare to implement and guide state sexual violence prevention efforts.


National Violent Death Reporting System (NVDRS): \$212,021

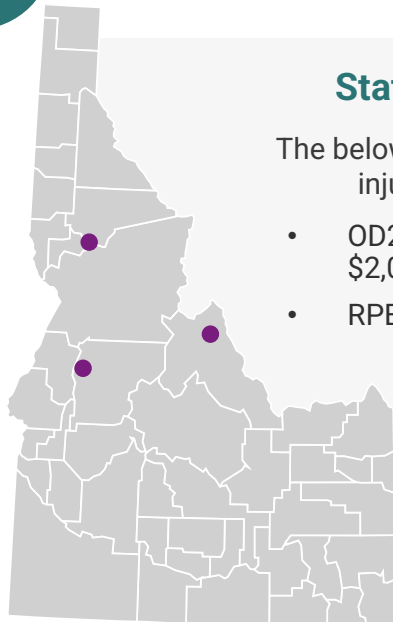
Enables Idaho to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Idaho received more than **\$3.0 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**



Statewide Program Funding

The below programs are funded for statewide injury prevention efforts in **Idaho**.

- OD2A in States: \$2,041,935
- RPE: \$336,309
- NVDRS: \$212,021

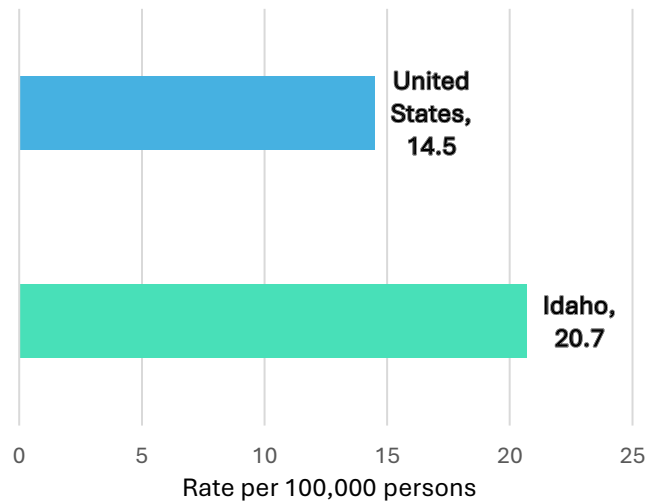
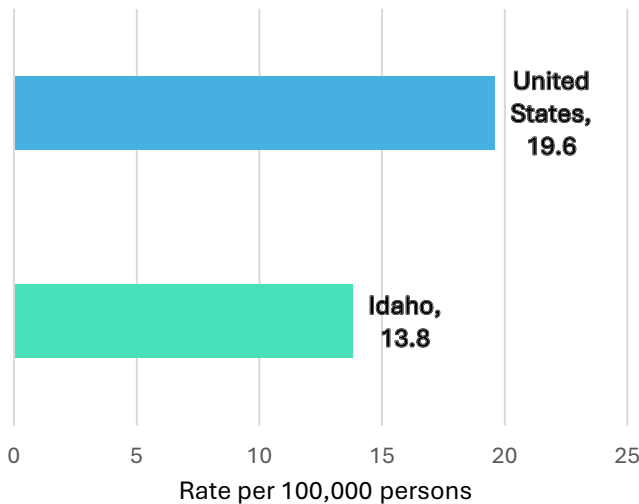
Local Program Funding

The below programs are funded through local communities in **Idaho**.

- DFC Coalitions: \$375,000

In Idaho, the overdose death rate was **30% lower** than the U.S. average

In Idaho, the suicide death rate was **43% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



ILLINOIS



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,586,082

Funds the Illinois State Health Department to expand drug overdose surveillance and prevention efforts.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$3,417,500

Awards the Chicago Department of Public Health to prevent overdoses through strong multisectoral partnerships.

Drug-Free Communities (DFC): \$1,375,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 11 Illinois-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$950,000

Supports the Illinois State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$1,582,958

Supports the Illinois State Health Department and an Illinois-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$469,526

Enables Illinois to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the Illinois State Health Department in identifying and responding to existing and emerging injury threats.

Firearm Injury Surveillance Through Emergency Rooms (FASTER): Advancing Violence Epidemiology in Real-Time (AVERT): \$150,000

Equips the Illinois State Health Department to collect, analyze, and disseminate data on violence-related emergency department visits to respond to and prevent violence.

Other Research Funding: \$3,751,312

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.

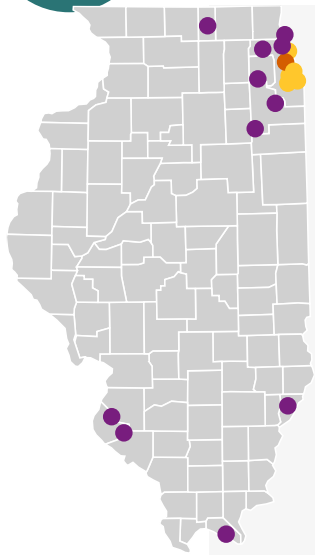




The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Illinois received more than **\$16.6 million** in injury prevention funding.

INJURY PREVENTION FUNDING BY LOCATION



Statewide Program Funding

The below programs are funded through the state health department in **Illinois**.

- OD2A in States: \$4,586,082
- RPE: \$1,447,958
- CSP: \$950,000
- NVDRS: \$469,526
- Core SIPP: \$250,000
- FASTER: AVERT: \$150,000
- ORS: \$87,416 (average)

Local Program Funding

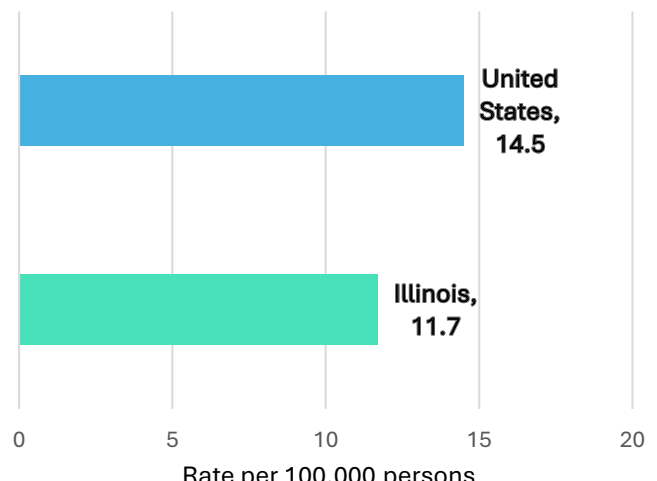
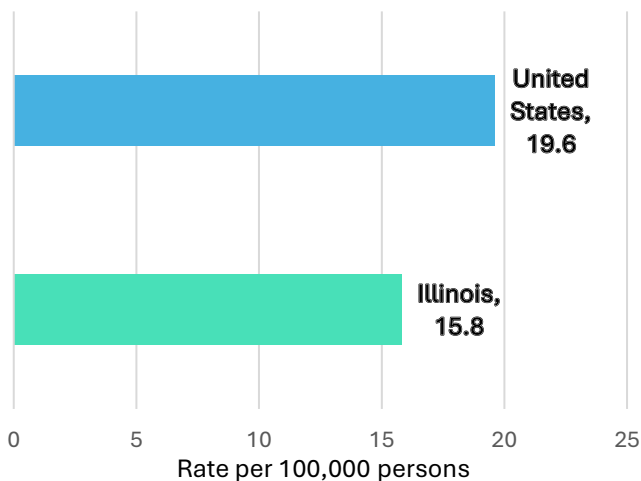
The below programs are funded through local communities in **Illinois**.

- OD2A: LOCAL: \$3,417,500
- Injury/Violence Research Funding: \$3,751,312
- DFC Coalitions: \$1,375,000

RPE awards an additional \$135,000 to the state sexual assault coalition in **Illinois**.

In Illinois, the overdose death rate was **20% lower** than the U.S. average

In Illinois, the suicide death rate was **20% lower** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data



INDIANA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

**Overdose Data to Action in States (OD2A in States):
\$5,129,814**

Funds the Indiana State Health Department to expand drug overdose surveillance and prevention efforts.

**Overdose Data to Action: LOCAL (OD2A: LOCAL):
\$2,750,000**

Awards the Health and Hospital Corporation of Marion County to prevent overdoses through strong multisectoral partnerships.

Drug-Free Communities (DFC): \$2,123,863

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 17 Indiana-based community coalitions to prevent youth substance use.

**Overdose Response Strategy (ORS): \$87,416
(average)**

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$972,301

Supports the Indiana State Health Department and an Indiana-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$496,067

Invests in an Indiana-based domestic violence coalition to decrease risk factors and increase protective factors related to intimate partner violence.

**National Violent Death Reporting System (NVDRS):
\$352,671**

Enables Indiana to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.

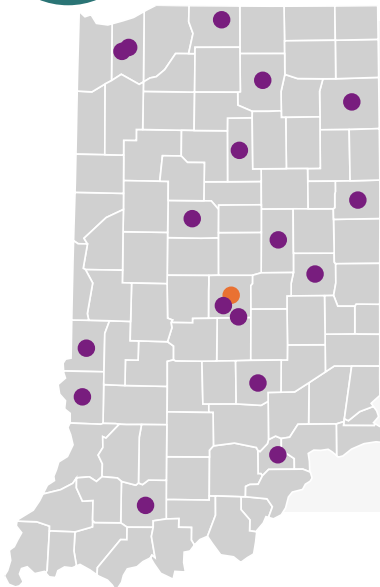




The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Indiana received more than **\$11.9 million** in injury prevention funding.

INJURY PREVENTION FUNDING BY LOCATION



Statewide Program Funding

The below programs are funded for statewide injury prevention efforts in **Indiana**.

- OD2A in States: \$5,129,814
- RPE: \$837,301
- DELTA: AHEAD: \$496,067
- NVDRS: \$352,671
- ORS: \$87,416 (average)

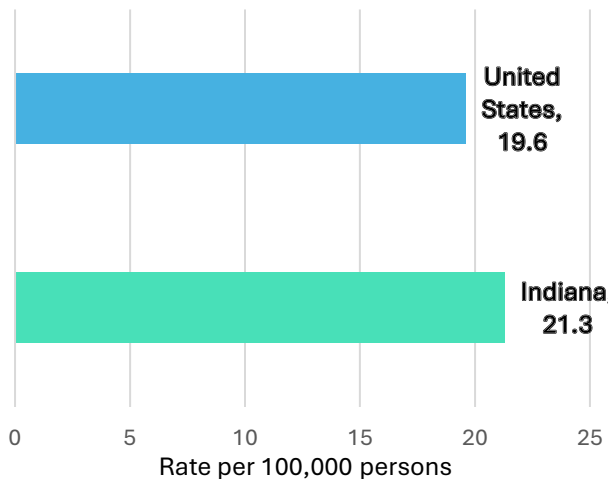
Local Program Funding

The below programs are funded through local communities in **Indiana**.

- OD2A: LOCAL: \$2,750,000
- DFC Coalitions: \$2,123,863

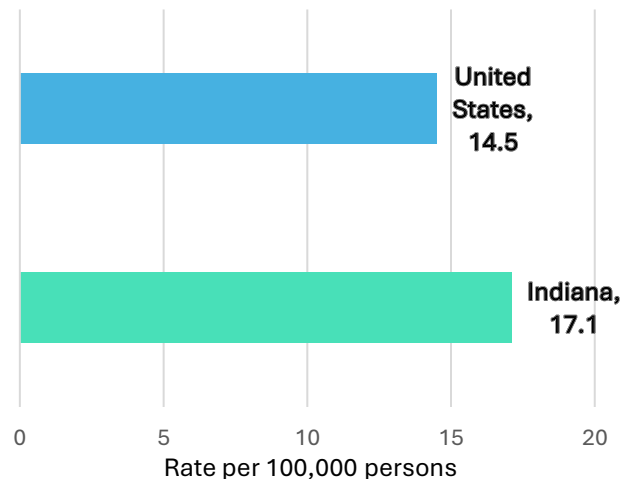
RPE awards an additional \$135,000 to the state sexual assault coalition in **Indiana**.

In Indiana, the overdose death rate was **similar** to the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

In Indiana, the suicide death rate was **18% higher** than the U.S. average



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



IOWA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$2,507,303

Funds the Iowa State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$750,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 6 Iowa-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Injury Control Research Centers (ICRC): \$850,000

Provides funding to the University of Iowa to conduct research, outreach, and training to develop and evaluate new injury control interventions.

Rape Prevention and Education (RPE): \$608,197

Supports the Iowa State Health Department and an Iowa-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the Iowa State Health Department in identifying and responding to existing and emerging injury threats.

Preventing Violence Affecting Young Lives (PREVAYL): \$250,000

Awards Linn County Public Health to address youth violence, teen dating violence, other adverse childhood experiences, and conditions that put communities at greater risk for violence.

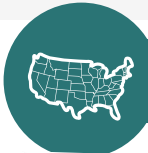
National Violent Death Reporting System (NVDRS): \$240,432

Enables Iowa to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.

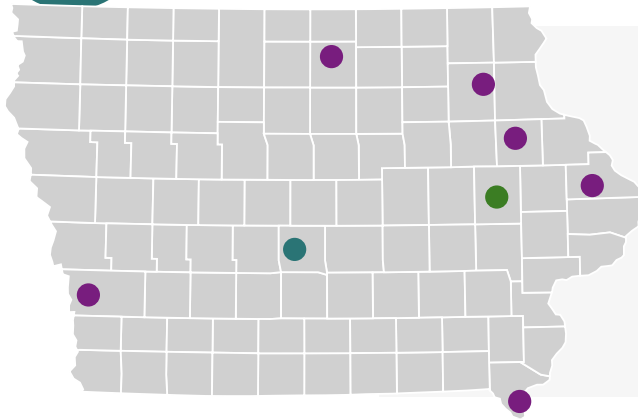


The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Iowa received more than **\$5.5 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION



Statewide Program Funding

The below programs are funded for statewide injury prevention efforts in **Iowa**.

- OD2A in States: \$2,507,303
- RPE: \$473,197
- Core SIPP: \$250,000
- NVDRS: \$240,432
- ORS: \$87,416 (average)

RPE awards an additional \$135,000 to the state sexual assault coalition in **Iowa**.

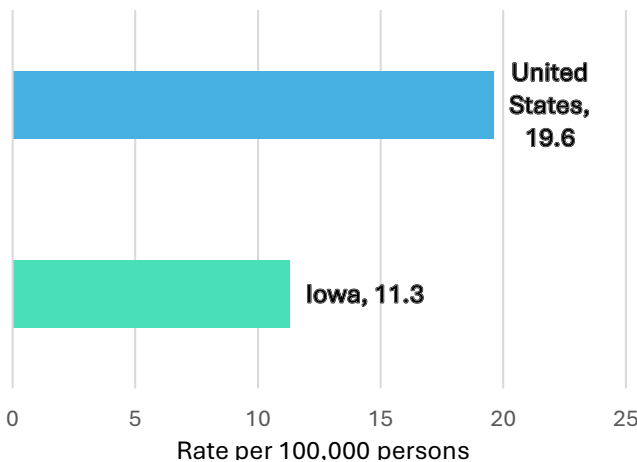
Local Program Funding

The below programs are funded through local communities in **Iowa**.

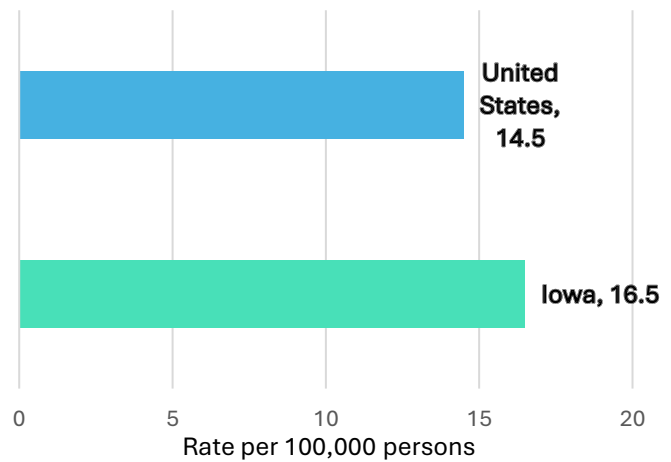
- ICRC: \$850,000
- DFC Coalitions: \$750,000
- PREVAYL: \$250,000

In Iowa, the overdose death rate was **43% lower** than the U.S. average

In Iowa, the suicide death rate was **14% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



KANSAS



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

**Overdose Data to Action in States (OD2A in States):
\$2,685,279**

Funds the Kansas State Health Department to expand drug overdose surveillance and prevention efforts.

**Overdose Data to Action: LOCAL (OD2A: LOCAL):
\$1,140,000**

Awards the Sedgwick County Health Department to prevent overdoses through strong multisectoral partnerships.

Drug-Free Communities (DFC): \$998,956

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 8 Kansas-based community coalitions to prevent youth substance use.

**Overdose Response Strategy (ORS): \$87,416
(average)**

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

**Youth Violence Prevention Centers (YVPC):
\$1,199,999**

Supports the University of Kansas, Lawrence in partnering with its local community to identify, develop, and test innovative youth violence prevention strategies.

Rape Prevention and Education (RPE): \$582,619

Supports the Kansas State Health Department and a Kansas-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

**Essentials for Childhood: Preventing ACEs through
Data to Action (EfC: PACE D2A): \$485,000**

Provides funding to the Kansas State Health Department to prevent adverse childhood experiences (ACEs) and promote positive childhood experiences to help reduce leading causes of death, such as overdose and suicide, and mental health challenges.

**National Violent Death Reporting System (NVDRS):
\$254,240**

Enables Kansas to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.

**Core State Injury Prevention Program (Core SIPP):
\$250,000**

Equips the Kansas State Health Department in identifying and responding to existing and emerging injury threats.

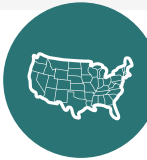
**Firearm Injury Surveillance Through Emergency
Rooms (FASTER): Advancing Violence Epidemiology
in Real-Time (AVERT): \$149,704**

Equips the Kansas State Health Department to collect, analyze, and disseminate data on violence-related emergency department visits to respond to and prevent violence.

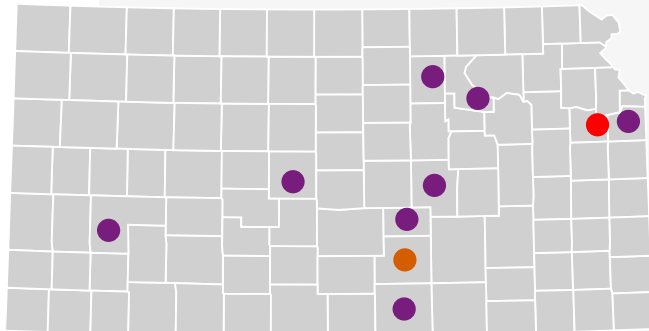


The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Kansas received more than **\$7.8 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION



RPE awards an additional \$135,000 to the state sexual assault coalition in **Kansas**.

Statewide Program Funding

The below programs are funded through the state health department in **Kansas**.

- OD2A in States: \$2,685,279
- EfC: PACE D2A: \$485,000
- RPE: \$447,619
- NVDRS: \$254,240
- Core SIPP: \$250,000
- FASTER: AVERT: \$149,704
- ORS: \$87,416 (average)

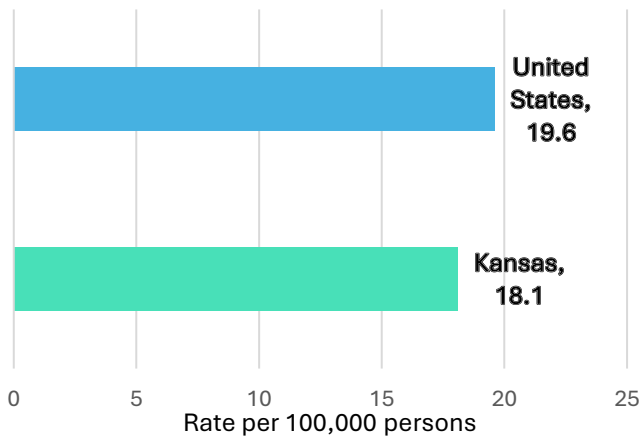
Local Program Funding

The below programs are funded through local communities in **Kansas**.

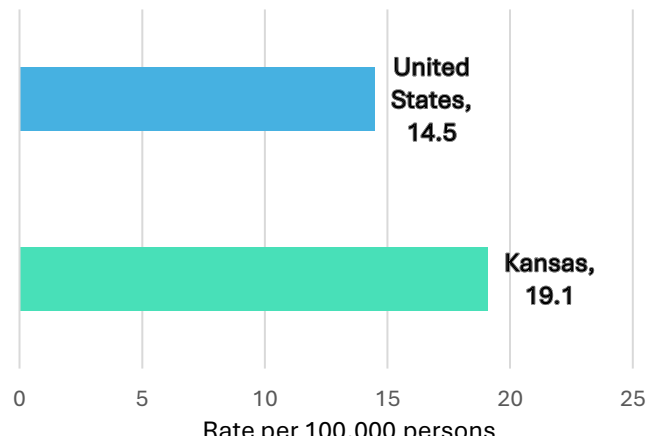
- OD2A: LOCAL: \$1,140,000
- YVPC: \$1,199,999
- DFC Coalitions: \$998,956

In Kansas, the overdose death rate was **similar** to the U.S. average

In Kansas, the suicide death rate was **32% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



KENTUCKY



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$5,407,419

Funds the University of Kentucky Research Foundation to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$1,750,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 14 Kentucky-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$741,459

Supports the Cabinet for Health and Family Services and a Kentucky-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$288,180

Enables Kentucky to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the University of Kentucky in identifying and responding to existing and emerging injury threats.

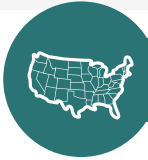
Firearm Injury Surveillance Through Emergency Rooms (FASTER): Advancing Violence Epidemiology in Real-Time (AVERT): \$150,000

Equips the University of Kentucky Research Foundation to collect, analyze, and disseminate data on violence-related emergency department visits to respond to and prevent violence.

