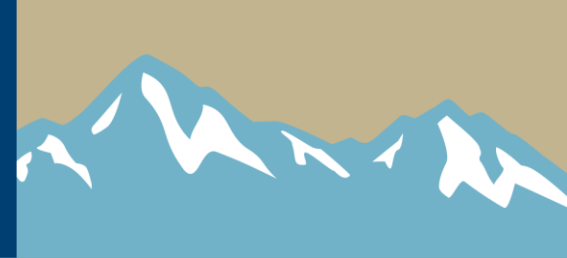


VA



U.S. Department
of Veterans Affairs



Preventing Firearm Suicide among Women Veterans

VA HSR&D Cyberseminar Spotlight on Suicide Prevention Series
September 11, 2023

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VA Rocky Mountain Mental Illness, Research, Education and Clinical Center for Suicide Prevention





Disclaimer

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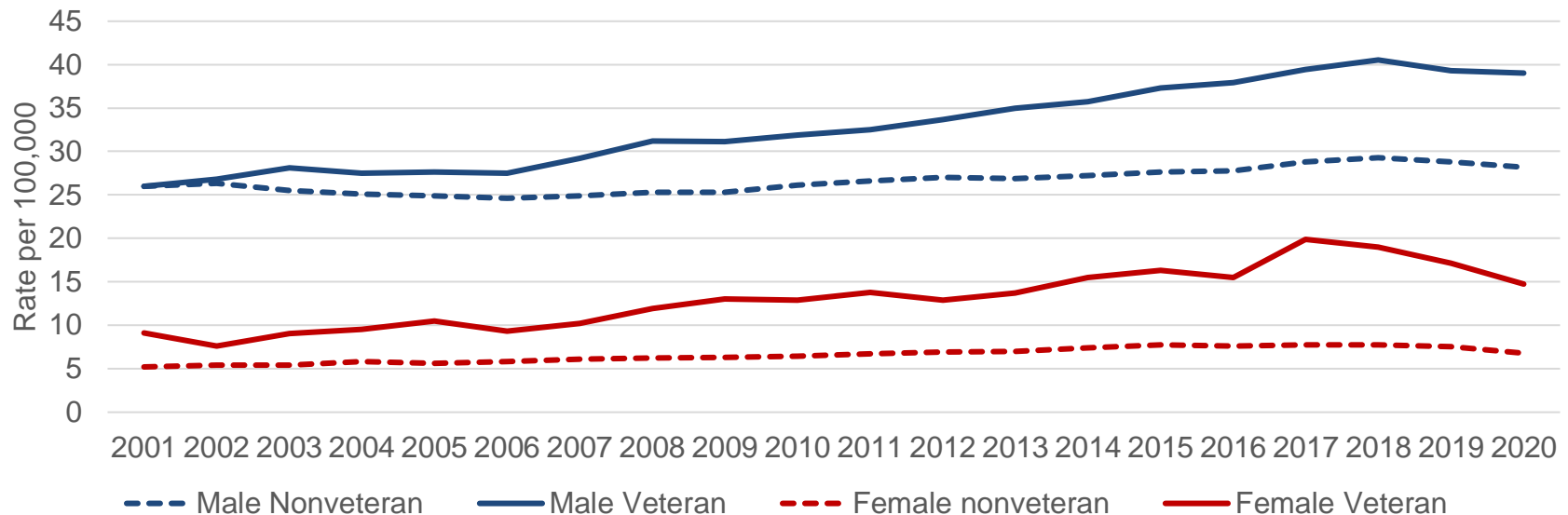


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Talia Spark, PhD



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



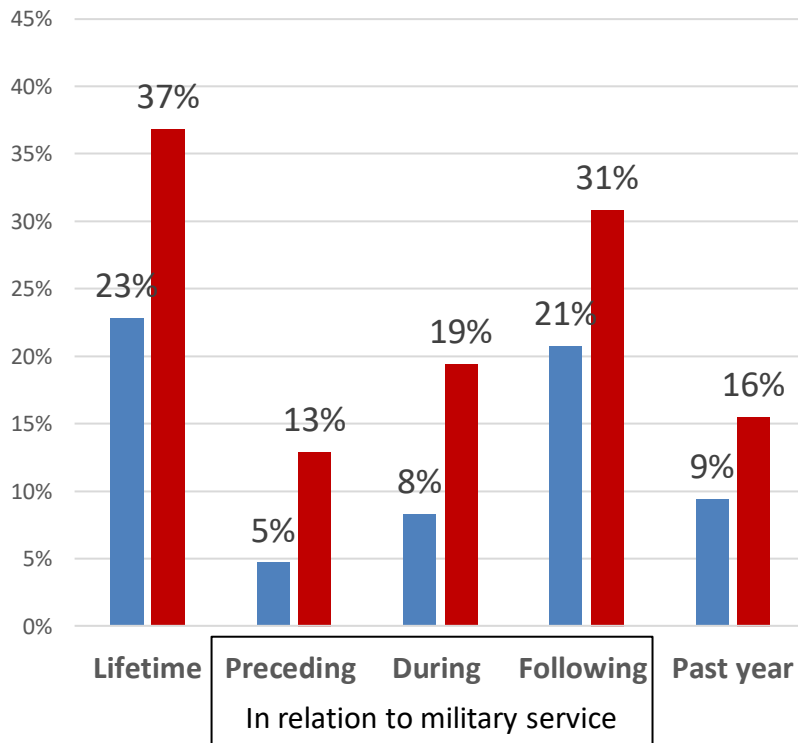
- **Among female Veterans, the suicide rate:**
 - Increased 61.5% (vs. 50.0% in male Veterans) from 2001-2020
 - Peaked in 2017, then declined (by 26.1%) through 2020
 - Was twice that of female non-Veterans in 2020
 - Was lower than that of male Veterans in 2020

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

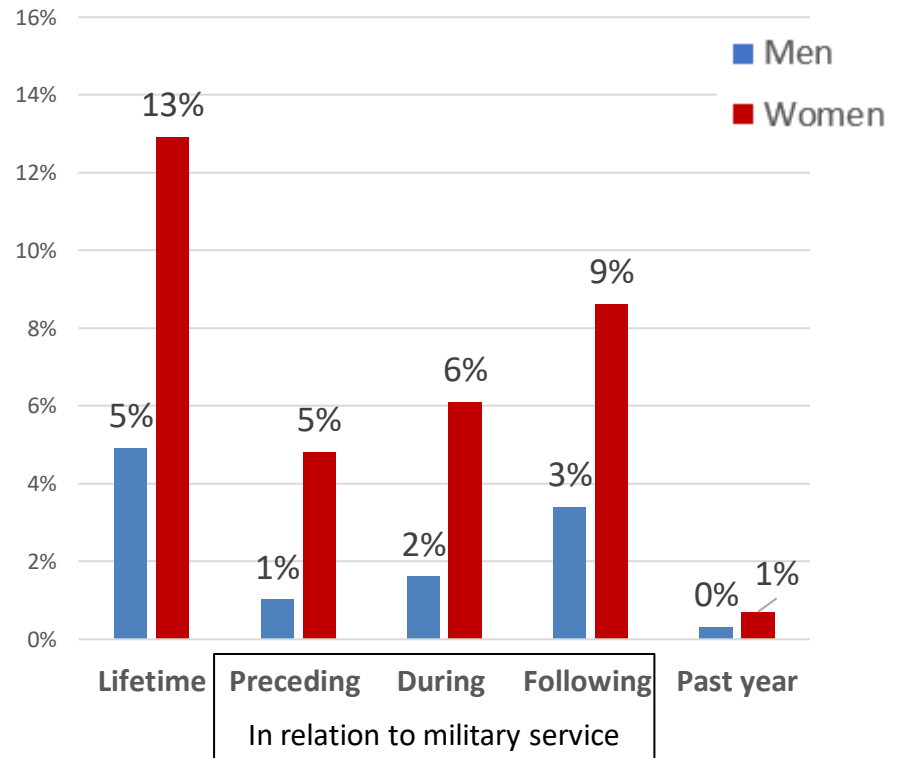
(e.g., suicide attempts, suicidal ideation)

However, rates of NF-SSDV are higher among women Veterans than among Veteran men

Suicidal Ideation



Suicide Attempt



Suicide Methods among Female Veterans (2020)

