

Suicide Prevention: Key Data

High-Level Data Points

Veteran Suicide: Number

6,146

Veteran suicide deaths in 2020

Veteran Suicide: Average Per Day

16.8

average number of Veteran suicides per day in 2020

Veteran Suicide: Rate

31.7 per 100,000

unadjusted rate of suicide in 2020 among U.S. Veterans

- Each year from 2001 through 2020, age- and sex-adjusted suicide rates of Veterans exceeded those of non-Veteran U.S. adults.
 - The difference in rates was greatest in 2017, when Veteran adjusted rates were 66.2% greater than those of non-Veteran adults.
 - In 2020, this differential fell to 57.3%.

Suicide Deaths, Methods Involved, 2020 and Difference From 2001*

Suicide Decedents, Methods Involved												
	Non-Veteran U.S. Adults		Veterans		Non-Veteran Men		Veteran Men		Non-Veteran Women		Veteran Women	
	2020	Change*	2020	Change*	2020	Change*	2020	Change*	2020	Change*	2020	Change*
Firearms	50.3%	-2.3%	71.0%	+4.5%	55.3%	-2.7%	72.1%	+4.8%	33.3%	-2.1%	48.2%	+11.2%
Poisoning	12.8%	-5.6%	8.4%	-4.8%	8.0%	-4.3%	7.5%	-4.9%	29.3%	-8.7%	26.8%	-16.0%
Suffocation	28.4%	+7.6%	14.9%	+0.9%	28.6%	+6.2%	14.7%	+0.6%	27.7%	+12.0%	19.2%	+8.8%
Other	8.4%	+0.3%	5.8%	-0.6%	8.1%	+0.8%	5.8%	-0.5%	9.6%	-1.1%	5.8%	-3.9%

Suicide Prevention 2.0 Public Health Strategy

Suicide is a National Public Health Issue

- Suicide is a national public health issue, affecting both the Veteran and general population.
- Societal factors may also impact suicide risk, such as economic disparities, race, ethnicity, LGBTQ+, homelessness, social connection, isolation, health and well-being.
- Coronavirus Disease 2019 (COVID-19) pandemic has also placed additional strain on individuals and communities across the nation.
- One suicide is heartbreaking, notably affecting an estimated 135 surviving individuals for each death by suicide.
- Our nation grieves with each suicide, necessarily prompting the collective tireless pursuit of evidence-based clinical interventions and community prevention strategies, critical to the implementation of VA's National Strategy for Preventing Veteran Suicide.

Public Health Strategy

VA's public health strategy combines partnerships with communities to implement tailored, local prevention plans while also focusing on evidence-based clinical strategies for intervention. Our approach focuses on both what we can do now, in the short term, and over the long term, to implement VA's [National Strategy for Preventing Veteran Suicide](#).



KEY TENETS

1

Suicide is preventable.

2

Suicide prevention requires a public health approach, combining clinical and community-based approaches.

3

Everyone has a role to play in suicide prevention.

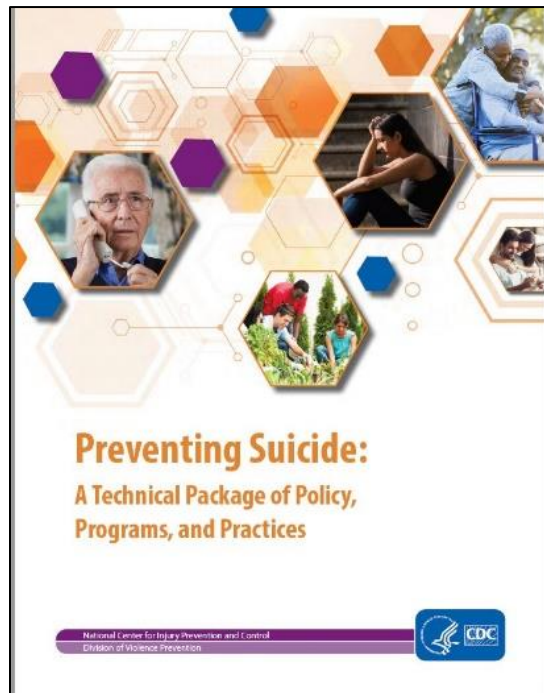
Suicide Prevention is Everyone's Business










