



Veteran Outreach Toolkit

Preventing Veteran Suicide Is Everyone's Business
A Community Call to Action

Contents

Community Collaboration: Suicide Prevention Is Everyone's Business	1
Who Can Use the Community-Based Suicide Prevention Toolkit?	2
Why Communities?	2
How to Use the Community-Based Suicide Prevention Toolkit	3
Community Tools	4
Suicide Prevention Council	4
Military Screening Questions	5
Suicide Risk Assessment	6
Suicide Prevention Safety Plan	7
Myths and Realities About Suicide	8
Communications Channels	9
Public-Private Partnerships	9
10 Things You Can Do to Prevent Veteran Suicide	12
#BeThere	16
Publicly Available VA Resources	17



Community Collaboration: Suicide Prevention Is Everyone's Business

Reaching all Veterans to prevent suicide will take the entire community.

The U.S. Department of Veterans Affairs (VA) is on a mission to end suicide among Veterans in communities across America. Approximately 14 of the 20 Veterans who die by suicide each day are not receiving care from the Veterans Health Administration. We need your help to reach them. We invite you to share your insights, experiences, and resources to shape public health initiatives that support Veterans at risk. **One Veteran suicide is one too many. It's time to act** — **Are you with us?**

VA works with hundreds of organizations and corporations at the national and local levels, including Veterans Service Organizations, to raise awareness about its suicide prevention programs. These partners have regular contact with Veterans as well as active duty Servicemembers, Reservists, National Guard members, and their families. By reaching out to help, communities can send the message that they value these individuals and their service.

Organized events are a great way for our partners to advance this critical national goal of ending Veteran suicide. By promoting Veteran-focused resources in your community at events such as job fairs and wellness expos, you can help us reach all Veterans. Connecting with fellow Veterans to spread the word about valuable mental health and suicide prevention resources makes Veteran wellness a community priority.

Veterans, family members, and care providers can initiate a free and confidential conversation with an experienced and caring VA responder by calling the **Veterans Crisis Line**. If you are concerned about the safety and well-being of a Veteran, call **1-800-273-8255 and Press 1**. Chat online at **VeteransCrisisLine.net/Chat** to get support anonymously. A text message can also be sent to **838255** to connect to a VA responder. These resources can be used even if a Veteran is not registered with VA or enrolled in VA health care.

Veteran suicide is preventable, and suicide prevention is everyone's business. Thank you for helping to prevent and end Veteran suicide. Visit www.va.gov/nace/myVA/ for more information.

Who Can Use the Community-Based Suicide Prevention Toolkit?

Any community group can host events to raise awareness about mental wellness and suicide prevention programs or showcase best practices in health care and substance misuse treatment for Veterans. The following organizations are well-positioned to plan, promote, and participate in events that support suicide prevention:

- Mental health and substance misuse treatment centers as well as primary care and wellness clinics
- Employers from both the public and private sectors who can provide job opportunities for Veterans transitioning from homelessness
- Organizations that can connect Veterans to one another through volunteer opportunities or peer support programs
- Health clubs and gyms
- Colleges and universities

Why Communities?

VA leads the Nation's largest and most integrated suicide prevention program and promotes continual process improvements across the entire health care system. To strengthen suicide prevention programs and policies, VA conducted the most comprehensive analysis of Veteran suicide rates in the U.S., examining more than 55 million Veteran records from 1979 to 2014. A key finding is that 20 Veterans died by suicide in the U.S. each day, and 14 of those Veterans were not receiving care from the Veterans Health Administration at the time of their death. VA released its report in August 2016 and is sharing this data with community-based health care providers and partners to expand the network of support for Veterans before they are in crisis. To view the report, go to www.mentalhealth.va.gov/docs/2016suicidedatareport.pdf.

We need your help "finding the 14" who might be underserved by locating and connecting with the Veterans in your community! Your collaboration can magnify our suicide prevention efforts.

