



MISSOURI VETERANS
COMMISSION



LEFT OF BOOM

VETERANS SUICIDE PREVENTION REPORT





ABOUT US

The Missouri Veterans Commission (MVC) is a state agency established by Missouri Statute to aid all Veterans, their dependents, and legal representatives by providing information regarding the rights of Veterans and their dependents and to assist Veterans accessing their available benefits through State and Federal Government.

On July 11, 2024, Senate Bill 912 and House Bill 1495 were signed into law and promulgated in RSMo 42.022. MVC was charged with creating a new program to aid in the efforts to prevent Veteran suicide. Under this law, MVC was charged to review the provisions of the Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019 and all subsequent regulations and compile an annual report before July 1, 2025, and before every July 1 thereafter. MVC will work in collaboration with the Missouri Department of Mental Health to “provide recommendations and make efforts to adopt procedures, programs, treatment options, additional aid, and other assistance deemed necessary by the Commission to assist in the efforts to prevent Veteran suicide.”

Veterans Suicide Prevention Program «LEFT OF BOOM

In military terms, “Left of Boom” describes the period of time before an incident occurs where proactive measures can be put in place to prevent or mitigate a life-threatening event such as an attack, explosion, or crisis. The mission of the Veterans Suicide Prevention Program is to stay ahead of the crisis that suicide presents for Missouri Veterans. Our vision is to stay informed of ongoing threats that mental health issues present to Missouri’s Veterans and adapt to the changing landscape of the challenges faced by our nation’s heroes. The intent of this program is to decrease the incidence of suicide and improve the health and well-being of Missouri Veterans by identifying areas of highest need.



EXECUTIVE SUMMARY

Veterans face higher rates of mental health challenges and suicidality compared with non-Veterans. This cohort also faces a unique subset of emotional and physical hardships due to exposure to military and combat stressors, cultural differences, and difficulties reintegrating into the civilian culture after leaving the armed forces. Military culture promotes quick adaptation to working as a team, to leave behind individualism and to trade it for a collective force that promotes strength. Upon entering service, military personnel require strict discipline, a sense of duty, loyalty, and pride of service to defend our great nation at all costs.

While suicide impacts the Veteran population, it also has far-reaching effects on their families, friends, and communities. The intent of this program is to decrease the incidence of suicide and improve the health and well-being for Missouri Veterans by compiling data and information that can target those with the highest risk for suicidality. Data and information will be provided on an annual basis to the Department of Public Safety and the Missouri General Assembly. MVC will collaborate with members of state leadership and community stakeholders by

providing a continuous assessment of the needs, development and implementation of methods to address the reduction of Veteran suicide.

This report serves to address and evaluate the evolving landscape of suicide and the mental well-being of Missouri Veterans. The initial scoping review identifies deficiencies and gaps in current conditions that lead to the increased likelihood for suicidality in Missouri's Veteran population. This report stands as the inaugural review of findings.

