

A Perfect Storm: Understanding and Preventing Suicide Among Justice-Involved Veterans

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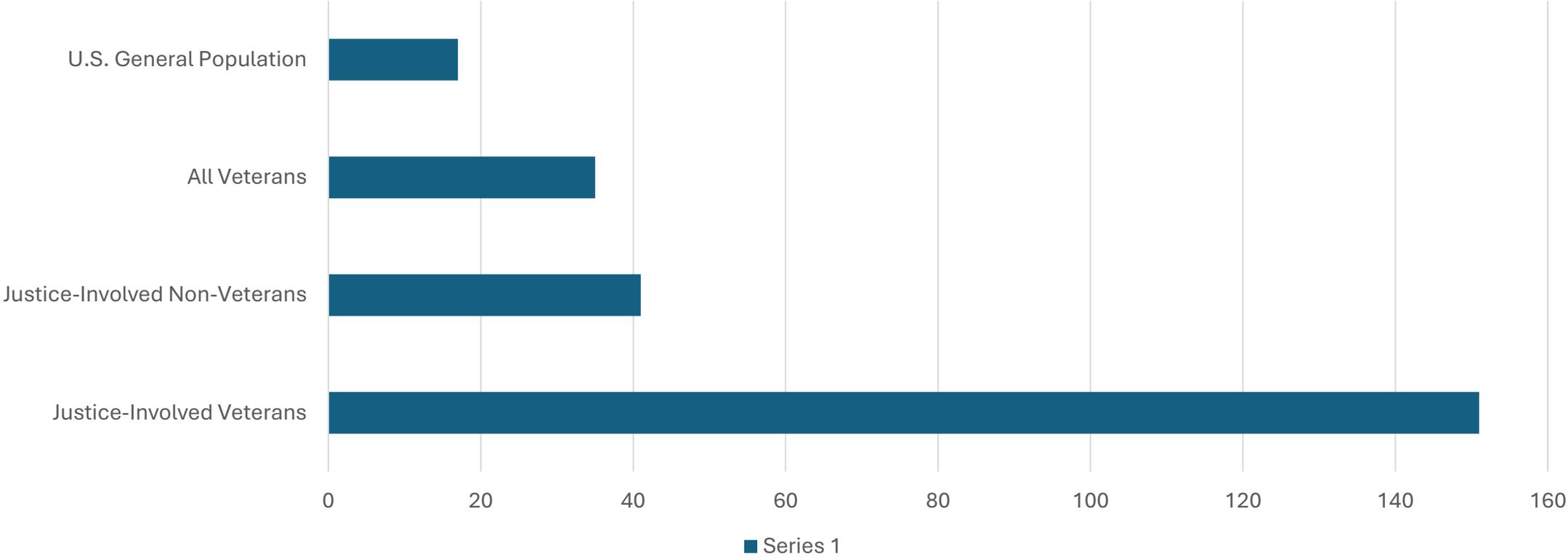
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Learning Objectives

- **Increase Knowledge:** Understand the scale of the suicide crisis for justice-involved veterans (JIVs).
- **Improve Understanding:** Deconstruct the unique risk factors that make this population so vulnerable.
- **Gain Information:** Critically assess current efforts, like Veteran Treatment Courts.
- **Identify Opportunities:** Leave with concrete tools and strategies to implement in your specific roles.

