SUICIDE PREVENTION IN THE VETERANS HEALTH ADMINISTRATION

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Eligibility for VA Services

- Only 36.6% of eligible veterans are enrolled for VA health care services and only 65.1% of these received services (Bagalman, 2012)

- To register online: https://www.1010ez.med.va.gov/

- To register on-site, bring copy of DD-214 and go to VA Eligibility office.
  - OKC: 405-456-5774
  - Muskogee 1-888-397-8387, ext. 1535

- VA Regional (Benefits) Office: Muskogee
  - 1-800-827-1000
VA Services

- 2 Medical Centers in OK (OKC and Muskogee)
- Psychiatric Inpatient Unit
- Mental Health Clinic
- Substance Abuse Program
- Family Programs
- PTS Recovery Program
VA Services

- OEF/OIF/OND Case Management Program
- OEF/OIF Readjustment Counseling Program
- Homeless Programs
- Vocational Rehabilitation
- Many residential treatment centers
- Vet Centers
Community-based Outpatient Clinics (CBOCs)

Includes on-site mental health or tele-mental health clinic

- Ada
- Ardmore
- Altus
- Blackwell
- Enid
- Lawton
- Stillwater
- N. May OKC
- Wichita Falls, TX
- Tulsa
- Hartshorne
- Vinita
Suicide rates and risk factors among US Veterans

- Approximately 19% of suicides have current/former military service (NVDRS states 2005-2009).
- Rates highest during two years after separation from active duty, continues to gradually decline (Kang, 2010).
- Veterans have 2X higher suicide rates, but not significantly higher after controlling for MH/SUD (Kaplan et al., 2007).
- OEF/OIF veterans’ suicide rates not significantly higher than US population, when controlled for age, race and sex (Kang & Bullman, 2008).
Suicide rates and risk factors among US Veterans

- Incidental risk factors: Male, older
- Military service-related risk factors: TBI, Depression, chronic pain, psychosocial problems (e.g., relationship/housing/financial)
- Cultural factors:
  - firearm familiarity/ownership
  - higher masculinity → reduced help-seeking
  - certain beliefs “Death before dishonor”
Circumstances associated with veteran suicides in OK in 2004-2008 (Kabore, Brown, & Archer, 2010)

- Current depressed mood (45%)
- Physical health problem (49%)
- Crisis in the past two weeks (23%)
- Current mental health problem (26%)
- Intimate partner problem (25%)
Figure 5. Suicide Rates per 100,000 Among VHA Users With or Without Mental Health (MH) Condition or Substance Use Disorder (SUD), by Fiscal Year

- All VHA Patients
- Patients with MH Condition/SUD
- Patients without MH Condition/SUD
Figure 6. Suicide Rates Per 100,000 Among VHA Users, by Mental Health Condition and Fiscal Year
Protective factors

- Historically, those who have served in the military have had lower rates of suicide.
- In 2008, veterans who utilized VHA services had 47% lower suicide rates than non-utilizers.
- Certain cultural beliefs
  - e.g., motto of “Leave no soldier behind”; military culture of pride, strength, and resilience
- Connectedness to other veterans, group identity
Suicide Prevention at VHA

- 2007 - Joshua Omvig Veterans Suicide Prevention Act
- All medical centers and some of the CBOCs have suicide prevention staff.
- Brief interventions with psychiatric inpatients
- Flag in medical record and assignment of case manager
- Outreach
- Staff training/consultation
- 2 Nat’l Research Centers
Veterans Crisis Line

- Same # as Nat’l Suicide Prevention Lifeline, Press 1 for VCL
- 24/7 crisis counseling: telephone, online chat or via text
- Follow-up call from local suicide prevention staff.
- Has been geared towards veterans, but will also begin to promote Military Crisis Line.
Better alternative to the “No suicide contract”

Step 1: Warning signs
Step 2: Internal coping strategies
Step 3: People and social settings that provide distraction
Step 4: People whom I can ask for help
Step 5: Professionals or agencies I can contact during a crisis
Step 6: Making the environment safe
Self-Directed Violence Classification System (Brenner, 2010)

Self-Directed Violence Classification System
(Brenner, 2010)

- **Self-Directed Violence:** Behavior that is self-directed and deliberately results in injury or the potential for injury to oneself.

- **Suicidal Intent:** There is past or present evidence (implicit or explicit) that an individual wishes to die, means to kill him/herself, and understands the probable consequences of his/her actions or potential actions.
Self-Directed Violence Classification System
(Brenner, 2010)

- **Preparatory Behavior:** Acts or preparation towards engaging in Self-Directed Violence, but before potential for injury has begun. This can include anything beyond a verbalization or thought.

- **Suicide Attempt:** A non-fatal self-inflicted potentially injurious behavior with any intent to die as a result of the behavior.

- **Suicide:** Death caused by self-inflicted injurious behavior with any intent to die as a result of the behavior.
**Self-Directed Violence Classification System**  
(Brenner, 2010)

**BEGIN WITH THESE 3 QUESTIONS:**

1. Is there any indication that the person engaged in self-directed violent **behavior**, either preparatory or potentially harmful?  
   (Refer to Key Terms on reverse side)  
   If NO, proceed to Question 2  
   If YES, proceed to Question 3

2. Is there any indication that the person had self-directed violence related **thoughts**?  
   If NO to Questions 1 and 2, there is insufficient evidence to suggest self-directed violence → **NO SDV TERM**  
   If YES, proceed to **Decision Tree A**

3. Did the behavior involve any **injury**?  
   If NO, proceed to **Decision Tree B**  
   If YES, proceed to **Decision Tree C**
DECISION TREE A: THOUGHTS

Were/Are the thoughts suicidal?

Yes

If the thoughts were/are suicidal, is there evidence of Suicidal Intent?

No

Non-Suicidal SDV Ideation

Unknown

Suicidal Ideation, With Undetermined Suicidal Intent

Suicidal Ideation, Without Suicidal Intent

Yes

Suicidal Ideation, With Suicidal Intent
DECISION TREE B: BEHAVIORS, WITHOUT INJURY

- **Was the behavior preparatory only?**
  - No
    - **Was the behavior interrupted by Self/Other?**
      - No
        - **Is there evidence of Suicidal Intent?**
          - Unknown
            - Undetermined SDV, Without Injury
          - Yes
            - Suicide Attempt, Without Injury
      - Yes
        - Unknown
          - Undetermined SDV, Preparatory
        - No
          - Non-Suicidal SDV, Preparatory
  - Yes
    - **Is there evidence of Suicidal Intent?**
      - Yes
        - Suicide Attempt, Without Injury, Interrupted by Self/Other
      - Unknown
        - Undetermined SDV, Preparatory
      - No
        - Non-Suicidal SDV, Without Injury
Final Thoughts

- Do you ask about veteran status?
  - If so, good to be familiar with and provide information about resources for veterans.
- Be familiar with the MH issues that veterans may face, as well as suicide risk/protective factors
- Ask about access to firearms during intake session
- Increase connectedness to other veterans
Resources

- Community Providers website: www.mentalhealth.va.gov/communityproviders/index.asp
- www.veteranscrisisline.net
- VA Suicide Prevention Site www.mentalhealth.va.gov/suicide_prevention/index.asp
- National Call Center for Homeless Veterans
  - 1-877-4AID VET (1-877-424-3838)
  - http://www.va.gov/HOMELESS/NationalCallCenter.asp
Suicide Prevention Staff

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THANK YOU!

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