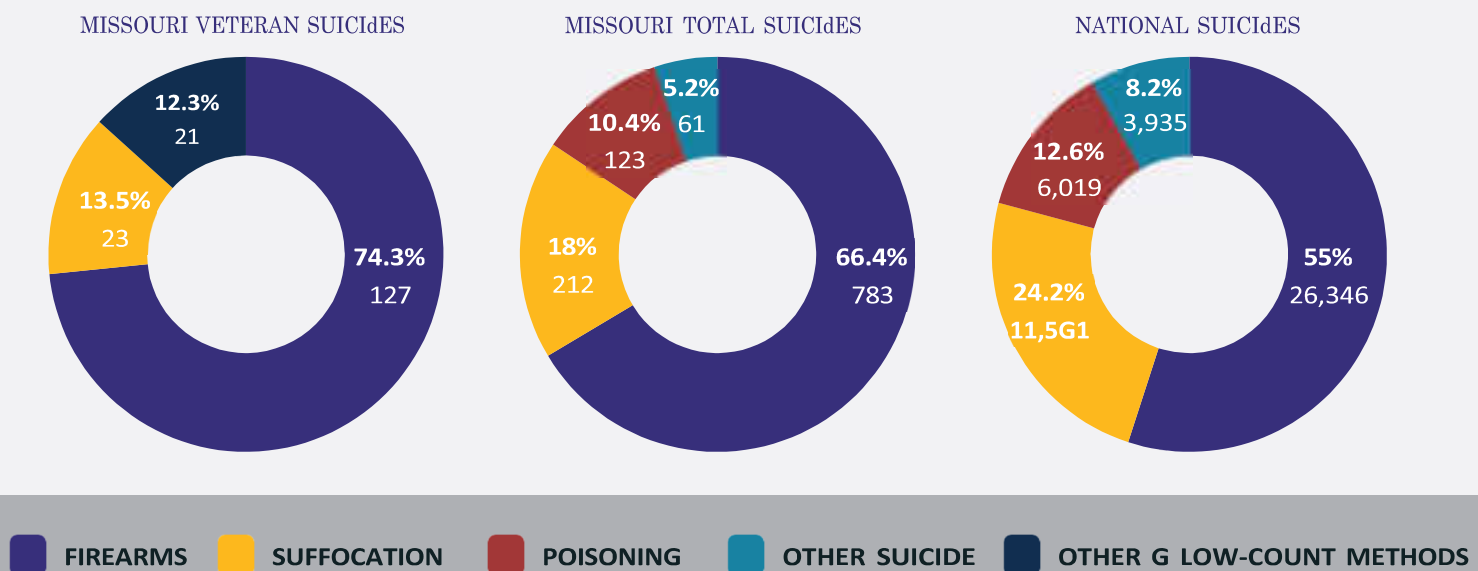
“VETERANS FACE
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According to the Department of Veterans Affairs' (VA) 2024 National Veteran Suicide Prevention Annual Report, Missouri Veteran Suicide Data Sheet for 2022, approximately 171 Veterans died by suicide in 2022².

The data shows that 42.6 of every 100,000 Missouri Veterans died by suicide, a stark contrast from the national average of 34.7 of every 100,000². A thorough review of VA, local public health, and state data, in conjunction with peer-reviewed studies, helped uncover concerning trends for this specific population.

The data reviewed indicates that 74.3% of Missouri Veterans died by firearm, while 55% of the national average died by firearm in 2022². Lethal means safety and help-seeking remain top priorities in the national efforts to address Veteran suicide. This priority will continue to be addressed through local, state, and national public health campaigns, distribution of gun lock cables by the VA, and increased education on safer homes for service members, Veterans and their families. While lethal means safety continues to be an important aspect of Veteran suicide prevention, this is not the main focus of the report.