Table 1: Suicide Deaths, Methods Involved, 2020 and Difference From 2001*

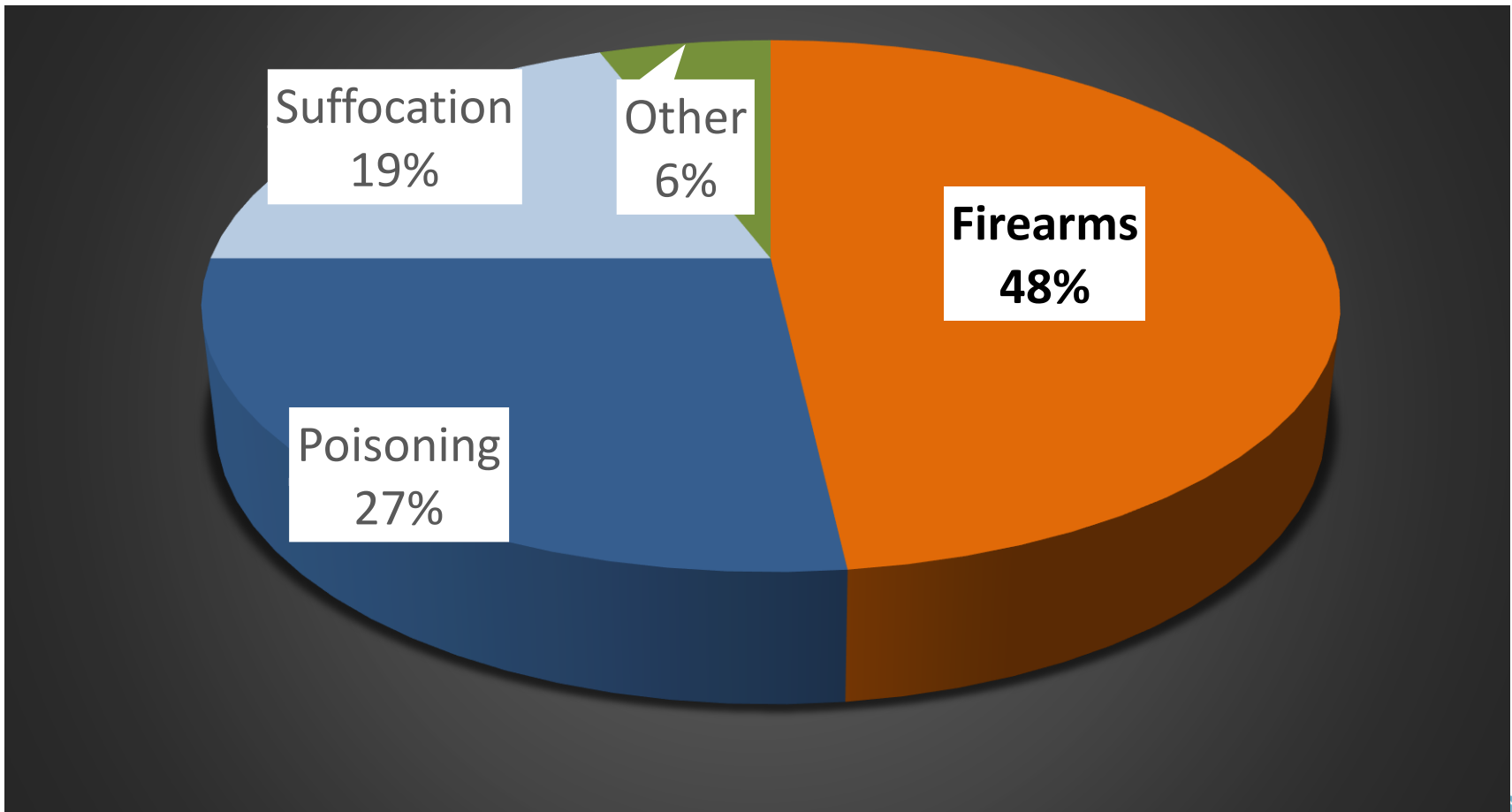
SUICIDE DECEDENTS, METHODS INVOLVED												
	Non-Veteran U.S. Adults		Veterans		Non-Veteran Men		Veteran Men		Non-Veteran Women		Veteran Women	
	2020	Change*	2020	Change*	2020	Change*	2020	Change*	2020	Change*	2020	Change*
Firearms	50.3%	-2.3%	71.0%	+4.5%	55.3%	-2.7%	72.1%	+4.8%	33.3%	-2.1%	48.2%	+11.2%
Poisoning	12.8%	-5.6%	8.4%	-4.8%	8.0%	-4.3%	7.5%	-4.9%	29.3%	-8.7%	26.8%	-16.0%
Suffocation	28.4%	+7.6%	14.9%	+0.9%	28.6%	+6.2%	14.7%	+0.6%	27.7%	+12.0%	19.2%	+8.8%
Other	8.4%	+0.3%	5.8%	-0.6%	8.1%	+0.8%	5.8%	-0.5%	9.6%	-1.1%	5.8%	-3.9%

Firearms:

- Female Veterans experienced a larger increase in use of this method of suicide from 2001-2020 (11.2%), compared to other populations
- In 2020, among female Veterans, firearms (48.2%) accounted for a:
 - Higher percentage of suicide deaths than among female non-Veterans (33.3%)
 - Lower percentage of suicide deaths than among male Veterans (72.1%)



In 2020, firearms were the most common method of suicide death among female Veterans





Firearm Access among Women Veterans, Compared to Women Civilians



Initial Findings (2015)

2015 National Firearm Survey

- Cross-sectional, nationally representative survey
- Veterans and firearm owners oversampled
- Female sample included: 38 Veterans, 2002 non-Veterans

Compared to female non-Veterans, female Veterans were:

- More likely to own firearms (11.8% vs 24.4%)
- More likely to own multiple firearm types (42.9% vs 67.0%)*
- Less likely to own *only* handguns (42% vs 17.0%)*

**Differed from findings comparing male non-Veterans to male Veterans*



Gender Differences in Firearm Access and Firearm-Related Factors among Veterans

2015 Findings

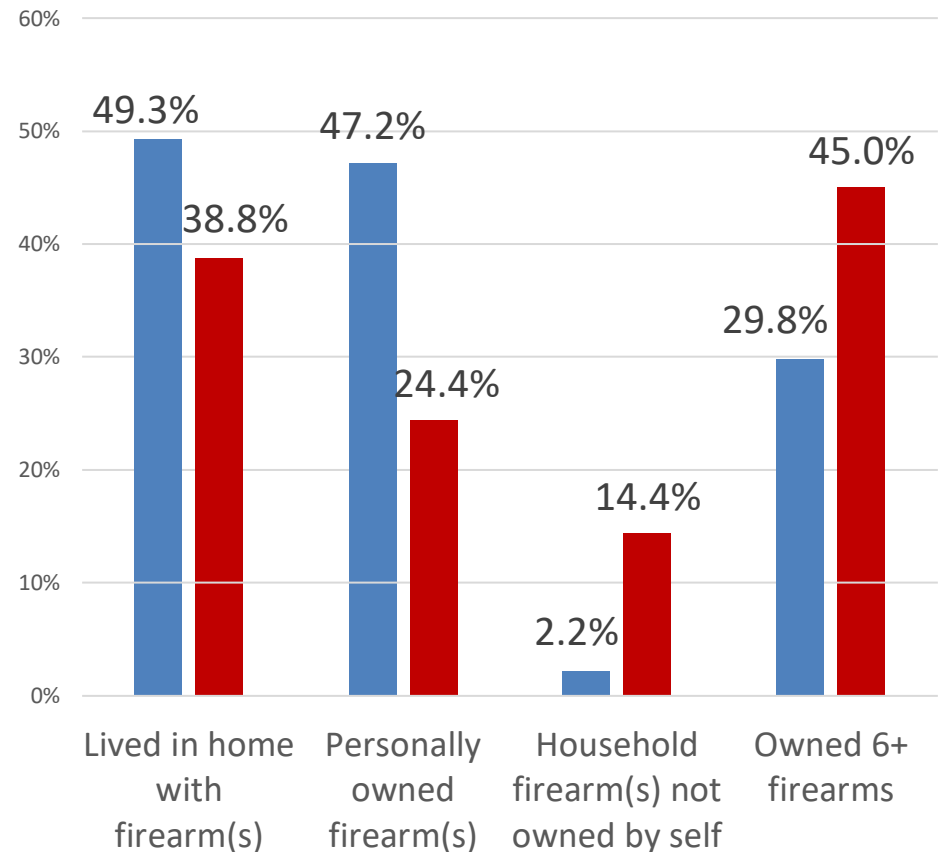
■ Men
■ Women

2015 National Firearm Survey

- Nationally representative sample of 384 Veterans
 - 38 females, 346 males

Compared to male Veterans, female Veterans were...

- Less likely to:
 - Live in a home with firearms
 - Personally own firearms
- More likely to:
 - Live in a home with firearms they did not personally own
 - Own 6+ firearms (29.8% vs 45.0%)
- Owned fewer firearms, on average (6.2 vs 4.5)





Subsequent Findings (2022)

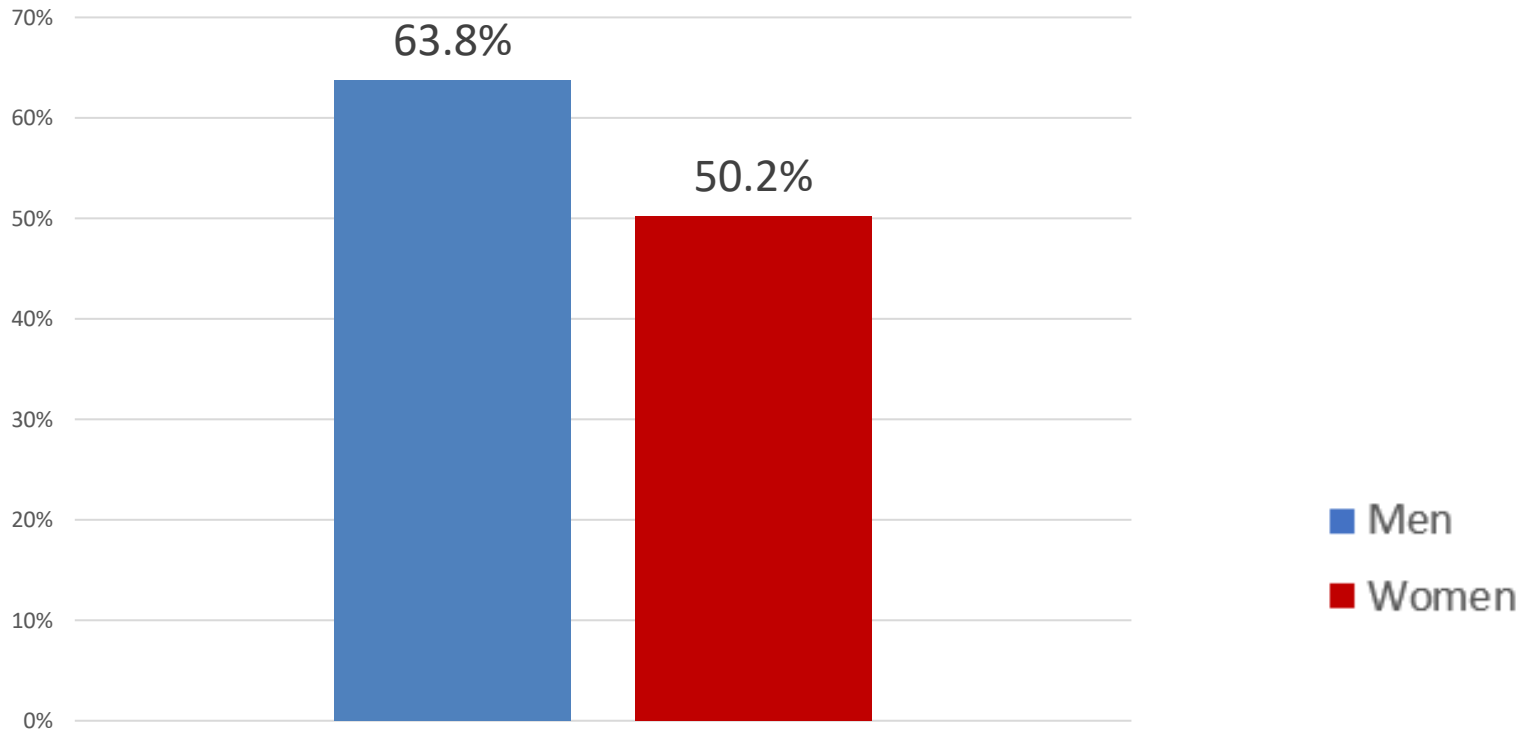
- National cross-sectional survey of Veterans, conducted in 2022
 - [Assessing Social and Community Environments with National Data \(ASCEND\)](#)
- Oversampled women to examine gender differences
- Sample: 17,949 Veterans (3,252 women)
- Weighted to the Veteran population
- Firearm section developed with input from Veterans (i.e., project-specific Veteran Engagement Board)

