

VETERAN SUICIDE IN WASHINGTON STATE



DOH 140-250

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Veteran Suicide Data in Washington State

Data Sources

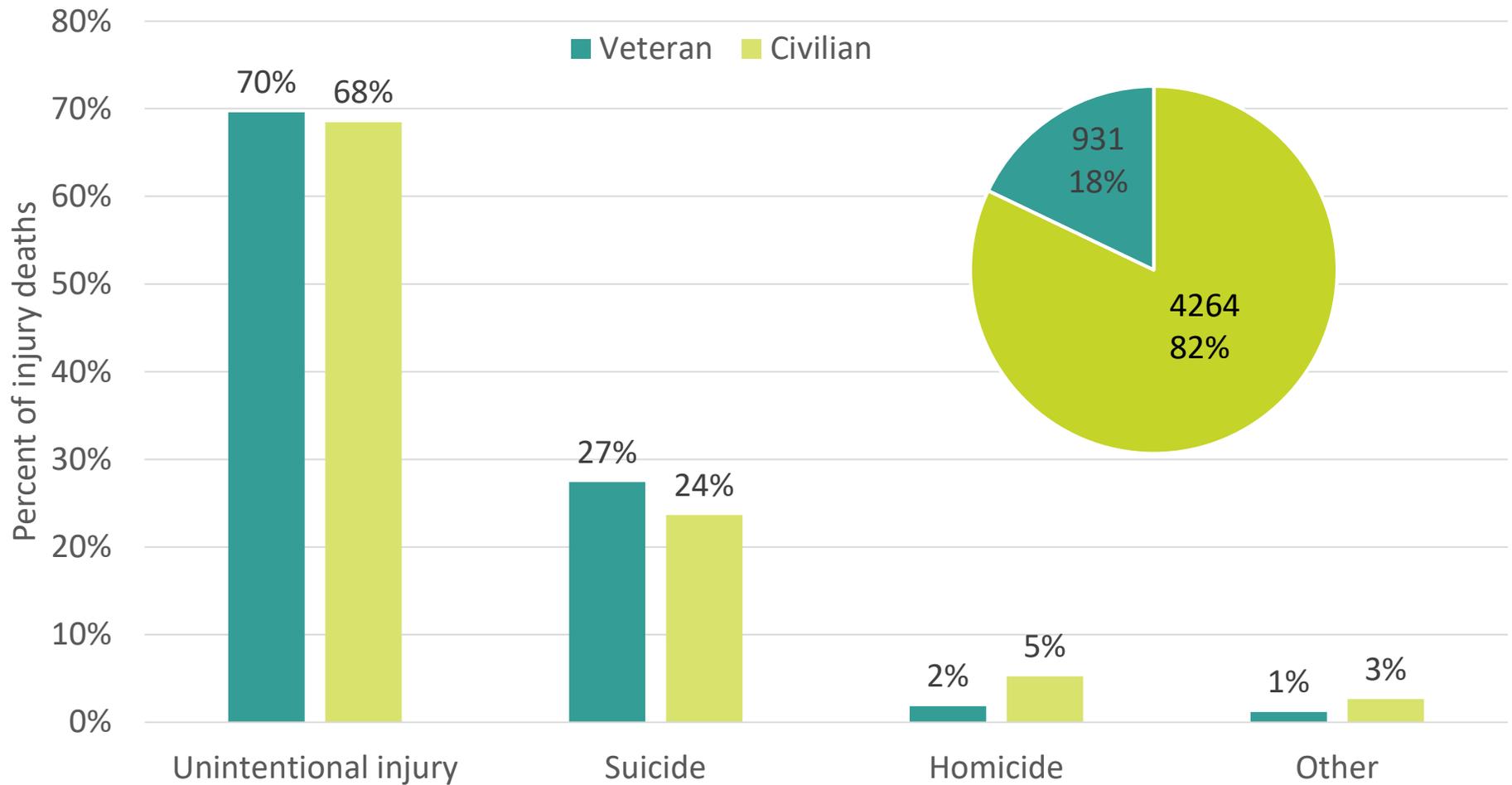
- WA-Death certificates
- WA- Violent Death Reporting System (WA-VDRS)
 - All WA-VDRS data includes injuries related to violent deaths, sustained in Washington state, regardless of residency and location of death.

We define Veteran as:

A person who has ever served in the U.S. Armed Forces

Injury related deaths in WA, 2019

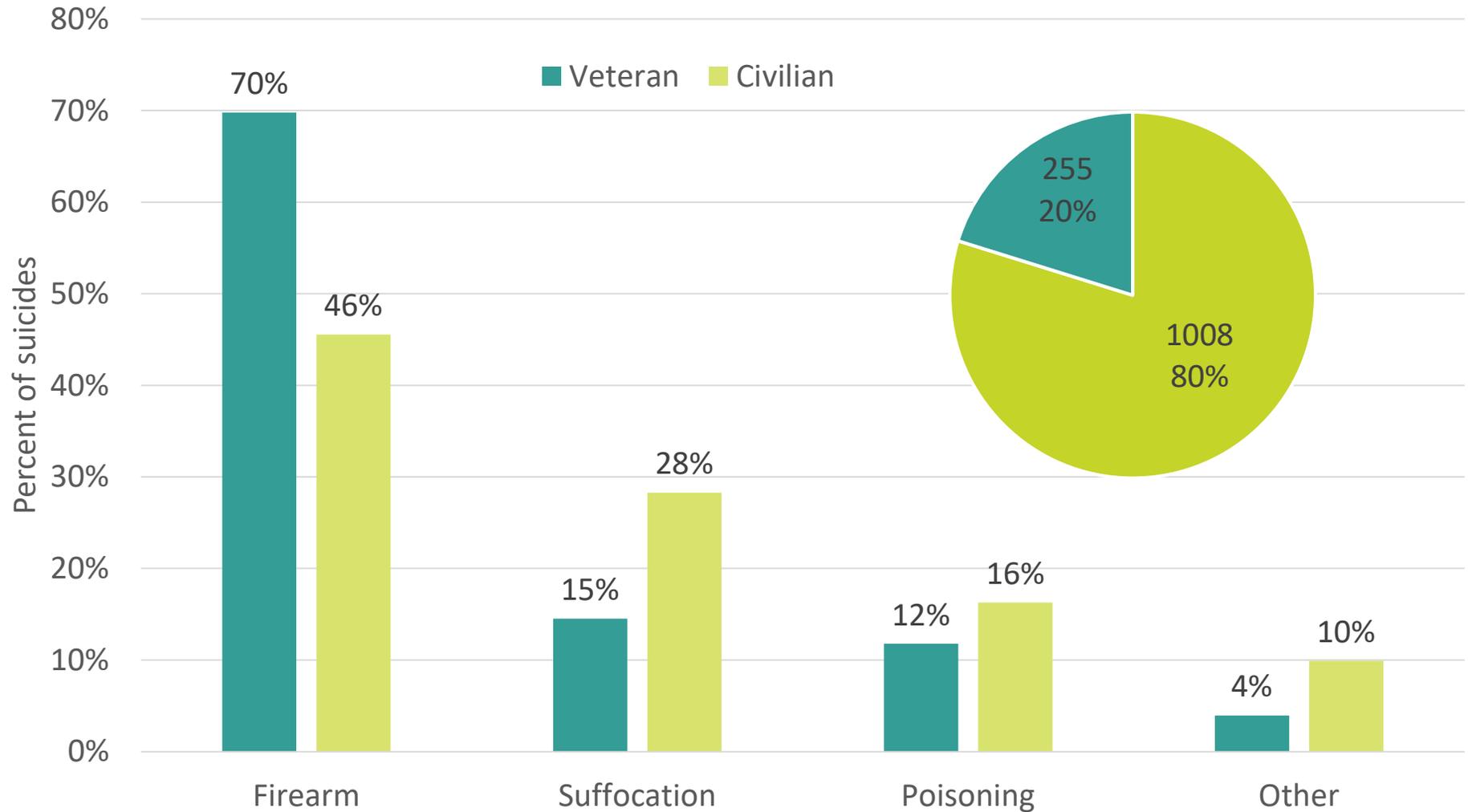
Veteran and Civilian



Source: DOH death certificates

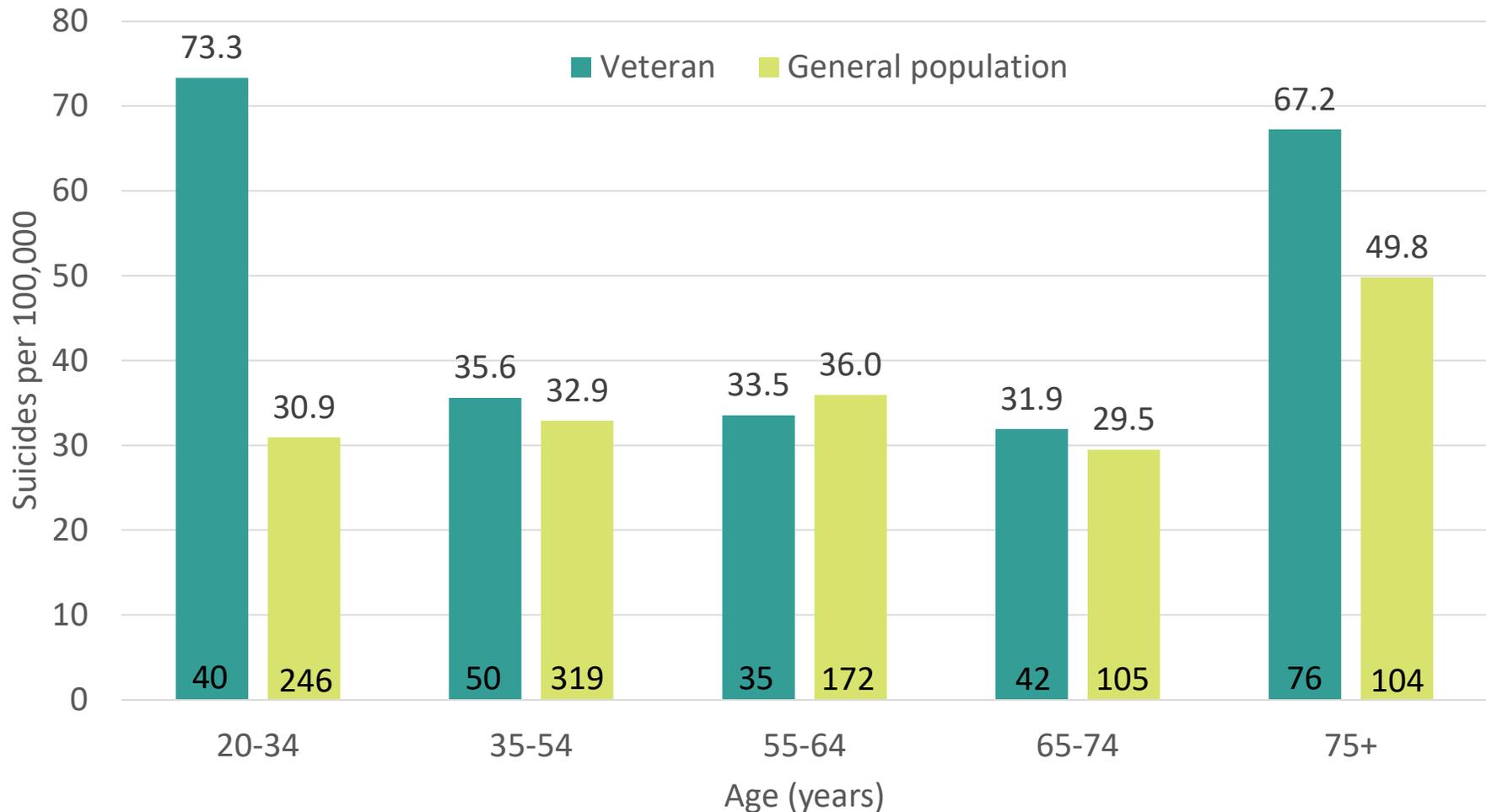
Suicide by method in WA, 2019

Veteran and Civilian



Source: DOH death certificates

MALE suicide rate and count in veteran and the general population in WA, 2019



General population: all WA residents

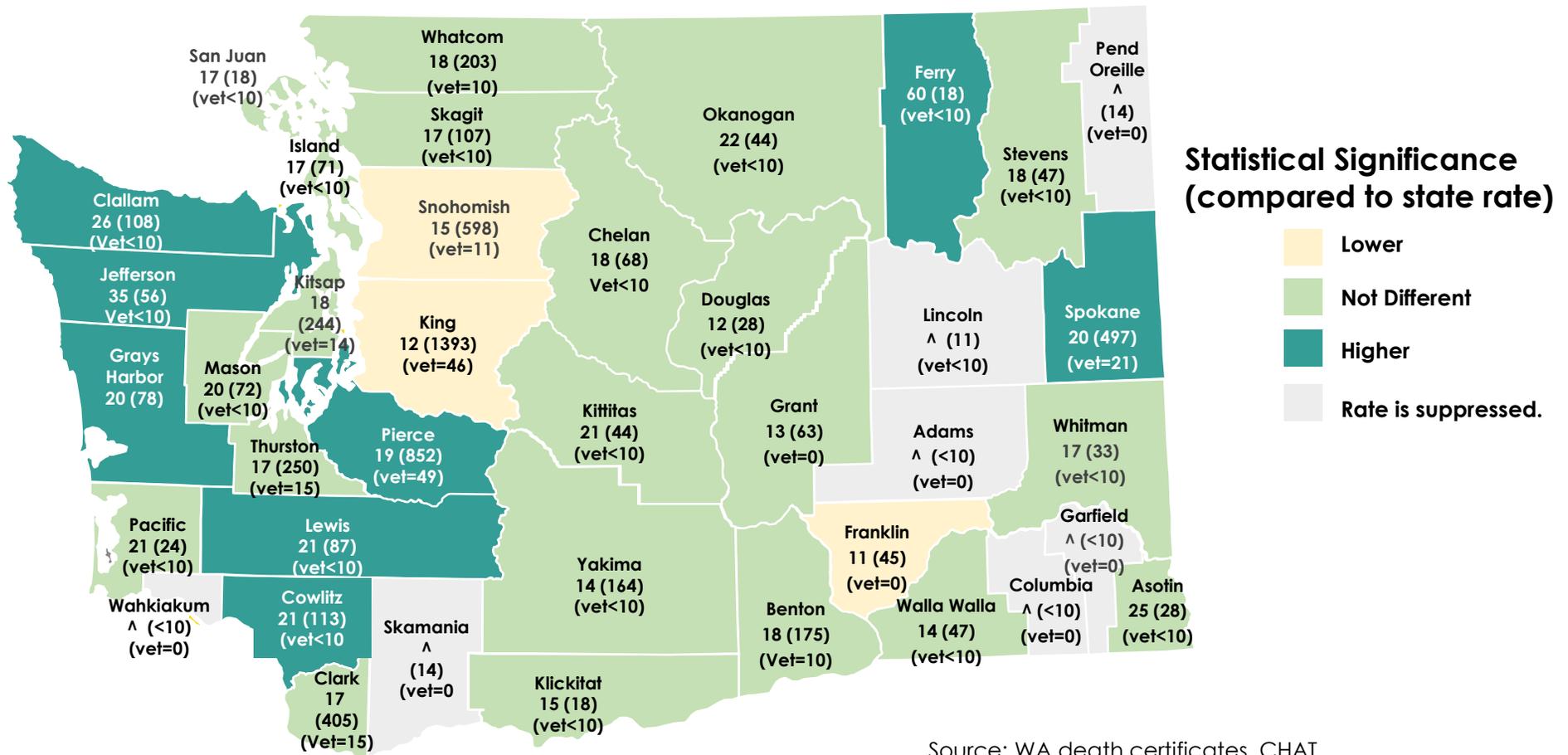
Veteran population: Veteran Population Projection Model 2016: Congressional Briefing, June 2017, revised.

There were 12 female veteran suicides in 2019.

Source: DOH death certificates

Suicide rate (count), WA 2015-2019

(State Age-Adjusted Rate = 16 per 100,000, count=6068)

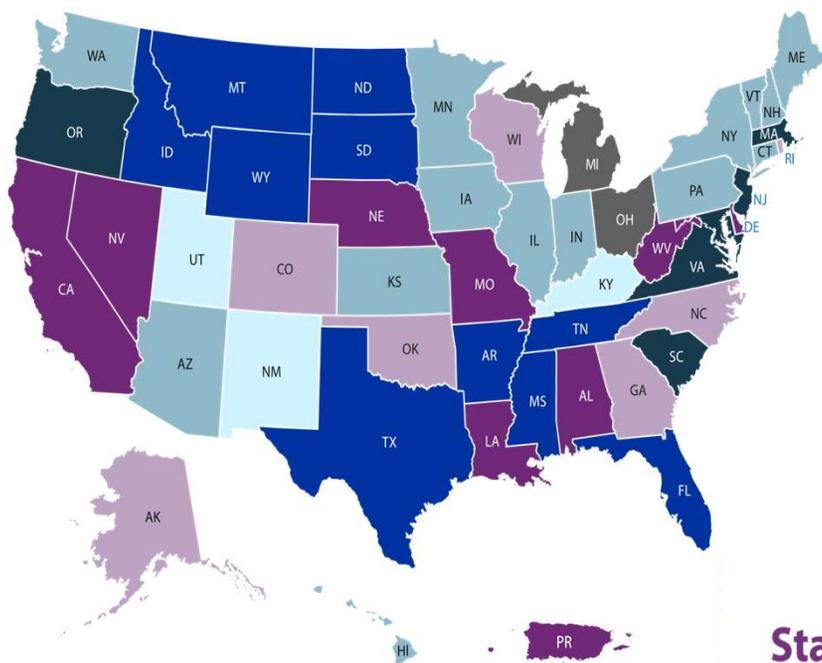


Source: WA death certificates, CHAT
 ^: Rate is suppressed in county with 16 or fewer deaths.
 Vet: veteran suicide count
 <10: death count is suppressed with less than 10 deaths

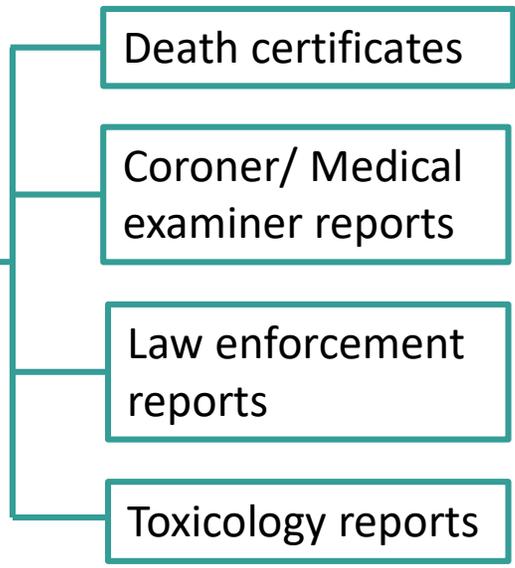
WA veteran suicide take home message

- ❖ In 2019, **255 veterans** died by suicide.
 - This accounts for **20%** of all Washington suicides
 - **70%** of veterans used firearm
 - **46%** of veterans were ages 65 years and older