How to Use the Community-Based Suicide Prevention Toolkit

Whether you are hosting a career boot camp, exhibiting at a conference, planning a hiring event, or coordinating a wellness expo in the community, this toolkit is for you! See the following suggestions and tools needed to support Veterans in your community:

- 1. Create or join a suicide prevention council.
 - Event ideas, timelines, and a planning checklist
 - Messaging
 - Challenges and action items
- 2. Develop event promotion resources.
 - Sample blogs and social media content
 - Flyer template
 - Media advisory template
 - Electronic billboard messages to promote events within VA
- 3. Share clinical tools for all providers.
 - Suicide Risk Assessment
 - Suicide Prevention Safety Plan Treatment Manual
- 4. Promote safe storage of firearms, pills, and other means of self-harm.
 - Suicide Risk Assessment
 - Suicide Prevention Safety Plan Quick Guide
 - Posters and wallet cards for Make the Connection and the Veterans Crisis Line
 - Additional resources

Community Tools

1

Suicide Prevention Council

The more we come together as a community to tackle this public health priority, the closer we can get to ending Veteran suicide.

Every community has its unique assets, resources, stakeholders, and challenges. Consider working with others who have an interest in preventing suicide. Establish a coalition, council, or taskforce. Involve a diverse group representing different parts of the community:

- Health care providers (hospitals, clinics, family practitioners)
- Emergency services (ambulance companies, paramedics, firefighters)
- Law enforcement (police officers, sheriff departments, federal agencies such as the Federal Bureau of Investigation, U.S. Postal Service, U.S. Homeland Security Department, VA)
- Schools (public, private)
- Local businesses (executives, managers, employees)
- Employee Assistance Programs
- Chaplains and religious leaders
- Veteran-focused organizations (Veterans of Foreign War posts, American Legion, Veterans Service Organizations, Team RWB)
- Media representatives (radio, television, internet/podcast)
- Funeral industry (medical examiners, coroners)

VA Suicide Prevention Coordinators

Each VA facility has Suicide Prevention Coordinators on-site to support Veterans and providers in times of crisis. These case managers are vital parts of any community coalition to support Veterans. Use the VA resource locator to find your local VA Suicide Prevention Coordinator or call your local VA medical center to find out how the suicide prevention team can help.

Community and Political Leaders

Whether they're members of your school board or neighborhood association, city leaders, or county or state elected officials, political leaders can offer valuable support by using their unique networking strengths to promote suicide prevention as a public health priority.

Law Enforcement and First Responders

Although first responders have valuable experience to share, they are often overlooked in public health initiatives, specifically suicide prevention. Police and sheriff departments, federal law enforcement agencies, firefighters, ambulance teams, medical examiners, coroners, and emergency room staff all can provide firsthand information about needed resources and gaps that others in the community may not be aware of. Many in these fields are military Veterans and committed to serving their communities.

2

Military Screening Questions

After separating from the military, many Veterans continue to have a strong affiliation with their service. The military has a distinct culture, represented by the unique symbols, values, mottos, and traditions of each branch:

- Army
- Navy
- Air Force
- Marine Corps
- Coast Guard
- Reserve and National Guard

Deployment and combat experiences are unique and can profoundly impact one's life. (See the Active Duty vs. Reserve or National Guard handout in this toolkit.)

Tips on Screening for Military Service

- You might want to post a simple sign in your office or in the lobby of your organization that lets Veterans and Servicemembers know that you would like to know if they have served.
- Respect a Veteran or Servicemember's choice not to discuss their experiences.
- Convey a willingness to listen to their experiences if the Veteran or Servicemember wants to discuss them in the future.
- There are some questions that you may want to ask to clarify a client's military background. Please review the Military Screening Questions handout included in this toolkit.
- It is important to ensure you have enough time available to allow the Veteran or Servicemember to expand on answers if desired.

For more information about screening for military service, go to www.mentalhealth.va.gov/communityproviders/military.asp.

3 Suicide Risk Assessment

What is a suicide risk assessment?

A suicide risk assessment is a process in which a health care provider gathers clinical information to determine a patient's risk for suicide.

When should I conduct a suicide risk assessment?

Any person suspected to be at possible risk for suicide should be formally assessed.

What tool can I use?

Specific assessment and treatment protocols are in place across mental health services in every VA facility. One of the tools in this kit is the VA Suicide Risk Assessment Guide, which can be shared in the community. To view the guide online, go to www.mentalhealth.va.gov/docs/va029assessmentguide.pdf.

What are the key components of a suicide risk assessment?

A suicide risk assessment should first evaluate warning signs in the three domains: suicidal thoughts, intent, and behavior. The assessment should then identify risk and protective factors that may increase or decrease the client's risk for suicide.

