

VISN 8: Suicide Prevention Awareness - *Don't Wait. Reach Out.*

Presentation will begin shortly

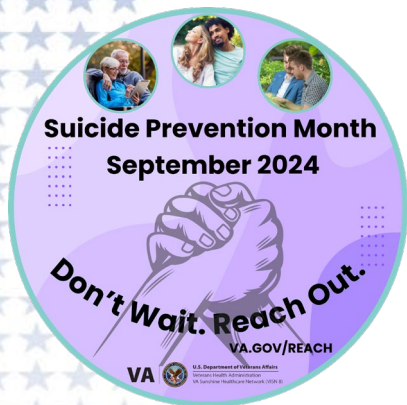


VISN 8: Suicide Prevention Awareness- *Don't Wait. Reach Out.*



September 10, 2024





WELCOME

Opening Remarks

Carri-Ann Gibson, MD
VISN 8 Chief Mental Health Officer

Welcoming Remarks

David Isaacks, FACHE,
VISN 8 Network Director

Chona Macalindong, MD
VISN 8 Deputy Chief
Medical Officer

Presentation

Janet Gates, LISW-CP
VISN 8 Deputy Chief MH Officer
VISN 8 Suicide Prevention Lead

Caribel Leyva-Romero, MSW
Community Engagement and
Partnership Coordinator
VA Caribbean Healthcare System

VISN 8: Suicide Prevention Awareness- Don't Wait. Reach Out.

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Let's take a moment

- Suicide is complex.
- More than 49,000 Americans die by suicide each year.
- For each death, approximately 135 people are impacted.
- Thank YOU for being a part of suicide prevention efforts.



Over
49,000
people died by
suicide in 2022



1 death every
11 minutes

Many adults think about
suicide or attempt suicide

13.2 million
Seriously thought about suicide

3.8 million
Made a plan for suicide

1.6 million
Attempted suicide

Why is this presentation of interest to YOU?

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Topics

1. Who is at risk?
2. Contributing Factors Increasing Risk
3. Engaging with the Community
4. Resources - VA & Community



Overview of Suicide Prevention Program

- Suicide Prevention Teams at every VA facility
- Alerts for Healthcare Providers in Electronic Health Record for Veterans identified as High Risk for Suicide
- Suicide Prevention Staff review all reported suicidal behaviors and overdose events
- Safety Planning
- Outreach and Awareness Events
- Community Based Intervention Programs
 - Service Member, Veteran, Family (SMVF) Events
 - National Center for PTSD – mobile apps
 - Community Engagement and Partnership Coordinators
 - Governor’s Challenge
 - SAMHSA
- **Veterans Crisis Line (Dial 988, then Press 1)**
 - Call, Text, On-line Chat



Which Veterans need to be screened for risk of suicide?



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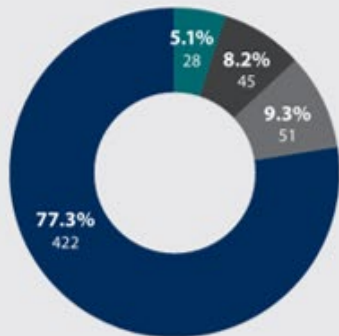
Why screen all Veterans engaged in VA Healthcare for risk of suicide?

- Anyone can have thoughts of suicide.
- A Veteran may present to medical appointment or ED and have unreported suicidal thoughts.
- Veterans are at higher risk for suicide compared to the general population.

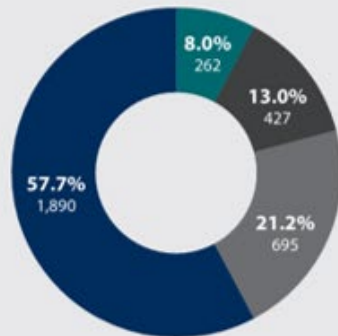
Lethal Means Safety Matters



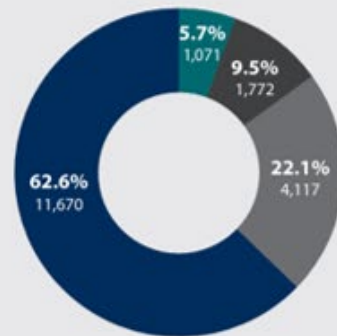
Florida Veteran and Total Florida, Southern Region, and National Suicide Deaths by Method,^d 2021



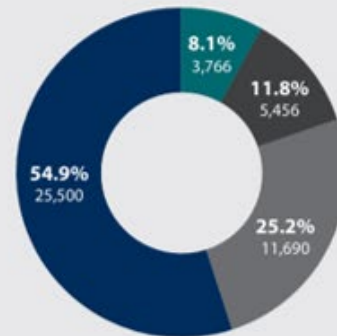
Florida Veteran Suicides



Florida Total Suicides



Southern Region Suicides



National Suicides

- Firearms
- Suffocation
- Poisoning
- Other Suicide
- Other and Low-Count Methods^e

Suicide risk screening is critical in non-mental health settings



- **In the year prior to a suicide death:**
 - **75%** of suicide decedents had contact with their primary care provider (PCP) compared to approximately one-third with mental health services over the prior year; and **45%** of suicide decedents had contact with their PCP within **one month** of the suicide.¹
 - 50% of suicide decedents did NOT have a mental health diagnosis and the most common visit type was with medical specialty and primary care.²
 - 39% of suicide decedents had received medical care in an Emergency Department.³

With over 32% of Veterans only seeking care in 1 service area, universal screening is key to reaching all Veterans who may be at increased risk regardless of where they receive their care across the enterprise



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Who can screen for risk of suicide?



- Medical Doctors
- Psychologists
- Social Workers
- Nurses
- Vocational Rehabilitation Specialist
- Chaplains
- Peer Support Specialist
- Law Enforcement Officers
- School Teachers & Counselors
- ...basically everyone, including **YOU**



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They said Yes. **Now what?**

Comprehensive evaluation is needed following a positive suicide risk screening.

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Risk Factors

- Prior suicide attempt
- Mental health issues
- Substance abuse
- Access to lethal means
- Recent loss
- Legal or financial challenges
- Relationship issues
- Unemployment
- Homelessness