Suicide Prevention 2.0

Community-Based Interventions for Suicide Prevention (CBI-SP)

CDC's Preventing Suicide Technical Package



-  Strengthen Economic Supports
-  Strengthen Access and Delivery of Suicide Care
-  Create Protective Environments
-  Promote Connectedness
-  Teach Coping and Problem-Solving Skills
-  Identify and Support People at Risk
-  Lessen Harms and Prevent Future Risk

Focused Priority Areas Across CBI-SP Unifying Model



Identify Service Members, Veterans, and their Families and Screen for Suicide Risk

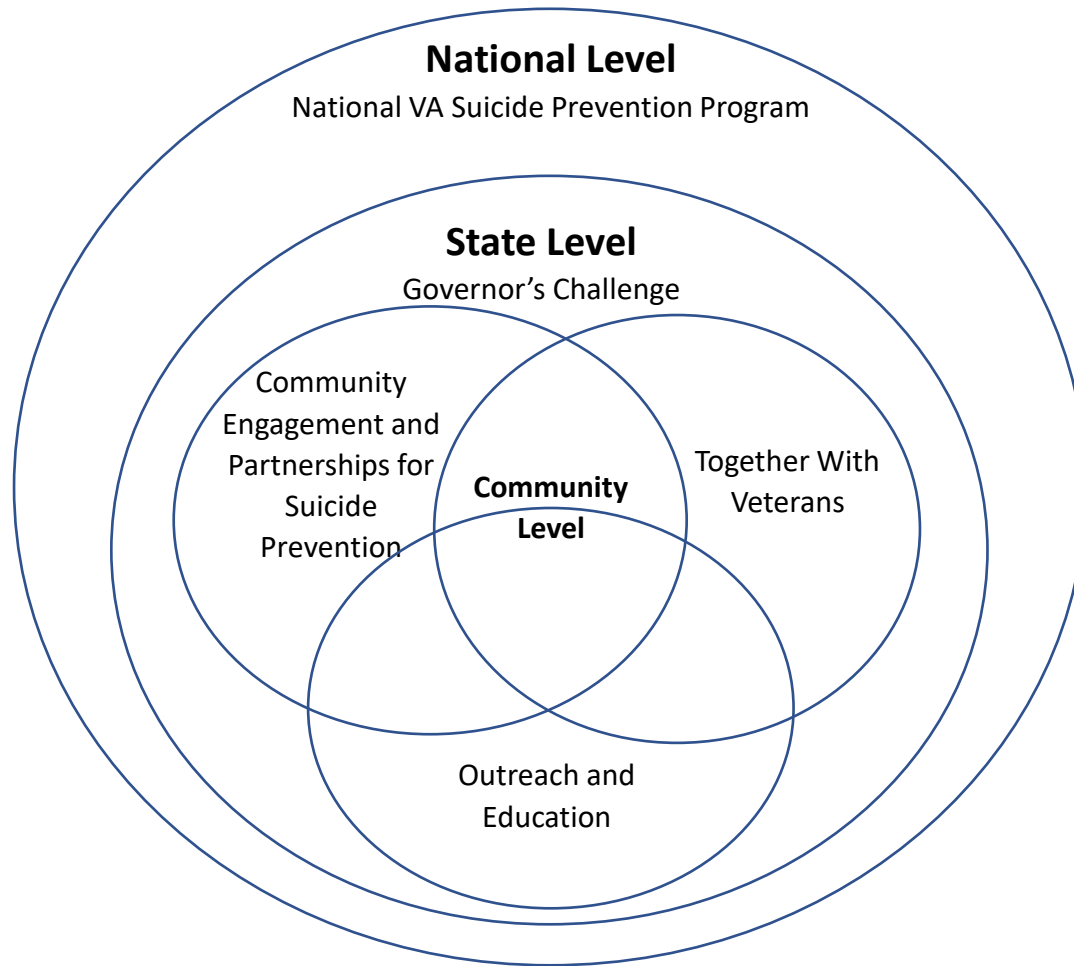


Promote Connectedness and Improve Care Transitions



Increase Lethal Means Safety and Safety Planning

Community-Based Interventions



Community-Based Interventions for Suicide Prevention (CBI-SP) serves as unifying model, from national to community levels, for all community-based efforts to end Veteran suicide.