Hoffmire, C. A., Mohatt, N. V., Holliday, R., Barnes, S. M., Brenner, L. A., & Monteith, L. L. (2022). ASCEND for veteran suicide prevention: enhancing surveillance to save lives. *Psychiatry Research*, 310, e114432-e114432.

Wendleton, L., Hoffmire, C. A., Drop, S., Flower, M., Jones, R., Nolan, J. P., ... & Monteith, L. L. (2023). Veteran Engagement in Survey Research to Prevent Suicide. *Progress in Community Health Partnerships: Research, Education, and Action*, 17(1), 129-134.



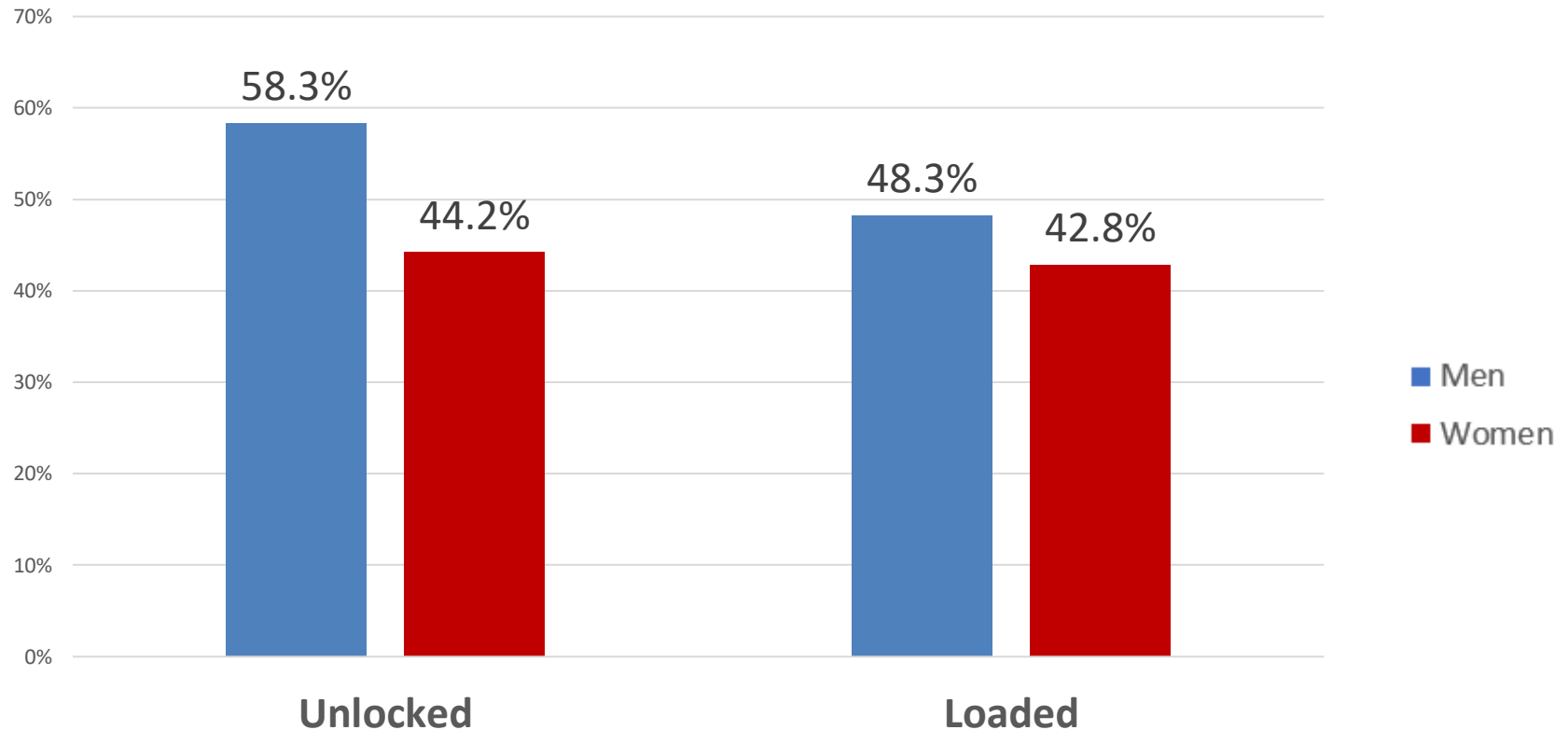
Household Firearm Access



Women Veterans had a lower prevalence of household firearm access.



Firearm Storage

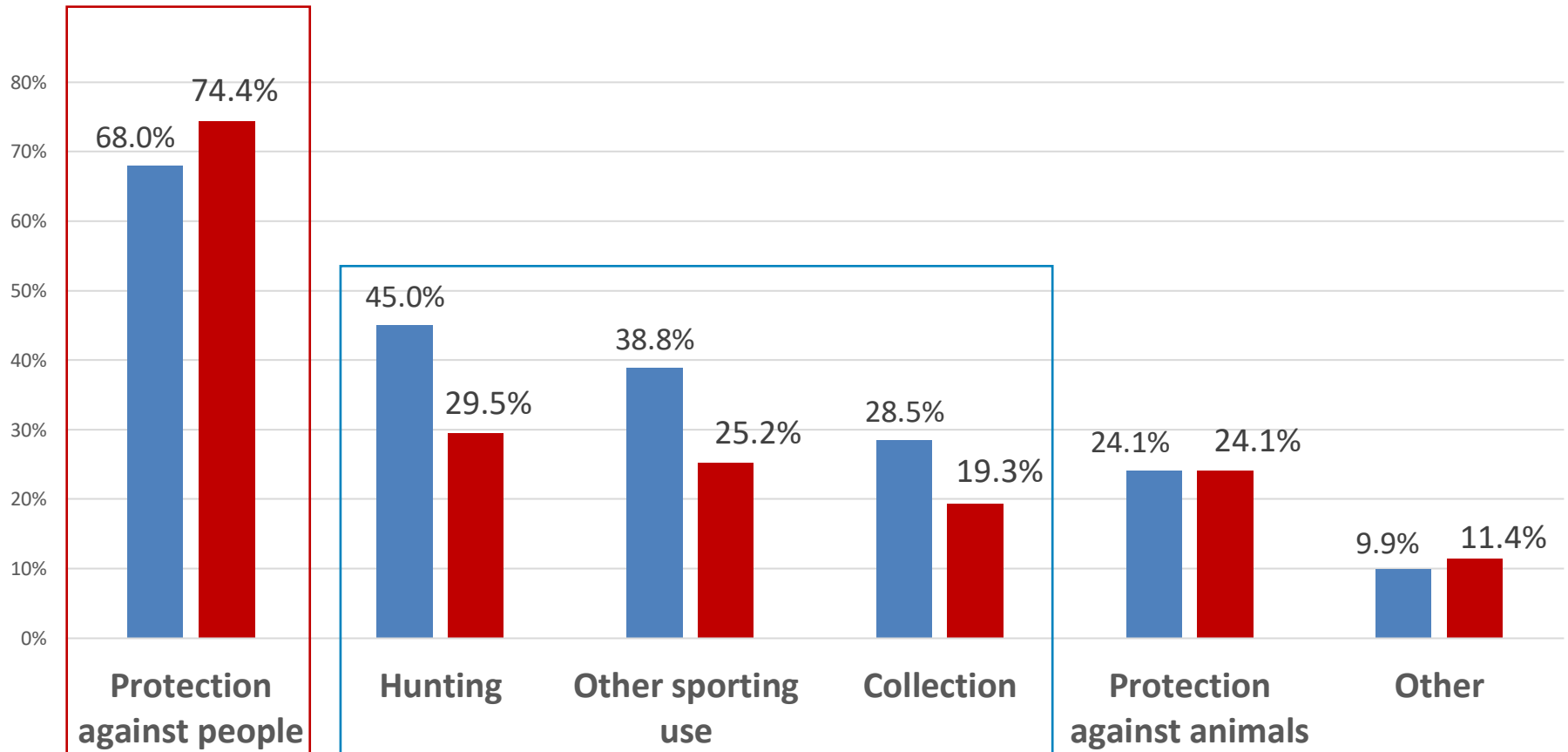


Among Veterans with household firearm access, women had a lower prevalence of storing firearms unlocked and loaded.