What are warnings signs?

Many suicidal individuals may reveal **warning signs** of their intention to engage in suicidal behavior. 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, increasing alcohol or drug use, or withdrawing from family and friends.

- Veteran-specific risks. Frequent deployments; deployments to hostile environments; exposure
 to extreme stress; physical or sexual assault while in the service (not limited to women); length
 of deployments; or service-related injury
- Signs that require immediate attention. Thinking about hurting or killing themselves; looking
 for ways to die; talking about death, dying, or suicide; or self-destructive or risk-taking behavior,
 especially when it involves alcohol, drugs, or weapons
- At-risk communities. American Indian and Alaska Native (AI/AN) communities have troubling suicide rates. Outreach events for AI/AN communities should be a community priority to increase wellness, decrease stigma, and prevent suicide. Engaging leaders within the AI/AN communities, tribes, schools, and reservations is key to sharing resources. Building public health campaigns targeting AI/AN communities is a priority for organizations such as the Indian Health Service, National Action Alliance for Suicide Prevention, and Suicide Prevention Resource Center.

4

Suicide Prevention Safety Plan

What is a safety plan?

A safety plan is a list of prioritized coping strategies and resources that people at risk for suicide can use during times of emotional distress or crisis. The plan is brief, easy to read, and written from a Veteran's perspective.

What resources can I use?

Mental health assessment and treatment protocols at VA facilities can be shared in the community. One of the tools is VA's Safety Plan Quick Guide, which can be found online at: www.mentalhealth.va.gov/docs/vasafetyplancolor.pdf

How do you develop a safety plan?

Safety planning is a collaborative process between the Veteran at risk and a provider or friend. The provider and the client complete the safety plan together, and the client can use the plan to help manage a crisis.

A safety plan should include six steps to assess the situation:

- 1. Warning signs: "How will I know when the safety plan should be used?"
- 2. Internal coping strategies: "What can I do to take my mind off my problems without contacting another person?"
- 3. People and social settings that provide distraction: "Are there people I can talk to or places I can go for a positive distraction from my suicidal thoughts?"
- 4. People I can contact and ask for help: "Who can I call, text, or visit to get emotional support?"
- 5. Professionals or agencies I can call during a crisis: "Do I have any health care providers, counselors, or other professionals I can call for help?"
- 6. Making the environment safe: "What can I do to make my environment safer? Is there anything I've thought of hurting myself with that should be removed or given to someone for safekeeping?" (firearms, pills, rope)

Fierce Loyalty: A Safety Plan Video

This video shows health care providers the importance of encouraging Veteran patients and their loved ones to create a safety plan they can implement if the Veteran is experiencing a crisis or may be at risk for suicide. The video includes testimonials from a VA Suicide Prevention Coordinator and a VA medical center clinician explaining the significant impact a safety plan can have in helping a Veteran get the help he or she needs. To view and download, go to: **VeteransCrisisLine.net/SpreadTheWord**.

Safety Plan Treatment Manual

The Safety Plan Treatment Manual, developed for use by VA clinicians and staff, describes a brief clinical intervention and safety planning for Veterans at risk for suicide. It can serve as a valuable adjunct to risk assessment and may be used for Veterans who have made a suicide attempt, have considered suicide, have psychiatric disorders that increase suicide risk, or who are otherwise determined to be at high risk. It details how clinicians and clients can collaborate to develop and use safety plans as intervention strategies to lower the risk of suicidal behavior. This approach is consistent with the Recovery Model, which views Veterans as collaborators in their treatment and fosters empowerment, hope, and individual potential.

5

Myths and Realities About Suicide

Below are the top four myths about suicide that you can help dispel by taking action and sharing with your community:

1. MYTH: Asking about suicide may lead a Veteran to take his or her life.

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.

2. MYTH: There are talkers and there are doers.

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.

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

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.

4. **MYTH:** He or 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.

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

6

Communications Channels

Enhancing connectedness is key to helping others feel cared about, and today there are multiple ways to stay in touch with others and to show people that we care. Think of all the different forms of communication: face-to-face contact, sign language, talking on the phone or computer using videoconferencing tools such as FaceTime, text messaging and emails, online chatting, and writing letters. The internet has opened the doors to sharing useful information, including what your community is doing to bring Veterans and their families together. Consider setting up a website to promote community events and to promote substance misuse treatment options, wellness fairs, or other health services and activities unique to your area.

