Suicide Prevention & Recovery in the Face of COVID-19

Tuesday ★ September 22nd ★ 9:30am-3:00pm MT

A VIRTUAL EVENT FOR VETERANS, SERVICE MEMBERS & ALL WHO SUPPORT THEM

#BeThere
Today’s Agenda

9:30am-10:00am (MT)
• Welcome & Opening Remarks

10:00am-11:00am (MT)
• Connectedness

11:00am-12:00pm (MT)
• Peer Support & Resiliency

12:00pm BREAK (MT)
• Featuring Music from Veteran Peer Musicians

1:00pm-2:00pm (MT)
• Safety Planning and Lethal Means Safety

2:00pm-3:00pm (MT)
• Postvention: Loss, Bereavement & Support

Issues connecting to Zoom?
Join via audio-only:
Dial: +1 346 248 7799
Meeting ID: 941 3608 3559
Disclaimer

This presentation is based on work supported, in part, by the Department of Veterans Affairs, but does not necessarily represent the views of the Department of Veterans Affairs or the United States Government.
Housekeeping Issues

Please mute your microphones- they will be automatically muted to limit possible distractions.

This event will be recorded and LIVE streamed on social media.

As a reminder for this public event, please make this a safe and respectful learning environment for all participants!

Q&A for participants: Please use the chat for any questions. Chat will be moderated, and questions will be presented to the panel.

Support/Resources: Suicide Prevention Case Managers will be available via chat during each session to provide resources and support as needed.

Take care of yourself. Mental health recovery and suicide can be challenging topics to discuss. Take regular breaks throughout the day and reach out for support if needed.

Presentation slides and event information located on Event Page: https://www.mirecc.va.gov/visn19/spsummit/2020summit.asp
Free, Confidential Support 24/7/365

Veterans Crisis Line | Military Crisis Line

1-800-273-8255 PRESS 1

Confidential chat at VeteransCrisisLine.net or text to 838255

- Veterans
- Service members
- Family members
- Friends
National Anthem
A Message from VA ECHCS Leadership
More than Ever Before:
SNAPSHOT OF SUICIDE RISK
Suicide as a National Problem

- Suicide is a national issue, with rising rates of suicide in the general population.
- Suicide rates are higher, and are rising faster, among Veterans than among non-Veteran adults.
- 10th leading cause of death in the U.S. (2nd cause of death in the world)
- Nearly one million people attempt suicide each year; One attempt every 35 seconds
- More than 45,000 U.S. deaths from suicide occur per year
- Every 12.3 minutes someone dies by suicide
- An estimated 135 surviving individuals are impacted for each suicide death.

Women attempt suicide 3 times more often than men.

Men die by suicide 4 times more often than women.

(Nearly 80% of all suicides)
Facts about Veteran suicide

• **18%** of all deaths by suicide among U.S. adults were Veterans
• There were more than **6,000** Veteran suicides each year from 2008 to 2016.
• In 2016, the suicide rate was **1.5 times greater** for Veterans than for non-Veteran adults, after adjusting for age and gender.
• **17** Veterans die by suicide every day
• **25%** of Veteran suicides have a history of previous suicide attempts
• More likely than the general population to use **firearms** as a means for suicide

**Veteran populations at risk**
- Younger Veterans
- Women Veterans
- Veterans in a period of transition
- Veterans with exposure to suicide
- Veterans with access to lethal means
2017 Key Data Points

The rate of suicide was 2.2 times higher among female Veterans compared with non-Veteran adult women.
* after accounting for differences in age

The rate of suicide was 1.3 times higher among male Veterans compared with non-Veteran adult men.
* after accounting for differences in age

Male Veterans ages 18–34 experienced the highest rates of suicide.

Male Veterans ages 55 and older experienced the highest count of suicide.