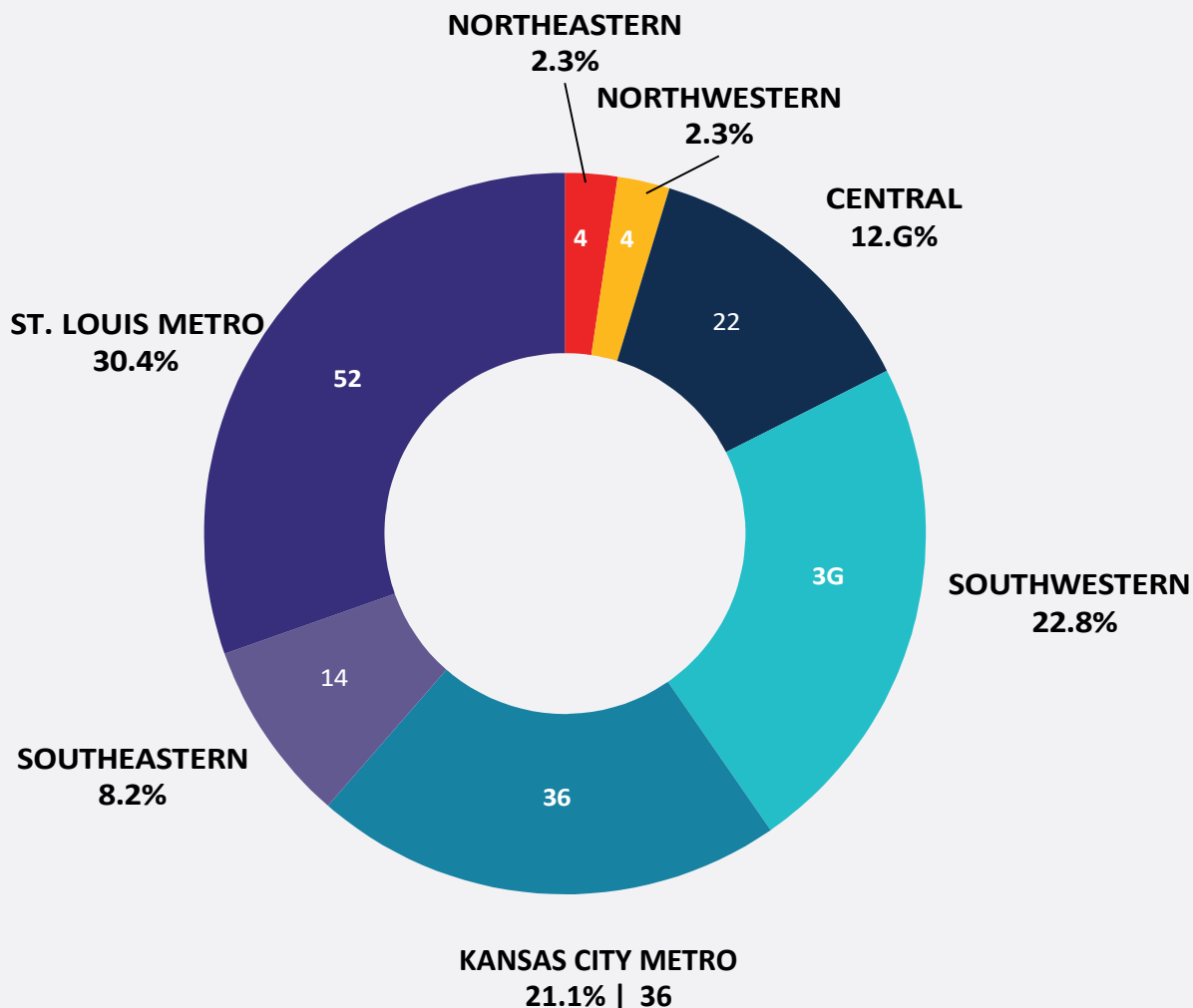


*The VA Suicide rates presented are unadjusted rates per 100,000, calculated as the number of suicide deaths in 2022 divided by the estimated population and multiplied by 100,000.



The Missouri Department of Health and Senior Services reported that in 2023, there were 171 Veterans who died by suicide in Missouri, with a large concentration of those deaths being in the St. Louis, Southwestern, and Kansas City regions of the state. This data mirrors the Missouri Veteran population estimations reported by the VA, showing a more concentrated Veteran population in the major metropolitan areas and the southern half of the state. The northeastern and northwestern regions of the state both reported having four Veteran suicide deaths in 2023, which makes up a total of 4.6% of all Veteran deaths by suicide. These regions are also reported to be the least populated by Veterans. It should be noted that death reporting is not compiled by county to help prevent the identification of specific individuals when the counts are less than 10.

VETERAN SUICIDE DEATHS BY REGION IN 2023



*State reporting numbers are subject to change based on the finalized federal data.



Through collaboration with stakeholders and discussions about proactive measures to prevent Veteran suicide, several key areas of improvement came into focus. These areas could lead to the establishment of effective policies or plans to reduce Veteran suicide in Missouri. Key areas include death data reporting delays, ongoing concerns with the stigma of mental health, and identifying barriers to access care. Delays and inaccuracies in cause-of-death reporting negatively impact public health surveillance and can lead to misinformation and blind spots in the suicide landscape. These issues can be attributed to differences in reporting due to variations between medical examiner and coroner reporting. Data is historically not published for official use for at least two years, which results in a lack of visibility and timely response.

There is an ongoing sense of stigmatization surrounding mental health struggles and help-seeking for Veterans, as these are perceived in the military culture as signs of weakness and create an unwillingness for Veterans to seek mental health services. In addition to stigmatization, access to mental health services continues to be a struggle for Veterans. Barriers such as transportation shortfalls and a lack of awareness of available resources are limiting factors for Veterans seeking mental health support.

