

#BeThere

CONFIDENTIAL HELP FOR VETERANS AND THEIR FAMILIES

# Operation SAVE



U.S. Department  
of Veterans Affairs

**Community Edition**  
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# Overview

- Objectives
- Who are Veterans?
- About the Department of Veterans Affairs
- Facts about suicide
- Myths/realities about suicide
- Operation S.A.V.E.
- Resources & References

# Objectives

By participating in this training you will:

- Have a general understanding of the scope of suicide within the United States
- Know how to identify a Veteran that may be at risk for suicide
- Know what to do when you identify a Veteran at risk

# Who are Veterans?

- **Federal definition:**
  - Any person who served honorably on active duty in the Armed Forces of the United States

# Department of Veterans Affairs

- What is the Department of Veterans Affairs?
  - Veterans Health Administration
  - Veterans Benefits Administration
  - National Cemetery Administration
- What does VA do for Veterans?
- How do Veterans know if they are eligible for care through VA?
  - VA benefits
    - <http://www.vba.va.gov/VBA/>

# Suicide in the United States

- **More than 42,000** U.S. deaths from suicide per year among the general population<sup>1,2</sup>
- Suicide is the **10<sup>th</sup>** leading cause of death in the U.S.<sup>3</sup>
- **More than 16,000** U.S. deaths from homicide per year<sup>2,4</sup>
  - Approximately 1/3 the number of annual suicides
- Homicide is the **15<sup>th</sup>** leading cause of death in the U.S.<sup>3</sup>

# Suicide in the United States

- Every **12.3 minutes** someone dies by suicide
- It is estimated that close to **one million people** make a suicide attempt each year
  - One attempt every **35 seconds**
- Gender disparities
  - Women attempt suicide **3 times** more often than men<sup>1</sup>
  - Men die by suicide almost **4 times** more often than women<sup>1</sup>

# Suicide in the United States

## Are Some Ethnic Groups or Races at Higher Risk?

Number of men and women who died by suicide per 100,000 by ethnic/racial categories<sup>2</sup>

| Ethnicity/Racial Category      | Male    | Female |
|--------------------------------|---------|--------|
| White, non-Hispanic            | * 25.80 | * 7.47 |
| American Indian/Alaskan Native | * 16.39 | * 5.50 |
| White, Hispanic                | 10.98   | 2.67   |
| Black, non-Hispanic            | 9.64    | 2.10   |
| Black, Hispanics               | 4.20    | 0.91   |
| Asian and Pacific Islander     | 8.74    | 3.45   |

Note: \* Indicates highest rates per category



# Facts about Veteran suicide

- **18%** of all deaths by suicide among U.S. adults were Veterans<sup>5</sup>
- Veterans are more likely than the general population to use **firearms** as a means for suicide<sup>5</sup>
- On average, **764 suicide attempts** per month among Veterans receiving recent VA health care services<sup>6</sup>
- **25%** of Veteran suicides have a history of previous suicide attempts<sup>6</sup>

# Typical myths vs. realities

## Myth:

Asking about suicide may lead to someone taking his or her life.

# Typical myths vs. realities

## Reality:

Asking about suicide does not create suicidal thoughts. The act of asking the question simply gives the Veteran permission to talk about his or her thoughts or feelings.

# Typical myths vs. realities

## Myth:

There are talkers and there are doers.

# Typical myths vs. realities

## Reality:

Most people who die by suicide have communicated some intent. Someone who talks about suicide provides others with an opportunity to intervene before suicidal behaviors occur.

Almost everyone who dies by suicide or attempts suicide has given some clue or warning. Suicide threats should never be ignored. No matter how casually or jokingly said, statements like, "You'll be sorry when I'm dead," or "I can't see any way out" may indicate serious suicidal feelings.

# Typical myths vs. realities

## Myth:

If somebody really wants to die by suicide, there is nothing you can do about it.

# Typical myths vs. realities

## Reality:

Most suicidal ideas are associated with treatable disorders. Helping someone connect with treatment can save a life. The acute risk for suicide is often time-limited. If you can help the person survive the immediate crisis and overcome the strong intent to die by suicide, you have gone a long way toward promoting a positive outcome.