Reasons for Having Household Firearms

■ Men
■ Women



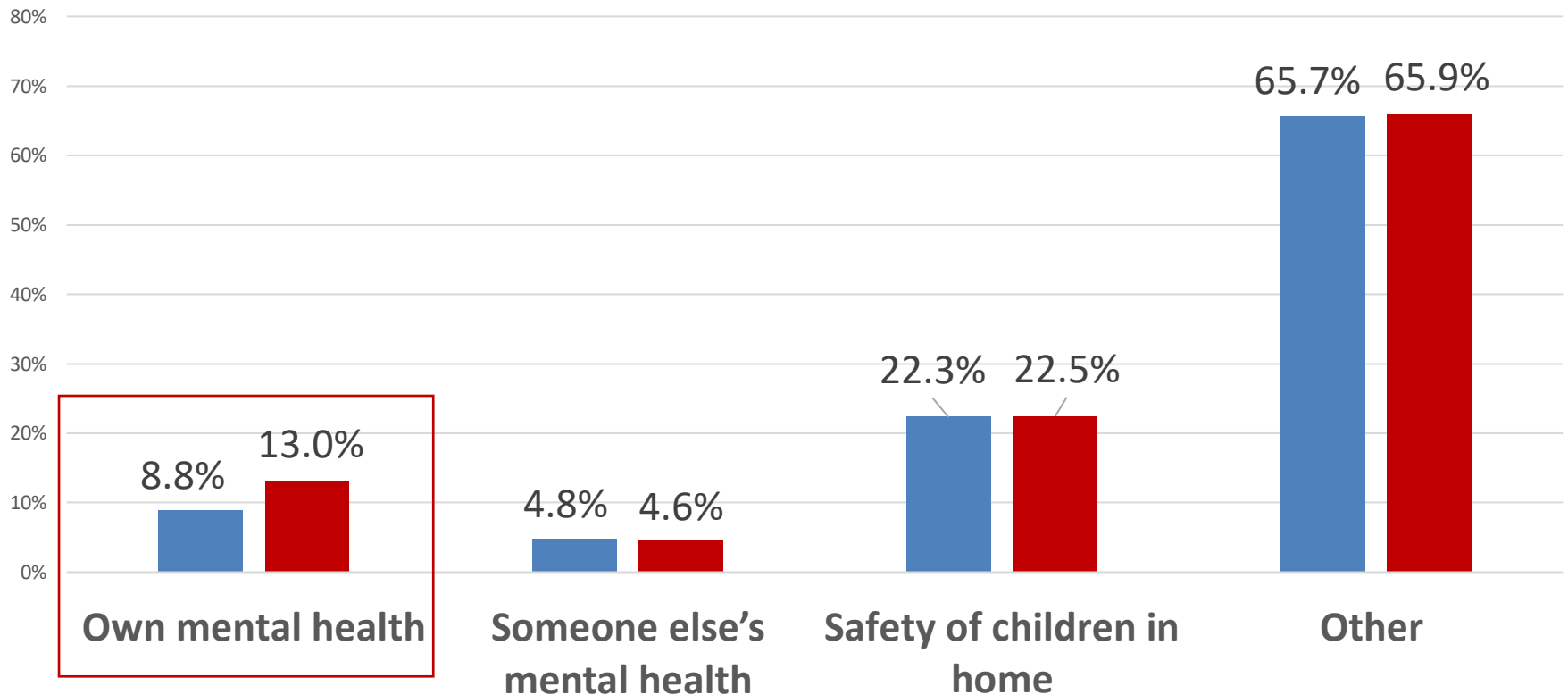
*Endorsed more
among women*

Endorsed more among men



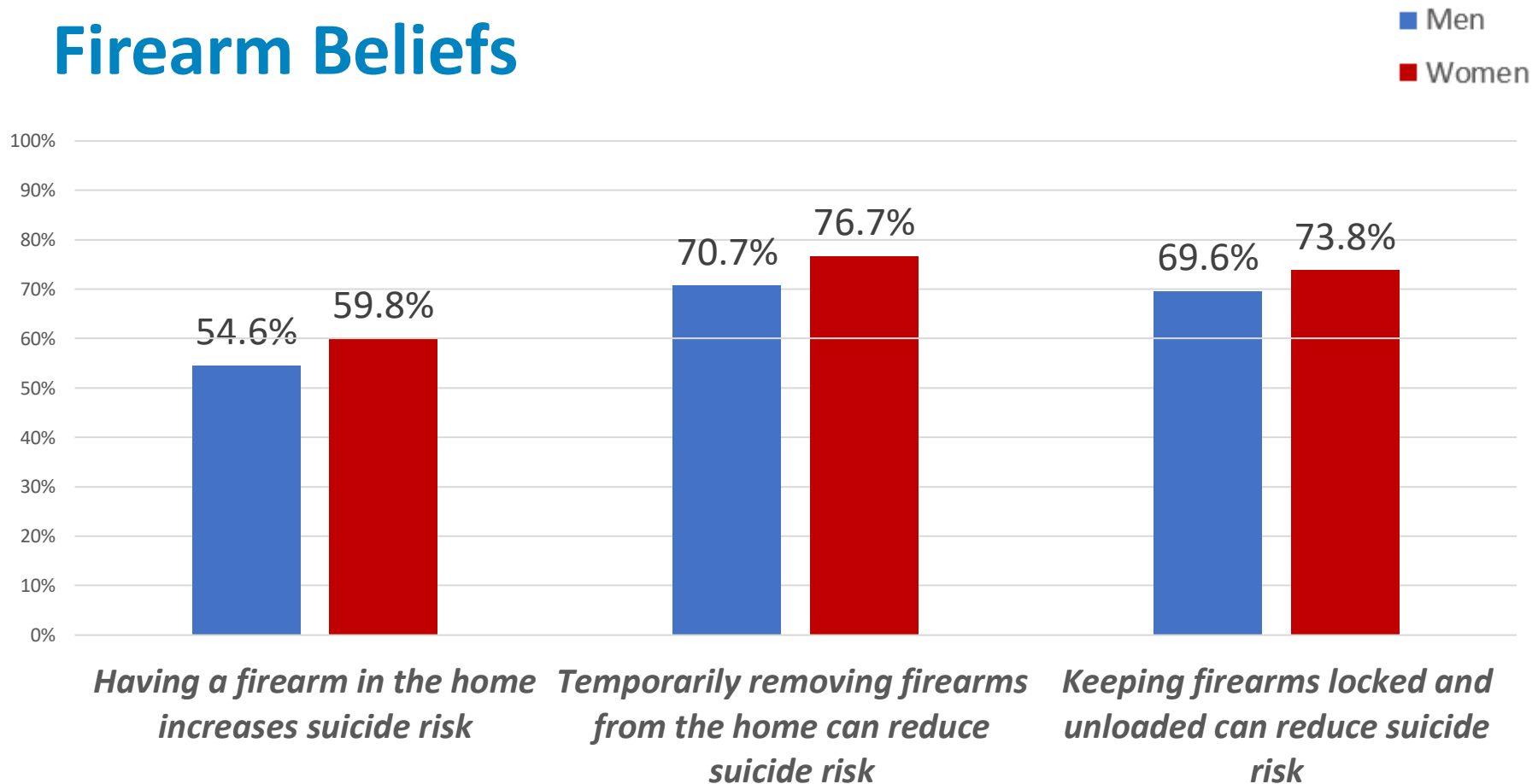
Reasons for Not Having Household Firearms

