

A Veteran's Guide to Discussing Secure Storage to Reduce Suicide Risk (STORES)



VA | U.S. Department
of Veterans Affairs

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About This Guide

What will I learn from this guide?

This guide will help you identify when a fellow Veteran may be at risk for suicide. You will learn how to talk with someone about making the environment safe to prevent suicide. The guide has three sections:

- Understanding Veteran Suicide And Identifying When Another Veteran May Be At Risk
- Talking To Another Veteran About Secure Storage
- Exercises To Practice Conversations About Secure Storage

What do we mean by secure storage when thinking about suicide?

Veterans who are at risk for suicide may act within minutes of deciding to hurt themselves. However, the desire to hurt themselves often goes away quickly too. Secure storage increases time and distance between Veterans' decision to hurt themselves and what they would use to hurt themselves. One example of secure storage is moving a firearm from a bedside table to a safe in the guest room; this increases the time (to unlock the safe) and distance (moving it from the bedroom to the guest room) needed to access the firearm. The increased time and distance give Veterans time to change their mind about their decision to die by suicide.

Why is this guide important?

Suicide is preventable. Fellow Veterans, family members and friends are important in preventing suicide and saving Veterans' lives. By asking about suicide, fellow Veterans let Veterans know that they can talk about their thoughts of suicide. Asking about suicide opens the door to a conversation that can make another Veteran feel cared for and give them hope. It can possibly save lives. Listening to them does not mean that all their problems have to be solved. A conversation about secure storage to prevent suicide can be a good start when concerned about a Veteran's risk for suicide. Encourage the Veteran you are concerned about to talk to a healthcare team member.

If you are discussing suicide with a friend and think professional help is needed, you can call the Veterans Crisis Line: **Dial 988 and Press 1.**

Tip: You can save this number in your phone now so you can find it easily later.

Who is this guide for?

Veterans who want to help prevent Veteran suicide.

How should I use this guide?

Take time to read this guide and give yourself time to practice the skills. This will prepare you to help another Veteran when the time comes. Talk about this guide with other Veterans who may want to learn about Veteran suicide prevention – you may learn from each other.

Understanding Veteran Suicide And Identifying When Another Veteran May Be At Risk

Overview of Veteran Suicide

Veterans die by suicide at an alarming rate. On average, 17 Veterans die by suicide each day.¹ To help Veterans, it is important to understand why they are at increased risk of suicide.

Veterans are at greater risk for suicide than non-Veterans

Veterans are more likely to die by suicide than non-Veterans. Since September 11, 2001, four times as many active-duty service members and Veterans have died from suicide as service members in combat.² The figures below show the rate of suicide for non-Veterans and Veterans.

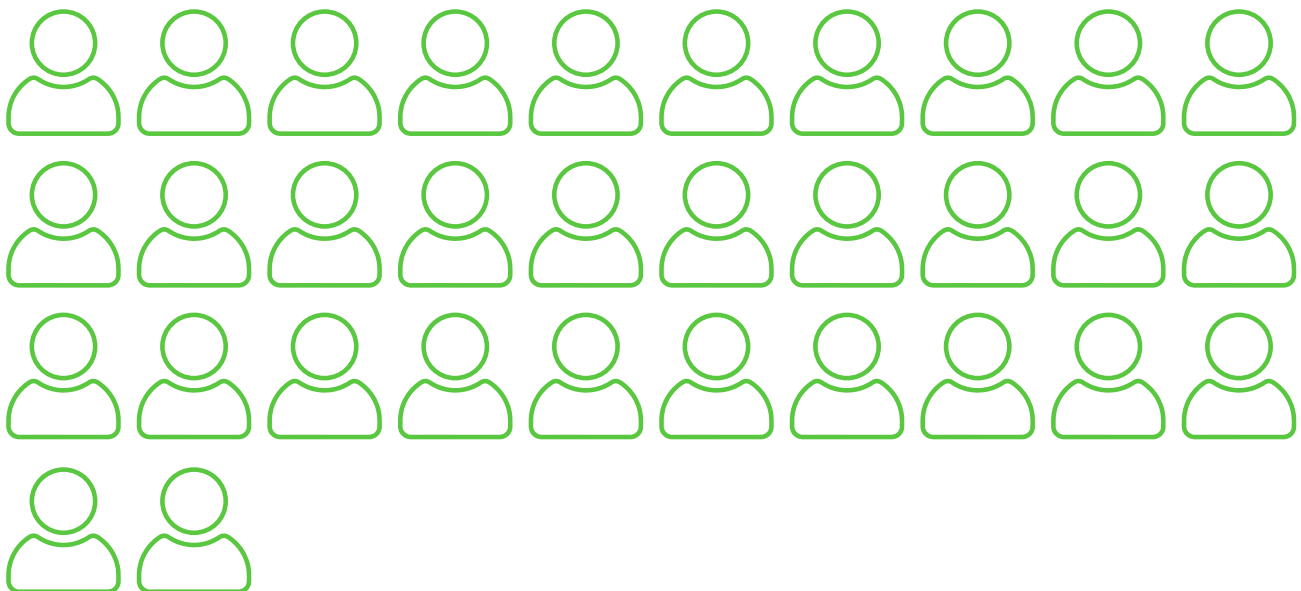
Non-Veterans who died by suicide

ABOUT 17 IN 100,000 NON-VETERANS DIED BY SUICIDE IN 2019.¹



Veterans who died by suicide

ABOUT 32 IN 100,000 VETERANS DIED BY SUICIDE IN 2019.¹



Why is the rate of Veteran suicide so much higher?