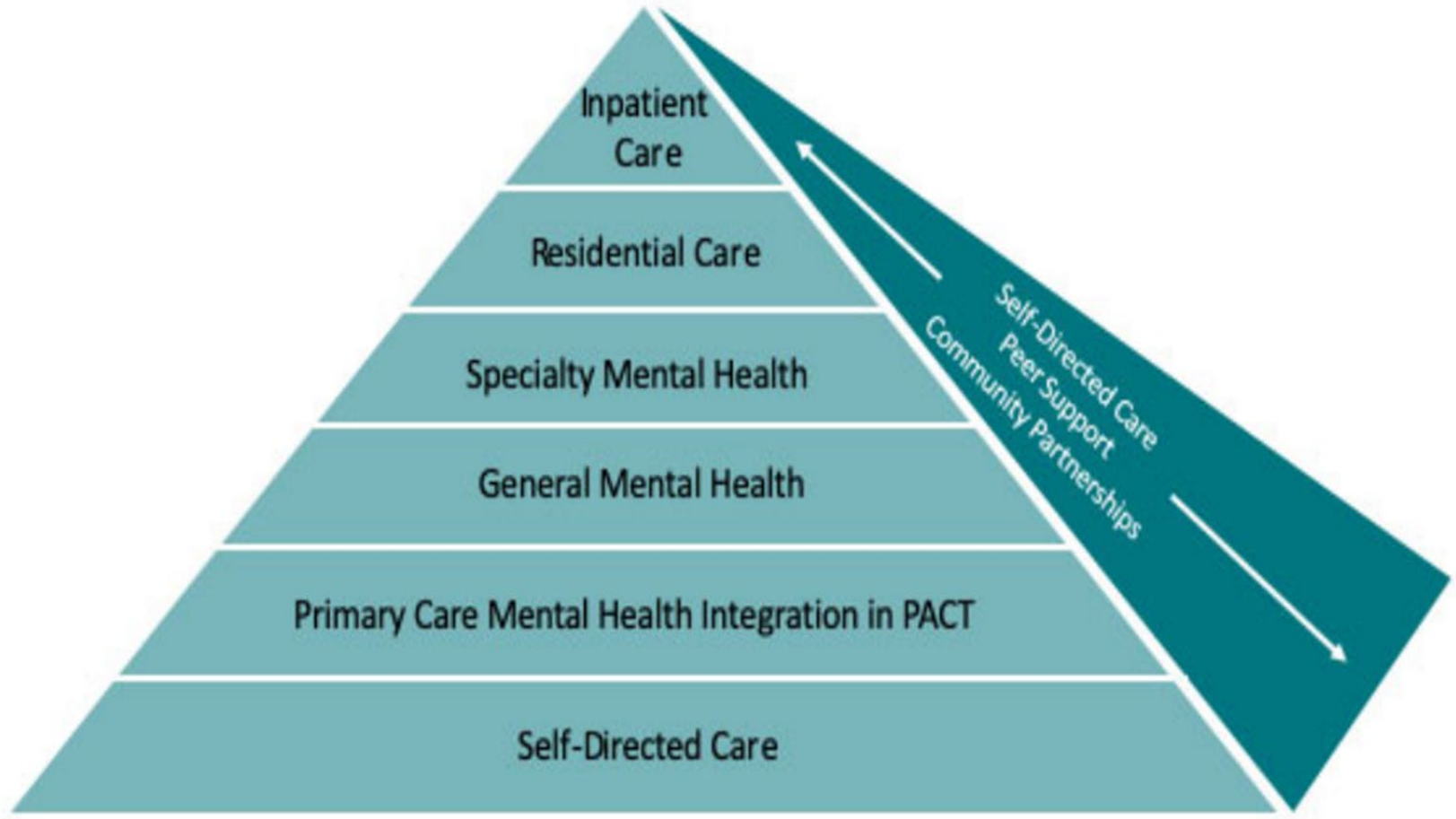
Protective Factors

- Access to mental health care
- Sense of Connectedness
- Problem-solving skills
- Sense of spirituality
- Mission or purpose
- Physical Health
- Employment
- Social and emotional well-being



Goal: Minimize risk factors and boost protective factors

Mental Health Pyramid of Care





Mental Health Care

- Collaborative
- Veteran Centered
- Evidence Based Treatments
- Suicide Prevention Interventions

TAKING CARE OF
YOURSELF
DOESN'T MEAN
ME FIRST,

it means me too.

-L.R. Knost

TYPES OF SELF-CARE AND SOME EXAMPLES



Mental
Self-Care

Reading a
book

Solving a
puzzle

Engaging
in self-
compassion



Physical
Self-Care

Getting
enough sleep

Exercising

Taking any
prescribed
medication



Emotional
Self-Care

Socialise

Write daily
gratitude

Attend a
therapy
session



Spiritual
Self-Care

Meditation

Attend a
religious
service

Mindfulness
sessions



Social
Self-Care

Coffee with
friends

Phoning your
parents for a
catch-up

After-work
meal with
colleagues

A photograph of a garden with various flowers, including purple and white daisies, and a dark structure in the background. The text is overlaid on the image.

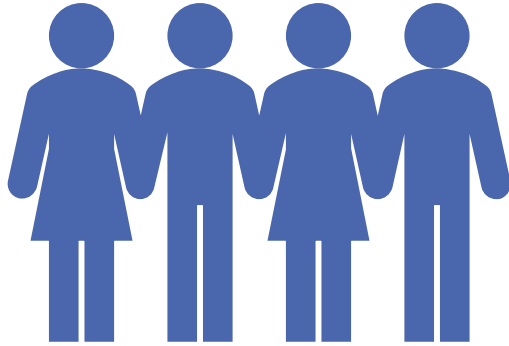
**Finding ways to relax
can help manage stress.
Veterans, take a
moment to relax.**

Outpatient Mental Health Services



- Same Day Access
- Primary Care MH Integration Program
- Behavioral Health Interdisciplinary Program Teams
- Tele-Mental Health
- Evidence Based Psychotherapies
- Special Focus Programs

Specialty Mental Health Services



- LGBTQ+
- PTSD / MST
- Marriage and Family Therapy / Intimate Partner Violence
- Peer Support / Veterans Mental Health Council
- Eating Disorders
- Substance Use Disorders
- Vocational Rehabilitation
- Serious Mental Illness Re-engagement (SMI)

VA Domiciliary Care

Residential Rehabilitation Treatment

- Mental Health
- Substance Use
- Psychosocial Needs
- Homeless Veterans
- Substance Abuse
- Military Sexual Trauma
- Post Traumatic Stress Disorder
- Vocational Rehabilitation Programs



Inpatient MH Services

- MH treatment for individuals unable to maintain safety independently
- Veterans are treated with dignity
- Coordinate with family, community resources, and VA services
- Provide support during transitions in level of care
- Follow-up contacts over the next month

VA Mental Health Services | Veterans Affairs

Mental Health Continuum



Angry Outbursts
Aggression
Thoughts of Suicide
Constant fatigue
Substance, gambling, or
other addictions

Anxiety
Pervasively hopeless
Negative attitude
Poor concentration
Avoidance
Increasing substance use

Irritable
Forgetful
Trouble Sleeping
Intrusive thoughts
Low Energy
Decreased activity

Normal mood fluctuations
Sense of humor
Performing well
Few sleep difficulties
Physically active
No substance use



Don't Wait. Reach Out.