■ Men
■ Women



***Endorsed more
among women***

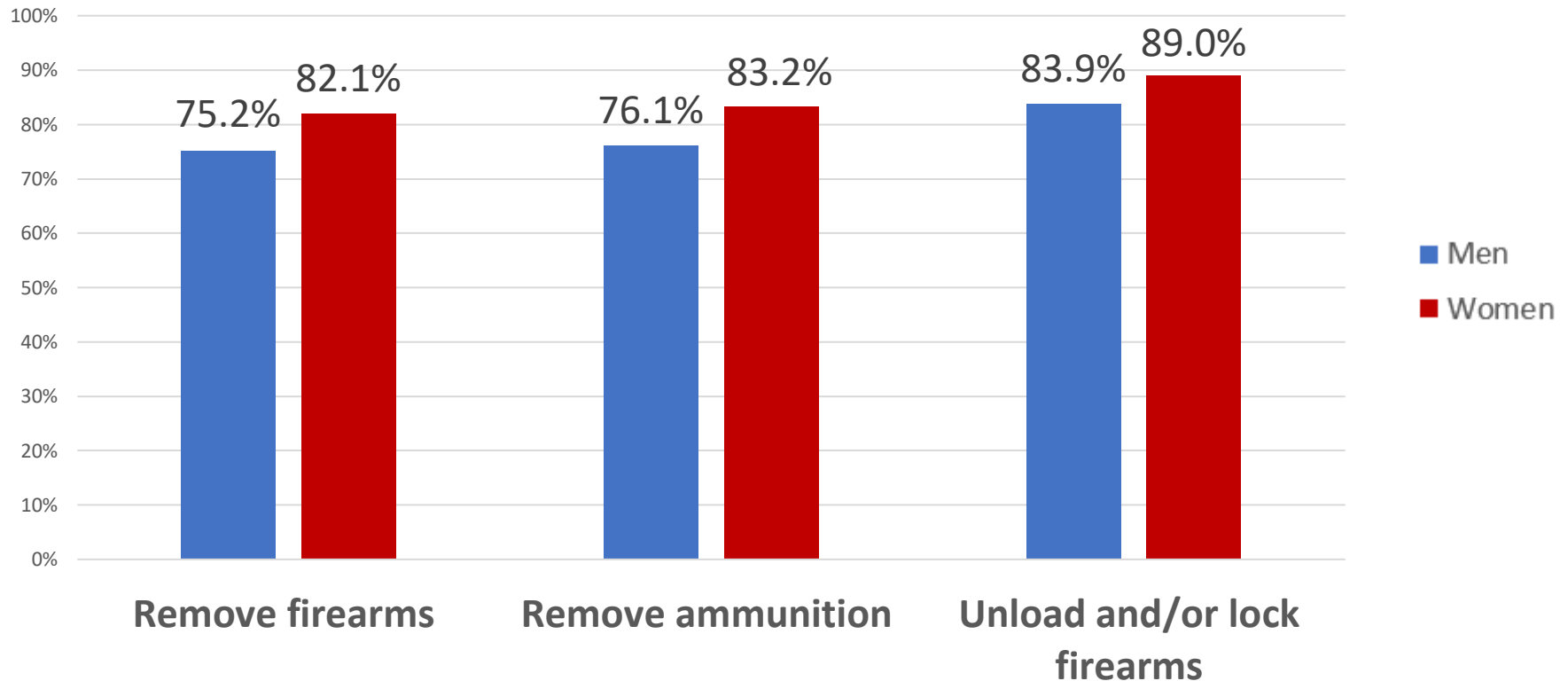
Firearm Beliefs



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



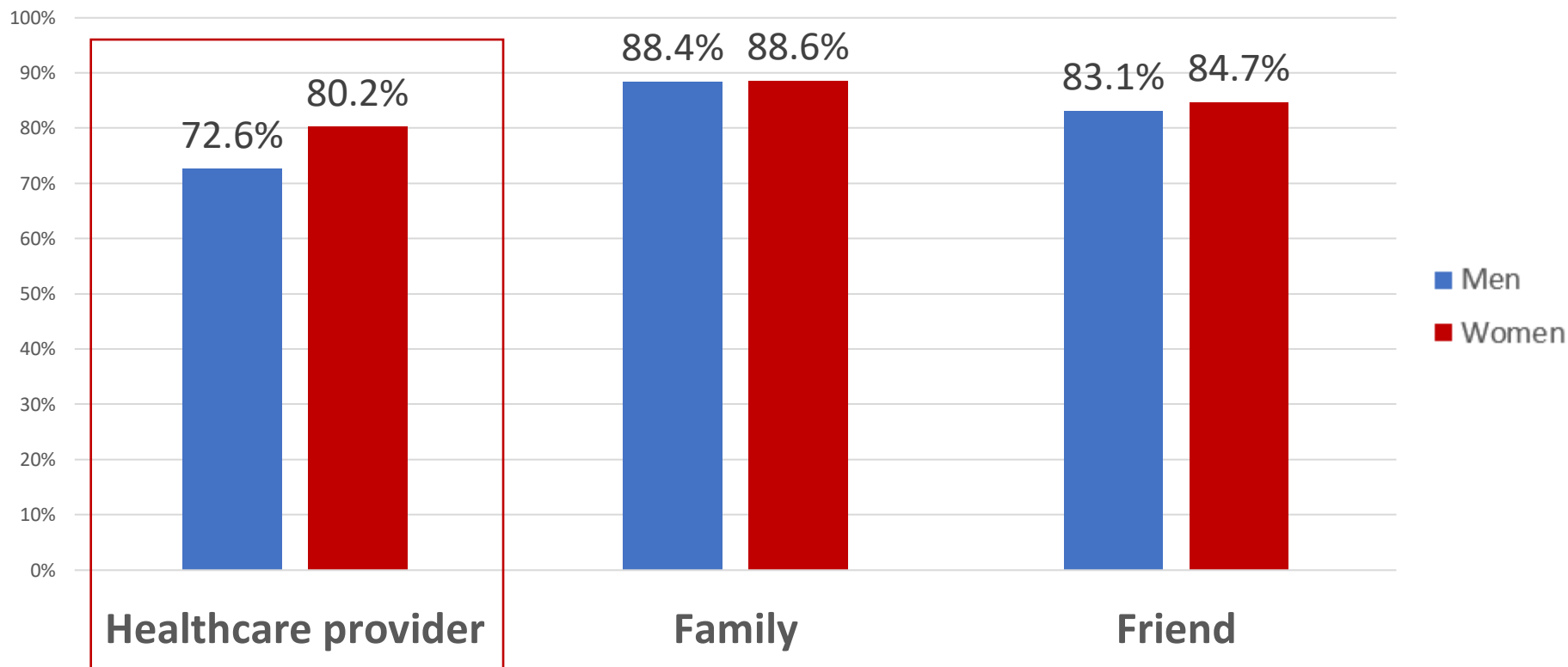
Willingness to Engage in Firearm Behaviors if Experiencing Suicidal Thoughts



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.



Summary

Household firearm access and unsafe storage (e.g., unlocked, loaded) are risk factors for suicide.

Identification of gender differences is important to preventing suicide by firearms among women Veterans, who are....

- Less likely to personally own firearms
- More likely to live in a home with firearms that they do not personally own
- More likely to report protection as their sole reason for firearm ownership
- More likely to endorse willingness to change firearm access and storage if suicidal

Understanding how to incorporate these findings into strategies to prevent suicide by firearm (e.g., lethal means safety counselling [LMSC]) among women Veterans is essential.



Firearm Access and Related Factors among Women Veterans



Firearm Research Focused on Women Veterans

Qualitative interviews with women Veterans (n=16): Firearm experiences and perspectives

<https://doi.org/10.1002/jclp.22952>

Survey of post-9/11 women Veterans using VA reproductive healthcare (n=350)
2018-2019

<https://doi.org/10.1007/s11606-022-07587-1>

Survey of previously deployed post-9/11 women Veterans (n=528)
2020

Qualitative Study of Women Veterans' Firearm-Related Experiences and Perspectives across the Life Course

Eliciting Female Veterans' Unique Perspectives about Firearms

Since 2005...

Suicide rates for female Veterans
 more rapidly than for:

- Veterans
- non-Veterans

Firearms

are the leading method of
 suicide for Female Veterans



Themes:

- Initial firearm exposure as from older males
- exposure from military experience, firearm seen as important for survival & protection
- Self-protection motivates ownership & storage practices
 - Trust most essential to firearm discussions,

Despite this...

Very few studies exist examining
 versus perspectives

Current Study

- 16 cisgender female Veterans
- Current/previous firearm owner
- Semi-structured qualitative

Clinically:

Important to

- identify & attend to contextual background (ex., history of interpersonal violence)
- Provide trauma-informed care

Potentially helpful techniques

- Motivational interviewing;



Pre-Military Firearm Exposure

In a sample of women Veterans with prior/current firearm access, most described firearm exposure beginning in **childhood or adolescence**. This often occurred in **familial** contexts or as part of the **culture** (e.g., rural communities).

“ First time I shot a gun, I was probably seven or eight years old... My dad was a hunter and we had rifles, we had handguns, growing up in the house... it was very important to him that we at least had some level of knowledge of how to use it and respect for it... We never touched them unless he was there with us... they were not toys, we respected them. You didn't touch them or you'd be in serious trouble.

”

“ I think I was a teenager, I don't know how old, but I remember my step-dad at the time, he took me to the gun range and we shot handguns... I was intimidated at first because I never shot it. I just felt like I had all this power in my hands and I didn't want to mess up and I was just really nervous... In the end, I fell in love with it.

”

Firearm Perceptions and Experiences during Military Service

- **Formal training and broader exposure**
- **Overcoming initial discomfort**
- **Serving a different purpose in a different context**
- **Considered necessary for survival and protection in a male-dominated threatening environment** in which women experienced sexual harassment and assault
- **Becoming highly proficient with firearms to be perceived as equal**

“ When I was younger, I think it was just awkward because I wasn't really familiar with it. I never fired a gun, a weapon, and so once I became used to it, the M-16, it was okay. I didn't mind, I guess I became more comfortable when I deployed because we had it with us. We were armed all the time. So you kind of have to accept that... and realize that if you're going to have a weapon, then if you're not familiar with it, then you aren't any help to anyone. You're really more of a crutch. You're not helping your fellow [service members] if you can't assist. So that was one thing that I had to really get past. ”

“ ...the men were establishing their dominance and authority in a very like threatening and fearful manner. It was very threatening... So it was like, oh my God, you've got to like handle these weapons like the way they want you to handle them, otherwise like, you know, you're getting kicked or whatever else. Or treated very poorly. And so I learned to become an expert at weapons... I became like better than everybody else. And like, almost I think maybe it was for my own safety. Because there was this threatening and fearful connotation around weapons, and like the process, I became really, really good at them. And so they would have to leave me alone... ”

Firearms for Protection following Military Service

Some women Veterans described acquiring firearms or storing them in readily accessible ways as a means of protecting themselves, often in the context of prior **interpersonal violence** (e.g., military sexual trauma [MST], intimate partner violence [IPV]).

I felt like I never wanted to be put in those kind of situations again... having something to be able to protect me, like I think made me feel better. You know, like about being future sexually assaulted or what not... the burglar-guy person incident was just kind of a reminder of that. And so it was like, hey... you need to have done this already.

Some women who obtained firearms for protection described keeping them **loaded and easily accessible** (e.g., “*Under my pillow*”).



Firearm Access through Family (e.g., Partners) Post-Military Service

- Women described having access to household firearm through others – particularly through their partners
- Some partners purchased firearms for their women Veteran partners to increase the women Veteran's protection (e.g., while the partner was away) or for shared recreation (e.g., hunting together)

"My husband, if he bought something, he had to buy me something. And then when he died, I got his guns and my guns. So now I have double of stuff and some of them... it's just stuff that's been given to me also."