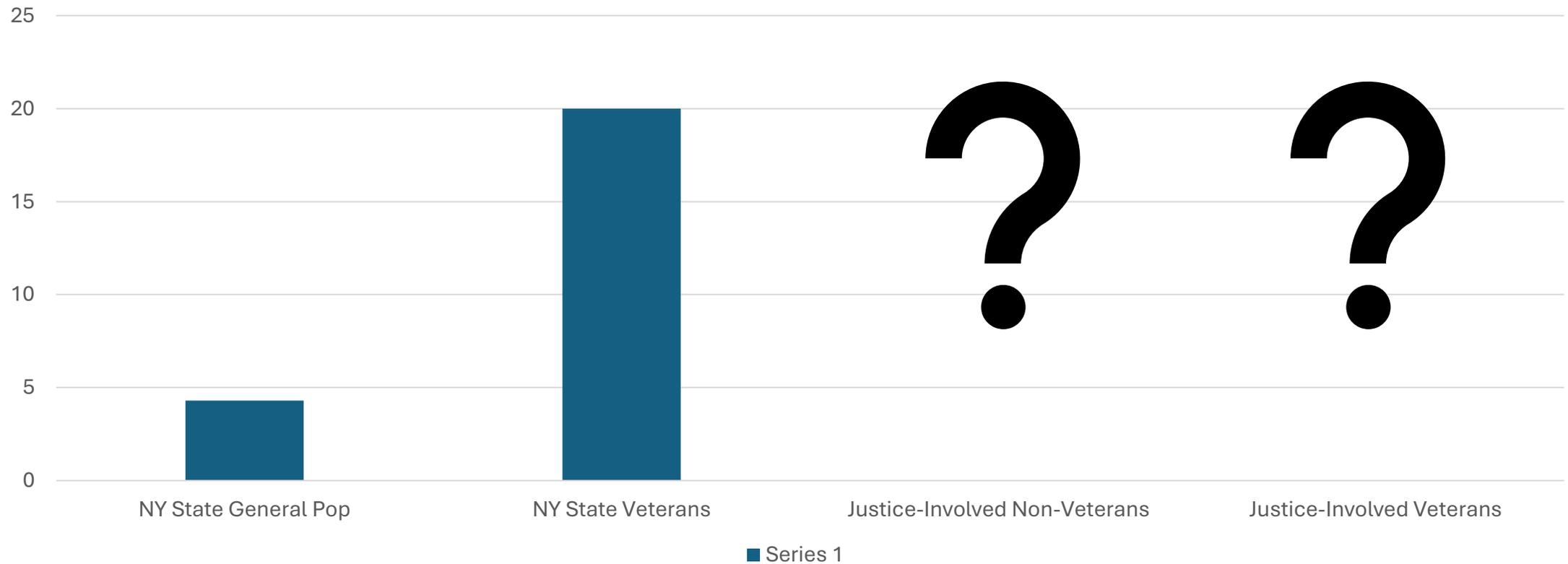
The Big Picture – National Data

2022 Unadjusted Suicide Rate (Per 100k, Per Year)



Closer to Home – New York State Data

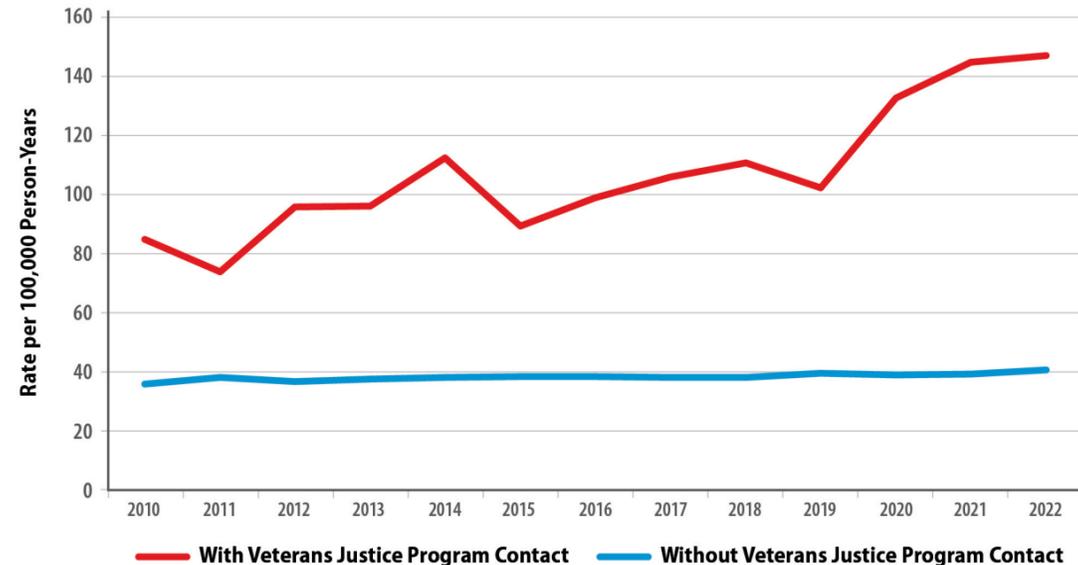
2022 Unadjusted Suicide Rate (Per 100k, Per Year)