There are many reasons that may lead to a higher suicide rate among Veterans, It is complicated, but some reasons include:

Exposure to traumatic experiences during military service.

- Military personnel often experience high stress and traumatic situations during their service.³ Veterans exposed to combat have higher rates of suicide. Combat Veterans also experience higher rates of difficulty sleeping, opioid use, and alcohol use. All of these can increase the risk of suicide.
- Military service increases the risk of traumatic brain injury (TBI). TBI is linked to posttraumatic stress disorder (PTSD), changes in decision making, insomnia, increased aggression and hostility. These factors also increase risk of suicidal thoughts and attempting suicide. Veterans who are affected by TBI are two times more likely to die by suicide than Veterans without a TBI.⁴ Also, Veterans with TBI who die by suicide are much more likely to use firearms.
- Beyond combat-related trauma, Veterans may experience military sexual trauma (MST). MST is sexual assaults or sexual harassment towards service members that can be physical or verbal. Among Veterans receiving care at the Veterans Health Administration (VHA), 1.1% of men and 21.2% of women reported having experienced MST.⁵ Those who have experienced MST are more likely to die by suicide. Veterans who experience MST are more than twice as likely to die by suicide as Veterans who don't experience MST.⁶

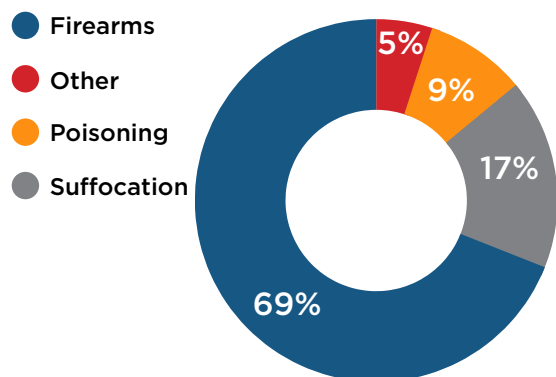
Culture.

- Veterans often value taking care of themselves and may hide their struggles. For many, asking for help when experiencing emotional pain can be difficult. Veterans may also worry about being a burden on others. Feeling like a burden to others is a strong risk factor for suicide among Veterans.⁷
- Sadly, over two thirds of Veterans know someone who has died by suicide. Knowing someone who has died by suicide decreases fear of death.⁸ A lower fear of death increases suicide risk. The emotional impact of losing a fellow service member to suicide can be the same as losing a significant other or family member to suicide.
- Stigma often prevents Veterans from getting mental health care.⁹ As a result of stigma, some Veterans may be more hesitant to address their mental health needs than their physical concerns. Stigma leads to service members and Veterans fearing negative responses from peers, commanders, and other colleagues about getting the mental health care they need and deserve. Concern about confidentiality can increase stigma. This concern can be especially high among service members whose chain of command can have access to their medical records. Stigma from the military service often stays with the Veteran after military separation.

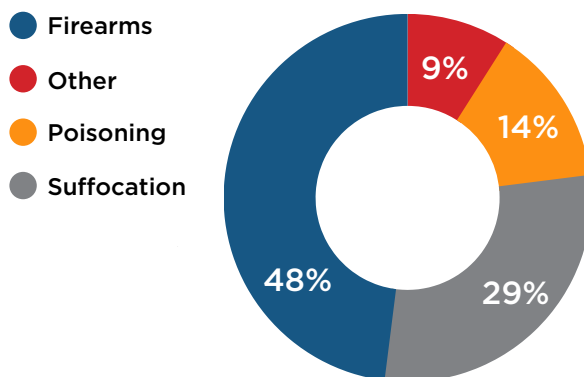
Comfort and skill with firearms.

- One-half of all Veterans have access to a household firearm. Unfortunately, this can be deadly when a Veteran is at risk for suicide. Veterans are more likely than non-Veterans to use a firearm to hurt themselves. Most people who use a firearm to attempt suicide, die.¹⁰ The figures below show what ways Veterans and non-Veterans use to die by suicide.

Veteran Method of Suicide



Non-Veteran Method of Suicide



Facts about Suicide

Suicide can be uncomfortable to talk about. This can lead to not wanting to learn about suicide. Knowing the facts is the first step to fighting stigma and playing a part in preventing Veteran suicide.

Facts about suicide:

- Suicide is preventable.¹
- Not everyone who has thoughts of suicide will act on the thoughts, but the risk is present.¹¹
- Talking about suicide allows individuals to share their feelings and encourages them to get help.¹
- On average, a Veteran dies by suicide about every 85 minutes.¹
- Firearms are the most commonly used way Veterans die by suicide.¹
- Two of three Veterans who die by suicide use a firearm.¹
- Of individuals who use a firearm for a suicide attempt, 90% die.¹⁰
- In the United States, many more people die by suicide than homicide with firearms.¹²
- A person in a household with a firearm is five times more likely to die by suicide than a person in a household without a firearm.¹³

Signs Another Veteran May Be at Risk for Suicide

Recognizing that a Veteran may be thinking about suicide is the first step of helping them. Below are some examples of behaviors (or “red flags”) of someone who may be thinking about suicide:

- Making comments about ending their life,¹¹ e. g., “I want to hurt myself,” or “I want to die”
- Giving away their favorite or valuable items¹¹
- Visiting friends and family to say goodbye¹¹
- Feeling hopeless,¹¹ e. g., “Things never work out for me; nothing will help me,” or “I’m done; there is no hope”
- Feeling like a burden to others,¹¹ e. g., “The world would be better off without me”³

- Using alcohol or substances (or increasing their use)
- Self-harming behaviors (e. g., cutting themselves)
- Isolating from family, friends, or work-related events¹¹
- Having heightened emotions or emotional outbursts, including explosive anger, sadness, anxiety¹¹
- Frequently discussing death, hurt, or self-destructive behaviors¹¹
- Having complete or slightly negative changes in personality¹¹
- Getting little or too much sleep¹¹

Secure Storage When Having Thoughts of Suicide

Now that you know some signs of someone who may have suicidal thoughts, let's talk about ways to keep other Veterans safe when they are having thoughts of suicide.

Focus on firearms

Since Veterans who attempt suicide or die by suicide are most likely to use a firearm, most of the examples in this guide focus on firearms. However, the principles of increasing time and distance can be applied to any way Veterans may consider using to hurt themselves, e. g., medications, sharp objects, ropes used as a noose, or carbon monoxide poisoning

Practicing secure storage

When another Veteran is thinking about suicide, putting time and distance between them and the object they would use to hurt themselves increases their safety. The urge to act on thoughts about suicide often pass quickly. Putting more distance and time between Veterans and how they would hurt themselves may allow for the urge to pass. This means that if Veterans cannot get to their firearm(s) when they want to die by suicide, they may change their mind before they can hurt themselves. Taking small steps to make it more difficult to access firearms can save lives.

Let's look at an example of adding more time and distance: a loaded firearm on a coffee table is easy to access quickly. Instead, if the firearm is stored unloaded in a safe in the garage, it puts more distance to access it. Going to the garage would increase distance. Opening the safe and loading the firearm would take more time. If the firearm was stored at a shooting range or with a trusted friend who was legally allowed to store the firearm, that would further increase the distance and time to access the firearm.

Figure 1. Possible Small Steps for Safe Firearm Storage



When secure firearm storage should be used

Secure firearm storage is recommended for any Veteran who is at risk of suicide (Secure storage should also be used when any member of the household may be at risk for self-harm as people who live in households with firearms are five times more likely to die by suicide.).

Veterans who are at risk for suicide are encouraged to develop a safety plan with a healthcare professional during which secure storage is also discussed. If you are concerned about other Veterans' risk for suicide, encourage them to talk to their healthcare professionals. Planning before a crisis can help prevent suicide.

Facts about secure storage

Secure storage is important.

- It is important to discuss secure storage of firearms whenever someone has thoughts of suicide. Having thoughts of suicide does not mean that the person is going to act, but that risk is present.
- The time between when Veterans decide to harm themselves and act on the plan is called a suicidal crisis. A suicidal crisis is often brief. About 25% of people who attempt suicide do so within 5 minutes of the start of a suicidal crisis.¹⁴
- During a suicidal crisis, if Veterans have a few extra minutes to think before they access the object they planned to use to hurt themselves, they may not act on their thoughts of suicide.
- Increasing the time and distance between the thought and their firearms allows the desire to act to pass.
- If Veterans in a suicidal crisis cannot get to the object they planned to use to hurt themselves, it is unlikely they will make a new plan during the crisis. This means that if Veterans planned to use a firearm to die by suicide and they cannot access their firearm while they are in crisis, they may not use medicines or sharp objects to hurt themselves.



Talking To Another Veteran About Secure Storage

In this section, you will learn several key skills for having conversations about secure storage and suicide. The skills covered are:

- Overcoming Hesitation
- Active Listening
- Asking About Suicide
- Discussing Secure Storage

Each section includes sample dialogue between Veterans to demonstrate how these skills could be used in a real conversation. The section ends with a sample conversation, “Bringing It All Together,” that incorporates all of the skills.

Overcoming Hesitation to Have Difficult Conversations

As a Veteran you may want to help other Veterans but may not know how to help. You may not have experience with mental health issues or worry that you may be overwhelmed by what the Veterans may say, or a part of you may be thinking, “This is not my job.” It’s okay to have mixed feelings. However, learning how to approach these situations can help you be there for that Veteran when they need you most.

Noticing red flags and helping other Veterans in their time of need can help save their lives. By educating yourself and making yourself available, your friends will have space to talk about their problems or needs. It lets them know that they don’t have to tackle their troubles alone. Listening to a friend doesn’t mean that you have an answer to your friend’s problems. Often, a Veteran just need someone who will listen without judgment. To see an example of a conversation on overcoming hesitation see appendix A.

If you are discussing suicide with a friend and think professional help is needed, you can call the Veterans Crisis Line: **Dial 988 and Press 1.**

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Tips for Having a Difficult Conversation

If you are concerned about friend’s safety, you may have thought about talking with them about it. It is okay to feel awkward or not know what to say. This section has tips on how to have these conversations. Take your time to read the sections and rehearse (in your head or with a friend/family member). Remember: you are not expected to be a therapist or solve all their problems. Encourage Veterans to talk with their healthcare team.

To show genuine concern, it is important to have an open conversation. Let your friends talk about what they think will work best for them. Allow them to develop a plan for their safety with which they are comfortable.

