

# Veterans Suicide Data | 2015–2018

## National Violent Death Reporting System (NVDRS)

NVDRS is the only state-based surveillance system that pools more than 600 unique data elements from death certificates, coroner/medical examiner reports, law enforcement reports, and toxicology reports.

NVDRS data cover all types of violent deaths, including firearm-related unintentional injury deaths, suicides, homicides, and undetermined deaths.

Between 2015 and 2018, 4,090 suicides were reported into the Washington Violent Death Reporting System (WA-VDRS). Twenty percent of those who died from suicide were veterans (who had ever served in the U.S. Armed Forces).

## Who, When, Where, How and Why

NVDRS collects data on the **Who**, **When**, **Where**, and **How** of violent deaths to help us better understand **Why** they occurred. In Washington state, suicide by firearm was more prevalent among men than women.

Nearly 40% of veterans who died by suicide had mental health problems; 15% had Post-Traumatic Stress Disorder (PTSD); and, one third were affected by depressed moods. About 25% of veterans disclosed suicide intent — most often to intimate partners (40%), family members (23%), and friends/colleagues (14%).

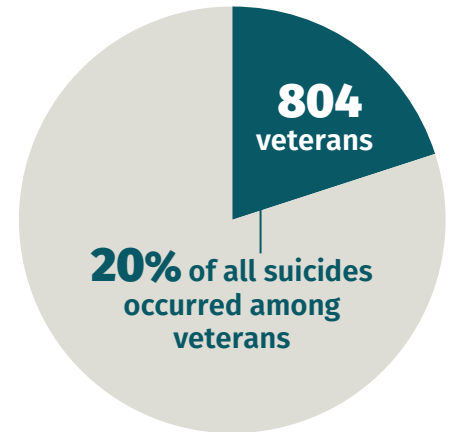
Means and circumstances related to suicide—such as relationship and life stressors—change over the lifespan. More than 70% of suicides happen at home where help and attention may be available to those in distress.

## Suicide Means, Circumstances Change Across Veteran Lifespan

### Circumstances examples:

- Girlfriend moved out
- Fiancée broke off the engagement
- Had escalating marriage difficulties
- Had three suicide attempts
- Some friends recently died by suicide
- Recently lost job, was out of money
- Poly substance abuse including alcohol, morphine, cocaine, and methamphetamine

4,090 suicides 2015–2018



### Veteran suicides 2015–2018:

- 95% were males
- 66% involved a firearm
- 46% were in a relationship
- 35% left a suicide note
- 33% were depressed

- Multiple health issues: diabetes, COPD, hypertension, asbestosis, cancer, strokes, and seizures
- Health was deteriorating rapidly, did not want to be burdened with caretaking



Age: 19 to 34

#### Means:

60% by firearm  
27% by hanging, strangulation, suffocation

#### Circumstances:

44% had intimate partner problem  
32% with mental health problem had PTSD  
30% suspected of alcohol use in hours preceding the incident

17%



Age: 35 to 64

#### Means:

59% by firearm  
21% by hanging, strangulation, suffocation

#### Circumstances:

47% had mental health problem  
28% had job/financial problem  
23% had alcohol problem

37%



Age: 65 and older

#### Means:

75% by firearm  
10% by hanging, strangulation, suffocation

#### Circumstances:

56% had physical health problem  
33% had mental health problem, among which 63% were diagnosed with depression

46%

## Suicide is preventable — Everyone can play a role

Suicide prevention requires a comprehensive approach that occurs at all levels of society. The Centers for Disease Control and Prevention (CDC) has developed a set of strategies to help states, communities, and individuals reduce risk and increase resilience:

- **Create** protective environments
- **Promote** connectedness
- **Teach** coping and problem-solving skills
- **Identify** and **support** people at risk
- **Lessen** harms and **prevent** future risk
- **Strengthen** economic supports
- **Strengthen** access and delivery of suicide care

For planning and prevention resources visit [CDC's Suicide Prevention](#) website.

## More Resources

**Veterans:** The U.S. Department of Veterans Affairs has a nationwide network of community partners to [prevent suicide](#) among all veterans. Learn more about the [National Strategy for Preventing Veteran Suicide](#).

**BeThe1To:** If you think someone you know is considering suicide, talk to them and connect them to the support they need. [Learn 5 Steps](#) you can take to be a supportive and empathetic listener for them, especially during this time of physical distancing.

**Means:** Reducing a suicidal person's access to highly lethal means is an important part of suicide prevention. Learn more about means reduction at [Harvard's Means Matters](#).

**Location:** The majority of Washington suicides occur in the home. Learn how to reduce access to lethal means before and during a crisis at [Washington's Safer Homes](#).

**Circumstances:** Suicide is complex and many factors contribute to thoughts of suicide. Learn more from [CDC's Vital Signs](#).

**Lived Experience:** If you are thinking of suicide or made a suicide attempt, please know that help is available. Along with supportive family and friends, people who have experienced thoughts of suicide and suicide attempt survivors have created strong peer communities. Learn more at [Now Matters Now](#).

**Postvention:** It's important to support the individuals, families, and communities affected by suicide loss, to reduce the cycle of trauma and suicide risk. [TAPS](#) provides military suicide loss support and resources. Learn more at the [American Foundation for Suicide Prevention](#).

## Be part of the solution

Preventing suicide involves families, communities, partnerships, peers, and working across sectors.



## Crisis Help



**Talk:** 1-800-273-TALK (8255) PRESS 1 to connect with the Veteran Crisis Line

**Chat:** [veteranscrisisline.net](https://veteranscrisisline.net)

**Text:** 838255

**In Crisis?**  
**Text HEAL to 741741**

CRISIS TEXT LINE |

Free, 24/7, Confidential

**Text:** HEAL to 741741 if you or someone you know is in crisis.



**Support** for increased stress due to COVID-19: [waistens.org](https://waistens.org)

**Talk:** 1-833-681-0211