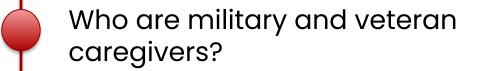
The Role of Caregivers in Preventing Military and Veteran Suicide

Rajeev Ramchand



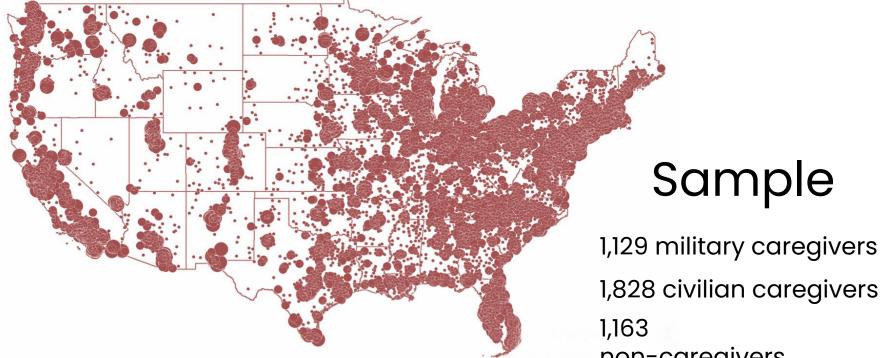


#### Main Points

Military and veteran suicide

What might work (better)?

#### National survey of caregivers



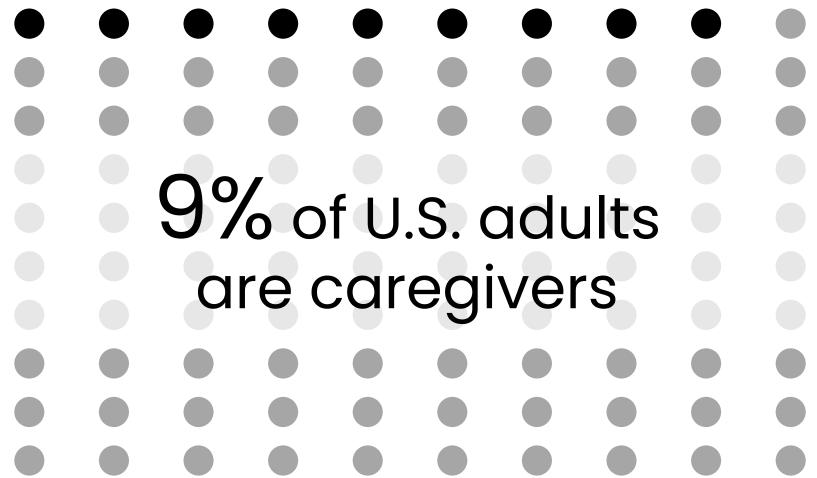
Reference: Ramchand, Tanielian, et al., 2014. Hidden Heroes: America no Caregivers Military Caregivers. Santa Monica, CA: RAND Corporation.

#### How We Captured Caregiving

2014

Do you provide unpaid care and assistance for, or manage the care of, someone who is at least 18 years old and has an illness, injury or condition for which they require outside support?

This may include help with tasks such as personal care, bathing, dressing, feeding, giving medicines or treatments, help with memory tasks for someone with brain injury, help coping with symptoms of Posttraumatic Stress Disorder (PTSD), transportation to doctors' appointments, or arranging for services, etc. You do not need to live with the person. Care and assistance are considered unpaid if you provide them without receiving financial compensation in exchange for doing so.



