

VA



U.S. Department
of Veterans Affairs



ASCEND

For Veteran Suicide Prevention

Assessing Social and Community Environments with National Data (ASCEND) for Veteran Suicide Prevention: Enhancing Surveillance of Non-Fatal Suicidal Self-Directed Violence

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1440-1540 ET



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- Dr. Hoffmire is an Epidemiologist at the VA Rocky Mountain Mental Illness Research Education and Clinical Center (MIRECC) for Suicide Prevention.
- She is also an Assistant Professor at the University of Colorado School of Medicine in the Department of Physical Medicine and Rehabilitation.
- Dr. Hoffmire's research aims to inform evidence-based suicide prevention programming for Veterans, with a focus on improving upstream, public-health oriented suicide prevention for historically underserved Veterans, such as women Veterans and Veterans not engaged in VA healthcare.

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- Dr. Monteith is a Clinical Research Psychologist in the VA Rocky Mountain Mental Illness Research, Education and Clinical Center (MIRECC) for Suicide Prevention.
- She is also an Associate Professor at the University of Colorado School of Medicine in the Departments of Physical Medicine and Rehabilitation, Psychiatry, and the Firearm Injury Prevention Initiative.
- Dr. Monteith's research focuses on Veteran suicide prevention, with emphasis on historically underserved populations, such as women Veterans, Asian American, Native Hawaiian, and Pacific Islander (AANHPI) Veterans, and survivors of interpersonal violence.

Disclosures

- This presentation is based on work supported, in part, by the Department of Veterans Affairs (VA), including the Office of Mental Health and Suicide Prevention (OMHSP). The views expressed in this presentation are those of the authors and do not necessarily reflect the official policy or position of the VA, Department of Defense, nor the U.S. Government.
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Learning Objectives

At the conclusion of this activity, participants will be able to:

1. **Discuss** the ASCEND program and its role in Veteran suicide prevention.
2. **Describe** gender differences in the prevalence of non-fatal suicidal self-directed violence among Veterans and how these can guide gender-sensitive prevention programming.
3. **Identify** subpopulations of Veterans at elevated risk for non-fatal suicidal self-directed violence.



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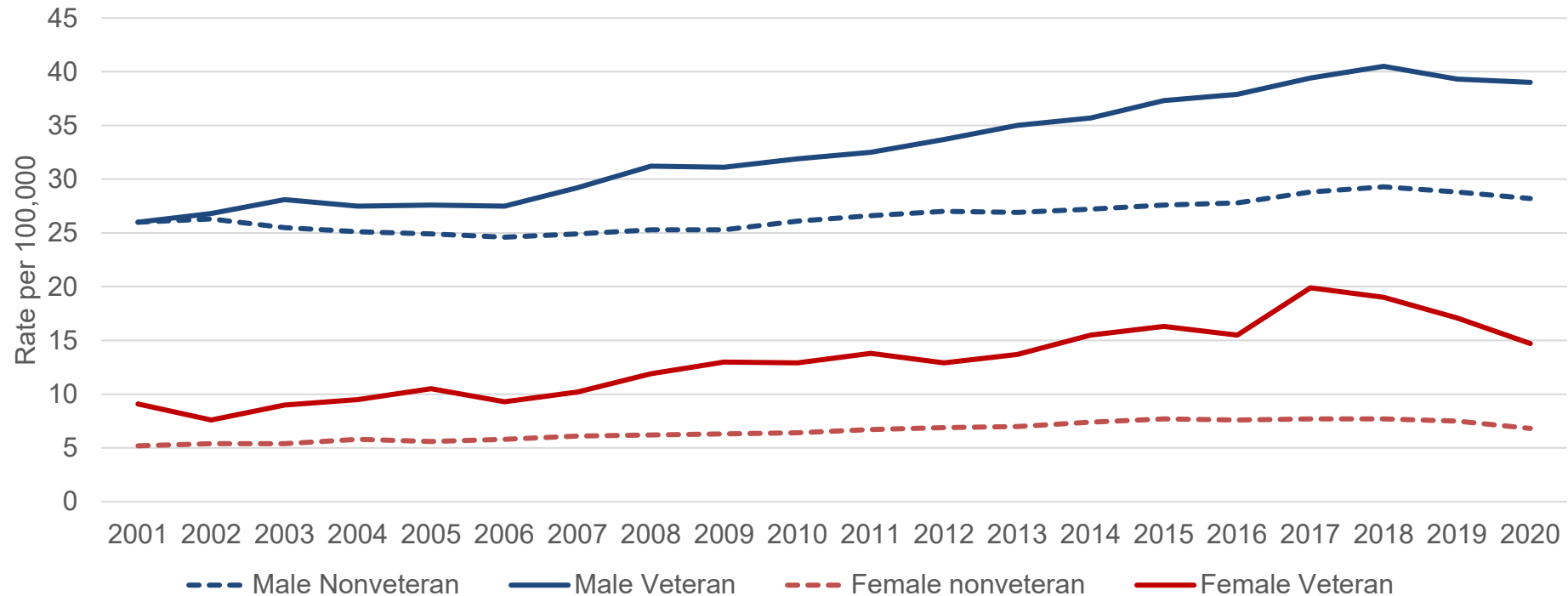
*ASCEND Veterans
Engagement Board*





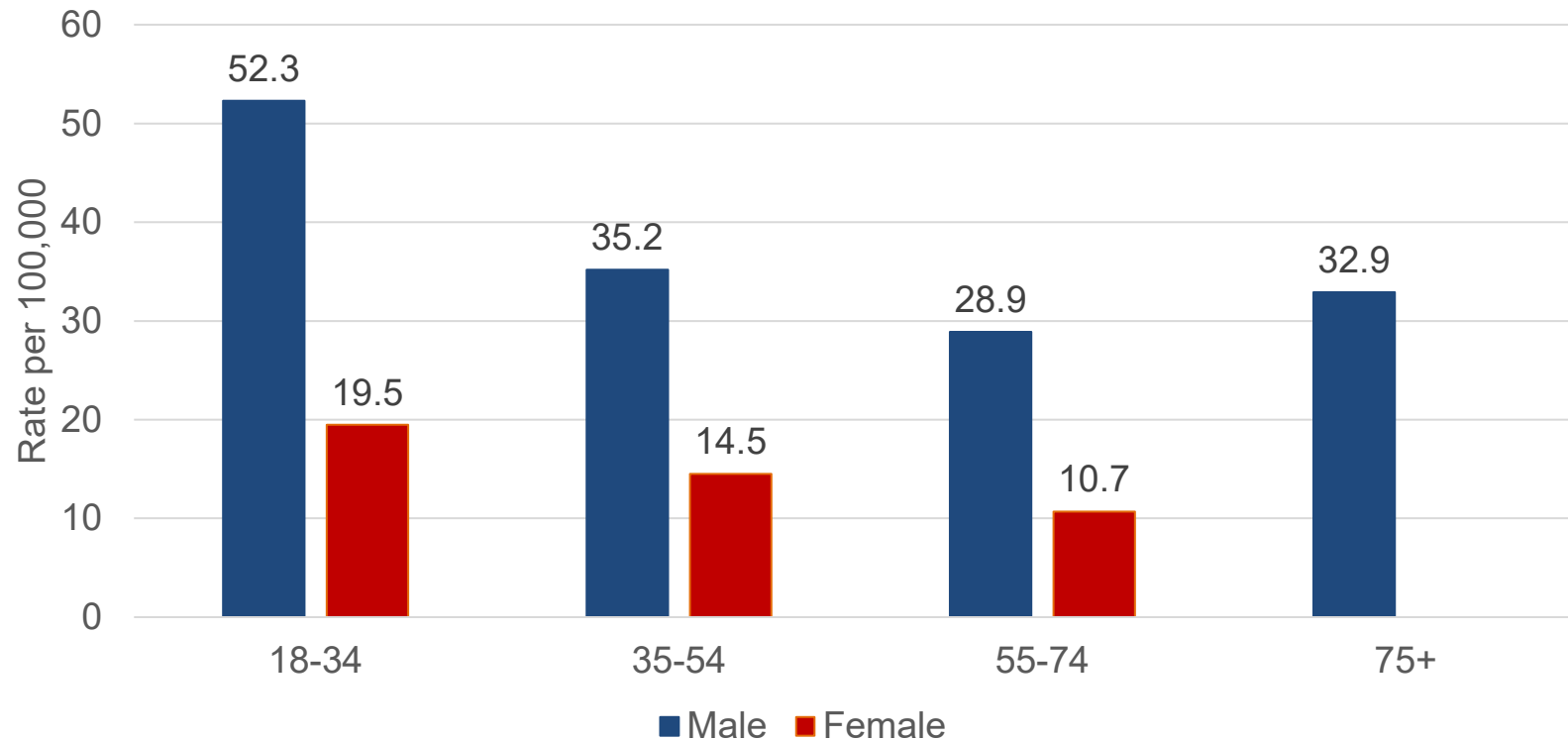
Veteran Suicide Risk and Prevention

Age-Adjusted Suicide Rates by Sex and Veteran Status, 2001-2020



- **2020 age-adjusted Veteran suicide rates were 2x greater for females and 1.4x greater for males as compared to non-Veteran adults**
- **From 2001-2020, Veteran suicide rates increased 61.5% for females and 50.0% for males**

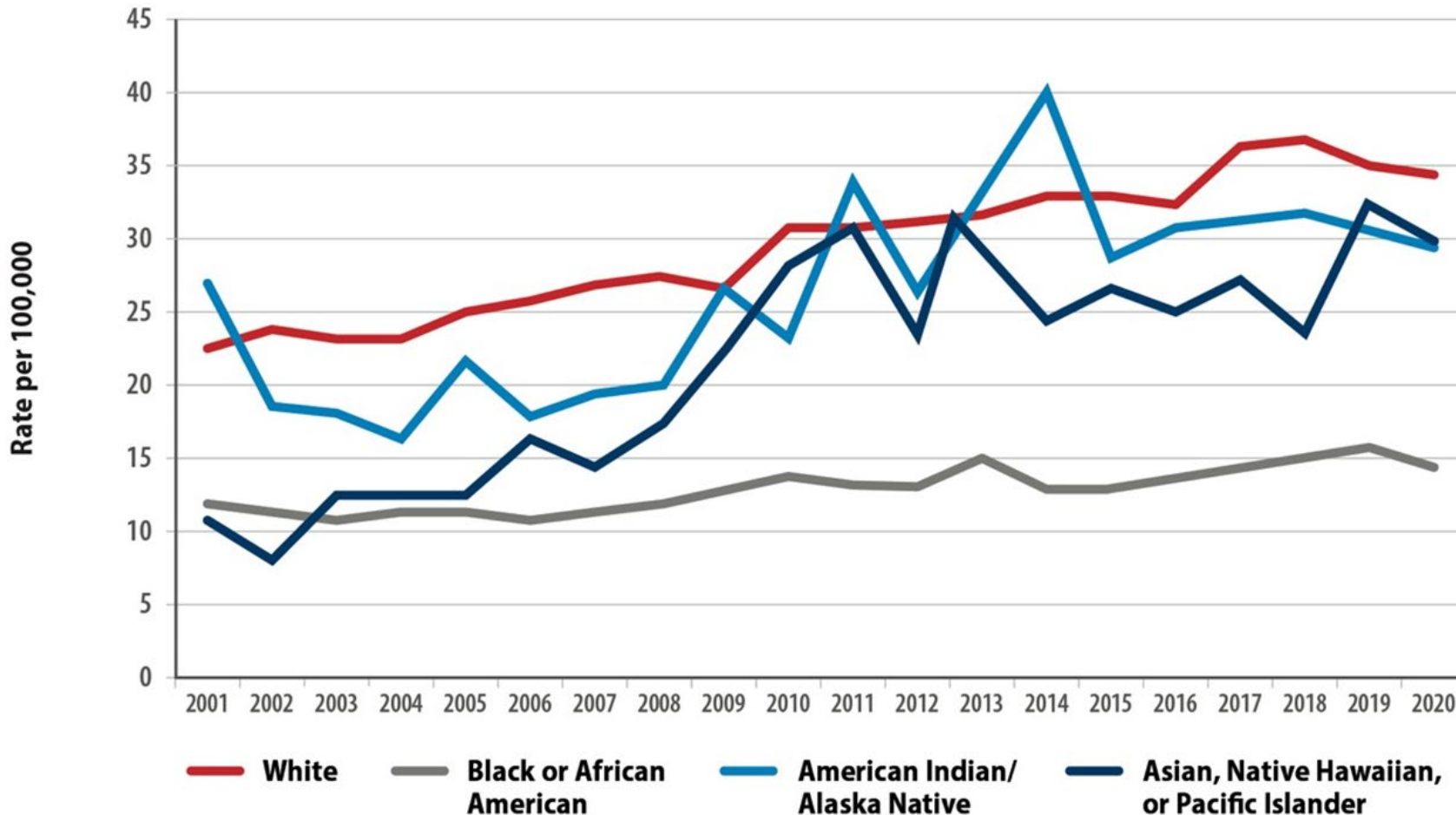
Veteran Suicide Rates by Age Group and Sex, 2020



- Among both females and males, suicide rates are highest for younger Veterans



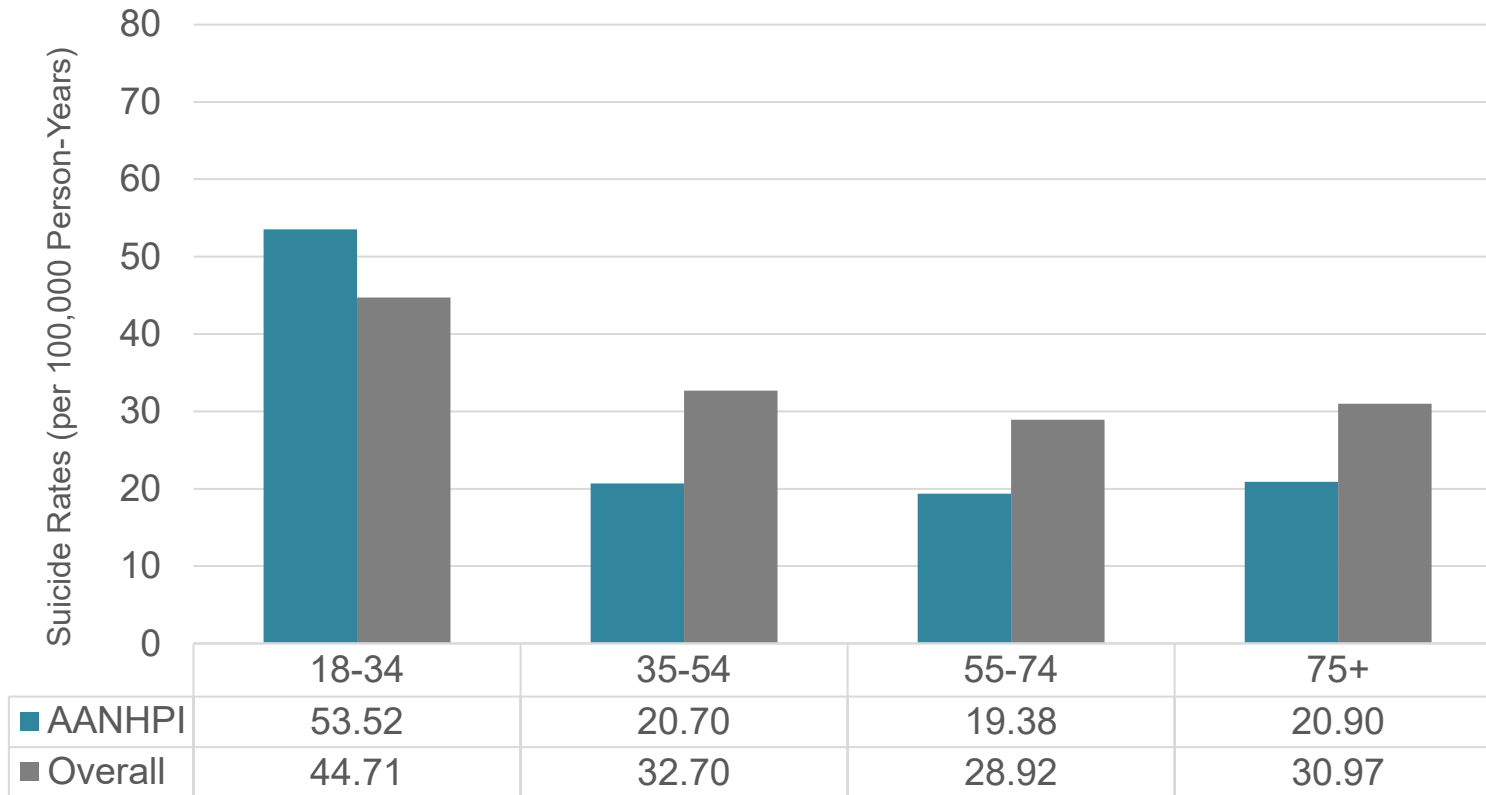
Unadjusted Suicide Rates 2001-2020, by Race



- The suicide rate among Asian American, Native Hawaiian and Pacific Islanders (AANHPI) Veterans in the U.S. increased **167.3%** from 2001 to 2020 (from 11.3 to 30.2 per 100,000 person-years).
- This magnitude of increase was not observed for any other racial/ethnic group of Veterans (increases of 11.2% to 55.4%).
- Additional efforts to understand racial and ethnic differences in Veteran suicide rates are warranted. Initiatives to guide culturally sensitive prevention efforts are also underway.

