

STATEMENT OF
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FOR THE RECORD

UNITED STATES HOUSE OF REPRESENTATIVES
COMMITTEE ON VETERANS' AFFAIRS

WITH RESPECT TO

“Veteran Suicide Prevention: Capitalizing on What Works and Increasing Innovative Approaches”

Washington, D.C.

September 29, 2022

Chairman Takano, Ranking Member Bost, and members of the committee, on behalf of the men and women of the Veterans of Foreign Wars of the United States (VFW) and its Auxiliary, thank you for the opportunity to present testimony for the record on veteran suicide prevention.

Veteran suicide prevention is a complex, multi-faceted issue requiring an approach informed by a multitude of upstream and protective factors. President Biden’s 2021 report titled “Reducing Military and Veteran Suicide: Advancing a Comprehensive, Cross-Sector, Evidence-Informed Approach” states the importance of identifying these factors that increase or mitigate veteran suicide, including economic factors such as financial strain, lack of housing, food insecurity, unemployment, and legal issues. The VFW firmly believes an upstream perspective, examining root causes and protective factors, is critical to identify socio-economic factors that can be addressed before mental health reaches a critical juncture. Veteran suicide prevention awareness is not just a VA, congressional, or veteran organization issue; it is an everyone issue.

Suicide Prevention a VFW Priority

The VFW has a long-standing resolution and legislative priority to end veteran suicide. By engaging our membership in suicide prevention awareness, partnering with the Department of Veterans Affairs (VA) to support Accessing Telehealth through Local Area Stations (ATLAS), working to expand the Green Alert system, and promoting internal projects such as our #StillServing campaign, health surveys, and our Unmet Needs program, the VFW works diligently to combat upstream risk factors to veteran suicide. We also work with partners like PsychArmor, Give an Hour, and Humana to focus VFW accredited representatives training on identifying social determinants of health and intervening with veterans as necessary. We firmly believe that as we better equip our local advocates to take upstream action, we are mitigating suicide. As our accredited representatives help veterans receive the VA benefits available to

them based on their service-connected disabilities, they also promote economic stability through education, employment, and housing benefits.

Give an Hour and the VFW are working together to ensure those in need receive the care they deserve and to change the culture of mental health for veterans and their loved ones. The VFW provides information to our membership to “Know the Five Signs” of emotional suffering. Through a national network of licensed mental health providers, Give an Hour offers mental health care to active duty, National Guard and Reserve, veterans, and their loved ones. If everyone is more open and honest about mental health, we can prevent pain and suffering, and those in need will get the help they deserve.

Transitioning out of service to civilian life brings unknown stressors and adjustment challenges. The VFW works diligently to combat upstream risk factors for veteran suicide by connecting with service members before they transition. A network of accredited representatives and pre-discharge claim assistants, including Benefits Delivery at Discharge (BDD) representatives are embedded within the Transition Assistance Program (TAP) to help connect veterans with their benefits. Unfortunately, these BDD representatives see all too often how many transitioning service members choose not to connect with VA services at this critical juncture. According to VFW BDD survey respondents, generally only sixty percent of transitioning service members report participating in a TAP track designed to provide two days of specialized Department of Labor, Small Business Administration, or VA employment and education training during this significant time of heightened risk. The VFW insists service members participating in TAP utilize the resources offered during this course, and not be exempted from participation.

Financial stress can lead to hopelessness. The basis of the VFW's Unmet Needs program is to help veterans, service members, and military families who may face financial difficulties. A grant of financial assistance of up to one thousand five hundred dollars is given to those who meet the eligibility criteria. Since 2004, the VFW's Unmet Needs program assisted over 11,100 families with 5.57 million dollars in grant funds. This program eases the burden on those who may be facing a financial crisis. Non-profits such as the VFW are great resources for veterans facing financial instability, but the fact our programs exist highlights the need for more attention to this problem.

Engaging in something bigger than oneself provides a sense of purpose and brings hope to those who are helped. When his deteriorating living conditions caused him to become severely depressed, an elderly veteran reached out to his local VFW post in Florida to find a local handyperson to complete some minor repairs to his home. After assessing the situation, members of VFW Post 10087 knew there were much more than minor repairs needed. Utilizing the post's veteran relief fund and the Veteran Foundation, they devoted 119 hours of labor to improve the veteran's living conditions, which in turn boosted the veteran's mental status. This project is an example of the potential mental health benefit to both the veteran receiving assistance and the veterans providing the assistance. Examples like this are the foundation of the VFW's #StillServing campaign to continue community engagement through meaningful and purpose-driven activities.

