

Advancing Suicide Prevention Efforts Across VA

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Anchors of Hope



Anchor 1: 399 fewer Veterans died from suicide in 2019 than in 2018.

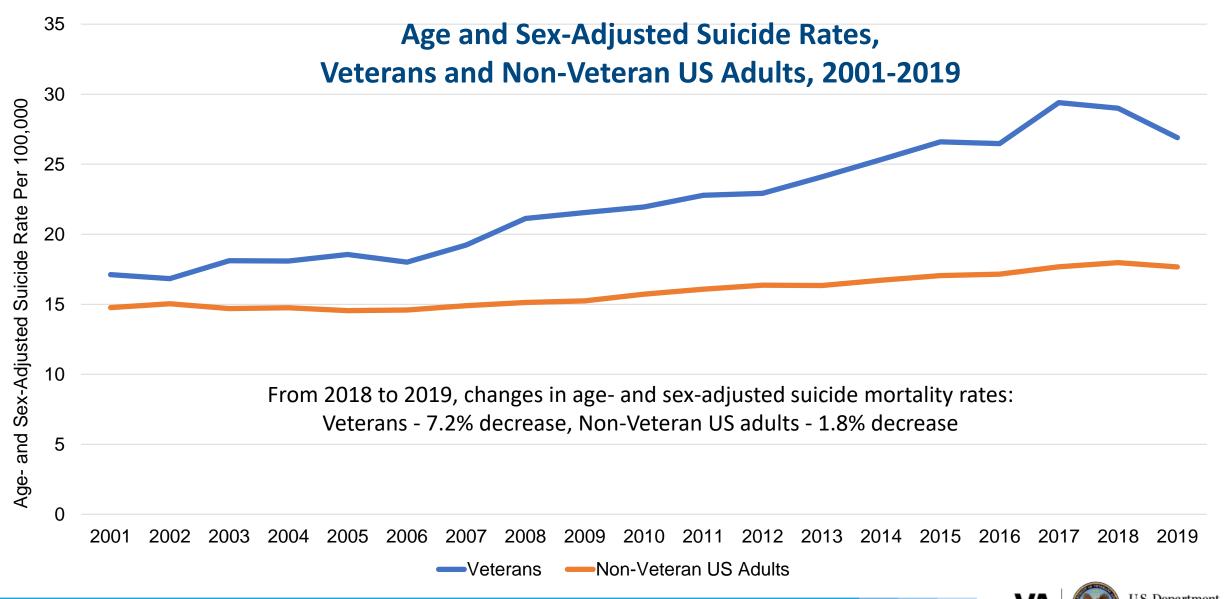
Anchor 2: From 2005 to 2018, identified Veteran suicides increased on average by 48 deaths per year. A reversal totaling 399 lives within one year is unprecedented, dating back to 2001.

Anchor 3: Decrease in the adjusted suicide rate for Veterans from 2018 to 2019 (7%) was larger than any observed for Veterans 2001 through 2018. Veteran rate of decrease (7.2%) exceeded by four times the non-Veteran population decrease (1.8%)

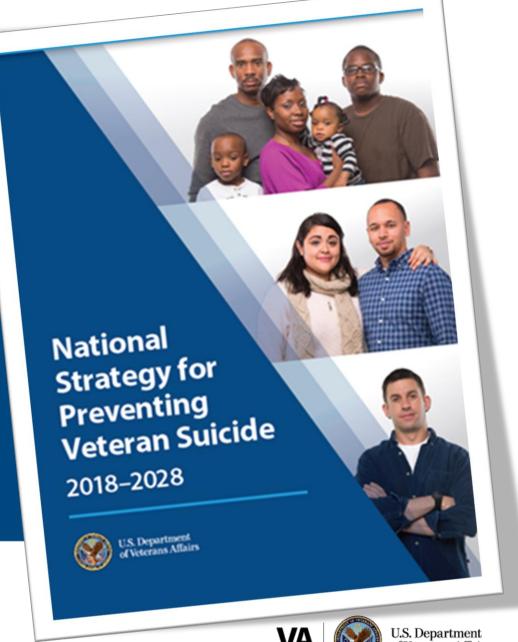
Anchor 4: There was a nearly 13% one-year (unadjusted) rate decrease for female Veterans, which represents the largest rate decrease for Women Veterans in 17 years.