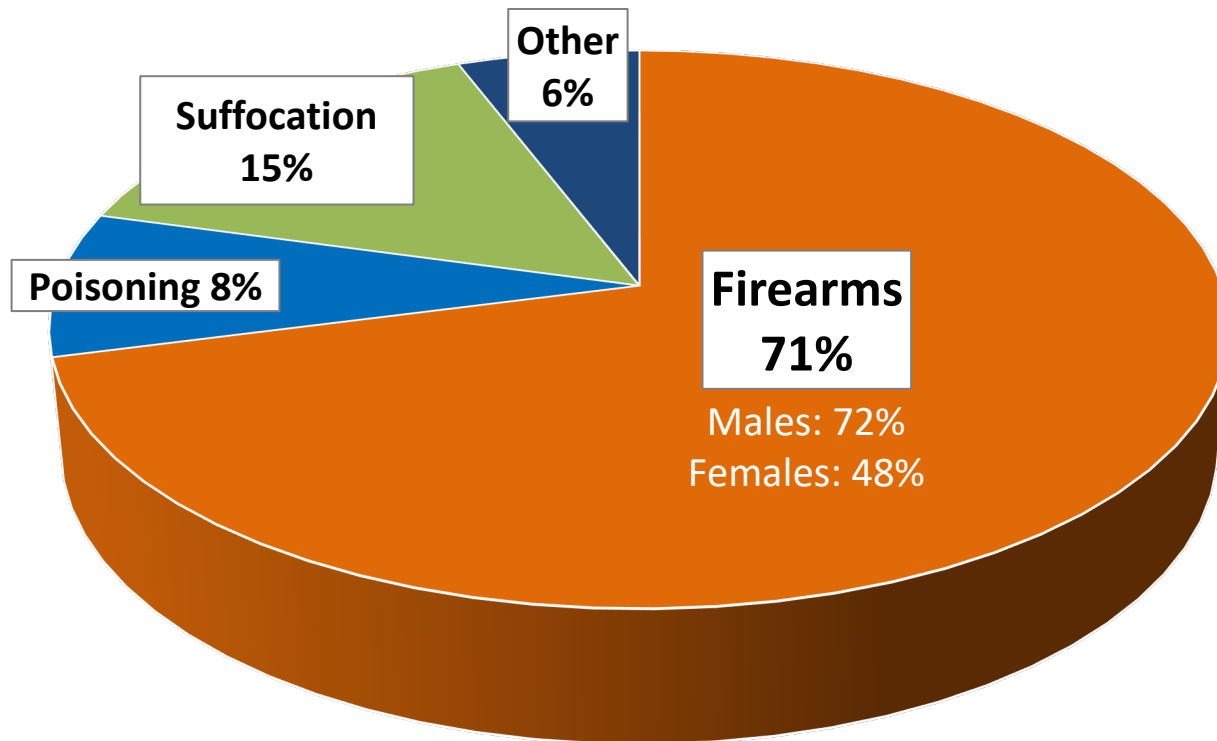


Suicide Among Asian American, Native Hawaiian, and Pacific Islander Veterans (2005-2019)



- Younger AANHPI Veterans have significantly higher suicide rates compared to similarly aged Veterans overall
- AANHPI Veterans were more likely to use suffocation as a suicide method than Veterans overall
- Age-adjusted suicide rate increased for AANHPI Veterans from 2005-2009 to 2015-2019
 - Males: increased by 33.9%
 - Females: increased by 58.2%

Suicide Methods among Veterans (2020)



Firearm injury among Veterans:

- Most common suicide method (71%) in 2020
 - More commonly used among Veterans than non-Veterans (50%)
- Female Veterans experienced a larger increase (11.2% from 2001-2020) in use of firearms as a method of suicide death, relative to male Veterans (4.8%) and female non-Veterans (-2.1%)

Non-Fatal Suicidal Self-Directed Violence (NF-SSDV)

- **Limited population-based NF-SSDV data:**
 - General Veteran population
 - Subsets of the Veteran population
 - Those not using VA healthcare
 - Women
- **NF-SSDV** (e.g., suicide attempt, suicidal ideation) **can impact health and well-being**
- **Suicide attempts are among the strongest predictors of suicide**
- **More timely information on NF-SSDV prevalence and trends can help to rapidly address suicide risk**



Study Details

National Sample

15,082 post-9/11 Veterans



36.7%

Women Veterans

4,638 non-Veterans



30.5%

Women non-Veterans

Dataset & Design

Cross-sectional

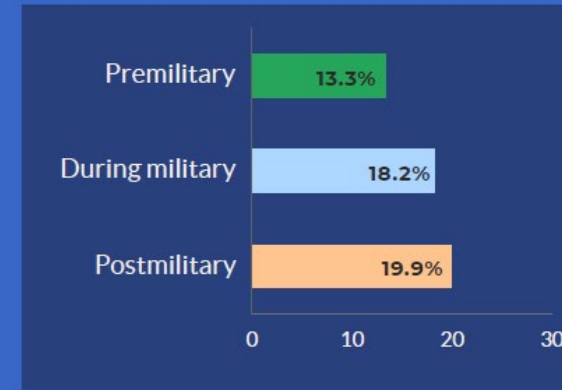


Comparative Health Assessment Interview (CHAI) Dataset

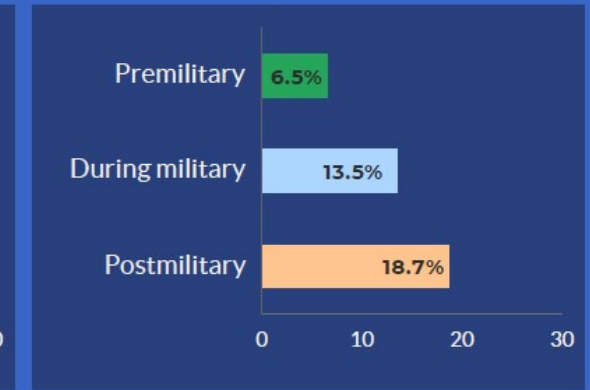


SI Prevalence Relative to Military Service (%)

Veteran Women

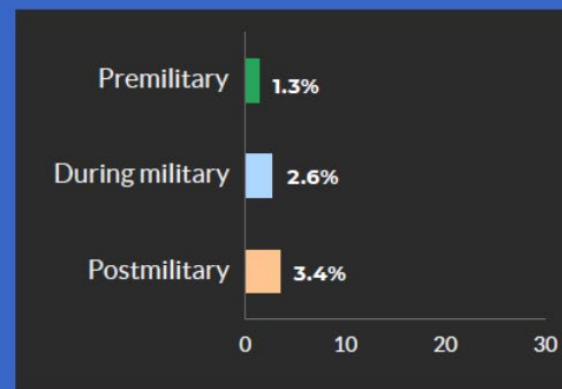


Veteran Men

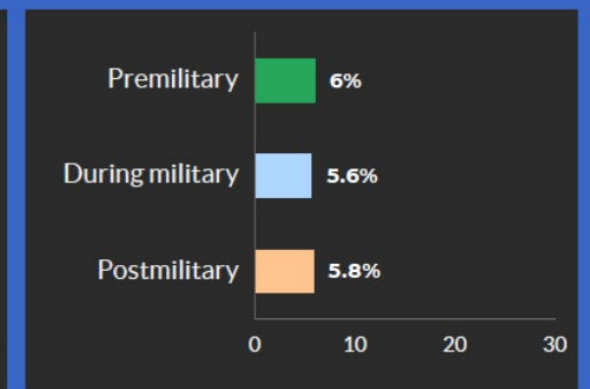


SA Prevalence Relative to Military Service (%)

Veteran Women



Veteran Men



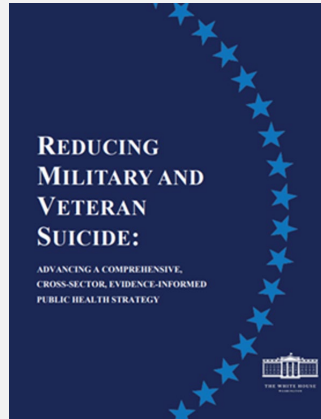
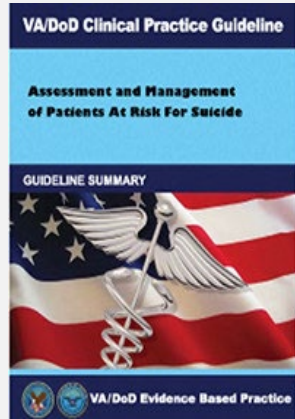
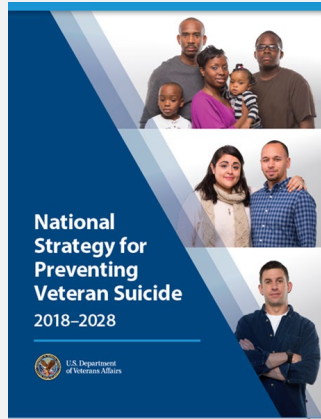
SA: Suicide attempt; SI: Suicide ideation



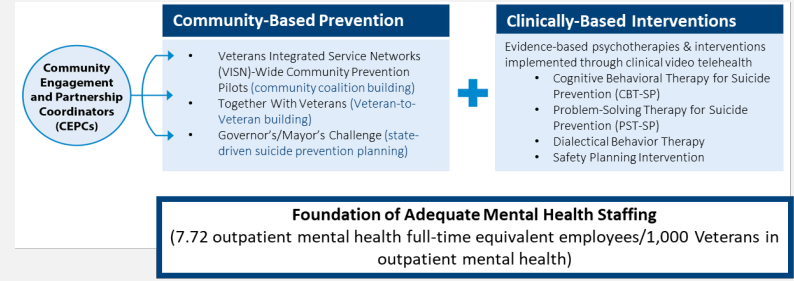
VA's Public Health Approach to Suicide Prevention

VA's Top Clinical Priority: Suicide Prevention

Data from the *National Veteran Suicide Prevention Annual Report* informs VA's strategic efforts, which are guided by the National Strategy for Preventing Veteran Suicide (2018), VA/DoD Clinical Practice Guideline (2019), and White House Strategy on Reducing Military and Veteran Suicide (2021).



SP 2.0



SP Now

- Plank 1: Lethal Means Safety**
- Plank 2: Suicide Prevention in Medical Populations**
- Plank 3: Outreach and Understanding of Prior VHA Users**
- Plank 4: Suicide Prevention Program Enhancement**
- Plank 5: Paid Media**

Veterans Crisis Line





Public Health Approach to Preventing Veteran Suicide



Step 1: Define the problem. This involves collecting data to determine the “who,” “what,” “where,” “when,” and “how” of suicide deaths.



**and non-fatal suicidal
self-directed violence**



Step 2: Identify risk and protective factors. Scientific research methods are used to explore the factors that increase risk for suicide, as well as the protective factors that serve as buffers against suicide risk.



Step 3: Develop and test prevention strategies. Suicide prevention strategies are developed and tested to see if they succeed in preventing suicide and/or suicidal behaviors.



Step 4: Assure widespread adoption. Strategies shown to be successful in Step 3 are broadly disseminated and implemented by a variety of stakeholders who play a role in preventing Veteran suicide.

ASCEND

For Veteran Suicide Prevention



Assessing Social and Community Environments with National Data (ASCEND)

Aims

1. **Expand NF-SSDV surveillance breadth and depth by examining prevalence:**
 - Overall Veteran population
 - Traditionally understudied subpopulations

2. **Obtain actionable information on risk and protective factors for suicidal ideation and attempt:**
 - Across the *social-ecological model* for suicide risk and prevention

Results can be used to:

- Advance upstream suicide prevention
- Identify groups at heightened risk
- Inform policy and service development, program evaluation, and quality improvement
- Ultimately, **save lives**

Approach

- To understand NF-SSDV beyond suicidal ideation and attempts
 - Preparatory behaviors
 - Interrupted attempts
- Within the context of risk & protective factors at community-level

**Comprehensive
& In-Depth**

- To understand timing & periods of risk and their impact on Veteran NF-SDV
 - Relative to military service
 - Prior, during, following
 - Relative to national events (e.g., COVID-19 pandemic)

**Life course
perspective**

- Surveys a large, nationally representative Veteran cohort
- Aligns with VA's focus on diversity, equity and inclusion
 - Oversamples women & racial/ethnic minorities; Veterans residing in U.S. Pacific Islands

**Representative
& Inclusive**

- Aligns with VA needs and priorities
 - Adaptable constructs, survey modules and survey administration
- Understand impact of VA initiatives (e.g., Veterans Crisis Line (VCL))

Adaptable

How ASCEND Addresses the *VA National Strategy for Preventing Veteran Suicide (Step 1)*

“Defining the Problem”:
NF-SSDV
Prevalence

Who Gender, race/ethnicity, time since separation

What Various NF-SSDV types (e.g., preparatory behaviors, interrupted attempts)

Where Region (including Pacific Island Territories), rurality

When Periods of risk relative to military service and national events (e.g., COVID-19)

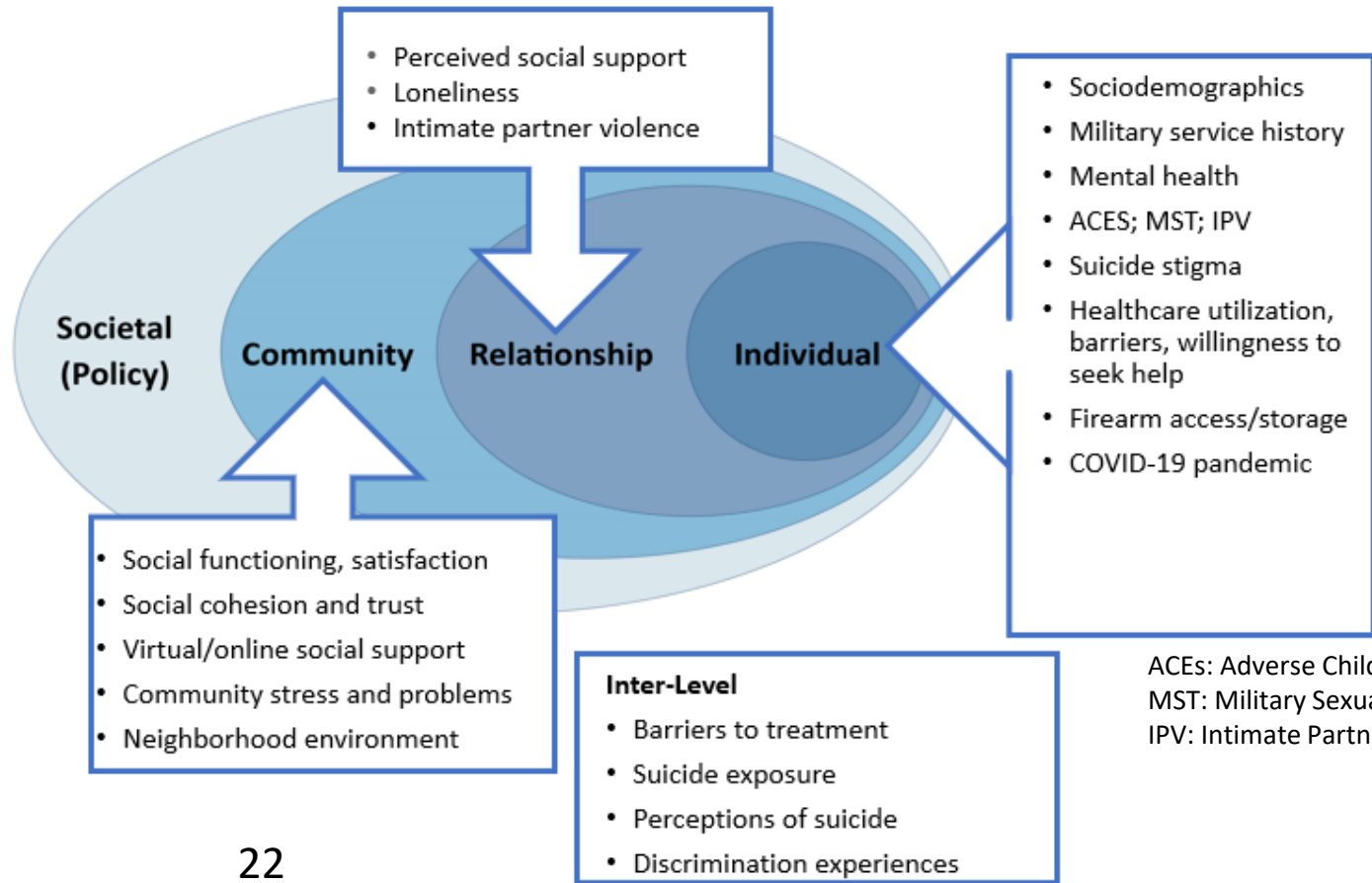
How Suicide methods considered and used



How ASCEND Addresses the VA National Strategy for Preventing Veteran Suicide (Step 2)

Guided by the Social-Ecological Model for Suicide Prevention

Identify Risk and Protective Factors

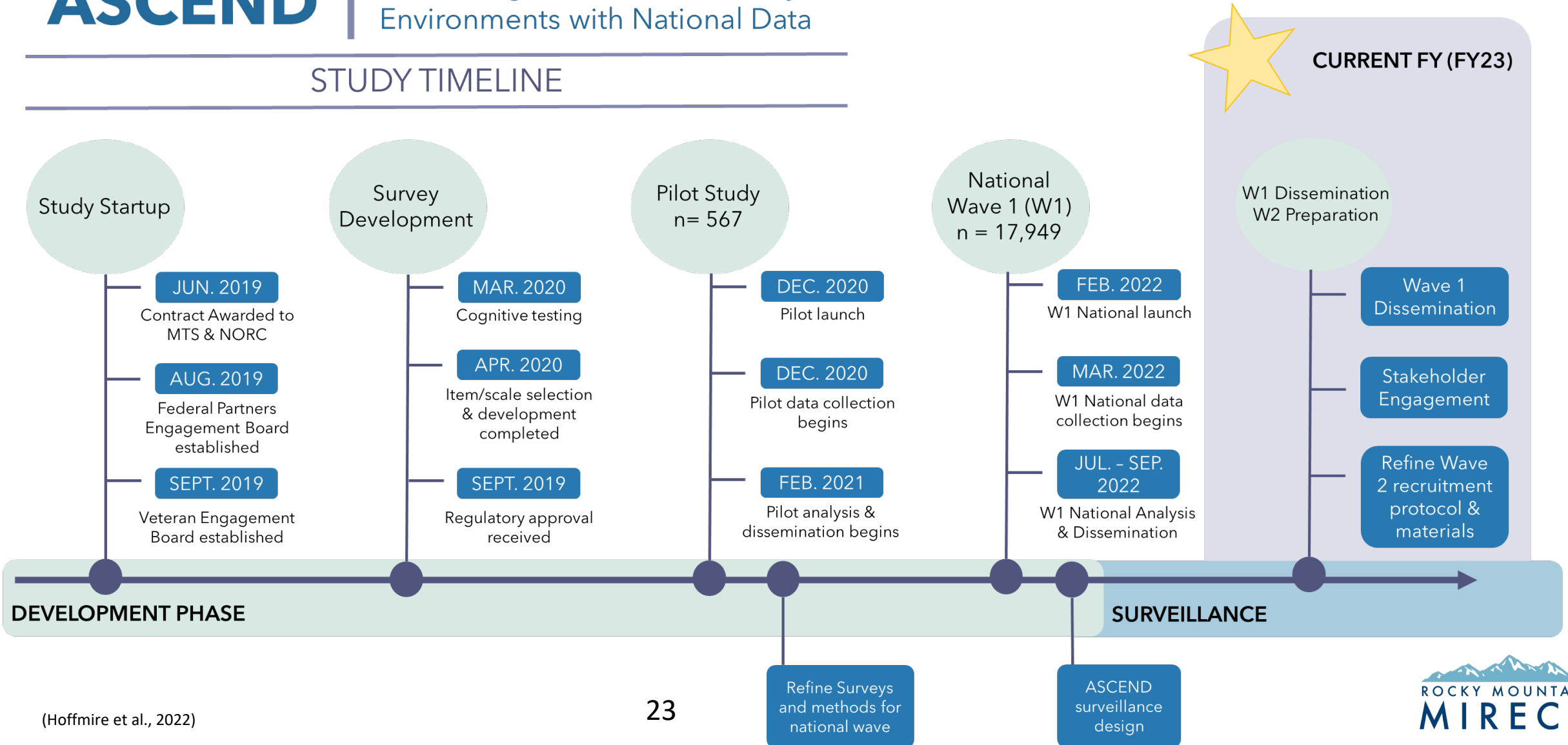


ACEs: Adverse Childhood Experiences;
MST: Military Sexual Trauma;
IPV: Intimate Partner Violence