One way to prevent suicide is to increase social connectedness. Many of the factors that put individuals at a higher or lower risk for suicide are related to connectedness — the degree to which an individual is close, interrelated, or shares mutual interests with another group. It can occur on multiple levels, including among individuals, families, neighbors, schools, and cultural groups. The Centers for Disease Control's Strategic Direction for Suicide Prevention highlights research that links connectedness to suicide prevention. Using technology can enhance an individual's social network, whether it's starting a Facebook page to communicate with like-minded people or using Skype or FaceTime to talk with loved ones who live far away.

7

Public-Private Partnerships

The VA Office for Suicide Prevention is working with public and private partners across the U.S. to ensure that Veterans everywhere can access quality, timely mental health, and wellness resources. This public health approach includes Veteran outreach, patient care, national crisis lines, and education and research to understand the risk and improve initiatives aimed at reducing suicide rates.

The VA Office for Suicide Prevention is establishing a comprehensive and integrated network of public-private partnerships nationwide to address suicide prevention — including Veterans who are enrolled and those not enrolled with VA. Our goal is to reach Veterans and their families before a crisis starts. We can reach all Veterans by engaging employers and communities at large to provide resources about health and wellness, mental health care, substance misuse treatment, and VA benefits.

Use the following resources to learn more about wellness, employment, and treatment options to help prevent and end Veteran suicide:

Partnership Examples and Outreach Tools

SAMHSA Behavioral Health Provider Locator: www.findtreatment.samhsa.gov

PsychArmor Institute: www.psycharmor.org/military-culture

Suicide Prevention Resource Center: training.sprc.org

Indian Health Service Suicide Prevention and Care Program: www.ihs.gov/suicideprevention

Give an Hour: www.giveanhour.org

The Campaign to Change Direction: www.changedirection.org

VA Mental Health programs: www.mentalhealth.va.gov

Homeless Veterans Community Employment Services: www.va.gov/homeless/hvces.asp

VA Employment and Housing Toolkits: www.va.gov/homeless/get_involved.asp

VA Veterans Crisis Line Resource Locator: www.VeteransCrisisLine.net/GetHelp/ResourceLocator.aspx

VA Community Provider Toolkit: www.mentalhealth.va.gov/communityproviders/

Veterans Crisis Line:

Veterans, family members, and care providers can initiate a free and confidential conversation with an experienced and caring VA responder by calling the **Veterans Crisis Line**. If you are concerned about the safety and well-being of a Veteran call **1-800-273-8255 and Press 1**. Chat online at **VeteransCrisisLine.net/Chat** to get support anonymously. A text message can also be sent to **838255** to connect to a VA responder. These resources can be used even if a Veteran is not registered with VA or enrolled in VA health care.

Make the Connection:

For Veterans who are not in immediate crisis, there are many treatment options and resources available. One universal resource is the *Make the Connection* website (*www.MakeTheConnection.net*), which provides a way for Veterans to privately explore mental health issues and difficult life experiences, and directs them to sources of support.

Coaching Into Care:

A free, confidential coaching service that helps families and friends discover constructive ways to talk with Veterans about their concerns and treatment options. Visit www.mirecc.va.gov/coaching/ or call 1-888-823-7458, from 8 a.m. to 8 p.m. Eastern Time.

Additional References

- "Suicide Among Veterans and Other Americans 2001-2014," released in August 2016 by VA's Office for Suicide Prevention: www.mentalhealth.va.gov/docs/2016suicidedatareport.pdf
- American Association of Suicidology: www.suicidology.org
- Harvard T.H. Chan School of Public Health Means Matter: www.hsph.harvard.edu/means-matter
- Centers for Disease Control and Prevention: www.cdc.gov
- National Action Alliance for Suicide Prevention: www.actionallianceforsuicideprevention.org
- Moving Forward: www.veterantraining.va.gov/movingforward/index.asp
- American Indian Alaska Native Suicide Prevention Resource Center: www.sprc.org/settings/aian

10 Things You Can Do to Prevent Veteran Suicide

- 1. Validate the Veteran's experience: Show compassion. Crisis provides an opportunity to help people and give them hope. Suicide is preventable. Talk openly about suicide. Take deep breaths yourself, and remember that we all have much in common with each other and there are not always easy answers. 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 the Veteran that help is available and offer hope. Listen more than you talk, and recognize that the Veteran will feel that you care. Act with confidence and do not argue. Show compassion by looking at the person talking or telling them that you care; compassion can be heard through your voice and translates through your nonverbal communication.
- **2. Recognize warning signs of suicidal thinking.** Many Veterans may not show any signs of intent to harm themselves before doing so, but some actions can be signs that they need help.