Help reduce
the stigma

Ask the
Question

Promote
Connection

Know the
warning signs

Encourage
treatment
engagement

Post on your social
media accounts, using
#SuicidePrevention,
#SuicideAwareness,
#VeteransCrisisLine

Contributing Factors

Sleep Disturbances

Substance Use

Chronic Pain



Sleep Disturbances and Suicide Risk

- Sleep disturbances may increase suicide risk.
- Insomnia and nightmares are risk factors for suicide, independent of other known risk factors.
- Other sleep disturbances, significantly associated with suicidal ideation but not necessarily with other suicidal behavior:
 - Nightmares
 - Sleep apnea
 - Restless leg syndrome
 - Nocturnal wakefulness
 - Shift work

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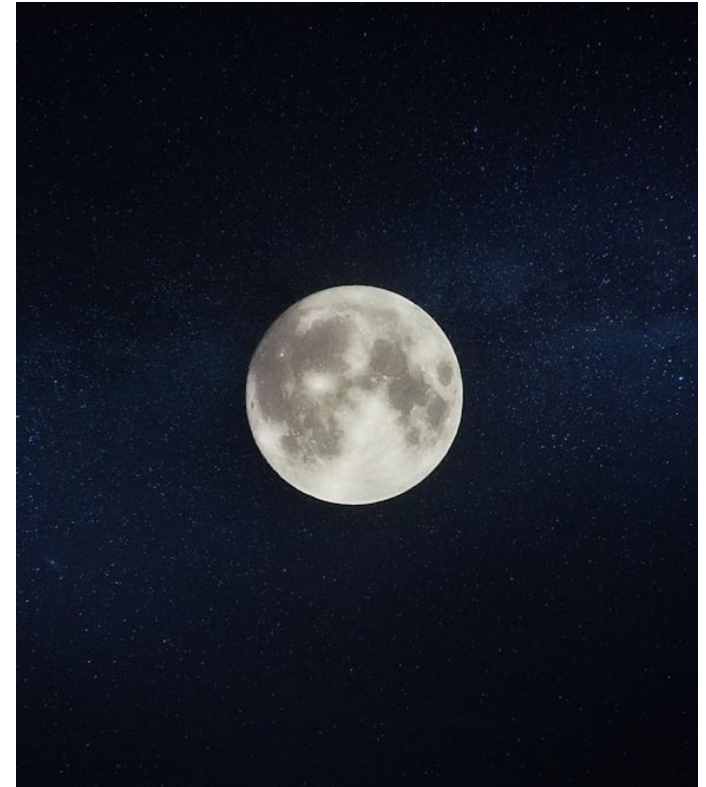


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Sleep Disturbances and Suicide Risk

- Those with insomnia and a mental health condition are significantly more likely to attempt suicide than those with neither.
- Behavioral treatment for insomnia is recommended as a first-line treatment.
- Assessing and treating sleep disturbances may prevent suicide.



Alcohol Use Disorder



- Alcohol use disorder (AUD) is a **type of substance use disorder (SUD)**
- AUD is a well-established **risk factor** for suicide attempt and death
- When compared with civilians, Veterans have a similar or **slightly elevated** overall prevalence of AUD.
- Veterans **ages 18-25** have markedly elevated rates of AUD relative to older Veterans

Alcohol Use Disorder: Risk Factors

- **Nonroutine discharge** from military service for misconduct or disqualification were associated with elevated risk for AUD, suicidal ideation and behaviors.
- **Hispanic Veterans** with AUD have reported worse physical health, cognitive functioning, and quality of life when compared to Black and White Veterans.
- **Young** age, higher **pre-pandemic alcohol use**, and **COVID-19** related stressors were associated with higher probability of AUD among Veterans during the COVID-19 pandemic.

AUD and PTSD

- Veterans who screen positive for both probable AUD and PTSD were **three times more likely** to have a history of suicide attempts, more likely to screen positive for major depression and generalized anxiety disorder and may be at an increased risk of suicide when compared to Veterans who screen positive for probable AUD alone.
- Veterans with a diagnosis of PTSD or PTSD and AUD **had lower social connectedness and protective psychosocial scores** than Veterans with a diagnosis of AUD alone.
- **Male Veterans** with lifetime AUD have **increased odds** of screening positive for PTSD compared to male Veterans who drink moderately.
- **Female Veterans** who reported current hazardous drinking levels had a **higher risk** of suicidality than those who reported moderate drinking levels with no histories of AUD
- The interaction between **PTSD and AUD is a stronger predictor** of intentional self-harm for female VHA patients than male VHA patients.



Key Takeaways

Sleep Disorders are associated with increased risk of suicide.

When compared with civilians, Veterans have a similar or slightly elevated overall prevalence of AUD.

Veterans aged 18-25 have elevated rates of AUD compared to older Veterans.

AUD is a well-established risk factor for suicide attempt and death.

A current diagnosis of AUD is associated with a greater risk of suicide and several mental health outcomes among women Veterans than among men Veterans.

Substance Use – Prevalence and Risk Factors

Substance Use Disorder (SUD) can increase suicide risk.

SUD is common among Veterans.

Veterans have SUD about as often as, or slightly more often than civilians.

Compared with civilians:

- Younger Veterans have higher rates of heavy drinking and aberrant use of prescription medication.
- Older Veterans have lower rates of heavy drinking and aberrant use of prescription medication.

When tobacco use is excluded, alcohol and cannabis are the most used substances among Veterans.

SUD is treatable.

Clinicians can help patients get the treatment they need to reduce suicide risk.



Substance Use – Prevalence and Risk Factors

Veterans with AUD are more likely to have anxiety disorders, drug use disorders, and be at higher risk for suicide than Veterans without AUD.⁶

Veterans with certain PTSD symptoms may be more likely to engage in risky substance use, including:

- **Hyperarousal symptoms:** more likely to engage in high-risk drug use⁷
- **Avoidance symptoms:** more likely to engage in high-risk alcohol use⁷



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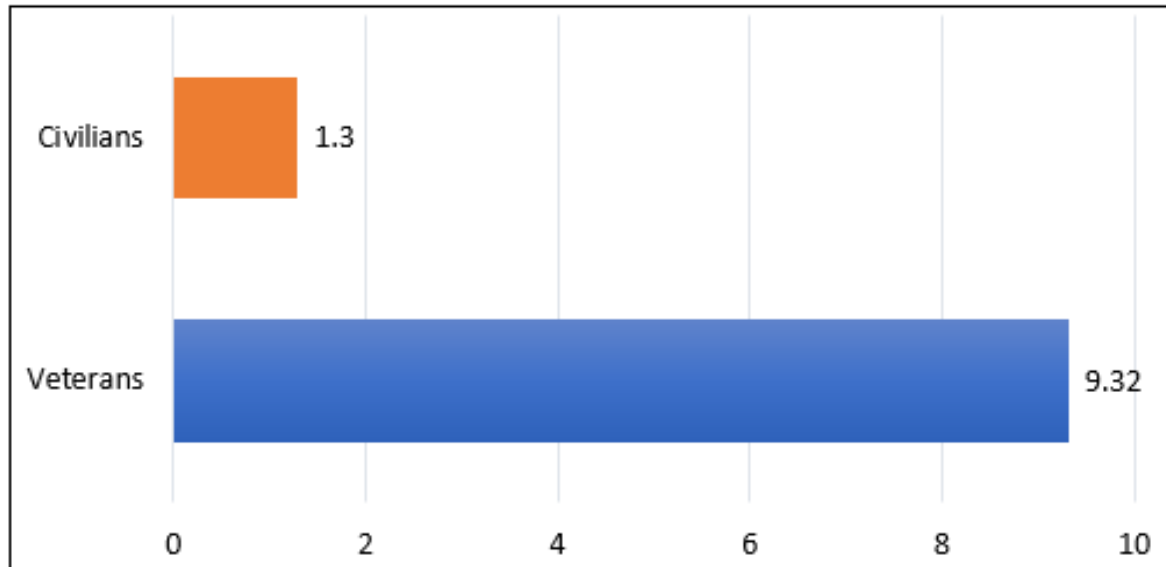


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Substance Use – Suicide Risk

- The rate of suicidal ideation was **9.3 times higher** among Veterans who reported drug problems than among those who did not, a difference in rate significantly greater than that found among civilians.



