

#BeThere



# S.A.V.E.



U.S. Department  
of Veterans Affairs

## American Legion Chaplain Conference

## September 2019

# A little housekeeping before we start:

- Suicide is an intense topic for some people.
  - If you need to take a break, or step out, please do so, with one condition...
    - Let me know if you are okay, by giving me a “thumbs up.”
    - If you aren’t okay, give me a discreet “thumbs down” so I can follow up with you.
  - Resources (other than VCL listed below):
    - National Suicide Prevention Lifeline: (800) 273 - 8255
    - Employee Assistance Program: 1-800-869-0276 with 24/7 access

# Overview

- Objectives
- Facts about suicide
- Myths/realities about suicide
- The steps of S.A.V.E.
- Resources and References

# Objectives

**By participating in this training you will:**

- Have a general understanding of the scope of suicide within the United States
- Know how to identify a Veteran who may be at risk for suicide
- Know what to do when you identify a Veteran at risk



# The Important Role of Faith Leaders

- We believe clergy and religious leaders are an important link to helping their congregants get the mental health care they need.
- Whether you are Jewish, Buddhist, Muslim, Protestant, Catholic or something else, you may be the first person congregants turn to for comfort, guidance, and help when they are facing mental health issues.
- The intention is not for you to make a diagnosis, but to help you recognize when a congregant needs help from a mental health professional. If your congregant is overwhelmed with sadness, is in emotional distress, is having trouble with a relationship or is having trouble concentrating, pastoral counseling may be helpful. **But it is also possible that your congregant needs to be evaluated and treated by a mental health professional.**

# Suicide in the United States

- **More than 42,000** deaths from suicide per year among the general U.S. population.<sup>1,2</sup>
- Suicide is the **10th** leading cause of death in the U.S.<sup>3</sup>
- Every **12.3 minutes** someone dies by suicide.

# Suicide in the United States

- It is estimated that close to **one million people** make a suicide attempt each year,
  - One attempt every **35 seconds**
- Gender disparities:



Women **attempt suicide 3 times** more often than men.<sup>1</sup>



Men **die by suicide 4 times** more often than women.<sup>1</sup>

# Facts about Veteran suicide

- **18%** of all deaths by suicide among U.S. adults were Veterans.<sup>4</sup>
- Veterans are more likely than the general population to use **firearms** as a means for suicide.<sup>4</sup>
- On average, there are **764 suicide attempts** per month among Veterans receiving recent VA health care services.<sup>5</sup>
- **25%** of Veterans who died by suicide had a history of previous suicide attempts.<sup>5</sup>

# Common myths vs. realities

**Myth**

**Reality**

If somebody really wants to die by suicide,  
there is nothing you can do about it.

# Common myths vs. realities

Myth

Reality

Making one form of suicide less convenient does not usually lead people to find another method. Some people will, but the overwhelming majority will not.

# Death by Suicide is Preventable

## Lethal Means Safety

- Safe storage of lethal means reduces suicide
  - e.g., Firearms, abundance of analgesic doses per bottle, etc.
- How did we figure this out?
  - e.g., Coal gas in the UK, placement of lethal items behind counters, fencing off bridges
- 85-90% of people who survive a suicide attempt do not go on to die by suicide later.

# Common myths vs. realities

**Myth**

**Reality**

Asking about suicide may lead to someone taking his or her life.

# Common myths vs. realities

Myth

Reality

Asking about suicide does **not** create suicidal thoughts. The act of asking the question simply gives the Veteran permission to talk about his or her thoughts or feelings.

# Common myths vs. realities

**Myth**

**Reality**

There are talkers, and there are doers.

# Common myths vs. realities

## Myth

Many individuals who die by suicide or attempt suicide have given some clue or warning. Someone who talks about suicide provides others with an opportunity to intervene before suicidal behaviors occur.

Suicide threats should never be ignored. No matter how casually or jokingly said, statements like, "You'll be sorry when I'm dead," or "I can't see any way out" may indicate serious suicidal feelings.

## Reality

# Common myths vs. realities

**Myth**

**Reality**

If somebody really wants to die by suicide, there is nothing you can do about it.

# Common myths vs. realities

## Myth

## Reality

Most suicidal ideas are associated with treatable disorders. Helping someone connect with 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.