Veterans who are considering suicide often show signs of depression, anxiety, low self-esteem, and/or hopelessness. These include:

- Appearing sad or depressed most of the time
- Having trouble sleeping and eating, or showing loss of interest, which doesn't go away or continues to get worse
- Feeling anxious, agitated, or unable to sleep
- Neglecting personal welfare
- Deteriorating physical appearance
- Withdrawing from friends, family, and society, or sleeping all the time
- Losing interest in hobbies, work, school, or other things one used to care about

- Frequent and dramatic mood changes
- Expressing feelings of excessive guilt or shame
- Feelings of failure or decreased performance
- Feeling that life is not worth living; having no sense of purpose in life
- Talking about feeling trapped, like there is no way out of a situation
- Feelings of desperation, and saying that there's no solution to their problem

Their actions may be dramatically different from their normal behavior, or they may appear to be actively contemplating or preparing for a suicidal act. Unusual behaviors include:

- Performing poorly at work or school
- Acting recklessly or engaging in risky activities seemingly without thinking
- Showing violent behavior, such as punching holes in walls, getting into fights, or engaging in self-destructive violence
- Feeling rage or uncontrolled anger or seeking revenge

- Looking as though one has a "death wish"
- Doing risky things, such as driving fast or running red lights
- Giving away prized possessions
- Putting affairs in order, tying up loose ends, or making out a will
- Seeking access to firearms, pills, or other means of harming oneself

- 3. Ask the question: Are you having thoughts of suicide? Many people fear that asking about suicide puts people more at risk. This is not true. By asking if someone is having thoughts of suicide or has hurt himself or herself, you are giving the person in need an opportunity to open up and share his or her feelings. This allows the Veteran to connect with you and allows you to instill hope. 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 or she is halfway out the door.
- 4. Means do matter: Know how to safely store firearms in your home. Most Veterans who die by suicide use firearms. For someone in crisis, a locked firearm can mean the difference between a life saved and a tragic outcome. Though many Veterans are well-versed in gun safety, all Veterans and their families should understand how to properly handle and store firearms in the home. There has been a rise in firearm suicides among female Veterans, in particular. The risk of unintentional firearm deaths among youth drops by 80 percent when guns are stored separately from ammunition in a lock box (Journal of the American Medical Association, 2005). VA Suicide Prevention Coordinators distribute free gun locks in their communities talk to people in your community and consider offering free gun locks from various agencies.

Veterans also tend to inflict self-harm by overdosing on medication. Find out whether local hospitals and pharmacies provide free pill boxes to limit the amount of medication a Veteran has access to during an emotional or difficult time. Encourage health care providers to limit the amount of pills in any single prescription, especially if there is a significant risk of overdose. People who have recently been in an inpatient psychiatric unit or at an emergency room for mental health or substance misuse are at increased risk for suicide for 90 days following their discharge. Consider working with pharmacists in your community to add a crisis line phone number to pill containers and prescription paperwork.

5. Encourage treatment and expedite getting help. What should I do if I think someone is suicidal? Reassure the Veteran that help is available. Show compassion. Be honest; there are no quick answers. Treatment works. Sobriety is possible. Don't keep the Veteran's suicidal behavior a secret. Do not leave him or her alone. Take the Veteran to a local walk-in crisis center (check with your county) or call the county crisis line. Try to get the person to seek immediate help from his or her doctor or the nearest hospital emergency room, or call 911. Once you have gotten the Veteran to seek help, reach out to them to show that you care. Emotional crisis can affect us all; support goes a long way. Follow up with the person after the event; let him or her know that treatment works and that life can get better. Use the resource locator on the Veterans Crisis Line website: VeteransCrisisLine.net/ResourceLocator and use SAMHSA's Find Help and Treatment Locator: www.samhsa.gov/find-help.

