



CENTER OF EXCELLENCE
FOR SUICIDE PREVENTION

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FROM THE DIRECTOR

September is a time to underscore that we all play a vital role in suicide prevention throughout the year. Increased suicide prevention and intervention efforts are needed now more than ever in response to the COVID-19 pandemic. A [newly released national survey](#) shows that the majority of those surveyed (81%) say that, as a result of the pandemic, it's more important than ever to make suicide prevention a national priority. Additionally, a recent study by the CDC "[Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic](#)," found that elevated levels of adverse mental health conditions, substance use and suicidal ideation were reported in June 2020 among United States adults.

This month's newsletter focuses on "Maintaining Connections to Be There for Veterans" not only during Suicide Prevention Month, but beyond.

- Wilfred R. Pigeon, Ph.D.

National Suicide Hotline Designation Act of 2020

On July 16, 2020, the Federal Communications Commission (FCC) adopted rules to establish '988' as the new, nationwide, 3-digit phone number for all Americans in crisis to connect with suicide prevention and mental health crisis counselors. This amendment to the Communications Act of 1934 will require all phone service providers to direct all '988' calls to the existing National Suicide Prevention Lifeline, and subsequent Veterans Crisis Line, by July 16, 2022.

The "[National Suicide Hotline Designation Act of 2020](#)" was first introduced in the Senate in October 2019 and as of September 21, 2020, has officially passed in both the U.S. House of Representatives and Senate. The House passed several additional pieces of critical suicide prevention legislation this month:

[H.R. 1646](#) – HERO Act

[H.R. 4585](#) – Campaign to Prevent Suicide Act

[H.R. 4564](#) – Suicide Prevention
Lifeline Improvement Act of 2020

[H.R. 5619](#) – Suicide Prevention Act

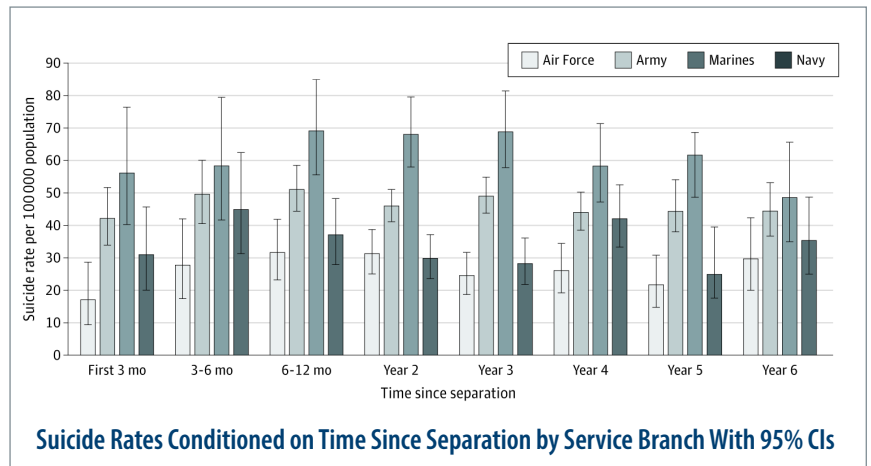


DATA & ANALYTICS DIVISION

Association of suicide risk with transition to civilian life among US military Service members

Although interest is high in addressing suicide mortality after the transition from military to civilian life, little is known about the risk factors associated with this transition.

A recent study conducted by members of CoE's Data & Analytics Core, Chandru Ravindran, MS, Sybil Morley, MPH and Brady Stephens, MS, examines the prevalence, patterns and associated demographic and military characteristics of suicide mortality among U.S. Service members after separation from military active status. The population-based cohort study analyzed demographic and military service data for nearly 2 million Service members who separated from active status between January 1, 2010, and December 31, 2017.



Suicide Rates Conditioned on Time Since Separation by Service Branch With 95% CIs

Results of this study indicate those who were male, were younger, had shorter lengths of service or were separated from the Marine Corps or Army had a higher risk of suicide after separation. Findings suggest that suicide rates increase after transition to civilian life and that awareness of demographic and military service characteristics may help prevent suicide among Veterans who are most at risk.



