



ISSUE BRIEF: MENTAL HEALTH SERVICES AND SUICIDE PREVENTION

The Situation

- The Department of Veterans Affairs' (VA) Veterans Health Administration (VHA) is a recognized leader in suicide prevention and has a full continuum of mental health services that are comprehensive and recovery-oriented, and focused on issues common among veterans such as post-traumatic stress disorder, substance use disorders, traumatic brain injuries, depression, anxiety and conditions related to military sexual trauma.
- The VA also provides wrap-around supportive services that take into account social determinants that can impact mental health, such as employment, stable housing and vocational training.
- The 2023 National Veterans Suicide Prevention Annual Report reflects the complexity of suicide inherent in the veteran population and notes an increase in veteran suicide in 2021 compared to 2020. Increased deaths were particularly prominent in women veterans, for whom there was a 24.1% increase in the age-adjusted suicide rate, compared to an increase of 6.3% among male veterans.
- To address this growing problem, Congress enacted legislation in January of 2023 that allows veterans in crisis to receive emergency mental health care at any facility at the VA's expense. The VA also implemented a lethal means secure storage initiative to improve providers' skills for counseling at-risk veterans about safe storage practices for prescription medication and firearms.

The Challenge

- High demand for mental health and readjustment services, access challenges in rural communities and staffing shortages for specialty mental health providers create barriers to timely care in some locations.
- Counseling veterans in the safe storage of firearms is a critical component of suicide prevention. However, many veterans are reluctant to discuss this issue with their provider because they fear they will lose access to their firearms if they seek help for mental health challenges.
- Many veterans access care in the community. However, VA's community care network providers are not required to meet the same mental health clinical care standards as VA providers or to take the same specialized training in lethal means safety counseling to prevent suicide. VA serves an increasingly diverse patient population.

- Gaps exist in programing for some vulnerable populations such as women, minority and LGBTQ+ veterans.

The Solution

- Congress must ensure sufficient funding for veterans' mental health and readjustment services, the expansion of readily accessible crisis intervention services and support programs that strengthen and improve its suicide prevention efforts.
- VA must evaluate the effectiveness of suicide prevention efforts focused on non-clinical support and intervention services, including financial, occupational, legal and social domains, and partnerships with community providers focused on veteran suicide prevention.
- The VA must focus on recruiting and maintaining appropriate internal staffing levels for mental health services to meet demand for specialized care and ensure quality of such services for veterans who access services through its community care network.
- Congress and VA must require mandatory suicide prevention training for all of VA's community care partners to ensure proper screening, intervention counseling (for lethal means safety and substance-use disorders), and treatment for veterans in mental health crises.
- VA must improve tailoring its suicide prevention and intervention services to better serve the unique needs of veteran subpopulations such as women, minority and LGBTQ+ communities.