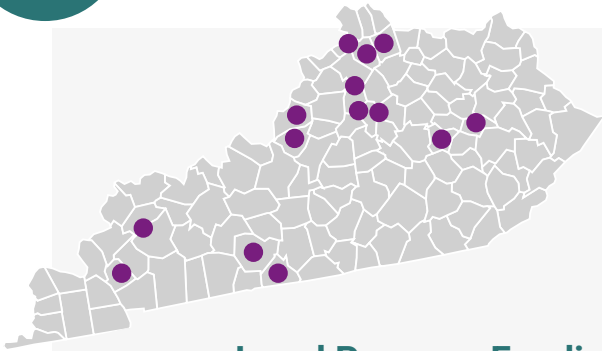


The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Kentucky received more than **\$8.6 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION



Local Program Funding

The below programs are funded through local communities in **Kentucky**.

- DFC Coalitions: \$1,750,000

Statewide Program Funding

The below programs are funded through the University of Kentucky Research Foundation in **Kentucky**.

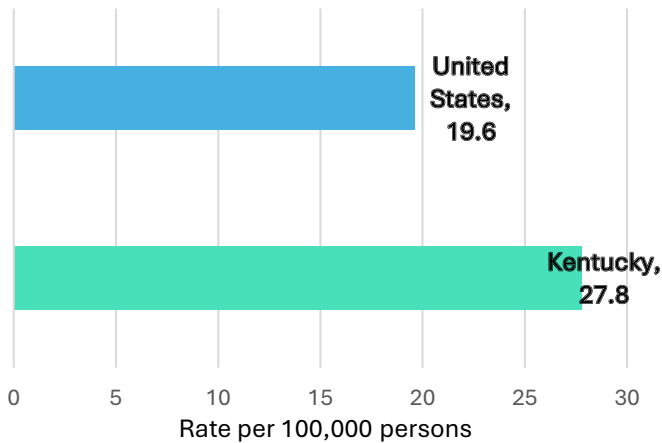
- OD2A-S: \$5,407,419
- Core SIPP: \$250,000
- NVDRS: \$288,180
- FASTER: AVERT: \$150,000

The below programs are funded through a state government agency in **Kentucky**.

- RPE: \$606,459
- ORS: \$87,416 (average)

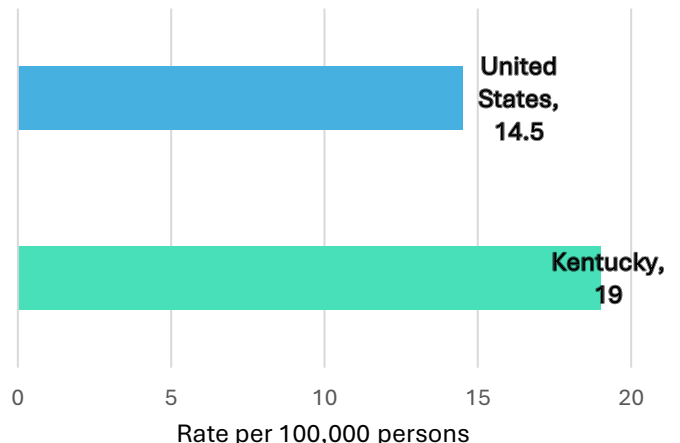
RPE awards an additional \$135,000 to the state sexual assault coalition in **Kentucky**.

In Kentucky, the overdose death rate was **42% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

In Kentucky, the suicide death rate was **32% higher** than the U.S. average



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



LOUISIANA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,688,805

Funds the Louisiana State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$1,374,750

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 11 Louisiana-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$784,000

Supports the Louisiana State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Youth Violence Prevention Centers (YVPC): \$1,194,774

Supports Tulane University in partnering with its local community to identify, develop, and test innovative youth violence prevention strategies.

Rape Prevention and Education (RPE): \$756,849

Supports the Louisiana State Health Department and a Louisiana-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$330,086

Enables Louisiana to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.

Other Research Funding: \$399,795

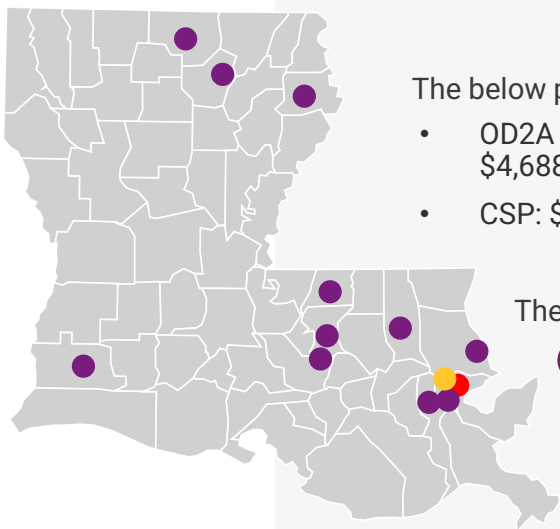
Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Louisiana received more than **\$9.6 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**



Statewide Program Funding:

The below programs are funded through the state health department in **Louisiana**.

- OD2A in States: \$4,688,805
- CSP: \$784,000
- RPE: \$621,849
- NVDRS: \$330,086
- ORS: \$87,416 (average)

Local Program Funding:

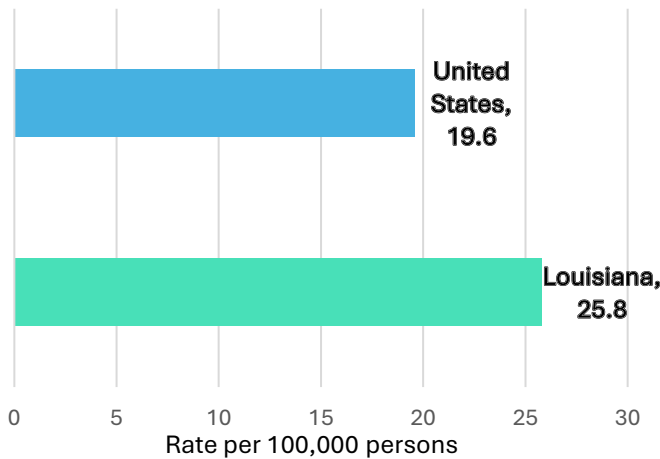
The below programs are funded through local communities in **Louisiana**.

- DFC Coalitions: \$1,374,750
- YVPC: \$1,194,774
- Injury/Violence Research Funding: \$399,795

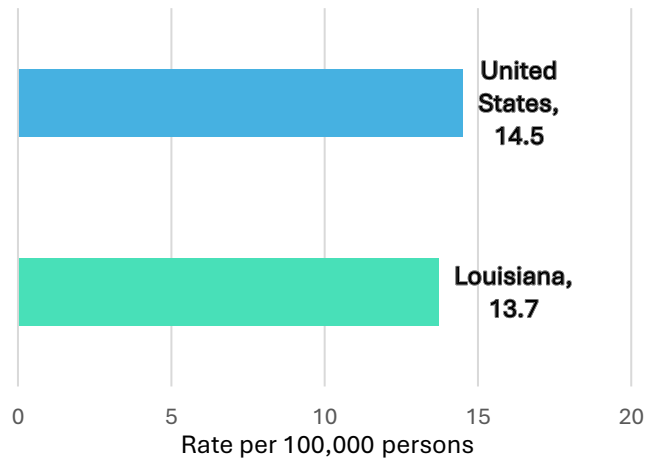
RPE awards an additional \$135,000 to the state sexual assault coalition in **Louisiana**.

In Louisiana, the overdose death rate was **32% higher** than the U.S. average

In Louisiana, the suicide death rate was **similar** to the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

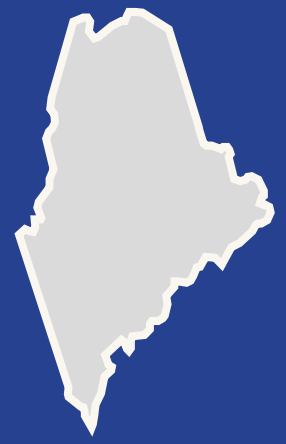


Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



MAINE



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$2,920,497

Funds the Maine State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$875,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 7 Maine-based community coalitions to prevent youth substance use.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$823,799

Awards the City of Portland, Maine Public Health Division to prevent overdoses through strong multisectoral partnerships.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$982,000

Supports the Maine State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$423,012

Supports the Maine State Health Department and a Maine-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$195,056

Enables Maine to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.

Other Research Funding: \$700,000

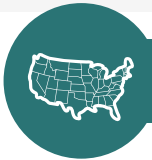
Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.





The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Maine received more than **\$7.0 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION

Statewide Program Funding

The below programs are funded through the state health department in **Maine**.

- OD2A in States: \$2,920,497
- CSP: \$982,000
- RPE: \$288,012
- NVDRS: \$195,056
- ORS: \$87,416 (average)

Local Program Funding

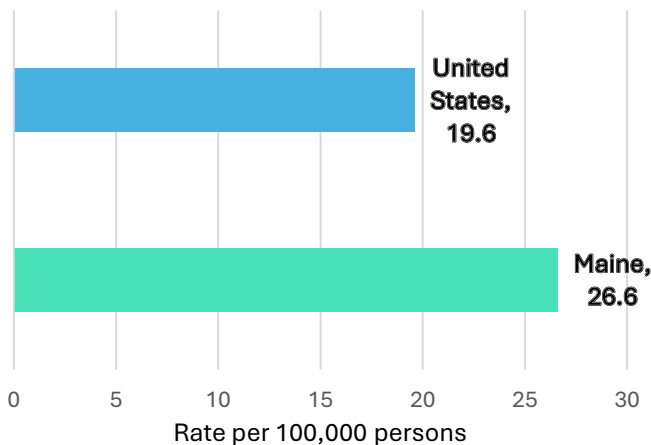
The below programs are funded through local communities in **Maine**.

- OD2A: LOCAL: \$823,799
- DFC Coalitions: \$750,000
- Injury/Violence Research Funding: \$700,000

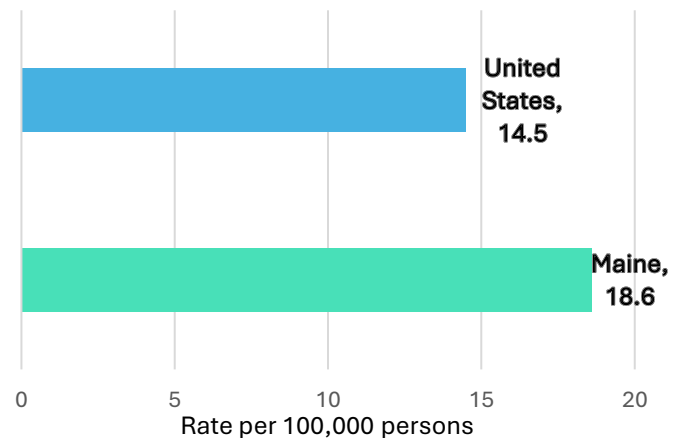
RPE awards an additional \$135,000 to the state sexual assault coalition in **Maine**.

In Maine, the overdose death rate was **36% higher** than the U.S. average

In Maine, the suicide death rate was **29% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

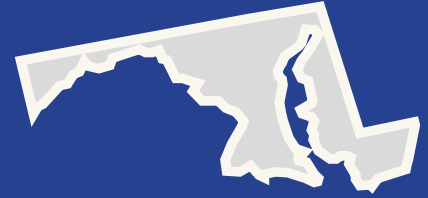


Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



MARYLAND



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,528,982

Funds the Maryland State Health Department to expand drug overdose surveillance and prevention efforts.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$2,550,000

Awards the Baltimore County Department of Health to prevent overdoses through strong multisectoral partnerships.

Drug-Free Communities (DFC): \$1,250,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 10 Maryland-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$910,777

Supports the Maryland State Health Department and a Maryland-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Injury Control Research Centers (ICRC): \$850,000

Provides funding to Johns Hopkins University to conduct research, outreach, and training to develop and evaluate new injury control interventions.

National Violent Death Reporting System (NVDRS): \$459,044

Enables Maryland to submit data into this state-based system that collects information on violent deaths and suicides, and use it to strengthen prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the Maryland Department of Health and Mental Hygiene in identifying and responding to existing and emerging injury threats.

Other Research Funding: \$2,095,273

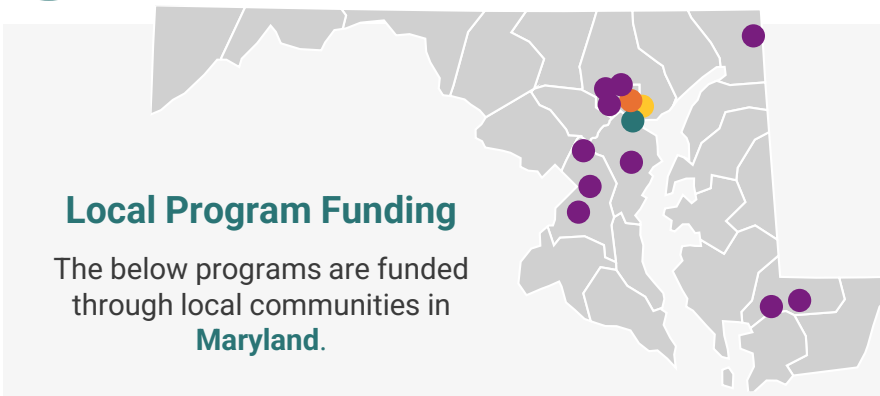
Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Maryland received more than **\$13.0 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**



Local Program Funding

The below programs are funded through local communities in **Maryland**.

- OD2A: LOCAL: \$2,550,000
- Injury/Violence Research Funding: \$2,095,273
- DFC Coalitions: \$1,250,000
- ICRC: \$850,000

Statewide Program Funding

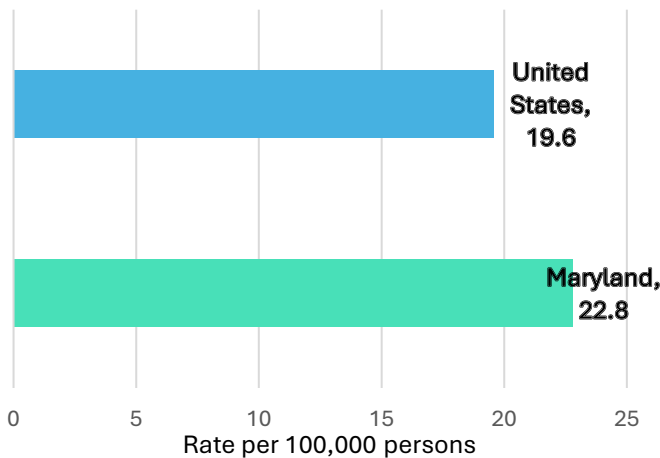
The below programs are funded for statewide injury prevention efforts in **Maryland**.

- OD2A in States: \$4,528,982
- RPE: \$775,777
- NVDRS: \$459,044
- Core SIPP: \$250,000
- ORS: \$87,416 (average)

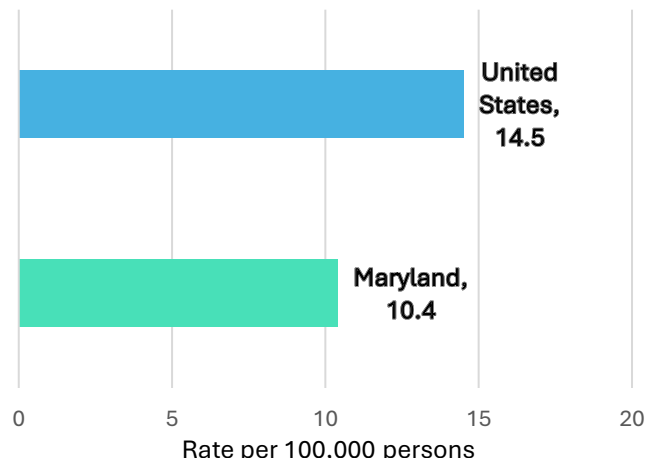
RPE awards an additional \$135,000 to the state sexual assault coalition in **Maryland**.

In Maryland, the overdose death rate was **17% higher** than the U.S. average

In Maryland, the suicide death rate was **29% lower** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

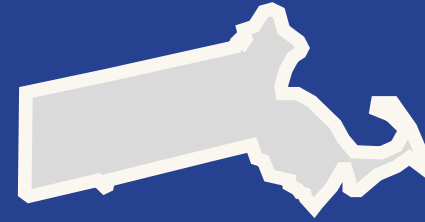


Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



MASSACHUSETTS



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing – rather than treating – non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,210,480

Funds the Massachusetts State Health Department to expand drug overdose surveillance and prevention efforts.

Essentials for Childhood: Preventing ACEs through Data to Action (EfC: PACE D2A): \$485,000

Provides funding to the Massachusetts State Health Department to prevent adverse childhood experiences (ACEs) and promote positive childhood experiences to help reduce leading causes of death, such as overdose and suicide, and mental health challenges.

Drug-Free Communities (DFC): \$3,540,874

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 29 Massachusetts-based community coalitions to prevent youth substance use.

National Violent Death Reporting System (NVDRS): \$266,816

Enables Massachusetts to submit data into this state-based system that collects information on violent deaths and suicides.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$1,355,037

Awards the Boston Public Health Commission to prevent overdoses through strong multisectoral partnerships.

Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the Massachusetts State Health Department in identifying and responding to existing and emerging injury threats.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Preventing Violence Affecting Young Lives (PREVAYL): \$250,000

Awards the Boston Public Health Commission to address youth violence, teen dating violence, other adverse childhood experiences, and conditions that put communities at greater risk for violence.

Rape Prevention and Education (RPE): \$997,158

Supports the Commonwealth of Massachusetts and a Massachusetts-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Other Research Funding: \$2,595,528

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.





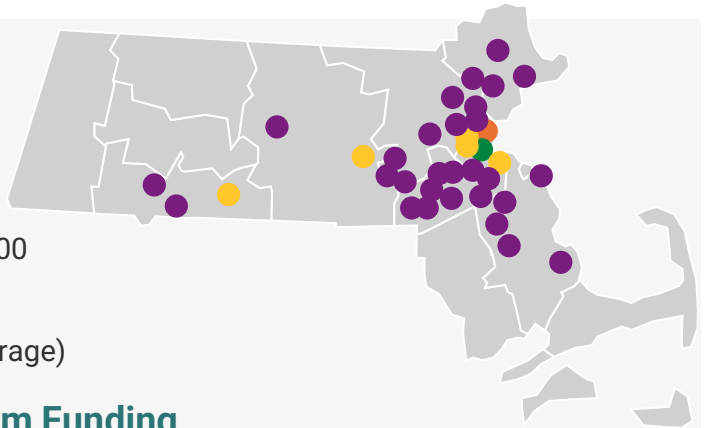
The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Massachusetts received more than **\$14.0 million** in injury prevention funding.

INJURY PREVENTION FUNDING BY LOCATION

Statewide Program Funding

The below programs are funded through the state health department in **Massachusetts**.



- OD2A in States: \$4,210,480
- Core SIPP: \$250,000
- RPE: \$862,158
- NVDRS: \$266,816
- EfC: PACE D2A: \$485,000
- ORS: \$87,416 (average)

Local Program Funding

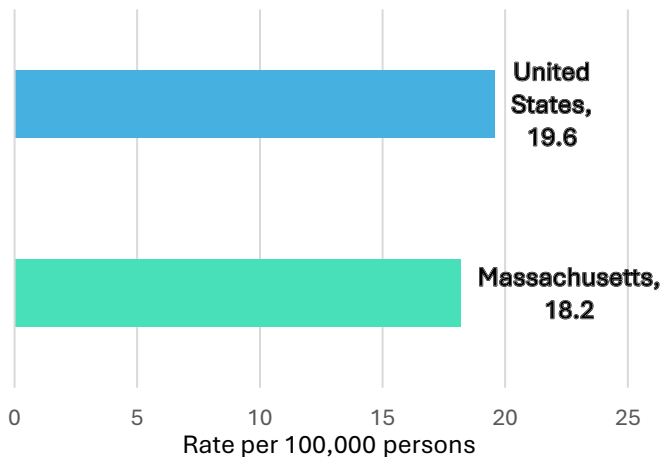
The below programs are funded through local communities in **Massachusetts**.

- DFC Coalitions: \$3,540,874
- Injury/Violence Research Funding: \$2,595,528
- OD2A: LOCAL: \$1,355,037
- PREVAYL: \$250,000

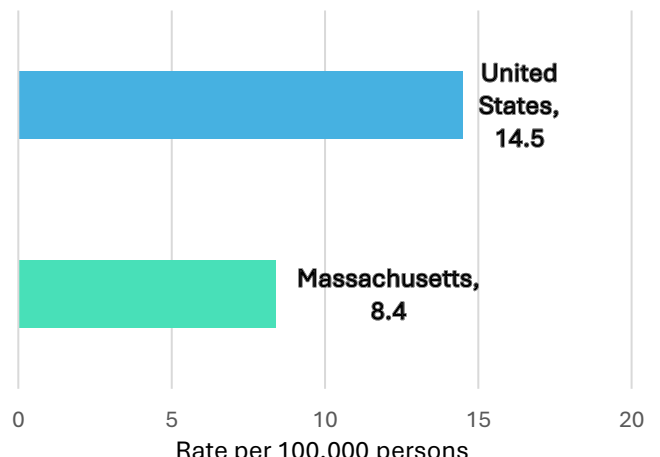
RPE awards an additional \$135,000 to the state sexual assault coalition in **Massachusetts**.

In Massachusetts, the overdose death rate was **similar** to the U.S. average

In Massachusetts, the suicide death rate was **43% lower** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data



MICHIGAN



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing – rather than treating – non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,261,805

Funds the Michigan State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$2,625,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 21 Michigan-based community coalitions to prevent youth substance use.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$838,273

Awards the Barry–Eaton District Health Department to prevent overdoses through strong multisectoral partnerships.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$1,003,000

Supports the Michigan State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$1,305,874

Supports the Michigan State Health Department and a Georgia-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Youth Violence Prevention Centers (YVPC): \$1,200,000

Supports the University of Michigan at Ann Arbor in partnering with its local community to identify, develop, and test innovative youth violence prevention strategies.

Injury Control Research Centers (ICRC): \$850,000

Provides funding to the University of Michigan at Ann Arbor to conduct research, outreach, and training to develop and evaluate new injury control interventions.

Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$500,000

Invests in a Michigan-based domestic violence coalition to decrease risk factors and increase protective factors related to intimate partner violence.

Essentials for Childhood: Preventing ACEs through Data to Action (EfC: PACE D2A): \$485,000

Provides funding to the Michigan Public Health Institute to prevent adverse childhood experiences (ACEs) and promote positive childhood experiences to help reduce leading causes of death, such as overdose and suicide, and mental health challenges.

National Violent Death Reporting System (NVDRS): \$434,523

Enables Michigan to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.

Firearm Injury Surveillance Through Emergency Rooms (FASTER): Advancing Violence Epidemiology in Real-Time (AVERT): \$150,000

Equips the Michigan State Health Department to collect, analyze, and disseminate data on violence-related emergency department visits to respond to and prevent violence.

Other Research Funding: \$3,981,811

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.





The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Michigan received more than **\$17.7 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION

Statewide Program Funding

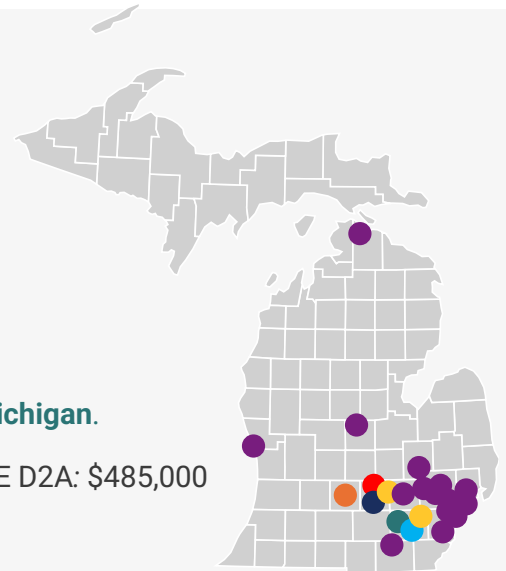
The below programs are funded through the state health department in **Michigan**.

- OD2A in States: \$4,261,805
- CSP: \$1,003,000
- FASTER: AVERT: \$150,000
- NVDRS: \$434,523
- RPE: \$1,170,874

Local Program Funding

The below programs are funded through local communities in **Michigan**.

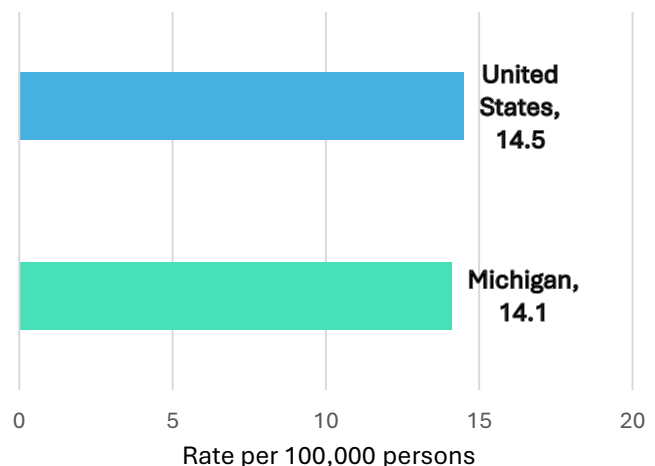
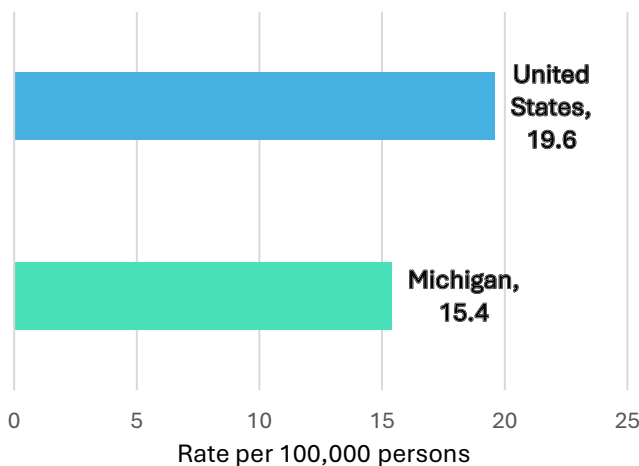
- Injury/Violence Research Funding: \$3,981,811
- DFC Coalitions: \$2,625,000
- YVPC: \$1,200,000
- ICRC: \$850,000
- OD2A: LOCAL: \$838,273
- DELTA: \$500,000
- Efc: PACE D2A: \$485,000



RPE awards an additional \$135,000 to the state sexual assault coalition in **Michigan**.

In Michigan, the overdose death rate was **22% lower** than the U.S. average

In Michigan, the suicide death rate was **similar** to the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data



MINNESOTA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,199,924

Funds the Minnesota State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$1,500,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 12 Minnesota-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$863,090

Supports the Minnesota State Health Department and a Minnesota-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Essentials for Childhood: Preventing ACEs through Data to Action (EfC: PACE D2A): \$485,000

Provides funding to the Minnesota State Health Department to prevent adverse childhood experiences (ACEs) and promote positive childhood experiences to help reduce leading causes of death, such as overdose and suicide, and mental health challenges.

Core State Injury Prevention Program (Core SIPP): \$400,000

Equips the Minnesota State Health Department in identifying and responding to existing and emerging injury threats.

National Violent Death Reporting System (NVDRS): \$279,049

Enables Minnesota to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.

Preventing Violence Affecting Young Lives (PREVAYL): \$250,000

Awards the City of Minneapolis to address youth violence, teen dating violence, other adverse childhood experiences, and conditions that put communities at greater risk for violence.

Other Research Funding: \$349,992

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.





The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Minnesota received more than **\$8.4 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION

Statewide Program Funding

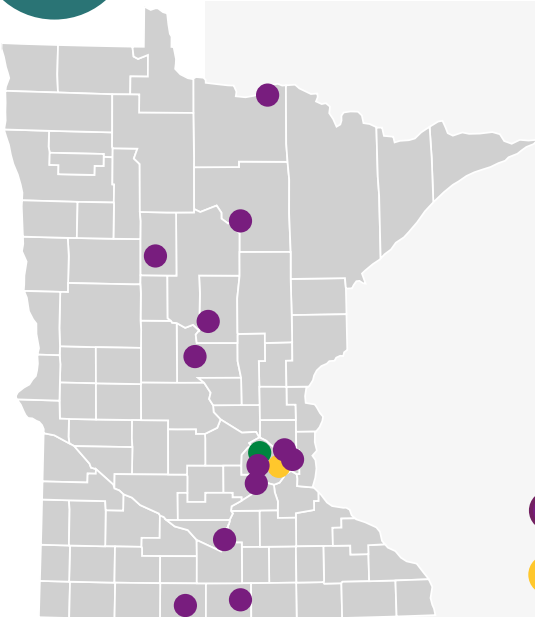
The below programs are funded through the state health department in **Minnesota**.

- OD2A in States: \$4,199,924
- RPE: \$728,090
- Efc: PACE D2A: \$485,000
- Core SIPP: \$400,000
- NVDRS: \$279,049
- ORS: \$87,416 (average)

Local Program Funding

The below programs are funded through local communities in **Minnesota**.

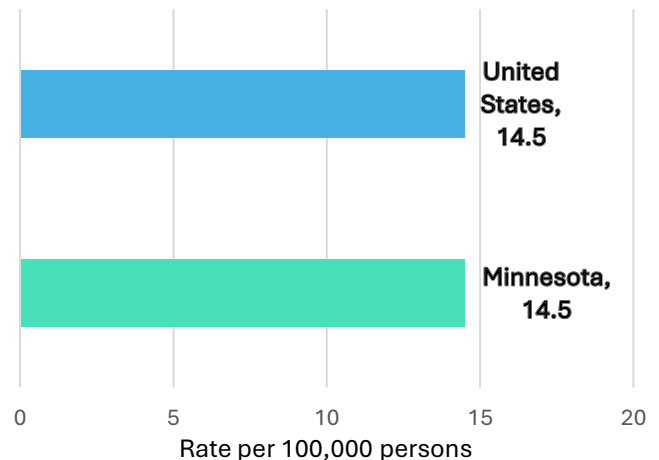
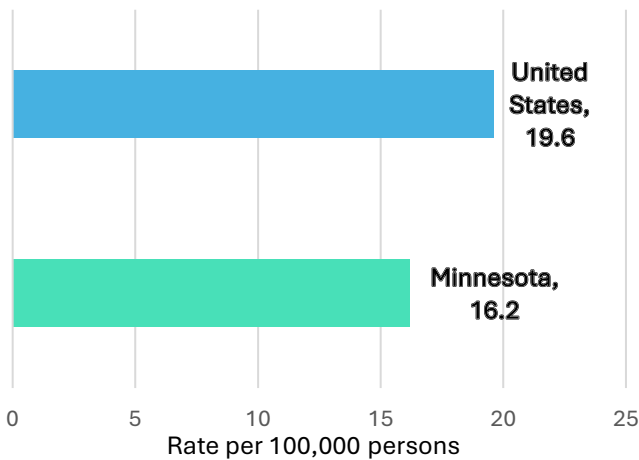
- DFC Coalitions: \$1,500,000
- Injury/Violence Research Funding: \$349,992
- PREVAYL: \$250,000



RPE awards an additional \$135,000 to the state sexual assault coalition in **Minnesota**.

In Minnesota, the overdose death rate was **18% lower** than the U.S. average

In Minnesota, the suicide death rate was **similar** to the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

Suicide Rate by Geography, October 2024 – September 2025

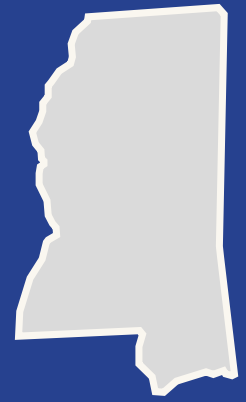
Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data



MISSISSIPPI



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$2,540,192

Funds the Mississippi State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$625,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 5 Mississippi-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$579,986

Supports the Mississippi State Health Department and a Mississippi-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$265,229

Enables Mississippi to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the Mississippi State Health Department in identifying and responding to existing and emerging injury threats.

Firearm Injury Surveillance Through Emergency Rooms (FASTER): Advancing Violence Epidemiology in Real-Time (AVERT): \$149,671

Equips the Mississippi State Health Department to collect, analyze, and disseminate data on violence-related emergency department visits to respond to and prevent violence.

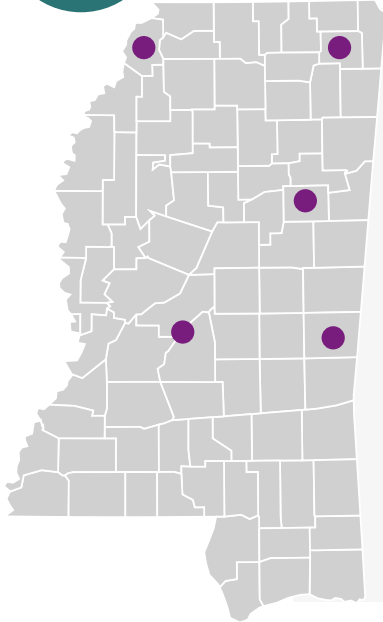




The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Mississippi received more than **\$4.4 million** in injury prevention funding.

INJURY PREVENTION FUNDING BY LOCATION



Statewide Program Funding

The below programs are funded through the state health department in **Mississippi**.

- OD2A in States: \$2,540,192
- RPE: \$444,986
- NVDRS: \$265,229
- Core SIPP: \$250,000
- ORS: \$87,416 (average)
- FASTER: AVERT: \$149,671

Local Program Funding

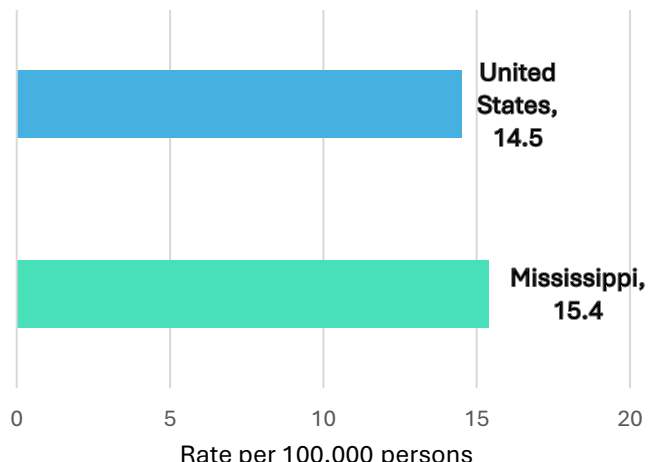
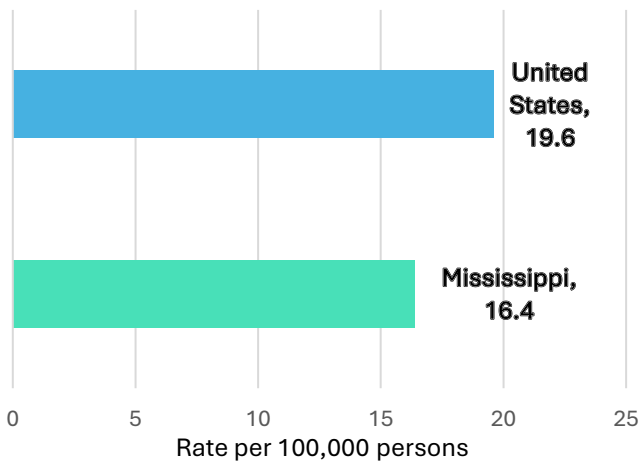
The below programs are funded through local communities in **Mississippi**.

- DFC Coalitions: \$625,000

RPE awards an additional \$135,000 to the state sexual assault coalition in **Mississippi**.

In Mississippi, the overdose death rate was **17% lower** than the U.S. average

In Mississippi, the suicide death rate was **similar** to the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data



MISSOURI



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,394,497

Funds the Missouri State Health Department to expand drug overdose surveillance and prevention efforts.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$2,682,189

Awards the St. Louis County Department of Public Health to prevent overdoses through strong multisectoral partnerships.

Drug-Free Communities (DFC): \$2,750,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 22 Missouri-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$908,517

Supports the Missouri State Health Department and a Missouri-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$369,064

Enables Missouri to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Missouri received more than **\$11.1 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**

Statewide Program Funding

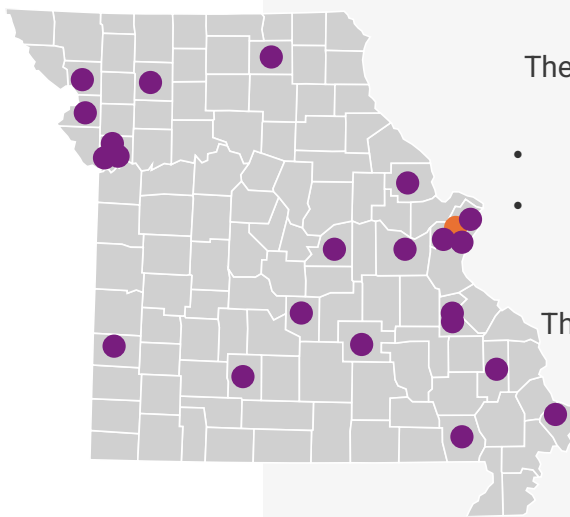
The below programs are funded through the state health department in **Missouri**.

- OD2A in States: \$4,394,497
- RPE: \$773,517
- NVDRS: \$369,064
- ORS: \$87,416 (average)

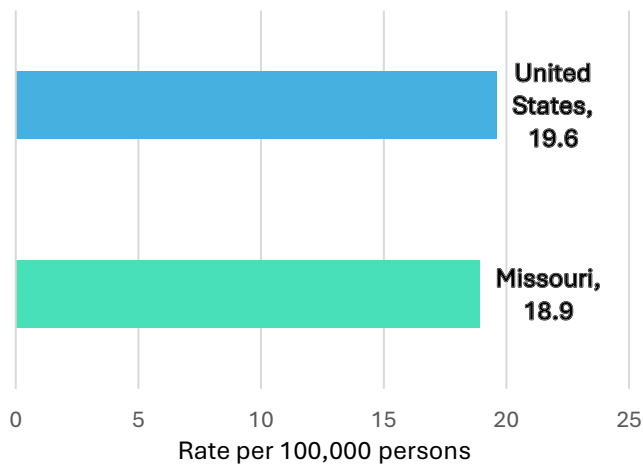
Local Program Funding

The below programs are funded through local communities in **Missouri**.

- DFC Coalitions: \$2,750,000
 - OD2A: LOCAL: \$2,682,189
- RPE awards an additional \$135,000 to the state sexual assault coalition in **Missouri**.

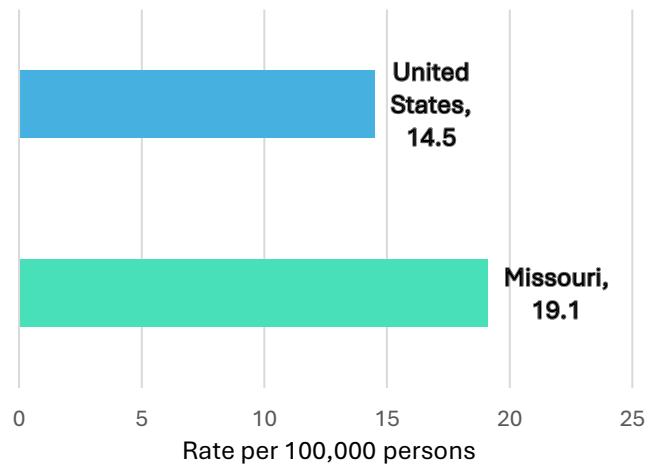


In Missouri, the overdose death rate was **similar** to the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

In Missouri, the suicide death rate was **32% higher** than the U.S. average



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



MONTANA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$2,169,512

Funds the Montana State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$747,009

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 6 Montana-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$394,836

Supports the Montana State Health Department and 2 Montana-based sexual violence coalitions to implement and guide state sexual violence prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the Montana State Health Department in identifying and responding to existing and emerging injury threats.

National Violent Death Reporting System (NVDRS): \$203,175

Enables Montana to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.

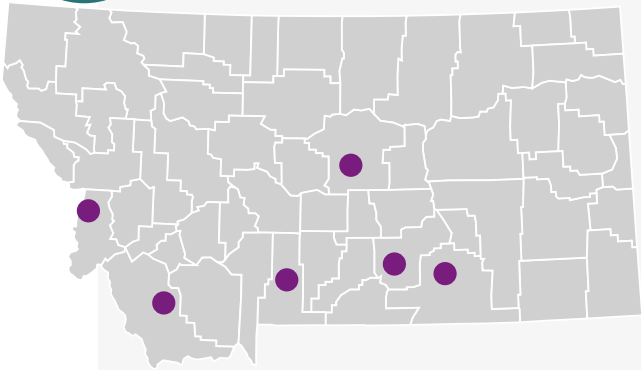


The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Montana received more than **\$3.8 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION



Statewide Program Funding

The below programs are funded through the state health department in **Montana**.

- OD2A in States: \$2,169,512
- RPE: \$259,836
- Core SIPP: \$250,000
- NVDRS: \$203,175
- ORS: \$87,416 (average)

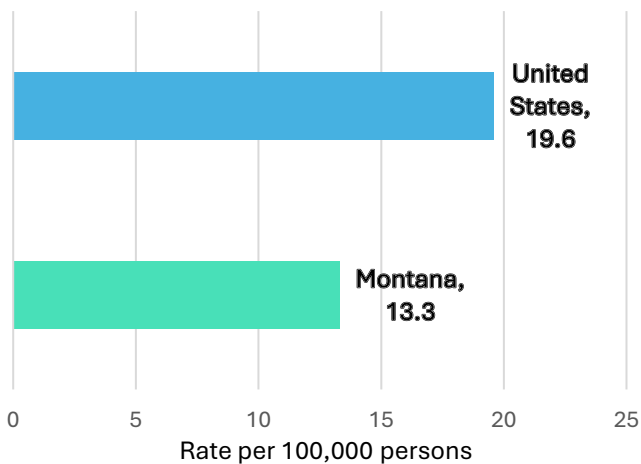
Local Program Funding

The below program is funded through local communities in **Montana**.

- DFC Coalitions: \$747,009

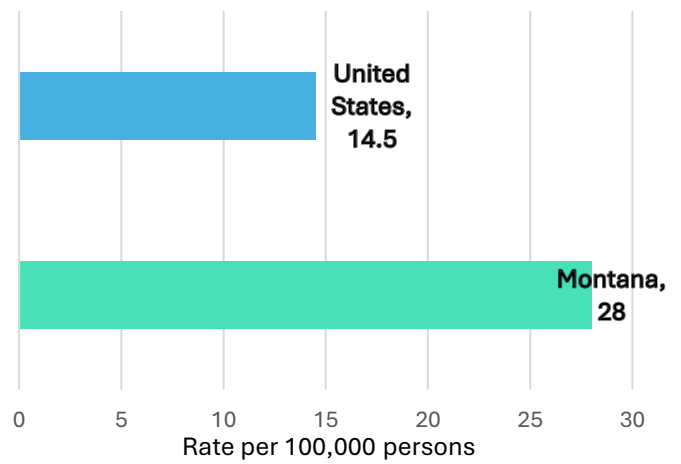
RPE awards an additional \$135,000 to the state sexual assault coalition in **Montana**.

In Montana, the overdose death rate was **33% lower** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

In Montana, the suicide death rate was **94% higher** than the U.S. average



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



NEBRASKA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$2,481,553

Funds the Nebraska State Health Department to expand drug overdose surveillance and prevention efforts.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$890,000

Awards the Douglas County Health Department to prevent overdoses through strong multisectoral partnerships.

Drug-Free Communities (DFC): \$250,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 2 Nebraska-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$755,000

Supports the University of Nebraska in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$483,708

Supports the Nebraska State Health Department and a Nebraska-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$400,000

Equips the Nebraska State Health Department in identifying and responding to existing and emerging injury threats.

National Violent Death Reporting System (NVDRS): \$202,245

Enables Nebraska to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Nebraska received more than **\$5.5 million** in injury prevention funding.