ASCEND

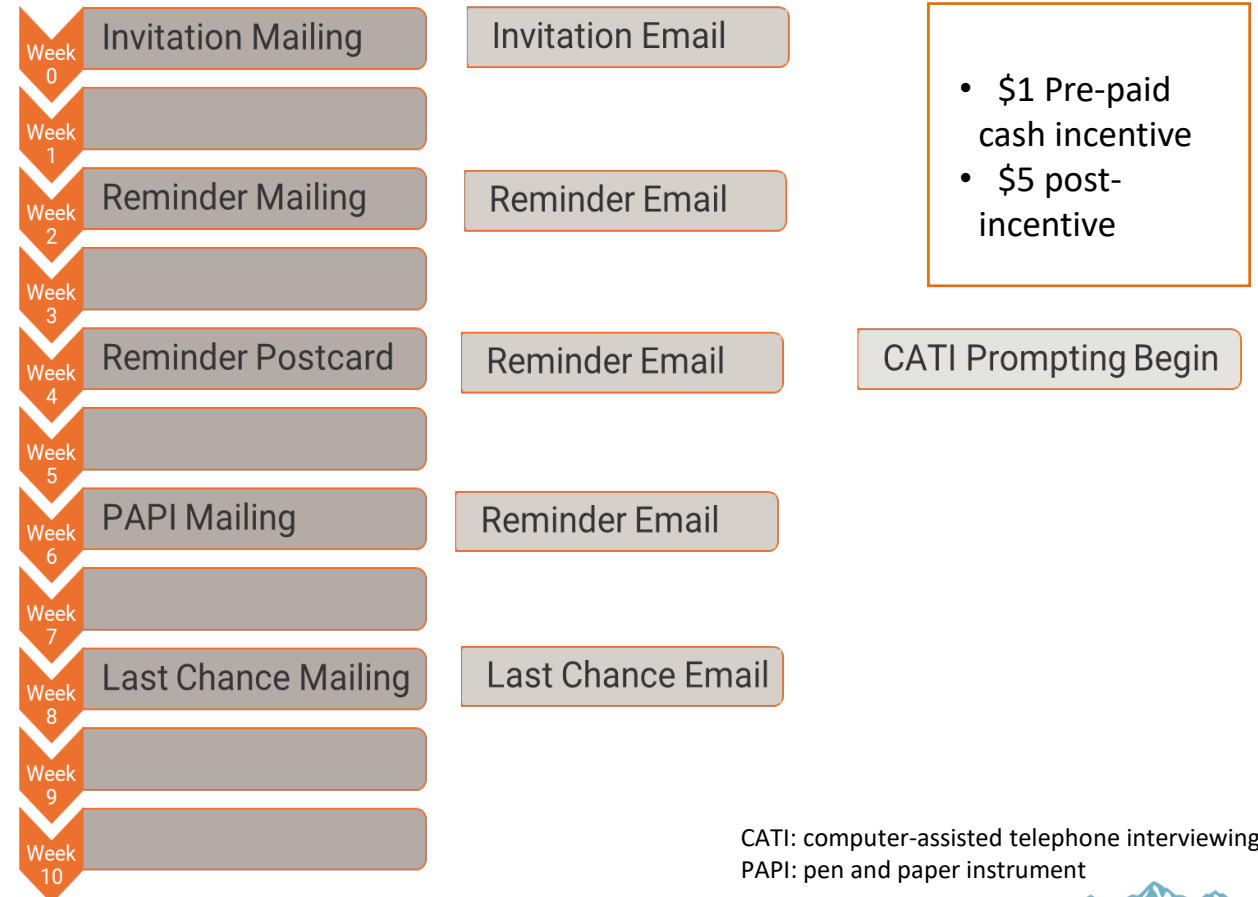
Assessing Social & Community Environments with National Data

STUDY TIMELINE



Sampling and Recruitment

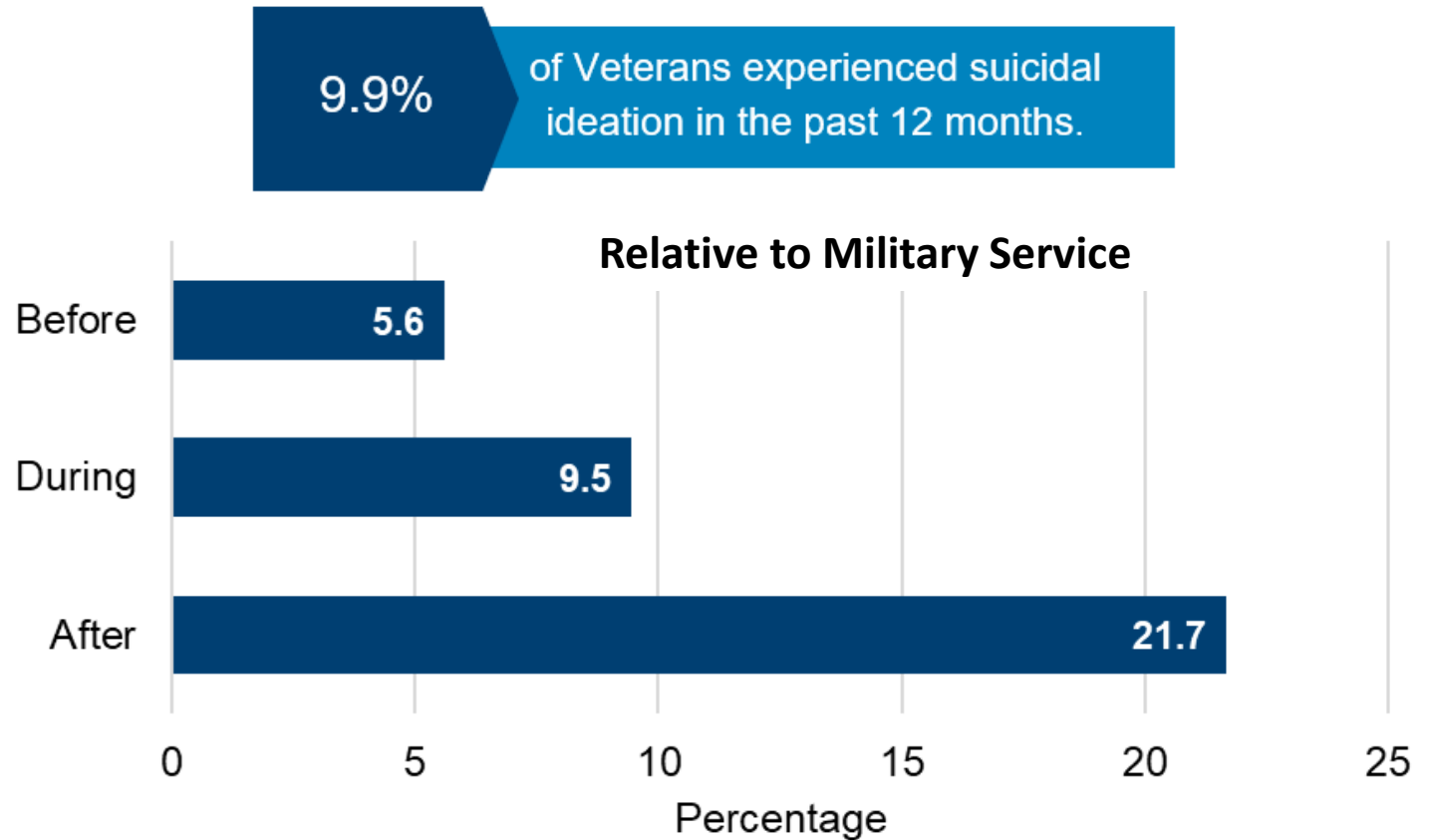
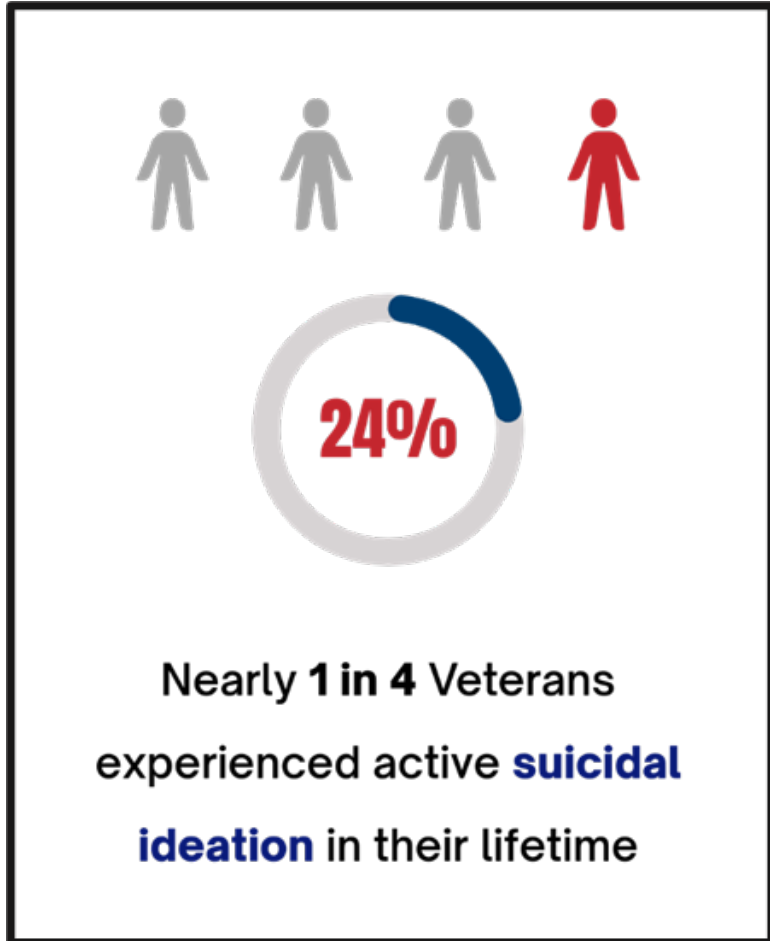
- **Frame: All living Veterans (2022)**
 - Using United States Veterans (USVETS) and Violent and Disruptive Incident Reporting (VADIR) data (N=16,738,616)
 - All 50 states, Washington DC, Puerto Rico (Main Wave 1 sample)
 - Plus, Pacific Islands (PI) Territories Pilot
- **Stratified random sampling**
 - Oversampled within women, recently separated, and non-White strata
- **Sample: N=17,949**
 - N = 553 from PI Territories Pilot
 - American Association for Public Opinion Research (AAPOR) Response Rate (main sample): 17.9%
 - Web: 74%, paper: 25%, phone: <1%



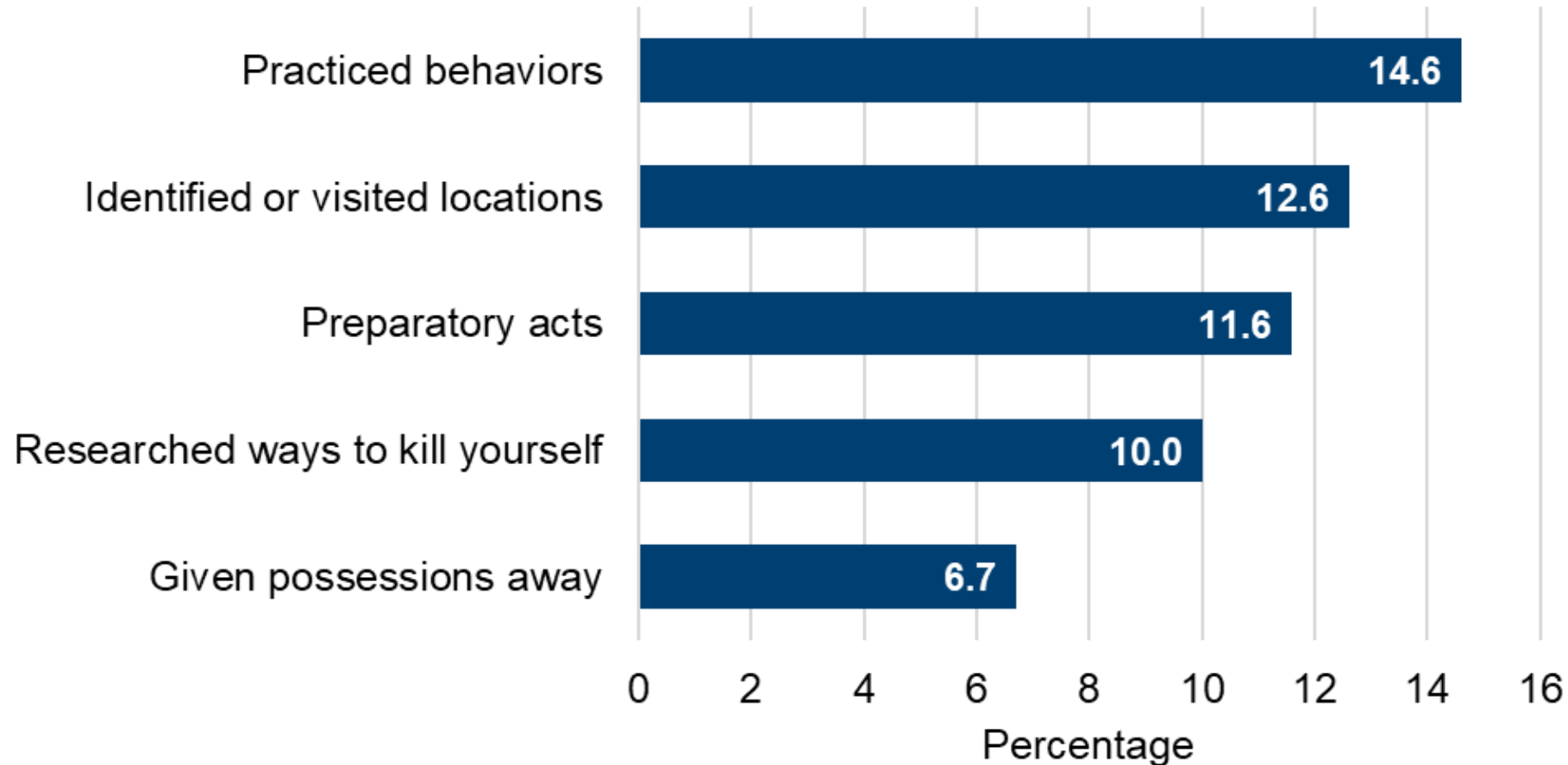
CATI: computer-assisted telephone interviewing
PAPI: pen and paper instrument

Wave 1 Findings

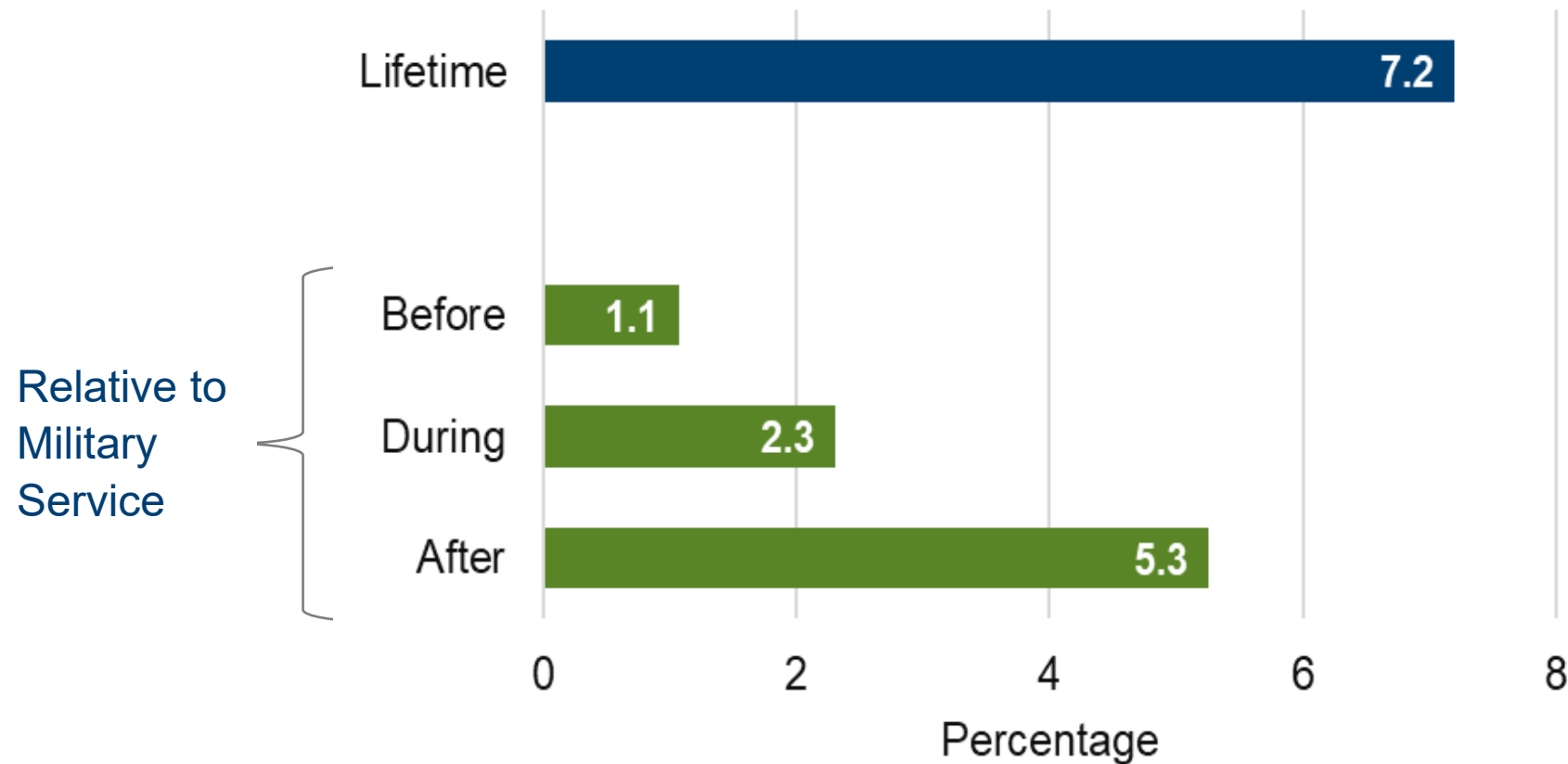
Prevalence of Suicidal Ideation



Preparatory Behaviors Among Veterans with Lifetime Suicidal Ideation



Prevalence of Interrupted Suicide Attempts



“Started to attempt suicide, but then stopped yourself or were stopped by something or someone else...”