- ***The Governor's Challenge*** is a collaboration with VA and SAMHSA where state policy makers partner with local leaders to implement a comprehensive suicide prevention plan.
- ***Together with Veterans*** focused on Veteran-to-Veteran coalition building and Veteran leadership development for suicide prevention
- ***Community Engagement and Partnerships for Suicide Prevention (VISN Expansion)*** is focused on facilitating and empowering communities to form diverse coalitions working to end Veteran suicide.

Outreach and Education provides SAVE, VHA facility partnerships, events, etc. through local Suicide Prevention Coordinators (SPCs) and does not change their critical role.

Community Engagement and Partnerships Program

Suicide Prevention Team Integration and Coordination

Community Engagement and Partnership Coordinators (CEPC)

- Establish New Community Coalitions / Support Existing Coalitions
- Facilitate Community, Regional, and State-Level Efforts to Implement Evidence-Informed Community-Based SP Practices
- Bolster the public health approach through:
Community engagement, coalition building, needs assessment and environmental scans, action planning, implementation of systems and community-level change initiatives, program evaluation, and sustainment of community efforts/coalitions



Suicide Prevention Coordinators (SPC)

- Enhanced Care Management of Veterans at High Risk of Suicide
- Facility Suicide Prevention Program Coordination and Implementation of Clinical Evidence-Based Practices for SP
- Veterans Crisis Line Facility Consultant
- Community Outreach and Education
- Facility Suicide Prevention Training

Both SPCs and CEPCs work together to fully implement the public health approach combining community and clinical interventions to reach all Veterans across the universal, selective and indicated populations.



U.S. Department of Veterans Affairs

Community Engagement and Partnership Coordinator (CEPC) Overview

**Enhance
& Expand**
Current VA
Suicide
Prevention
efforts

Active Member
of the local VA
Suicide
Prevention
team

**Non-Clinical
Role**
100%
Administrative

**Educate on
Suicide
Prevention**
Strategies, crisis
management
and program
evaluation

**Coalition
Building**
Actively work
with key
partners at the
community,
state & VISN
levels

Public Health
Planning,
Partnership &
Collaboration
for suicide
prevention

Community Engagement and Partnership Coordinator

The CEPC serves a subject matter expert of public health approaches, coalition development and facilitation, and other community-based models for Veteran suicide prevention.

Key roles of the CEPC:

- Develop, facilitate, and strengthen evidence-informed practices at community, state, and VISN levels
- Collaborate with VA programs and community partners
- Provide leadership for coalition management
- Disseminate program evaluation and surveillance data

Partnerships Lead to Better Outcomes

- Partnerships promoted by healthcare organizations with communities have been shown to improve patient outcomes (Clyne et al., 2012).
- Implementing research-informed communication efforts designed to prevent Veteran suicide by changing knowledge, attitudes, and behaviors is critical. The U.S. Air Force implemented a public health universal approach which significantly lowered suicide rates through comprehensive organizational changes including communication efforts (Knox et al., 2010).
 - This model also included gatekeeper training which has been shown to reduce suicidal ideation and deaths by suicide while positively affecting the knowledge, skills, and attitudes of trainees through improving communication (Isaac et al., 2009).

Examples of Partnerships

- **Governor’s Challenge:** Partnership with SAMHSA to implement VA’s National Strategy for Suicide Prevention using a public health approach
- **PsychArmor V.A. S.A.V.E Training:** 25-minute suicide prevention training video available online
- **Suicide Prevention Month:** Integrating SP Month planning and SP messaging with VHA Communications, and Department of Defense and community partners.
- **National Shooting Sports Foundation/American Foundation Suicide Prevention:** Safe Firearm Storage Toolkit

Tactics

Building Partnerships

- Initial Contact
- Discovery Call
- Vetting
- Partner Plan Development

Sustaining Partnerships

- Execute Activities
- Regular Communications
- Assess Efforts/Revise

Director’s Engagements

- Event Analysis
- Staff Coordination
- Product Review

SP Partnerships Briefings

- VA Internal/External Briefings

VA – Internal Coordination

- VACO-level Offices
- VBA, CMV, CWV, etc.