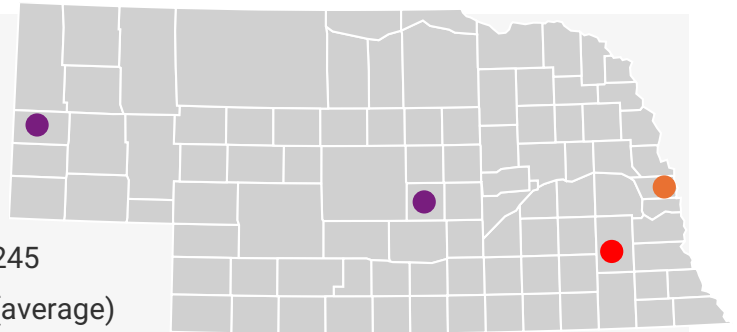


INJURY PREVENTION FUNDING BY LOCATION

Statewide Program Funding

The below programs are funded for statewide injury prevention efforts in **Nebraska**.

- OD2A in States: \$2,481,553
- Core SIPP: \$400,000
- RPE: \$348,708
- NVDRS: \$202,245
- ORS: \$87,416 (average)



RPE awards an additional \$135,000 to the state sexual assault coalition in **Nebraska**.

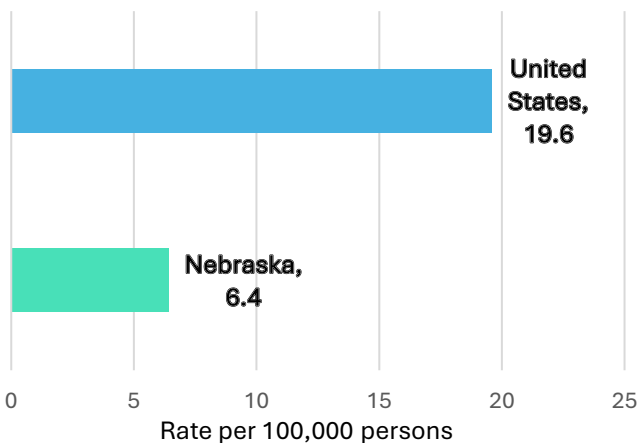
Local Program Funding

The below programs are funded through local communities in **Nebraska**.

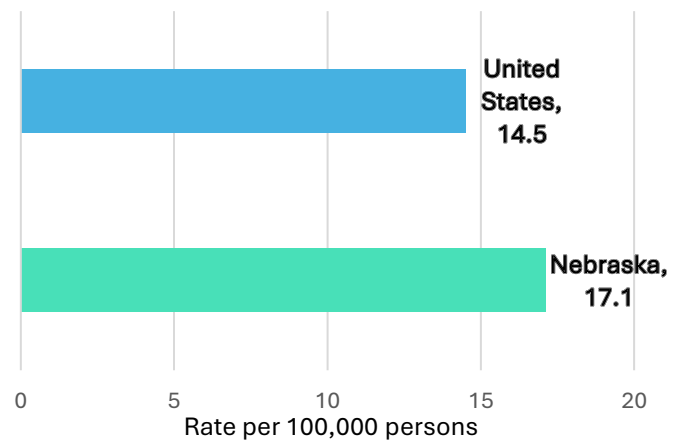
- OD2A: LOCAL: \$890,000
- CSP: \$755,000
- DFC Coalitions: \$250,000

In Nebraska, the overdose death rate was **68% lower** than the U.S. average

In Nebraska, the suicide death rate was **18% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



NEVADA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$2,550,000

Awards the Southern Nevada Health District to prevent overdoses through strong multisectoral partnerships.

Overdose Data to Action in States (OD2A in States): \$2,509,678

Funds the Nevada State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$375,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 3 Nevada-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$599,000

Supports the Nevada State Health Department and a Nevada-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Essentials for Childhood: Preventing ACEs through Data to Action (EfC: PACE D2A): \$484,997

Provides funding to the University of Nevada, Reno to prevent adverse childhood experiences (ACEs) and promote positive childhood experiences to help reduce leading causes of death, such as overdose and suicide, and mental health challenges.

National Violent Death Reporting System (NVDRS): \$277,984

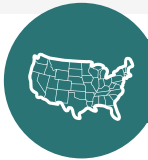
Enables Nevada to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.



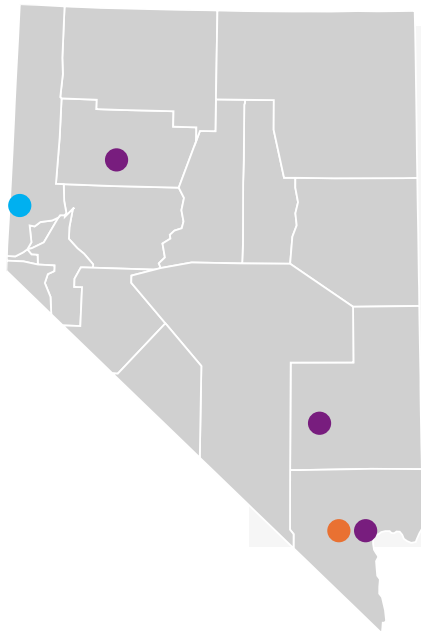


The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Nevada received more than **\$6.8 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION



Statewide Program Funding

The below programs are funded through the state health department in **Nevada**.

- OD2A in States: \$2,509,678
- RPE: \$464,000
- NVDRS: \$277,984

RPE awards an additional \$135,000 to the state sexual assault coalition in **Nevada**.

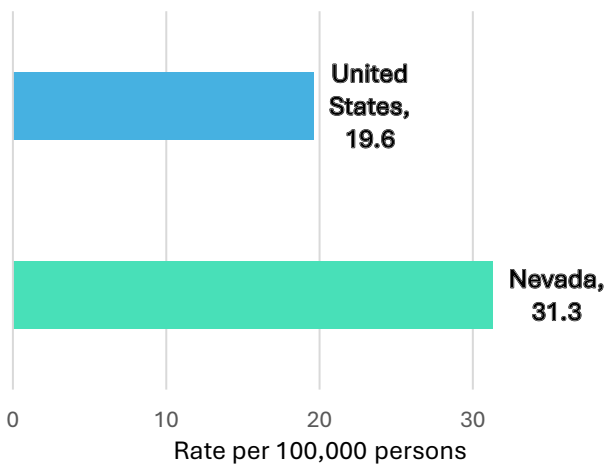
Local Program Funding

The below programs are funded through local communities in **Nevada**.

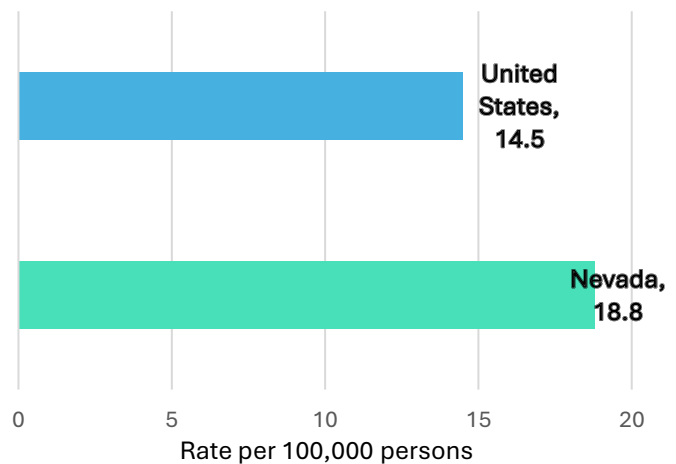
- OD2A: LOCAL: \$2,550,000
- EFC: PACE D2A: \$484,997
- DFC Coalitions: \$375,000

In Nevada, the overdose death rate was **60% higher** than the U.S. average

In Nevada, the suicide death rate was **30% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

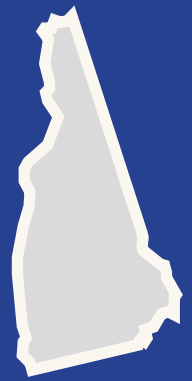
Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data



NEW HAMPSHIRE



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$2,697,194

Funds the New Hampshire State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$875,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 7 New Hampshire-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$424,549

Supports the New Hampshire State Health Department and a New Hampshire-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$196,896

Enables New Hampshire to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.

Other Research Funding: \$399,451

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.





The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

New Hampshire received more than **\$4.6 million** in injury prevention funding.

INJURY PREVENTION FUNDING BY LOCATION



Statewide Program Funding

The below programs are funded through the state health department in **New Hampshire**.

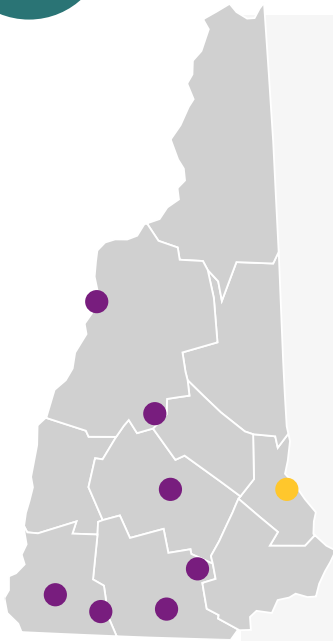
- OD2A in States: \$2,697,194
- NVDRS: \$196,896
- RPE: \$289,549
- ORS: \$87,416 (average)

Local Program Funding

The below programs are funded through local communities in **New Hampshire**.

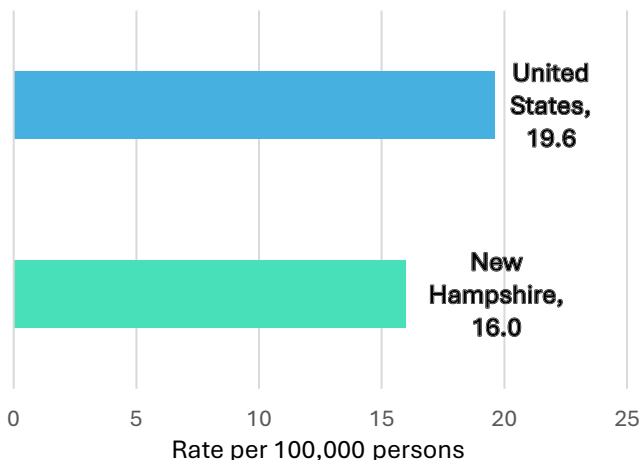
- DFC Coalitions: \$875,000
- Injury/Violence Research Funding: \$399,451

RPE awards an additional \$135,000 to the state sexual assault coalition in **New Hampshire**.

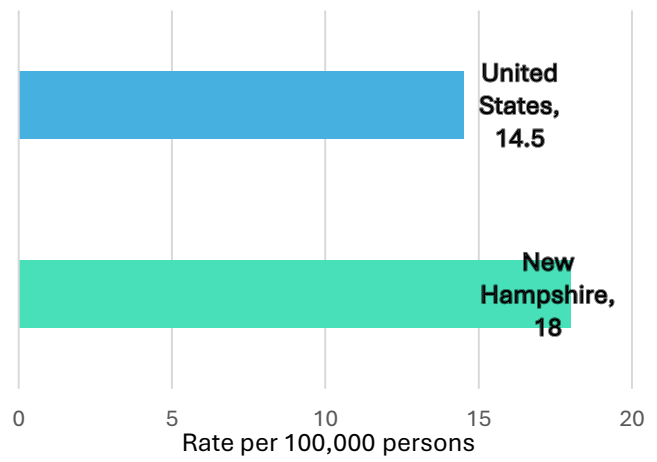


In New Hampshire, the overdose death rate was **19% lower** than the U.S. average

In New Hampshire, the suicide death rate was **25% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data





NEW JERSEY

FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,653,462

Funds the New Jersey State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$2,625,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 21 New Jersey-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$1,226,012

Supports the New Jersey State Health Department and a New Jersey-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Essentials for Childhood: Preventing ACEs through Data to Action (EfC: PACE D2A): \$484,977

Provides funding to the Center for Health Care Strategies, Inc. to prevent adverse childhood experiences (ACEs) and promote positive childhood experiences to help reduce leading causes of death, such as overdose and suicide, and mental health challenges.

National Violent Death Reporting System (NVDRS): \$288,454

Enables New Jersey to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.

Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$280,549

Invests in a New Jersey-based domestic violence coalition to decrease risk factors and increase protective factors related to intimate partner violence.

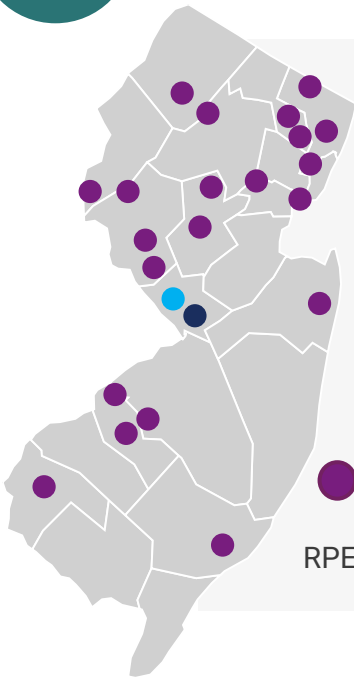




The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

New Jersey received more than **\$9.6 million** in injury prevention funding.

INJURY PREVENTION FUNDING BY LOCATION



Statewide Program Funding

The below programs are funded through the state health department in **New Jersey**.

- OD2A in States: \$4,653,462
- NVDRS: \$288,454
- RPE: \$1,091,012
- ORS: \$87,416 (average)

Local Program Funding

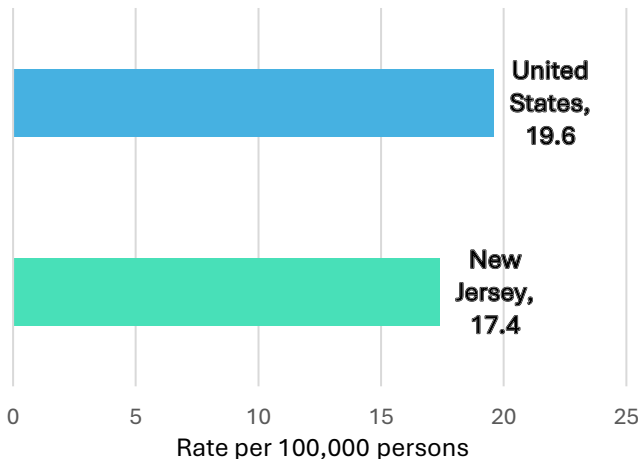
The below programs are funded through local communities in **New Jersey**.

- DFC Coalitions: \$2,625,000
- EfC: PACE D2A: \$484,977
- DELTA: \$280,549

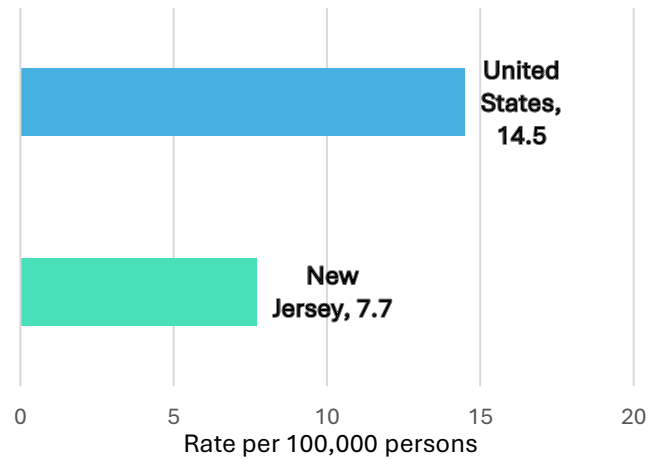
RPE awards an additional \$135,000 to the state sexual assault coalition in **New Jersey**.

In New Jersey, the overdose death rate was **12% lower** than the U.S. average

In New Jersey, the suicide death rate was **47% lower** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



NEW MEXICO



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,322,929

Funds the New Mexico State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$500,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 4 New Mexico-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$499,513

Supports the New Mexico State Health Department and a New Mexico-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$255,091

Enables New Mexico to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$249,525

Equips the New Mexico State Health Department in identifying and responding to existing and emerging injury threats.



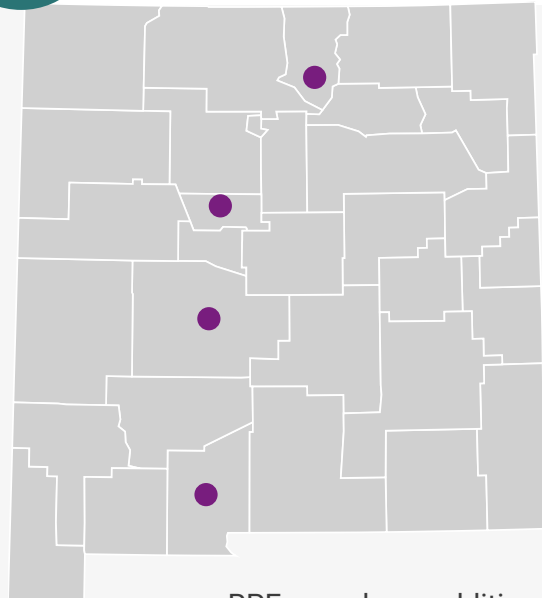


The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

New Mexico received more than **\$5.9 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION



Statewide Program Funding

The below programs are funded through the state health department in **New Mexico**.

- OD2A in States: \$4,322,929
- RPE: \$364,513
- NVDRS: \$255,091
- Core SIPP: \$249,525
- ORS: \$87,416 (average)

Local Program Funding

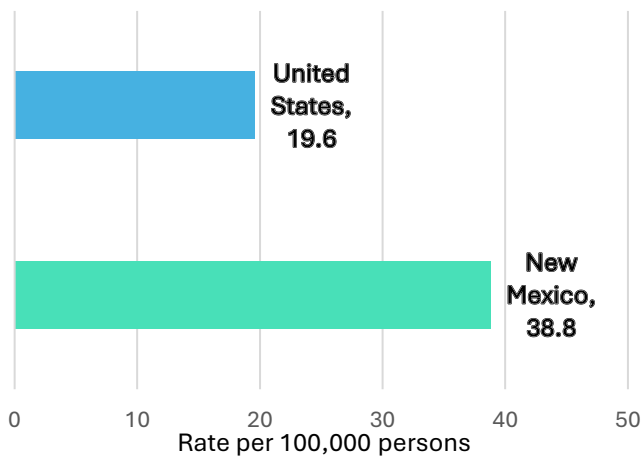
The below program is funded through local communities in **New Mexico**.

- DFC Coalitions: \$500,000

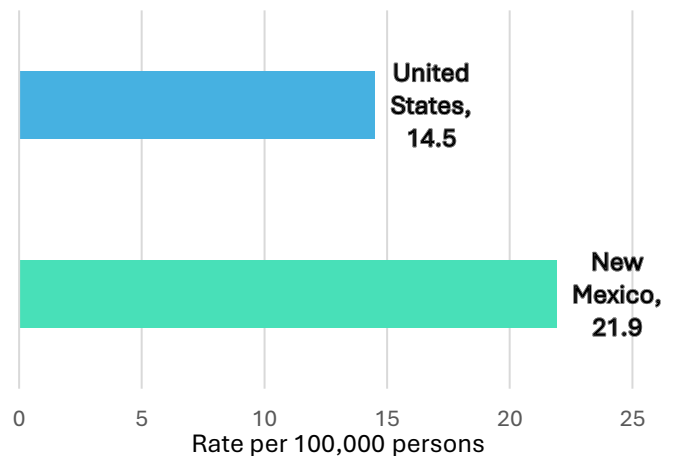
RPE awards an additional \$135,000 to the state sexual assault coalition in **New Mexico**.

In New Mexico, the overdose death rate was **98% higher** than the U.S. average

In New Mexico, the suicide death rate was **52% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



NEW YORK



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$5,017,294

Funds New York State Health Department / Health Research, Inc. to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$4,918,453

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 40 New York-based community coalitions to prevent youth substance use.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$4,291,911

Awards the Broome County Health Department and the Fund for Public Health in New York, Inc. to prevent overdoses through strong multisectoral partnerships.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$973,052

Supports the Research Foundation for Mental Hygiene, Inc. in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$2,196,467

Supports New York State Health Department / Health Research, Inc. to implement and guide state sexual violence prevention efforts.

Injury Control Research Centers (ICRC): \$849,987

Provides funding to Columbia University to conduct research, outreach, and training to develop and evaluate new injury control interventions.

National Violent Death Reporting System (NVDRS): \$469,614

Enables New York to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the New York State Health Department / Health Research, Inc. in identifying and responding to existing and emerging injury threats.


Other Research Funding: \$1,842,927

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

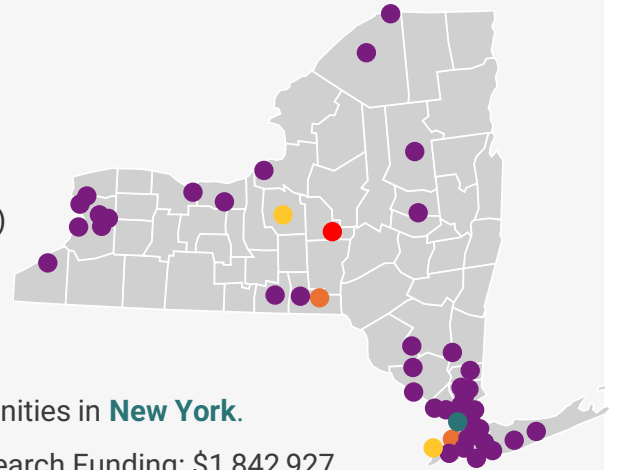
New York received more than **\$20.8 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**

Statewide Program Funding

The below programs are funded through the state health department in **New York**.