Interpreting Data – Successful Targeting

- The suicide rate for veterans in VA Justice Programs is **147.3 per 100,000**.
- Identified population with exceptionally high risk
- Bring corresponding level of resources – *targeting suicide risk*

Figure 36: Unadjusted Suicide Rate, Recent Veteran VHA Users, by Receipt of Veterans Justice Program Services, 2010–2022⁹⁹

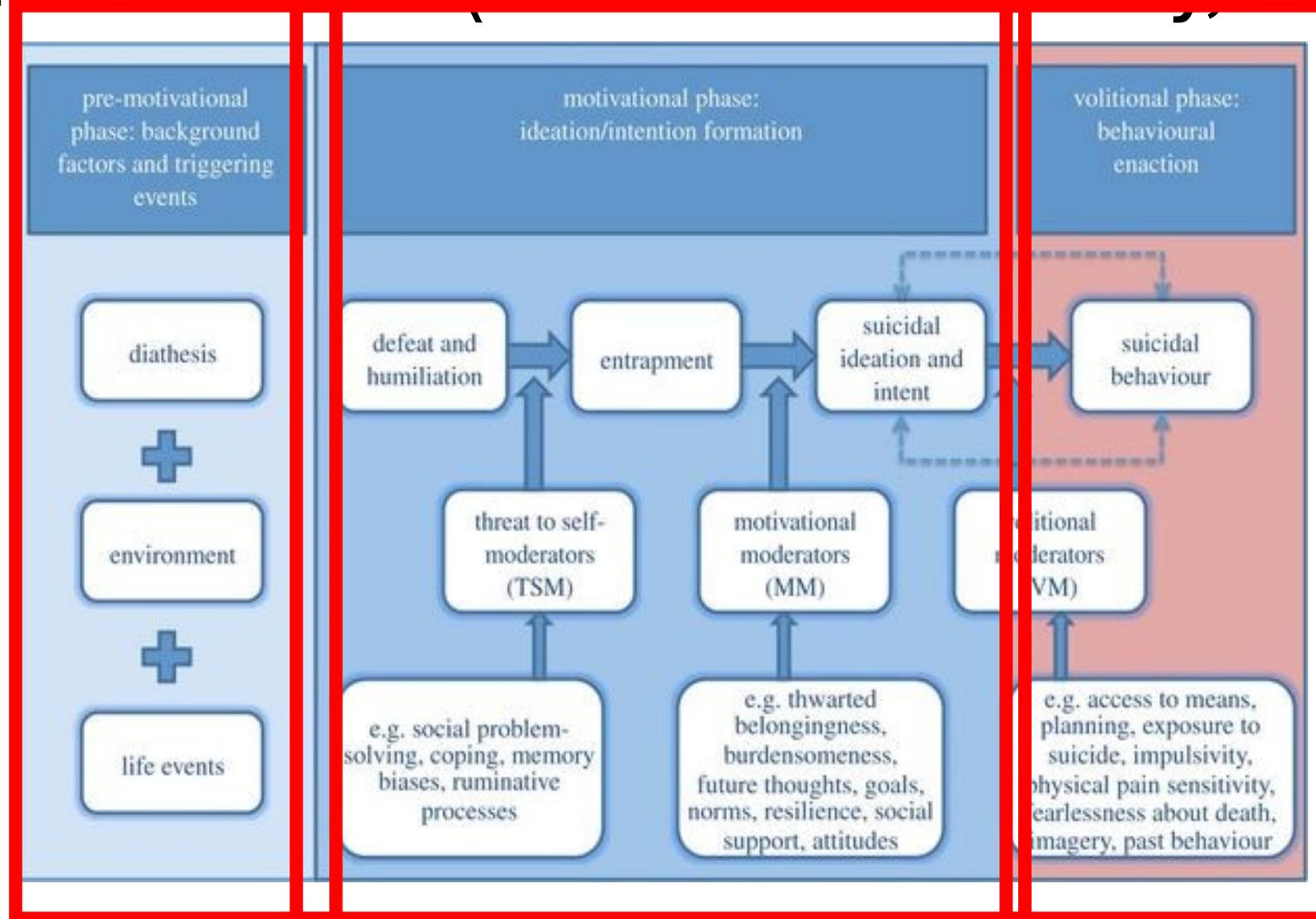


Military Service and Justice-Involvement Link

A vast majority of veterans, even veterans with significant combat exposure and/or mental health challenges, have justice-involvement

- JIV experience higher rates of trauma exposure and PTSD than both veterans without JI and non-veteran JI.
- PTSD symptoms look like criminal behaviors
 - Hypervigilance → Aggravated Assault
 - Self-medication → DUI, Drug Possession
 - Emotional Numbing/ Irritability → Domestic Conflicts

Integrated Motivational-Volitional Model of Suicidal Behavior (O'Connor & Kirtley, 2018)



Perfect Storm of Compounding Risk

- **Military-Specific Factors**

- **Discharge Status:** A less-than-honorable discharge can double suicide risk and cut off access to VA care.
- **Military Sexual Trauma (MST):** Increases suicide rate by over 70%.
- **Chronic Pain:** 2-3x more likely to die by suicide.

- **Post-Service Systemic Failures**

- **Homelessness:** Suicide rate for homeless vets is 112.9 per 100,000.
- **Loss of Camaraderie & Purpose:** Leads to "thwarted belongingness".

- **Justice System as an Accelerant**

- **Burden of Supervision:** Veterans on probation/parole are 4x more likely to report a lifetime suicide attempt.

Acquired Capability + Acute Despair, a Lethal Combination

- **Military Service provides ACQUIRED CAPABILITY:**
 - Proficiency with lethal means (especially firearms).
 - Desensitization to fear, pain, and death.
- **Justice Involvement provides ACUTE DESPAIR:**
 - Profound hopelessness, shame, and perceived burdensomeness.

Engagement with JIV: Opportunities to Save Lives

- VTCs are effective at what they are designed to do: Reduce Recidivism
- VTCs are opportunities to deliver many interventions associated with reduced suicide risk