Prevalence of Suicide Attempts

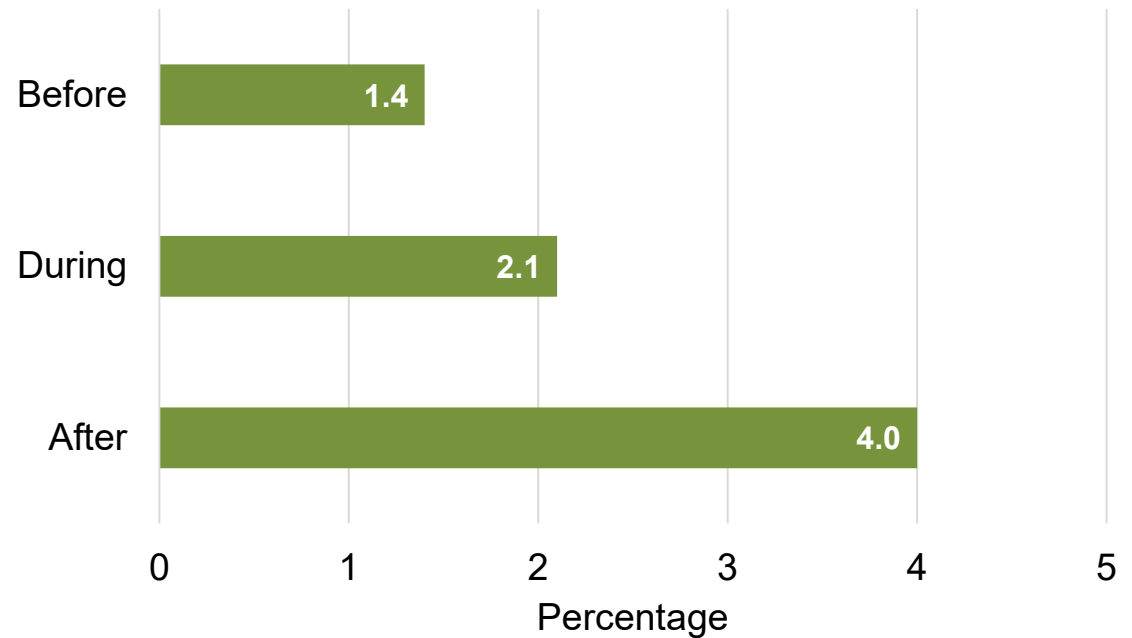
6%

of Veterans have
experienced a suicide
attempt in their lifetime

<1%

of Veterans have
experienced a suicide
attempt in the past year

Relative to Military Service



ASCEND can provide knowledge needed to inform gender-sensitive suicide prevention strategies

Accelerating Research on Suicide Risk and Prevention in Women Veterans Through Research-Operations Partnerships

Hoffmire, Claire A. PhD^{*,†}; Denneson, Lauren M. PhD^{‡,§}; Monteith, Lindsey L. PhD^{*,||}; Dichter, Melissa E. PhD^{¶,#}; Gradus, Jaimie L. DMSc, DSc^{**,+††}; Cappelletti, Maurand M. PhD^{*}; Brenner, Lisa A. PhD^{*,†,||,‡‡}; Yano, Elizabeth M. PhD, MSPH^{§§,|||}

Author Information 

Medical Care 59():p S11-S16, February 2021. | DOI: 10.1097/MLR.0000000000001432

FORUM

translating research into quality healthcare for Veterans

Suicide Prevention

Spring 2018

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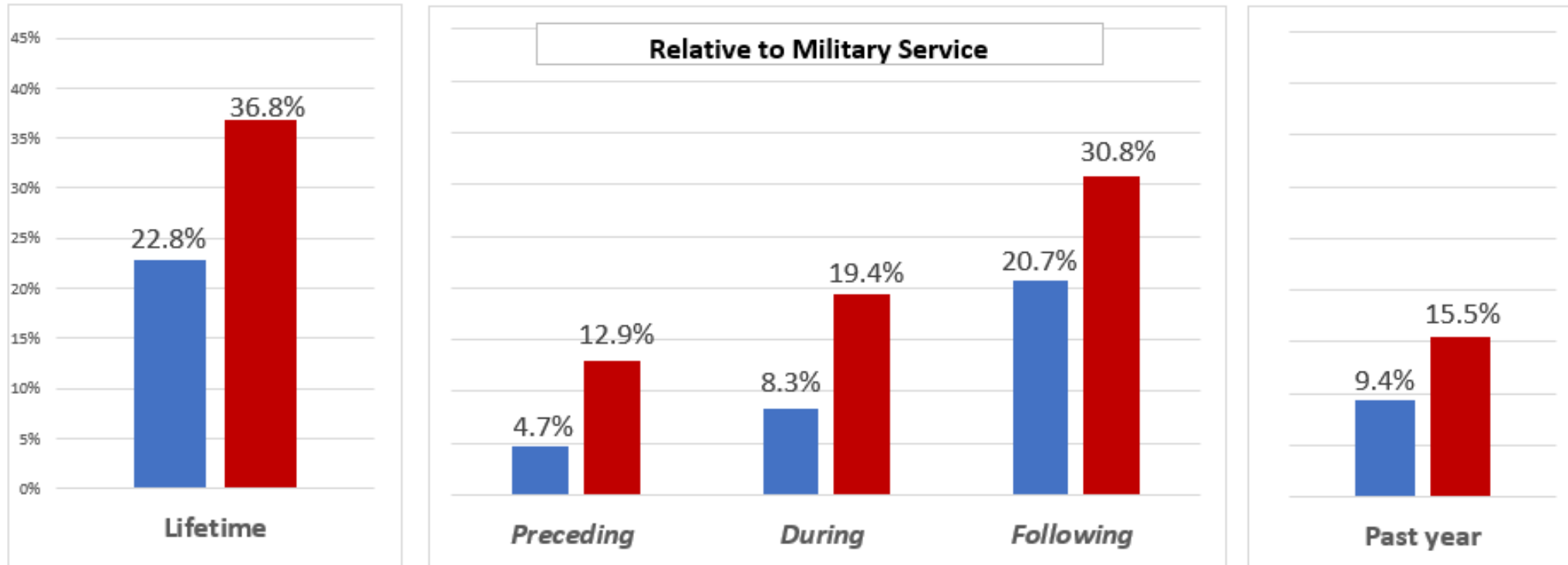
Research Highlight

Concerning Trends in Suicide Among Women Veterans Point to Need for More Research on Tailored Interventions

Claire A. Hoffmire, PhD, Rocky Mountain Mental Illness Research, Education and Clinical Center (MIRECC) for Suicide Prevention, Denver, Colorado, and Lauren M. Denneson, PhD, Center to Improve Veteran Involvement in Care, VA Portland Health Care System, Portland, Oregon

“The epidemiologic trends in rates, use of firearms, and risk over time observed among women Veterans suggest that we must incorporate gender into suicide prevention work to rapidly increase our knowledge of suicide risk and resilience across the life course, as well as strategies to tailor firearm safety efforts, for women Veterans.”

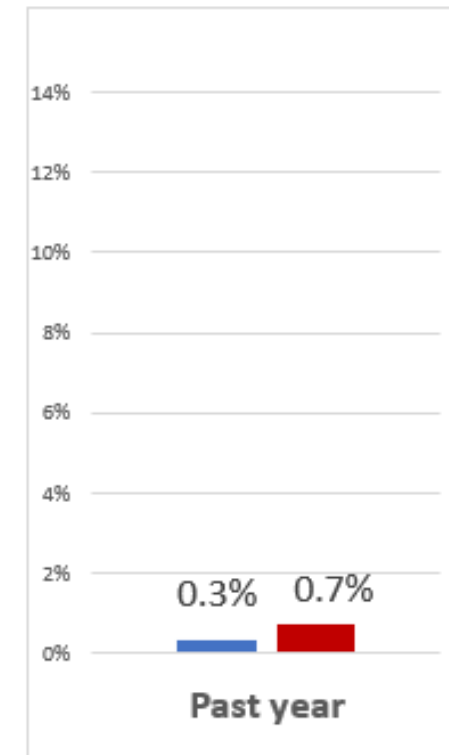
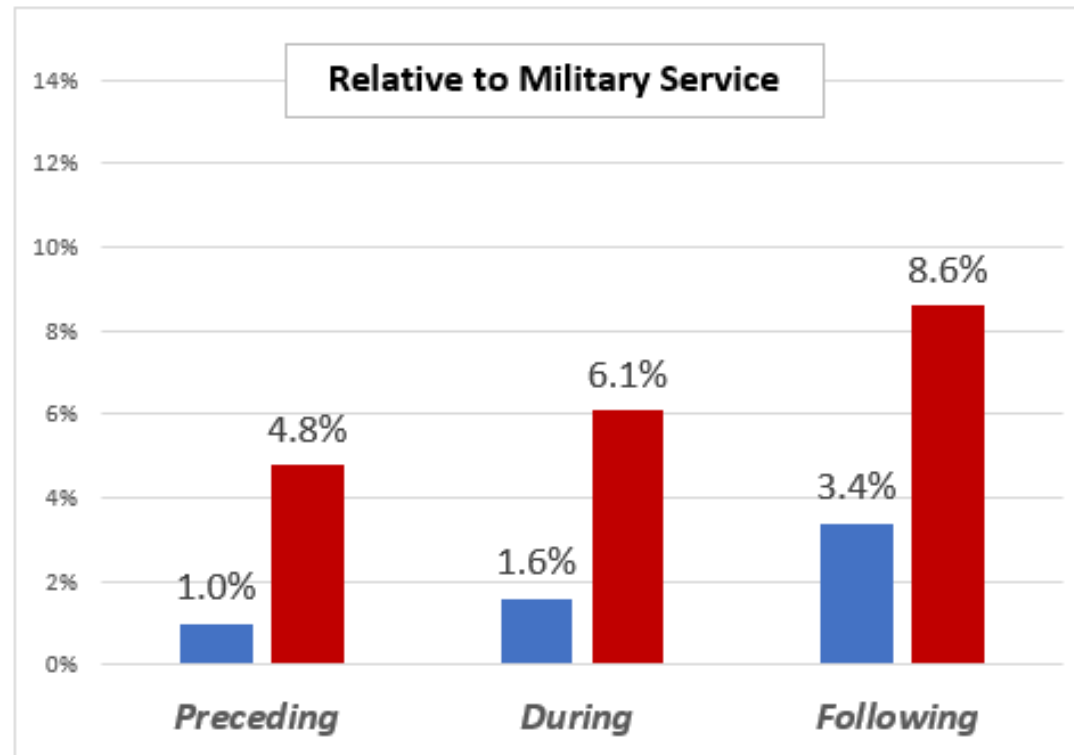
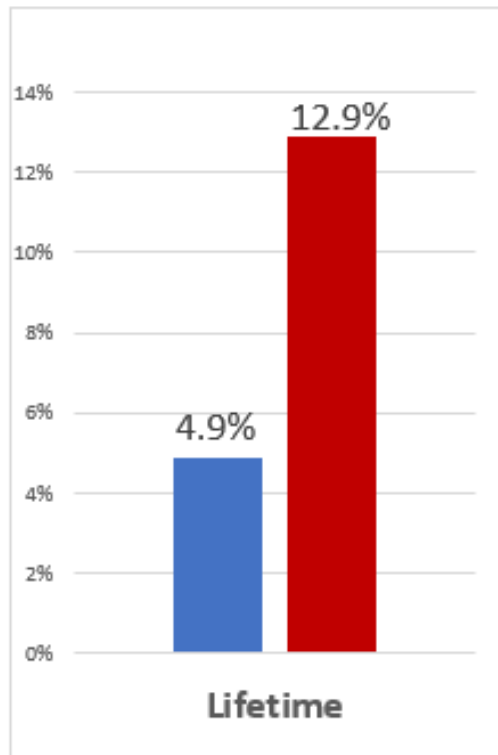
Gender Differences in Suicidal Ideation Prevalence



■ Men
■ Women

Women had a higher prevalence of suicidal ideation, compared to men, across all time points examined

Gender Differences in Suicide Attempt Prevalence

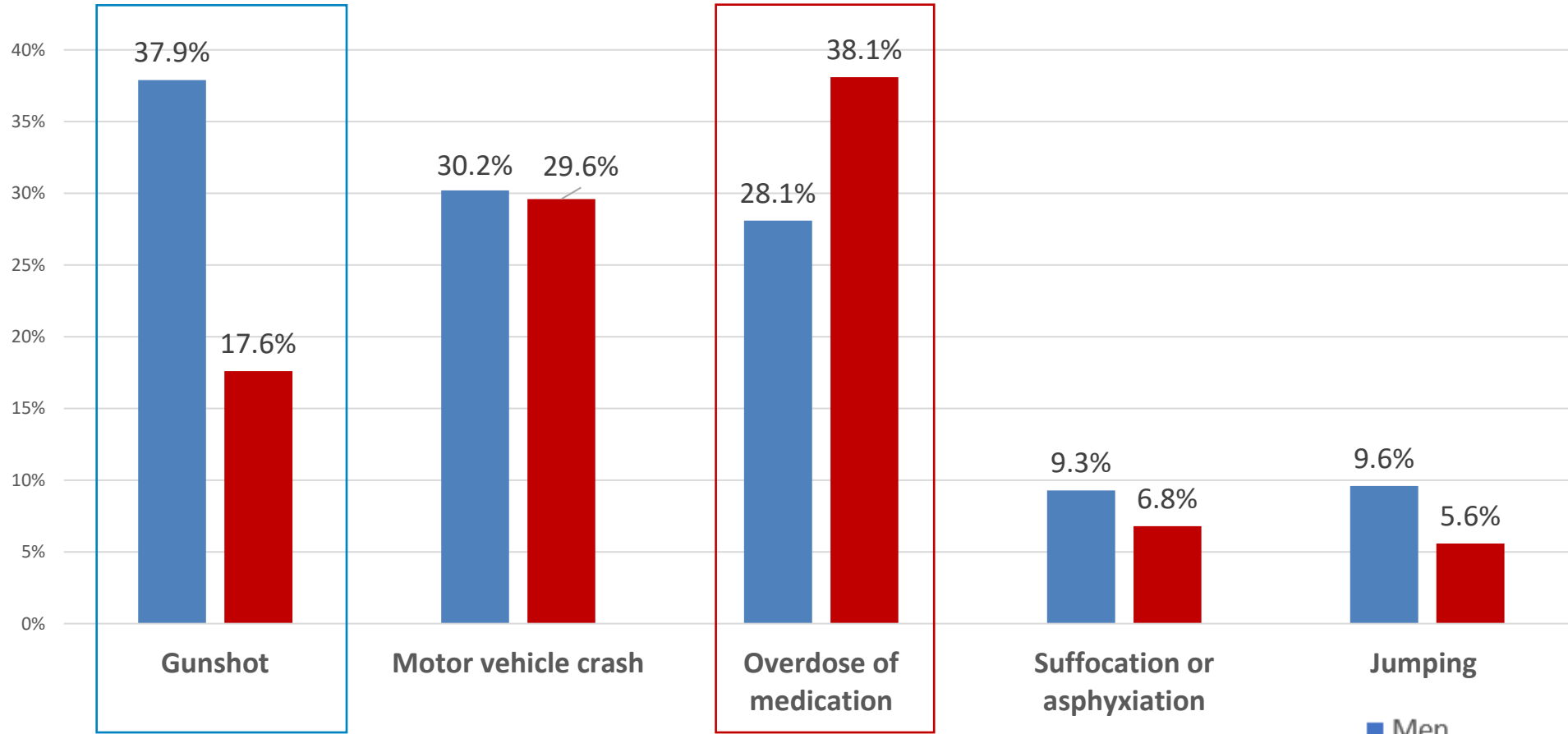


- Men
- Women

Women also had a higher prevalence of suicide attempt, compared to men, across all time points examined



Gender Differences in Suicide Methods Considered during Past-Year Suicidal Ideation