National Violent Death Report System (NVDRS), WA-VDRS



- NVDRS**
- Unintentional firearm death
 - Suicide
 - Homicide
 - Legal intervention
 - Undetermined death

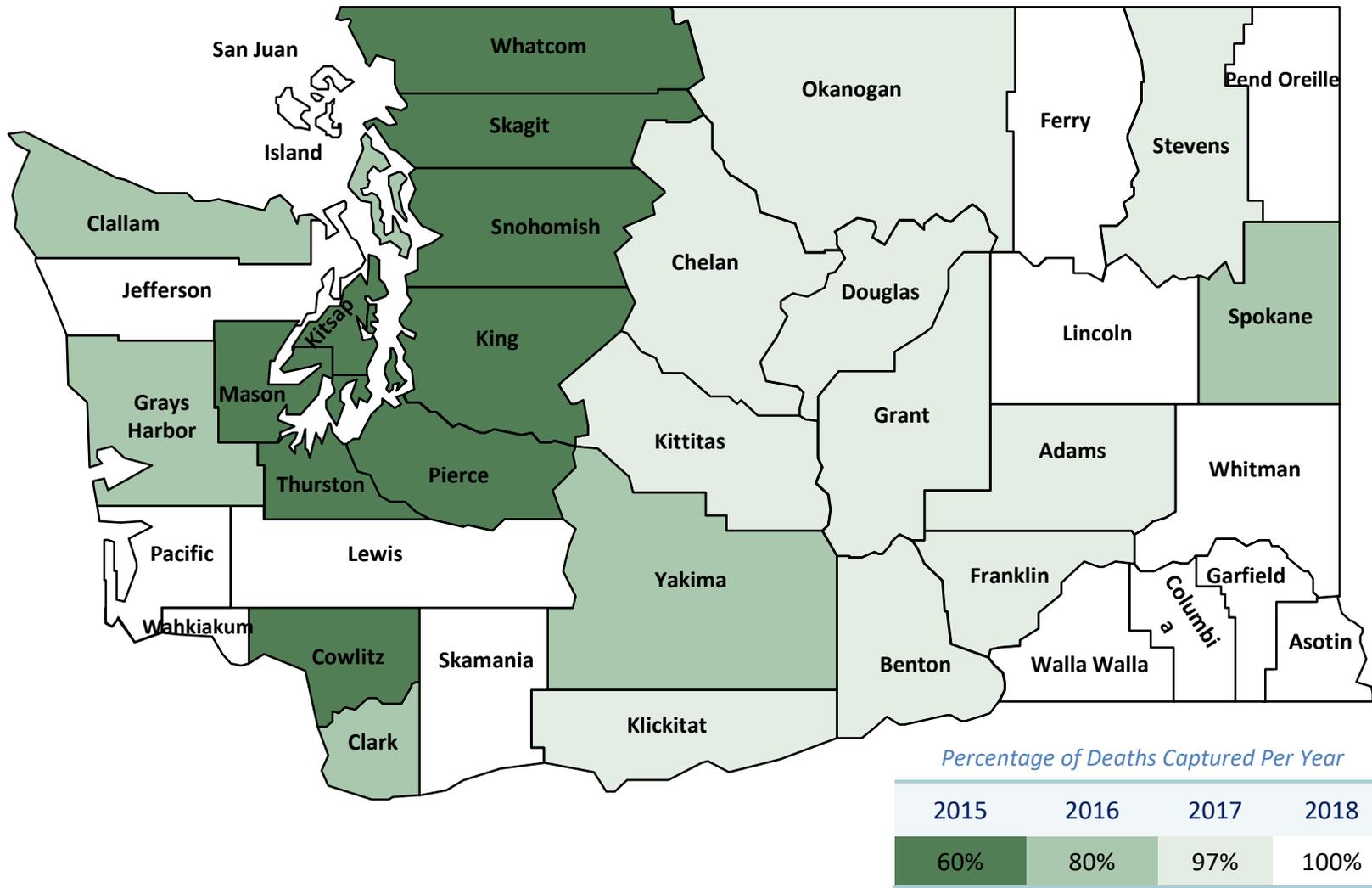


States added by year:

- 2002: MA, MD, NJ, OR, SC, VA
- 2003: AK, CO, GA, NC, OK, RI, WI
- 2004: KY, NM, UT
- 2009: MI, OH
- 2014: AZ, CT, HI, IA, IL, IN, KS, ME, MN, NH, NY, PA, VT
- 2016: AL, CA, DE, DC, LA, MO, NE, NV, Puerto Rico, WV
- 2018: AR, FL, ID, MS, MT, ND, SD, TN, TX, WY