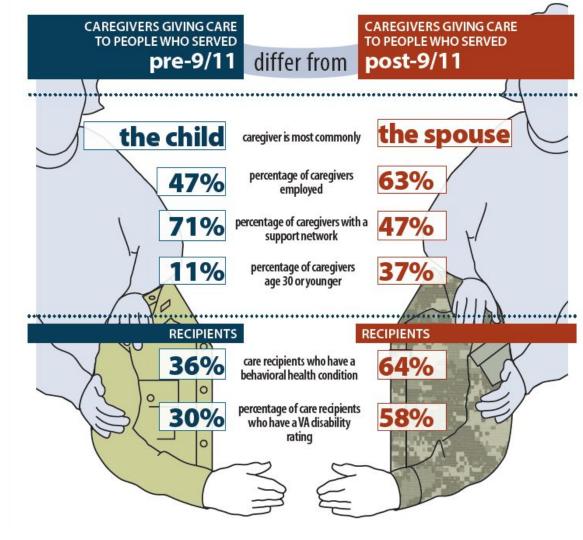


5.5 million military/ veteran caregivers

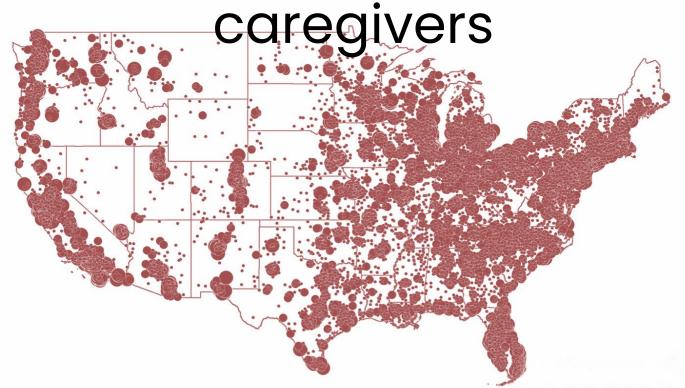


1.1 million post-9/11 military/ veteran caregivers

Post-9/11 military/vetera n caregivers differed from pre-9/11 military/vetera n caregivers



#### 2022 National survey of

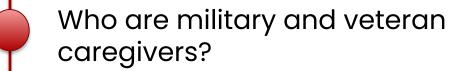


Reference: Ramchand, Tanielian, et al., 2014. Hidden Heroes: America's Military Caregivers. Santa Monica, CA: RAND Corporation.

## Changing How We Are Capturing Caregiving

Please indicate if you provide any of the following types of assistance to someone who has an illness, injury or condition for which they receive outside support:

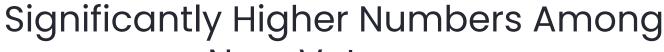
- Personal care, bathing, dressing, or feeding
- Giving medicines or treatments
- Help with memory tasks for someone with brain injury
- Help coping with symptoms of Post Traumatic Stress Disorder (PTSD)
- Help coping with another psychological disorder (for example, depression or anxiety)
- Providing transportation to doctor appointments or arranging for medical or psychological services
- Other types of assistance which the person has difficulty performing themselves

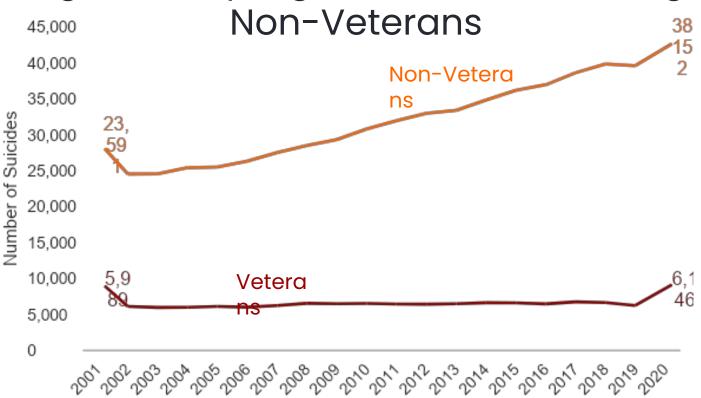


#### Main Points

Veteran suicide

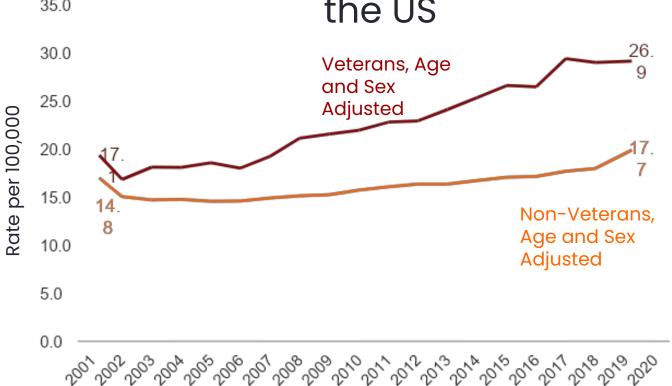
What might work (better)?