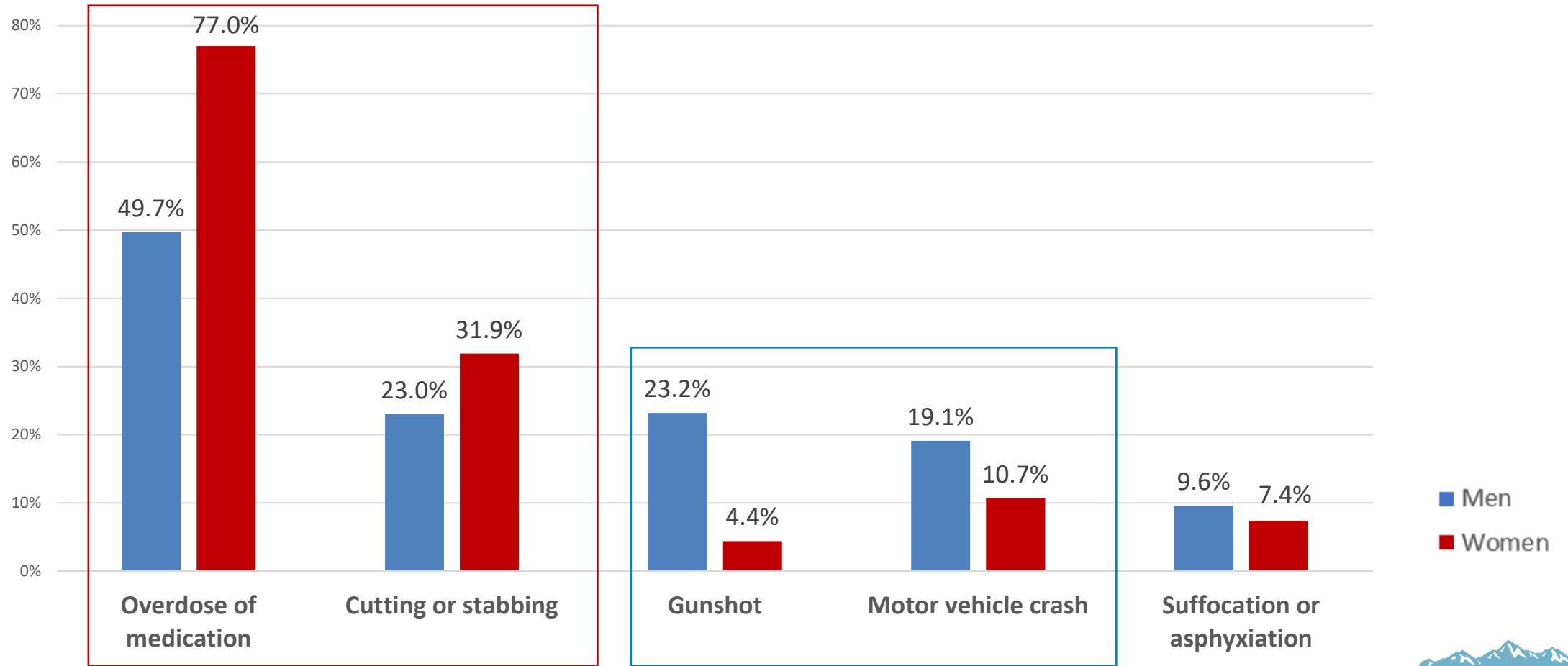


More prevalent among men

More prevalent among women



Gender Differences in Suicide Methods Used during Lifetime Suicide Attempt(s)

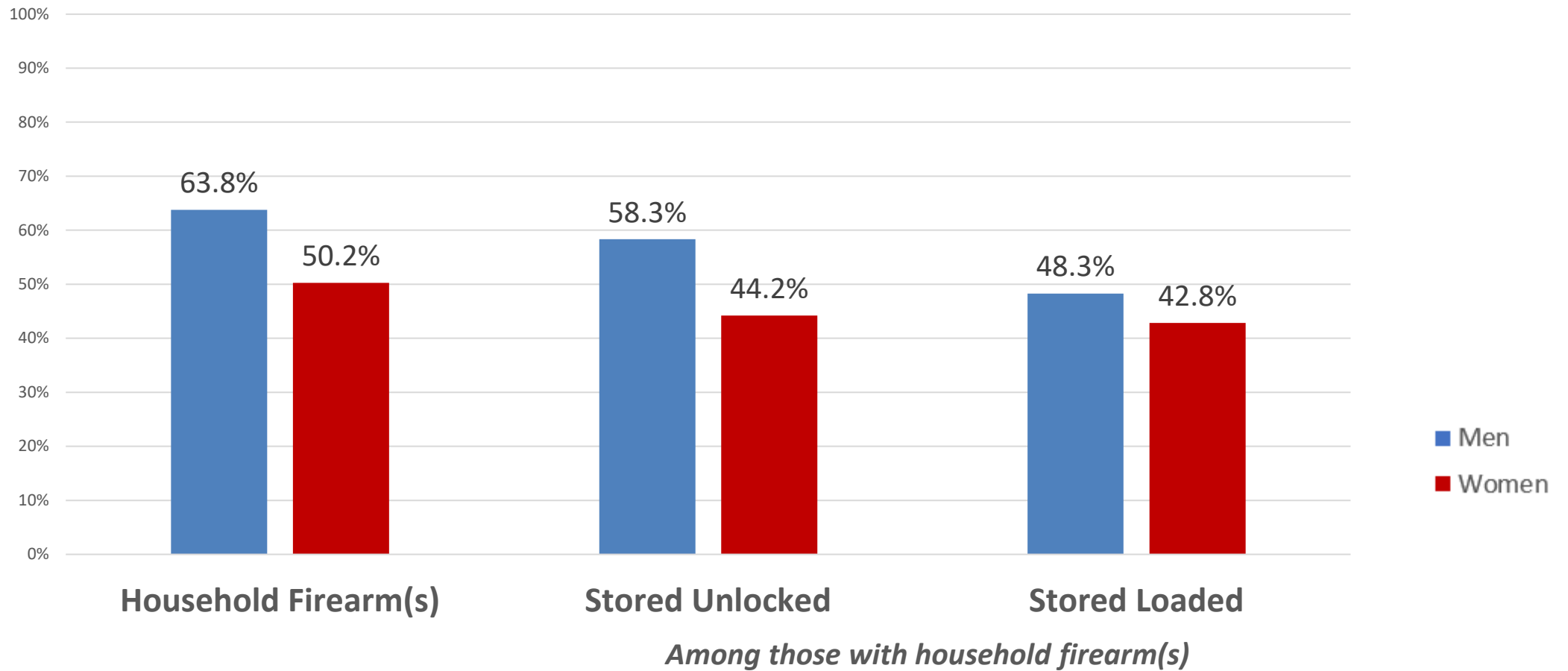


More prevalent among women 34

More prevalent among men

(Hoffmire et al., 2022)

Firearm Access and Storage

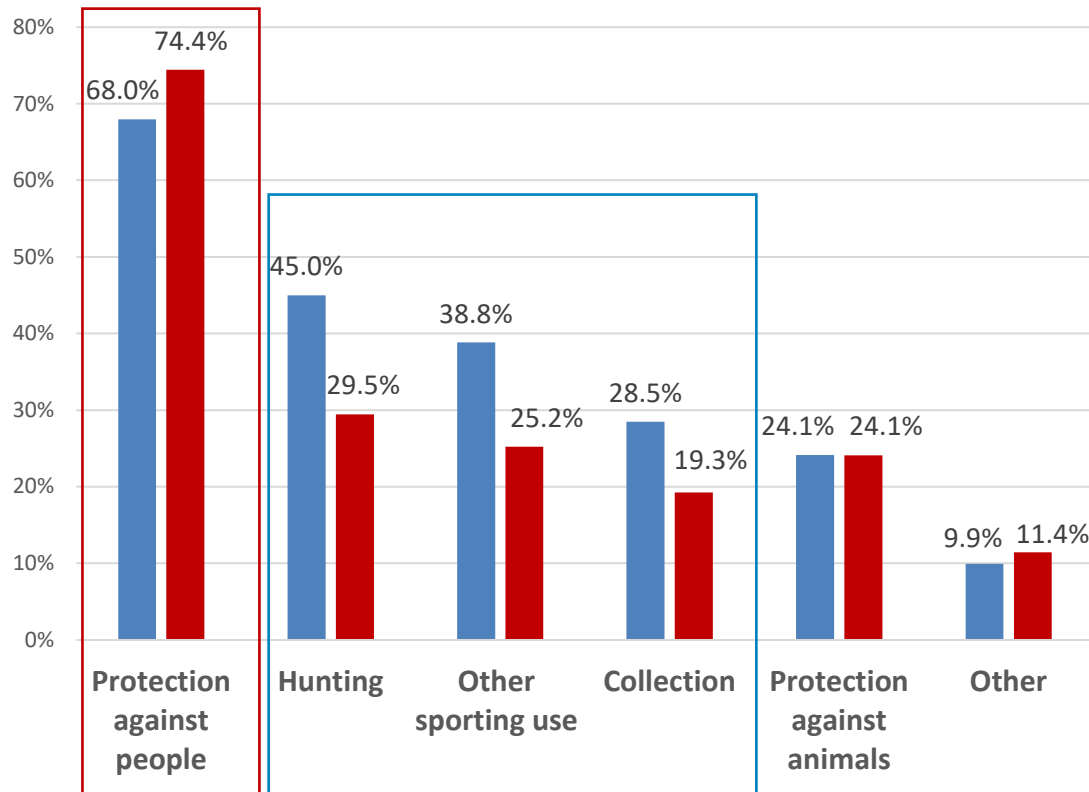


Women Veterans had a lower prevalence of household firearm access and storing firearms unlocked and loaded.



Reasons for Having and Not Having Household Firearms

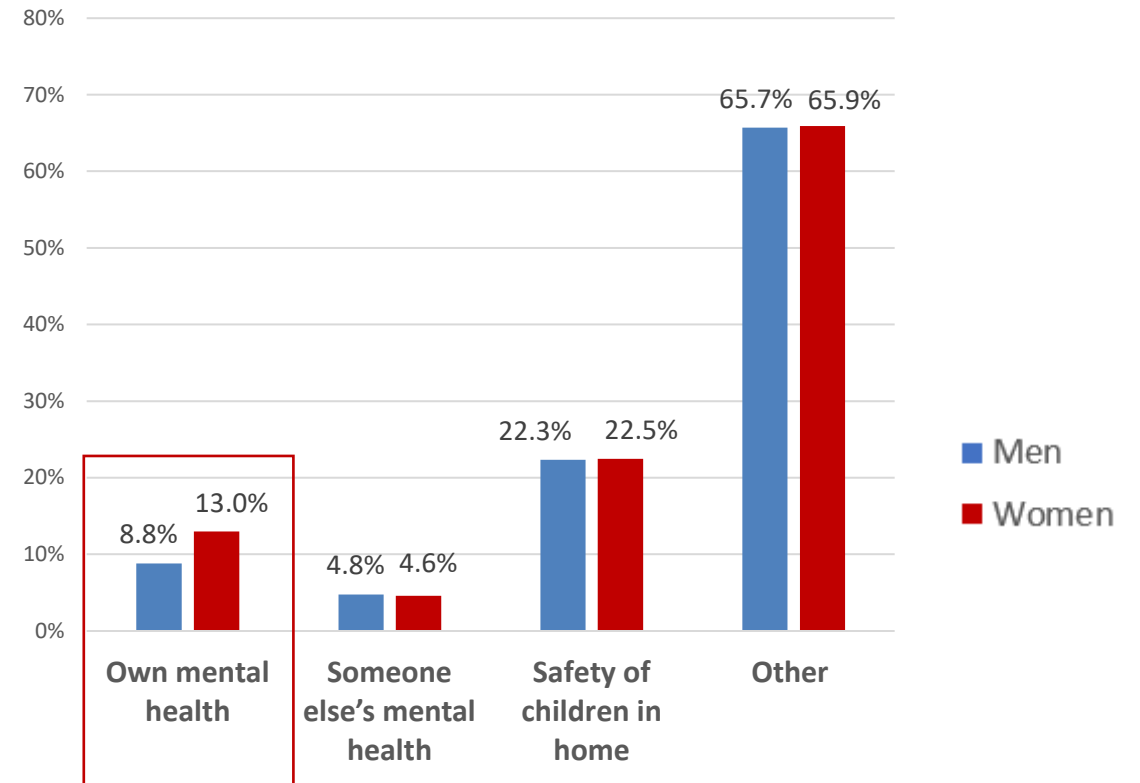
Reasons for Having



Endorsed more by women

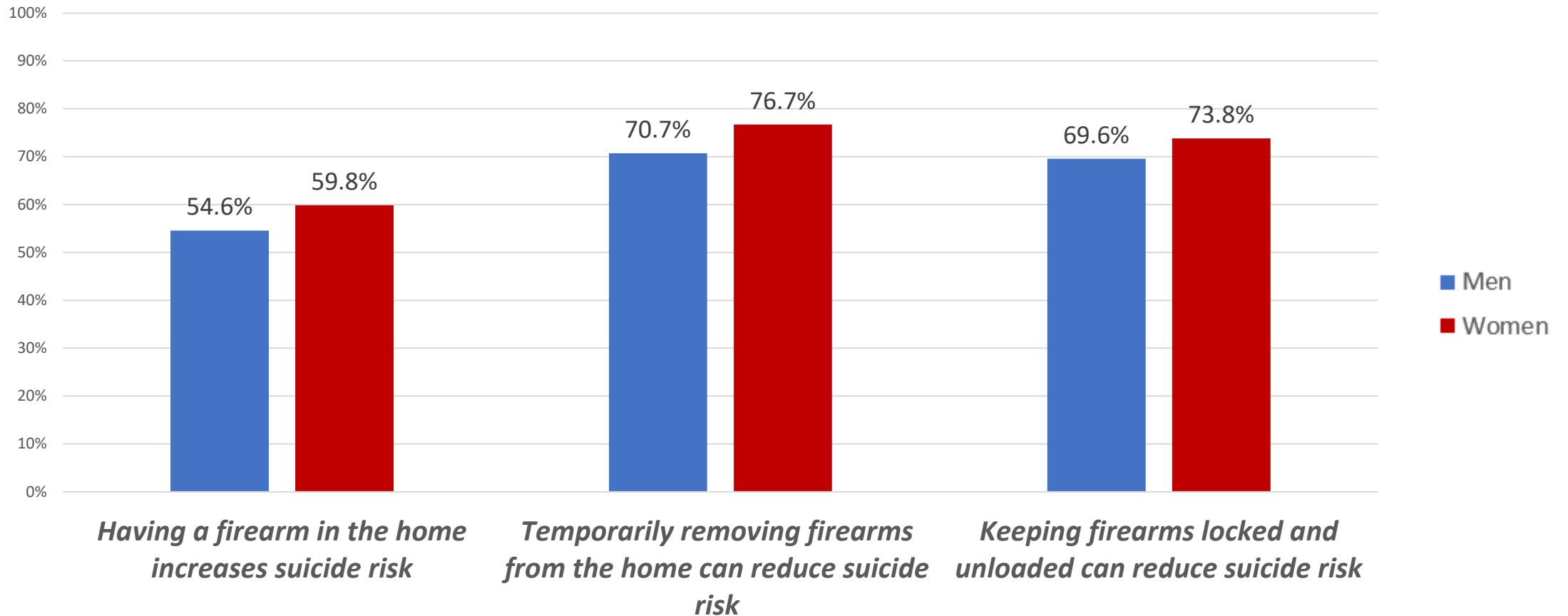
Endorsed more by men

Reasons for Not Having



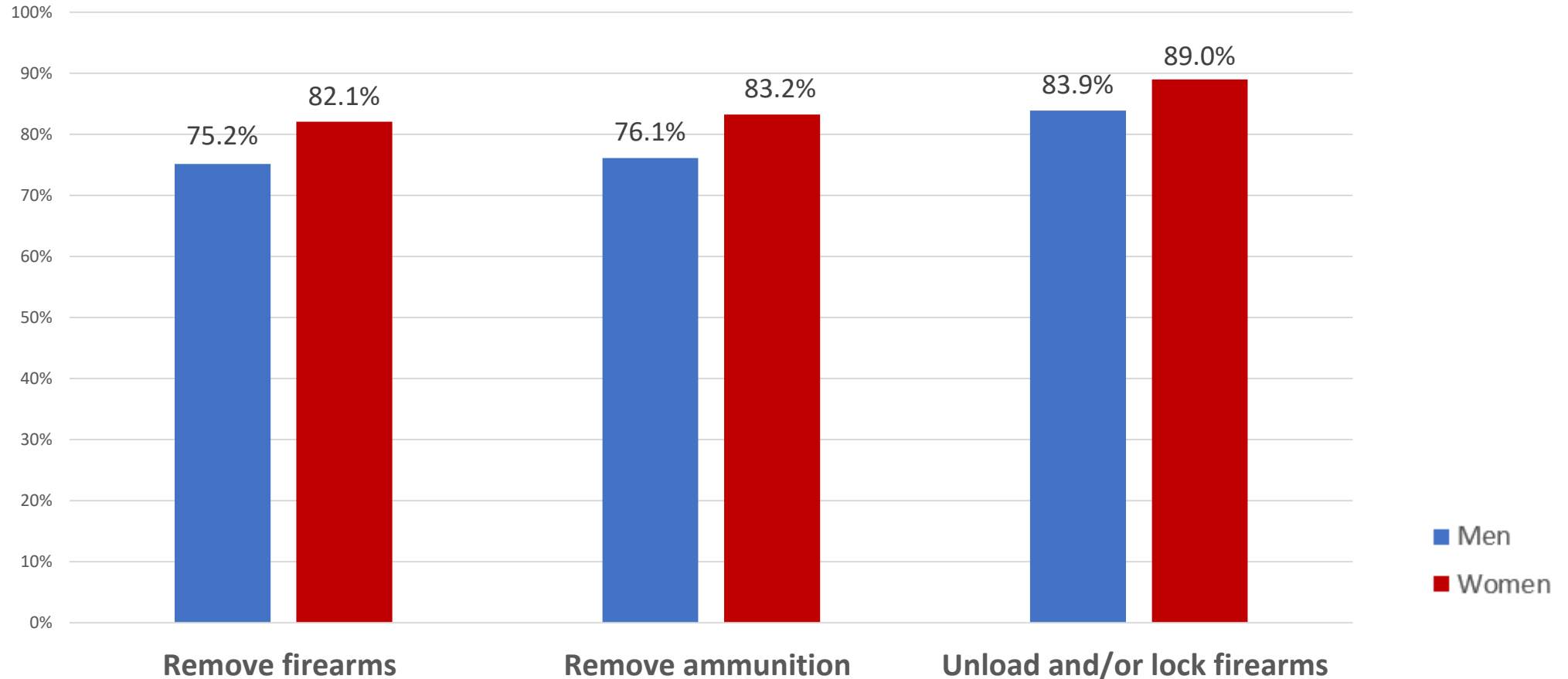
Endorsed more by women

Firearm Beliefs



Women Veterans had a higher prevalence of agreement with statements regarding firearms and suicide risk.