Rate Ratio for Drug Problems as a Predictor for Suicidal Ideation in Afghanistan/Iraq War Veterans and civilians 18-34 years old

Chronic Pain and Suicide Risk

- Substantial evidence that links Chronic Pain (regardless of type) to suicide. **Individuals with chronic pain are at least 2x as likely** to report suicidal behaviors or to complete suicide
- Many people are prescribed medications containing opioids for treating pain, often after an injury or surgery. Most **opioids** are used to treat pain that is moderate to severe. Mild (low-level) pain can usually be treated with non-opioid medications like paracetamol, aspirin and ibuprofen.
- The only sociodemographic factor found to be associated with suicidality in individuals with chronic pain was being **unemployed/disabled**
- Depressive symptoms, anger problems, harmful habits (smoking, ETOH, substance use), childhood or adulthood adversities, and family history of depression / suicide were all also identified as general **risk factors**.
- **Psychosocial factors** (mental defeat, pain catastrophizing, hopelessness, perceived burdensomeness, and thwarted belongingness) associated with suicidality outcomes – of which targeted interventions might positively impact.



Substance Use – Opioids and Other Prescription Substances

Opioids have a stronger effect on suicidal ideation and suicide attempts than other substances.

- Among Veterans, opioid use disorder (OUD) has one of the **highest** associated rates of suicide of the SUDs.
- People on a prescription opioid regimen, as well as those with OUD, who have **co-occurring** psychiatric conditions are at **increased risk** for suicide.
- Veterans with **elevated symptoms** of depression, suicidal ideation, pain interference, or pain severity had **elevated rates** of overdose risk behaviors in the prior month.

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Opioid Use and Suicide Risk

- Many people are prescribed medications containing opioids for treating **moderate to severe pain**, often after an injury or surgery.
 - Mild (low-level) pain can usually be treated with non-opioid medications.
- As opioids are sold under brand names, many people who are prescribed these drugs **do not realize** they are taking an opioid.
- Many people also don't realize that **medicines prescribed** by their doctor **can be dangerous**.
- People with opioid use disorder (OUD) are **13 times** more likely than those who do not have the disorder to die by suicide

Issue

People with severe or chronic pain are at increased risk for suicide.^{1,2,3} But prescription opioids and their illicit relatives confer their own suicide risk and can be used to attempt suicide; they also pose the risk of unintentional overdose.^{4,5,6,7,8,9,10}

Opioid Overdose

- Overdose occurs when **a person's body has a severely harmful reaction** to taking too much of a drug or a combination of different drugs.
- It's possible to overdose on all types of drugs. But opioid overdoses are particularly dangerous. This is because they **slow down a person's breathing**.
- **It can be hard to know** when a person is having an opioid overdose because they may seem to be sleeping. If a person is having an opioid overdose, their breathing slows to dangerous levels. This can cause brain damage and, in some cases, death.
- **Not everyone has the same risk of overdose.** Different people will have different risks, depending on the type of opioid that they're taking, how long they've been taking it, their height and weight, and so on.

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Key Risk Factors for Opioid Overdose

- Higher-risk practices like injecting
- Using opioids again after stopping for a while
- Chronic health conditions such as obesity or sleep apnea
- Dependence on opioids
- Using high-dose (strong) opioids
- Using opioids over the long term
- Not sticking to the prescribed opioid dose or purpose
- Using other drugs such as benzodiazepines, alcohol or other sedatives

Opioid Overdose - Naloxone

- **Naloxone** is a medicine that rapidly reverses and opioid overdose.
- Naloxone can quickly restore normal breathing to a person if their breathing has slowed or stopped because of an opioid overdose.
- Naloxone has no effect on someone who does not have opioids in their system, and it is not a treatment for opioid use disorder.
- Naloxone is like a fire extinguisher—**everyone at risk for an opioid overdose should have one.**



**At-risk Veteran Health Administration (VHA)
patients can get naloxone for FREE—no co-pay.**

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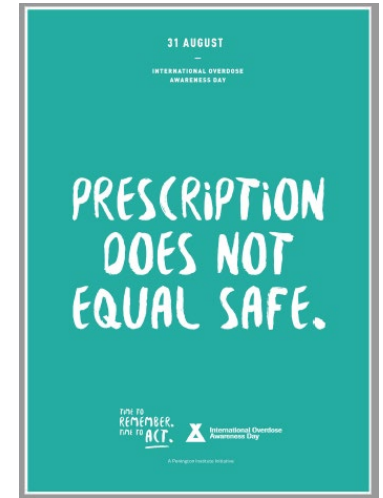
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Opioid Dependence and Addiction

Contributing Factors

- History of dependence or misuse of opioids or other drugs
 - History of mental illness
 - Chronic pain
 - Childhood trauma
 - Being prescribed higher doses of opioids for a longer time
- Anyone can become dependent on opioids but these are known factors that increase your risk. Not everyone who has chronic pain or a history of misuse will become dependent.
 - Dependence and addiction are also highly stigmatized so people who are dependent or addicted may experience discrimination from other people, health services or police. This can make people feel ashamed and prevent them asking for help. Dependence or addiction is a medical condition that many people struggle with. **People should not be made to feel ashamed for experiencing dependence or seeking help.**

People who are dependent or addicted still have the right to have their pain treated and to be given the best healthcare for their needs.



Medication Assisted Treatment (MAT)

- There's lots of help available for people who are dependent on opioids. The types of help available include getting support, learning how to change your behavior or taking medications to reduce cravings and prevent withdrawal.
- There is no single treatment that is perfect for everybody. Different treatment types suit different people.
- A lot of people struggle with opioid dependence and addiction. **Seeking treatment is a normal and effective** way for them to manage, reduce or stop their opioid use.
- Opioid dependence and addiction can be an ongoing (chronic) condition and can require long-term treatment and management.
- MAT allows people to:
 - Stop or significantly reduce their use of other opioids
 - Stop or reduce harmful drug-taking practices
 - Save money – methadone and buprenorphine tend to cost much less than other opioids



Key Takeaways

SUD can increase suicide risk and is common in Veterans.

Veterans who are most likely to have SUD are male, ages 18-34, unemployed, and are divorced, widowed or never married.

When compared to male Veterans, female Veterans have a higher association between increased suicide risk and SUD.

Opioids have a stronger effect on suicidal ideation and suicide attempts than other substances.

Ask about Medication Assisted Treatment and Naloxone.

Don't Wait. Reach Out.