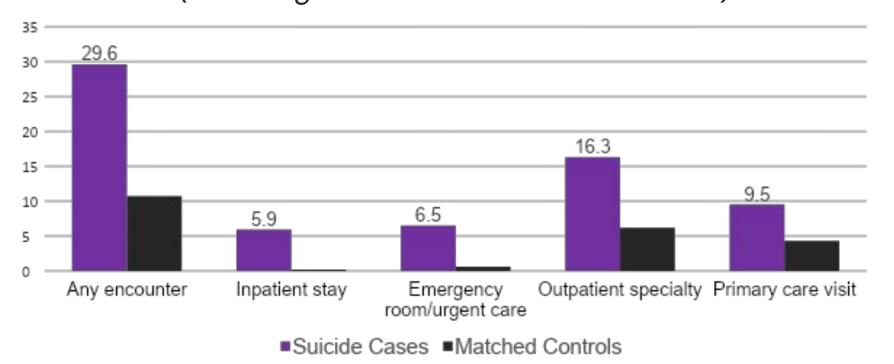
From: Office of Mental Health and Suicide Prevention. <u>2020 National Veteran Suicide</u> <u>Prevention Annual Report</u>. US Department of Veterans Affairs.

## Significantly Higher Rates Among Veterans Across the US



From: Office of Mental Health and Suicide Prevention. <u>2020 National Veteran Suicide Prevention Annual Report</u>. US Department of Veterans Affairs.

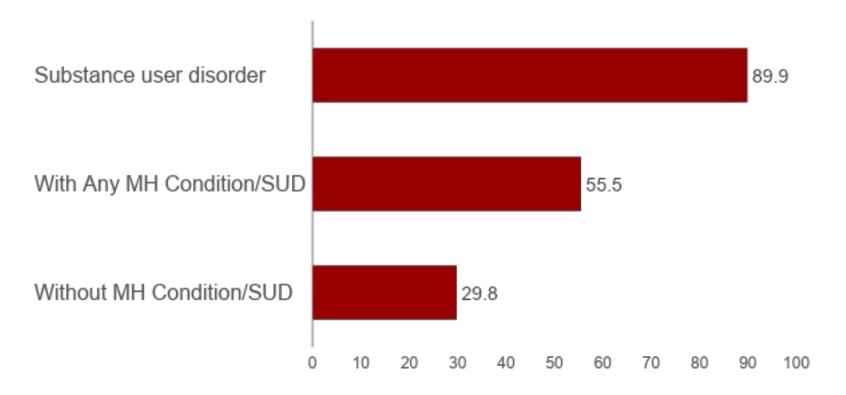
### Health Encounters in 7 Days Prior to Suicide Death (Including But Not Restricted to Veterans)



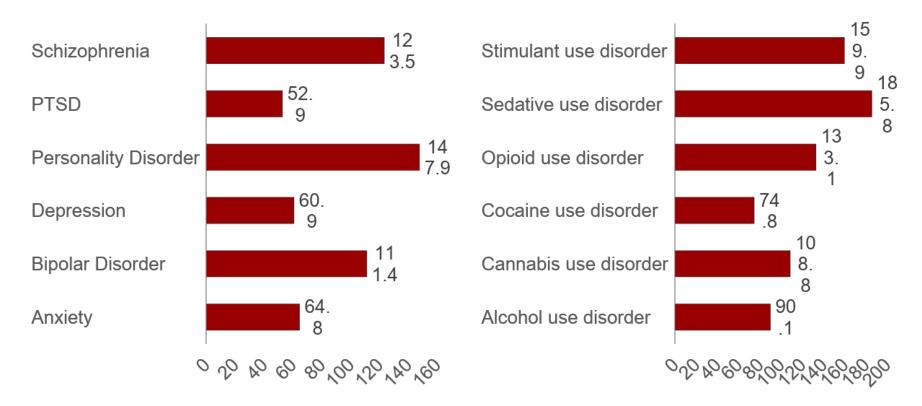
2,674 individuals who died by suicide 2000-2013 and were members of one of health care systems serving 8 states (Mental Health Research Network)

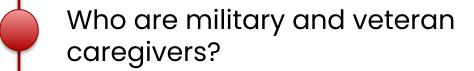
From: Ahmedani et al., 2019

#### Suicide rates among recent VHA Users, 2020



#### Suicide rates among recent VHA Users, 2020





#### Main Points

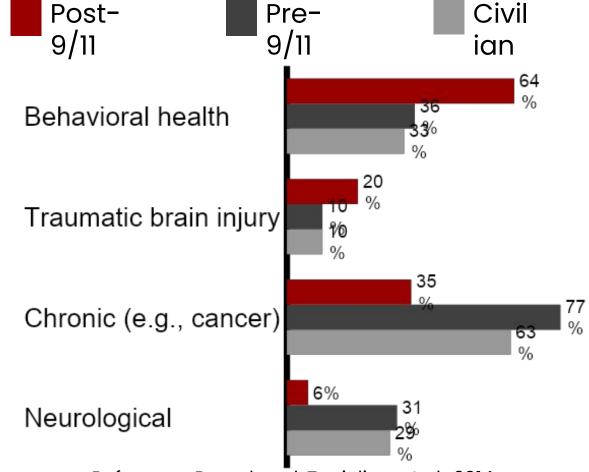
Veteran suicide

What might work (better)?



