Aging Veterans and Suicide Prevention

STRATEGIES TO ELIMINATING SUICIDE

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Statistics

- 1320 Arizonans died by suicide in 2015
- 21.8 per 100,000 among non-veterans
- 74.9 per 100,000 among veterans
Veterans

- Suicide rates highest among veteran males (379 deaths)
- This is more than twice the rate of non-veteran males
- Homicide highest among non-veteran males
- However, veteran females significantly higher for homicide and suicide than non-veteran females
Where?

- La Paz, Graham, Mohave, Coconino, Gila and Apache Counties had higher than average suicide rates among veterans.
How?

- Gunshot wounds 78.9%
- Ligature 11.1%
Risk factors are characteristics of a person or his or her environment that increase the likelihood that he or she will die by suicide (i.e., suicide risk).

Major risk factors for suicide include:
• Prior suicide attempt(s)
• Misuse and abuse of alcohol or other drugs
• Mental disorders, depression, other mood disorders
• Access to lethal means
• Knowing someone who died by suicide, particularly a family member
• Social isolation
• Chronic disease and disability
• Lack of access to behavioral health care
Protective factors are personal or environmental characteristics that help protect people from suicide.

Major protective factors for suicide include:
- **Effective behavioral health care**
- **Connectedness** to individuals, family, community, and social institutions
- **Life skills** (including problem solving skills and coping skills, ability to adapt to change)
- Self-esteem and a sense of purpose or meaning in life
- Cultural, religious, or personal beliefs that discourage suicide
Precipitating factors are stressful events that can trigger a suicidal crisis in a vulnerable person. Examples to consider for service members, veterans, and families include:

- Relationship problems (loss of girlfriend/boyfriend/partner, divorce, etc.)
- Death of a loved one
- Work related problems
- Transitions (retirement, PCS, discharge, etc.)
- Service members who have lost their job at home (reservists)
- Current/pending disciplinary or legal action
- Serious financial problems
- Setbacks (academic, career, or personal)
- Severe, prolonged, and/or perceived unmanageable stress
Warning Signs for Suicide

Immediate Risk
Some behaviors may indicate that a person is at immediate risk for suicide. The following three should prompt you to immediately call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255) or a mental health professional.

- Talking about wanting to die or to kill oneself
- Looking for a way to kill oneself, such as searching online or obtaining a gun
- Talking about feeling hopeless or having no reason to live

Serious Risk
Other behaviors may also indicate a serious risk—especially if the behavior is new; has increased; and/or seems related to a painful event, loss, or change.

- Talking about feeling trapped or in unbearable pain
- Talking about being a burden to others
- Increasing the use of alcohol or drugs
- Acting anxious or agitated; behaving recklessly
- Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings
Guiding Principles

Suicide prevention efforts are more likely to succeed if they:

• Use a comprehensive approach that combines multiple strategies
• Are guided by a systematic, data-driven strategic planning process
• Follow five guiding principles, or keys to success:
  1. Engaging People with Lived Experience
  2. Partnerships and Collaboration
  3. Safe and Effective Messaging and Reporting
  4. Culturally Competent Approaches
  5. Evidence-Based Prevention
• Are conducted in multiple settings
Comprehensive Approach

- Identify and Assist
- Increase Help-Seeking
- COMPREHENSIVE APPROACH TO SUICIDE PREVENTION
- Effective Care/Treatment
- Respond to Crisis
- Postvention
- Reduce Access to Means
- Life Skills and Resilience
- Connectedness
- Care Transitions/Linkages
Strategies

Identify & Assist Persons at Risk
- gatekeeper training (safeTALK, ASIST, QPR, etc.)
- suicide screening

Increase Help Seeking
- self-help tools and outreach campaigns, norms campaigns to encourage help seeking and decrease stigma, more culturally appropriate services, etc.

Ensure Access to Effective Mental Health and Suicide Care and Treatment
- safety planning and evidence-based treatments and therapies delivered by trained providers
- reducing financial, cultural, and logistical barriers to care
- systems-level approach (i.e. Zero Suicide framework)
Strategies

Support Safe Care Transitions and Create Organizational Linkages
- Tools and practices that support continuity of care include formal referral protocols, interagency agreements, cross-training, follow-up contacts, rapid referrals, and patient and family education.

Respond Effectively to Individuals in Crisis
- A full continuum of care includes not only hotlines and helplines but also mobile crisis teams, walk-in crisis clinics, hospital-based psychiatric emergency services, and peer-support (Rally Point, navigator) programs.

Provide for Immediate and Long-Term Postvention
- A set of protocols to help your organization/community respond effectively and compassionately to a suicide death. Supporting those affected by the suicide death, reducing risk to other vulnerable individuals, intermediate and long-term supports for people bereaved by suicide. (i.e. SOS groups, policies and procedures, individual support, etc.)
Strategies

Reducing Access to Means of Suicide

- Educating the families of those in crisis about safely storing medications and firearms, distributing gun safety locks, changing medication packaging, and installing barriers on bridges

Enhance Life Skills and Resilience

- By helping people build life skills (critical thinking, stress management, and coping) you can prepare them to safely address challenges such as economic stress, divorce, illness, and aging
- Skills training, mobile apps, and self-help materials

Promote Social Connectedness and Support

- Social programs to reduce isolation, promote belonging, foster relationships
ManTherapy in Arizona

Innovative and Award-Winning Social Marketing Campaign Targeting Middle-Aged Males

• Roll-out at 2016 HOPE Conference
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- https://mantherapy.org
- https://youtu.be/3mTeVOQ_9JE
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- Billboards
- Community Outreach
- Gyms
- Restaurants
- Fire Departments
- Breweries
- Auto and Construction Stores
Outreach to Veterans and First Responders
Resources and Hotlines

- **National Suicide Prevention Lifeline;** 1-800-273-TALK(8255)
  press 1 for Veterans Crisis Line: http://www.suicidepreventionlifeline.org
- **Be Connected 24/7 Support Line** 1-866-4AZ-VETS
- Suicide Prevention Resource Center: [http://www.sprc.org](http://www.sprc.org)
- National Action Alliance for Suicide Prevention: [http://www.actionallianceforsuicideprevention.org](http://www.actionallianceforsuicideprevention.org)
What You Can Do

- Attend a training to become more alert to suicide or learn suicide intervention skills (safeTALK, ASIST, QPR, etc.) or more about mental health in general (Mental Health First Aid)
- Find out who in your community has been trained (identify able, available, and approachable caregivers and intervention resources)
- Consider what kinds of resources and strengths would be helpful for persons with thoughts of suicide—start with what works for YOU
- Share and promote effective programs and tools with friends, colleagues, loved ones
- Get involved with a local or statewide effort (i.e. Arizona Suicide Prevention Coalition)
- Ask the question campaign
- Clay Hunt workgroup
  - Be Connected
Questions?

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