- Some women Veterans had access to household firearms even when doing so was risky to them or not wanted

Normally this stuff is all locked up. But my son and...husband had gone out to the shooting range and [my husband] had left the guns out... I was in one of my moods and he had gone to bed... I pulled the 9 mil out and I actually loaded it and then I set it on the floor and then I went [to a family member's] room, and I said, you better go do something with that gun before I do.




Importance of Trust for Firearm Discussions

- Women Veterans in this study expressed a preference for **family or friends** to initiate firearm conversations when there were concerns.

"I would want my husband to be able to be comfortable enough talking with me. And if not my husband, my kids."

- Although healthcare providers were rarely mentioned spontaneously, women Veterans described **trust** and **genuine caring** as essential for discussing firearms with their healthcare providers.

"I have an amazing relationship with my [primary care provider], and if he brought it up, I believe I could be honest enough with him that... I could say I had concerns and could validate his concerns."



Survey of Post-9/11 Women Veterans using Reproductive Healthcare: A Secondary Analysis



Methods

Participants

- 350 post-9/11 Veterans
- Of reproductive age (18–44) upon military separation
- Used reproductive healthcare (RHC) that VA provided and/or paid for in FY 2018
 - Gynecology or women’s surgeries encounters; medical encounters outside these settings associated with ICD-10 code(s) for qualifying reproductive health conditions or procedures and/or CPT codes for common gynecological procedures; pharmacy fills for medications solely for reproductive health conditions or contraception

Conducted in 2018-2019

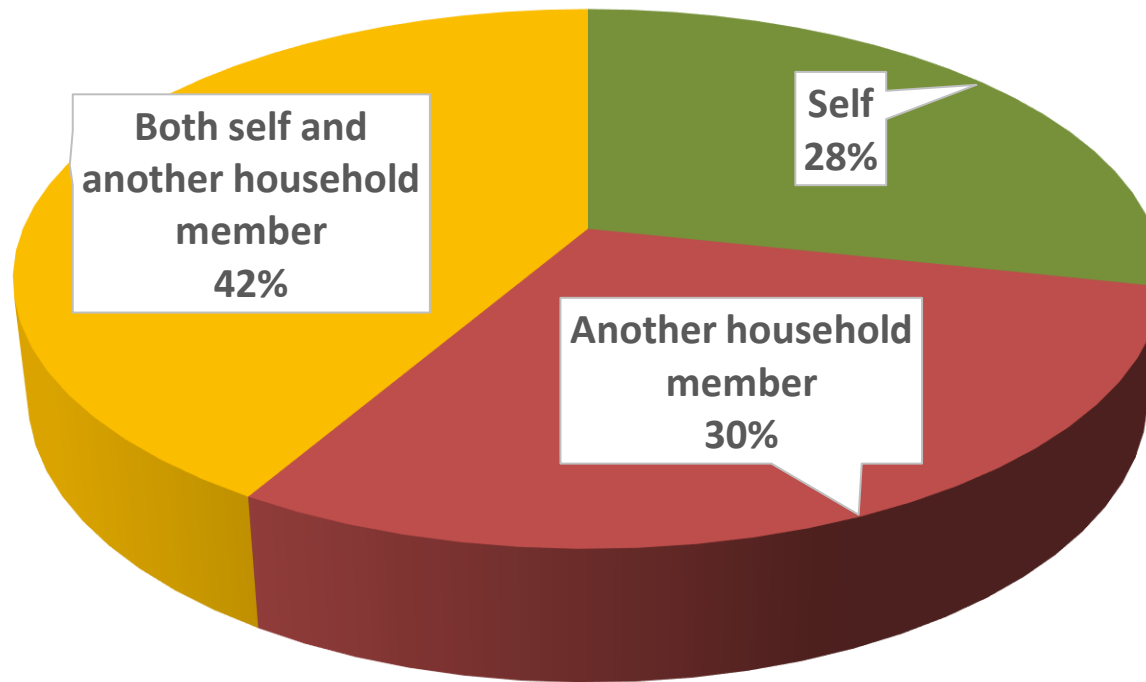
Gaeddert, L. A., Schneider, A. L., Miller, C. N., Monteith, L. L., Brenner, L. A., Katon, J., & Hoffmire, C. A. (2020). Recruitment of women veterans into suicide prevention research: Improving response rates with enhanced recruitment materials and multiple survey modalities. *Research in nursing & health*, 43(5), 538-547.

Monteith, L. L., Holliday, R., Miller, C. N., Schneider, A. L., Brenner, L. A., & Hoffmire, C. A. (2022). Prevalence and correlates of firearm access among post-9/11 US women veterans using reproductive healthcare: a cross-sectional survey. *Journal of general internal medicine*, 37(Suppl 3), 714-723.

Survey of Post-9/11 Women Veterans using Reproductive Healthcare

- **53.98% (95% CI: 48.61, 59.27) reported any firearm access.**

Source of Firearm Ownership among Women Veterans
with Firearm Access





Women Veterans using Reproductive Healthcare

More likely to have household firearms owned by someone else if:

- Married
- Lived with other adult(s)
- Experienced military sexual harassment

Less likely to report personally owning firearms if:

- Experienced past-year IPV



Firearm Storage among Women Veterans using Reproductive Healthcare

Among those with household firearms stored in or around their homes:

- All or some firearms were stored loaded among 40.2%
- All or some firearms were stored unlocked among 36.7%



Women Veterans using Reproductive Healthcare

Storing firearms loaded was:

- More prevalent among women with suicidal ideation (lifetime or past-month)
- Less prevalent among those with other adult(s) living in the home

Storing firearms unlocked was:

- Less prevalent among those with parenting responsibilities



Survey of Previously Deployed Post-9/11 Women Veterans



Methods

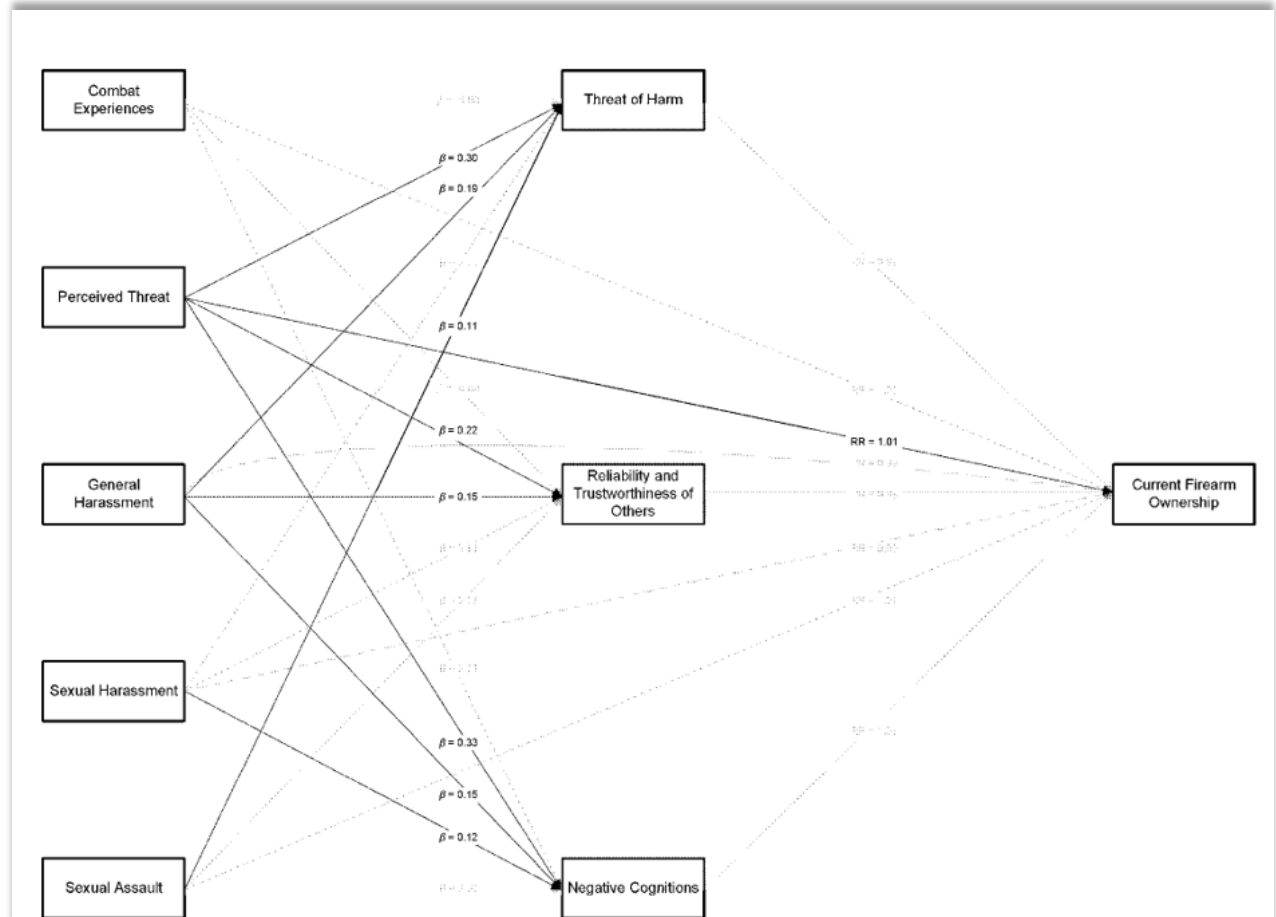
Participants

- 492 previously deployed post-9/11 Veterans
- Administered self-report measures
 - Deployment Risk and Resilience Inventory-2
 - Posttraumatic Cognitions Inventory, Negative Cognitions about the World subscale
 - Posttraumatic Maladaptive Beliefs Scale
 - Firearm ownership questions

Conducted in 2020

Survey of Previously Deployed Post-9/11 Women Veterans

- **Perceived threat experiences during deployment** were associated with:
 - Current firearm ownership
 - Firearm acquisition following military separation
- Safety-related beliefs did not mediate relations between deployment experiences and firearm ownership.
- Perceived threat mediated association between **combat experiences** and current firearm ownership (post-hoc analysis)