Anchor 5: COVID-19-related data continues to emerge and clarify, but data thus far does not indicate an increase in Veteran suicide-related behaviors.





VA's Public Health Approach



VA's Public Health Strategy

Combines partnerships with communities to implement tailored, local prevention plans while also focusing on evidence-based clinical strategies for intervention. Our approach focuses on both what we can do now, in the short term, and over the long term, to implement VA's <u>National Strategy for Preventing Veteran Suicide</u>.



KEY TENETS







Everyone has a role to play in suicide prevention.

Suicide Prevention 2.0

Community Engagement and Partnership Coordinators (CEPCs) • VISN-Wide Community Prevention Pilots (Community Coalition Building) • Together with Veterans (Veteran-to-Veteran Building) • Governor's/Mayor's Challenge (State-Driven Suicide Prevention Planning)

Clinically-Based Intervention Examples

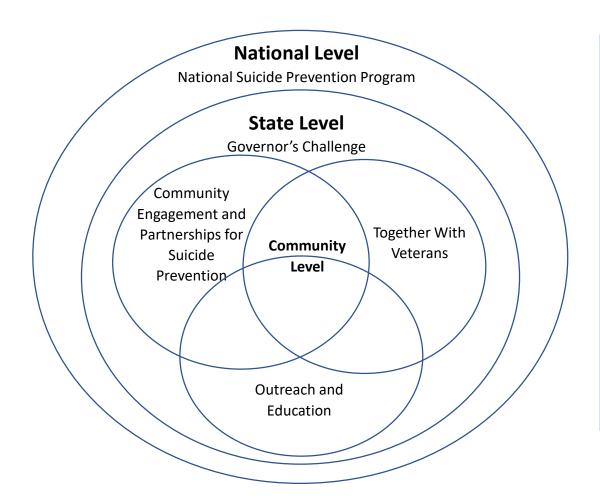
Evidence-Based Psychotherapies
 (CBT-SP, DBT, PST, etc) — Across the Nation

Foundation of Adequate Mental Health Staffing

(7.72 outpatient MH FTEE/1000 Veterans in outpatient mental health)



Community-Based Interventions for Suicide Prevention Model



Unifying model, from national to community levels, for all community-based efforts to end Veteran suicide.

The Governor's Challenge
Together with Veterans

Community Engagement and Partnership for Suicide Prevention



Governor's Challenge States

2019

- Arizona
- Colorado
- Kansas
- Montana
- **New Hampshire**
- Texas
- Virginia

2020

- Alabama
- Florida
- Georgia
- Illinois
- Kentucky
- Maryland
- Michigan
- Minnesota
- Nevada
- New York

- North Carolina
- Ohio
- Oklahoma
- Pennsylvania
- Rhode Island
- South Carolina
- Tennessee
- Washington
- West Virginia
- Wisconsin

2021 new additions!

- Arkansas
- Louisiana
- Massachusetts
- Mississippi
- Missouri
- New Jersey
- Utah
- Wyoming

Partnership between VA and HHS Substance Abuse and Mental Health Services Administration (SAMHSA).



Emerging Lines of Effort with Each of You



Identify Service Members, Veterans, and their Families and Screen for Suicide Risk

- Identifying Veterans "Ask the Question" enables culturally competent care and access to resources; allows community members, families, and community service providers to connect individuals to appropriate care
- Suicide risk screening in healthcare settings allows providers to recognize and prevent self-harm



Promote Connectedness and Improve Care Transitions

- Connectedness to others (including family members, co-workers, community organizations, and social institutions) is an important protective factor
- Providing caring contacts upon discharge from one setting to another can reduce suicide attempts and increase compliance with treatment recommendations



Increase Lethal Means Safety and Safety Planning

- Limiting access to lethal means during periods of crisis can make it more likely that the person will delay or survive a suicide
- Completing a personal safety plan is a clinical intervention that can help individuals manage and decrease suicidal feelings and help them stay safe when these feelings reoccur





Questions?