WA-Violent Death Reporting System Implementation Timeline

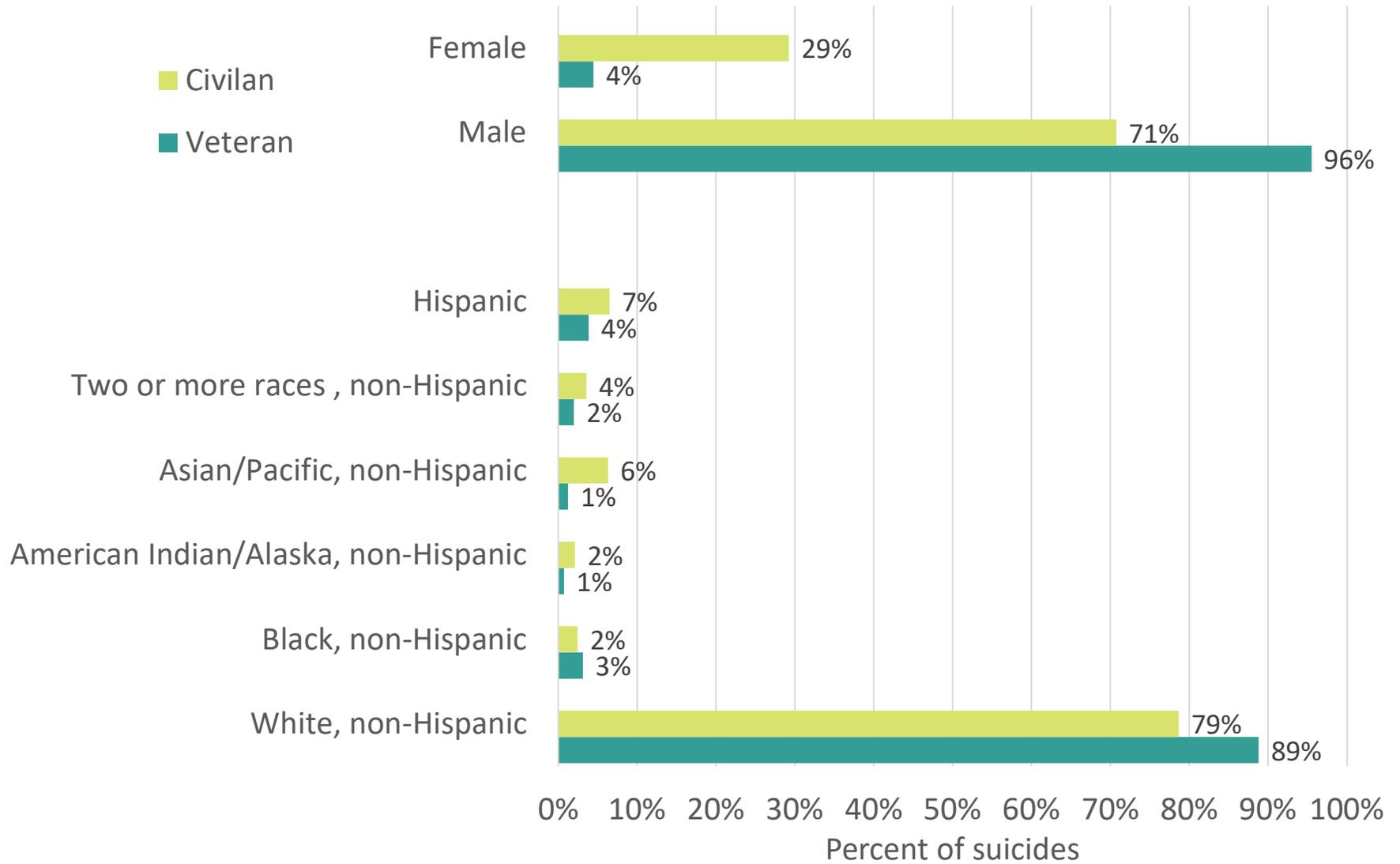




SUICIDE DATA, WA-VDRS 2015-2018

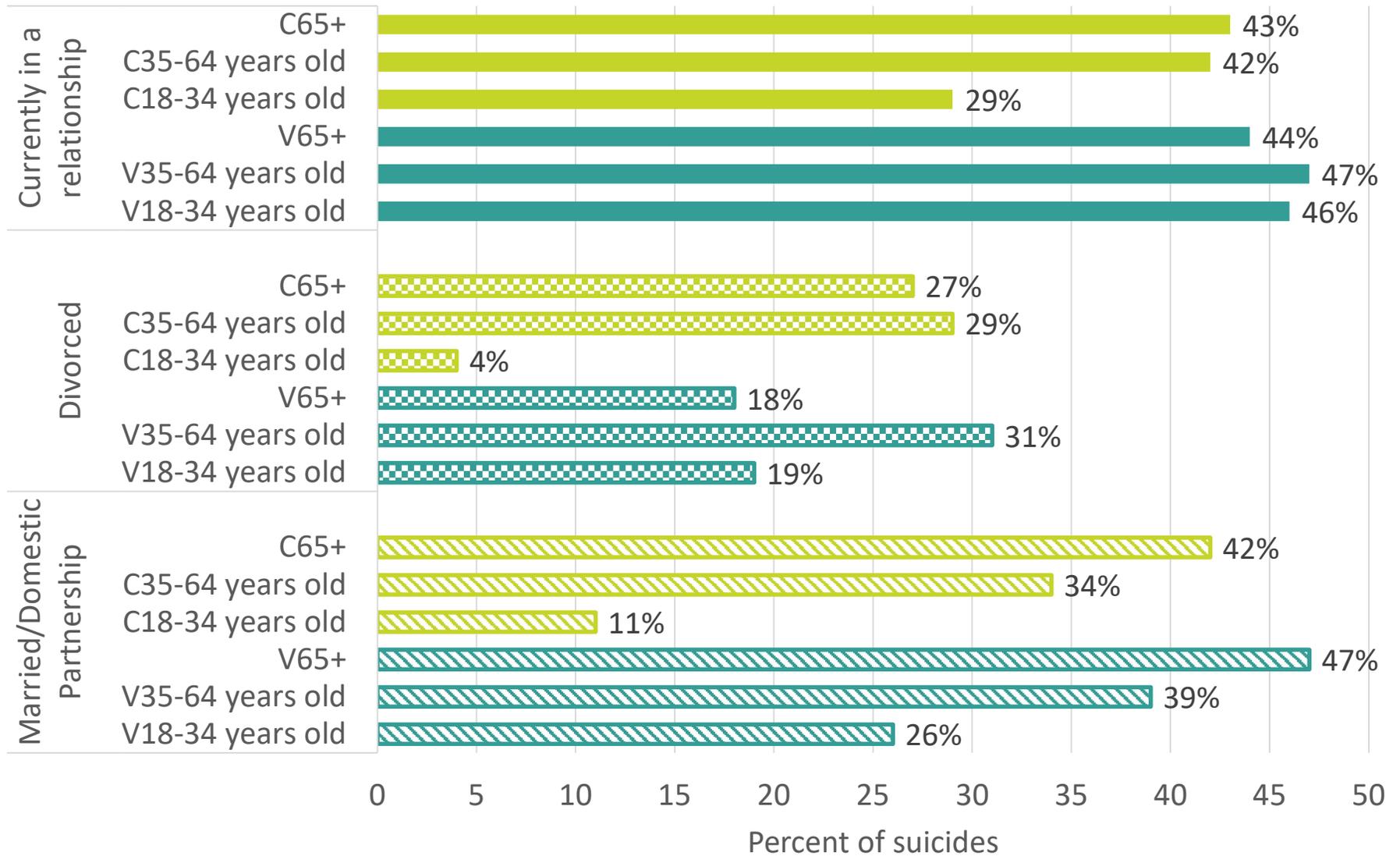
ALL WA-VDRS DATA INCLUDES INJURIES RELATED TO VIOLENT DEATHS, SUSTAINED IN WASHINGTON STATE, REGARDLESS OF RESIDENCY AND LOCATION OF DEATH.

Who?, Sex and race/ethnicity, 2015-2018



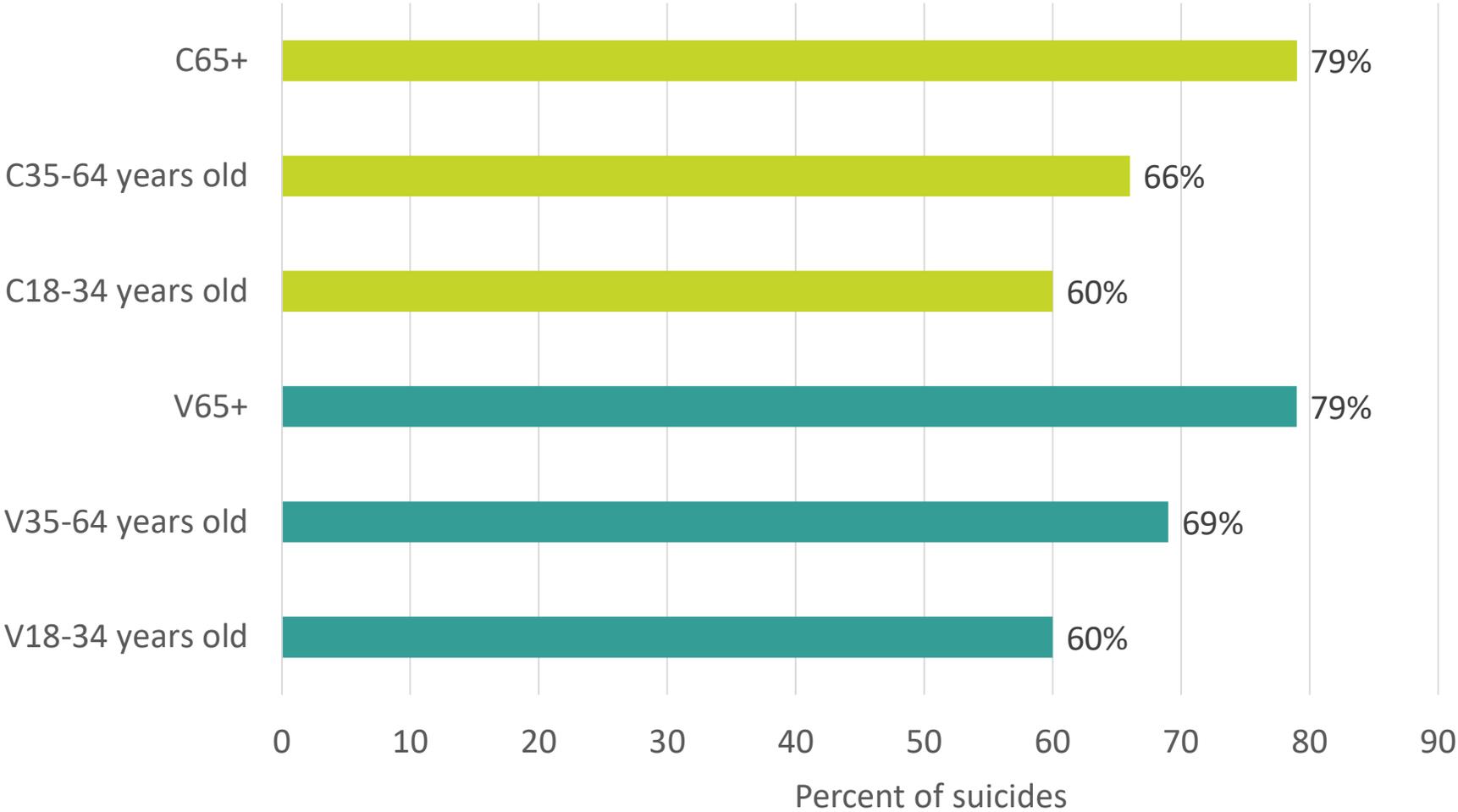
Source: WA-VDRS
 V: Veteran
 C: Civilian

Who?, Marital status, 2015-2018



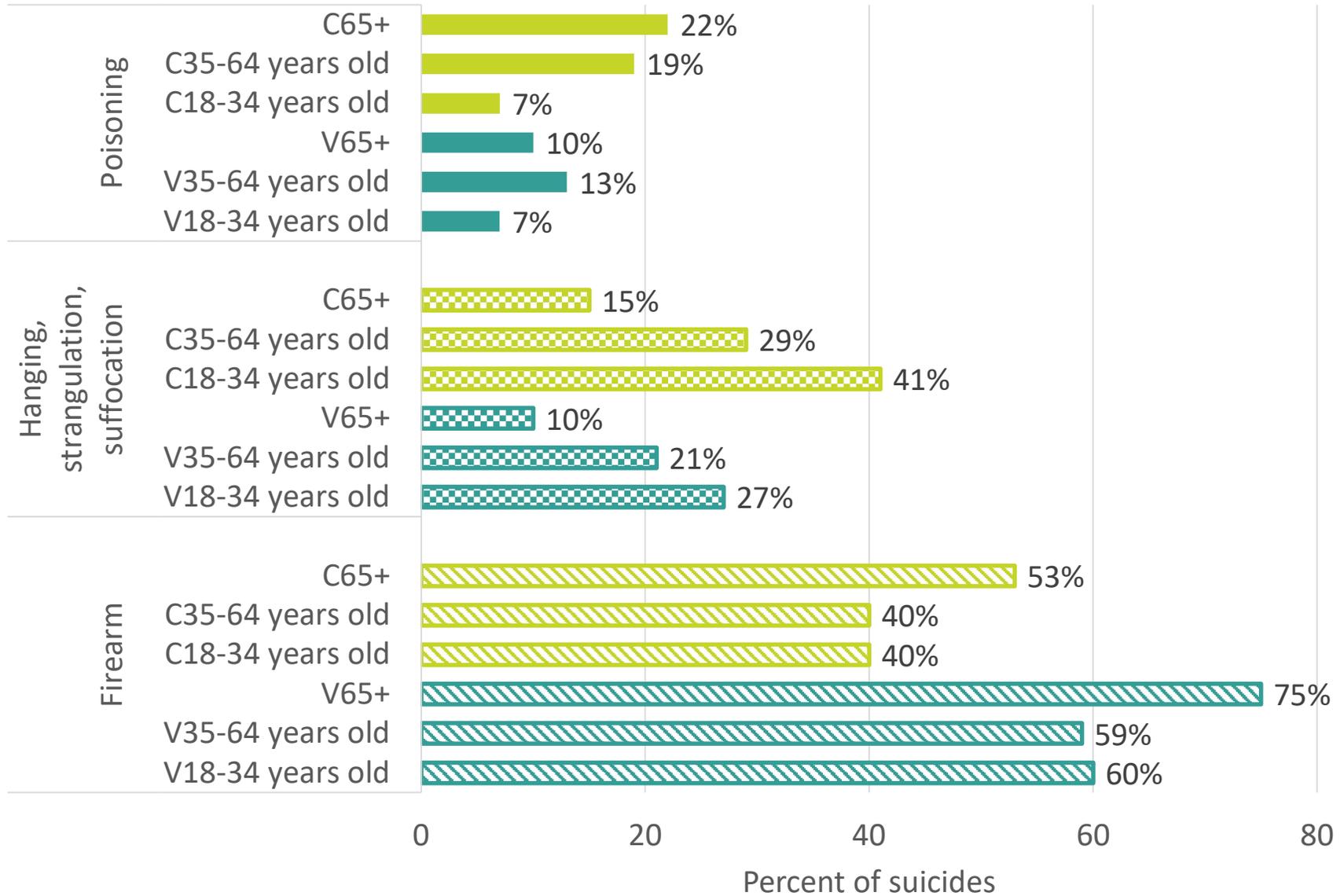
Source: WA-VDRS
 V: Veteran
 C: Civilian