- OD2A in States: \$5,017,294
- RPE: \$2,196,467
- NVDRS: \$469,614
- Core SIPP: \$250,000
- ORS: \$87,416 (average)



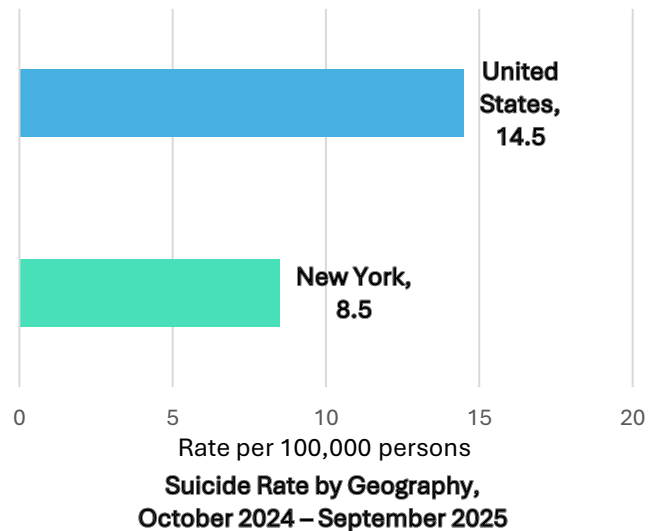
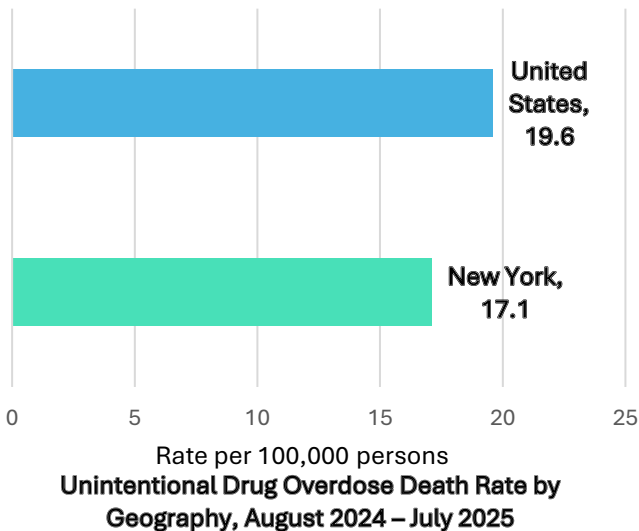
Local Program Funding

The below programs are funded through local communities in **New York**.

- DFC Coalitions: \$4,918,453
- OD2A: LOCAL: \$4,291,911
- Injury/Violence Research Funding: \$1,842,927
- CSP: \$973,052
- ICRC: \$849,987

In New York, the overdose death rate was **13% lower** than the U.S. average

In New York, the suicide death rate was **42% lower** than the U.S. average



Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



NORTH CAROLINA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing – rather than treating – non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

**Overdose Data to Action in States (OD2A in States):
\$4,950,273**

Funds the North Carolina State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$1,831,860

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 15 North Carolina-based community coalitions to prevent youth substance use.

**Overdose Data to Action: LOCAL (OD2A: LOCAL):
\$837,708**

Awards Mecklenburg County Health Department to prevent overdoses through strong multisectoral partnerships.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$1,003,000

Supports the North Carolina State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$1,342,551

Supports the North Carolina State Health Department and a North Carolina-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Injury Control Research Centers (ICRC): \$850,000

Provides funding to the University of North Carolina at Chapel Hill to conduct research, outreach, and training to develop and evaluate new injury control interventions.

Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$500,000

Invests in a North Carolina-based domestic violence coalition to decrease risk factors and increase protective factors related to intimate partner violence.

**National Violent Death Reporting System (NVDRS):
\$423,840**

Enables North Carolina to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.

**Core State Injury Prevention Program (Core SIPP):
\$400,000**

Equips the North Carolina State Health Department in identifying and responding to existing and emerging injury threats.

Essentials for Childhood: Preventing ACEs through Data to Action (EfC: PACE D2A): \$400,000

Provides funding to the North Carolina State Health Department to prevent adverse childhood experiences (ACEs) and promote positive childhood experiences to help reduce leading causes of death, such as overdose and suicide, and mental health challenges.


Other Research Funding: \$2,219,689

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



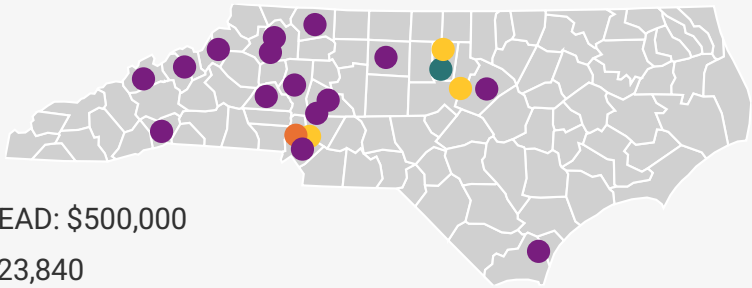
The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

North Carolina received more than **\$14.8 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**

Statewide Program Funding

The below programs are funded through the state health department in **North Carolina**.



- OD2A in States: \$4,950,273
- ORS: \$87,416 (average)
- CSP: \$1,003,000
- RPE: \$1,207,551
- DELTA: AHEAD: \$500,000
- NVDRS: \$423,840
- EfC: PACE: D2A: \$400,000
- Core SIPP: \$400,000

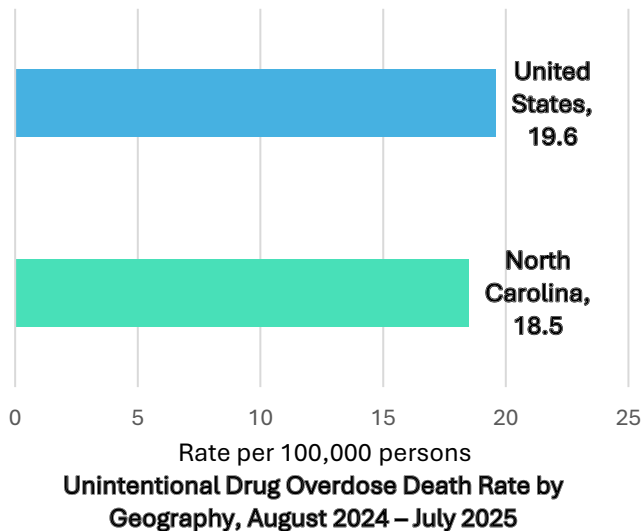
Local Program Funding

The following programs are funded through local communities in **North Carolina**.

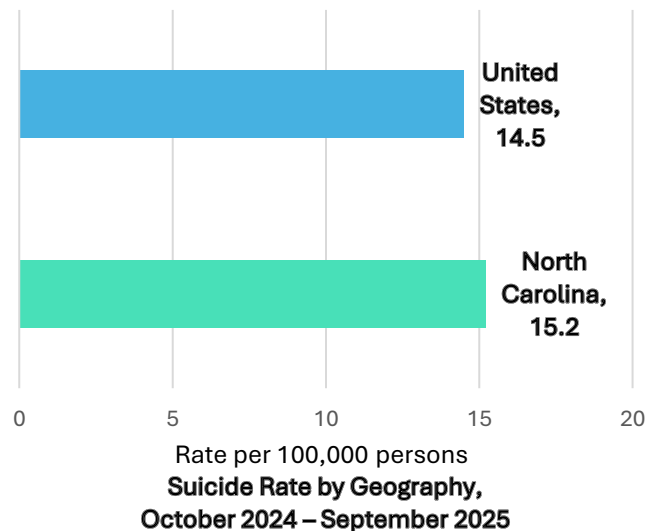
- DFC Coalitions: \$1,831,860
- OD2A: LOCAL: \$837,708
- Injury/Violence Research Funding: \$2,219,689
- ICRC: \$850,000

RPE awards an additional \$135,000 to the state sexual assault coalition in **North Carolina**.

In North Carolina, the overdose death rate was **similar** to the U.S. average



In North Carolina, the suicide death rate was **similar** to the U.S. average



Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



NORTH DAKOTA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Drug-Free Communities (DFC): \$125,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to organize 1 North Dakota-based community coalition to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$955,014

Supports the University of North Dakota in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$363,925

Supports the North Dakota State Health Department and a Hawaii-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$182,151

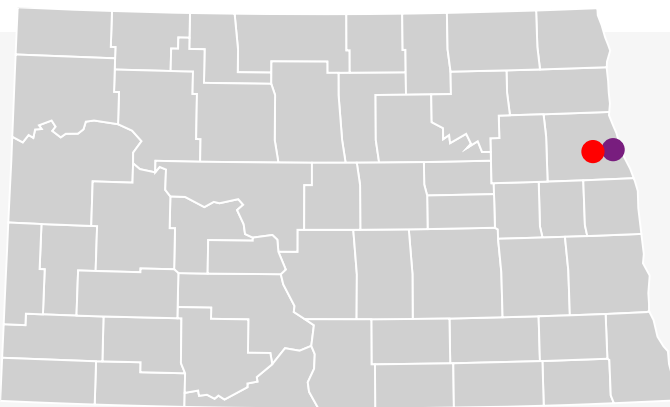
Enables North Dakota to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

North Dakota received more than **\$1.7 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**



Statewide Program Funding

The below programs are funded through the state health department in **North Dakota**.

- RPE: \$228,925
- NVDRS: \$182,151
- ORS: \$87,416 (average)

Local Program Funding

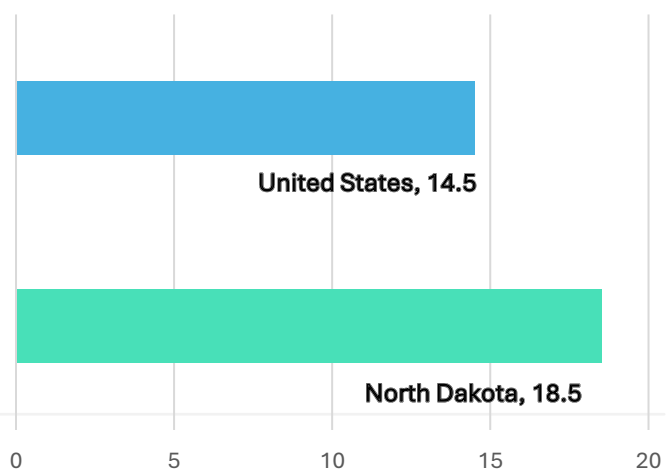
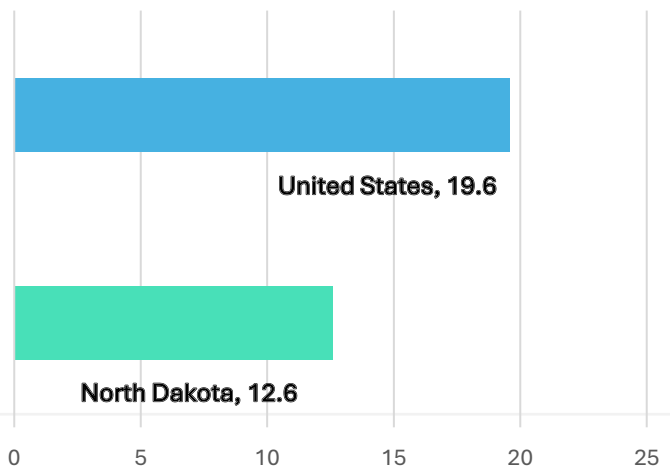
The below program is funded through local communities in **North Dakota**.

- CSP: \$955,014
- DFC Coalition: \$125,000

RPE awards an additional \$135,000 to the state sexual assault coalition in **North Dakota**.

In North Dakota, the overdose death rate was **36% lower** than the U.S. average

In North Dakota, the suicide death rate was **28% higher** than the U.S. average



Rate per 100,000 persons
Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

Rate per 100,000 persons
Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)





The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$9,668,907

Awards Franklin County Public Health, Cuyahoga County Board of Health, and Hamilton County Public Health to prevent overdoses through strong multisectoral partnerships.

Overdose Data to Action in States (OD2A in States): \$5,256,430

Funds the Ohio State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$1,866,563

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 15 Ohio-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$950,000

Supports the Ohio State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$1,480,331

Supports the Ohio State Health Department and an Ohio-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$500,000

Invests in an Ohio-based domestic violence coalition to decrease risk factors and increase protective factors related to intimate partner violence.

Essentials for Childhood: Preventing ACEs through Data to Action (EfC: PACE D2A): \$484,890

Provides funding to the Research Institute at Nationwide Children's Hospital to prevent adverse childhood experiences (ACEs) and promote positive childhood experiences to help reduce leading causes of death, such as overdose and suicide, and mental health challenges.

National Violent Death Reporting System (NVDRS): \$450,824

Enables Ohio to submit data into a state-based system tracking violent deaths and suicide, and use it to strengthen prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the Ohio State Health Department in identifying and responding to existing and emerging injury threats.


Other Research Funding: \$1,399,690

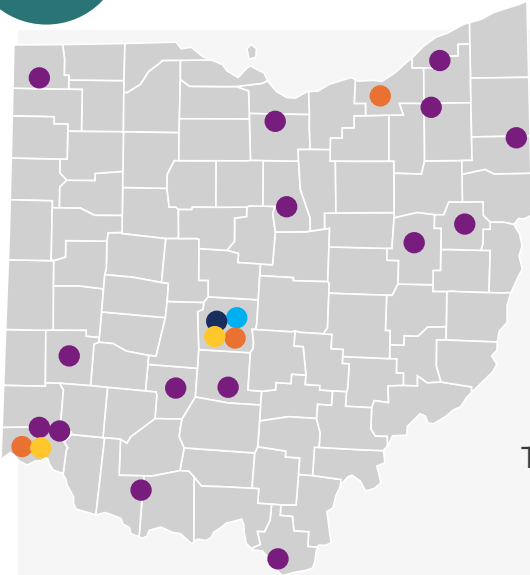
Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Ohio received more than **\$22.3 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**



Statewide Program Funding

The below programs are funded through the state health department in **Ohio**.

- OD2A in States: \$5,256,430
- ORS: \$87,416 (average)
- CSP: \$950,000
- RPE: \$1,345,331
- NVDRS: \$450,824
- Core SIPP: \$250,000

Local Program Funding

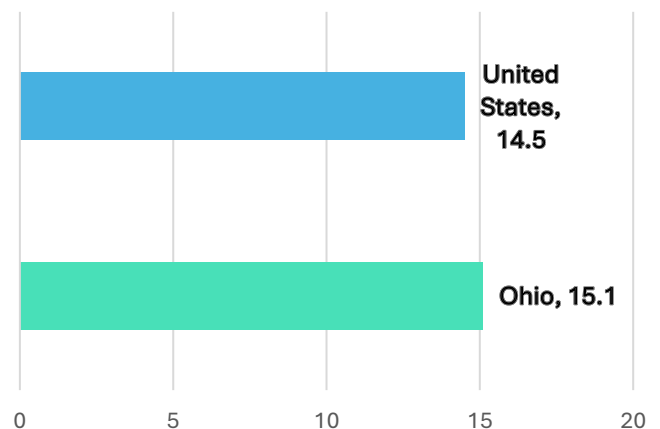
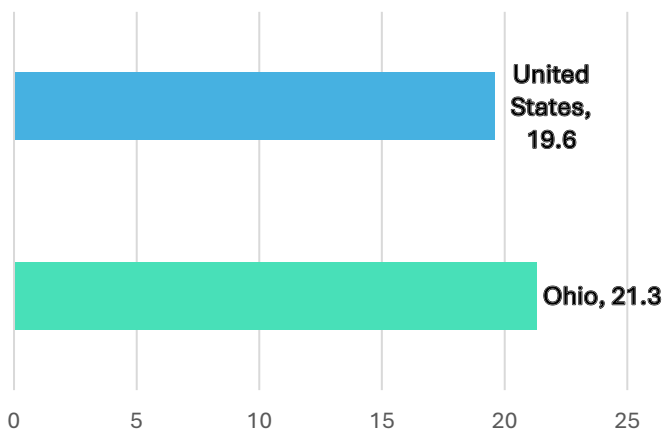
The below programs are funded through local communities in **Ohio**.

- OD2A: LOCAL: \$9,668,907
- DFC Coalitions: \$1,875,000
- Injury/Violence Research Funding: \$1,399,690
- DELTA: \$500,000
- EfC: PACE D2A: \$484,890

RPE awards an additional \$135,000 to the state sexual assault coalition in **Ohio**.

*In Ohio, the overdose death rate was **similar** to the U.S. average*

*In Ohio, the suicide death rate was **similar** to the U.S. average*



Rate per 100,000 persons
Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

Rate per 100,000 persons
Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



OKLAHOMA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$2,453,381

Funds the Oklahoma State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$1,250,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 9 Oklahoma-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$551,098

Supports the Oklahoma State Health Department to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$312,737

Enables Oklahoma to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the Oklahoma State Health Department in identifying and responding to existing and emerging injury threats.

Other Research Funding: \$400,000

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

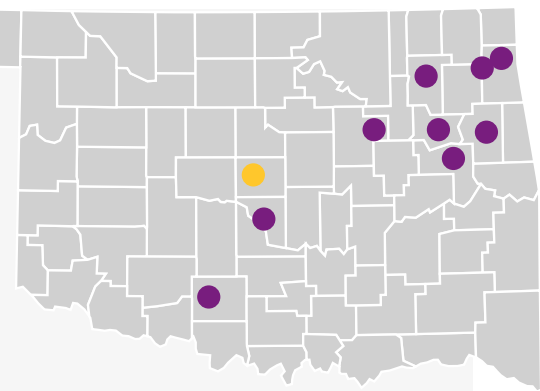
Oklahoma received more than **\$5.6 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**

Statewide Program Funding

The below programs are funded for statewide injury prevention efforts in **Oklahoma**.

- OD2A in States: \$2,453,381
- ORS: \$87,416 (average)
- RPE: \$551,098
- NVDRS: \$312,737
- Core SIPP: \$250,000



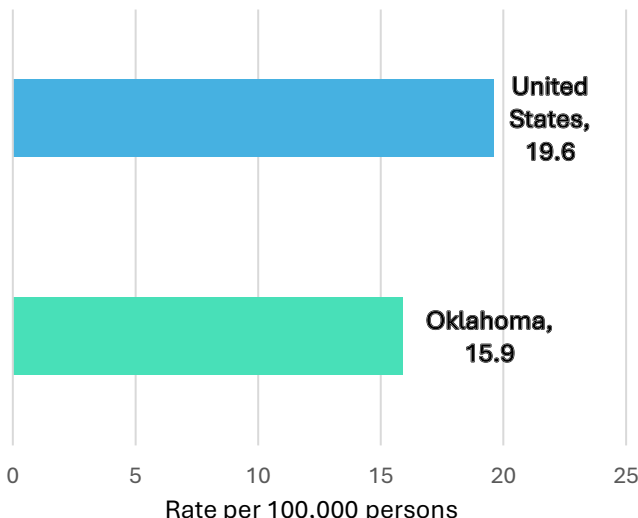
Local Program Funding

The below programs are funded through local communities in **Oklahoma**.

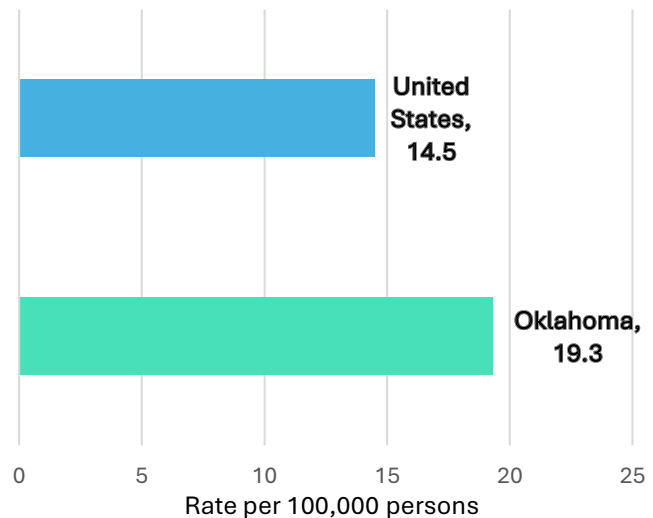
- DFC Coalitions: \$1,082,000
- Injury/Violence Research Funding: \$400,000

In Oklahoma, the overdose death rate was **19% lower** than the U.S. average

In Oklahoma, the suicide death rate was **34% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



OREGON



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$3,854,849

Funds the Oregon Health Authority to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$750,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 6 Oregon-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$855,000

Supports the Oregon Health Authority in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$714,251

Supports the Oregon Health Authority and an Oregon-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$400,000

Equips the Oregon Health Authority, Public Health Division in identifying and responding to existing and emerging injury threats.

National Violent Death Reporting System (NVDRS): \$280,256

Enables Oregon to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.

Preventing Violence Affecting Young Lives (PREVAYL): \$250,000

Awards the Multnomah County Health Department to address youth violence, teen dating violence, other adverse childhood experiences, and conditions that put communities at greater risk for violence.

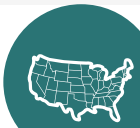
Firearm Injury Surveillance Through Emergency Rooms (FASTER): Advancing Violence Epidemiology in Real-Time (AVERT): \$150,000

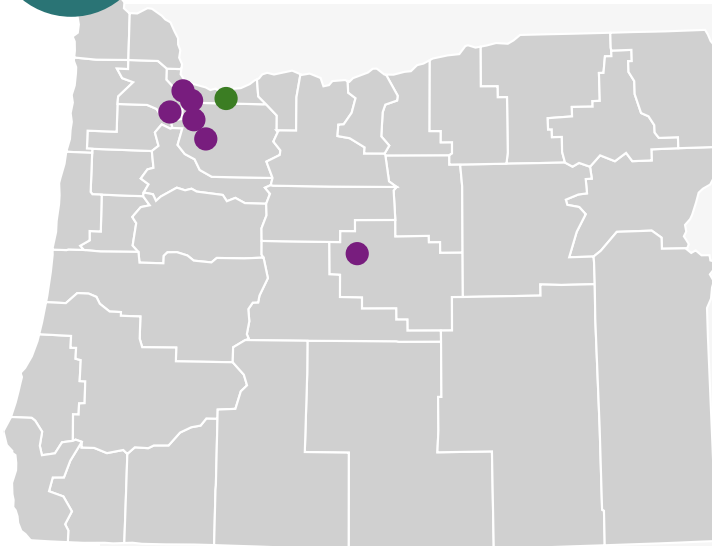
Equips the Oregon Health Authority to collect, analyze, and disseminate data on violence-related emergency department visits to respond to and prevent violence.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Oregon received more than **\$7.3 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**



Statewide Program Funding

The below programs are funded for statewide injury prevention efforts in **Oregon**.

