VA | U.S. Department of Veterans Affairs

Fact Sheet
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U.S. Department of Veterans Affairs (VA)
Office of Mental Health and Suicide Prevention (OMHSP)

Facts About Suicide Among Women Veterans: August 2017

If you or someone you know is at immediate risk for suicide, contact the Veterans Crisis Line: Call **1-800-273-8255 and Press 1**, text to **838255**, or chat online at **VeteransCrisisLine.net/Chat**.

Overview
Every Veteran suicide is a tragic outcome. Regardless of the numbers or rates, one Veteran suicide is too many. VA is leading national efforts to understand suicide risk factors, develop evidence-based intervention strategies, and proactively identify and care for Veterans who are in crisis or at risk for suicide. Women comprise the fastest-growing Veteran subpopulation, and VA is committed to improving their health and well-being, which includes addressing suicide and suicidal behaviors.

This fact sheet summarizes what is known about suicide among women Veterans and highlights national resources available to assist women Veterans who are in crisis or at risk for suicide. A more general fact sheet on suicide among all Veterans is also available.

Suicide Among Men and Women in the General U.S. Population *(Centers for Disease Control and Prevention)*[1,2]

- Men are more likely than women to die by suicide.
    - In the general U.S. population, the suicide rate for men is more than three times the suicide rate for women.
    - Men are more likely than women to use lethal means, such as firearms, when attempting suicide; this is one reason for the higher suicide rate for men. Women are more likely to use less lethal methods, such as poisoning and overdose.
- About 40,000 people die by suicide in the United States each year, and women account for 23 percent of these deaths.
- From 1999 through 2014, the percent increase in the age-adjusted suicide rate was greater for women (45 percent increase) than men (16 percent increase). During this period, the suicide rate for women in the United States has increased in all age groups under 75.

Suicide Among Women Using VHA Health Services[3]

- VA annually conducts a comprehensive assessment of suicide deaths among individuals who have used VA health services in the year of their death or the year prior. This assessment includes differences in suicide mortality by gender.
- The suicide rate among women receiving VHA services was lower than that of male users of VHA health services. In 2014, the suicide rate among women using VHA services was 17.3 per 100,000, while for male VHA users, the rate was 41.8 per 100,000.
- The suicide rate among women using VHA services has increased in recent years, from 14.4 per 100,000 in 2001 to 17.3 per 100,000 in 2014.
- VA continues to conduct important research to identify risk factors and patterns of suicide in Veterans, including those that may be linked to gender.

- For example, in one recent study, VA researchers found the rate of suicide to be higher among women who report having experienced military sexual trauma (MST) — that is, sexual assault or sexual harassment during military service — compared to those who have not experienced MST.

Suicide Among All Women Veterans[3]

- VA and the Department of Defense (DoD) have partnered to maintain the VA/DoD Joint Suicide Data Repository, which includes information on deaths by suicide among all known Veterans of U.S. military service, as obtained from the National Center for Health Statistics National Death Index. The database provides information on suicides among all U.S. Veterans, not only those who use VHA services. In August 2016, VA released a report detailing these rates and trends, "Suicide Among Veterans and Other Americans: 2001–2014."
- The suicide rate for the total U.S. Veteran population in 2014 was 35.6 per 100,000. In 2014, the suicide rate for women Veterans was 19 per 100,000, which was about half the male Veteran suicide rate of 37.2 per 100,000.
- From 2001 through 2014, the suicide rate among women Veterans increased to a greater degree (62.4 percent) than the suicide rate among male Veterans (29.7 percent).
- Different trends and suicide rates have been noted between women Veterans who do and do not use VHA services; however, this gap has diminished over the past decade.
    - Accounting for age differences, in 2001 the suicide rate among women Veterans using VHA services was higher than the rate among women Veterans not using VHA services. This difference diminished over time, and since 2013 there has been no statistically significant difference between the suicide rates of Veterans who do and do not use VHA services.
    - Although the suicide rate increased overall for women Veterans from 2001 through 2014, the suicide rate decreased by 2.6 percent for women using VHA services during this same time period.
- Different trends and suicide rates have been observed between women Veterans in different age groups from 2001 through 2014. Compared to other age groups, those under age 40 experienced a higher suicide rate, and a greater increase in the suicide rate over this period.
    - After adjusting for age differences, the suicide rate among women Veterans in 2014 was found to be 2.5 times higher than the rate among civilian adult women in the United States. This difference has remained relatively stable since 2001.
    - An increased likelihood of using firearms, which are highly lethal, as the method for suicide may explain some of the difference between suicide rates of Veteran and civilian women. Firearms were used by 40.5 percent of women Veterans who died by suicide, compared to 31.1 percent of U.S. civilian adult women who died by suicide.

