Behavioral Health is Essential To Health

Prevention Works

Treatment is Effective

People Recover
Federal initiatives related to Military and Veterans in Suicide Prevention

Name
Title

Name of Conference
City, State • Date
At 24 years of age, a Soldier, on average, has moved from home, family and friends and has resided in two other states; has traveled the world (deployed); been promoted four times; bought a car and wrecked it; married and had children; has had relationship and financial problems; seen death; is responsible for dozens of Soldiers; maintains millions of dollars worth of equipment; and gets paid less than $40,000 a year.
SAMHSA’s Strategic Initiative 1: Prevention of Substance Abuse and Mental Illness

Prevention of Substance Abuse and Mental Illness—Creating communities where individuals, families, schools, faith-based organizations, and workplaces take action to promote emotional health and reduce the likelihood of mental illness, substance abuse including tobacco, and suicide. This Initiative will include a focus on the Nation’s high-risk youth, youth in Tribal communities, and military families.

Goal 1.3: Prevent suicides and attempted suicides among populations at high risk, especially military families, LGBTQ youth, and American Indians and Alaska Natives.
SAMHSA’s Strategic Initiative 3: Military Families

• Supporting America’s service men and women—Active Duty, National Guard, Reserve, and Veteran—together with their families and communities by leading efforts to ensure that needed behavioral health services are accessible and that outcomes are positive.
Service Members, Veterans and their Families (SMVF) Policy Academies*

- **Goal**
  - For States and Territories to strengthen behavioral health systems for service members, veterans, and their families.

- **Process**
  - State/Territory establishes a long-term, 10-member interagency team, endorsed by the Governor.
  - 1 TA site visit before Policy Academy (PA)
  - 2.5 day PA. Professional facilitator helps team develop strategic plan that emphasizes interagency collaboration.
  - 1 post-PA site visit + ongoing TA to sustain implementation of the plan.

*Supports goals in President’s report Strengthening Our Military Families*
Service Members, Veterans and their Families (SMVF) Policy Academies*

- Partnering with DoD, VA, NGB, and others, SAMHSA has hosted 3 Policy Academies for 23 States, Washington, DC, and 2 Territories.
- By September 30, 2013, all interested States and Territories will have an opportunity to participate in an SMVF Policy Academy.

*Supports goals in President’s report Strengthening Our Military Families
National Action Alliance for Suicide Prevention

Military/Veterans Task Force Partners in Care Initiative
What is Partners in Care?

- Developed by the Joint Force Chaplain of the MDNG
- Recognizes the unique role of faith-based community in supporting people in times of crisis, stress, and need.
- Recognizes that many in the faith-based community want to support military families, but don’t know how.
- A program run by the State National Guard chaplain’s office that coordinates support for National Guard members and their families by building partnerships with local faith communities without implied endorsement of a particular religion.
National Action Alliance’s Partners in Care Initiative

- Selected five States whose Adjutant Generals and Chaplains were interested and “ready to roll.”
  - AZ, MN, MO, OR, VA
- Conducted faith-based summits to help faith-based communities learn about military culture, participate in suicide prevention gatekeeper training (by VA), and encourage signing MOU for Partners in Care.
- More than 400 individuals attended the summits.
Report from Virginia Chaplain: The day after the Summit

- A soldier called the chaplain because he couldn’t afford to travel to a family funeral in another state. A church provided funds within hours.

- A soldier and his family (ages 3 and 5) who were living in a hotel needed a place to live before the weekend. A church found an apartment, persuaded the landlord to lower the rent and the deposit, and provided some funds to help with move-in.
Examples of Work with VA

• Ongoing collaboration to ensure that VA and SAMHSA’s suicide prevention initiatives are coordinated
  – VA adopted SAMHSA’s Treatment Improvement Protocol, *Addressing Suicidal Thoughts and Behaviors in Substance Abuse Treatment* and created a complementary training video, used by VA and community providers.
  – SAMHSA assisted VA in updating its suicide prevention gatekeeper training (Operation S.A.V.E.) for communities
  – SAMHSA participated in group to develop DoD/VA joint Clinical Practice Guidelines to prevent suicide

• SAMHSA collaborates to help VA meet the requirements of the Family Caregivers Act, enhancing linkages between VA and community providers and increasing their referral sources.

• VA has begun working with SAMHSA’s Regional Administrators to ensure strong linkages between the Veterans Integrated Service Networks and State mental health and substance abuse systems.
Five Major Suicide Prevention Components

• National Suicide Prevention Lifeline
  – Crisis Center Follow-up Grant Program

• Garrett Lee Smith State and Tribal Suicide Prevention Grant Program

• Garrett Lee Smith Prevention Campus Grant Program

• Suicide Prevention Resource Center

• Native Aspirations
National Suicide Prevention Lifeline
1-800-273-TALK (8255)

- 789,264 calls in CY2011
- 65,772 a month in 2011
- 3 millionth call answered in September ‘11
- 156 local crisis centers
- 6 centers in Texas answering almost 5000 per month
- In response to Lifeline evaluation findings, created the Crisis Center Follow-up Grants (12 current crisis center grantees)
- Developed risk assessment standards and guidelines for callers at imminent risk
NEW FRONTIERS IN CRISIS INTERVENTION

- Veterans Chat Service initiated in 2009
- Veterans Text Service in 2011
- Lifeline initiated a chat service in 2012
- Facebook partnership
- Lifeline and SAMHSA working with social networking sites on suicide prevention protocols
Contact Information

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