- Intentional suicide prevention interventions woven into the practice of the VTCs and their staff can reduce risk for JIV

Opportunities: Universal Screening with C-SSRS

- **What it is:** The Columbia-Suicide Severity Rating Scale (C-SSRS). An evidence-based tool that uses simple, plain-language questions to identify suicide risk.
- **Who can use it:** Anyone. It does not require mental health training. Perfect for probation officers, court staff, and peer mentors.
- **Why it works:**
 - Creates a **common language** of risk across all disciplines.
 - Provides a **clear, defensible protocol** for action.

Opportunities: Universal Screening with C-SSRS

COLUMBIA-SUICIDE SEVERITY RATING SCALE
Screen with Triage Points for Corrections

Ask questions that are in bold and underlined.	Past month	
	YES	NO
Ask Questions 1 and 2		
1) <u>Have you wished you were dead or wished you could go to sleep and not wake up?</u>		
2) <u>Have you actually had any thoughts of killing yourself?</u>		
If YES to 2, ask questions 3, 4, 5, and 6. If NO to 2, go directly to question 6.		
3) <u>Have you been thinking about how you might do this?</u> e.g. "I thought about taking an <u>overdose</u> but I never made a specific plan as to when where or how I would actually do it....and I would never go through with it."		
4) <u>Have you had these thoughts and had some intention of acting on them?</u> as opposed to "I have the <u>thoughts</u> but I definitely will not do anything about them."		
5) <u>Have you started to work out or worked out the details of how to kill yourself? Did you intend to carry out this plan?</u>		
6) <u>Have you ever done anything, started to do anything, or prepared to do anything to end your life?</u> Examples: Took pills, tried to shoot yourself, cut yourself, took out pills but didn't swallow any, held a gun but changed your mind or it was grabbed from your hand, went to the roof but didn't jump, collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, etc.		Lifetime
		Past 3 Months
If YES, ask: <u>Was this within the past 3 months?</u>		