2022 National Veteran Suicide Prevention Annual Report

The VFW applauds VA for the additional reporting data in the *2022 National Veteran Suicide Prevention Annual Report* it released last week. Although the annual number of veterans who died by suicide in 2020 was the lowest since 2006, the unadjusted suicide rate for veterans continues to increase. This unadjusted rate takes into consideration population differences for comparison. When comparing the overall rate of the veteran population, the annual report shows the unadjusted veteran suicide rate increased 8.4 per 100,000 in the last nineteen years. This is why the VFW feels more needs to be done.

In the annual report, VA mentions an enterprise-wide suicide prevention effort to engage veterans across the system as part of "Next Steps Together." The VFW agrees and urges VA to shift the Office of Suicide Prevention to the enterprise level. This move will allow the office to continue its mission of suicide prevention by expanding beyond the silo of the Veterans Health Administration (VHA).

For many years, the VFW has advocated for VA to include all VA interactions in the annual report to understand better social determinants of health, which VA's own research indicates are often better predictors of suicide or suicidal ideation. The 2022 report does include information regarding the interaction with VHA and the Veterans Benefits Administration (VBA). The information unequivocally reveals that suicide is not merely a clinical issue, but is exceedingly complex with multiple touchpoints to ensure the overall well-being of veterans and their families.

Benefits usage is an area for further information to be included in this report. Veterans who had interactions with VBA are among the lowest percentage of those who die by suicide. We would like to see more information about that data point. When were those interactions? Which specific benefits were used at what times in these veterans' lives? Interactions with VBA benefits are clearly touchpoints that can be used to help improve suicide prevention efforts. The VFW urges Congress to direct VA to continue to include relevant VBA data in the annual report and break down this data by gender, age, rurality, race, and ethnicity. This added information will help to inform decisions regarding VA programming. By identifying additional touchpoints to social determinants of health, further resources for suicide prevention can be provided to assist veterans in crisis.

The annual report raises additional complex questions. Accidents with unintentional injuries are the first leading cause of death for veterans aged eighteen to forty-four, followed by suicide. A closer look at what is considered an "accidental" death needs to occur. Also, suicide rates rose for those with opioid or cocaine use disorder by 35.4 percent and 34.3 percent, respectively. The VFW urges VA to properly review the practice of identifying the cause of death and investigate mortality trends.

VFW Fall 2022 Health Survey

The VFW regularly surveys our members to best understand their health care experiences. A recently completed survey posed questions following the Centers for Disease Control and

Prevention guidelines to evaluate an individual's overall physical and mental health over the last thirty days, including what causes them to worry, and if they knew the new phone number for the Veterans Crisis Line. The objective of the survey was to gauge our membership's physical and mental well-being and determine awareness of the new three-digit number.

Regarding the past thirty days, the majority of respondents replied they had one to five days of not good physical health, zero days of not good mental health, and zero days where activities were interrupted by their physical or mental health. Although, on a five-point scale their general health was good. A different tone was expressed when asked about what causes them to worry. The top five answers were physical health, mental health, finances, relationships between family and friends, and service-connected disability compensation claims. These answers demonstrate connections between social determinants of health and a person's well-being, and how one's worry interweaves interpersonal and intrapersonal aspects of life.

Early this summer, the Veterans Crisis Line was connected to the national suicide prevention hotline—988 Suicide & Crisis Lifeline. In response to the survey question asking if they knew the new veterans suicide and crisis line three-digit number, sixty-five percent replied “no.” Of those who answered “yes,” thirteen percent incorrectly identified the number. This is cause for concern. We can formulate two hypotheses from these results: the media campaign and outreach are weak, or the stigma around suicide and mental health is great and individuals may feel no need to know this number.

In conclusion, the VFW is working to ensure a way forward in the collective mission to end veteran suicide once and for all. We continue to advocate and urge Congress to pass legislation, such as the *STRONG Veterans Act of 2022*, *REMOVE Copays Act*, *VA Zero Suicide Demonstration Project Act of 2021*, *Feed Hungry Veterans Act of 2022*, and *Building Solutions for Veterans Experiencing Homelessness Act of 2021*, which would provide resources, produce reports, and expand programs to equip VA, veteran organizations, communities, and veterans and their families with upstream strategies, midstream approaches, and downstream tactics for suicide prevention.

Chairman Takano, Ranking Member Bost, this concludes my statement. I am happy to answer any questions you or the committee members may have.

Information Required by Rule XI2(g)(4) of the House of Representatives

Pursuant to Rule XI2(g)(4) of the House of Representatives, the VFW has not received any federal grants in Fiscal Year 2022, nor has it received any federal grants in the two previous Fiscal Years.

The VFW has not received payments or contracts from any foreign governments in the current year or preceding two calendar years.