The discussion should show honest concern for your friend’s safety and well-being. Start by inviting them to describe their feelings and thoughts that may be weighing them down. Reflections and open-ended questions are two communication tools that can be helpful to ask your friend the questions gently and to listen carefully.¹⁵

Reflections are brief statements that show that you are listening.¹⁵ Reflections allow the other person to clarify or add more information. Like a mirror, you reflect what you hear. A reflection can be rewording the person’s comments, or it can highlight important parts of the conversation. You can reflect *feelings* or *information*, or both. Here is an example of reflections in a conversation between two Veterans, Manuel and Andre:

Andre and Manuel recently met at a local VSO. Andre recently separated from the military, and Manuel has helped him with his transition to civilian life.

Andre: “Oh, hey. I wasn’t expecting to see you.”

Manuel: “Hey, man. How have things been?”

Andre: “Oh, okay. I have been dealing with some family stuff. It’s been tense, that’s all.”

Manuel *[Reflection of information]*: “I’m sorry that you have been dealing with family issues; it can’t be easy.”

Andre: “It can be hard when you have so many people relying on you.”

Manuel: *[Reflection of information]* “You’re carrying a lot on your shoulders.”

Andre: “You have no idea! The pressure is too much.”

Manuel *[Reflection of feeling]*: “You sound stressed... overwhelmed. Tell me more.”

Andre: “It’s fine. I just have days when things get pretty dark.”

Manuel: *[Reflection of feeling]* “I hear that you can feel pretty bad sometimes.”

Open-ended questions are an invitation to better understand your friend’s experience.¹⁵ They are questions that cannot simply be answered with a “yes” or “no.” You can get more information through questions that include “Tell me more...” or “What do you mean by...?” Using “close-ended questions” (“yes” or “no” style questions) may keep you from fully understanding the situation. Let’s look at some examples:

Close-Ended	Open-Ended
Are you depressed?	How are you feeling?
Was that difficult?	How did you cope?
Do you have someone to talk with?	Who are some people you can talk with?

Let’s pick up the conversation with Manuel and Andre again:

Andre: “I just haven’t been feeling like myself lately. I’m going to see my doctor and see what they think.”

Manuel *[Open ended question]*: “I’m glad you’re going to get checked out. But tell me, what do you mean by not feeling like yourself?”

Andre: “Well, those days can just get ugly. “

Manuel *[Open ended question]*: “‘Ugly’ doesn’t sound good. What does that look like?”

Andre: “I don’t know... It’s hard to hold on to hope, like, “‘What’s the point in even trying anymore?’”

It may be uncomfortable to start a conversation, and you may not know exactly what to say; that’s okay. Let’s look at a conversation between Koa and Joe. In this conversation you

will be able to see what Koa is thinking. You may want to read the conversation first on its own and then also with Koa's thoughts.

Koa and Joe met a few years ago at a Marine Corps birthday BBQ. Koa just bought his first house and is learning all that goes into homeownership, including keeping up his yard. He has come over to Joe's house to borrow a leaf blower.

Conversation	What Koa is thinking
Koa: "Hey, man. Thanks for letting me borrow your leaf blower. How are you?"	Joe looks exhausted.
Joe: "Fine, just dealing with stuff. I'm getting a divorce... I don't know what life will be like without her. We've been together since before basic training. I'm worried about my kids. "	
Koa: "How are you dealing with that? What are you going to do?"	I've never seen him look so bad.
Joe: "It's fine! It's just that my kids aren't talking to me now. They think this is my fault. "	
Koa: "Are you really fine?"	This place is a mess. I don't think Joe is okay.
Joe: "We've been having problems, but I just don't know what to do. I'll be fine, though."	
Koa: "I've haven't gone through the same thing, but I hear you - sounds like a lot."	Something isn't right. What do I do?
Joe: "Here's the leaf blower. Let me know if you need anything else."	
Koa: "Thanks, Joe. I'll have it back to you this weekend. "	I shouldn't be leaving Joe, but I can't think of what else to say.
Joe: "You know, you can keep the leaf blower. I don't know how much longer I'll need it."	What does he mean by that?
Koa: "Umm, Joe. I'm not sure it's my place but I'm worried about you."	Now I know something is very wrong. Joe prides himself on having the best yard on the block and always showed off his tools. I know I have to say something, but this feels so awkward.
Joe: "I'm fine. People get divorced all the time. And keep the leaf blower; you've always been nice to me; you deserve it."	
Koa: "Joe, people do get divorced all the time; but I'm talking about you. I don't think you are doing okay. How are you REALLY doing? And don't say fine. I don't believe it. This must be really tough for you, especially because of the kids. "	Ughhhhh. what do I do? What do I do? I can't leave him like this.
Joe: "You really want to know? I'm awful. I'd rather be deployed. I've failed as a father and husband. Do you have any idea what that's like?"	

Joe and Koa talked for a little longer. Joe felt much better after talking with Koa but wasn't ready to talk with a mental health professional. He did approach his rabbi (Jewish clergy) who supported Joe in his desire to seek mental health care.

Asking About Suicide

If you are concerned about another Veteran's safety, it is important to directly address suicide. Remember, asking about suicide will not harm your friend or create suicidal thoughts. Asking a friend about suicide could save their life. Asking shows you care, and they mean enough to you to ask about it. It gives them permission to talk about their thoughts and feelings. By starting the conversation about suicide, they may want to get help or make a safety plan with a healthcare professional.