Communications Products

- OPIA Support
- Press Releases, Blogs
- Partner Products

Discussion & Questions

Thank You



VHA Suicide Prevention Resources

Free, Confidential Support 24/7/365

Be prepared.
Save the number.
Dial 988 then Press 1



- Veterans
- Service members
- Family members
- Friends
- Coworkers

Make the Connection

- Online resource featuring hundreds of Veterans telling their stories about overcoming mental health challenges

**MAKE THE
CONNECTION**
www.MakeTheConnection.net



[MakeTheConnection.net/conditions/suicide](http://www.MakeTheConnection.net/conditions/suicide)

VA SAVE Training

- Suicide prevention training video available to everyone, 24/7
- Less than 25 minutes long
- Offered in collaboration with the PsychArmor Institute



Available online for free: psycharmor.org/courses/s-a-v-e/

Coaching into Care



- National VA telephone service which aims to educate, support, and empower family members and friends who are seeking care or services for a Veteran

CALL 888-823-7458

Don't Wait. Reach Out.

Don't wait. Reach out.

**Life has its challenges.
As a Veteran you don't
have to solve them
alone.**

Use this site to get support that is designed specifically for you. If you're a family member or a friend, you can also find resources that are designed specifically for the Veteran in your life.

Get Support & Resources





Social Media Safety Toolkit

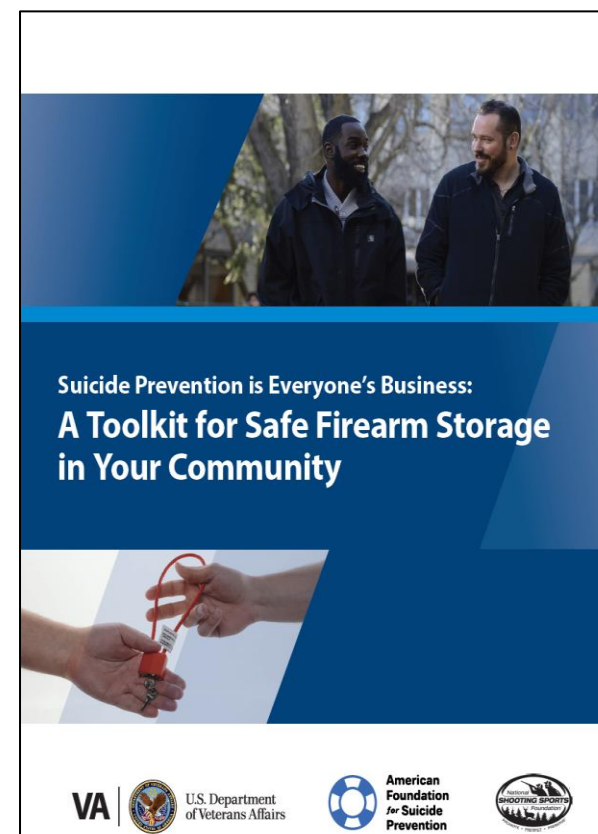
- As discussed in the **National Strategy for Preventing Veteran Suicide**, social media is an important intervention channel and a key piece of VA's comprehensive, community-based suicide prevention strategy.
- The Social Media Safety Toolkit for Veterans, their families, and friends equips everyone with the knowledge needed to respond to social media posts that indicate a Veteran may be having thoughts of suicide.
- The toolkit includes best practices, resources, and sample responses.