RESEARCH DIVISION

Care transitions to the community from Veterans Affairs nursing homes: Experiences of social connection and disconnection

Poor social functioning and related factors (social isolation, loneliness, lack of social support) are associated with greater risk for cognitive and functional decline, suicidal thoughts and behavior, and mortality in later life. Interactions with healthcare systems, including skilled nursing facility stays, are key periods for intervening in trajectories of declining social health. However, few intervention studies have targeted improving social health in older adults and even fewer have been conducted in nursing homes.

A new study, led by CoE's Kelsey Simons, Ph.D., LMSW, and Emily Bower, Ph.D., aimed to further knowledge of older Veterans' experiences who are transitioning to the community following care in a VHA nursing home (referred to as VHA Community Living Centers [CLCs]). Nationally, 74% of short-stay and 60% of long-stay residents of VHA's 123 CLCs are discharged to the community. The current cohort of Veterans who receive care from CLCs are a unique patient population: one that is predominantly male and often possesses a complex profile of medical conditions and mental health disorders (i.e. post-traumatic stress disorder, substance use disorders, and serious mental illnesses).

Study results identified a potential for increased social isolation and disengagement after discharge from CLCs. Nursing homes should integrate social functioning assessment for their residents, while extending care planning and transitional care to address patient-centered social functioning goals.

SLOTUS meets with CoE's Dr. Tracy Stecker during tour of Charleston VAMC

Wednesday, September 2, Second Lady Karen Pence, Lead PREVENTS Ambassador, joined by Acting Deputy Secretary of Veterans Affairs Pamela Powers, visited Charleston to learn more about Veteran suicide prevention efforts. Following a tour of the Ralph H. Johnson Veterans Affairs Medical Center, the Second Lady participated in a roundtable discussion with [CoE Co-Research Director Tracy Stecker, Ph.D.](#) and others. "I am inspired by the important work Dr. Stecker and the VAMC in providing quality mental health care for our veterans," quoted Mrs. Pence in the [official White House press briefing](#).

Dr. Stecker's work is focused on increasing Veteran treatment engagement. Currently, Dr. Stecker is researching the effectiveness of cognitive-behavioral therapy via phone to increase behavioral health treatment-seeking among Veterans at-risk of suicide.

"Why don't we have a system where people can actually call and talk to a provider?" asked Dr. Stecker in a news interview. "Talk about all their ambivalence. Talk about their concerns. Talk about what kind of treatments are available. Talk about what type of treatments they prefer and get that set up before coming in."



EDUCATION & DISSEMINATION DIVISION

Veterans Integration to Academic Leadership: Student Veterans challenges & triumphs in the classroom



The Veterans Integration to Academic Leadership (VITAL) program continues their webinar series with an upcoming, free offering on **Wednesday, October 14, 2pm EST.**

This session will allow participants to develop an understanding of the academic and personal challenges of student Veterans in higher education, and explore best practices for meeting those needs.

Free CEUs are available for the follow accreditation: JA IPCE, ANCC, NBCC, APA, ASWB, NYSED.

If you are a VA employee, you may register for this offering [through TMS](#). Non-VA staff may register [through TRAIN](#).

Subscribe to [VITAL's mailing list](#) for registration information and receive notifications of upcoming offerings to continue maintaining connections to be there for Veterans.

Suicide Prevention Awareness Resources: Beyond Suicide Prevention Month

VA Resources	Non-VA Resources
https://www.bethereforveterans.com	https://theactionalliance.org/bethere
https://www.va.gov/PREVENTS/index.asp	https://www.samhsa.gov/find-help/suicide-prevention
https://www.va.gov/health-care/health-needs-conditions/mental-health/suicide-prevention/	https://www.sprc.org
https://starttheconversation.veteranscrisisline.net/	https://www.samhsa.gov/smvf-ta-center
https://www.mirecc.va.gov/suicideprevention/index.asp	https://suicidology.org/
https://www.mirecc.va.gov/visn19/index.asp	https://suicidepreventionlifeline.org/