# Typical myths vs. realities

## Myth:

He/she really wouldn't die by suicide because...

- he just made plans for a vacation
- she has young children at home
- he made a verbal or written promise
- she knows how dearly her family loves her



# Typical myths vs. realities

## Reality:

The intent to die can override any rational thinking. Someone experiencing suicidal ideation or intent must be taken seriously and referred to a clinical provider who can further evaluate their condition and provide treatment as appropriate.



# Operation S.A.V.E.

Operation S.A.V.E. will help you act with care & compassion if you encounter a Veteran who is in suicidal crisis.

The acronym “**S.A.V.E.**” helps one remember the important steps involved in suicide prevention:

- **S**igns of suicidal thinking should be recognized
- **A**sk the most important question of all
- **V**alidate the Veteran’s experience
- **E**ncourage treatment and **E**xpedite getting help

# Importance of identifying warning signs

- Many Veterans may not show any signs of intent to harm or kill themselves before doing so
- There are behaviors which may be signs that a Veteran needs help
- Veterans in crisis may show behaviors that indicate a risk of harming or killing themselves

# Signs of suicidal thinking

Learn to recognize these warning signs:

- Hopelessness, feeling like there's no way out
- Anxiety, agitation, sleeplessness or mood swings
- Feeling like there is no reason to live
- Rage or anger
- Engaging in risky activities without thinking
- Increasing alcohol or drug abuse
- Withdrawing from family and friends

# Signs of suicidal thinking

- **The presence of any of the following signs requires immediate attention:**
  - Thinking about hurting or killing themselves
  - Looking for ways to die
  - Talking about death, dying, or suicide
  - Self-destructive or risk-taking behavior, especially when it involves alcohol, drugs or weapons

# Veteran-specific risks

- Frequent deployments
- Deployments to hostile environments
- Exposure to extreme stress
- Physical/sexual assault while in the service (not limited to women)
- Length of deployments
- Service-related injury

# Asking the question

- Know how to ask the most important question of all...

# Asking the question

**“Are you thinking about killing yourself?”**





# Asking the question

- Are you thinking of suicide?
- Have you had thoughts about taking your own life?
- Are you thinking about killing yourself?

# Asking the question

**DO** ask the question if you've identified warning signs or symptoms

**DO** ask the question in such a way that is natural and flows with the conversation

**DON'T** ask the question as though you are looking for a "no" answer

- "You aren't thinking of killing yourself are you?"

**DON'T** wait to ask the question when he/she is halfway out the door

# Things to consider when talking with a Veteran at risk for suicide

- Remain calm
- Listen more than you speak
- Maintain eye contact
- Act with confidence
- Do not argue
- Use open body language
- Limit questions-let the Veteran do the talking
- Use supportive, encouraging comments
- Be honest-there are no quick solutions but help is available

# Validate the Veteran's experience

- Talk openly about suicide. Be willing to listen and allow the Veteran to express his or her feelings.
- Recognize that the situation is serious
- Do not pass judgment
- Reassure that help is available

# Encourage treatment and Expediting getting help

- **What should I do if I think someone is suicidal?**
  - Don't keep the Veteran's suicidal behavior a secret
  - Do not leave him or her alone
  - Try to get the person to seek immediate help from his or her doctor or the nearest hospital emergency room, or
  - Call 911
- **Reassure the Veteran that help is available**
- **Call the Veterans Crisis Line at 1-800-273-8255, Press 1**

# Encourage treatment and Expedite getting help

## Safety Issues:

- **Never** negotiate with someone who has a gun
  - Get to safety and **call 911**
- If the Veteran has taken pills, cut himself or herself or done harm to himself or herself in some way
  - **Call 911**
- Call the Veterans Crisis Line at 1-800-273-8255, Press 1

# Encourage treatment and Expedite getting help

- Remember: When a Veteran at risk for suicide leaves your facility, provide suicide prevention information to the Veteran and his or her family
  - Veterans Crisis Line number **1-800-273-8233 Press 1** for Veterans
  - Veterans Crisis Line brochures and wallet cards