Download at https://www.mentalhealth.va.gov/suicide_prevention/docs/OMH-074-Suicide-Prevention-Social-Media-Toolkit-1-8_508.pdf

Lethal Means Safety Toolkit

- Developed in partnership with the [American Foundation for Suicide Prevention](#) (AFSP) and the [National Shooting Sports Foundation](#) (NSSF), the trade association for the firearms industry.
- Toolkit guides communities through the process of building coalitions to raise awareness about safe storage and its connection to suicide prevention.
- Safe storage can put time and space between an individual and a firearm during suicidal crisis and shows promise for reducing rates of suicide.
- VA respects the important role firearms play in many Veterans' lives and is dedicated to providing safe storage options that are consistent with each Veteran's values and priorities. Help Veterans and their loved ones make their homes safer and share these resources with your network.



Access the toolkit online:
[Safe Firearm Storage Toolkit](#)

National VA Suicide Prevention Lethal Means Safety (LMS): Public Service Announcement (PSA)



From Science to Practice

- In 2019, VA launched a literature review series to help clinicians put suicide prevention research into action.
- The series translates evidence-based research into informative and practical steps that health care providers can use to help support their Veteran patients.
- The series is updated monthly.

Suicide Among Women Veterans: Risk Factors Associated With Mental Health and Emotional Well-Being



Issue

Women Veterans are almost twice as likely as their civilian peers to die by suicide.¹ Multiple factors (e.g., access to firearms) contribute to this disparity. This summary focuses on risk factors associated with women Veterans' mental health and emotional well-being. Clinicians can help by evaluating patient behavioral and mental health.

Key Findings

Suicide Risk and Mental Health/Substance Use Disorders

- The link between psychopathology and suicide risk is well established. Among Veterans, this link is stronger among women than men.²
- Substance use disorders, especially with comorbid mental health disorders, robustly predict suicide attempts and completed suicide in women Veterans.^{2,3,4,5,6}
- Eating disorders are also associated with increased risk of suicidal ideation, attempts, and death by suicide.^{7,8} The prevalence of eating disorders among Veterans is at least as high as rates in the general population. Rates are higher among women Veterans than male Veterans.⁹
- Other psychiatric conditions associated with suicide risk in women Veterans include bipolar disorder, schizophrenia, depression, posttraumatic stress disorder (particularly with comorbid depression), and anxiety disorders.^{2,10}

Suicide Risk and Intimate Partner Violence

- Intimate partner violence (IPV) includes physical or sexual violence, stalking, and psychological aggression/coercion by a current or former intimate partner. The experience of IPV is associated with increased likelihood of suicidal ideation and attempts.^{11,12,13}
- Women Veterans are at a higher risk (approximately 33%) than civilian women (24%) for experiencing IPV during their lifetime.¹⁴

- Experiencing IPV is associated with additional suicide risk factors, such as mental and physical health problems, hopelessness, and social isolation.¹⁵

Suicide Risk and Problems With Emotion Regulation and Distress Tolerance

- Adverse childhood experiences and complex trauma can reduce a woman's ability to maintain emotional stability and manage strong emotions under stress. Problems with emotion regulation are associated with greater risk for suicidal ideation and behaviors, and problems with distress tolerance are associated with greater risk for nonsuicidal self-injury.^{16,17,18,19}
- Repeated episodes of nonsuicidal self-injury may increase long-term suicide risk through desensitization to physical pain and self-inflicted injury.^{19,20}

Implications


Women Veterans have high rates of mental health and substance use disorders, IPV, and emotion dysregulation, all of which increase suicide risk. Recent research findings can inform gender-sensitive risk assessment and treatment planning.



Together We Can

- VA recently launched a new suicide prevention informational series for Veterans, their families and caregivers.
- The series is backed by scientific findings designed to provide families and caregivers with resources and practical steps to take to Be There for Veterans in their lives.
- Both series describe several suicide risk and protective factors.

Take Charge of Your Health and Well-Being

Together We Can. 
Suicide Prevention Information for Veterans,
Their Families, and Caregivers

INFORMATION FOR VETERANS

The Whole Health Approach to Care

The Veterans Health Administration (VHA) continues its commitment to engage Veterans in lifelong health, well-being, and resilience by increasing its focus on the “whole health approach.” Because your mental health is connected to your physical health and vice versa, attending to both at the same time is critical to wellness and recovery. As you support and care for your whole self — physically, psychologically, socially, and spiritually — you strengthen your resilience and protect against distress that can lead to thoughts of hopelessness and even suicide.