Words Matter -
Use non-judgmental
language

Ask your
provider about
sleep health.

Help connect
Veterans to VA
resources

Ask how
substance use is
impacting their
life

Ask about
treatment
options

Remember those
who have passed
away due to
overdose

[Watch "the Bravest Thing" PSA](#)



Engaging With The Community

Community Based Interventions – Community Engagement and Partnership Coordinators

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 [National Strategy for Preventing Veteran Suicide](#).

KEY TENETS

1

Suicide is preventable.

2

Suicide prevention requires a public health approach, combining clinical and community-based approaches.

3

Everyone has a role to play in suicide prevention.

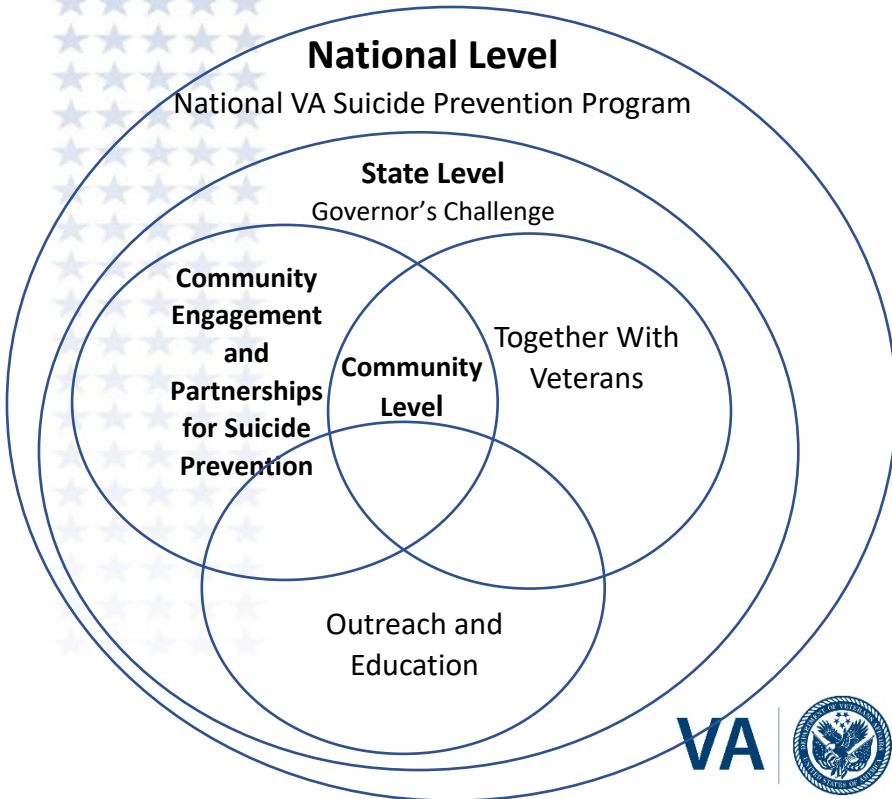
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Community Based Interventions



Community-Based Interventions for Suicide Prevention (CBI-SP) serves as unifying model, from national to community levels, for all community-based efforts to end Veteran suicide.

- ***The Governor's Challenge*** is a collaboration with VA and SAMHSA where state policy makers partner with local leaders to implement a comprehensive suicide prevention plan.
- ***Together with Veterans*** focused on Veteran-to-Veteran coalition building and Veteran leadership development for suicide prevention
- ***Community Engagement and Partnerships for Suicide Prevention (VISN Expansion)*** is focused on facilitating and empowering communities to form diverse coalitions working to end Veteran suicide.

Focused Priority Areas Across CBI-SP Unifying Model



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



Promote Connectedness and Improve Care Transitions



Increase Lethal Means Safety and Safety Planning

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Community Engagement and Partnership Coordinator

The CEPC serves a subject matter expert of public health approaches, coalition development and facilitation, and other community-based models for Veteran suicide prevention.

Key roles of the CEPC:

- Develop, facilitate, and strengthen evidence-informed practices at community, state, and VISN levels
- Collaborate with VA programs and community partners
- Provide leadership for coalition management
- Disseminate program evaluation and surveillance data



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Effective Community-Based Suicide Prevention

For successful coalition building, it is important that all members actively participate in:

- Developing Shared Vision
- Needs Assessment
- Organizational Capacity
- Planning
- Implementation
- Evaluation
- Sustainability



Community Engagement and Partnerships Program: Anticipated Outcomes

Short-Term Objectives

- Enhanced suicide prevention networks
- Increased engagement with Veterans
- Increased reach and adoption of CBI-SP
- Reduced gaps in community-based suicide prevention systems
- Improved community climate outcomes

Intermediate Objectives

- Increased formal help-seeking / use of care
- Increased referrals from multiple sources
- Improved treatment engagement and retention among Veterans seeking care
- Enhanced community collaboration regarding Veteran services and suicide prevention
- Increased access to safe firearms storage options
- Increased willingness to discuss and use safe firearms storage

Population Impact

- Reduced Veteran suicide deaths and attempts
- Reduced all-cause mortality
- Reduced suicide ideation



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VISN 8 Highlights CEPC's



- Caring Contacts, a VA endorsed activity, is being introduced to the community, as a means for some post discharge engagement, utilizing peers and veteran students as part of the coalition effort.
- Mental Wellness Coalition of Marion County-partnering with Hearts4Minds to create a “Mural with Meaning”
- Marion County: Equine Coalition started. The group would like to begin organizing outreach events to involve the Veteran, their family, and the horses.
- Gilchrist County: Coffee Socials are being expanded into a sub-committee to offer “pick me-up/thinking of you” cards to Veterans in the county.
- Thomas County Georgia Crisis Intercept Mapping workshop that took place in early March a coalition!: Thomas County Veterans Support and Resilience Network has distributed hard cards with resources, is working on a flyer to encourage healthcare, employers, and other community members to “Ask The Question” and are actively planning events in November for veterans day to include a veteran round table and resource fair.



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VISN 8 Highlights CEPC's


January - March Issue 2024

HAPPY
New Year's

Orlando
**ARMOR Program
Quarterly Newsletter**


Aligned with VA's Suicide Prevention strategies, the At Risk Monitoring and Outreach (ARMOR) Program provides a comprehensive continuum of mental health care and suicide prevention services to end Veteran suicides.

2023 Highlights


Introducing ARMOR's Program Manager
Teresa Brown.

Teresa Brown is a Licensed Clinical Social Worker and ARMOR Program Manager for the Orlando VA Healthcare System. She received her Bachelor's degree at Bethune-Cookman University and her Masters in Social Work from University of Central Florida. Teresa began her VA career 7 years ago as a BHP Social Worker, transitioned to the TRuST Team treating Veterans with trauma diagnoses before joining the Suicide Prevention Team. Mrs. Brown's motivation to work with Veterans comes from a family history rooted in service with multiple siblings and family members that are Veterans or active duty military.