An emotionally safe environment is important when asking about suicide. It allows an individual to be open and honest, without being judged. Using reflections and open-ended questions, as described above, helps show empathy (i.e., seeing the situation from the other person's point of view). You can also create an emotionally safe environment by validating (recognizing the feelings that the person is experiencing) another Veteran's strengths and effort. Let's return to Manuel and Andre's conversation to see an example of validation.

If you are discussing suicide with a friend and think professional help is needed, you can call the Veterans Crisis Line: **Dial 988 and Press 1.**

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Andre: "Well, those days can just get ugly."

Manuel: "'Ugly' doesn't sound good. What does that look like?"

Andre: "I am so irritated on those days. The smallest things make me angry, and I lash out. It's almost like I'm looking for an argument."

Manuel [Validation]: "It takes a lot of courage to talk about this. I know I have a hard time talking about anger."

After creating an emotionally safe environment and allowing the Veteran to share what's on their mind, you can more easily ask about suicide. When it comes to thoughts of suicide, being direct is important. You may need to use close-ended questions ("yes" or "no" style questions) to get a clear and direct answer to the question. There are several different ways you can ask.

One possible way:

Andre: "Well, those days can just get ugly."

Manuel: "'Ugly' doesn't sound good. What does that look like?"

Andre: "I don't know... It's hard to hold on to hope, like, 'What's the point in even trying anymore?'"

Manuel [Asking about suicidal thoughts]: "I'm sorry to hear that. Sometimes, when we feel that hopeless, thoughts of suicide can come up. Have you had thoughts about suicide?"

Another possible way:

Andre: "Well, those days can just get ugly."

Manuel: "'Ugly' doesn't sound good. What does that look like?"

Andre: "I don't know... It's hard to hold on to hope, like, 'What's the point in even trying anymore?'"

Manuel *[Asking about suicidal thoughts]*: “I know that you feel like this situation is hopeless. For some people, when they feel especially hopeless, they might also have thoughts about dying. Have you thought about dying?”

Having thoughts of suicide alone does not necessarily mean that Veteran is in danger in that moment. If the Veteran has thought about suicide, the next important question to ask is about a plan.

Manuel *[Asking about suicidal thoughts]*: “I know that you feel like this situation is hopeless. For some people, when they feel totally hopeless, they might also have thoughts about dying. Have you thought about dying?”

Andre: (Pauses) “Yeah”

Manuel *[close-ended question]*: “Are you having these thoughts now?”

Andre: “No”

Manuel *[Asking about suicide plan]*: “Have you thought of a plan to act on the thoughts?”

Andre: “No, it’s never gone that far.”

This conversation got Manuel thinking about getting help. He eventually made an appointment with his VA primary care provider (PCP) to talk about ways to handle the pressure he was under. After talking with his PCP, Manuel’s journey with mental health treatment continued with a referral to a therapist.



Discussing Secure Storage When You Are Concerned About Suicide

Like talking about suicide, bringing up secure storage requires knowledge and practice. It may feel more awkward among Veterans given their training in firearm safety. Nevertheless, it may be lifesaving. Communicate directly that you are worried about them hurting themselves. Remember to use validation and empathy.

Gabriela and Mai-Ly have been friends since meeting at a Veterans' volunteer event in their community. They often go to the shooting range and volunteer together. Let's look at a conversation between Gabriela and Mai-Ly.

Mai-Ly: "I get so upset sometimes; I just don't know what to do with myself. I start thinking, 'It would be better if I wasn't here anymore.'"

Gabriela [*Reflection, open-ended question*]: "I can hear how painful this is. What do you mean by, 'It would be better if I wasn't here anymore?'"

Mai-Ly: "I think about death a lot."

Gabriela [*Asking about suicidal thoughts*]: "Does that include thinking about killing yourself?"

Mai-Ly: "This isn't easy to admit, but, yeah, I do."

Gabriela [*Validation, asking about suicide plan, close-ended question*]: "I knew you had a lot going on, but I didn't realize it was so bad that you had thought about killing yourself. I don't want to lose you. Have you thought of a plan for suicide?"

Mai-Ly: "Three days ago, for a split second I thought about all the medicines I take...."

Gabriela [*Reflection, discussing secure storage*]: "Mai-Ly, this has been hard for you; and I'm worried about you. Is it OK if we talk about ways to help keep you safe?"

Mai-Ly: "That may not be a bad idea. I'm scaring myself."

Gabriela: "I know that you take a few medicines; where do you store them? I'm wondering if there are ways, we can secure your medicines?"

Mai-Ly: "I have all my medicine bottles, old and new, in a drawer in the kitchen."

Gabriela: "Would you consider limiting the number of pills you can get to easily?"

Mai-Ly: "What do you mean?"

Gabriela: "You could do a few different things. I have some ideas, maybe one might work for you. You could keep a week's worth of medicine in a pill box and put the bottles in a lock box. Or you could keep even less medicine in the pill box, maybe just a day or two's worth, with the rest staying in a lock box. You can also return your old medication to the pharmacy and ask your doctor for your refills in a smaller amount."

Mai-Ly: "Thanks for those ideas. For now, I'll keep just one day's worth of medications in the pill box and keep the rest locked in my safe. I will also drop off my old medications at the pharmacy today."

Gabriela: "Let's start with what you're most comfortable with. Anything else you need?"

Mai-Ly: “I think I’m good for now. Thanks for thinking this through with me and honoring my decision.”