# Common myths vs. realities

## Myth

## Reality

He/she won'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.

# Common myths vs. realities

Myth

Reality

The intent to die can override rational thinking.

Someone experiencing suicidal ideation or intent must be taken seriously and referred to a clinical provider who can further evaluate his or her condition and provide treatment as appropriate.

# S.A.V.E.

- 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**

Signs of suicidal thinking should be recognized.

**A**

Ask the most important question of all.

**V**

Validate the Veteran’s experience.

**E**

Encourage treatment, and Expedite getting help.

# Importance of identifying warning signs



- There are behaviors that may indicate/reveal that a Veteran needs help.
- Veterans in crisis may show behaviors that indicate a risk of harming or killing themselves.

# S | Signs of suicidal thinking

## 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 use
- Withdrawing from family and friends

# S | Signs of suicidal thinking

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

# A | Asking the question

**Know how to ask the most important question of all...**

## A | Asking the question

“Are you thinking about killing yourself?”

# A | Asking the question

- Are you thinking of suicide?
- Have you had thoughts about taking your own life?
- Are you thinking about killing yourself?

# A | Asking the question

## Do's

- DO ask the question if you've identified warning signs or symptoms.
- DO ask the question in a natural way that flows with the conversation.

## Don'ts

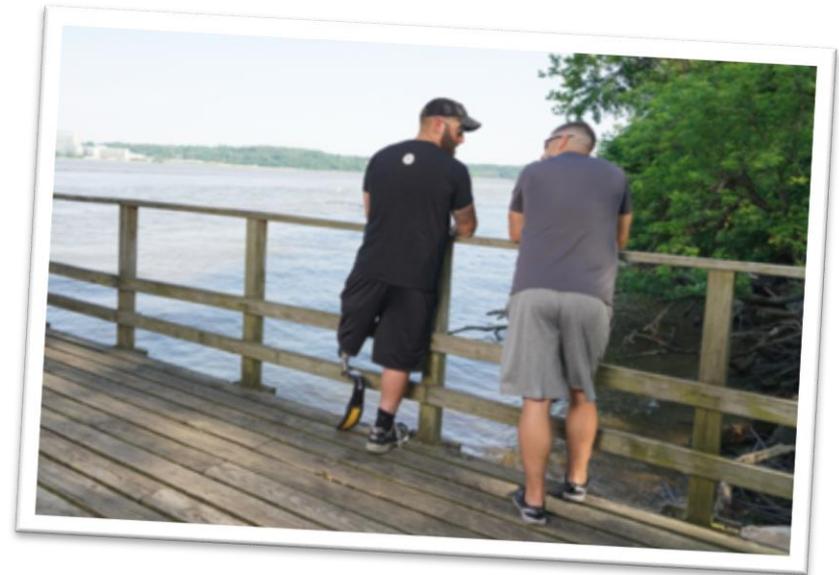
- DON'T ask the question as though you are looking for a "no" answer.
  - "You aren't thinking of killing yourself. Are you?"
- DON'T wait to ask the question when someone is halfway out the door.

# Things to consider when talking with 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.

## V | Validate the Veteran's experience.

- 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.



# E | Encourage treatment, and expedite getting help.

- 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.
  - Call 911.
- Reassure the Veteran that help is available.
- Call the Veterans Crisis Line at **1-800-273-8255 and Press 1**.

# Transferring Calls to the Veterans in Crisis

- ❑ **Obtain:** name of Veteran, last 4 of SSN, address, phone number and reason for call
- ❑ **Warm-transfer call to the Veterans Crisis Line via 3-way conference call:**
  - Press **TRANSFER** key on phone
  - Dial **9-1-800-273-8255**, then press **1**
  - Upon VLC responder answering, Press **CONF** key
- ❑ **Provide VCL with caller information**
- ❑ **Hang up and Document**

# Resources

## Mental Health

- VHA provides specialty inpatient and outpatient mental health services at its medical centers and community-based outpatient clinics. All mental health care provided by VHA supports recovery, striving to enable a person with mental health problems to live a meaningful life in the community and achieve his or her full potential.
- For more information on VA Mental Health Services, visit [www.mentalhealth.va.gov](http://www.mentalhealth.va.gov)