"Be the change that you wish to see in the world."
- Mahatma Gandhi



Orlando VA Healthcare System

Hospital Summit- A big thank you to those who joined us in December, for our first ever Hospital Summit. The summit was a community approach to increase collaboration, coordination of care, and connection between the Orlando VA Suicide Prevention team and community hospitals. Provided COMPACT ACT Training.

CEPC Coalitions- CEPC Team made it through 2023 with 6 new Suicide Prevention related coalitions in Brevard, Orange, and Osceola Counties. With at least one coalition in each of our three Suicide Prevention priority areas.

SPEAR Award- SPEAR Team receiving the Honorable Mention for the Federal Executive Association of Central Florida's Commitment to Service award.

INSIDE THIS ISSUE:

- Community Engagement, Education & Outreach 2
- Apps you Should Know About 3
- Suicide Prevention Bulletin Board 4
- Self-Care Spotlight 5
- Getting to Know ARMOR 6

- Quarterly community partners newsletter- upcoming community events, VA suicide prevention announcements, and highlighting partnerships & programs happening community and VA.
- Urban Native American Coalition- working to create Native American Veteran specific MH, Suicide Prevention, and Healthcare related education for community providers. The coalition consists of several local Native American Veterans, Native American family member, local nurse, community providers, suicide prevention coordinator, and the local VA AIAN coordinator
- A collaboration between CEPC's Orlando, Tampa and NF/SF. The "Rural Behavioral Health" Coalition includes a range of mental health providers ranging from the solo practitioner to treatment facilities that serve populations spanning 8 counties. The goal is for this coalition to not only assist these providers in better serving our Veterans and their families, but to allow for collaboration and networking that can be difficult to find in our more rural areas.
- Zero Suicide- active in the Hillsborough County area; adopted priority area; monthly coffee socials.

VISN 8 Highlights CEPC's



- Circle of Care: United for Suicide Prevention- Aging Veteran coalition effort with “A Place for You” senior care center- LMS education with caregivers; caregiver support group.
- Riviera Beach PD Coalition- collaboration between law enforcement, mental health, substance use, and homelessness agencies in the area to prevent incarceration and connect with services.
- Coalition connection with CCBHC grantees in Puerto Rico to identify veterans, service member and their families, connect them with the right services and be trained in military culture. Already have done 1 of 3, and the other 2 in process.
- Mental Health Summits as part of the Governor’s Challenge USVI initiatives in St. Croix and in St. Thomas.
- Coalition in USVI: St. Croix in planning phase. ATQ Survey, sports and connections.
- Coalition Tu Importas: Creation of a Survey for SM and Vets in PR.
- Connections with a local campus university interesting in creating a plan of training for suicide prevention awareness among Service Members and Veterans enroll in their university.

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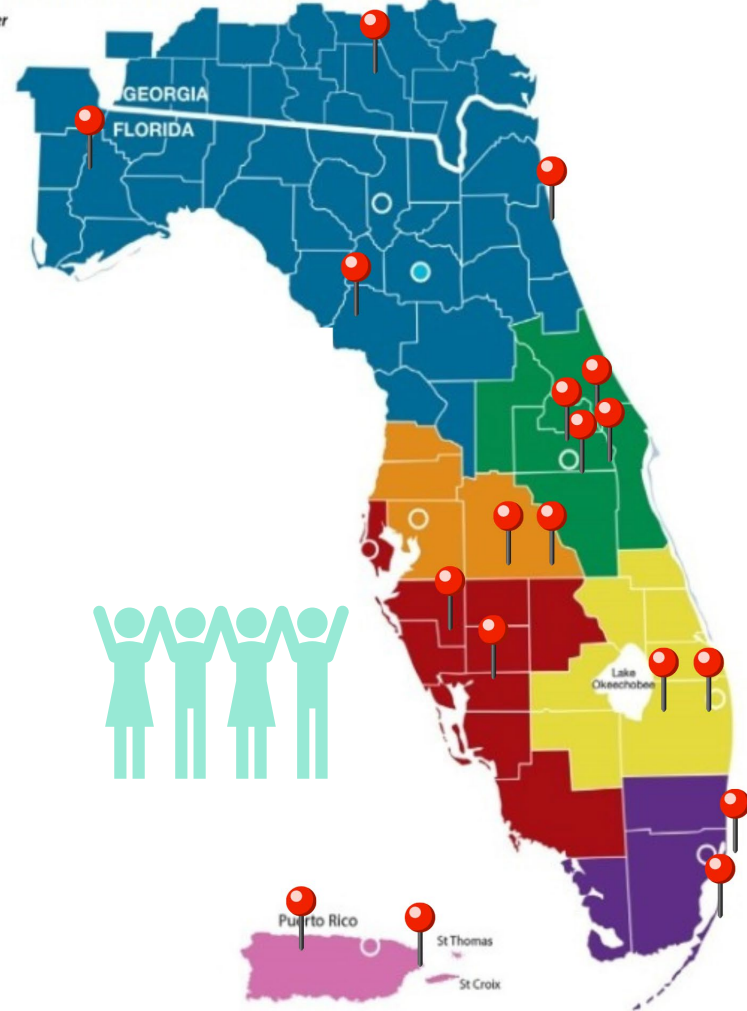
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CEPC's VISN 8

- How can you get involved?
- Are there any community partners with a focus on Suicide Prevention efforts?
- Where are the gaps in the community for Veterans at risk for suicide?
- Consider suicide risk challenges and opportunities in the programs you serve
- Connect with your facility CEPC to inquire about community suicide prevention efforts/coalitions
- Have you met the CEPC assigned to your area?
- Have you partnered with your local CEPC?

Make the connection

Suicide Prevention its everyone business.



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Veterans Health Administration
VA Sunshine Healthcare Network (VISN 8)

Don't Wait. Reach Out.

Reach out to a
CEPC in your
area

Look for
community
partners

Identify gaps in
your area for
suicide
prevention.

Get involved

Increase
awareness of
lethal means

Connect with
others

Buddy Check Week

[Buddy Check: Supporting, connecting with your fellow Veterans - VA News](#)

- VA established the national Veteran Buddy Checks to encourage peer-to-peer connections among Veterans and their families, reduce isolation, support peers in crisis, offer connections to care, and increase access to both care and benefits in VA and the community. VA's Veteran Buddy Check Week is planned for **Oct. 21 – 25, 2024**.
- A simple, genuine conversation can go a long way, in-person or virtually. Start making connections by asking how your buddies are doing, if they need anything, or inviting them to an event or activity in your community. **Everyone can participate** by checking in and providing a listening ear to Veterans in their life.
- Explore [VA's National Veteran Buddy Check](#) effort to learn more about Buddy Checks, access valuable resources—including training modules and the [Buddy Check Outreach Kit](#)—and [subscribe to Buddy Check emails](#) to receive additional tools to support your Buddy Checks.
- **Take the pledge: Talk to 10, be a buddy**
All Veterans are encouraged to take the pledge to **talk to 10 fellow Veterans**, their families, caregivers and survivors. The goal is to increase Veteran connections and education around peer wellness, improve mental health, promote suicide prevention and increase access to VA resources. If you're unable to reach out to 10 people, every contact is still incredibly valuable to those individuals. [Take the pledge](#) today!

