Strengthen Veterans Mental Health Care and Suicide Prevention Programs

The Department of Veterans Affairs (VA) reports that about 17 veterans and 3 members of the National Guard and Reserves take their lives each day. For each of the past 10 years, this has meant more than 6,000 veterans take their lives each year.

The VA's most recent annual report on suicide (2019) shows that veterans are 1.5 times more likely to commit suicide than non-veteran peers. Women veterans are 2.2 times more likely to commit suicide than non-veteran women. Rates of suicide among veterans are also affected by age, with younger age groups at greatest risk, as well as those experiencing, unemployment, lower incomes, homelessness and diagnoses of sleep disorders, pain and traumatic injury, in addition to mental health conditions.

The VA operates a comprehensive array of mental health care services oriented toward recovery for veterans including evidence-based treatment for post-traumatic stress disorder, substance use disorder, depressive disorders, anxiety and other mental illnesses such as bipolar disorder and schizophrenia. The VA also has screening programs that allow clinical providers to identify and make immediate referrals to behavioral health staff that are integrated into primary care teams lowering veterans' stigma for seeking treatment and ensuring urgent interventions. Veterans are also afforded supportive wraparound services such as case management, care coordination, housing and other benefits that allow them to be stabilized in a therapeutic environment.

Recognizing significantly higher rates of suicide among veterans than other American adults, the VA has implemented a plethora of services, including a veterans' crisis line, placement of suicide prevention coordinators at each VA medical center, targeted initiatives to assist families in coaching veterans into care, and developed predictive analytics to identify veterans most at risk of self-directed violence. The Veterans Crisis Line has answered approximately 3.2 million calls per year since 2007. It has initiated the dispatch of emergency services to callers in crisis approximately 100,000 times. These contacts resulted in more than 564,000 referrals to the VA Suicide Prevention Coordinators who engage and track these veterans to assure they are receiving necessary mental health services. Despite these efforts, rates of suicides among veterans—even those using the VA—continue to outpace those of other Americans.

The Department has consistently pledged reduction of suicides as its number one clinical goal and granted special eligibility to mental health care for certain veterans who are at higher risk. Yet, the VA reports that most of the veterans committing suicide have not used the veterans health care system. Many veterans don't use the VA—not because they don't chose to—but often because they don't believe they are eligible, don't know how to apply or don't know about the services offered.

To address this population outside of the VA, the White House made a Proclamation for a Presidential Roadmap to Empower Veterans and End the National Tragedy of Suicide (PREVENTS), which describes a federal government approach to addressing this crisis in partnership with the state and local governments and the private sector. DAV stands ready to assist with this "all hands on deck" plan, but continues to support a primary and integral role for the VA in any new suicide prevention initiatives for veterans.

- ➤ Congress should enact legislation to ensure VA receives appropriate funding levels to hire and train a sufficient number of mental health providers, improve and promote access to VA services, and better coordinate mental health and community care services.
- ➤ A comprehensive suicide prevention and outreach plan must promote VA eligibility and mental health services, particularly targeted to veterans not engaged in VA care.
- > The VA must ensure that veterans receiving care from community partners receive high quality, evidence-based care.