- OD2A in States: \$3,854,849
- ORS: \$87,416 (average)
- CSP: \$855,000
- RPE: \$579,251
- Core SIPP: \$400,000
- NVDRS: \$280,256
- FASTER: AVERT: \$150,000

Local Program Funding

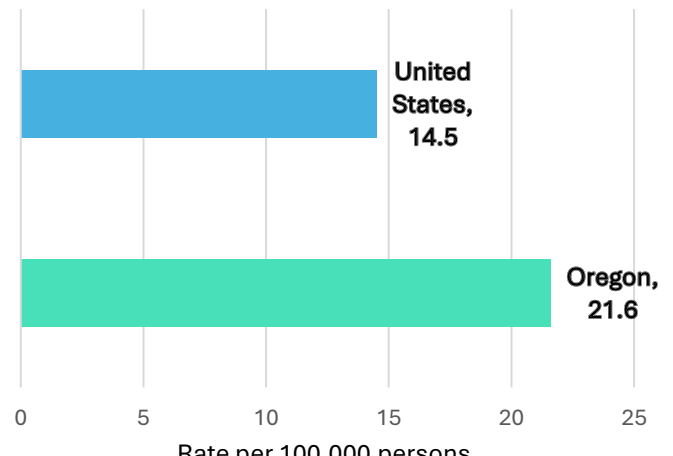
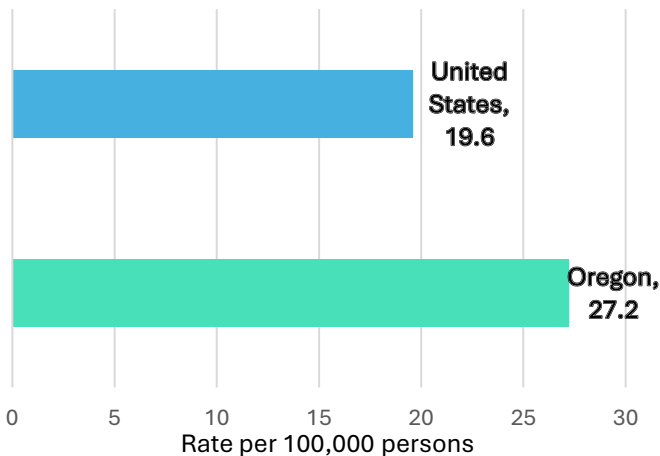
The below programs are funded through local communities in **Oregon**.

- DFC Coalitions: \$750,000
- PREVAYL: \$250,000

RPE awards an additional \$135,000 to the state sexual assault coalition in **Oregon**.

In Oregon, the overdose death rate was **39% higher** than the U.S. average

In Oregon, the suicide death rate was **49% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data



PENNSYLVANIA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$7,629,999

Awards Allegheny County Health Department, Montgomery County Office of Public Health, and Philadelphia Department of Public Health to prevent overdoses through strong multisectoral partnerships.

Overdose Data to Action in States (OD2A in States): \$5,310,740

Funds the Pennsylvania State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$926,002

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 8 Pennsylvania-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$700,000

Supports the University of Pittsburgh in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$1,591,073

Supports the Pennsylvania State Health Department and a Pennsylvania-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Injury Control Research Centers (ICRC): \$850,000

Provides funding to the University of Pennsylvania to conduct research, outreach, and training to develop and evaluate new injury control interventions.

Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$500,000

Invests in a Pennsylvania-based domestic violence coalition to decrease risk factors and increase protective factors related to intimate partner violence.

National Violent Death Reporting System (NVDRS): \$477,710

Enables Pennsylvania to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.


Other Research Funding: \$2,512,248

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

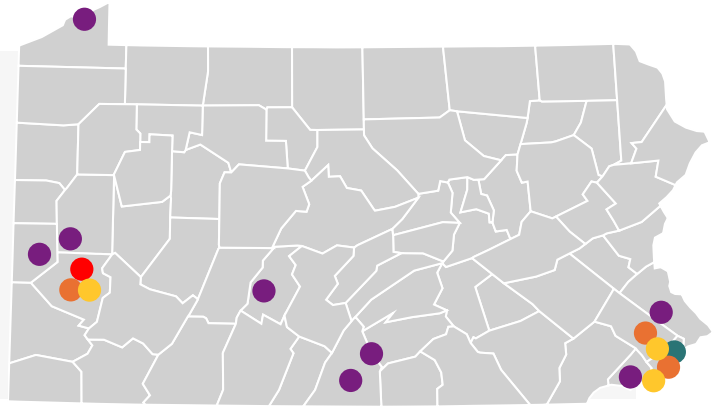
Pennsylvania received more than **\$20.5 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**

Statewide Program Funding

The below programs are funded through the state health department in **Pennsylvania**.

- OD2A in States: \$5,310,740
- ORS: \$87,416 (average)
- RPE: \$1,456,073
- DELTA: \$500,000
- NVDRS: \$477,710



Local Program Funding

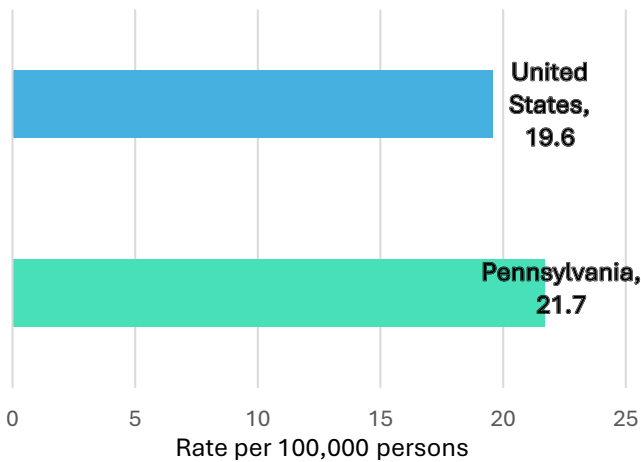
The below programs are funded through local communities in **Pennsylvania**.

- OD2A: LOCAL: \$7,629,999
- DFC Coalitions: \$926,002
- Injury/Violence Research Funding: \$2,512,248
- ICRC: \$850,000
- CSP: \$700,000

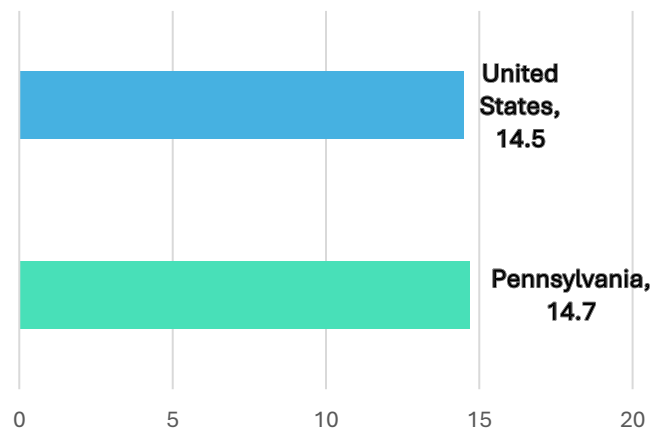
RPE awards an additional \$135,000 to the state sexual assault coalition in **Pennsylvania**.

In Pennsylvania, the overdose death rate was **11% higher** than the U.S. average

In Pennsylvania, the suicide death rate was **similar** to the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

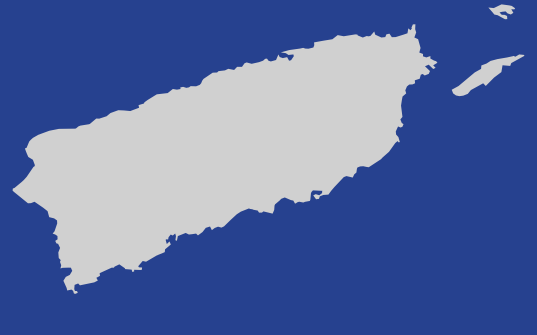
Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data



PUERTO RICO



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant territory investments; not all funding is included.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$1,005,610

Awards the Puerto Rico Department of Health to prevent overdoses through strong multisectoral partnerships.

Drug-Free Communities (DFC): \$500,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 4 Puerto Rico-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$931,049

Supports the Puerto Rico Department of Health in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$617,872

Supports the Puerto Rico Department of Health and a Puerto Rico-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$282,935

Enables Puerto Rico to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.

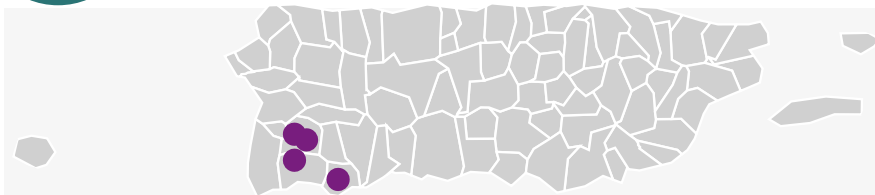


The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Puerto Rico received more than **\$3.4 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION



Territory-wide Program Funding

The below programs are funded through the health department in **Puerto Rico**.

- OD2A: LOCAL: \$1,005,610
- ORS: \$87,416 (average)
- CSP: \$931,049
- RPE: \$482,872
- NVDRS: \$282,935

Local Program Funding

The below program is funded through local communities in **Puerto Rico**.

- DFC Coalitions: \$500,000

RPE awards an additional \$135,000 to the state sexual assault coalition in **Puerto Rico**.

Data from CDC's



Scan to learn more:
Injury, Overdose, and Violence Data



RHODE ISLAND



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$3,453,142

Funds the Rhode Island State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$875,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 7 Rhode Island-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$914,363

Supports the Rhode Island State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$500,000

Invests in a Rhode Island-based domestic violence coalition to decrease risk factors and increase protective factors related to intimate partner violence.

Rape Prevention and Education (RPE): \$396,169

Supports the Rhode Island State Health Department and a Rhode Island-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$180,387

Enables Rhode Island to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.

Firearm Injury Surveillance Through Emergency Rooms (FASTER): Advancing Violence Epidemiology in Real-Time (AVERT): \$150,000

Equips the Rhode Island State Health Department to collect, analyze, and disseminate data on violence-related emergency department visits to respond to and prevent violence.

Other Research Funding: \$849,842

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Rhode Island received more than **\$7.6 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**

Statewide Program Funding

The below programs are funded through the state health department in **Rhode Island**.

- OD2A in States: \$3,453,142
- ORS: \$87,416 (average)
- CSP: \$914,363
- DELTA: \$500,000
- RPE: \$261,169
- Core SIPP: \$250,000
- NVDRS: \$180,387
- FASTER:AVERT: \$150,000

Local Program Funding

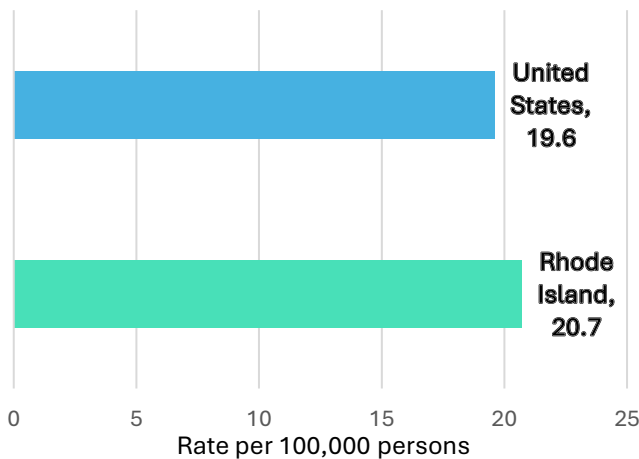
The below programs are funded through local communities in **Rhode Island**.

- DFC Coalitions: \$875,000
- Injury/Violence Research Funding: \$849,842

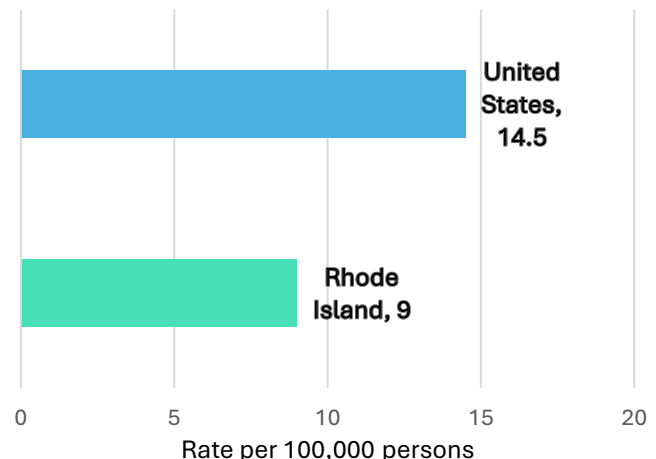
RPE awards an additional \$135,000 to the state sexual assault coalition in **Rhode Island**.

In Rhode Island, the overdose death rate was **similar** to the U.S. average

In Rhode Island, the suicide death rate was **38% lower** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data



SOUTH CAROLINA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,587,985

Funds the South Carolina State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$741,020

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 6 South Carolina-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$803,517

Supports the South Carolina State Health Department and a South Carolina-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$319,523

Enables South Carolina to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the South Carolina State Health Department in identifying and responding to existing and emerging injury threats.





The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

South Carolina received more than **\$6.7 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION

Statewide Program Funding

The below programs are funded through the state health department in **South Carolina**.

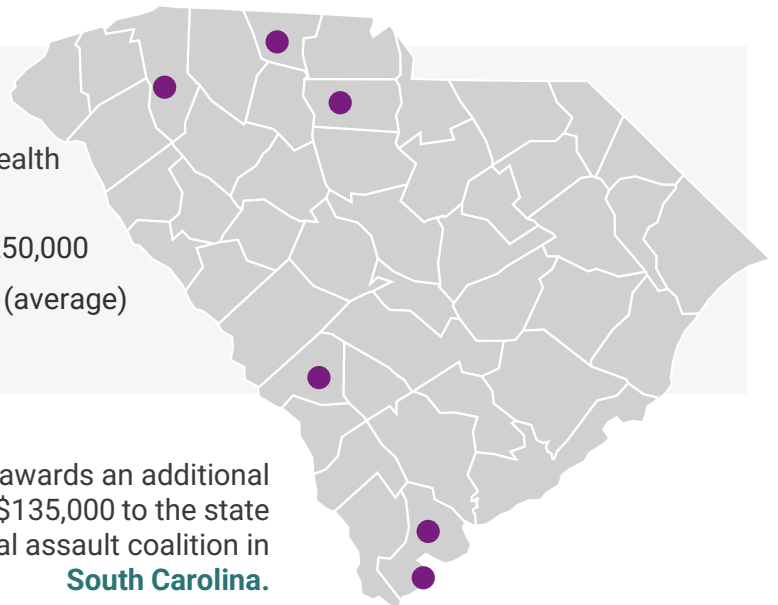
- OD2A in States: \$4,587,985
- RPE: \$668,517
- NVDRS: \$319,523
- Core SIPP: \$250,000
- ORS: \$87,416 (average)

Local Program Funding

The below program is funded through local communities in **South Carolina**.

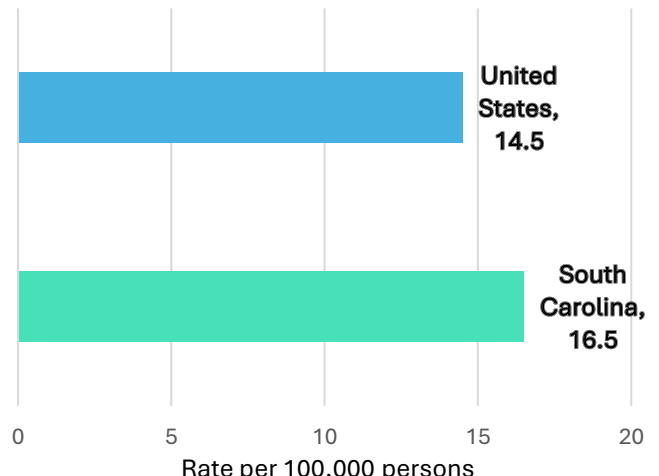
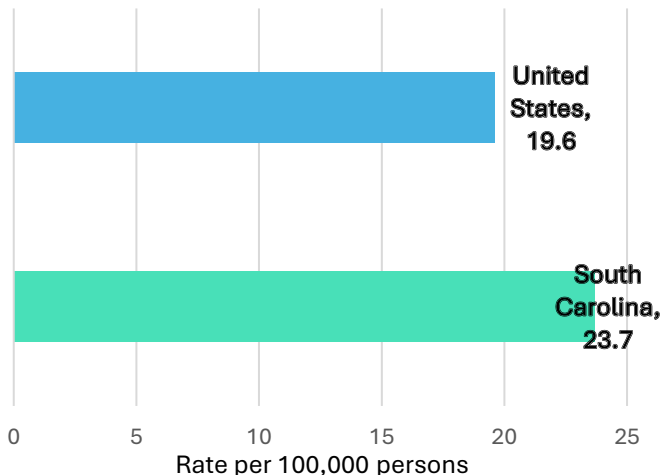
- DFC Coalitions: \$741,020

RPE awards an additional \$135,000 to the state sexual assault coalition in **South Carolina**.



*In South Carolina, the overdose death rate was **21% higher** than the U.S. average*

*In South Carolina, the suicide death rate was **14% higher** than the U.S. average*



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data



SOUTH DAKOTA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$1,865,943

Funds South Dakota State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$375,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 3 South Dakota-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$374,823

Supports the South Dakota State Health Department and a South Dakota-based sexual violence coalition to implement and guide state sexual violence prevention efforts

National Violent Death Reporting System (NVDRS): \$192,173

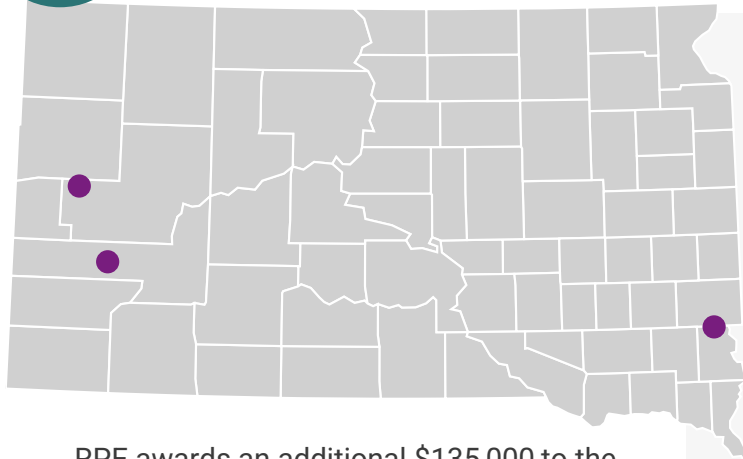
Enables South Dakota to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

South Dakota received more than **\$2.8 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**



RPE awards an additional \$135,000 to the state sexual assault coalition in **South Dakota**.

Statewide Program Funding

The below programs are funded through the state health department in **South Dakota**.

- OD2A in States: \$1,865,943
- ORS: \$87,416 (average)
- RPE: \$239,823
- NVDRS: \$192,173

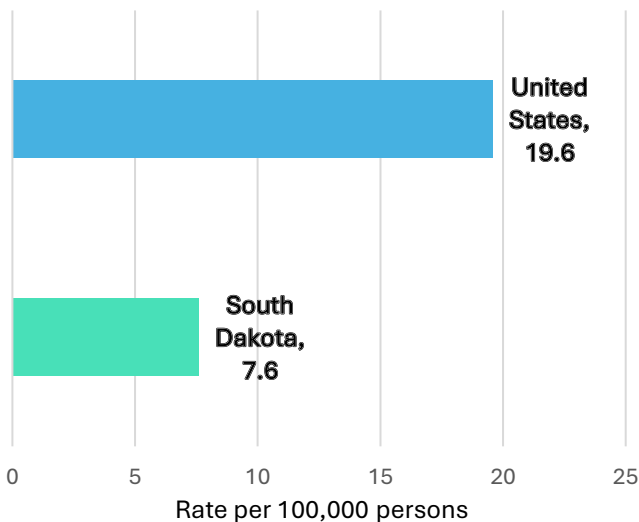
Local Program Funding

The below program is funded through local communities in **South Dakota**.

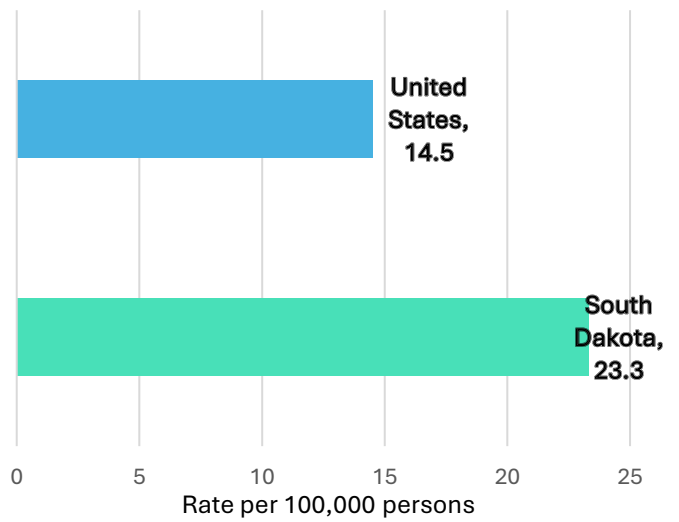
- DFC Coalitions: \$375,000

In South Dakota, the overdose death rate was **62% lower** than the U.S. average

In South Dakota, the suicide death rate was **61% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data



TENNESSEE



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$5,343,696

Funds the Tennessee State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$1,625,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 13 Tennessee-based community coalitions to prevent youth substance use.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$1,320,505

Awards Knox County Health Department to prevent overdoses through strong multisectoral partnerships.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$883,000

Supports the Tennessee State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$980,096

Supports the Tennessee State Health Department and a Tennessee-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA): \$500,000

Invests in a Tennessee-based domestic violence coalition to decrease risk factors and increase protective factors related to intimate partner violence.

Core State Injury Prevention Program (Core SIPP): \$400,000

Equips the Tennessee State Health Department in identifying and responding to existing and emerging injury threats.

National Violent Death Reporting System (NVDRS): \$363,681

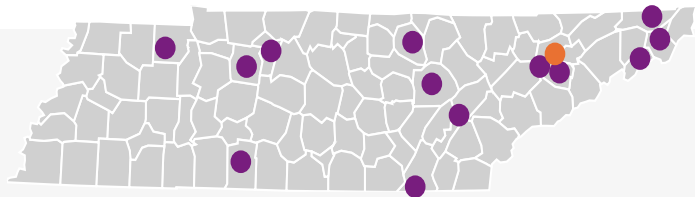
Enables Tennessee to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Tennessee received more than **\$11.5 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**



Statewide Program Funding

The below programs are funded through the state health department in **Tennessee**.