Firearm Beliefs & Behaviors during the COVID-19 Pandemic: A Survey of Previously Deployed Post-9/11 Women Veterans

	n	%	95% CI
Change in Firearm Beliefs	69	13.9%	10.9, 17.3
Change in Firearm Behaviors	109	22.2%	18.5, 26.1
Made household firearm(s) more accessible	80	16.3%	13.1, 19.9
Purchased ammunition	59	12.0%	9.2, 15.2
Began carrying firearm (or carried more)	33	6.8%	4.6, 9.4
Loaded previously unloaded firearm(s)	28	5.7%	3.8, 8.2
Purchased firearm(s)	21	4.3%	2.6, 6.5
Other	33	14.5%	10.1, 19.8

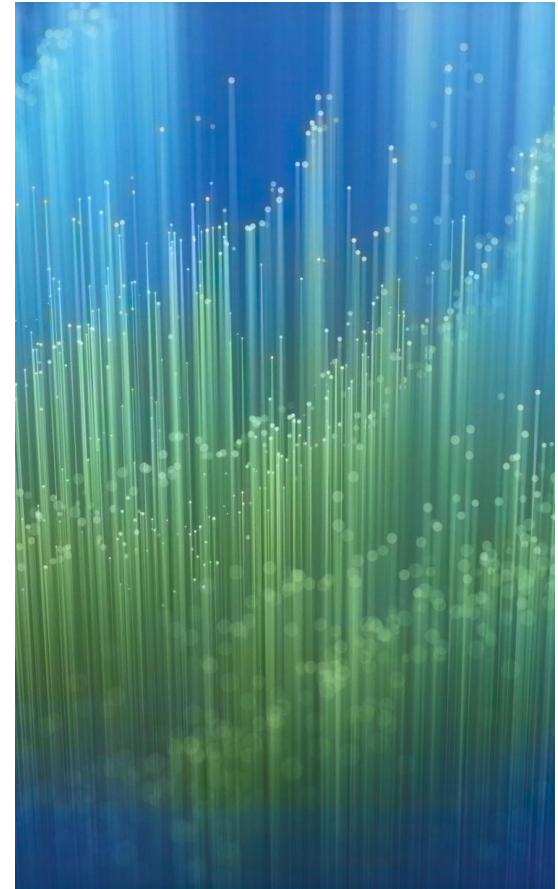


Changes in Firearm-Related Beliefs during the COVID-19 Pandemic among Post-9/11 Women Veterans

Increased beliefs that firearms are necessary and important for protection against others. Feeling unsafe and fearful since the pandemic began.

Feeling unsafe due to COVID-19-related circumstances, such as food shortages, limited availability of essential household supplies, and economic circumstances (e.g., unemployment, financial strain) brought on during the pandemic.

Perceived need for increased protection based on perceived threats posed by other recent events that had transpired since the pandemic began.





Changes in Firearm-Related Behaviors during the COVID-19 Pandemic among Post-9/11 Women Veterans

Protect Self, Family, & Property

Uncertainties during
pandemic

Belief that "everyone has
one so it seems like I
would need one, too"

Personal circumstances:
single, mother with
children, living alone

Self-Defense, Preparedness, Self-Sufficiency

Resource scarcity
and supply chain
issues

Protection against
theft, looting,
or burglary

Prepare for the
worst – always be
ready

Unrest & Protest

Rioting, protests, and
unrest raise concerns

Change in behavior
directly due to unrest,
not necessarily COVID

Racial intersection

Firearm Beliefs & Behaviors during the COVID-19 Pandemic: A Survey of Previously Deployed Post-9/11 Women Veterans

- **PTSD symptom severity** and **military sexual assault** history were associated with higher prevalence of changes in firearm beliefs and engagement in firearm behavior during the pandemic.

Table 6. Log-binomial regression models examining factors associated with women Veterans' engagement in firearm behaviors during the COVID-19 pandemic.

Variable	n	PR	SE	95% CI	p
Race					
White*	319	–			
Black	113	0.9940	0.2040	0.6649, 1.4861	0.9767
Other	60	0.9735	0.2598	0.5770, 1.6423	0.9198
Marital status					
Married/cohabitating*	281	–			
Other	210	0.8388	0.1463	0.5960, 1.1806	0.3135
Minors in home	492	0.9200	0.1555	0.6606, 1.2812	0.6218
Urban residence	489	1.1145	0.2169	0.7611, 1.6321	0.5774
Military sexual trauma ^a					
None*	164	–			
Military sexual harassment	168	1.5185	0.3354	0.9849, 2.3413	0.0586
Military sexual assault	131	1.6228	0.3696	1.0385, 2.5360	0.0335
PTSD (PCL-5)	492	1.0078	0.0037	1.0005, 1.0151	0.0352



In sum, various experiences likely influence women Veterans' firearm access, storage, and perceptions

During military service

- Sexual harassment
- Sexual assault
- Perceived threat experiences while deployed

Interpersonal factors

- If married or residing with other adults
- Parenting responsibilities
- IPV

Mental health

- PTSD symptoms
- Suicidal ideation

Other

- COVID-19 related circumstances and fears



Gender-Sensitive Approach to Firearm Lethal Means Safety

Collectively, findings indicate a need for a gender-sensitive approach to firearm lethal means safety (LMS) initiatives to prevent suicide among women Veterans



[Forum Spring 2018](#)

Firearm Lethal Means Counseling Among Women: Clinical and Research Considerations and a Call to Action

Talia L. Spark, PhD, MS^{1,2,3,4,*}

Chelsea M. Cogan, PhD^{1,5}

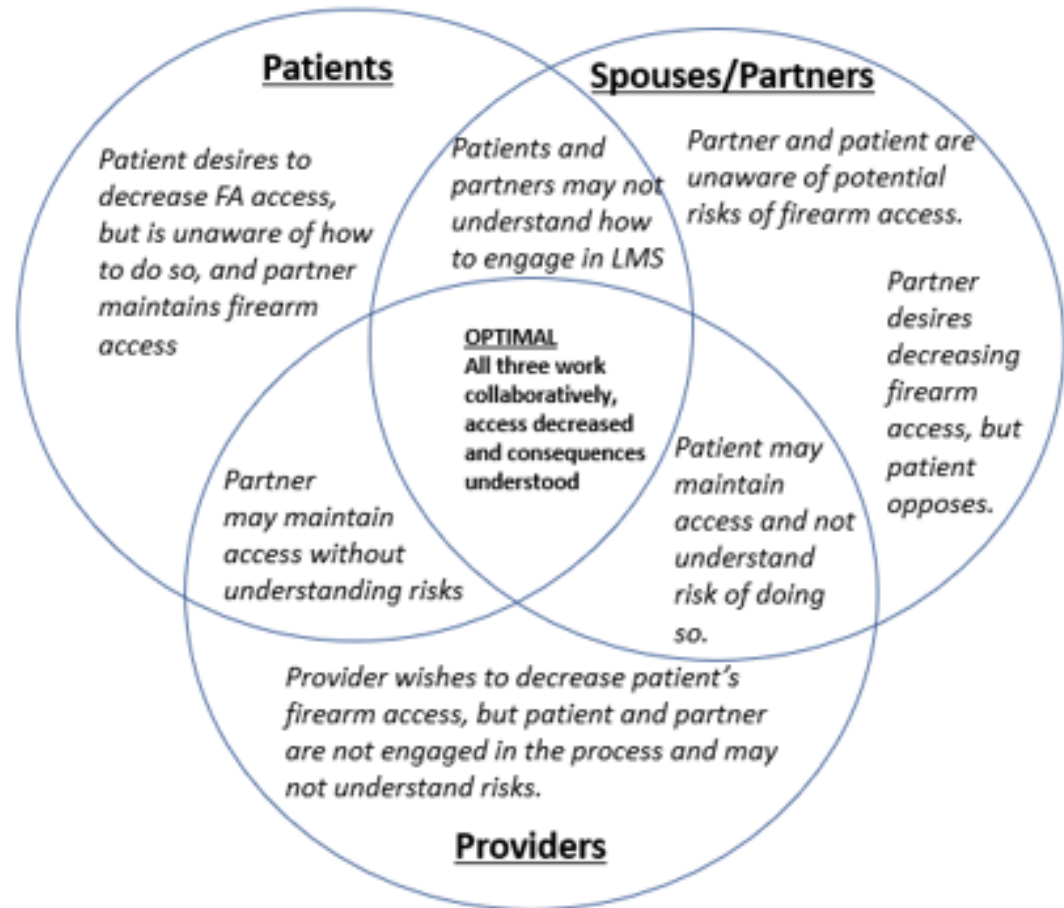
Lindsey L. Monteith, PhD^{1,5}

Joseph A. Simonetti, MD, MPH^{1,6,7}

“Despite these guidelines and the alarming trends in firearm suicide among US women, extant literature has not considered gender as a central issue and offers little guidance on how clinicians should tailor firearm related suicide prevention interventions for women...”

Perspectives of Female Veterans, VHA Providers, and Family Members on Preventing Firearm-Inflicted Suicides among Female Veterans

(HSR&D:
I21HX003074-01A1)



Synergistic need to understand the perspectives of women Veterans, their partners, and healthcare providers to prevent suicide by firearm



Qualitative Interviews (2021-2022)

1. Women Veterans
2. Partners/spouses of women Veterans
3. VHA providers



Women Veterans

(n=40)



Partners/spouses

(n=25)

VHA providers

(n=32)

Aims:

1. Explore women Veterans' **perspectives regarding involving partners in firearm LMSC.**
2. Understand women Veterans' experiences and perspectives regarding their partners' **roles in household firearm access and storage and relational dynamics** in which women Veterans and their partners make decisions about household firearms.