6. Promote Veteran employment: Help transition Servicemembers to civilian life.

Transitioning back to civilian life when leaving the military can be incredibly challenging. Those recently transitioning out of the military have a higher risk for suicide. Finding employment, understanding the opportunities available from vocational rehabilitation programs, and financial stress can be overwhelming for anyone. Employers can work with VA community employment coordinators (CECs) — based at nearly every VA medical center — to share job openings and set up interviews with qualified Veterans. CECs prescreen Veterans who have a wide variety of skills and all levels of education to facilitate hiring and onboarding. Find the nearest CEC online at www.va.gov/homeless/cec-contacts.asp. Hiring Our Heroes is a nationwide initiative to help Veterans, transitioning Servicemembers, and military spouses find meaningful employment opportunities. For more information, visit www.uschamberfoundation.org/hiring-our-heroes.

Collaborate with workforce investment boards, faith-based groups, homelessness services, housing organizations, VA medical centers, and employers to help Veterans develop resumes, polish interviewing skills, and access job opportunities. Recognize that Veterans have unique skills that translate well to the workforce, be it a specific trade or leadership experience. Promote days of recognition at work, and offer additional resources about mental and physical wellness and health care options, employee assistance programs, gym memberships, and other benefits to your Veteran employees.

7. She also served: Recognizing and connecting with women Veterans. Women Veterans make up a growing segment of our community. Women Veterans have a significantly higher suicide risk than their non-Veteran civilian counterparts: Adjusting for differences in age, risk for suicide is 2.4 times higher among female Veterans when compared with U.S. civilian adult females (Suicide Among Veterans and Other Americans 2001-2014, VA Office for Suicide Prevention, Aug. 3, 2016).

Communities often fail to recognize women as Veterans. Consider reaching out to partners to ensure that any messaging for Veterans considers women and men. Host an event for women Veterans, and consider reaching out to key leaders in the community who can help connect them to one another. Women Veterans face many unique challenges, such as caregiving responsibilities and asking for help when in need. Health care providers should take care to assess all women in crisis against the same criteria used for men: Veteran status, access to firearms, substance misuse, and level of connectedness. Suicide rates among women Veterans have increased, and it is time for communities to expand their recognition of and resources for women Veterans.

8. Connect Veterans to each other and to service. Veterans who have served their country have a range of skills and values that can benefit their communities. Encourage members of your community to host service days or other opportunities for Veterans to support fellow Veterans, Servicemembers, and the community at large. Male Veterans over the age of 65 are at increased risk for suicide. This is a time in life that can include retirement, loss of family members, or long-

term depression, which can all lead to increased substance use and social isolation. Inquire about what skills a Veteran has gained during and after military service, and offer him or her opportunities to connect with others. Peer-to-peer social connectedness is what matters most and helps all of us feel that life is worth living.

9. Get technical: Using technology to reach Veterans and enhance connectedness.

Technology is advancing quickly, and we are now able to promote public health initiatives and provide resources to Veterans in need by using online platforms. Reach out to your community to find people, companies, and nonprofit organizations that are using social media, email, or text messages to reach out and connect to people. Some health care providers are using video technology, referred to as telehealth, to improve how people receive health care, especially those who live in more rural settings. Technology now allows Veterans to receive health care anywhere, whether it's in a provider's office, or on a computer, smartphone, or tablet (e.g., iPad).

10. Treatment works: Promoting substance misuse treatment and mental health recovery through community events. Many communities are unaware of the resources they already have to help people who are facing an emotional crisis or substance use problems. Consider hosting community events where local providers can offer education and resources to Veterans and their families.

Many people don't know the signs of depression or substance misuse. Promote sobriety with family-friendly events, such as block parties, farmers markets, and athletic events like a 5K walk/run. Work to engage substance abuse prevention organizations and treatment centers in the event, and promote recovery and sobriety.

Most people who die by suicide were last provided health care in a primary care physician's office, so we need to work to provide more resources and education to our community doctors and teams of health care providers who see patients in their clinics every day. Connect with doctors, nurses, social workers, and psychologists in your community, as well as providers of holistic medicine, such as naturopathic and acupuncture clinics, massage therapists, and chiropractors. Give them information on military and Veteran culture.