- OD2A in States: \$5,343,696
- ORS: \$87,416 (average)
- CSP: \$883,000
- RPE: \$850,096
- DELTA: \$500,000
- Core SIPP: \$400,000
- NVDRS: \$363,681

Local Program Funding

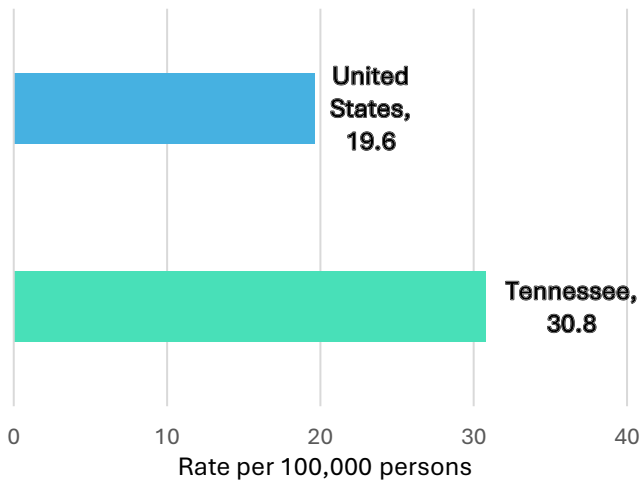
The below programs are funded through local communities in **Tennessee**.

- DFC Coalitions: \$1,625,000
- OD2A: LOCAL: \$1,320,505

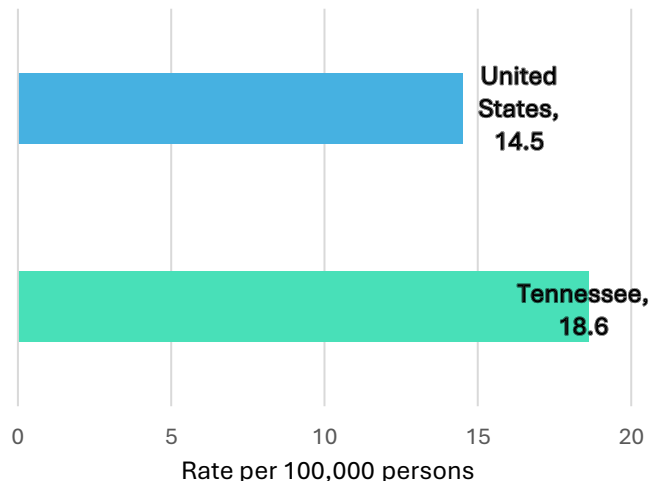
RPE awards an additional \$130,000 to the state sexual assault coalition in **Tennessee**

In Tennessee, the overdose death rate was **58% higher** than the U.S. average

In Tennessee, the suicide death rate was **29% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



TEXAS



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$4,456,063

Awards Dallas County Health and Human Services and Harris County Public Health to prevent overdoses through strong multisectoral partnerships.

Overdose Data to Action in States (OD2A in States): \$3,847,634

Funds the Texas State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$1,500,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 12 Texas-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$349,664 (average)

Empowers 4 public health experts as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$949,418

Supports the Bexar County Hospital District in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$3,237,555

Supports the Texas State Health Department and a Texas-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Injury Control Research Centers (ICRC): \$849,999

Provides funding to University of Texas Medical Branch Galveston to conduct research, outreach, and training to develop and evaluate new injury control interventions.

National Violent Death Reporting System (NVDRS): \$780,508

Enables Texas to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.

Other Research Funding: \$1,401,921

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Texas received more than **\$17.3 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION

Statewide Program Funding

The below programs are funded through the state health department in **Texas**.

- OD2A in States: \$3,847,634
- RPE: \$3,102,555
- ORS: \$349,664 (average)
- NVDRS: \$780,508

Local Program Funding

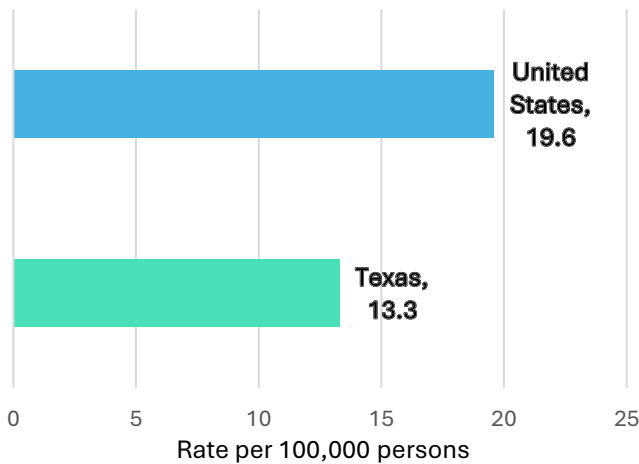
The below programs are funded through local communities in **Texas**.

- OD2A: LOCAL: \$4,456,063
- CSP: \$949,418
- DFC Coalitions: \$1,500,000
- ICRC: \$849,999
- Injury/Violence Research Funding: \$1,401,921

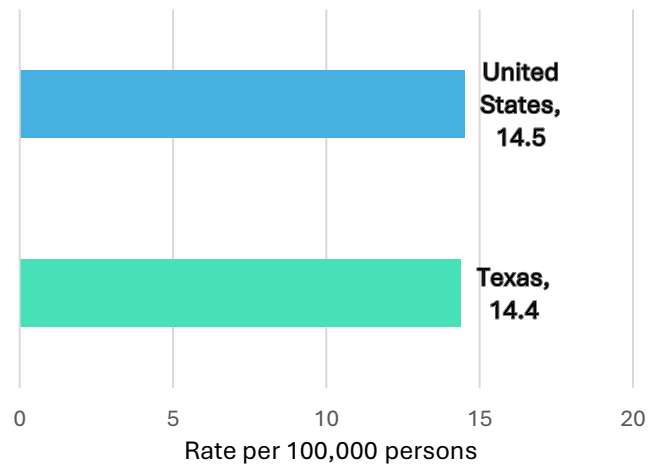
RPE awards an additional \$135,000 to the state sexual assault coalition in **Texas**.

In Texas, the overdose death rate was **33% lower** than the U.S. average

In Texas, the suicide death rate was **similar** to the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)





The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$2,710,977

Funds the Utah State Health Department to expand drug overdose surveillance and prevention efforts.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$890,000

Awards Salt Lake County Public Health to prevent overdoses through strong multisectoral partnerships.

Drug-Free Communities (DFC): \$1,241,378

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 10 Utah-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$481,428

Supports the Utah State Health Department to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$265,822

Enables Utah to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.

Firearm Injury Surveillance Through Emergency Rooms (FASTER): Advancing Violence Epidemiology in Real-Time (AVERT): \$150,000

Equips the Utah State Health Department to collect, analyze, and disseminate data on violence-related emergency department visits to respond to and prevent violence.


Other Research Funding: \$849,907

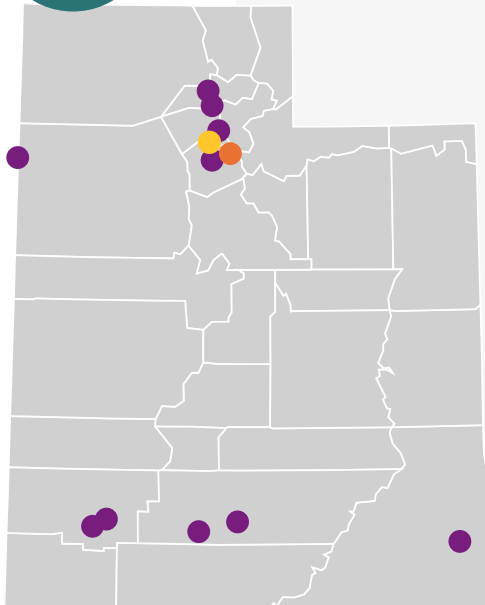
Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Utah received more than **\$6.6 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**



Statewide Program Funding

The below programs are funded for statewide injury prevention efforts in **Utah**.

- OD2A in States: \$2,710,977
- ORS: \$87,416 (average)
- RPE: \$481,428
- NVDRS: \$265,822
- FASTER: AVERT: \$150,000

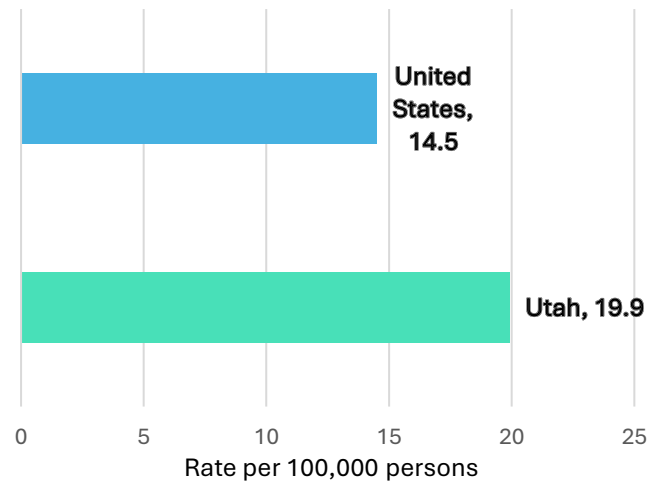
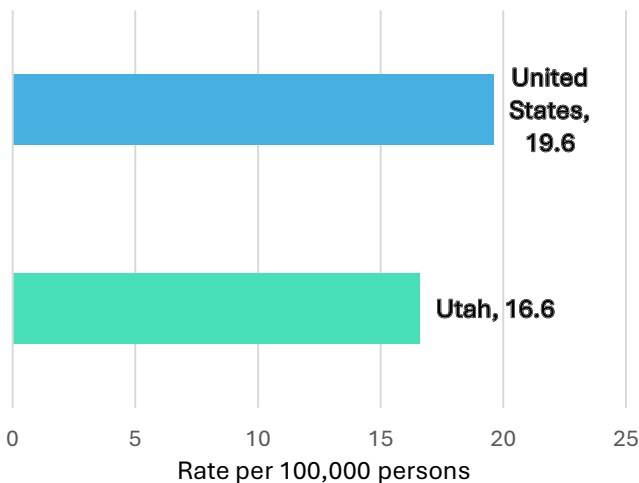
Local Program Funding

The below programs are funded through local communities in **Utah**.

- DFC Coalitions: \$1,241,378
- OD2A: LOCAL: \$890,000
- Injury/Violence Research Funding: \$849,907

In Utah, the overdose death rate was **16%** *lower* than the U.S. average

In Utah, the suicide death rate was **38%** *higher* than the U.S. average

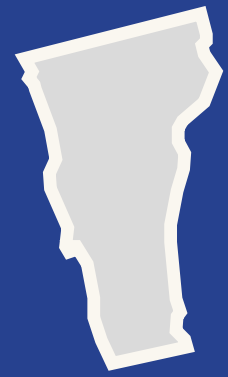


Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)





VERMONT

FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action (OD2A) in States: \$3,272,032

Funds the Vermont State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$500,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 4 Vermont-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$893,000

Supports the Vermont State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$350,146

Supports the Vermont State Health Department and a Vermont-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$178,505

Enables Vermont to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.



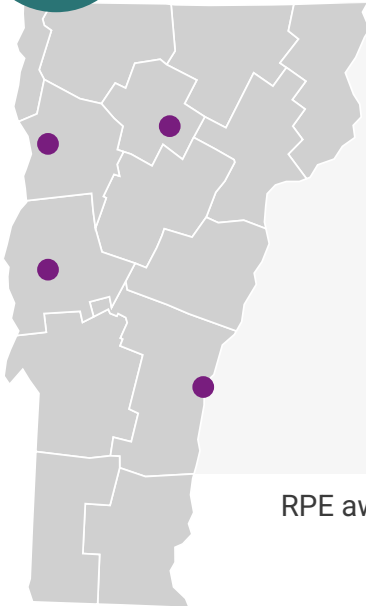


The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Vermont received more than **\$5.2 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION



Statewide Program Funding

The below programs are funded for statewide injury prevention efforts in **Vermont**.

- OD2A in States: \$3,272,032
- ORS: \$87,416 (average)
- CSP: \$893,000
- NVDRS: \$178,505
- RPE: \$215,146

Local Program Funding

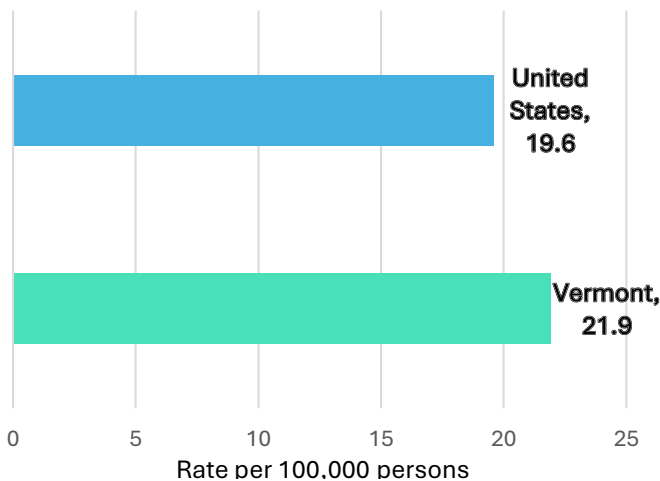
The below program is funded through local communities in **Vermont**.

- DFC Coalitions: \$500,000

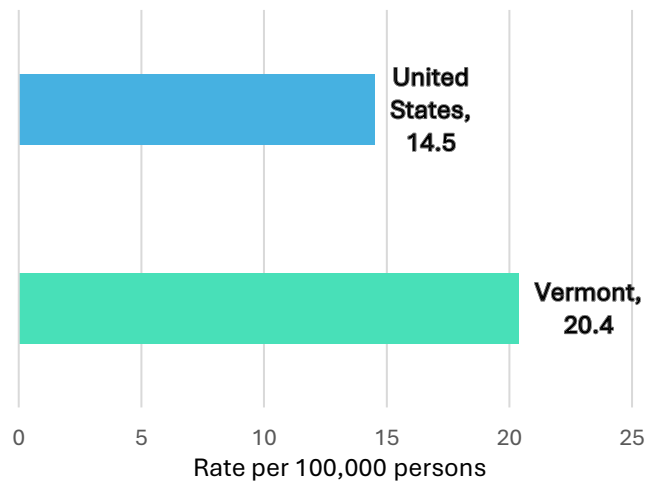
RPE awards an additional \$135,000 to the state sexual assault coalition in **Vermont**.

In Vermont, the overdose death rate was **12% higher** than the U.S. average

In Vermont, the suicide death rate was **41% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data



VIRGINIA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,066,658

Funds the Virginia State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$500,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 4 Virginia-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Youth Violence Prevention Centers (YVPC): \$1,199,994

Supports Virginia Commonwealth University in partnering with its local community to identify, develop, and test innovative youth violence prevention strategies.

Rape Prevention and Education (RPE): \$1,159,000

Supports the Virginia State Health Department and a Virginia-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Essentials for Childhood: Preventing ACEs through Data to Action (EfC: PACE D2A): \$485,000

Provides funding to the Virginia State Health Department to prevent adverse childhood experiences (ACEs) and promote positive childhood experiences to help reduce leading causes of death, such as overdose and suicide, and mental health challenges.

National Violent Death Reporting System (NVDRS): \$354,585

Enables Virginia to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$245,000

Equips the Virginia State Health Department in identifying and responding to existing and emerging injury threats.


Other Research Funding: \$1,172,520

Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Virginia received more than **\$9.2 million** in injury prevention funding.

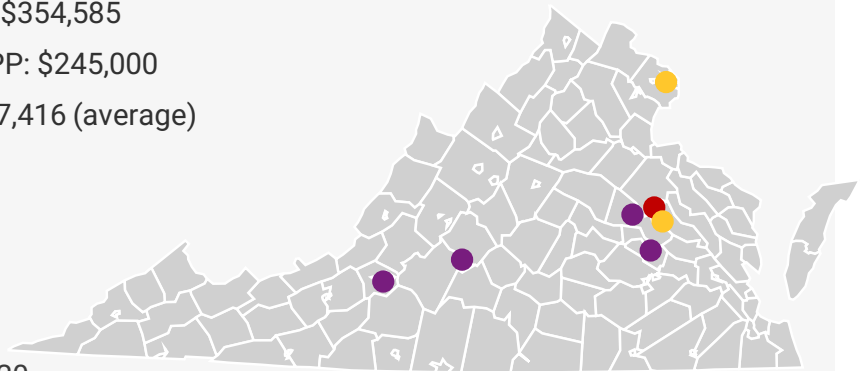
 **INJURY PREVENTION FUNDING BY LOCATION**

Statewide Program Funding

The below programs are funded through the state health department in **Virginia**.

- OD2A in States: \$4,066,658
- RPE: \$1,024,000
- EfC: PACE D2A: \$485,000
- NVDRS: \$354,585
- Core SIPP: \$245,000
- ORS: \$87,416 (average)

RPE awards an additional \$135,000 to the state sexual assault coalition in **Virginia**.



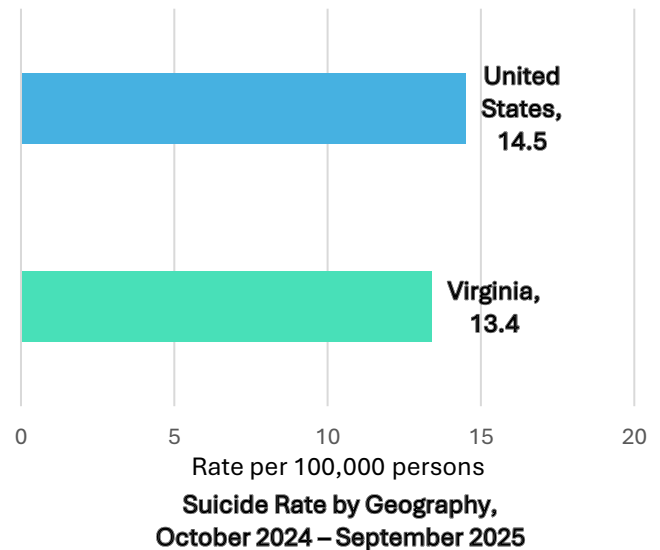
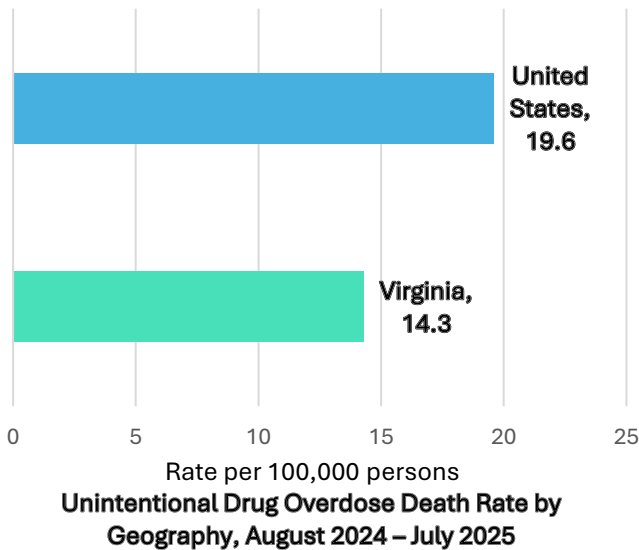
Local Program Funding

The below programs are funded through local communities in **Virginia**.

- Injury/Violence Research Funding: \$1,172,520
- YVPC: \$1,199,994
- DFC Coalitions: \$500,000

In Virginia, the overdose death rate was **28% lower** than the U.S. average

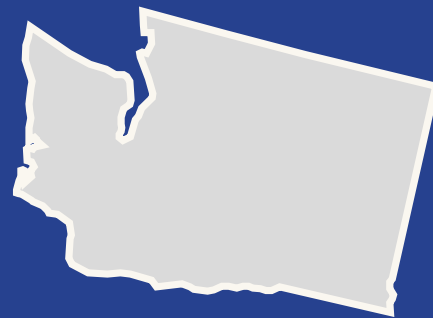
In Virginia, the suicide death rate was **similar** to the U.S. average



Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



WASHINGTON



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,193,955

Funds the Washington State Health Department to expand drug overdose surveillance and prevention efforts.

Overdose Data to Action: LOCAL (OD2A: LOCAL): \$3,964,476

Awards Snohomish County Health Department and Seattle-King County Public Health Department to prevent overdoses through strong multisectoral partnerships.

Drug-Free Communities (DFC): \$2,000,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 16 Washington-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$930,576

Supports the Washington State Health Department to implement and guide state sexual violence prevention efforts.

Injury Control Research Centers (ICRC): \$850,000

Provides funding to the University of Washington to conduct research, outreach, and training to develop and evaluate new injury control interventions.

National Violent Death Reporting System (NVDRS): \$331,969

Enables Washington to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.

Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the Washington State Health Department in identifying and responding to existing and emerging injury threats.

Preventing Violence Affecting Young Lives (PREVAYL): \$250,000

Awards Spokane County Domestic Violence Coalition to address youth violence, teen dating violence, other adverse childhood experiences, and conditions that put communities at greater risk for violence.

Firearm Injury Surveillance Through Emergency Rooms (FASTER): Advancing Violence Epidemiology in Real-Time (AVERT): \$149,211

Equips the Washington State Health Department to collect, analyze, and disseminate data on violence-related emergency department visits to respond to and prevent violence.

Other Research Funding: \$1,724,553

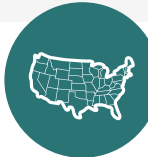
Champions non-profits, research institutes, and institutions of higher education to conduct innovative and rigorous research to inform prevention programs and policies.