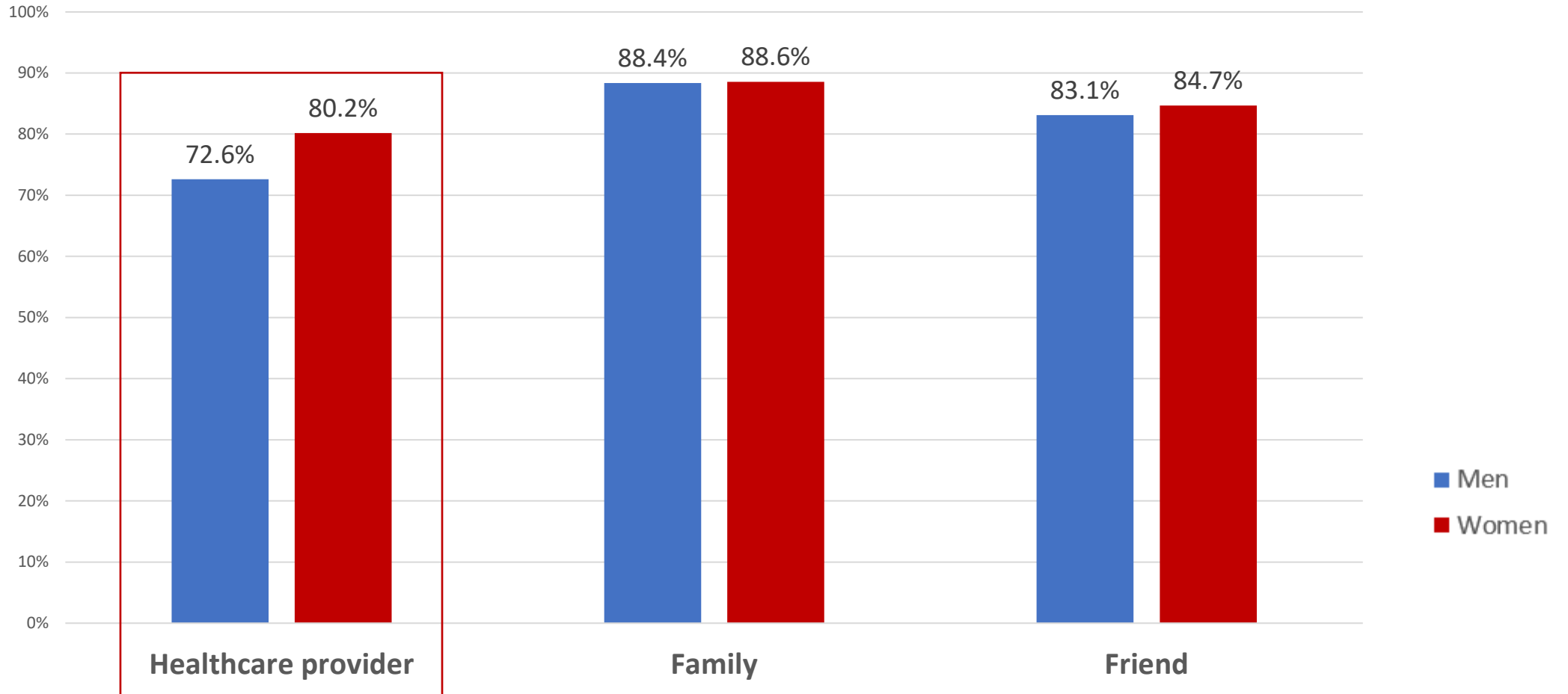
Willingness to Engage in Firearm Behaviors if Experiencing Suicidal Thoughts



Women were more likely to endorse willingness to engage in various firearm behaviors if experiencing suicidal thoughts



Willingness to have Firearm Discussions



Women were more likely to endorse willingness to discuss firearm access with healthcare providers.

Analyses to evaluate NF-SSDV differences and risk factors among other historically underserved Veteran populations are ongoing

Following military service:
Suicide attempts were more
frequently reported by **younger**
Veterans (18-49) than older vets (50+)

16.9% 18 to 34

11.3% 35 to 49

7.1% 50 to 64

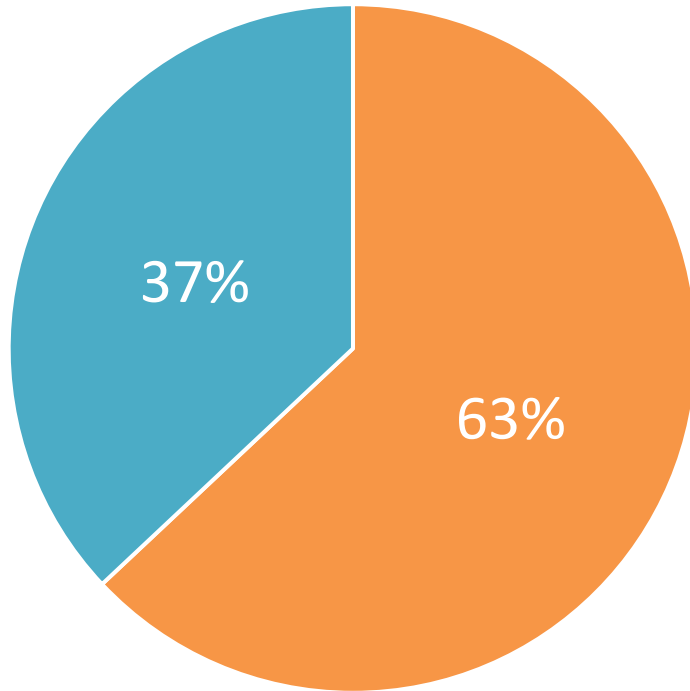
3.4% 65 or older

- **Young Veterans**
 - Higher prevalence of SI and SA than older Veterans
- **Recently separated Veterans**
 - Higher prevalence of SI and SA than those who separated 10+ years ago
- **Racial and ethnic minority Veterans**
 - Multi-racial and Hispanic Veterans have a higher prevalence of SI and SA than non-Hispanic White Veterans
- **Veterans not using VA healthcare**
 - Lower prevalence of SI and SA than those using care



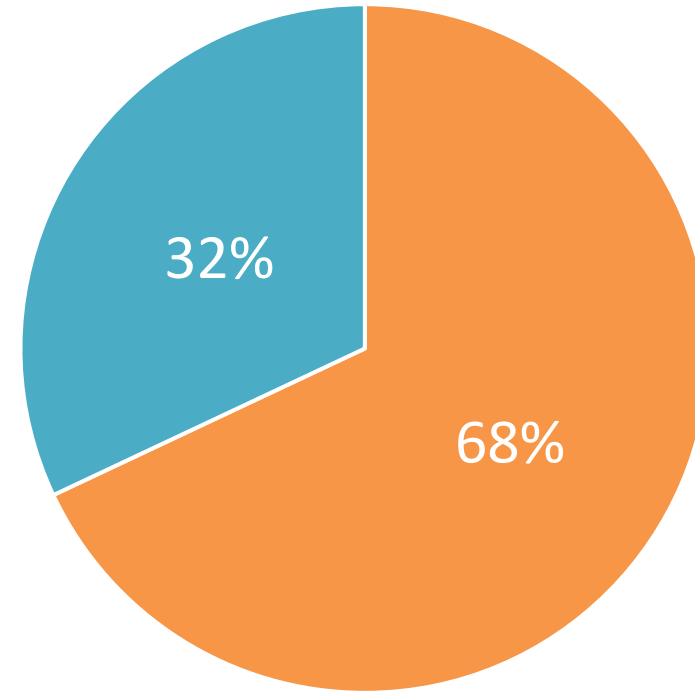
Suicide Loss

Community Member Died by Suicide



Yes No

Knew Someone who Died by Suicide

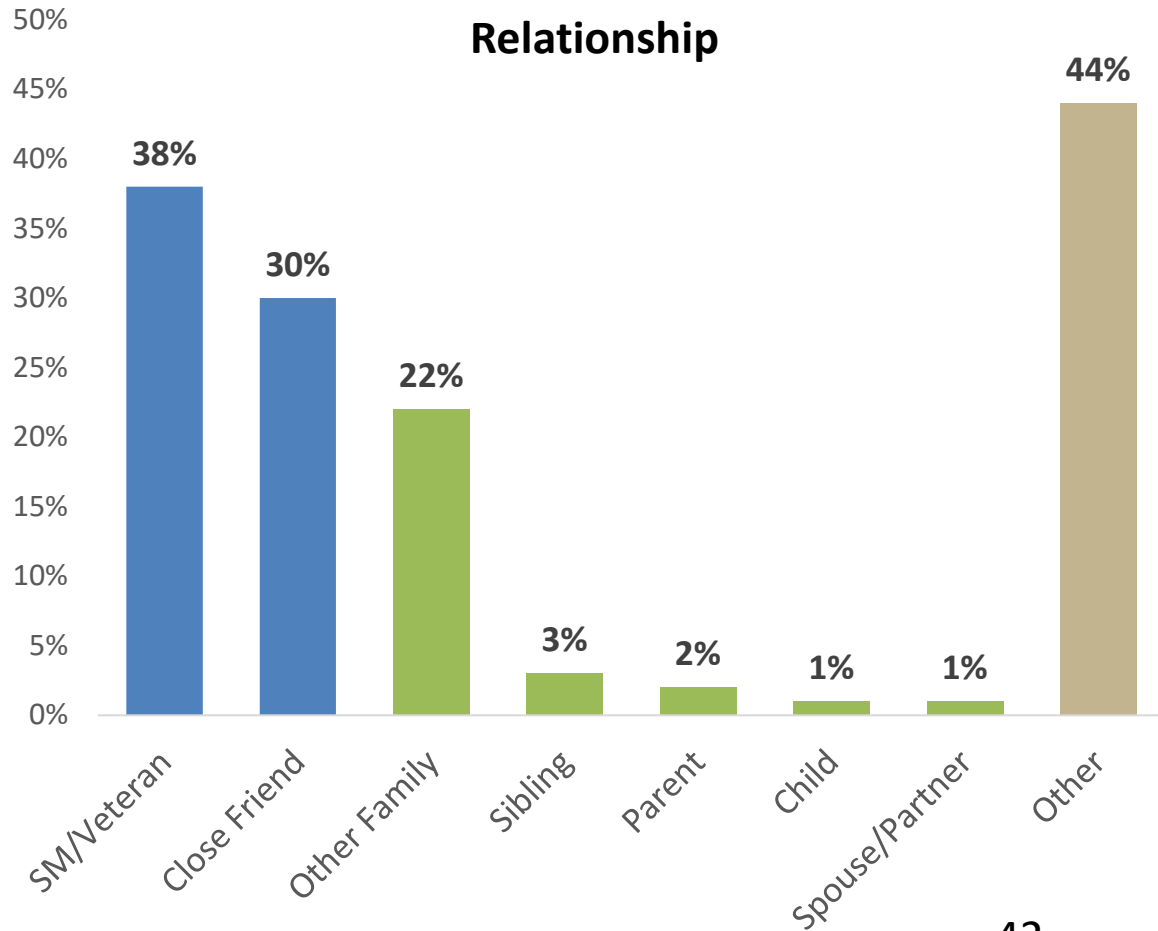


Yes No

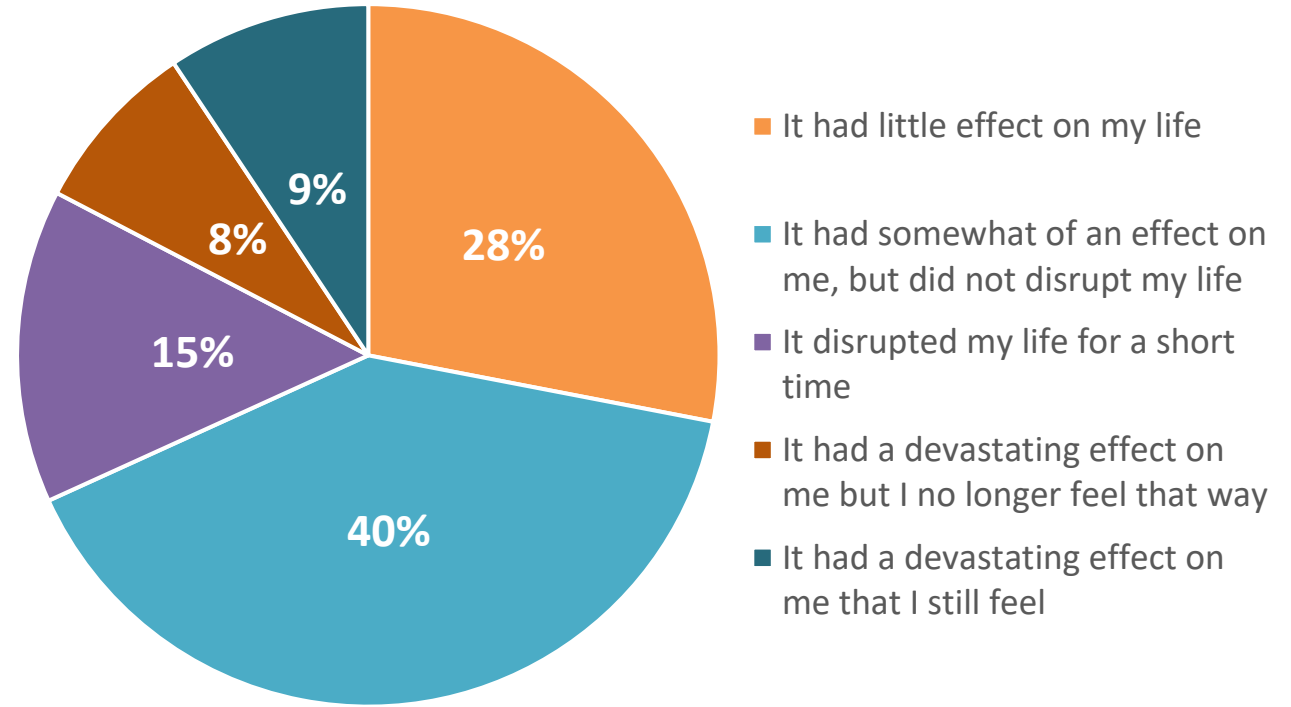


Suicide Loss

Relationship



Suicide Loss Impact

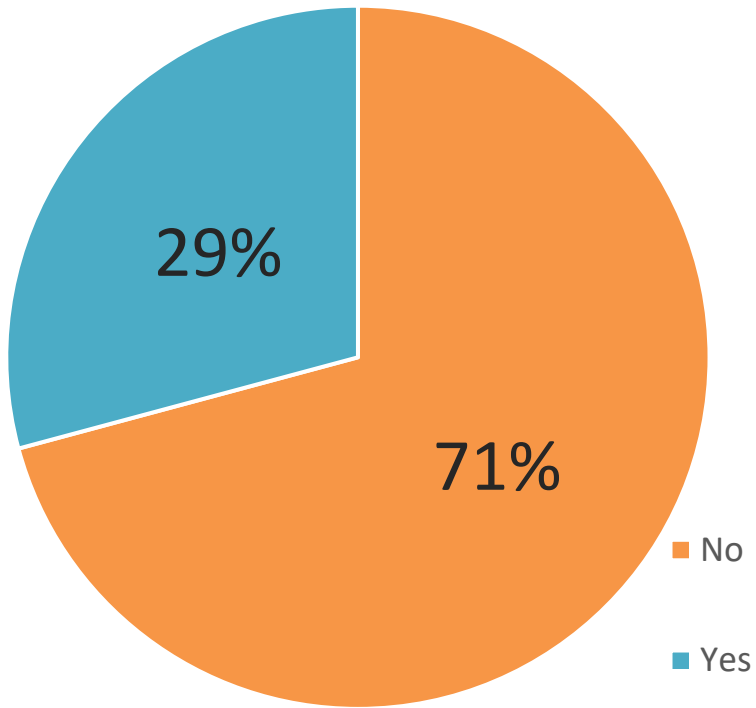




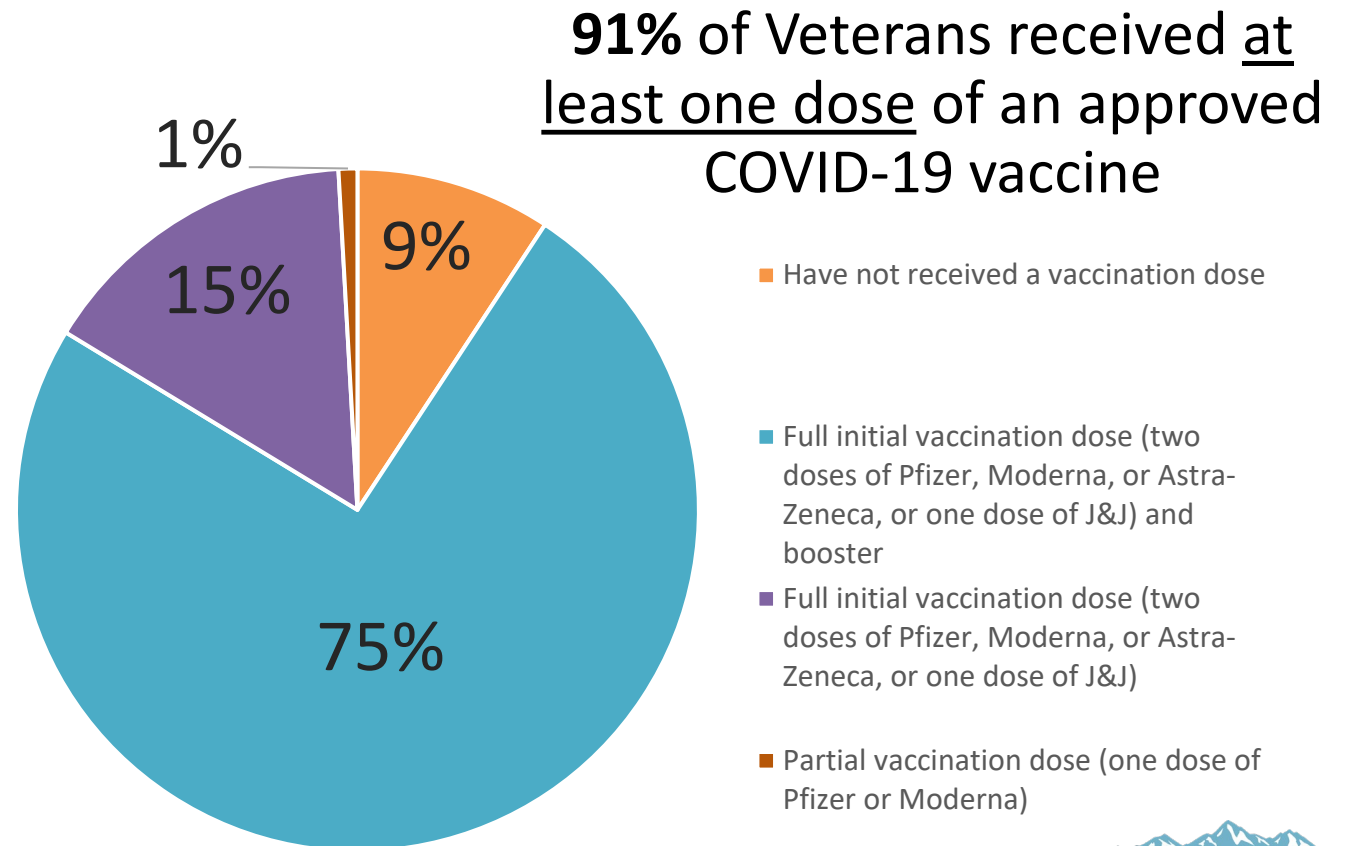
COVID-19 Pandemic



Self-Reported COVID-19 Infection and Vaccination Status (2022)