Where? Death occurred at decedent's residence, 2015-2018



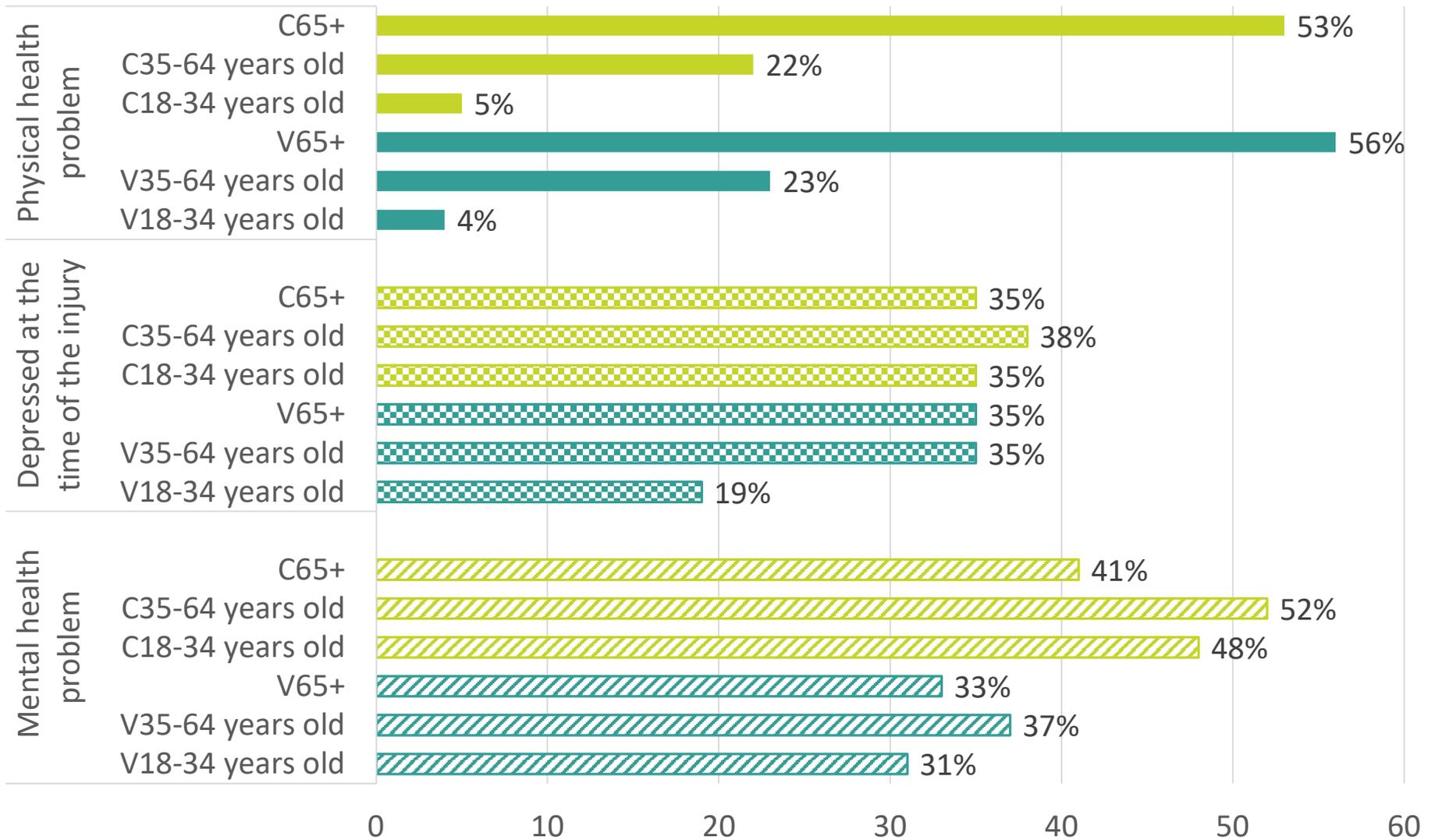
Source: WA-VDRS
V: Veteran
C: Civilian

How? Methods used in suicide, 2015-2018



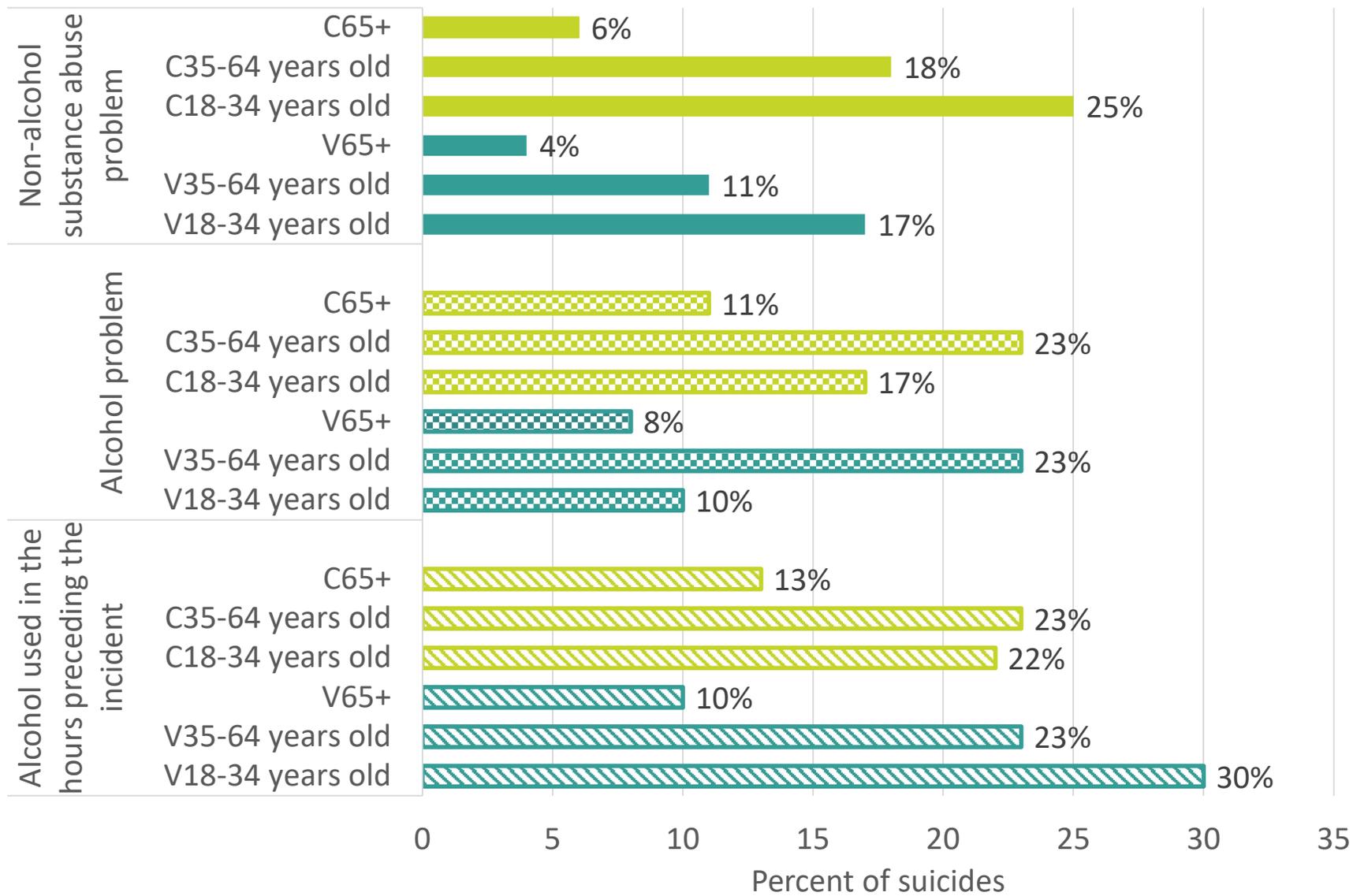
Source: WA-VDRS
 V: Veteran
 C: Civilian