Encourage providers to have direct discussions with their patients about preventing suicide and amplify suicide prevention messaging in their clinics. Direct them to training and resources from their local VA Suicide Prevention Coordinator or online from sources such as the PsychArmor Institute, the Suicide Prevention Resource Center, the American Association of Suicidology, and the Harvard School of Public Health's Means Matters website. Don't assume that because someone is a health care provider they understand military and Veteran culture or know the warning signs of suicide.

#BeThere

Sometimes, the most important thing you can do is be there. As part of your community, you are in a position to help a Veteran in crisis, and there are resources available to help you:

www.VeteransCrisisLine.net

www.mentalhealth.va.gov/communityproviders

While the action you take may be simple — calling a Veteran to check in, for example — the impact can be great. It may seem daunting to support a Veteran in crisis, and many people may not know exactly what to do. VA resources like the Veterans Crisis Line and the #BeThere initiative provide the tools you need to reach out and support Veterans in crisis. It's critical for those considering suicide to know you are there to support them, and that help is available to them 24/7 through a telephone call, live online chat, or texting.

Here are some additional ways that your organization can #BeThere:

- Spread the word on your social media networks.
 - Watch and share the "Be There" video.
 - Post ready-to-use social media content on Facebook and Twitter.
 - Show support by changing your social media profile picture and cover photo to a VA suicide prevention image.
- Engage your online community.
 - Display a VA suicide prevention banner on your website.
 - Share a prepared blog post with your online community.
 - Publish an article or advertisement in your newsletter or email blasts, or on your website.

Remember that the simple act of being there can make all the difference in preventing suicide. Supporting the Veteran or Servicemember in your life who's going through a difficult time doesn't have to be complicated. We can all play a role in preventing suicide. Join VA and the U.S. Department of Defense in spreading the word that preventing suicide starts with this simple act: Be There.

Publicly Available VA Resources

U.S. Department of Veterans Affairs: Explore the VA benefits that help Veterans thrive. www.explore.va.gov

Center for Women Veterans: Women are one of the fastest growing subgroups of Veterans, and they are signing up for VA health care and benefits at higher rates than ever before. www.va.gov/womenvet

Women Veterans and Benefits: Women are eligible for a wide variety of benefits available to all U.S. military Veterans. www.benefits.va.gov/persona/veteran-women.asp

Veterans Health Administration Locator: Find VA health care locations by state, www.vets.gov

Veterans Benefits Administration Locator: Find VA regional benefits offices by state. www.va.gov/directory/guide/division.asp?dnum=3

National Cemetery Administration: www.cem.va.gov

MyHealtheVet: Veterans can use this portal to access pharmacies, appointments, messages, and health records. www.myhealth.va.gov

National Center for Post-Traumatic Stress Disorder (PTSD): www.ptsd.va.gov/public

VA Program Locators Nationwide:

- Post-Traumatic Stress Disorder: www.va.gov/directory/guide/PTSD.asp?isFlash=0
- Substance Use Disorder Program Locator: www.va.gov/directory/guide/SUD.asp?isFlash=0
- Vet Centers: www.va.gov/directory/guide/vetcenter.asp?isFlash=0

VA's Self-Paced Online Training:

- Moving Forward: Overcoming Life's Challenges: www.veterantraining.va.gov/movingforward/index.asp
- Anger and Irritability Management Skills: www.veterantraining.va.gov/aims/index.asp
- Parenting for Servicemembers and Veterans: www.veterantraining.va.gov/parenting/index.asp
- PTSD Coach Online: www.ptsd.va.gov/PTSD/apps/ptsdcoachonline/default.htm

VHA's Office of Rural Health: The Office of Rural Health (ORH) implements a targeted, solution-driven approach to increase access to care for 3 million Veterans living in rural communities who rely on VA for health care. www.ruralhealth.va.gov/

Homeless Veterans or Those at Risk of Becoming Homeless: 1-877-4AID-VET (1-877-424-3838) www.va.gov/HOMELESS/mental_health_services.asp

Military Sexual Trauma: Military sexual trauma is the term VA uses to refer to sexual assault or repeated, threatening sexual harassment while the Veteran was in the military. www.mentalhealth.va.gov/msthome.asp