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[Supporting Veterans | Spread the Word | Don't Wait. Reach out. \(va.gov\)](https://www.va.gov)

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Don't Wait. Reach Out.
There is help. There is hope.

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Reinforcements

- **People and supplies that are sent to help or support an army, military force, etc.**
 - We're outnumbered! Call for *reinforcements*!
 - We need to prevent enemy *reinforcements* from reaching the front line.
- **The act of strengthening or encouraging something**
 - The bridge is in need of *reinforcement*.
- **A thing that strengthens or encourages something**
 - The teacher introduced the new vocabulary words and then used a game as a *reinforcement*. [=as something that would help the students understand/remember the words]

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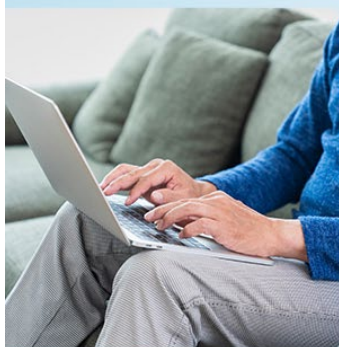
Free, Confidential Support 24/7/365

- Veterans
- Service members
- Family members
- Friends



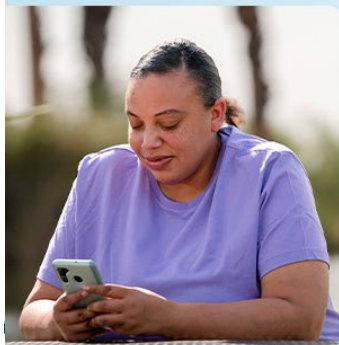
CALL

Dial 988 then Press 1



CHAT

VeteransCrisisLine.net/Chat

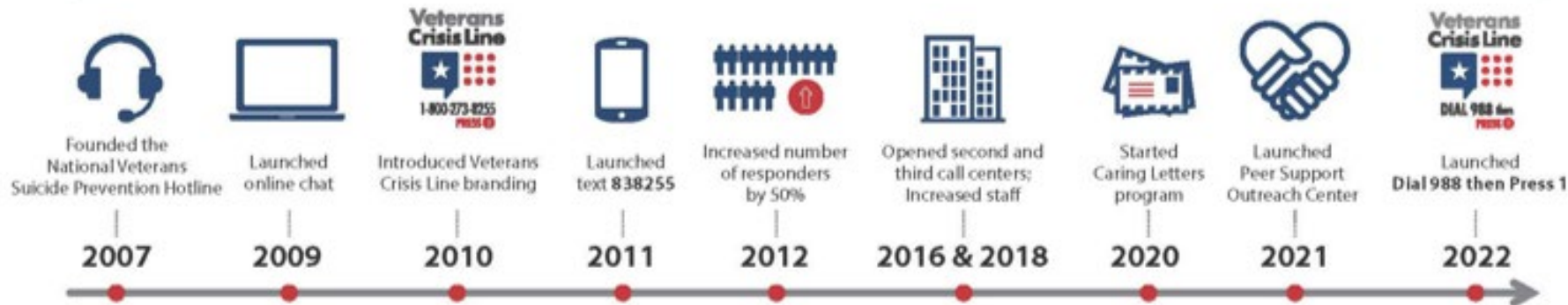


TEXT

838255



The Veterans Crisis Line is a free, confidential resource available to any Veteran, even if they are not enrolled in VA health care or registered with VA. Care does not end when the conversation is over. The Veterans Crisis Line can connect Veterans to their local suicide prevention coordinators, who will follow up and coordinate care.



More than
7.6 million
calls



More than
360,000
texts



More than
910,000
chats



More than
1.4 million
referrals

to VA Suicide Prevention Coordinators

More than
313,000
dispatches of
emergency services

Resources (Reinforcements)



Rocky Mountain MIRECC for Suicide Prevention Firearm Safety Webpage. This webpage provides additional information to Veterans and their families about firearm safety for suicide prevention, and the ability to request additional firearm safety cable locks for free. Safe Storage Matters. www.mirecc.va.gov/visn19/lethalmeanssafety/



Veterans/Military Crisis Line. If you or someone you know is in crisis, **Dial 988 then press 1** for Military or Veterans to be connected with qualified, caring responders 24 hours a day, 7 days a week. Many counselors are Veterans themselves, providing confidential support on the toll-free hotline, online chat, and text-messaging service. Text to **838255** or chat online at www.VeteransCrisisLine.net/Chat



Suicide Prevention Coordinator. Contact your local VA Suicide Prevention Coordinator for additional information and firearm safety materials. www.VeteransCrisisLine.net/ResourceLocator



Make the Connection. Connect with Veterans and find information, support and inspiration to overcome challenges. www.maketheconnection.net

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Resources (Reinforcements)



Visit the [Treatment Works for Vets](#) website to learn more about proven mental health treatments for Veterans, explore treatment goals, and learn how to find treatment. Choose a path to get started.



Virtual Hope Box - The Virtual Hope Box is a mobile app designed for patients and their behavioral health providers as an accessory to treatment. The app contains simple tools to help users with coping, relaxation, distraction and positive thinking using personalized audio, video, pictures, games, mindfulness exercises, activity planning, inspirational quotes and coping statements. Download the Virtual Hope Box app from [Google Play](#) or the [App Store](#)

A Veteran's Guide to Discussing STORES | South Central MIRECC



A Veteran's Guide to Discussing STORES [A Veteran's Guide to Discussing STORES | South Central MIRECC - MIRECC / CoE \(va.gov\)](#) 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. These materials are for Veterans who want to help prevent Veteran suicide.



Together With Veterans (TWV) is a **community-based suicide prevention program** for rural Veterans. TWV involves partnering with rural Veterans and their communities to implement community-based suicide prevention. For more info, visit our [website](#).

Resources (Reinforcements)



Coaching into Care - Coaching Into Care is a free service for families and friends of Veterans. Our responders will briefly assess your concerns and provide appropriate resources and referrals. Through 10 to 30 minute calls, licensed psychologists and social workers offer guidance and help for starting conversations with the Veteran in your life about their mental health or substance use and motivating them to seek treatment if it's needed. [Coaching Into Care | When a Veteran you know needs help - MIRECC / CoE \(va.gov\)](#) Call us: [888-823-7458](tel:888-823-7458).

Spread the Word.

Spread the Word. Veterans are trained to endure challenging situations, but stigma can make it difficult to reach out for help. Download and share the assets below to encourage Veterans to reach out if they're struggling. Resources are available and there is hope. [Supporting Veterans | Spread the Word | Don't Wait. Reach out. \(va.gov\)](#)

*Don't wait.
Reach out.*

Life has its challenges. As a Veteran you don't have to solve them alone. By encouraging Veterans to reach out for help and providing comprehensive resources at [VA.gov/REACH](https://va.gov/REACH), we can help Veterans manage their challenges before their stress reaches a boiling point. Take our self-assessment to find support that is designed specifically for you. [Don't Wait. Reach out.](#)



Suicide prevention is a commonly used and understood term. However not everyone recognizes suicide *postvention*. Suicide postvention builds upon prevention efforts by providing immediate and ongoing support to those impacted by a suicide loss. Postvention is critical for healing after suicide. Uniting for Suicide Postvention (USPV) provides resources and support for **everyone** touched by suicide loss. [Uniting for Suicide Postvention - MIRECC / CoE \(va.gov\)](#)



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Resources (Reinforcements)



Suicide Prevention Lifeline. When you dial **988** you are calling the crisis center in the Lifeline network closest to your location. You will be helped by a skilled, trained crisis worker who will listen to your problems and will tell you about mental health services in your area. Your call is confidential and free.