# Resources

- **Mental Health**

- VHA provides specialty inpatient and outpatient mental health services at its medical centers and community-based outpatient clinics. All mental health care provided by VHA supports recovery, striving to enable a person with mental health problems to live a meaningful life in the community and achieve his or her full potential.
- For more information on VA Mental Health Services visit [www.mentalhealth.va.gov](http://www.mentalhealth.va.gov)

- **Vet Centers**

- Vet Centers are VA community-based centers that provide a range of counseling, outreach, and referral services.
- For more information about Vet Centers and to find the Vet Center closest to you visit [www.vetcenter.va.gov](http://www.vetcenter.va.gov)



# Resources

- **Make the Connection**

- MakeTheConnection.net is a one-stop resource where Veterans and their families and friends can privately explore information about physical and mental health symptoms, challenging life events, and mental health conditions. On this site, Veterans and their families and friends can learn about available resources and support. Visit [www.MakeTheConnection.net](http://www.MakeTheConnection.net) to learn more.

- **Post-Traumatic Stress Disorder (PTSD)**

- Each VA medical center has PTSD specialists who provide treatment for Veterans with PTSD. For more information about PTSD and to locate the VA PTSD program nearest you visit [www.ptsd.va.gov](http://www.ptsd.va.gov)
- PTSD Coach App: The PTSD Coach application, allows phone users to manage their symptoms, links them with local sources of support, and provides information on PTSD. Visit [www.ptsd.va.gov/public/pages/PTSDCoach.asp](http://www.ptsd.va.gov/public/pages/PTSDCoach.asp)

# Resources

- **Veterans Crisis Line/Chat/Text**
  - 1-800-273-8255, Press 1
  - <http://www.veteranscrisisline.net/>
  - Text to 838255
  
- **VA Suicide Prevention Coordinators**
  - Each VA Medical Center has a Suicide Prevention Coordinator to make sure Veterans receive needed counseling and services
  - Resource locator - <http://www.veteranscrisisline.net/>

# Role play

- **Goal:** To develop a level of comfort and confidence in asking about suicide and helping a Veteran who is thinking about suicide.

# Remember:

## Operation S.A.V.E.

Signs of suicidal thinking should be recognized

Ask the most important question of all

Validate the Veteran's experience

Encourage treatment and Expedite getting help



# By participating in this training you have learned:

- Suicide is everyone's business
- General facts about suicide in the U.S.
- Facts about Veteran suicide
- How to identify a Veteran who may be at risk for suicide
- How to help a Veteran at risk for suicide
- How to address a crisis situation
- What resources are available and how to access them

# References

- <sup>1</sup>Suicide facts. (2016). Retrieved August 1, 2016, from SAVE Suicide Awareness Voices of Education, [http://www.save.org/index.cfm?fuseaction=home.viewPage&page\\_id=705D5DF4-055B-F1EC-3F66462866FCB4E6](http://www.save.org/index.cfm?fuseaction=home.viewPage&page_id=705D5DF4-055B-F1EC-3F66462866FCB4E6)
- <sup>2</sup>United States Suicide Injury Deaths and Rates per 100,000 in 2014. Retrieved August 2, 2016, from Centers for Disease Control and Prevention WISQARS, <http://webappa.cdc.gov/cgi-bin/broker.exe>.
- <sup>3</sup>Suicide Facts at a Glance. (2015). Retrieved August 1, 2016, from Centers for Disease Control and Prevention, <http://www.cdc.gov/violenceprevention/pdf/suicide-datasheet-a.PDF>
- <sup>4</sup>CDC. (2016, July 6). *Assault or Homicide*. Retrieved August 1, 2016, from National Center for Health Statistics, <http://www.cdc.gov/nchs/fastats/homicide.htm>
- <sup>5</sup>U.S. Department of Veterans Affairs (2016). *Suicide among Veterans and other Americans 2001-2014*. Washington, DC: Office of Suicide Prevention.
- <sup>6</sup>Based on suicide/ suicide attempts reported within the VA Suicide Prevention Application Network (SPAN) during calendar year 2014.