Sample & Methods

- **Recruitment and Sampling**

- Invitation mailings (e.g., VA Corporate Data Warehouse)
- Sought to recruit a sample that was diverse (e.g., demographics, region, firearm ownership)

- **Participants**

- 40 cisgender women Veterans with post-military suicidal ideation and/or suicide attempt(s)
- Currently or previously had household firearms
- Had used VA healthcare (ever)

- **Procedures**

- Qualitative interviews
- Analysis through a constant comparative method



Women Veterans' Firearm Perspectives

Military service and MST

- Military service and identity shape firearms thoughts and beliefs
- MST may lead to firearm ownership and desire to maintain firearm access
- Perceived betrayal stemming from MST experiences may deter disclosure of firearm ownership and lead to mistrust of VHA

Interpersonal influences

- Partner can influence if/how firearms are owned, stored, and used
- Presence of children/grandchildren in the home can be pivotal to storing firearms more securely

Rurality

- Rurality and upbringing also influence women Veterans' firearm perspectives

Suicidality

- Veterans with a history of suicidality may be less willing to own a firearm and may have more desire to reduce their firearms access



Women Veterans' LMSC Experiences

Positive experiences and facilitators

- Trust, rapport, and mutual understanding
- Genuine connection and care
- Active listening
- Attentive to one's concerns and needs
- Clear communication about the rationale for asking about firearms

Negative experiences and barriers

- Impersonal, dismissive, cold interactions
- Feeling unheard, minimized, or treated as "just another patient"
- Fear of firearm seizure, involuntary hospitalization, or legal consequences in disclosing firearm ownership status



Women Veterans' LMSC Preferences

Why important?

- Many acknowledged import of firearm discussions because limiting access to firearms during times of suicidal crisis can prevent suicide
- Others believed that even if you limit access to firearms, many will find alternative means of suicide
- Also expressed concerns about the basis of LMSC



Women Veterans' LMSC Preferences

Who should initiate these conversations?

- Trust was paramount
- Preference for
 - Women providers
 - Peers (i.e., other women Veterans)
 - Providers with military cultural competence



Women Veterans' LMSC Preferences

Where should firearm LMC conversations occur?

- Concerns about:
 - Sexual harassment
 - Perceived lack of women-specific spaces
- Strong support for more women-specific support groups, networks, and programming



Women Veterans' LMSC Preferences

What should be discussed during firearm LMSC conversations?

- Few women in this sample reported ever having had discussions regarding firearms with a clinician
- Simple checklists with "yes" or "no" questions were deemed insufficient
- Women Veterans wanted questions that probed for contextual factors, such as IPV



Women Veterans' LMSC Preferences

How should firearm LMC conversations be framed?

- Conversations should feel normal, dispassionate, and standard
- Frame around safety of the Veteran and those around them
- Assuage fears of firearm seizure, involuntary hospitalization, or legal consequences



Women Veterans' LMSC Preferences

When should firearm LMC conversations occur?

- Regularly
- Like a normal line of inquiry
- Yet should not feel like a "checklist"

WOMEN VETERANS' EXPERIENCES DISCUSSING HOUSEHOLD FIREARMS WITH THEIR INTIMATE PARTNERS

INTERVIEWS WITH 40 WOMEN VETERANS' WITH CURRENT OR PRIOR HOUSEHOLD FIREARM ACCESS:

Questions focused on:

- Roles of Veterans' partners in household firearm access and storage
- Veterans' perspectives regarding including partners in firearm lethal means safety counseling (LMSC)



THREE RELATIONAL TYPES CHARACTERIZED HOW HOUSEHOLD FIREARMS WERE DISCUSSED:

1. Collaborative- Veterans felt they had a voice and were highly involved in decisions around firearms in the home. Willing to involve partner in LMSC.
2. Devalued- Veterans had little to no role in the decision making with household firearms, despite prominent concerns. Low involvement of partner in LMSC, often problematic or unsafe for Veteran.
3. Deferential- High level of trust, Veterans' partner made all decisions around household firearms and Veteran supported this. Willing to involve partner in LMSC.

Polzer, E; Rohs, C; Thomas, S; Holiday, R; Miller, C;
Simonetti J; Iverson, K; Brenner, L; Monteith, L.
Inj Epi. August 2023, doi.org/10.1186/s40621-
023-00452-7



Firearm Injury Prevention Initiative
SCHOOL OF MEDICINE



U.S. Department of Veterans Affairs
Veterans Health Administration





Women Veterans' Experiences Discussing Household Firearms with their Intimate Partners


3 relational types characterized how household firearms were discussed between women Veterans and their partners.



Collaborative



Devalued



Deferential



Relational Types: Distinguishing Characteristics

- Women Veteran's desired involvement and agency in firearm decisions
- Impact of presence of children or grandchildren
- Partner's receptivity to Veteran's mental health or trauma histories
- Partner's willingness to change household firearm storage and use
- Relationship compatibility and quality
- Potential to involve partner in firearm LMSC



Characteristics that Distinguish Firearm Decision-Making Relational Types between Woman Veterans and Their Partners

RELATIONAL TYPE	Woman Veteran's Desired Degree of Involvement	Woman Veteran's Voice or Agency in Firearm Decisions	Partner Receptivity to Mental Health and Trauma History of Women Veteran	Impact of Presence of Children or Grandchildren	Partner Willingness to Change Firearm Storage or Use	Woman Veteran's Desire to Include Partner in Firearm LMSC
Collaborative	Active, engaged, motivated	Agentic, optimistic, confident	Responsive, attuned, respectful	Positive, motivates change	High	High, if not already being done
Devalued	Overruled, disregarded, minimized	Denied, ignored, gaslit	Indifferent, contributing, disrespectful	Dismissive, underplays seriousness	Low, unwilling, contemptuous	Low, especially in context of IPV
Deferential	Passive, indifferent, due to high level of trust in partner	Assured, hopeful, confident	Understanding, open, compassionate	Hypothetical, would motivate action	Hypothesized as high, trust in partner to do so	High, albeit hypothetical



Collaborative

- Sense of agency in shared decision-making regarding household firearms
- Confident in partner's willingness to discuss storage and change storage practices
- Presence of children in home motivated desire to change firearm storage
- Partner supportive regarding mental health and trauma history
- Motivated to include partner in LMSC conversations

*"I was battling severe depression and there was a moment I considered using [his firearm]...**after that, talking to my ex-husband, we got rid of it.**"*

*"I just told her because of my mental illness, I can't trust myself, let alone trust myself with guns. Not that I'm suicidal all the time, I mean I have been suicidal in the past. But at that point, it becomes an impulsive act...**we talked about it and I told her that, and she agreed, and she understands, and she's doing what she can to keep things safe.**"*



Deferential

- Deferred firearm decisions to their partners, predicated on a high degree of trust
- Thus were less involved in household firearm decisions
- Hopeful that if they had future concerns, their partner would engage in a collaborative discussion and could be included in LMSC discussions

“I trust him. But I think it’s the individual and who they trust the most... because not everyone has a husband they trust as much as I trust mine, you know?”

“I know how to use it, I just don’t wanna touch it.”

Devalued

- Minimal influence on household firearm decisions, despite having safety concerns. Often overruled or disregarded
- Partner dismissive of Veteran's mental health concerns and unwilling to change storage practices
- Partner downplayed or ignored presence of children in home as a reason to change storage
- IPV often a contextual factor
- Low desire to include partner in LMSC

*“...there’s such a huge dynamic in a relationship when someone has a deadly weapon in the home. And that’s even more so when it’s against your wishes. **You would prefer for that weapon to not be there, but yet they are, it’s still there. And you definitely don’t feel comfortable to speak up.**”*

“Whenever we were having an argument, he would go back and check on his guns, take them out and show me he had it, and that pretty much ended the argument, he got his way.”



Conclusions

- Different relational factors influence how women Veterans and their partners discuss and address household firearms, and women Veterans' desire to involve their partners in firearm LMSC
- Recognizing these different relational types may help healthcare providers in tailoring firearm LMSC to women Veterans
- Research is needed to determine optimal strategies to conduct firearm LMSC with women Veterans in each of these relational types



Partners and Spouses' Perspectives

- Were frequently the owners of household firearms
- Influenced firearm access (e.g., use, storage, accessibility)
- Attuned to the typical behaviors of their partners and could readily detect signs of distress
- Most had never had a formal conversation about firearms and suicide risk, yet intuitively took steps to mitigate access
 - Increased safe storage practices, moved firearms out of the home if necessary
- Many requested guidance on how to be more engaged in this process



Conclusions


- Knowledge regarding women Veterans' firearm experiences, including potential barriers and facilitators to LMSC, as well as preferences has increased.
- Such knowledge can be applied to tailor firearm LMSC approaches to women Veterans' experiences and needs.
- Continued research can help to further inform such approaches.
- Intersectional lens will be important for future research
 - Race/ethnicity
 - Sexual orientation
 - Communities in which one resides



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Preventing Suicide Among Women Veterans: Gender-Sensitive, Trauma-Informed Conceptualization

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Abstract

Purpose of Review

There is growing concern regarding suicide among women veterans, who have experienced an increase in suicide rates that has exceeded that reported for other US adult populations. Recent research has bolstered understanding of correlates of suicide risk specific to women veterans. Yet most existing suicide prevention initiatives take a gender-neutral, rather than gender-sensitive, approach. We offer clinical considerations and suggestions for suicide prevention tailored to the needs, preferences, and experiences of women veterans. Discussion is framed around the White House strategy for preventing suicide among military service members and veterans.



Supporting Providers Who Serve Veterans

Free consultation and resources for any provider in the community or VA who serves Veterans at risk for suicide.

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Risk assessment



Lethal means safety counseling



Conceptualization of suicide risk



Best practices for documentation



Strategies for how to engage
Veterans at high risk



Provider support after a suicide
loss (Postvention)



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