## Vet Centers

- Vet Centers are VA community-based centers that provide a range of counseling, outreach, and referral services.
- For more information about Vet Centers and to find the Vet Center closest to you, visit [www.vetcenter.va.gov](http://www.vetcenter.va.gov)

## Resources (cont.)



### Make The Connection

- ***MakeTheConnection.net*** is a one-stop resource where Veterans and their families and friends can privately explore information about physical and mental health symptoms, challenging life events, and mental health conditions. On this site, Veterans and their families and friends can learn about available resources and support. Visit [MakeTheConnection.net](https://www.maketheconnection.net) to learn more.

# Resources (cont.)



## Veterans Crisis Line/Chat/Text

- **1-800-273-8255 and Press 1**
- [VeteransCrisisLine.net](https://www.VeteransCrisisLine.net)
- Text to **838255**

## VA Suicide Prevention Coordinators

- Each VA Medical Center has a Suicide Prevention Coordinator (SPC) to make sure Veterans receive needed counseling and services.
- Find your local SPC at [VeteransCrisisLine.net/ResourceLocator](https://www.VeteransCrisisLine.net/ResourceLocator)

# Resources

- Guidelines for Starting a Spiritual Support Group for Mental Health & Wellness ([PDF here](#))
- Guidelines for Starting a Mental Health Ministry in your Congregation ([PDF here](#))
- WISE Congregation Guidelines ([PDF here](#))
- Resources for Congregants
- **Sample covenant** for by the welcoming/including/supporting people with mental illnesses, adopted by First Congregational Church in Boulder, Colo. on Oct. 19, 2014 ([read article](#)).
- **[Checklist for Faith Communities: Becoming a Welcoming, Inclusive, Supportive, and Engaged \(WISE\) Congregation for Mental Health](#)**, developed jointly by the Interfaith Network on Mental Illness and the UCC Mental Health Network. This checklist is designed to be a mirror showing you where your congregation is today and a window to see where you might go in the future.

# Resources

## Interfaith Network on Mental Illness

- <http://inmi.us/for-clergy/>

## Action Alliance: Faith Hope Life

- <https://theactionalliance.org/faith-hope-life>

## Suicide Prevention Ministry

- <https://suicidepreventionministry.org/resources-for-clergy-lay-leaders/>

# Remember:

## S.A.V.E.

- S** Signs of suicidal thinking should be recognized.
- A** Ask the most important question of all.
- V** Validate the Veteran's experience.
- E** Encourage treatment, and Expedite getting help.

# By participating in this training, you have learned:

- Suicide prevention is everyone's business.
- General facts about suicide in the U.S.
- Facts about Veteran suicide.
- How to identify a Veteran who may be at risk for suicide.
- How to help a Veteran at risk for suicide.
- How to address a crisis situation.
- What resources are available and how to access them.
- <http://spreadtheword.veteranscrisisline.net/materials/>

# References

- <sup>1</sup> Suicide facts. (2016). Retrieved August 1, 2016, from SAVE Suicide Awareness Voices of Education,  
[http://www.save.org/index.cfm?fuseaction=home.viewPage&page\\_id=705D5DF4-055B-F1EC-3F66462866FCB4E6](http://www.save.org/index.cfm?fuseaction=home.viewPage&page_id=705D5DF4-055B-F1EC-3F66462866FCB4E6)
- <sup>2</sup> United States Suicide Injury Deaths and Rates per 100,000 in 2014. Retrieved August 2, 2016, from Centers for Disease Control and Prevention WISQARS,  
<http://webappa.cdc.gov/cgi-bin/broker.exe>.
- <sup>3</sup> Suicide Facts at a Glance. (2015). Retrieved August 1, 2016, from Centers for Disease Control and Prevention, <http://www.cdc.gov/violenceprevention/pdf/suicide-datasheet-a.PDF>
- <sup>4</sup> U.S. Department of Veterans Affairs (2016). Suicide among Veterans and other Americans 2001-2014. Washington, DC: Office for Suicide Prevention.
- <sup>5</sup> Based on suicide/ suicide attempts reported within the VA Suicide Prevention Application Network (SPAN) during calendar year 2014.