Prevención del Suicidio. Una persona capacitada le escuchará y hablará con usted. Si es necesario, podrá darle información sobre recursos o servicios existentes en su comunidad que podrán prestarle ayuda después de la llamada. Siempre puede usted volver a llamar al número **988** si lo necesita o lo desea.



American Foundation for Suicide Prevention. AFSP encourages suicide prevention education and the use of safe firearm storage options. <https://afsp.org/about-suicide/firearms-suicide-prevention/>



Means Matter. The Harvard Injury Control Research Center Means Matter campaign is dedicated to activities that promote safety and prevent firearm injury by reducing a suicidal person's access to lethal means. www.hsph.harvard.edu/means-matter/

Resources - VCL website



Local Resources

Local Resources (veteranscrisisline.net) Are you looking for clinical care or counseling? Assistance with benefits? No matter what you're experiencing, we're here to connect you with resources and support systems to help.



VA Resources VA Resources: Use this tool to find VA locations (including community care providers, emergency care, pharmacies, and more).



National Resource Directory The National Resource Directory (NRD) connects wounded warriors, service members, Veterans, their families, and caregivers to national, state, and local services and resources.



Substance Abuse and Mental Health Services Administration Behavioral Health Treatment Services This tool, which is confidential and anonymous, allows people to search by ZIP code for local treatment facilities that focus on substance use/addiction and/or mental health issues.



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How you can connect with VA



Crisis support for Veterans, their friends and families.
Phone: **988, Press 1**
Text: **838255** Live chat: www.veteranscrisisline.net



Veterans and their families share stories of strength and recovery in personal videos.
www.maketheconnection.net



Counseling, peer support and resources for Veterans and their loved ones at community based offices across the U.S.
Phone: **1-877-WAR-VETS** (927-8387) www.vetcenter.va.gov



Coordinators and programs help Veterans establish and maintain safe, stable housing.
Phone: **1-877-424-3838** www.va.gov/homeless

VETERAN TRAINING

Go to www.veterantraining.va.gov to strengthen your problem-solving, parenting, anger management and sleep skills.

Coping and Symptom Management Apps



Enhance sleep quality and duration



Coping, relaxation and positive thinking



Monitor and manage PTSD related symptoms



Skills for living well despite negative thoughts

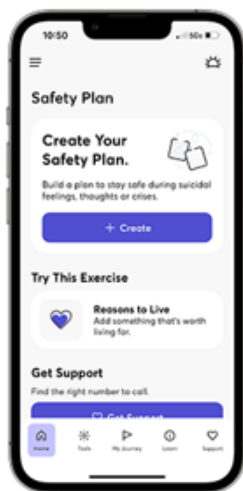


VetChange for problematic drinking



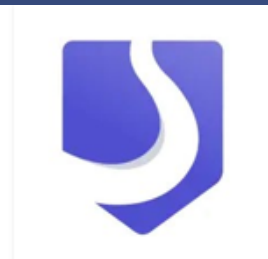
Beyond MST for survivors of military sexual trauma

Check out the new Safety Plan app!



Safety Plan helps Veterans create a personalized step-by-step action plan to keep themselves safe during a crisis. It is highly customizable and provides access to coping tools, self-assessment measures, and crisis support resources like the Veterans Crisis Line.

Download the app today by using the QR code, or by visiting the [App Store](#) or [Google Play](#).



Note: Safety Plan is a U.S. Department of Veterans Affairs app, developed by the National Center for PTSD Dissemination and Training Division and the Office of Mental Health and Suicide Prevention.

Practice secure storage of firearms, medications and other lethal means

- Visit www.keepitsecure.net to learn more about the importance of firearm and other lethal means safety
- Nearly half of all Veterans own a firearm, and most Veteran firearm owners are dedicated to firearm safety
- Firearm injuries in the home can be prevented by making sure firearms are **unloaded, locked, and secured** when not in use, with ammunition stored in a separate location
- There are several effective ways to safely secure firearms. Learn more and find the option that works best for you and your family from the National Shooting Sports Foundation at www.nssf.org/safety

The screenshot shows the VA REACH website page for 'Keep It Secure'. The page header includes the VA logo and navigation links for 'VA Benefits and Health Care', 'About VA', and 'Find a VA Location'. The main content area features a 'QUICK LINKS' sidebar with options like 'Hospital Locator', 'Health Programs', and 'Protect Your Health'. The main body has a 'Keep It Secure' section with buttons for 'Firearm Storage', 'Medication Storage', 'Support', and 'Resources'. A prominent warning message asks, 'Are you a Veteran in crisis or concerned about one?' with a link to 'Find support anytime day or night'. Below this is a section for 'Lethal Means Safety & Suicide Prevention' which defines lethal means and provides statistics: 'Nearly 7 out of every 10 Veteran deaths by suicide are the result of firearm injuries.' and 'Department of Veterans Affairs (2021)'. A 'Learn More' button is located at the bottom of the page.



Stay Connected

Follow us on social media to stay up to date on our programs and initiatives.



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[U.S. Department of
Veterans Affairs](#)
[Veterans Health
Administration](#)



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Life has its challenges. As a Veteran you don't have to solve them alone.

Take our **self-assessment** to **find support** that is designed specifically for you.

Explore Resources

Or browse by category:

Career Challenges

Health Challenges

Relationship Challenges

Educational Challenges

Life Transitions

Substance Use Challenges

Living with Disability

For Family and Friends

Don't Wait.
Reach Out.

[Find the right Veteran Resources Quickly and Easily](#)

[Don't Wait. Reach Out. \(va.gov\)](#)

Don't Wait. Reach Out.

Help reduce the stigma

Know the warning signs

Words Matter -
Use non-judgmental language

Ask how substance use is impacting their life

Reach out to a CEPC in your area

Look for community partners

Ask the Question

Encourage treatment engagement

Ask your provider about sleep health.

Ask about treatment options

Identify gaps in your area for suicide prevention.

Get involved

Promote Connection


Post on your social media accounts, using #SuicidePrevention, #SuicideAwareness, #VeteransCrisisLine

Help connect Veterans to VA resources

Remember those who have passed away due to overdose

Increase awareness of lethal means

Connect with others




We all have a role to play.
Together, we can help save
Veteran lives.

Support for Veterans, their Families and Friends



**Veterans
Crisis Line**
DIAL 988 then PRESS 1



Text to
838255

Confidential Chat at
VeteransCrisisLine.net



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Veterans Health Administration
Washington DC VA Medical Center