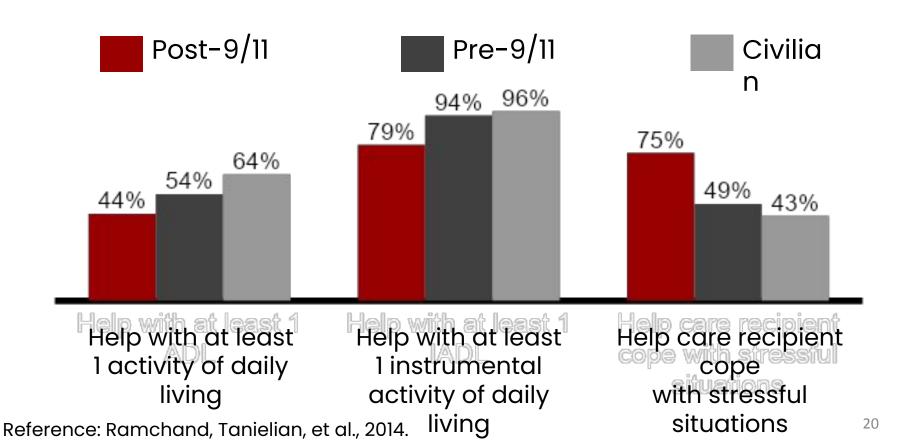
5.5 million military/ veteran caregivers

#### Common Condition s among Care Recipients



Reference: Ramchand, Tanielian, et al., 2014.

#### What Caregivers Do

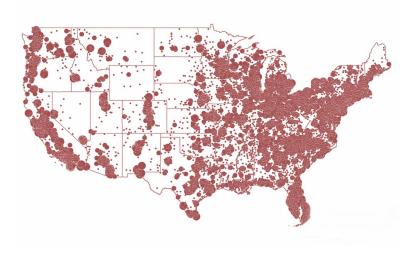


Although caregivers spend time with those at risk of suicide, few suicide prevention interventions focus on caregivers, with scant evidence on "what works"

	7 days before death	30 days before death	New Onset	
Ideation	10	11	3	
Substance use	11	12	1	
Purposelessness	10	14	4	Warning signs may not indicate acute risk  Among 17 suicides in New Orleans in 2016
Anxiety, etc.	11	15	4	
Feeling Trapped	10	12	4	
Hopelessness	10	13	4	
<b>W</b> ithdrawal	11	12	2	
Anger, etc.	8	9	2	
Recklessness	7	10	3	
Mood changes	11	14	3	

Reference: Ramchand et al., 2017. Opportunities to intervene? "Warning signs" for suicide in the days before dying. Death Stud, 41(6), 368-375.

## 2022 National survey of caregivers



How concerned are you that [the person you are caring for] may be at risk of suicide?

- 1. Very concerned
- 2. Somewhat concerned
- 3. Not really concerned
- 4. Not at all concerned

## Supporting caregivers of those with mental health problems or recurrent/chronic suicidality may prevent suicide



Develop and test interventions that include caregivers AND those specifically for caregivers



Disseminate those programs for caregivers that work (e.g., Family-to-Family)



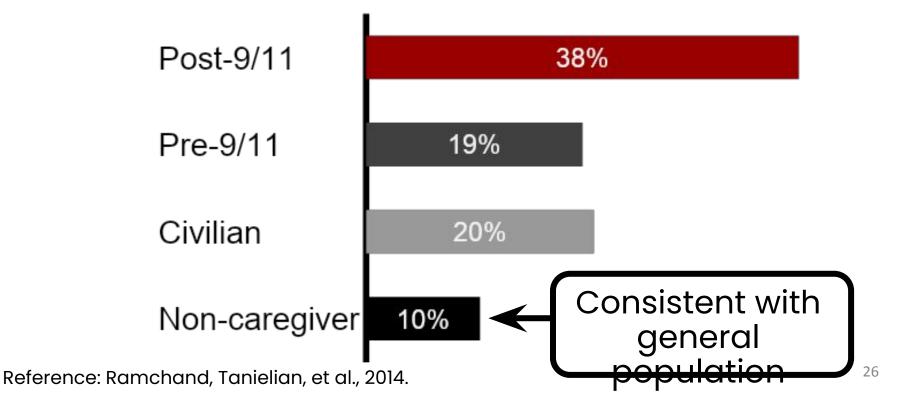
Include and engage survivors with lived experience in suicide prevention efforts

