SPC ROLE

• Helps Veterans in crisis navigate VA’s network of care and facilitate the help that is needed.
• Monitors individual Veteran’s progress and follows up to ensure personal safety plans are implemented.
• Reports and tracks events and behaviors to enhance our knowledge of common risk factors, trends, and outcomes.
• Build community relationships and awareness through training, outreach events, resources and materials.
National High Risk for Suicide Flag
<table>
<thead>
<tr>
<th>COUNTY</th>
<th>GENERAL POPULATION</th>
<th>VETERAN POPULATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>MIAMI-DADE</td>
<td>2,693,117</td>
<td>58,521</td>
</tr>
<tr>
<td>MONROE</td>
<td>77,482</td>
<td>7,268</td>
</tr>
<tr>
<td>BROWARD</td>
<td>1,896,425</td>
<td>89,663</td>
</tr>
</tbody>
</table>

Source: 2010-2014 American Community Survey 5-Year Profiles
VA’s new suicide data report was released on July 7, 2016.

Decrease in average number of Veteran suicides per day

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>22</td>
</tr>
<tr>
<td>2014</td>
<td>20</td>
</tr>
</tbody>
</table>

General population suicide rates are increasing, per an April 2016 CDC report.

Suicide is not just a Veteran issue, but a public health issue.
• 1,069,325 suicide attempts in U.S.
• Someone in the U.S. dies by suicide every 12.8 minutes.
• Suicide is the 8th leading cause of death for Americans; homicide ranks 17th.
• 91 Suicides per day of which 20 are Veterans.
• Men take their lives nearly 4 times the rate of women.
• Persons age 65 and older have the highest suicide rate of any age group.
• Suicide is the second leading cause of death among 25-34 year olds and third leading cause among 15-24 year olds.
• Firearms are the most commonly used method of suicide among males (56.9%).
• Poisoning is the most common method of suicide among females (34.8%).
• Suicide by Cop Scenarios are on the rise.

Source: Centers for Disease Control and Prevention - Suicide Facts at a Glance 2015
• **Myth or reality**: 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 find a safe environment for 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.
• **Myth or reality**: 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
• **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.** will help you act with care and 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 Expedite getting help.
Many Veterans may not show any signs of intent to harm 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 themselves.
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.
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...

• “Are you thinking about killing yourself?”
• 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.
When talking to 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
• 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.
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.
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**.
• Veteran Justice Outreach Coordinator, Giovanna Delgado, Psy,D. and the Suicide Prevention Coordinator, Gloria Lewis, MSN, RN are faculty members of the Crisis Intervention Team (CIT) Program and the Criminal Mental Health Project with the Eleventh Judicial Circuit of Miami-Dade County, Florida.

• Since January of 2015: 570 Police Officers and Dispatchers have received CIT Training.
• Veteran Justice Outreach Coordinator, Micol Levi-Minzi, Psy.D. and Suicide Prevention Coordinator, Simone Edwards, LCSW are faculty members of the Broward County Crisis Intervention Team (CIT) Program.

• Since January of 2015: 620 Police Officers and Dispatchers have received CIT Training.
Veterans Crisis Line

1-800-273-8255

PRESS 1

Confidential chat at VeteransCrisisLine.net or text to 838255
Veterans Crisis Line: 9 years of saving lives

- National Veterans Suicide Prevention Hotline: 2007
- Online chat: 2009
- Veterans Crisis Line: 2010
- Text to 838255: 2011
- Increased number of responders: 2012
- Mobile site: 2013
- Opened second call center; increased staff: 2016

- Over 2.5 million calls
- Nearly 308,000 chats
- Over 60,000 texts
- Over 408,000 referrals to VA Suicide Prevention Coordinators
- Nearly 66,000 dispatches of emergency services as of September 2016
COMMUNITY OUTREACH
RAISING AWARENESS WITH PROMOTIONAL MATERIAL

- Brochures and Posters
- Wallet Card
- Coaster
- Magnet
- Key Chain
- Tote Bags
- Pillbox
- Bracelet
- Kickstand Pads
- Phone Sticker
Suicide Prevention Coordinators at VA Medical Centers can provide gun locks to secure firearms in the home.

No questions asked.
MENTAL HEALTH RESOURCES

MAKE THE CONNECTION
www.MakeTheConnection.net

SHARED EXPERIENCES AND SUPPORT FOR VETERANS
Make the Connection is about changing the conversation and reducing the stigma Veterans and the general public associate with mental health. The campaign promotes the message that resources are available, treatment works, and recovery is possible.

**Listen**
More than 600 videos of real stories from Veterans about experiencing mental health challenges and how they found support

**Learn**
Information about life events, signs and symptoms, and conditions

**Locate**
Find VA, SAMHSA, and National Resource Directory resources near you
For all that you do for our country’s heroes!