



Lethal Means Counseling for *Military Women*

Current Research & Clinical
Implications



LEARNING OBJECTIVES



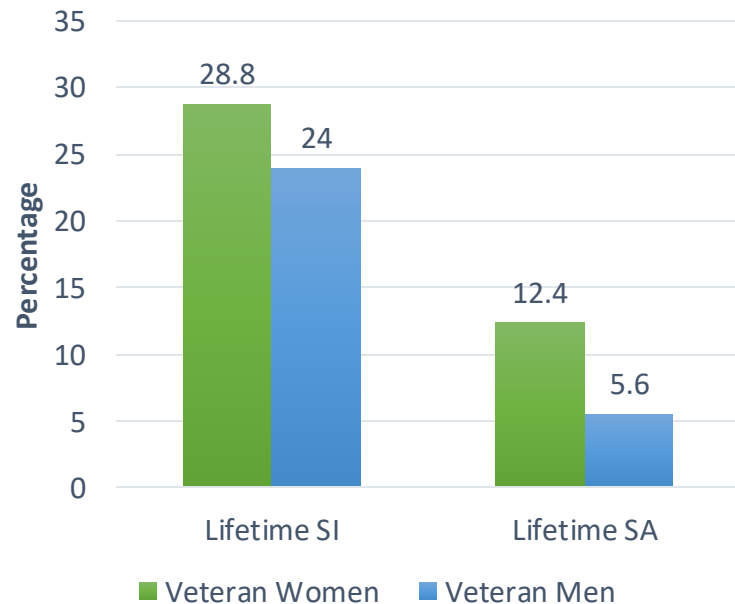
- 1) Describe the rates of suicide behaviors in military-affiliated women.
- 2) Define lethal means safety.
- 3) Identify at least 3 clinical recommendations for engaging in lethal means safety with military-affiliated women.

Points to Note...

- The existing literature focusing on suicide and/or lethal means counseling in military women is much more limited than that on military men.
 - Even less is known about military nonbinary or transgender individuals.
- Lethal means counseling best practices must take a gender-informed, non-reductive approach.
- While the recommendations that follow are relevant when addressing lethal means with military-affiliated individuals of *any* gender, they are especially salient when working with military women given what we know from the existing literature.

Suicidal Ideation and Suicide Attempts

Rates of lifetime suicidal ideation (SI) and suicide attempt (SA) are significantly higher for veteran women compared to veteran men.¹



Veteran women are
1.35X MORE LIKELY
to attempt suicide in their lifetime than
nonveteran women.

¹Hoffmire et al., 2021

Suicide Deaths

- Suicide is the **2nd** leading cause of death among active-duty women¹ and veteran women ages 18-34.²
- Firearms are most common means of suicide death among both active duty¹ and veteran women.²
- Poisoning suicide mortality rate is higher for female veterans vs male veterans.²

¹Kaplansky & Toussaint, 2024; ²US Department of Veterans Affairs, 2024

Suicide Deaths in 2022:

Military Women vs Non-Military Women

Veteran Women

- Age-adjusted suicide rates for veteran women were 92.4% higher than non-veteran women.²
- Means-specific suicide death rates were higher for veteran women compared to non-veteran women:²

Firearm

144% higher

Poisoning

76% higher

Suffocation

24% higher

Active Duty + Veteran Women

- Military-affiliated women are more likely than non-military women to die by suicide via firearm.¹

51.5% > **32.5%**

Military-affiliated Women *Non-military Women*

¹CDC National Violent Death Reporting System; ²US Department of Veterans Affairs, 2024

LETHAL MEANS COUNSELING



A collaborative therapeutic process for
increasing

TIME and **DISTANCE**

between a person in crisis and an
identifiable method of suicide.

Military-Affiliated Women & Lethal Means Counseling: *Clinical Recommendations*



Recommendation #1

Always ask about
firearms.
This includes both
ownership and ***access***.

Firearm Access is Rarely Assessed

- Of 1,840 women who reported living in a home with at least one firearm, only **8.2%** reported having a health care provider ask about firearm safety.¹
- In a review of VHA primary care documentation, **less than 10%** of women OEF/OIF veterans with a positive suicide risk assessment were asked about firearm access.²

