

U.S. Department of Veterans Affairs

Fact Sheet

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U.S. Department of Veterans Affairs Office of Mental Health and Suicide Prevention

Facts About Suicide Among Women Veterans: June 2018

If you or someone you know is in crisis or thinking about suicide, contact the toll-free, 24/7 Veterans Crisis Line to speak with a trained, caring VA responder. 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, and one Veteran suicide is too many. The U.S. Department of Veterans Affairs (VA) has embraced a comprehensive public health approach to reduce Veteran suicide rates and 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.

The VA Suicide Prevention Program's public health approach addresses the risk factors associated with suicidal behavior — such as a prior suicide attempt, stressful life events, or the availability of lethal means — while promoting the protective factors that can offset risk — such as positive coping skills, feeling connected to other people, and access to mental health care.

Women are the fastest-growing Veteran group. They constitute approximately 9 percent of the U.S. Veteran population and are projected to account for 15 percent by 2035. VA is committed to improving the health and well-being of women Veterans, including by 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 Women and Men in the General U.S. Population (Centers for Disease Control and Prevention)^{1,2}

- Women are less likely than men 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.
 - Women are more likely than men to use less lethal methods, such as poisoning and overdose, when attempting suicide.
 - Men are more likely than women to use very lethal methods, such as firearms, which may contribute to their elevated suicide rate.
- About 40,000 people die by suicide in the United States each year, and women account for 23 percent of these deaths.
- From 2005 through 2015, the age-adjusted suicide rate for women increased by 34 percent, compared to a 13 percent increase for men. During this period, the suicide rate for women in the United States increased in all age groups under 75.

Suicide Among Women Using Veterans Health Administration (VHA) Health Services³

• VA annually conducts a comprehensive assessment of suicide deaths among people who have used VHA health services in the year of or the year prior to their death. This assessment includes differences in suicide deaths by gender.

- The suicide rate among women receiving VHA services was lower than that of male users of VHA health services. In 2015, the age-adjusted suicide rate among women using VHA services was 17.8 per 100,000 person-years, while the rate for male VHA users was 45.6 per 100,000 person-years.
- The age-adjusted suicide rate among women using VHA services increased from 15.2 per 100,000 personyears in 2005 to 17.8 per 100,000 person-years in 2015.
- VA continues to conduct important research to identify risk factors and patterns of suicide in Veterans, including factors 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 reported having experienced military sexual trauma (MST) that is, sexual assault or sexual harassment during military service than among those who did not report experiencing MST.

Suicide Among All Women Veterans³

- VA and U.S. Department of Defense (DoD) have partnered to maintain the joint VA/DoD 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 suicide among all U.S. Veterans, not only those who use VHA services. In June 2018, VA released the "VA National Suicide Data Report, 2005–2015," which details suicide rates and trends during those years.
- The age-adjusted suicide rate for the total U.S. Veteran population in 2015 was 33.7 per 100,000. In 2015, the suicide rate for women Veterans was 15.1 per 100,000 population, which was less than half the male Veteran suicide rate of 36.8 per 100,000 population.
- From 2005 through 2015, the age-adjusted suicide rate among women Veterans increased by 45.2 percent, compared to an increase of 35.3 percent for male Veterans.
- Differences in trends and suicide rates have been noted between women Veterans who do and do not use VHA services; however, this gap diminished from 2005 to 2015.
 - The age-adjusted suicide rate in 2005 among women Veterans using VHA services (in the year of or year prior to their death) was higher than the age-adjusted rate among women Veterans not using VHA services. However, from 2006 to 2015, there was no statistically significant difference between the age-adjusted suicide rates of women Veterans using and not using VHA services.
 - The age-adjusted suicide rate for women using VHA services increased by 17.8 percent between 2005 and 2015.
- Differences in trends and suicide rates have been observed in women Veterans of different age groups.
 Between 2005 and 2015, women Veterans ages 35–54 had higher suicide rates than those in other age groups.
 - After adjusting for age differences, the suicide rate among women Veterans in 2015 was 2.0 times higher than the rate among non-Veteran women in the United States. This ratio has remained relatively stable since 2005.
 - A greater likelihood of using firearms, which are highly lethal, as the method for suicide may explain some of the difference between suicide rates of women Veterans and women non-Veterans. In 2015, firearms were used by 39.9 percent of women Veterans who died by suicide, compared with 30.7 percent of U.S. non-Veteran women who died by suicide.

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

- Resource Locator: This online resource helps Veterans easily find VA resources in their area, including Suicide Prevention Coordinators, crisis centers, VA medical centers, outpatient clinics, Veterans Benefits Administration offices, and Vet Centers. More information is available at https://www.veteranscrisisline.net/GetHelp/ResourceLocator.aspx.
- Make the Connection: This online resource contains hundreds of firsthand stories from women Veterans and connects Veterans, their family members and friends, and other supporters with solutions to challenges affecting their lives. More information is available at https://maketheconnection.net/.
- Coaching Into Care (888-823-7458): A national telephone service of VA, Coaching Into Care aims to
 educate, support, and empower family members and friends who are seeking care or services for a Veteran.
 More information is available at https://www.mirecc.va.gov/coaching/.

- **Outpatient mental health services:** VA provides a full continuum of mental health services to women Veterans through VA medical centers, Vet Centers, community-based outpatient clinics, and partnerships with local treatment providers across the country.
- **Residential treatment programs:** For Veterans who need more intensive treatment and support, VA has mental health residential programs that provide treatment/services for mental health issues, substance use disorders, medical conditions, and homelessness.
- **Inpatient mental health care:** VA has inpatient programs for acute care needs, such as psychiatric emergencies and stabilization, and medication adjustment.
- Specialty treatment for posttraumatic stress disorder (PTSD): Evidence-based therapies for PTSD, including prolonged exposure and 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 and may be at risk for suicide. All MST-related care is provided free of charge; Veterans do not need to have a VA disability rating (for a service-connected disability) and may be able to receive services even if they are not eligible for other VA care.
- Women's Mental Health Champions: This national network, representing nearly every VA health care system, disseminates information, facilitates consultations, and develops local resources to promote women Veterans' access to specialized mental health services.

Specific offerings vary from facility to facility, based on local demand and resources.

- Some facilities have established formal outpatient mental health treatment teams that specialize in working with women Veterans.
- VA has residential rehabilitation programs that provide treatment to women only or have separate tracks for men and women.
- These residential rehabilitation treatment programs are considered regional and/or national resources, not just resources for their local facilities.

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

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 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 <u>VeteransCrisisLine.net/Chat</u>.
- Local Suicide Prevention Coordinators (SPC): At least one full-time SPC (typically a nurse or social worker) is assigned to each VA medical center and large community-based outpatient clinic. SPCs provide support for Veterans at a high risk for suicide including patients who have attempted suicide and those who are experiencing serious suicidal ideation. SPCs help provide integrated care for these Veterans, tracking appointments and coordinating with the Veterans and their other clinical providers.

To find your local SPC 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, there is a designated Women Veterans
 Program Manager who acts as an administrative leader for the Women's Health Program and advocates 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 provides women Veterans with information about relevant VA benefits and services and answers questions women Veterans 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 <u>VeteransCrisisLine.net/ResourceLocator</u> or <u>www.va.gov</u>.

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

References

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- 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. U.S. Department of Veterans Affairs, Office of Mental Health and Suicide Prevention. VA National Suicide Data Report 2005–2015. 2018.