Current Suicide Prevention Initiatives and Resources and VA Mental Health Services for Women Veterans

- **Outpatient mental health services:** VA provides a full continuum of mental health services to women Veterans through VA medical centers, Vet Centers, community-based outreach clinics, and partnerships with other local treatment providers across the country.
- **Inpatient programs:** VA has regional and national residential and inpatient programs that either provide treatment to women only or have separate tracks for women and men.
- **Specialty treatment for post-traumatic stress disorder (PTSD):** Evidence-based therapies for PTSD, including prolonged exposure or cognitive processing therapy, have been shown to decrease suicidal ideation. These treatments are available at every VA medical center.
- **Support for treating the effects of military sexual trauma (MST):** VA is committed to ensuring that appropriate services are available to meet the treatment needs of all Veterans, male and female, who have experienced MST.

To learn more about VA's mental health services and resources for women Veterans, visit www.mentalhealth.va.gov.

VA Suicide Prevention Resources

- **Immediate support through the Veterans Crisis Line:** Caring, qualified Veterans Crisis Line responders are available 24/7/365 to provide support for Veterans who are at acute risk for suicide, and for those calling on the behalf of a Veteran. Call **1-800-273-8255** and Press 1, text to **838255**, or chat online at VeteransCrisisLine.net/Chat.
- **Local Suicide Prevention Coordinators:** At least one full-time Suicide Prevention Coordinator (typically a nurse or social worker) is assigned to each VA medical center and large community-based outpatient clinic. These individuals are responsible for providing support for Veterans at a high risk for suicide — including patients who have attempted suicide, who are experiencing serious suicidal ideation, or who are otherwise clinically determined to be at high risk for suicide. Suicide Prevention Coordinators help provide integrated care for these Veterans, tracking appointments and coordinating with the Veteran and their other clinical providers.

To find your local Suicide Prevention Coordinator and other treatment programs near you, go to VeteransCrisisLine.net/ResourceLocator.

VA Women's Health Services

- **Women Veterans Program Manager:** At every VA medical center, VA has a designated Women Veterans Program Manager who acts as an administrative leader for the Women's Health Program and as an advocate for women Veterans.
- **Designated Women's Health Providers:** Women Veterans can be assigned to trained and experienced Designated Women's Health Providers, who provide general primary care and gender-specific care as part of the patient/provider relationship.
- **Women Veterans Call Center:** This service is available to provide women Veterans with information about relevant VA benefits and services and to answer questions they may have about their benefits. Call **1-855-VA-WOMEN (1-855-829-6636)** to contact responders who can make referrals to Women Veterans Program Managers, the Health Eligibility Center, the Veterans Benefits Administration, and suicide and homeless crisis lines as needed.

For more information about VA's programs and services for women Veterans, Veterans currently enrolled in VA health care may speak with their VA mental health or health care provider. Other Veterans and interested parties can find a complete list of VA health care facilities, Vet Centers, local Suicide Prevention Coordinators, and other resources at VeteransCrisisLine.net/ResourceLocator or www.va.gov.

For more information about this fact sheet, contact Dr. David Carroll, Executive Director, Office of Mental Health and Suicide Prevention, at David.Carroll@va.gov.

References

1. Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, Division of Violence Prevention. Suicide: Facts at a Glance. 2015.
2. Curtin SC, Warner M, Hedegaard H. Increase in Suicide in the United States, 1999–2014. NCHS Data Brief, no. 241. Hyattsville, MD: National Center for Health Statistics. 2016.
3. Department of Veterans Affairs, Suicide Prevention Office. Suicide Among Veterans and Other Americans: 2001–2014. 2016.