29% of living Veterans reported a history of COVID-19 infection



Assessing Pandemic Impact

Developed and validated a new scale (PIPS) in ASCEND pilot study

- Measures perceived impact of the pandemic on interpersonal relationships, financial impact, and personal health and well-being
- Domain scores were:
 - Positively correlated with measures of depression and loneliness
 - Negatively correlated with perceived social support
- Also assess overall impact
 - *“To what extent has the COVID-19 pandemic negatively impacted your life?”*

Wave 1 also assessed:

- Loss of family and friends to COVID-19
- Suicidal ideation frequency and intensity changes relative to before pandemic
- Extent that pandemic contributed to suicide attempts after pandemic onset



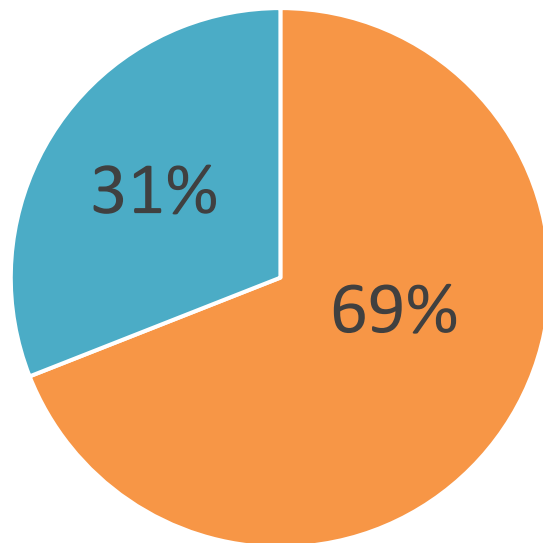
The perceived impact of pandemic scale (PIPS): Initial development and examination among U.S. military veterans

Julie A. Kittel^{a,b}, Lindsey L. Monteith^{a,b,c}, Jamie L. Tock^a, Alexandra L. Schneider^a, Ryan Holliday^{a,c}, Sean M. Barnes^{a,c}, Claire A. Hoffmire^{a,b,*}



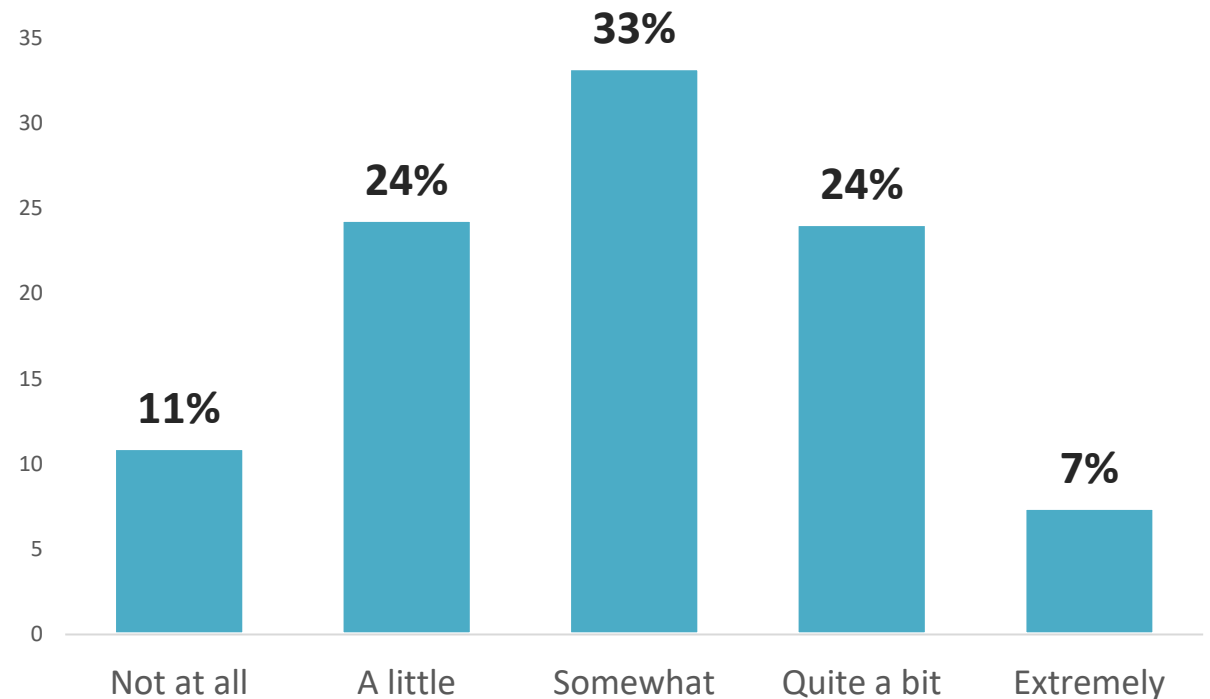
Overall Pandemic Impact (2022)

Loss of family or friends from COVID-19



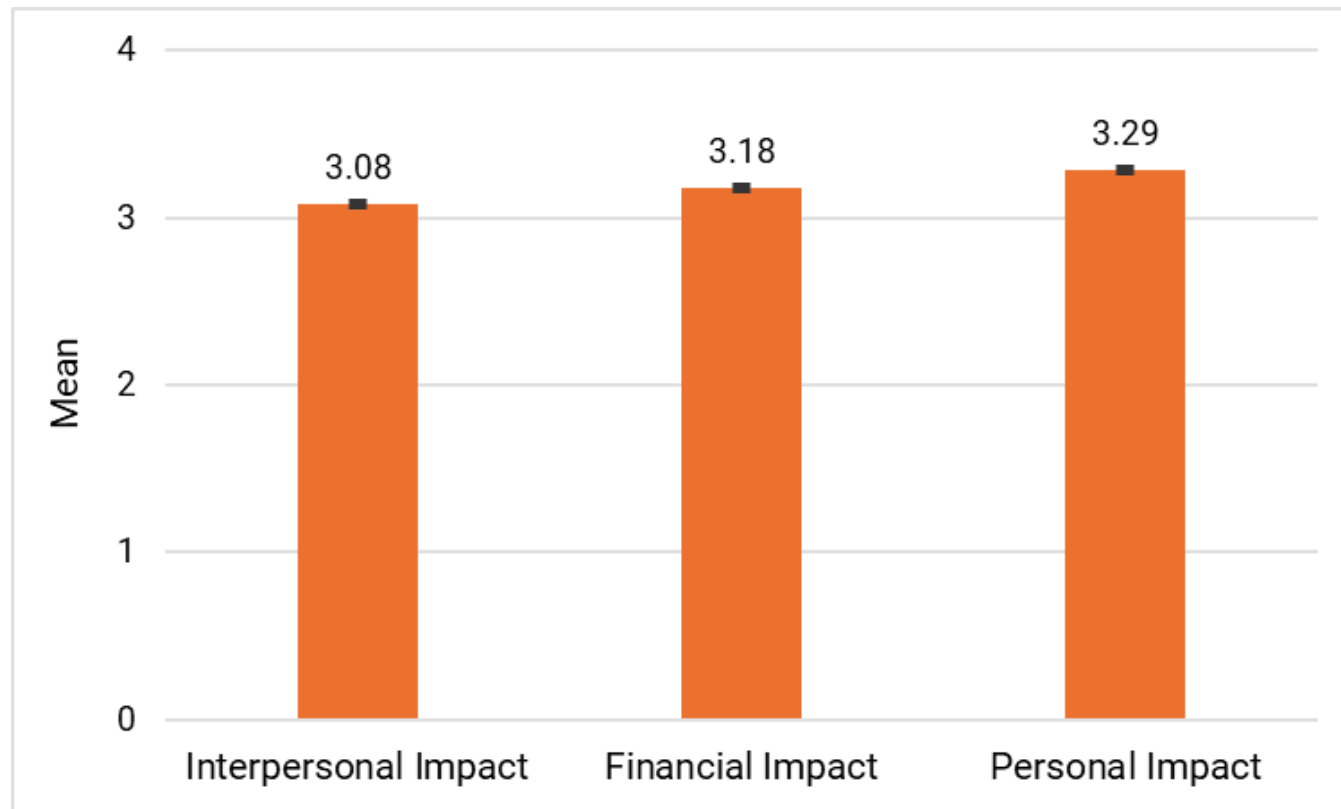
31% of Veterans reported they had experienced the death(s) of family or friends from COVID-19

Negative Impact of the Pandemic



65% of Veterans indicated that their lives were more than a little negatively impacted by the pandemic (i.e., somewhat, quite a bit, or extremely).

Impact of the COVID-19 pandemic on interpersonal, socioeconomic, and personal activities (2022)



- Domain scores can range from 1-5 (average score)
 - Higher domain scale scores reflect more negative perceptions of impact
 - A score of 3 represents “not at all”
 - A score of 4 represents “somewhat negatively”

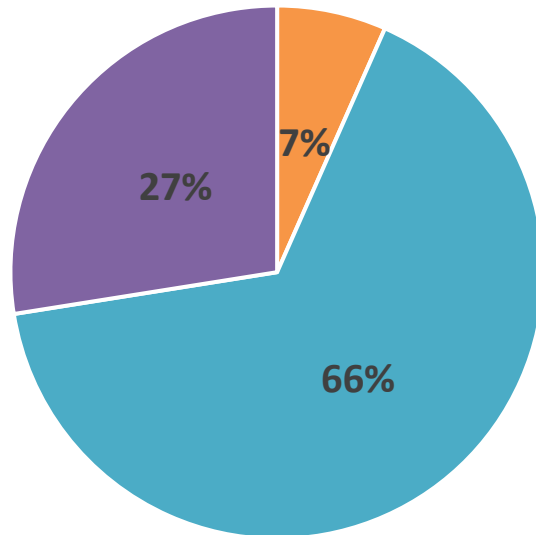


Subgroup Differences in Pandemic Impact (2022)

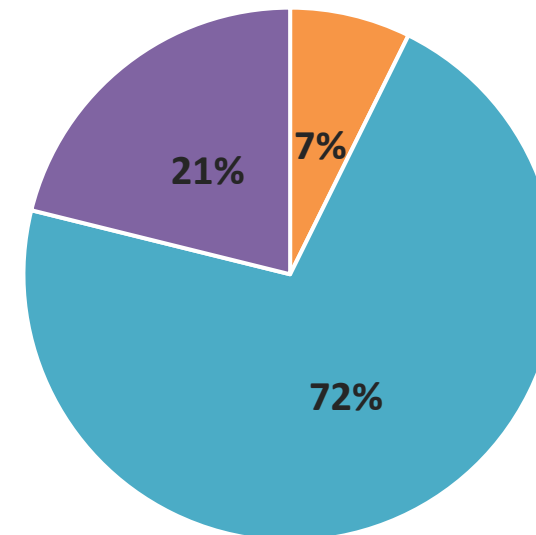
- **Age:** Perceived impact decreased with increasing age for all domains
- **Recency of separation:** Similarly, Veterans separated from military service for 10+ years perceived less financial and personal impact
- **Gender:** Women perceived a greater impact across all 3 domains
- **Race/Ethnicity:** Compared to non-Hispanic White Veterans...
 - Non-Hispanic American Indian/Alaska Native (AI/AN) Veterans perceived greater financial impact
 - Non-Hispanic Veterans identifying as any “other” race perceived greater personal impact

Frequency and intensity of SI during the COVID-19 pandemic, relative to before the pandemic (2022)

Frequency of SI



Intensity of SI



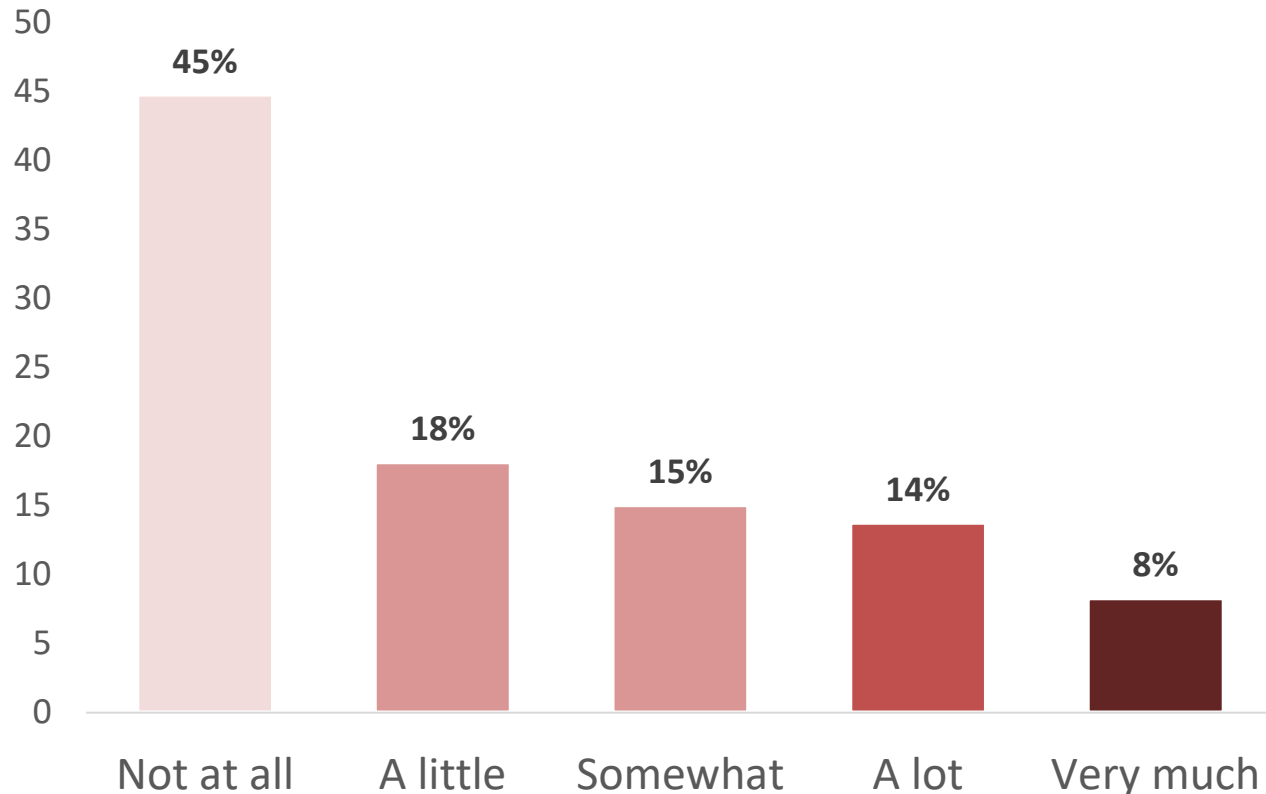
Decreased
Did not change
Increased

Among Veterans who experienced SI during the COVID-19 pandemic (n=1,798)

- 27% indicated that the frequency of their SI increased during the pandemic
- 21% reported that the intensity of these thoughts increased during the pandemic



Extent that the COVID-19 pandemic contributed to suicide attempts, among Veterans who attempted suicide during the pandemic (2022)



55% indicated the pandemic had at least some impact on SA

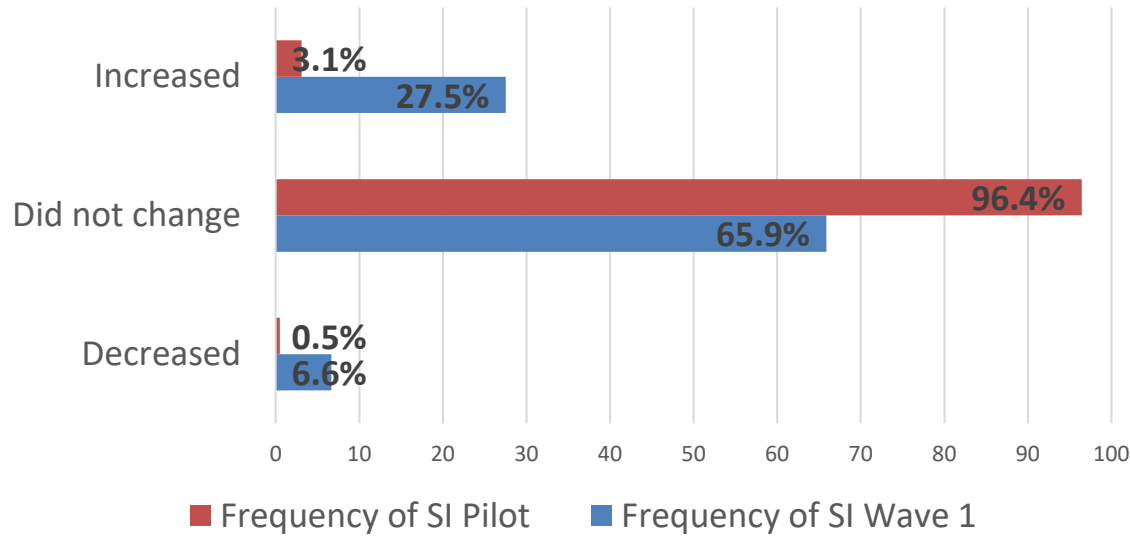
22% indicated the pandemic contributed a lot or very much to their SA