¹Conner, Azrael, & Miller, 2021; ²Dobscha et al., 2014

Firearm Access is Rarely Assessed

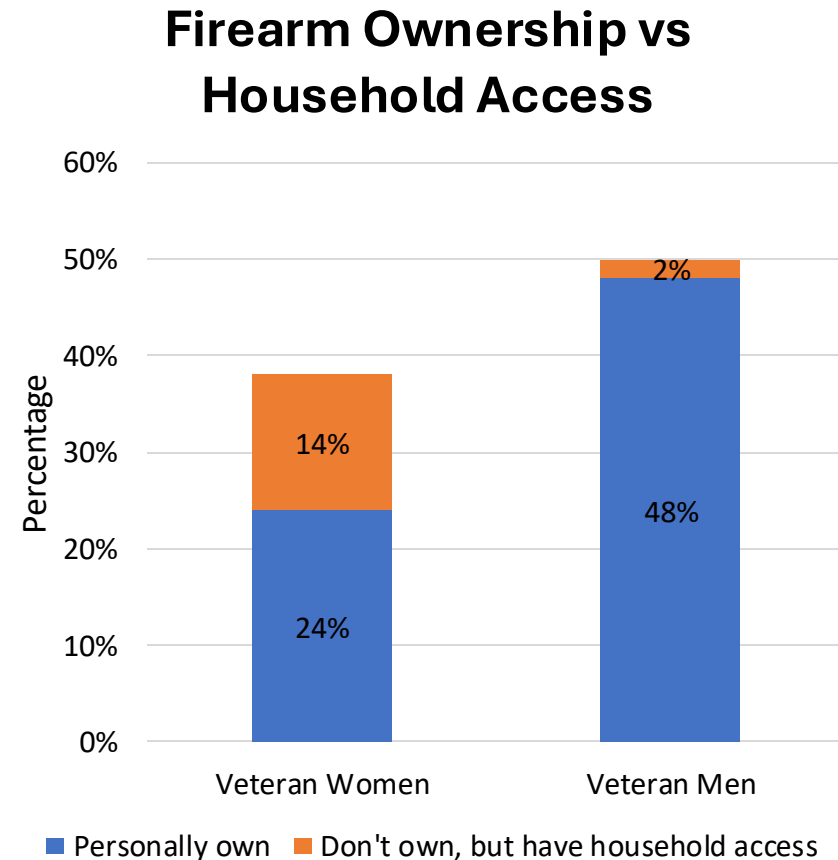
WHY?

- Firearm access is rarely assessed across ALL genders.
- Gendered stereotypes about firearm ownership.
- The “Gender Paradox of Suicidal Behavior”¹
 - Women have higher rates of suicidal thoughts and suicide attempts, yet men are more likely to die by suicide.
 - Largely attributed to men using more lethal means like firearms, while women are more likely to use overdose or poisoning.
 - This paradox, however, does not take into consideration important cultural factors that can impact beliefs about, and availability of, lethal means for suicide.

¹Canetto & Sakinofsky, 1998

Firearm Ownership vs Access

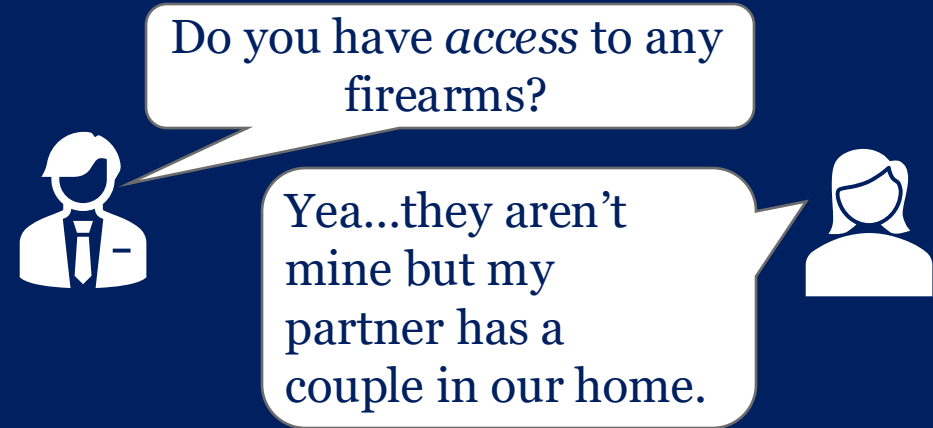
*While Veteran women are **less** likely to own a firearm than Veteran men, they are **more** likely to live in a home with firearms they do not own.*



Firearm Ownership vs Access

- In a sample of 350 post-9/11 women veterans, 54% reported having firearm access:
 - 70% of those with access reported personally owning a firearm, with the remaining 30% reporting access to a household firearm they did not own.
 - 90% reported firearms were stored in or around the home.
 - 40% reported at least one was stored loaded.
 - 37% reported at least one was stored unlocked.