Possible Response Protocol to C-SSRS Screening

Item 1 Behavioral Health Referral

Item 2 Behavioral Health Referral

Item 3 Behavioral Health Referral

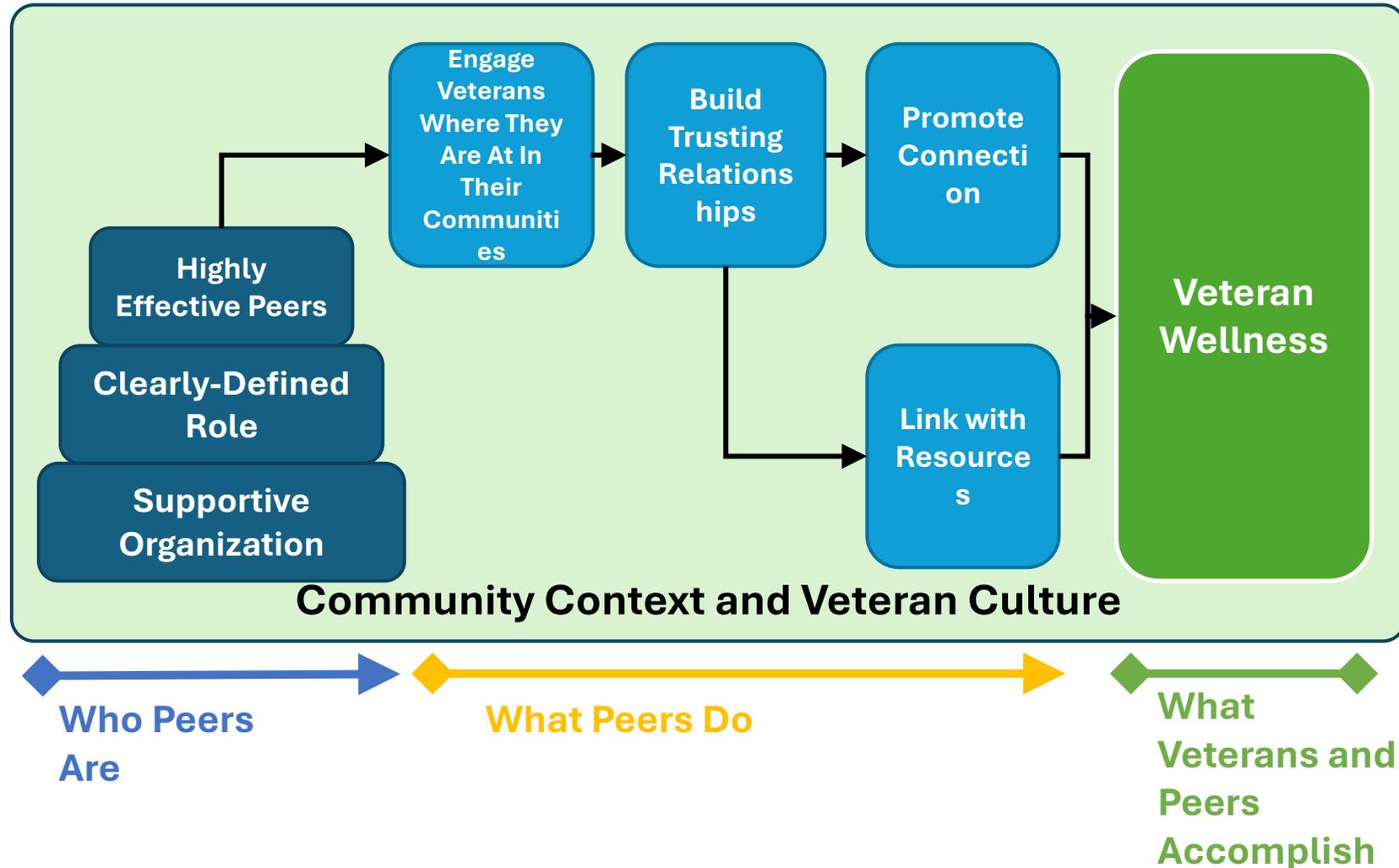
Item 4 Immediate Suicide Precautions

Item 5 Immediate Suicide Precautions

