

## ISSUE BRIEF: SUICIDE PREVENTION

### The Situation

- There is no systemic tracking of service members after they leave the military; however, VA reports that 20 veterans take their lives each day, which equates to over 7,000 veteran suicides per year. In 2014, veterans 50 years or older accounted for approximately 65 percent of all veteran suicides.
- A VA study published in 2015 shows that veterans commit suicide at a 50 percent higher rate than those who never served. Younger women veterans are especially impacted, with the rate of suicide being 35 per 100,000; a rate seven times that of their civilian counterparts. Enlisted veterans commit suicide at nearly twice the rate of former officers. Veterans who did not deploy had a 16 percent higher suicide rate than those who did.
- Since 2007, the Veterans Crisis Line has answered nearly 2.3 million calls and initiated the dispatch of emergency services to callers in crisis over 61,000 times. Its anonymous online chat service, added in 2009, has engaged in more than 289,000 chats; and, since adding texting capability in 2011, VA has responded to more than 55,000 texts. These contacts resulted in more than 376,000 referrals to VA Suicide Prevention Coordinators (SPC) who may flag and monitor these veterans to assure veterans are receiving necessary mental health services.
- Research indicates that veterans who are fully engaged in VA care are at lower risk of suicide than those who are not, and that strong social support is among the most important predictors of positive health outcomes.

### The Challenge

- Suicide is a public health issue that involves psychological, biological and societal factors and a special concern in the military and veteran population. Current research and analysis of suicide data indicates the complexity of creating effective suicide prevention programs.
- Integration of mental health services into primary care has proven essential to addressing and overcoming stigma frequently associated with seeking mental health care within DOD and VA. However, despite targeted suicide prevention efforts within VA and DOD, increased outreach initiatives, suicide rates among veterans remain relatively unchanged.

### The Solution

- Congress must ensure VA has the resources it needs to effectively implement mental health and suicide prevention programs, and deploy prevention resources to those most at risk.
- VA and DOD must continue research of suicide prevention, improve outreach efforts, continue anti-stigma campaigns, and identify and deploy the best, evidence-based treatment strategies for those at risk.
- VA must ensure veterans have access to family-centered mental health care services, including family therapy and marriage counseling as relationship problems are often noted as a core reason that people decide to end their lives. These services should be available at all VA health care facilities.
- VA must continue to focus on creative and innovative technology, and other measures that allow early intervention. The use of Predictive Analytics to determine which veterans may be at the highest risk of suicide will allow providers to intervene before a crisis occurs.