



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





Typical Army Soldier

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

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 *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.



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.



National Action Alliance's Partners in Care Initiative

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



- 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

James Wright, MS, LCPC

Public Health Advisor

Substance Abuse and Mental Health Services Administration
Center for Mental Health Services

Division of Prevention, Traumatic Stress & Special Programs
Suicide Prevention Branch
240-276-1854

<u>James.wright@SAMHSA.hhs.gov</u>