Gabriela: “One last thing. I know you borrow my gun when we go to the range. But just to make sure, do you have any firearms at your place?”

Mai-Ly: “Oh no! You know with my two-year-old, I don’t keep any firearms at home. Even though I thought about what I could do with the medicines, my son matters to me too much for me to ever go through with trying to hurt myself.”

Gabriela [Reflection]: “I can hear how important your son is to you.”

Mai-Ly: “Of course, he means everything to me.”

Gabriela: “Other than your son, can you think of another reason, for living?”

Mai-Ly: “Hm. I really feel like I’m making a difference when I volunteer at the shelter. It really gives me a reason to keep going.”

Gabriella: “Thanks for thinking this through. Is it OK if we come back to this tomorrow and talk some more?”

Mai-Ly: “Yes, of course. I really can’t thank you enough – our talk has really helped.”

Two days after Gabriela and Mai-Ly talked, Mai-Ly was overwhelmed with thoughts of suicide. She thought she might hurt herself. She had locked up her medicine as she told Gabriela she would. Mai-Ly called the Veterans Crisis Line and got the help that she needed. Gabriela is very glad she spoke with Mai-Ly. She always carries cards with the Veteran’s crisis line number to share with anyone who may need it or wants to share it with other Veterans.

When discussing ways to reduce risk of suicidal behavior, brainstorm options.¹⁶ This allows them to express their personal choice and create a realistic and doable plan. A realistic plan will decrease access to how the Veteran would want to hurt themselves. Some options for decreasing access to firearms include cable locks or lockboxes, removing ammunition from firearms, and legally storing the firearm with a trusted person outside of the home.



“It’s for my protection”

Omar and Robert know each other from the local Veteran motorcycle club. Robert has had thoughts of suicide in the past. Robert noticed signs that Omar was struggling and started a conversation. Let’s look at Omar and Robert’s conversation about secure storage of firearms:

Robert [*Discussing secure storage of firearms*]: “I am wondering how you can stay safe. Where are your firearms?”

Omar: “I keep a handgun beside my bed.”

Robert: “I’m worried about how easily you could get to the handgun when you’re feeling this way. What do you think of making it so that it’s not so easy to access when you’re struggling like this?”

Omar: “People are always saying the same thing about firearms, and it gets really old. Don’t tell me you’re going to give me the same line.”

Robert [*Reflection*]: “Yeah, you’re tired of people thinking they know what’s best for you and telling you what to do.”

Omar: “Listen, I keep my firearm to protect my family, and I’m not going to give it up.”

Robert: “Your family’s safety is very important to you, and I understand wanting to protect them. But what’s the bigger risk right now – suicide or someone breaking into your home?”

Omar: “I have no idea!”

Robert: “Well, what I do know is that most Veterans who die by suicide, use a firearm. So, I know that puts you in danger. Is there a way to have your gun but not have it right by your bed?”

Omar: “How would it help if there was someone in my house and my gun is in a safe?!”

Robert: “I hear you; you want to get to your gun as soon as you want it. That’s exactly what makes it so dangerous if you start to have thoughts about suicide.”

Omar: “I see your point. Keep the gun, but just not somewhere so easy to get to. I don’t know if I’m okay with that – not having a gun handy to keep my wife safe if there is a break in doesn’t sit right with me.”

Robert: “I get it. It took me a long time to use the cable lock I got from the VA. It sat there for a long time before I finally used it. Will you at least think about it?”

Omar: “I’ll give you that; no promises though.”

Robert: “Hey, that’s a first step. Are you OK if I check in with you about it again in a couple of days?”

Omar (says with a small smile): “Hey it’s a free country and I know you’re bringing this up because you care, even if I’m annoyed that you are!”

Although Omar was not willing to making a change during this discussion, when Robert brought it up again with Omar a few days later, he was more open. Eventually, Omar decided to move his firearm to his gun safe with his hunting rifles. Robert later told Omar how he struggled for 20 years before finally accepting that he needed mental health care.

Robert didn't want Omar to suffer for as long as he did and suggested that Omar talk to someone at the VA or a Vet Center. Robert agreed to call the Vet Center.

Veterans have many other good reasons for wanting access to their firearms, including being family heirlooms, needing them for work or hunting, and their right to own a firearm. When talking with other Veterans about secure storage of firearms, respecting their reason for access is important. Challenging these values may not lead to progress. Instead, remember to take small steps, and work towards a plan that is doable for them.

There are ways of respecting other Veterans' values and still discussing secure storage of firearms. One suggestion for addressing this is to validate their feelings, while also encouraging change. Balance showing that you understand their values and concerns with encouragement to take steps to protect themselves. An example of this is "I hear how important having your firearm for protection is to you. At the same time, could we think about how to store the firearm safely. Could you..." Some other examples for encouraging change include suggesting leaving a work-related firearm at work, not having ammunition in the house, storing a hunting rifle legally with a hunting friend, and letting another family member legally store the firearm in their house.

Ultimately, by the end of the conversation, you want your friend to increase commitment to a plan that works for them, even if it's only a small step.