Why? Mental or physical health problems contributed to the death, 2015-2018



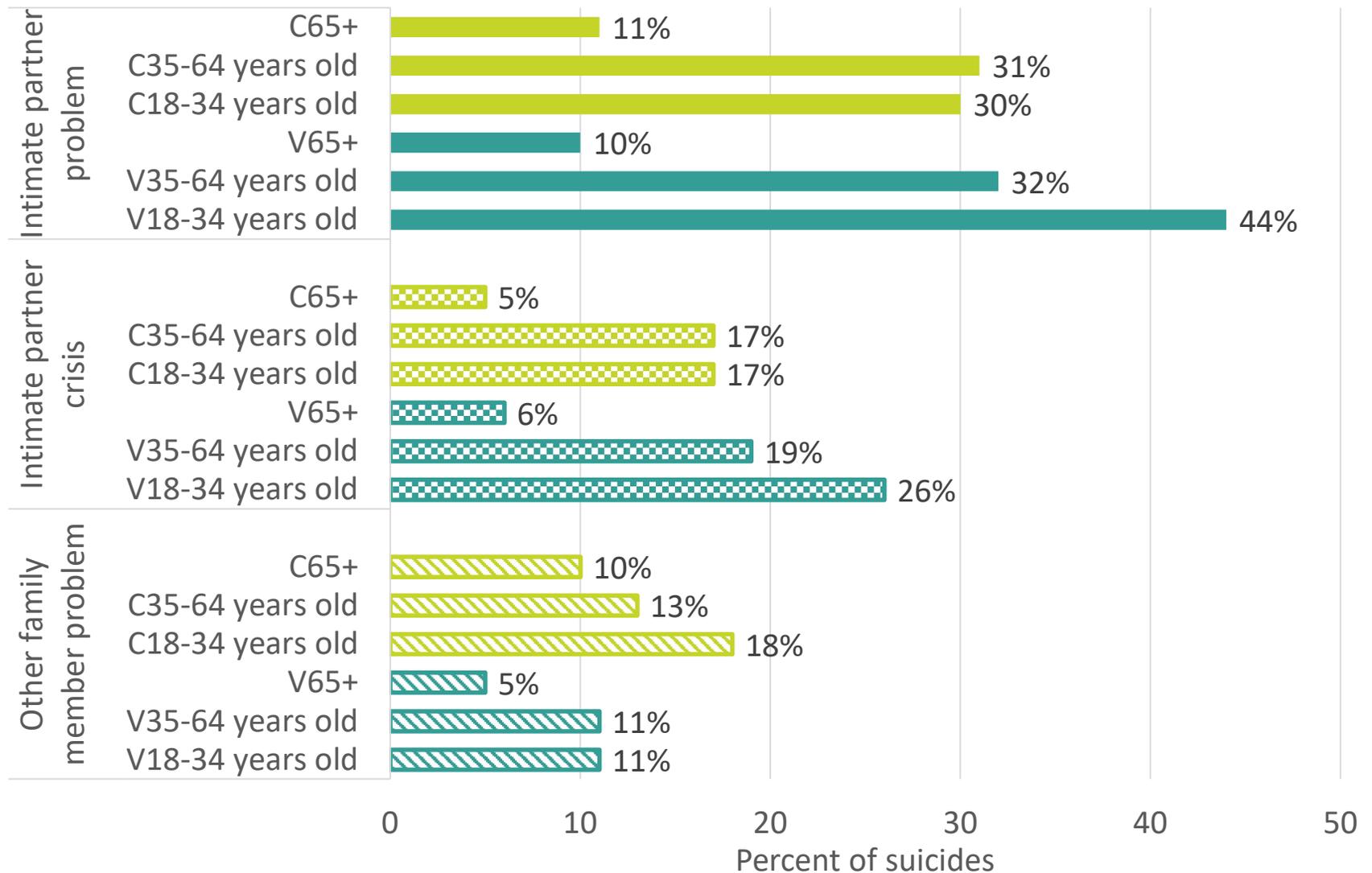
Source: WA-VDRS
 V: Veteran
 C: Civilian

Why? Decedents had alcohol or substance problems, 2015-2018



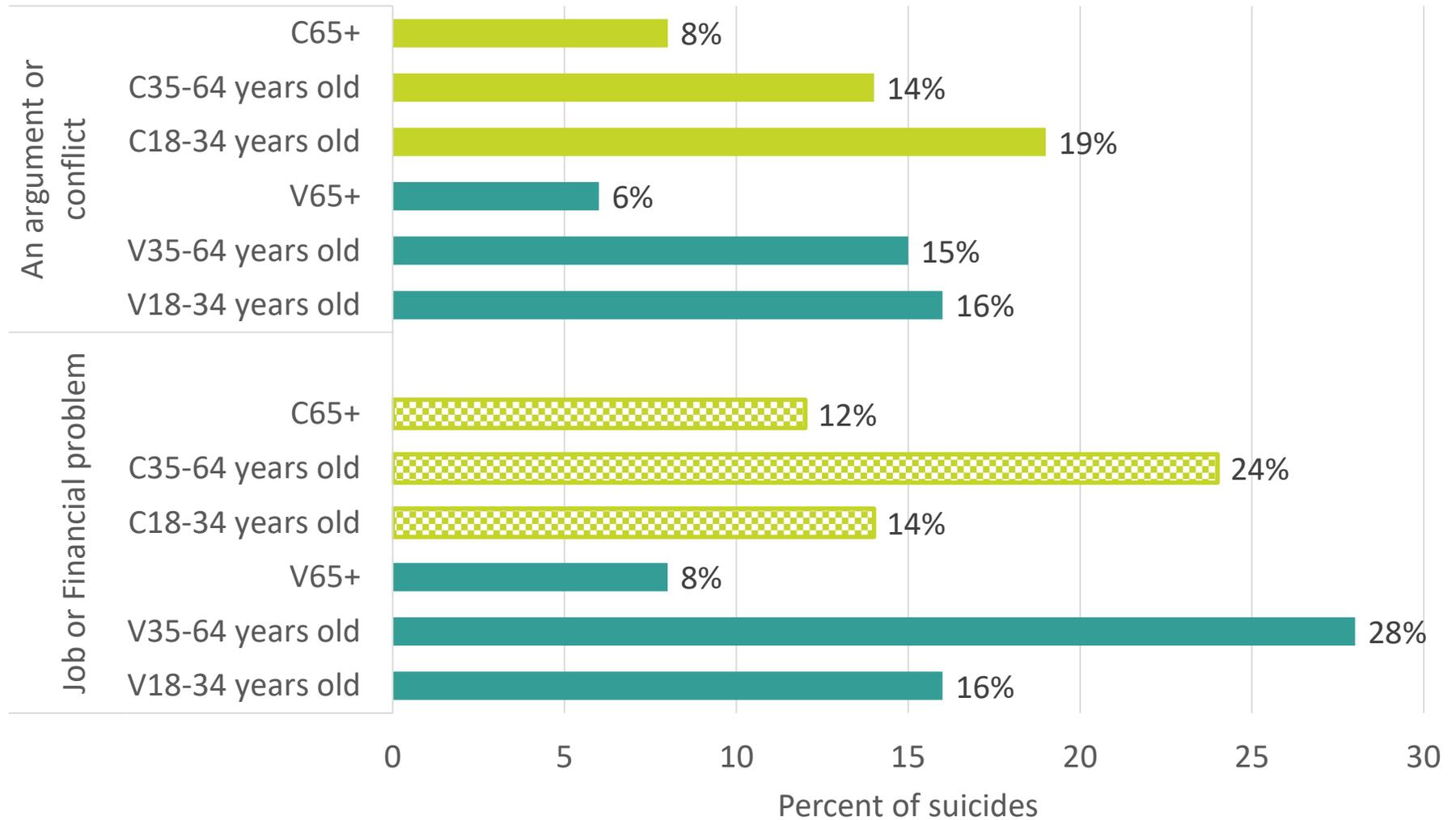
Source: WA-VDRS
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Why? Family member problems contributed to the death, 2015-2018