Assessing for Firearm Access



*Military-affiliated women may **not always report** access to firearms if only asked about ownership.¹*

*Asking about **access** allows for assessment of both availability and ownership.*

¹Monteith et al., 2022

Recommendation #2

When firearms (or other lethal means) are not personally owned, ensure lethal means counseling approach is sensitive to relationship dynamics.

When a household firearm is owned by another...

Providers must be sensitive to relationship dynamics that can impact decisions around firearm access and safety practices.

Collaborative

High sense of trust in partner and agency in decision-making, comfortable expressing concerns and involving partner in lethal means counseling.

Deferential

High degree of trust in partner, generally indifferent about firearm storage/safety practices, although comfortable involving partners in lethal means counseling.

Devalued

Low levels of trust in partner, no agency in decision-making, concerns often minimized or ignored, often characterized by Intimate Partner Violence.

When a household firearm is owned by another...

- Assessment of these dynamics is essential for tailoring lethal means counseling discussions.
- Questions to consider:
 - *How are decisions regarding firearm storage and safety practices made?*
 - *Who makes these decisions?*
 - *What is your comfort level with current storage/safety practices?*
 - *How comfortable would you feel suggesting changes to the current firearm storage and safety practices with your partner?*

This assessment is important when discussing household access to *any* lethal means (e.g., medications, other weapons).

When securing means is not an option...

- Consider other strategies to put time and distance between client and lethal means, such as:
 - Requesting that means are stored in an unknown location
 - Keeping a Safety Plan copy and/or reasons for living (e.g., photos, personal notes) near means
 - Ensuring the Internal Coping Strategies section of the Safety Plan includes activities that involve getting out of the house

Recommendation #3

Explore motivations
for firearm
ownership.

Motivations for Firearm Ownership

- While motivations for owning firearms are often nuanced and multifaceted, findings across several studies suggest a primary reason for women owning firearms is for protection.^{1,2,3}
- Military training and service often reinforces the use of firearms for protection.

“By assessing not just *if* a Veteran owns a firearm, but the firearm’s ***use, meaning, purpose, and function***, providers can gain insights into what storage recommendations or changes may be best for the Veteran, as well as potential barriers and facilitators to doing so.”⁴

¹Horowitz, 2017; ²Parker et al., 2017; ³Wolfson et al., 2020;

⁴Polzer et al., 2023

Storage Practices

- Firearms owned for protection are more likely to be stored unsecured (unlocked and/or loaded).
- Among Veteran women firearm owners, approximately 3 out of 5 (59%) reported storing at least one firearm unsecured.
 - This study did not examine motivations for ownership stratified by gender.
 - This does not account for firearms in the home that are owned by someone else.

When Firearms Are Owned for Protection

Explore storage practices that honor this motivation for firearm ownership while also increasing safety for oneself and others.

"Are there other ways to protect your home that don't also pose a risk to yourself (or loved ones)?"

- Upgrading locks, exterior lighting
- Visible home security system
- Security signage on property
- Owning a dog (or an alarm that sounds like a dog)
- Pepper spray

Recommendation #4

Assess for current and
historical
interpersonal violence.

Interpersonal Violence

- Rates of interpersonal violence, including Military Sexual Trauma and Intimate Partner Violence, are high amongst military-affiliated women.
- Women who have experienced interpersonal violence are more likely to:
 - Experience suicidal thoughts and/or behaviors.
 - Own firearms for reasons of self-protection.
 - Have beliefs related to mistrust or betrayal that may impact receptiveness to lethal means counseling.

Assessing for Interpersonal Violence



Informed Consent

- Discuss purpose of screening and normalize assessment
- Review documentation practices and limits of confidentiality
- Ensure they are in a safe place (if telehealth)



Standardized Screening Tools

- Normalize the assessment
- HITS or E-HITS
- WAST
- PVS
- VA MST Screening Questions



Resources

- National Domestic Violence Hotline
- VA MST Resources
- Vet Centers
- Cohen Clinics
- Information on legal action