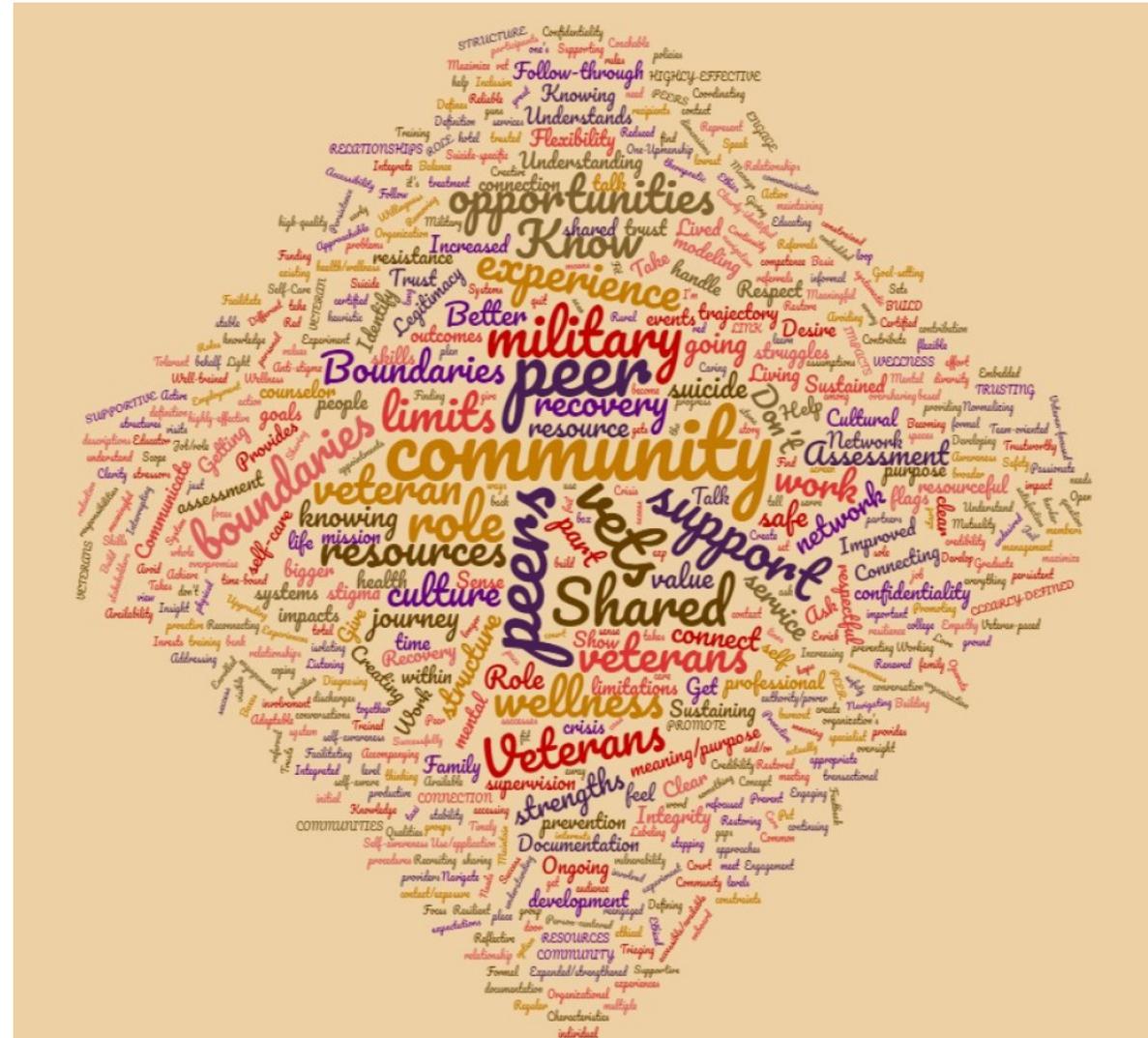
Item 6 Behavioral Health Referral

Item 6 3 months ago or less: Immediate Suicide Precautions

Opportunities: Professional Peer Support



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Opportunities: Safety Planning