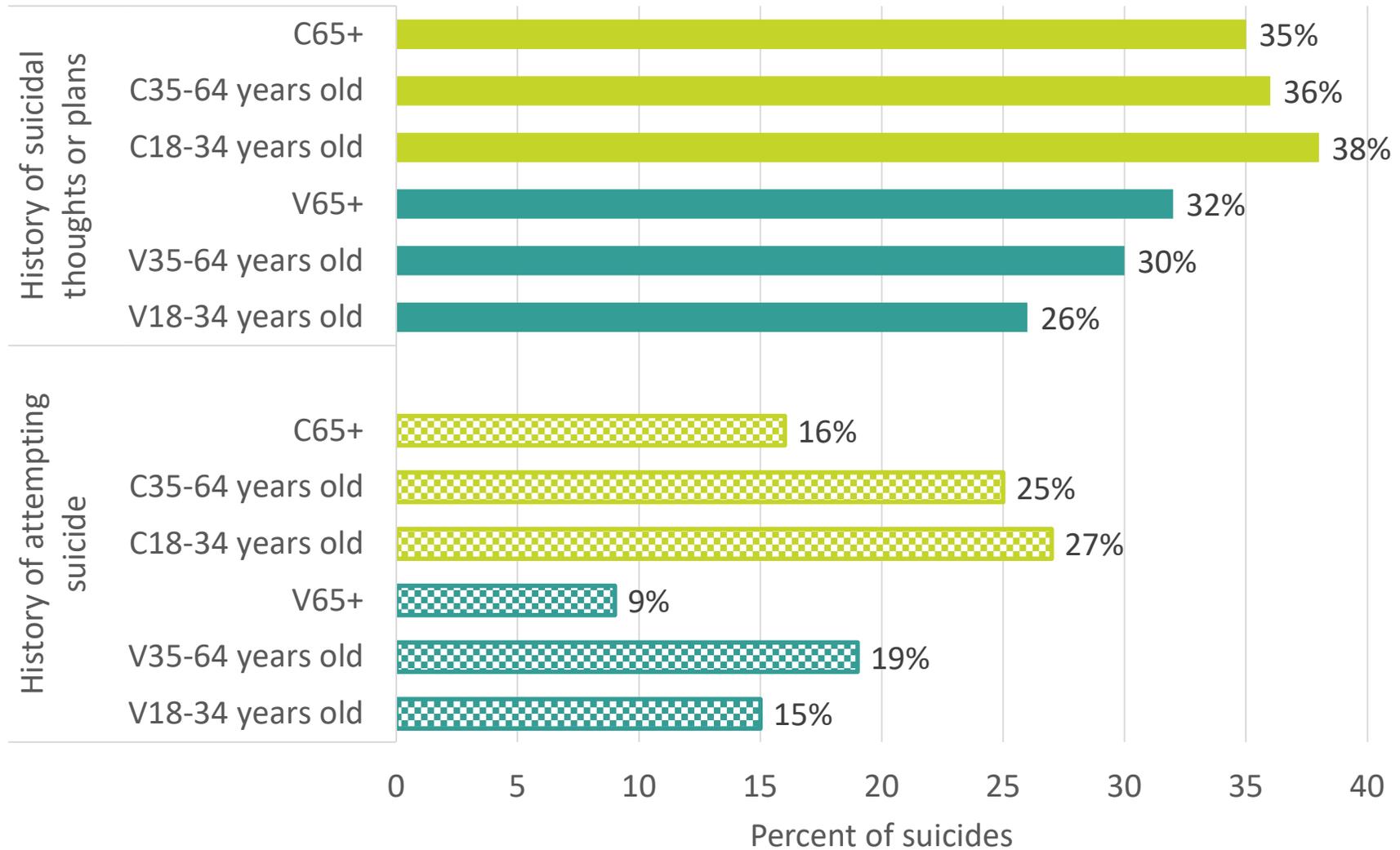
Source: WA-VDRS
 V: Veteran
 C: Civilian

Why? Financial or job problems contributed to the death, argument /conflict led to the death, 2015-2018



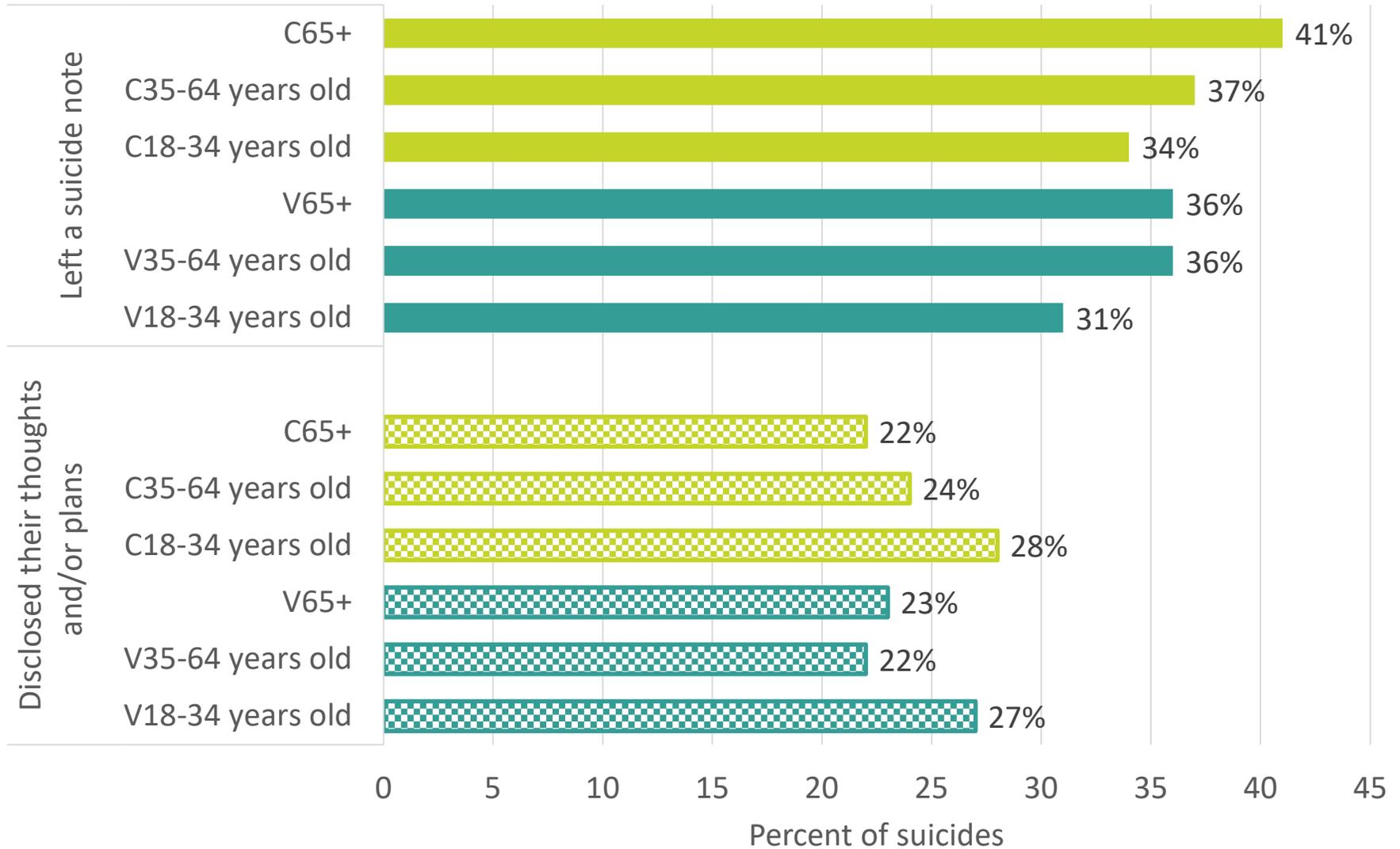
Source: WA-VDRS
 V: Veteran
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Why? Decedents had suicidal thoughts or suicide attempt history, 2015-2018



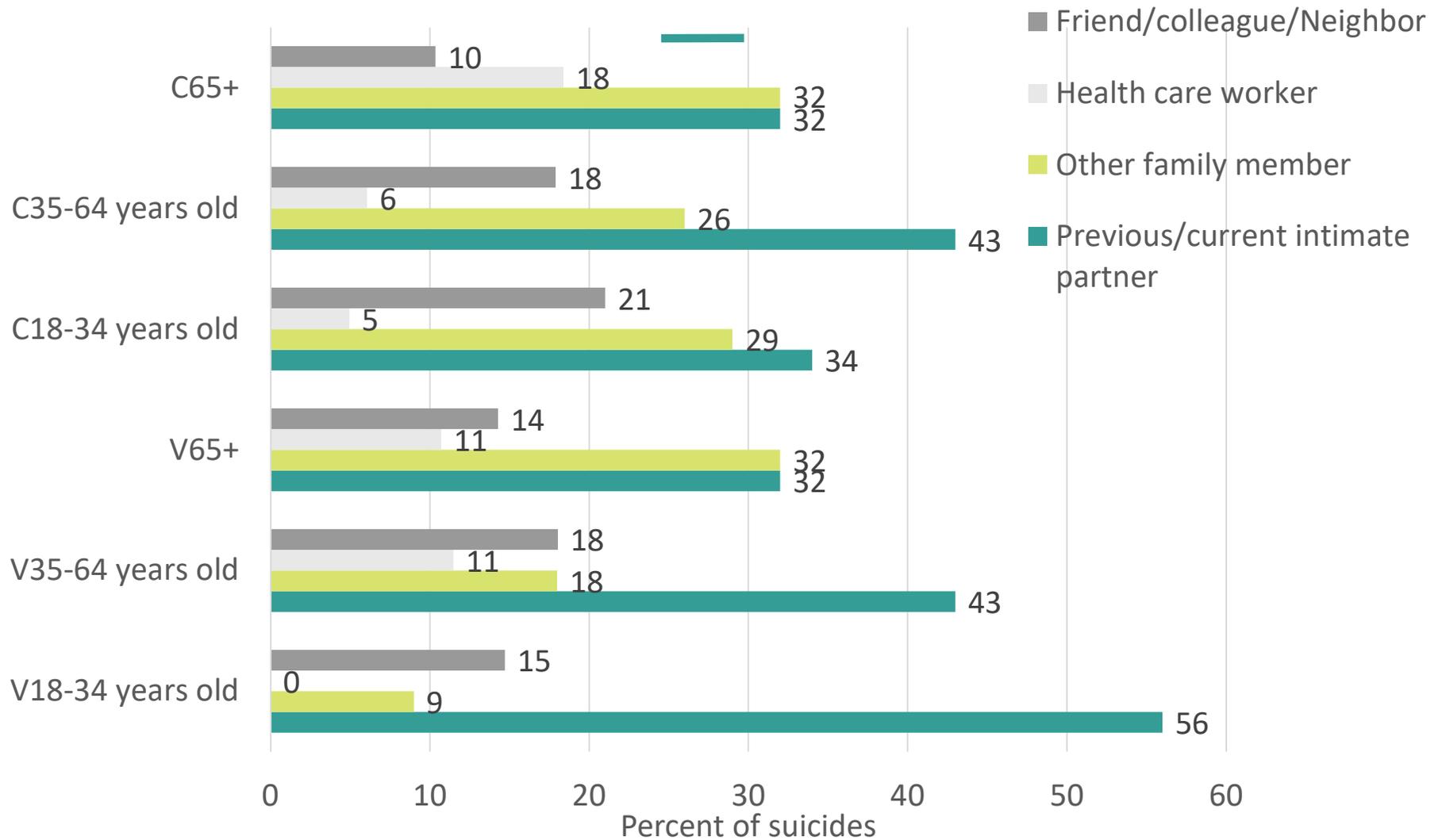
Source: WA-VDRS
 V: Veteran
 C: Civilian