69% of all Veteran suicide deaths resulted from a firearm injury.
Veteran Populations At Risk

10% Of service member suicides are former Guard and Reserve Members

20% Is the increased risk of death by suicide for rural Veterans

81 Per 100,000 is the suicide rate among homeless Veterans

4.3% Of all suicides in 2014 involved opioids
In 2017, the suicide rate for Veterans was 1.5 times the rate for non-Veteran adults.
Colorado Counties Veteran Suicide Counts (2004-2018)

*El Paso (540)
*Jefferson
*Arapahoe
*Denver
*Larimer
*Adams
Weld
Boulder
Pueblo
Mesa
Douglas

Total 2,788 Veteran suicides

*Counties with highest Veteran suicides above 100 deaths

Link: Colorado Violent Death Reporting System Dashboard
Colorado Suicide Risk
36.9 per 100,000
(25.8 per 100k US)

- Higher rates of substance use impact on MH Outcomes
- Higher Concentration of Veterans/Active Duty (6 instillations)
- Population Increase (Construction/Extraction jobs with higher SI rates)
- Elevation (rendering some medication less effective)
- Barriers to Care Rural Areas
- Higher Gun Ownership

U.S. Department of Veterans Affairs
COVID-19 as additional risk

- Fear of positive test or exposure
- Fear of related stigma
- Increased isolation, social anxiety, or limited supports
- Financial stress, jobless, loss of income
- Veteran unemployment rate increased from 2.3% to 11.7%
- Risk of preexisting conditions and high-risk groups
- Long-term, lingering effects of COVID
- Limitations to bereavement related to COVID deaths and other losses
- Over 1,600 COVID related Veteran deaths
- 91% increase in firearms sales in US since start of pandemic
Not one issue, organization, person, intervention will prevent suicide

SUICIDE IS PREVENTABLE…
Anchors of Hope

There has been a **declining rate of suicide** among Veterans in recent VHA care with a diagnosis of depression.

Evaluation of VA outpatient mental health programs indicates that after 3 months Veterans who initially reported suicidal ideation were 1.9 times more likely to report **less severe** suicidal ideation than to report the same level. Reductions in suicidal ideation were also documented for Veterans who had received VA acute inpatient mental health services.

Among women Veterans who were VHA users, there was **no increase** in the suicide rate or the number of suicide deaths from 2016 to 2017.

VA is a **national leader in suicide prevention** with advances in universal suicide risk screening, Veterans Crisis Line performance, primary care mental health integration (PCMHI), and same day mental health services.

And yet, we need to do more. We cannot do this work without each of you.
50% of Veterans do not use VA benefits/healthcare

- Veterans who do not use VA benefits or healthcare: 10.2 million
- Veterans who use at least one VA benefit or healthcare service: 9.7 million

Only about 30 percent of all Veterans use VA healthcare.

11 of 17 Veteran suicides per day not enrolled in VA care

Goal is not to get every Veteran enrolled in VA care, but rather to equip communities to help Veterans get the right care, whenever and wherever they need it the most.
Suicide Prevention is Everyone’s Business

- Continue to increase impact of Office for Suicide Prevention
- Reach Veterans and their families
- Develop innovative prevention strategies
- Change the conversation around suicide
- Build community engagement
Join Us in Action

• Let us come together and apply multiple approaches to prevent suicide.
• Suicide prevention involves meaningful connections, one person at a time.
  • Learn about suicide and prevention resources: www.mentalhealth.va.gov/suicide_prevention/resources.asp.
  • Apply the data to guide prevention strategies and initiatives.
  • Promote S.A.V.E. training: https://psycharmor.org/courses/s-a-v-e/.
  • Post the Veterans Crisis Line number (1-800-273-8255, press 1) in your offices and newsletters.
• Share with Veteran employees and community partners that help is always available.
  • In employee meetings and communications, talk about:
    • stress management, self-care, risk factors, and mental health.

#BeThere: We all have a role to play in preventing suicide among Veterans and service members in our communities.
Thank you for joining us today!

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U.S. Department of Veterans Affairs
Veterans Health Administration
Eastern Colorado Health Care System