Ideas for secure storage:

- Using cable locks on their weapons
- Removing ammunition from weapons and storing it in a separate location
- Not keeping ammunition in the home
- Having their spouse/partner secure their firearm in the house
- Having a friend (who is legally allowed) secure their firearm
- Legally selling the firearm to a gun store
- Legally transferring the ownership of the firearm to a friend or family member
- Giving the firearm to the local police
- Limiting the number of medications they can access, including over-the-counter medications
- Removing objects that could be used to hurt oneself that are otherwise not necessary, such as rope for a noose or razor blades



Talking about protective factors

When talking with a friend about suicide, we may immediately want to focus on ways that they could hurt themselves or their plan. While that is a very important part of the conversation, it is also very helpful to ask about factors that help them stay well and safe, also known as protective factors.¹⁶ Being able to recognize what gives us purpose or meaning is also a personal protective factor. Thinking about, and knowing, personal "reasons for living" can help people look at the big picture and take their mind away from suicide. Examples of reasons for living include:

- A close relationship with a partner, family member, or pet.

- Participation in a community or religious organization.
- Meaningful activities, such as volunteering or outreach.

There are also other types of protective factors. These are personal to an individual, e.g., a person's coping skills. Some people are able to calm themselves in stressful situations by using techniques such as deep breathing. Others are able to look at the situation from a different point-of-view which can be calming.

When talking with a person who is thinking about suicide, asking them, "What are your reasons for living?" can be a powerful question that helps to highlight what is especially important to them. Even if the response is "I'm not sure." it can be an opportunity to reflect and explore what gives your friend's life meaning or purpose. ^{17, 18}

Following-up with your fellow Veteran

After you've had a difficult conversation with a friend, it is helpful to check on how they are doing.

Let's join Denise and Brett at the dog park. Denise had stepped up and was there for Brett when he was struggling a week earlier.

Denise: "Hi, Brett! I didn't know you came here."

Brett: "Hi! It's nice to see you. I come here with Zeus every now and then - he loves being around other dogs."

Denise: "I'm glad we ran into each other. I hope you got the message I left for you."

Brett: "Yes, thanks, I did. Thanks for being there for me this weekend. I was having a tough time."

Denise: "How have things been in the last week?"

Brett: "I'm better. More good days than bad."

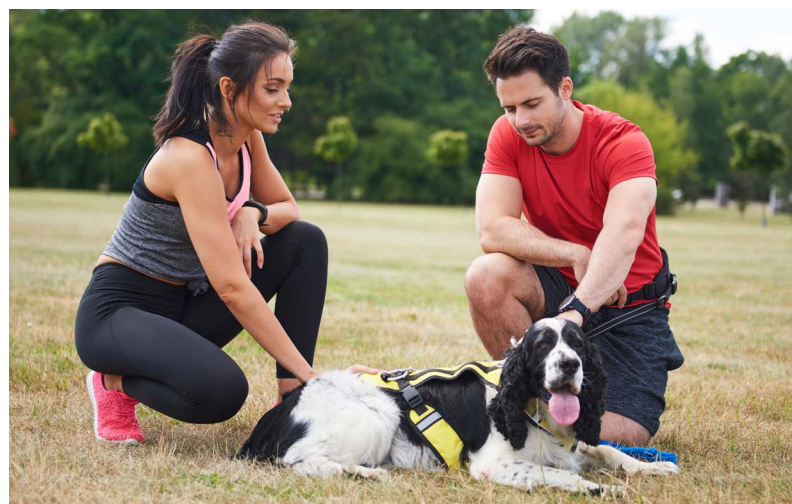
Denise [Validation]: "You know, I can tell. You don't look as tired. I remember you saying that you were too tired to feed Zeus. I'm glad you're out here walking with him."

Brett: "Me too! I also took your advice and I put my woodworker's knives in my locked toolbox."

Denise: "I'm glad. I just wanted to make sure you're safe, especially with all that was on your mind. I know you've never thought of suicide, but better to be safe than sorry."

Brett: "Sure. Thanks for looking out for me. It's so much easier for me to talk to you - one Vet to another. I also took your advice and have an appointment set up with my doctor. Hopefully, I can work with her to feel better in the long run."

Brett started to feel better after getting treatment. He is enjoying woodworking and his time with Zeus. He keeps his woodworking tools locked, just in case he has thoughts of hurting himself again.



Keeping Culture in Mind

Many Veterans identify with military and Veteran culture. This can include shared values about service, integrity, comradery, and teamwork. However, there are also other aspects of a Veteran's cultural identity which are relevant. Among others, this can include the Veteran's gender, religion, sexual identity, age, race and ethnicity. Veterans' cultural identity impacts how they think about getting help, mental health, suicide, and secure storage.

Religion:

One part of cultural identity is religion. Among service members 70% identify as Christians, 1% identify with an Eastern religion (e.g., Buddhism, Hinduism), 0.4% identify as Jewish and 0.4% identify as Muslim (religious identity on the remaining 28.2% is not known).¹⁹ Let's explore one way in which religious beliefs could affect Veterans with suicidal thoughts. Christianity, Judaism, and Islam teach that individuals should not end their own life. Suicidal thoughts for someone from these religions could cause shame. It may also be more difficult for them to open up about their thoughts of suicide, knowing that it is against their religious beliefs. This may lead them to distance themselves from their religious services and community and worsen their isolation.

Sexual identity:

Another part of cultural identity is sexual orientation: 2.8% of military service member and Veterans identify as LGBTQ+ (lesbian, gay, bisexual, transgender, queer and others). Veterans who identify as LGBTQ+ often experience stigma and discrimination.* Veterans who identify as LGBTQ+ may not have support from their families. A lifetime of stigma and discrimination leads to negative impacts on the individual. Studies show that while 2.4% of individuals in the general US population have attempted suicide, among LGB individuals alone, 17% have attempted suicide..