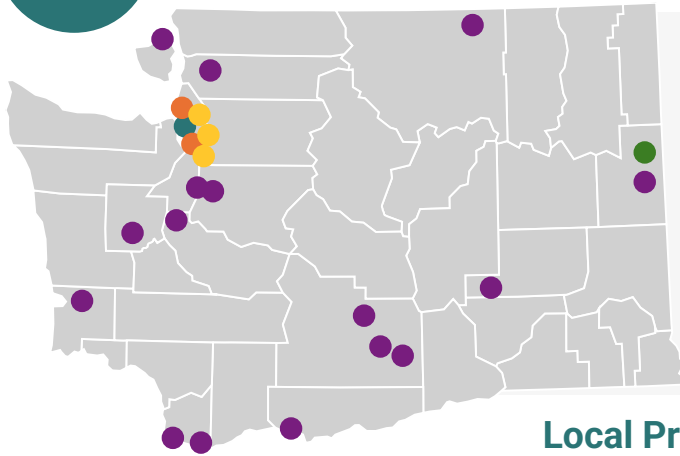


The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Washington received more than **\$14.7 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION



Statewide Program Funding

The below programs are funded through the state health department in **Washington**.

- OD2A in States: \$4,193,955
- RPE: \$930,576
- ORS: \$87,416 (average)
- NVDRS: \$331,969
- Core SIPP: \$250,000
- FASTER: AVERT: \$149,211

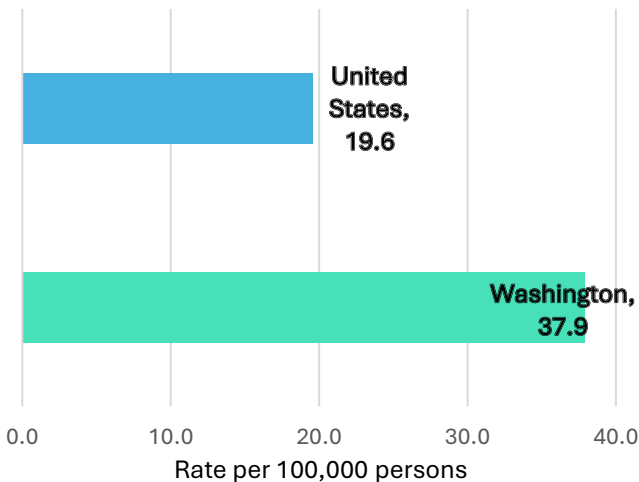
Local Program Funding

The below programs are funded through local communities in **Washington**.

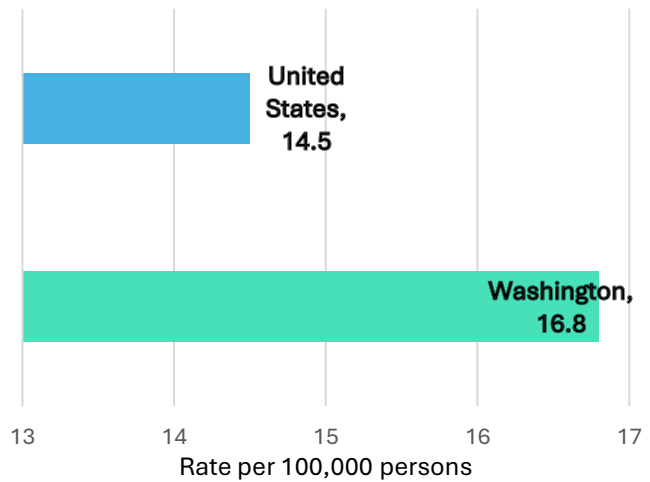
- OD2A: LOCAL: \$3,964,476
- Injury/Violence Research Funding: \$1,724,553
- DFC Coalitions: \$2,000,000
- ICRC: \$850,000
- PREVAYL: \$250,000

In Washington, the overdose death rate was **94% higher** than the U.S. average

In Washington, the suicide death rate was **16% higher** than the U.S. average



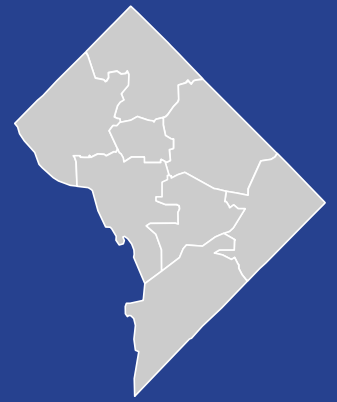
Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)





WASHINGTON, D.C.

FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action (OD2A) in States: \$3,945,761

Funds the D.C. Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$375,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 3 D.C. based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$354,854

Supports the D.C. Health Department and a D.C.-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$184,398

Enables D.C. to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.

Firearm Injury Surveillance Through Emergency Rooms (FASTER): Advancing Violence Epidemiology in Real-Time (AVERT): \$149,801

Equips the D.C. Health Department to collect, analyze, and disseminate data on violence-related emergency department visits to respond to and prevent violence.





The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Washington, D.C. received more than **\$5.0 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION

District-wide Program Funding

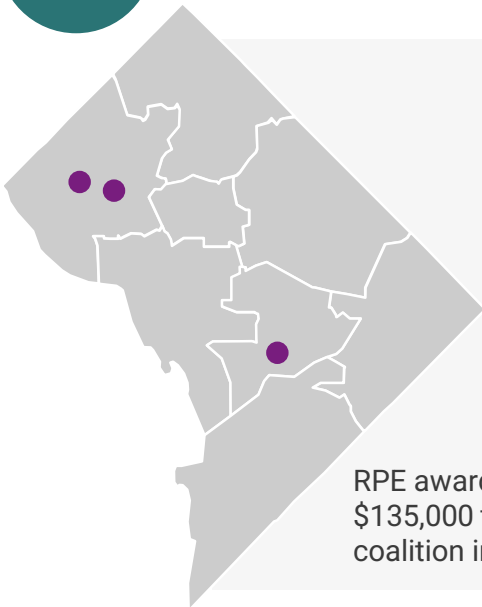
The below programs are funded through the health department in **Washington, D.C.**

- OD2A in States: \$3,945,761
- RPE: \$219,854
- ORS: \$87,416 (average)
- NVDRS: \$184,398
- FASTER: AVERT: \$149,801

Local Program Funding

The below program is funded through local communities in **Washington, D.C.**

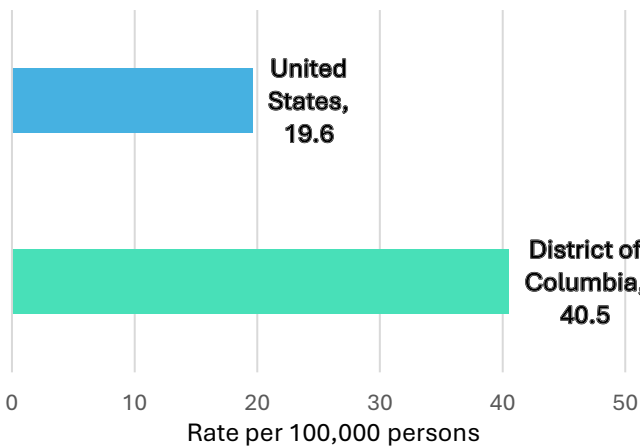
- DFC Coalitions: \$375,000



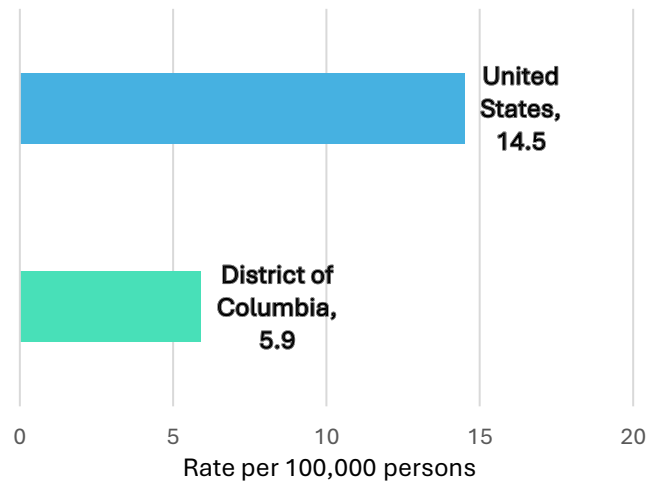
RPE awards an additional \$135,000 to the sexual assault coalition in **Washington, D.C.**

In District of Columbia, the overdose death rate was **107% higher** than the U.S. average

In District of Columbia, the suicide death rate was **60% lower** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



WEST VIRGINIA



FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$5,339,590

Funds the West Virginia State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$1,250,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 10 West Virginia-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$466,711

Supports the West Virginia State Health Department and a West Virginia-based sexual violence coalition to implement and guide state sexual violence prevention efforts.


National Violent Death Reporting System (NVDRS): \$238,720

Enables West Virginia to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

West Virginia received more than **\$7.3 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**

Statewide Program Funding

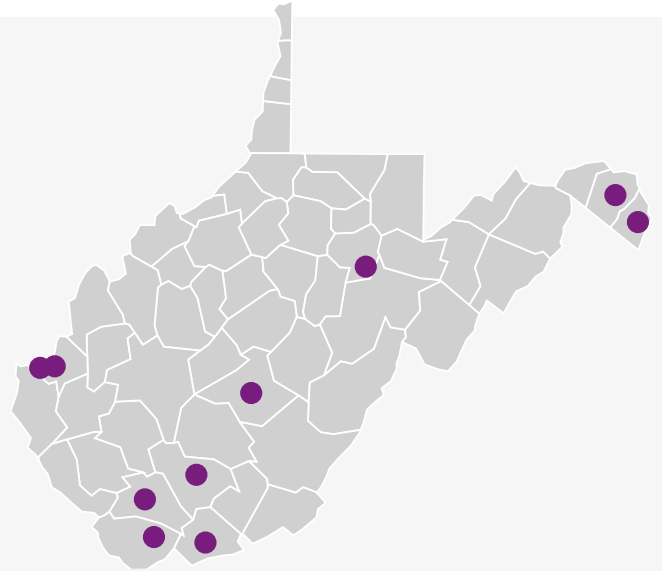
The below programs are funded through the state health department in **West Virginia**.

- OD2A in States: \$5,339,590
- ORS: \$87,416 (average)
- RPE: \$331,711
- NVDRS: \$238,720

Local Program Funding

The below programs are funded through local communities in **West Virginia**.

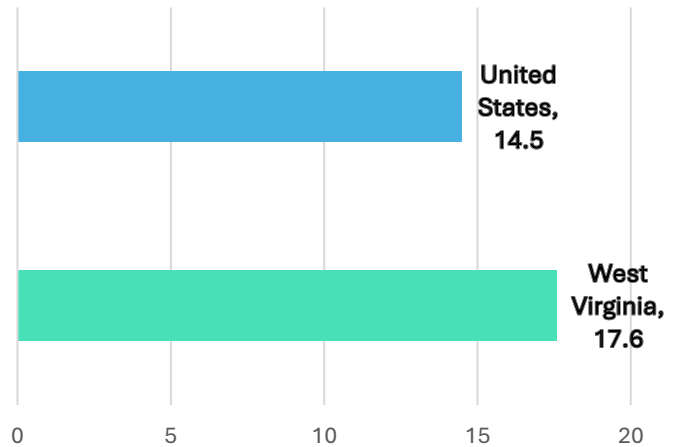
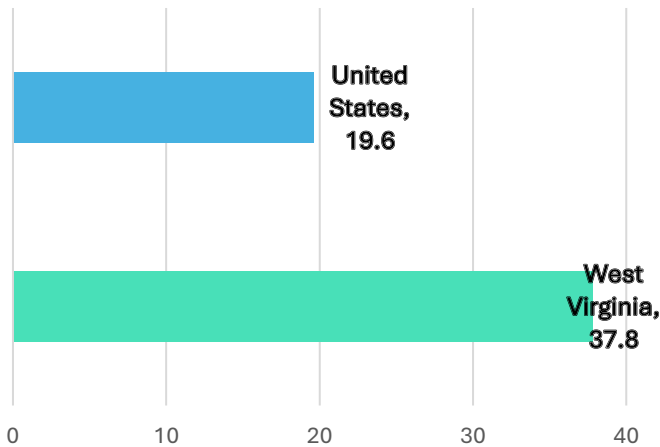
- DFC Coalitions: \$1,250,000



RPE awards an additional \$135,000 to the state sexual assault coalition in **West Virginia**.

In West Virginia, the overdose death rate was **93% higher** than the U.S. average

In West Virginia, the suicide death rate was **22% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025

Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data





WISCONSIN

FY 2025 Funding Highlights

The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$4,483,777

Funds the Wisconsin State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$2,606,900

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 21 Wisconsin-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Comprehensive Suicide Prevention (CSP): \$868,730

Supports the Wisconsin State Health Department in implementing and evaluating a comprehensive public health approach to suicide prevention.

Rape Prevention and Education (RPE): \$882,057

Supports the Wisconsin State Health Department and a Wisconsin-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

Injury Control Research Center (ICRC): \$791,053

Awards the Medical College of Wisconsin to conduct research, outreach, and training to develop and evaluate new injury control interventions.

National Violent Death Reporting System (NVDRS): \$311,848

Enables Wisconsin to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.


Core State Injury Prevention Program (Core SIPP): \$250,000

Equips the Wisconsin State Health Department in identifying and responding to existing and emerging injury threats.



The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Wisconsin received more than **\$10.2 million** in injury prevention funding.

 **INJURY PREVENTION FUNDING BY LOCATION**

Statewide Program Funding

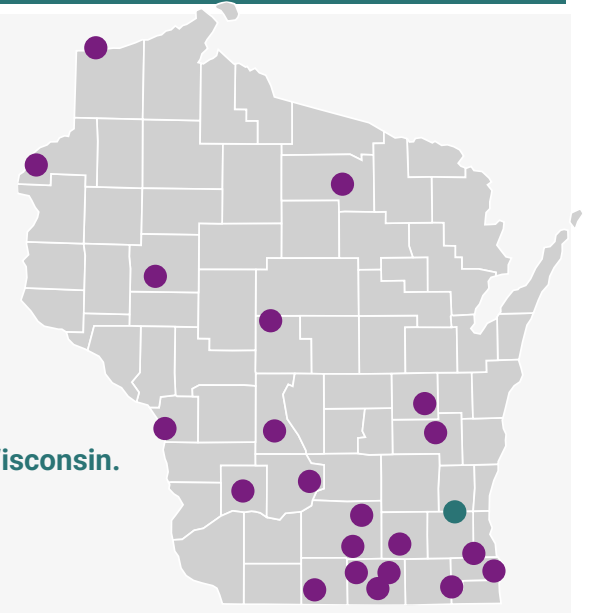
The below programs are through the state health department in **Wisconsin**.

- OD2A in States: \$4,483,777
- ORS: \$87,416 (average)
- CSP: \$868,730
- RPE: \$747,057
- NVDRS: \$311,848
- Core SIPP: \$250,000

Local Program Funding

The below programs are funded through local communities in **Wisconsin**.

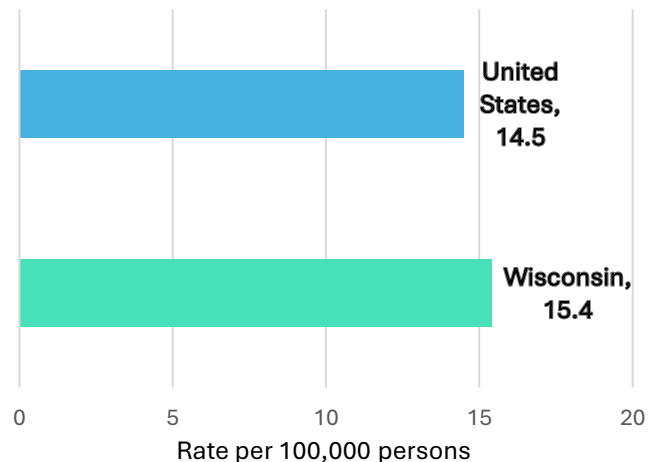
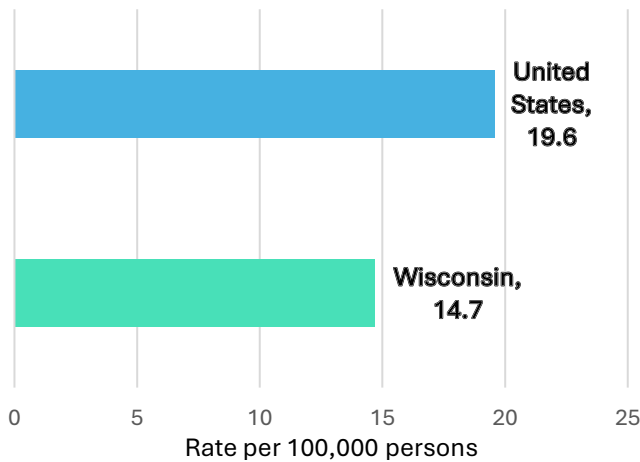
- DFC Coalitions: \$2,606,900
- ICRC: \$791,053



RPE awards an additional \$135,000 to the state sexual assault coalition in **Wisconsin**.

In Wisconsin, the overdose death rate was **25% lower** than the U.S. average

In Wisconsin, the suicide death rate was **similar** to the U.S. average



Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



WYOMING

FY 2025 Funding Highlights



The Injury Center is the **only federal agency** dedicated to preventing — rather than treating — non-occupational injuries, suicide, overdose, and violence, **empowering states and cities** to make the best decisions for their communities.



State Investments

The below programs highlight the Injury Center's most significant state investments; not all funding is included.

Overdose Data to Action in States (OD2A in States): \$1,952,533

Funds the Wyoming State Health Department to expand drug overdose surveillance and prevention efforts.

Drug-Free Communities (DFC): \$625,000

Manages the nation's leading effort administered by the White House Office of National Drug Control Policy to mobilize 5 Wyoming-based community coalitions to prevent youth substance use.

Overdose Response Strategy (ORS): \$87,416 (average)

Empowers a public health expert as part of the ORS's unique public health-public safety collaboration working together to reduce overdose deaths.

Rape Prevention and Education (RPE): \$343,437

Supports the Wyoming State Health Department and a Wyoming-based sexual violence coalition to implement and guide state sexual violence prevention efforts.

National Violent Death Reporting System (NVDRS): \$181,687

Enables Wyoming to submit data into a state-based system tracking violent deaths and suicides, and use it to strengthen prevention efforts.

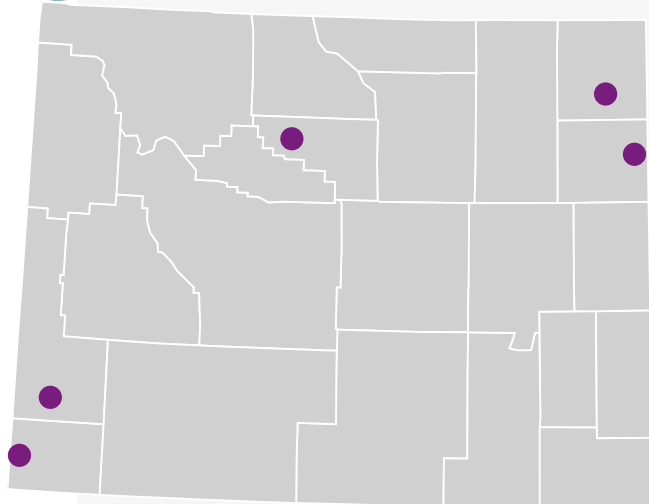


The Injury Center provided more than **\$536 million** in funding to states for injury prevention efforts in FY 2025.

Wyoming received more than **\$3.1 million** in injury prevention funding.



INJURY PREVENTION FUNDING BY LOCATION



RPE awards an additional \$135,000 to the state sexual assault coalition in **Wyoming**.

Statewide Program Funding

The below programs are funded through the state health department in **Wyoming**.

- OD2A in States: \$1,952,533
- RPE: \$208,437
- ORS: \$87,416 (average)
- NVDRS: \$181,687

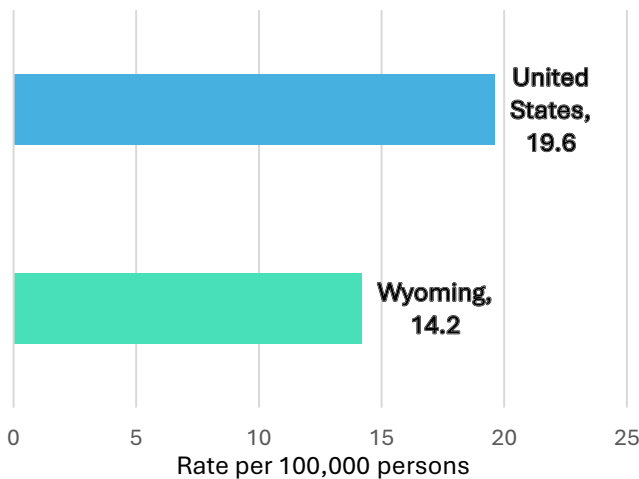
Local Program Funding

The below programs are funded through local communities in **Wyoming**.

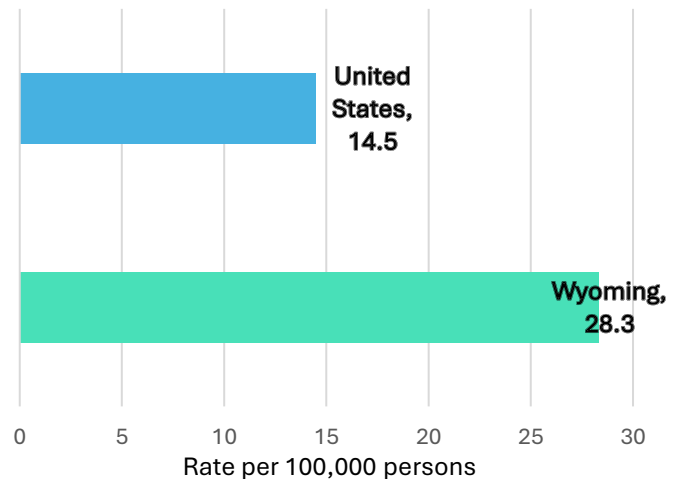
- DFC Coalitions: \$625,000

In Wyoming, the overdose death rate was **28% lower** than the U.S. average

In Wyoming, the suicide death rate was **96% higher** than the U.S. average



Unintentional Drug Overdose Death Rate by Geography, August 2024 – July 2025



Suicide Rate by Geography, October 2024 – September 2025

Data from CDC's [Mapping Injury, Overdose, and Violence Dashboard](#)



Scan to learn more:
Injury, Overdose, and Violence Data