Lesbian, Gay, Bisexual, and Transgender (LGBT) Veteran Care: VHA's commitment to LGBT Veterans includes promoting a welcoming health and work environment that is inclusive of LGBT Veterans and employees and offering information, guidance, and education to VHA providers about LGBT health issues. www.patientcare.va.gov/LGBT/

Vet Center Program 1-877-WAR-VETS (1-877-927-8387): Vet Centers welcome home war Veterans with honor by providing quality readjustment counseling in a caring manner. Mobile Vet Centers travel around the country offering counseling to Veterans in difficult-to-reach areas or at specific events. www.vetcenter.va.gov

Bereavement Counseling: VA offers bereavement counseling to parents, spouses, and children of military personnel who died in service to their country. Also eligible are family members of Reservists and National Guard members who died while on duty. www.vetcenter.va.gov/bereavement_counseling.asp

VA's Office of Tribal Government Relations: The Office of Tribal Government Relations works to strengthen and build closer relations between VA, tribal governments, and other key federal, state, private, and nonprofit partners to effectively and respectfully serve Veterans across Indian Country. www.va.gov/TRIBALGOVERNMENT/index.asp

Veterans Justice Outreach Program: The aim of the Veterans Justice Outreach program is to avoid the unnecessary criminalization of mental illness and extended incarceration among Veterans by ensuring that eligible, justice-involved Veterans have timely access to VHA services, as clinically indicated. www.va.gov/homeless/vjo.asp

VA's Polytrauma/Traumatic Brain Injury System of Care:

www.polytrauma.va.gov/understanding-tbi/

Caregiver Support Program and Phone Line (1-855-260-3274): VA values your commitment as a partner in our pledge to care for those who have "borne the battle." We have several support and service options designed with you in mind. The programs are available both in and out of your home to help you care for yourself and the Veteran you love. www.caregiver.va.gov

Coaching Into Care (1-888-823-7458): Coaching Into Care is a national telephone service at VA that aims to educate, support, and empower family members and friends who are seeking care or services for a Veteran. www.mirecc.va.gov/coaching

Fisher House for Families: A Fisher House™ is "a home away from home" for families and caregivers of patients receiving medical care at major military hospitals or VA medical centers. The homes are normally located within walking distance of the treatment facility or have transportation available. www.socialwork.va.gov/fisher.asp

VA Community Provider Toolkit: Serving Veterans Through Partnership:

www.mentalhealth.va.gov/communityproviders/clinic_benefits.asp

VA Campus Toolkit (for Student Veterans in Higher Education):

www.mentalhealth.va.gov/studentveteran/adjustment.asp

Rocky Mountain Mental Illness Research, Education and Clinical Center (MIRECC) for VA Suicide Prevention: Rocky Mountain MIRECC disseminates information about suicide prevention in ways that are accessible to Veterans and the community at large, and evaluates strategies to translate research-informed practices into everyday care. www.mirecc.va.gov/visn19/index.asp

Make the Connection: This online resource is designed to connect Veterans, their family members and friends, and other supporters with information, resources, and solutions to issues affecting their lives.

- Get Materials and Start Sharing: www.MakeTheConnection.net/resources/spread-the-word
- Make the Connection Compilations: www.MakeTheConnection.net/stories-of-connection?filter=00000&storytype=5

Veterans Crisis Line: Call 1-800-273-8255 and Press 1, text to 838255, or chat online at VeteransCrisisLine.net/Chat.

General Materials for Your Community Event:

- Print and social media content: spreadtheword.veteranscrisisline.net/materials/
- Spread the Word: spreadtheword.veteranscrisisline.net/
- Be There Create a Message of Hope: www.VeteransCrisisLine.net/GraphicGenerator.aspx
- Resources: www.VeteransCrisisLine.net/BeThereVeterans.aspx
- VA gun safety video and public service announcements: spreadtheword.veteranscrisisline.net/video/

My VA Community Model – **Putting Veterans First:** The MyVA Community model enables Veterans, advocates, service providers, and stakeholders to have a voice in identifying their community goals and to work to resolve issues at the local level to improve service delivery for Veterans, Servicemembers, and their families. www.va.gov/nace/myVA/



U.S. Department of Veterans Affairs

Veterans Health Administration Office for Suicide Prevention