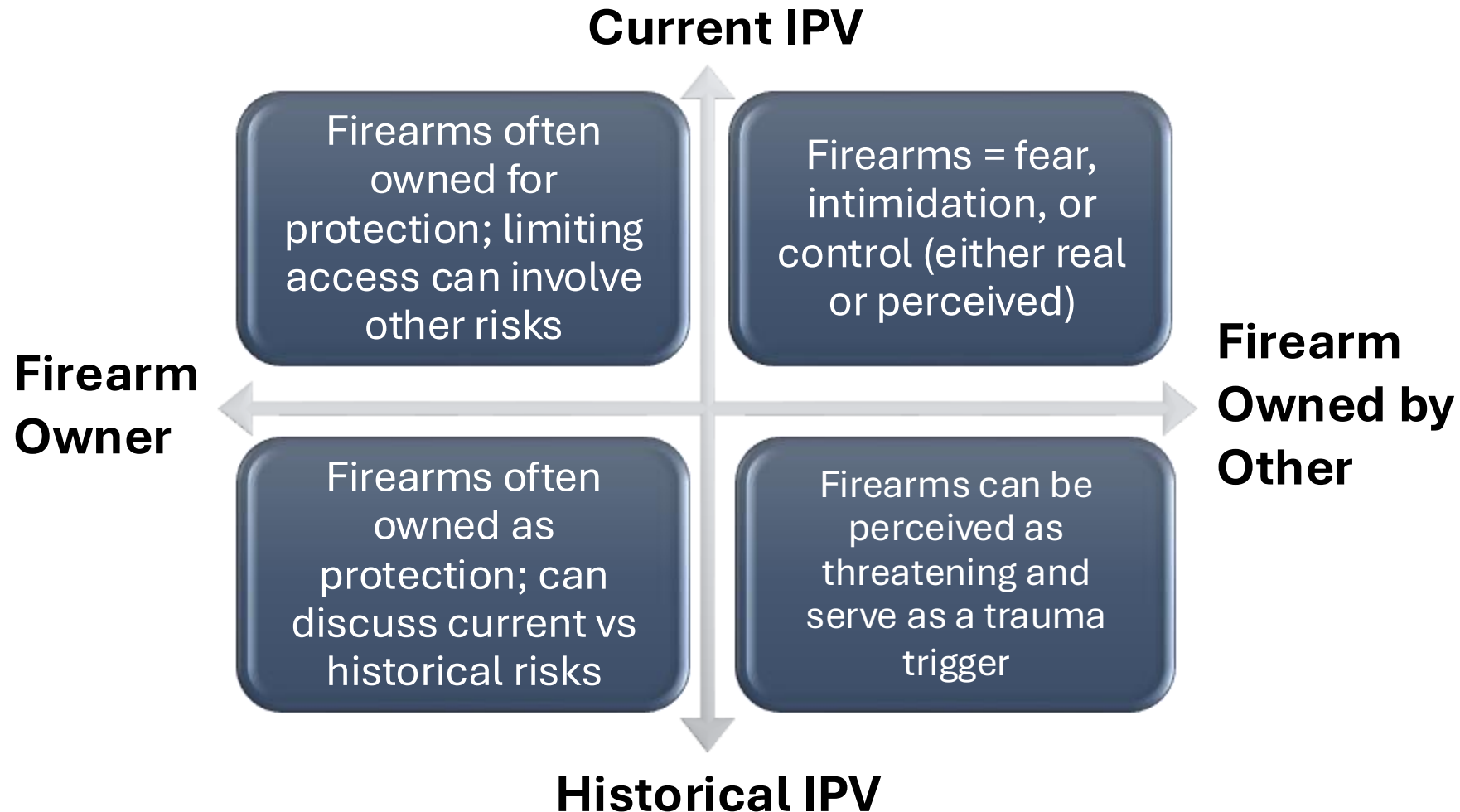
Thoughtful Documentation

- Only document what is necessary in the EHR
- Use person-first, recovery-oriented language

Interpersonal Violence: *Implications for Lethal Means Counseling*



*Lethal Means Counseling must use a **trauma-informed approach** that considers the individual's lived experience with interpersonal violence.*



Recommendation #5

Apply lethal means
counseling best practices to
other identified and/or
accessible means for suicide.

Other Lethal Means

- Approximately half of deaths by suicide in women veterans involve other means.
- While limited research has examined means other than firearms in military-affiliated women, several of the aforementioned strategies can be adapted and applied.

Always assess for access to other lethal means.

Consider relationship dynamics when means are owned/controlled by others.

Encourage disposal of lethal means when possible and willing.

Explore motivations for retaining access (if unwilling or unable to fully remove means).

Brainstorm creative strategies for putting time and distance between client and means for suicide.

Recommendations

Always ask about firearms. This includes both ***ownership*** and ***access***.

When firearms (or other lethal means) are not personally owned, ensure lethal means counseling approach is sensitive to relationship dynamics.

Explore motivations for firearm ownership.

Assess for current and historical interpersonal violence.

Apply lethal means counseling best practices to other identified and/or accessible means for suicide.

Lethal Means Counseling Guidance

- <https://www.healthquality.va.gov/guidelines/MH/srb/LethalMeansProviders20200527508.pdf>
- <https://www.mirecc.va.gov/visn19/lethalmeanssafety/>
- <https://www.mirecc.va.gov/visn19/lethalmeanssafety/counseling/>

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