Reference: Dixon et al., 2011. Outcomes of a randomized study of a peer-taught Family-to-Family Education Program for mental illness. Psychiatric Services, 62(6): 591-597.



# What about caregivers' suicide risk?

## % meeting criteria for probable depression



**Tested** predictors of major depression

Demographics (race/ethnicity, sex, age, marital status) **Education level** Type of disability

Household income/characteristics Relationship to care recipient Time spent caregiving

Helping care recipient cope with stressful situations 27

Confirmed predictors of major depression among post-9/11 caregivers

Reference: Ramchand, Tanielian, et al., 2014.

Demographics (race/ethnicity, sex, age, marital status)

**Education level** 

Type of disability

Household income/characteristics

Relationship to care recipient

Time spent caregiving

Helping care recipient cope with stressful situations

#### RESEARCH ARTICLE

Phenotypes of caregiver distress in military and veteran caregivers: Suicidal ideation associations

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- These authors contributed equally to this work.
- ‡ RED and MJP are joint senior authors on this work. KP and CPW also contributed equally to this work.
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Citation: Delgado RE, Peacock K, Wang C-P, Pugh MJ (2021) Phenotypes of caregiver distress in military and veteran caregivers: Suicidal ideation associations. PLoS ONE 16(6): e0253207. https://doi.org/10.1371/journal.pone.0253207

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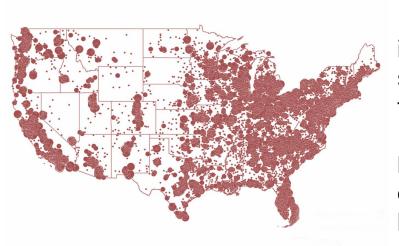
#### Abstract

The United States (US) has been at war for almost two decades, resulting in a high prevalence of injuries and illnesses in service members and veterans. Family members and friends are frequently becoming the caregivers of service members and veterans who require longterm assistance for their medical conditions. There is a significant body of research regarding the physical, emotional, and social toll of caregiving and the associated adverse healthrelated outcomes. Despite strong evidence of the emotional toll and associated mental health conditions in family caregivers, the literature regarding suicidal ideation among family caregivers is scarce and even less is known about suicidal ideation in military caregivers. This study sought to identify clusters of characteristics and health factors (phenotypes) associated with suicidal ideation in a sample of military caregivers using a cross-sectional, web-based survey. Measures included the context of caregiving, physical, emotional, social health, and health history of caregivers. Military caregivers in this sample (n = 458) were mostly young adults (M = 39.8, SD = 9.9), caring for complex medical conditions for five or more years. They reported high symptomology on measures of pain, depression, and stress. Many (39%) experienced interruptions in their education and 23.6% reported suicidal ideation since becoming a caregiver. General latent variable analyses revealed three distinct classes or phenotypes (low, medium, high) associated with suicidality. Individuals in the high suicidality phenotype were significantly more likely to have interrupted their education due to caregiving and live closer (within 25 miles) to a VA medical center. This study indicates that interruption of life events, loss of self, and caring for a veteran with mental health conditions/suicidality are significant predictors of suicidality in military caregivers. Future research should examine caregiver life experiences in more detail to determine the feasibility of developing effective interventions to mitigate suicide-related risk for military caregivers.

24% of 458 military caregivers reported suicidal ideation since becoming a caregiver

Individuals in the high suicidality phenotype were significantly more likely to have interrupted their education due to caregiving and live closer (within 25 miles) to a VA medical center

# 2022 National survey of caregivers At the past 12



At why time in the past 12 months, that is from [DATEFILL] up to and including today, did you seriously think about trying to kill yourself?

During the past 12 months, did you make any plans to kill yourself?

During the past 12 months, did you try to kill yourself?

**4.8%**National >17, 2021

**1.4%**National >17

National >17, 2021

**0.7%**National >17, 2021

## Thank you

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