INTENT

The intent of the Veterans Suicide Prevention Program is to decrease the incidence of Veteran suicides within the state by implementing a multifaceted strategy that includes:

- ♦ Decrease the incidence of suicide among Veterans.
- ♦ Address negative stigma associated with seeking assistance by promoting mental health awareness and normalizing help-seeking within the Veteran community.
- ♦ Improve data collection through establishing consistent standards and timely and accurate reporting of Veteran suicide-related data. Use the improved data to inform policy decisions and to make recommendations.
- ♦ Improve ease of access to health care by eliminating barriers preventing Veterans from obtaining necessary mental and physical services.
- ♦ Communicate state-tracked analytics to direct more attention to areas with a higher concentration of at-risk Veterans in a proactive manner.
- ♦ Collaborate with state and federal entities to provide continuity of needs assessments based on criteria outlined in the Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019.



PLANNING fRAMEwORK

This framework is designed to adapt to the specific needs and resources of the State of Missouri while aligning with national strategies and objectives. Promoting the framework supports the reduction of Veteran suicide.

- Promote resilience and well-being while reducing stigma around mental health and seeking services for Veterans.
- Use community-based education to share mental health resources through outreach and public health communication.
- Encourage improved death reporting collection through consistent and timely sharing of information between medical examiners, law enforcement, and public health agencies.
- Evaluate access to healthcare by investigating and assessing barriers experienced by Veterans. Provide recommendations and create solutions to improve healthcare connectedness.
- Collaborate with state and national data sources like MO Department of Mental Health, MO Department of Health and Senior Services, and VA for enhanced reporting metrics.
- Compile data to monitor trends, assess program effectiveness, make recommendations and inform policy decisions.

IMPLEMENTATION STRATEGIES

The implementation strategies for this program include:

- Partnership between MVC and local, state, and national organizations to conduct and promote ongoing mental health campaigns
- Increase public health awareness and promote understanding, support, and hope regarding mental health.
- Promote consistent, timely, and accurate reporting of Veteran suicide-related data in Missouri.
- Review existing barriers to healthcare access such as transportation, access to facilities, or lack of awareness of available state and federal resources and benefits.
- Provide training to state team members regarding Veteran-specific mental health challenges and applying military culture competency education.



KEY PERFORMANCE INDICATORS

To measure the effectiveness of the program, the following key performance indicators (KPI) will be monitored:

- Track the number of Veteran suicides per every 100,000 individuals annually using data published by the VA, Centers for Disease Control, and the National Death Index.
- Measure the percentage of Veterans accessing mental health services using data sourced from the VA.
- Monitor the number of contacts to the Missouri Veterans Crisis Line and access the outcomes of these interactions based on data collection from Missouri Department of Mental Health.
- Assess the average duration between a Veteran suicide occurrence and its reporting in the state of Missouri official statistics.
- Track the number of state team members trained regarding Veteran-specific mental health challenges and military culture competency education.



REFERENCES

- [1] U.S. Congress. (2020). Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019, Pub. L. No. 116-171, 134 Stat. 825.
<https://www.congress.gov/bill/116th-congress/senate-bill/785>

- [2] U.S. Department of Veterans Affairs, Office of Mental Health and Suicide Prevention (2024). 2024 National Veteran Suicide Prevention Annual Report: Part 1 – In-Depth Reviews. https://www.mentalhealth.va.gov/docs/data-sheets/2024/2024-Annual-Report-Part-1-of-2_508.pdf

- [3] U.S. Department of Veterans Affairs, Office of Mental Health and Suicide Prevention. (2024). 2024 National Veteran Suicide Prevention Annual Report: Part 2 – Report Findings. https://www.mentalhealth.va.gov/docs/data-sheets/2024/2024-Annual-Report-Part-2-of-2_508.pdf

- [4] Missouri General Assembly. (2024). House Bill 1495: Requires the Missouri Veterans Commission to recommend and implement efforts to prevent veteran suicide.
<https://house.mo.gov/bill.aspx?bill=HB1495Ccode=RCyear=2024>

- [5] Missouri General Assembly. (2024). Senate Bill 912: Modifies provisions relating to military affairs. <https://legiscan.com/MO/bill/SB912/2024BillTrack50+3>