If you are concerned about Veterans who identify as LGBTQ+, show them that you respect their LGBTQ+ identity. Understand that they may not have support of their family. They may not trust the healthcare system due to past mistreatment. You can learn about LGBTQ+ resources at the VA and in the community. The VA has an LGBTQ+ health coordinator at medical centers.

Race and ethnicity:

A Veteran's race or ethnicity is also a part of their culture. Among those who identify as African American, Asian American, or Hispanic American, there is greater stigma about mental health conditions than among White Americans.²⁰ Greater stigma leads to greater reluctance to seek mental health services. Keep in mind the impact of stigma when talking about suicide and secure storage. Being educated about facts about suicide (e.g., reading this guide) will help you address myths and misinformation. Also, you may need to be more patient and check in with your friends as they may be more hesitant to talk with you or seek professional help.

**Many Veterans have been dishonorably discharged from the military due to their sexual identity. (If you or someone you know were dishonorably discharged because of sexual identity, you can have your discharge status changed. For instructions visit <https://www.va.gov/discharge-upgrade-instructions>.)*

Exercises To Practice Conversations About Secure Storage

Time to Practice

Why practice:

Conversations about suicide and secure storage of firearms can make people feel uneasy. Practice will make it easier if you need to talk about secure storage with another Veteran.

How to practice:

You can practice these skills alone, out loud to a pet, or with a friend. If the person you are practicing with wants to learn these skills, practice both roles, i.e., being the concerned friend and the Veteran thinking about suicide. Changing roles can also help you put yourself in your friend's shoes. You can practice the same or different scenarios each time. Practicing with more than one person will let you get more familiar with different responses.

After practice:

After you practice, think or talk about how the practice went. This will give you ideas on how you can improve these conversations in the future.

Practice Scenario #1

You regularly work out with a few Vets at your gym three times a week. One of your friends suddenly stops coming for several weeks, which is unusual. After about three weeks, you run into your friend in the parking lot. His clothes are wrinkled, and he is unshaven, which is unusual for him. Also, when you try to talk to him, he does not look you in the eye, and uses only short responses.

Exercise:

- Since your friend is being short in his responses, you choose to use open-ended questions to help him open up. What are some open-ended questions that you could ask your friend?
- After talking for a few minutes, your buddy shares that he and his husband have been arguing more, and he feels "hopeless." He also has been drinking more to handle the stress. How might you use reflections to provide support?
- You decide it is important to ask your friend if he is thinking about suicide. How would you ask about suicide?
- You know your friend has several firearms in the house. How would you talk with your friend about secure firearm storage?

After exercise questions

- What went well?
- What could have gone better?
- What would you do differently next time?

Practice Scenario #2

On Facebook you notice that another Veteran friend posted song lyrics that say, “All things come to an end,” and “Thanks for the good times.” This is not a typical post for this friend, and you feel concerned. You call your friend.

Exercise:

- Take a few moments to practice reaching out to your friend. Imagine your friend answering your phone call. What are some ways that you can start a conversation about the social media post?
- One reason you reached out was because of your concern that your friend may be thinking about suicide. How would you ask about suicide?
- Your friend confirms suicide has been a recent thought. You know this person has several firearms and medications in the house. How would you talk with your friend about secure storage?

After exercise questions:

- What went well?
- What could have gone better?
- What would you do different next time?

Create Your Own Practice Scenario:

You are not limited to these scenarios. You can come up with your own that could be the most realistic to Veterans in your life.

After exercise questions

- What went well?
- What could have gone better?
- What would you do different next time?



Time to Practice: Example Responses

Practice Scenario #1

What are some open-ended questions that you could ask your friend?

- *It's been a while since I saw you. I'm concerned. How have things been since we last met?*
- *It's not like you to miss workouts – What have you been up to?*

How might you use reflections to provide support?

- *I hear that it's been a rough time. That does sound challenging.*
- *Things have been difficult and it's hard to imagine them getting better. I can see how upsetting this must be.*

You decide it is important to ask your friend if he is thinking about suicide. How would you ask about suicide?

- *I hear how hopeless you are feeling. Sometimes when people feel especially hopeless, they may have thoughts of suicide. Have you had any thoughts of suicide?*
- *It sounds like you're in a rough place right now, have you been thinking about suicide?*

You know your friend has several firearms in the house. How would you talk with your friend about secure firearm storage?

- *Can we talk about your firearms? Where do you keep them?*
- *I'm worried about you having the firearms nearby when you're feeling so down. Where do you store them?*

Practice Scenario #2

Exercise:

What are some ways that you can start a conversation about the social media post?

- *Hey, I just saw your Facebook post. I'm worried about you – How are you doing?*
- *I was on Facebook and it looked like you're saying goodbye to everyone. What's going on?*

How would you ask about suicide?

- *Sometimes when people make comments like that, they are having thoughts of suicide. Are you thinking about suicide?*
- *Your post seemed like a goodbye. Have you been thinking about suicide?*

How would you talk with your friend about secure storage?

- *When someone is feeling especially bad, it is important to think about secure storage. That applies to firearms and medicine. Can we talk about where you are keeping your firearms? What about your medicines?*
- *I know you have a few firearms in your house. How are you storing them? Can we make a plan for storing them more safely?*



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