Why? Decedents disclosed suicide intention, 2015-2018



Source: WA-VDRS
 V: Veteran
 C: Civilian

To whom decedents disclosed suicidal thoughts /plans, 2015-2018



Source: WA-VDRS
 V: Veteran
 C: Civilian

WA VDRS Take home message

❖ Circumstances present in **veteran suicides**:

- Non-alcohol substance abuse problem: decreased with age, highest in **19-34-year-olds** (17%), compared to 65 years and older (4%).
- Alcohol problem: **35-64-year-old** had the highest percent (23%), compared to 19-34-year-olds (10%) and 65 years and older (8%).
- Alcohol used in the hours preceding the incident: decreased with age, highest in **19-34-year-olds** (30%), compared to 35-64-year-olds (23%), and 65 years and older (10%).
- Job or financial problem: **35-64-years-old** had the highest percent (28%), compared to 19-34-year-olds (16%) and 65 years and older (8%).

WA VDRS Take home message

❖ Circumstances present in **veteran suicides**:

- Intimate partner problem: decreased with age, highest in **19-34-year-olds** (44%), compared to 35-64-year-old (32%), and 65 years and older (10%).
- Physical health problem: increased with age, highest in **65 years and older** (56%), compared to 35-64-year-olds (23%), and 19-34-year-olds (4%).
- Injury occurred at the decedent's residence: increased with age, highest in **65 years and older** (79%), compared to 35-64-year-olds (69%), and 19-34-year-olds (60%).

❖ Circumstances present in veteran vs. civilian

- Alcohol used in the hours preceding the incident: the percent for **19-34-year-old veteran** (30%) was higher than for civilians (22%).
- Intimate partner problem: the percent for **19-34-year-old veteran** (44%) was higher than for civilians (30%).

Factsheets

2015-2018 fact sheets available for:

- All Suicide data
- Suicide in Men in the middle years
- Suicide in Older Adult
- Suicide in Young Adult
- Suicide in Youth
- Suicide in Veterans

Download at:

<https://www.doh.wa.gov/YouandYourFamily/InjuryandViolencePrevention/SuicidePrevention>

WASHINGTON STATE VIOLENT DEATH REPORTING SYSTEM Veterans Suicide Data | 2015-2018

National Violent Death Reporting System (NVDRS) 4,090 suicides 2015-2018

NVDRS is the only state-based surveillance system that pools more than 600 unique data elements from reports, law enforcement reports, coroner/medical examiner reports, and toxicology reports. NVDRS data cover all types of violent deaths, including intentional injury deaths, suicides, and homicides. Between 2015 and 2018, 4,090 violent deaths were reported to the National Violent Death Reporting System from suicide were veterans (wh...

Who, When, Where, How a Veteran Dies

NVDRS collects data on the **Who** help us better understand **Why** firearm was more prevalent among veterans. Nearly 40% of veterans who die 15% had Post-Traumatic Stress (PTSD) or depressed moods. About 25% of veterans who die from suicide were intimate partners (40%), family members, or friends.

Suicide Means, Circumstances

Circumstances examples:

- Girlfriend moved out
- Firearm broke off the engagement
- Had escalating marriage difficulties
- Had three suicide attempts

Age: 19 to 34

Means:

- 60% by firearm
- 2% by hanging, strangulation, suffocation

Circumstances:

- 44% had intimate partner problems
- 32% with mental health problems
- 30% suspected of alcohol use in preceding the incident

17%

WASHINGTON STATE VIOLENT DEATH REPORTING SYSTEM Sharing Suicide Data to Save Lives

National Violent Death Reporting System (NVDRS) 1619 violent deaths 2018

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
- Toxicology reports

NVDRS data covers all types of violent deaths, including intentional injury deaths, suicides, and homicides. In 2018, 1619 violent deaths were reported to the National Violent Death Reporting System (NVDRS). 2018 is the first year that NVDRS data is available for Washington State.

Who, When, Where, How and Why

NVDRS collects data on the **Who**, **When**, **Where**, **How**, and **Why** they died by suicide. Studies show that re-creating the scene can help us understand why they died by suicide. In Washington, means and circumstances relationship and life stressors—characteristics of the majority of suicides happen at home.

Age: 18 to 24

Means:

- 53% by firearm
- 32% by hanging, strangulation, suffocation

Circumstances:

- 23% had an intimate partner
- 30% had suicide attempt
- 22% had non-alcohol related problems

Age: under 18

Means:

- 60% by hanging, strangulation, suffocation
- 29% by firearm

Circumstances:

- 42% had a family relationship
- 23% had a school problem
- 21% had a recent argument

4%

WASHINGTON STATE VIOLENT DEATH REPORTING SYSTEM Sharing Data to Prevent Youth Suicide | 2015-2018

Youth Suicide

The Washington state suicide rate among youth (10-17 years old) has been rising (from 3.5 per 100,000 in 2010 to 4.9 per 100,000 in 2018), and has remained higher than the national rate in the same time frame. Since 2017, suicide has surpassed accidental deaths, making it the leading cause of death among youth. Nearly 70% of youth who died by suicide were males and 65% were Non-Hispanic whites.

Results from Washington State's 2018 Healthy Youth Survey (HYS) show that, in the past year, 10% of 10th graders reported attempting suicide, with a significantly higher percentage of gay, lesbian, and bisexual students (22%) reporting attempting suicide than straight students (7%).

What Happened and Why

The Washington Violent Death Reporting System (WA-VDRS) is part of the National Violent Death Reporting System (NVDRS) that collects more than 600 unique data elements from death certificates, coroner/medical examiner reports, law enforcement reports, and toxicology reports on **who**, **when**, **where**, and **how** of suicides to help us better understand **why** they occurred.

Between 2015 and 2018, 4,090 suicides were reported into WA-VDRS. Of those, 4% were youth under 18 years old. Approximately 75% of youth suicides occurred at home; 42% had mental health problems with 76% diagnosed as depression; and, more than 25% disclosed their suicide thoughts or plans to another person. If a firearm was used, nearly 50% were owned by a family member or friend.

WA-VDRS Youth Suicides	
MALES	FEMALES
44% died by firearm	69% died by suffocation/hanging/strangulation
26% had treatment for mental health/substance abuse problems	54% had treatment for mental health/substance abuse problems
36% had history of suicide thoughts and/or plans	52% had history of suicide thoughts and/or plans
16% had history of suicide attempt	41% had history of suicide attempt
47% had problems with a family member	33% had problems with a family member
26% had problems at or related to school	30% had problems at or related to school

Examples of family or school problems: arguments with family members; discipline from parents; fighting or being bullied at school; failing grades or failure to meet graduation requirements.

#BeTheTo

The National Action Alliance for Suicide Prevention and the National Suicide Prevention Lifeline promote #BeTheTo's five action steps for communicating with and supporting someone who may be suicidal. Visit #BeTheTo for information about how and why to take action.

<p>ASK</p>  <ul style="list-style-type: none"> • Ask the tough questions directly. "Are you thinking about killing yourself?" 	<p>BE THERE</p>  <ul style="list-style-type: none"> • Listen to their reasons for feeling hopeless and in pain. • Listen with compassion and empathy—no dismissing or judgment. 	<p>KEEP THEM SAFE</p>  <ul style="list-style-type: none"> • Ask if they've thought about how they would do it. • Separate them from anything they could use to hurt themselves. 	<p>HELP THEM CONNECT</p>  <ul style="list-style-type: none"> • Connect them with a support system such as their family, friends, clergy, coaches, co-workers, or therapists. • Encourage them to call 800-273-TALK (2755). 	<p>FOLLOW UP</p>  <ul style="list-style-type: none"> • Check in on a regular basis. • Making contact in the days after a crisis can make the difference in keeping them alive.
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Resources

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](#).

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.

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 increased suicide risk. Learn more at the [American Foundation for Suicide Prevention](#).



Chat: [SuicidePreventionLifeline.org](#)
Talk: 1-800-273-TALK (8255)

Crisis Help



Support for increased stress due to COVID-19: [WAListens.org](#)
Talk: 1-833-681-0211





DOH 140-250 March 2021

Washington State Department of Health is committed to providing customers with forms and publications in appropriate alternate formats. Requests can be made by calling 800-525-0127 or by email at civil.rights@doh.wa.gov. TTY users dial 711.