- **Step 1:** Warning Signs (that I may be headed towards a crisis)
- **Step 2:** Ways I Can Cope (on my own)
- **Step 3:** My Distractions (places I can go, and people I can call)
- **Step 4:** Friends and Family I Can Call (for support)
- **Step 5:** Professionals I Can Call (in times of crisis)
- **Step 6:** Keeping Myself Safe (by limiting my access to dangerous objects)



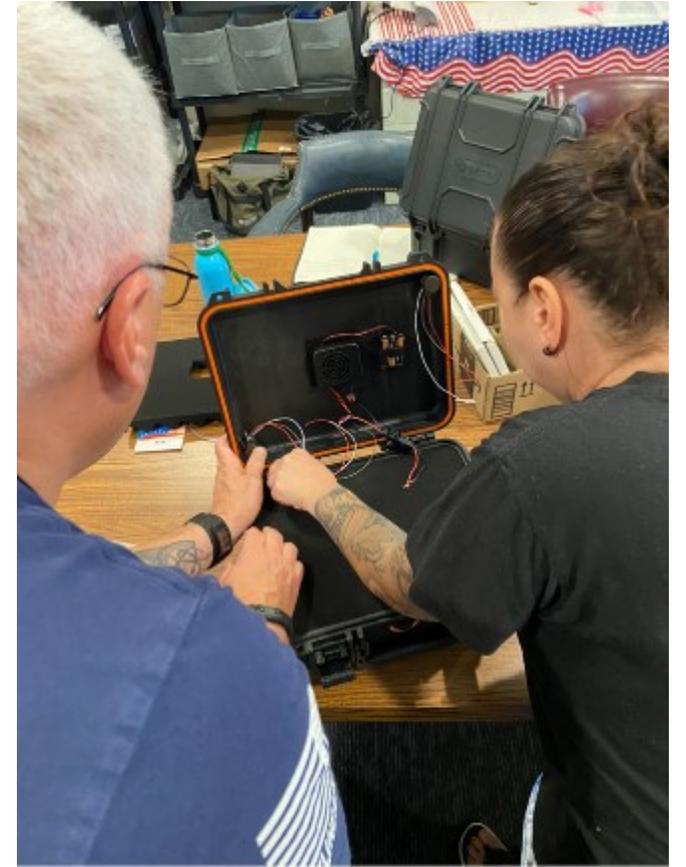
Scan the QR code to
download Safety Plan



Opportunities: My Reasons For Living Lockbox



- **Combines:**
- a popular lethal means safety device
- personalized reminders targeting all five senses of a Veteran's reasons for living.



Recommendations:

- **For Court Professionals:**

- Mandate C-SSRS screening at intake.
- Champion the professionalization of peer mentors on your team.
- Explore promising interventions like the My Reasons for Living Lockbox

- **For Mental Health Clinicians:**

- Prioritize suicide-specific interventions (Safety Planning, Lethal Means Counseling).
- Improve your understanding of JIV and veterans more generally

- **For Peer Specialists:**

- Get trained in VA S.A.V.E., the C-SSRS, and Safety Planning.
- Uphold professional boundaries to protect yourself and the veteran.

Summary:

- Justice-involved veterans are in a "perfect storm" of risk, created by the collision of **military-acquired capability** and **justice-system-induced despair**.
- VTCs are a vital platform, but suicide prevention must be an **intentional, integrated component**, not an assumed byproduct.
- The solution is a collaborative, "**no wrong door**" approach where every person in this room plays a critical role.

Thank you

Let me know if you have questions, need resources, want training, or to learn more about the My Reasons for Living Lockbox.

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