The goal of VHA’s whole health approach is to empower and equip you to take charge of your health and well-being and live your life to the fullest. Health care providers who take a whole health approach treat you as a whole person. They listen to you and consider your thoughts and input. Simply put, they focus on what really matters to you.

Different aspects of your physical and mental health are connected to one another. Your environment also affects your health. By making a positive change to one aspect of your health or your environment, you can improve other aspects of your health. Your health care team can help you make and meet your health goals by providing proven treatments and self-care strategies that involve you, your family, your health care team, your environment, and your community. Your healthcare team may include primary care professionals, clinical pharmacists, behavioral health clinicians (like psychiatrists, psychologists, licensed therapists, and social workers), and chaplains that work together to create a health plan specifically for you.

In addition to your health care team, your family, friends, and community play a part in your health and well-being by participating in your wellness plan and providing positive connections with others. Research suggests that participation in things like peer support groups, leisure activities, and social outings can have a positive effect on physical and mental health.

How the Whole Health Approach Works


VHA’s whole health approach to care begins with talking to your health care team about your values and goals for well-being. These can include:

- Aspects of your physical or mental health that you would like to improve.
- Things that you’re already doing to support your health, such as exercising or taking vitamins and supplements (it’s important to always tell your health care provider which vitamins and supplements you take).
- Ways you spend your time, like enjoying hobbies and other leisure activities.
- Ways you engage with your community, family, and environment.

Based on your health goals, your health care team can help you pursue self-care strategies that are designed to improve one aspect of your well-being and can have a positive effect on other areas as well. These strategies may include:

- Physical activity
- Changing your environment, such as increasing your exposure to natural light
- Seeking out opportunities to achieve your personal or professional goals
- Changing your diet
- Improving the quality of your rest and relaxation
- Strengthening relationships with family members and friends
- Expressing (or exercising) your religious or spiritual beliefs
- Adopting ways of thinking and activities that can reduce stress and improve mental well-being

The whole health approach puts you at the center of your care. You work with your health care team to decide what your health goals are, and you use the strategies that are right for you to improve your well-being. Your health care team can tell you more about the whole health approach. For more information on VHA’s whole health approach and how you can get started, visit: www.va.gov/wholehealth.

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https://www.mentalhealth.va.gov/suicide_prevention/resources.asp

Resources for Clinicians

SUICIDE RISK MANAGEMENT Consultation Program FOR PROVIDERS WHO SERVE VETERANS

Why worry alone?

The Suicide Risk Management Consultation Program provides free consultation for any provider, community or VA, who serves Veterans at risk for suicide.

Common consultation topics include:

- Risk Assessment
- Conceptualization of Suicide Risk
- Lethal Means Safety Counseling
- Strategies for How to Engage Veterans at High Risk
- Best Practices for Documentation
- Provider Support after a Suicide Loss (Postvention)

#NeverWorryAlone

www.mirecc.va.gov/visn19/consult

To initiate a consult email:
SRMconsult@va.gov

VA/DoD Clinical Practice Guideline

Assessment and Management of Patients at Risk for Suicide

GUIDELINE SUMMARY



  VA/DoD Evidence Based Practice

www.healthquality.va.gov/guidelines/MH/srb

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Administration](#)

[Make the Connection](#)

be there.



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VA



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TRAIN Learning Network

- TRAIN is a national learning network that provides quality training opportunities to over 1.8 million professionals who protect and improve the public's health.
- Many of the trainings used for internal VA staff and clinicians are included on this public portal as an opportunity to train community providers.
- The Suicide Prevention Program wants to ensure the high level of training provided to VA employees is also accessible to those assisting Veterans in their communities.

The logo for TRAIN features the word "TRAIN" in a bold, dark blue, sans-serif font. The letter "A" is stylized, with a yellow triangle pointing upwards and a dark blue triangle pointing downwards, meeting at the top and bottom points.

From the **Public Health Foundation**

www.train.org

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