96 Veterans listed a SA date that occurred during the pandemic; however, this may underestimate the number who experienced SA during the pandemic given missing data regarding SA dates

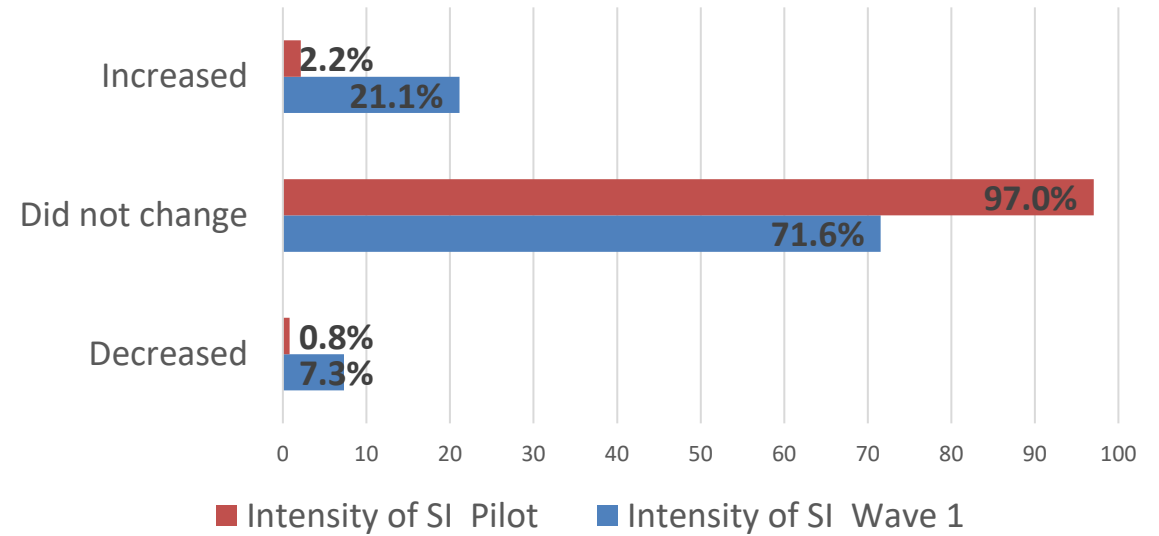


Pilot (2020-21) vs. Wave 1 (2022) COVID-19-related changes in SI Frequency/Intensity

Frequency of SI



Intensity of SI



Later in the pandemic (2022), Veterans reported a greater magnitude of changes in SI frequency and intensity, relative to prior to the pandemic, than they did early in the pandemic (2020-2021)

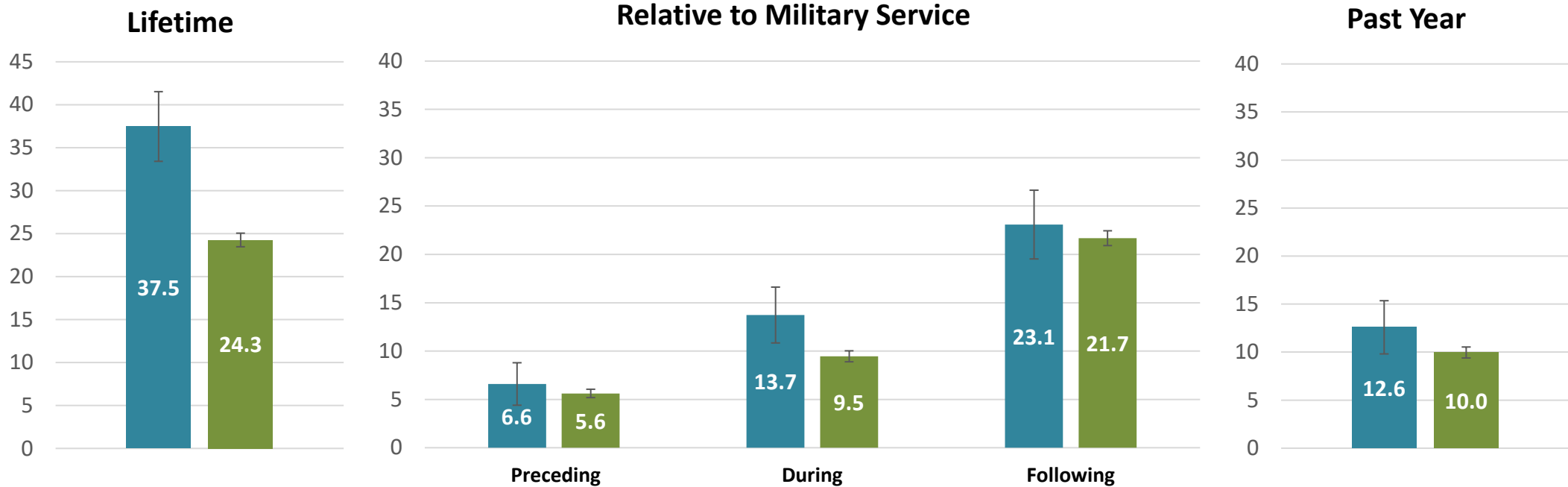
Pacific Island Territories Pilot

- Highly successful recruitment effort in the PI territories (N=553)
 - Majority resided in Guam (N=485)



Suicidal Ideation

■ Pacific Islands (N = 553)
■ Main Sample (N = 17,396)

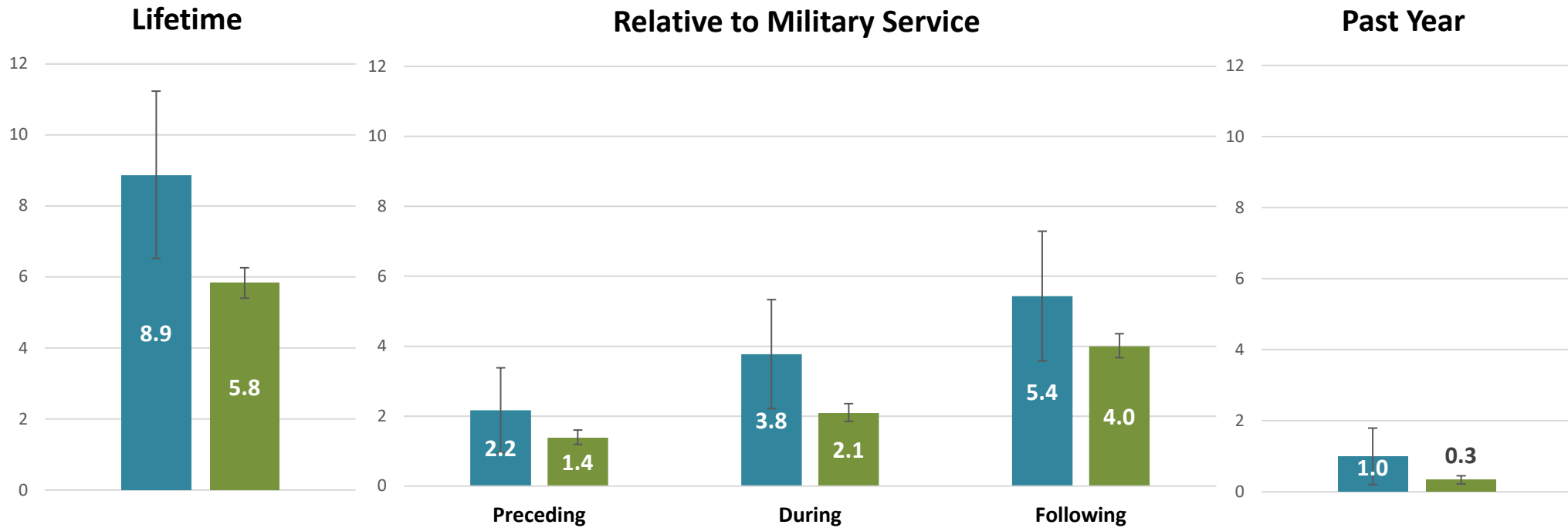


SI prevalence appears to be elevated among Veterans residing in Pacific Island Territories, relative to those in the main sample (50 states, DC, Puerto Ric)



■ Pacific Islands (N = 553)
■ Main Sample (N = 17,396)

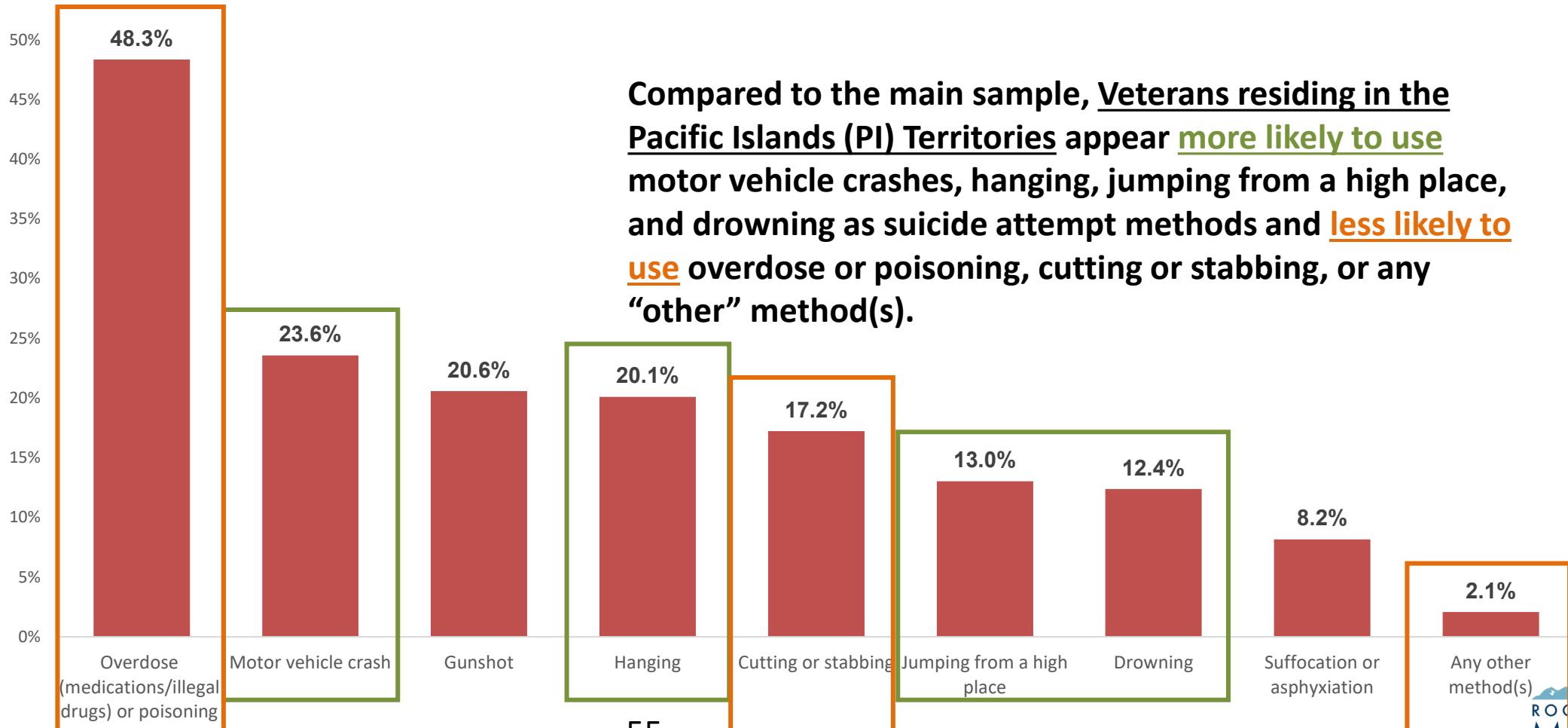
Suicide Attempt



Lifetime SA prevalence also appears to be elevated among Veterans residing in Pacific Island Territories, relative to those residing in the main sample (50 states, DC, Puerto Rico)

Small sample size results in imprecise estimates for SI relative to military service and in past year, limiting ability to draw confident conclusions

Suicide Methods Used in Lifetime Suicide Attempt(s), among Veterans in Pacific Island Territories



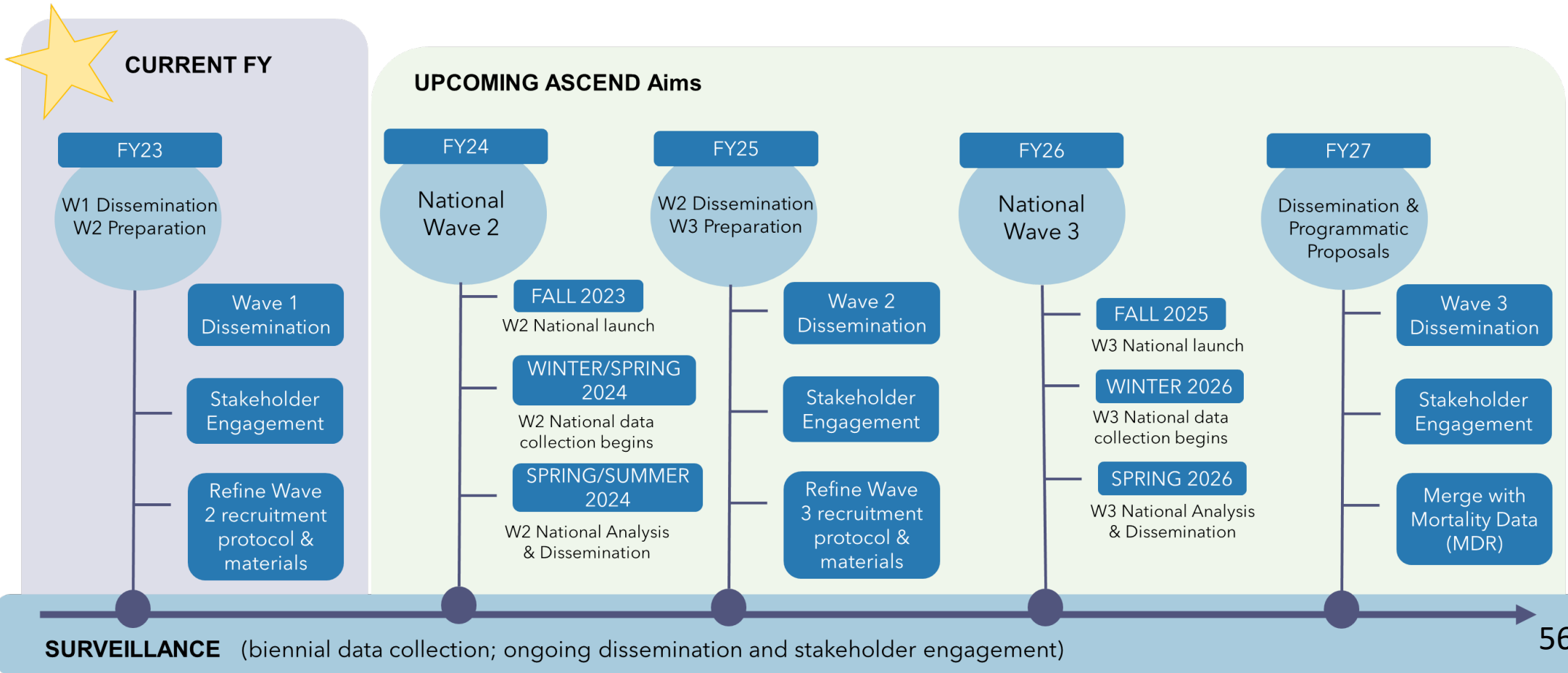
Compared to the main sample, Veterans residing in the Pacific Islands (PI) Territories appear **more likely to use** motor vehicle crashes, hanging, jumping from a high place, and drowning as suicide attempt methods and **less likely to use** overdose or poisoning, cutting or stabbing, or any “other” method(s).



ASCEND

Assessing Social & Community Environments with National Data

STUDY TIMELINE - SURVEILLANCE PHASE



(Hoffmire et al., 2022)



Key Takeaways and Clinical Implications

- **The ASCEND program can be used to increase knowledge of NF-SSDV risk and trends among the Veteran population as a whole and among Veteran subgroups**
 - Higher prevalence of NF-SSDV among women Veterans
 - Lower prevalence of firearm access and other firearm-related risk factors
 - Higher prevalence of NF-SSDV among younger and recently separated Veterans
 - Higher prevalence of NF-SSDV among some racial/ethnic minority Veterans
 - Higher prevalence of NF-SSDV among Veterans living in the Pacific Islands
- **ASCEND is directly relevant for informing gender-sensitive and culturally informed suicide prevention strategies**



Key Takeaways and Clinical Implications

- **Many Veterans have been impacted by suicide loss, including among fellow service members and Veterans, friends, and family members**
 - For many, this event had a devastating effect on their lives
- **COVID-19 pandemic has also impacted the lives of many Veterans, including through experiencing non-fatal infections, loss of family and/or friends, and overall negative impacts across multiple aspects of their lives**
 - During the first two years of the pandemic, over one-fourth experienced increased SI frequency, and over one-fifth experienced increased SI intensity



ASPIRE LAB

Advancing Suicide Prevention
for underserved veterans

Questions?

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<https://www.mirecc.va.gov/visn19/aspire/>

ASCEND Study Website:

<https://www.mirecc.va.gov/visn19/ascend/>

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