

Lethal Means Safe Storage for Veteran Suicide Prevention Act

Senator Angus King (I-ME)

Background: Suicide is the second leading cause of death in veterans under age 45¹ and the vast majority of veteran suicide deaths—72% in 2021—involve a firearm.² Suicidal crises are usually brief and 48% of survivors of nearly lethal suicide attempts reported that it took less than 20 minutes for them to act on a suicidal impulse and 24% acted on that impulse in less than five minutes.³ Reducing immediate access to lethal means could be critical in efforts to reduce suicide death, especially among veterans.

The VA has an existing program to allow veterans who have been assessed as a high or intermediate risk for suicide, with access to firearms, and who meet other requirements to receive a lock box from the VA's Prosthetics program. However, given that only about 35% of veterans use the VA for their health care needs,⁴ there is a large population of veterans that might benefit from safe storage options that do not have access to this program.

Many veterans may not be comfortable seeking care from mental health professionals, but they still can struggle with mental health needs. That is why it is important for all providers, regardless of their specialty, to be able to have basic conversations with patients about mental health and suicidal ideation, should it come up during appointments. The VA requires all providers to do a one-time Lethal Means Safety Education and Counseling for Providers Course, but providers in the VA's Community Care Network do not have to do this training at all. Increasing the frequency of this training to require it annually for both VHA providers and Community Care Providers would ensure that, if a veteran raises mental health concerns during a non-mental health appointment, providers can still offer some basic level of support.

The Lethal Means Safe Storage for Veteran Suicide Prevention Act would:

- Require VHA providers, including Vet Center counselors, to do annual lethal means safety training;
- Require providers within the VA's Community Care Network to do annual lethal means safety training;
- Require the VA to work with VSOs to provide information to veterans related to lethal means safety and safe storage options. Specifically, efforts would focus on suicide prevention and help veterans understand why their health care providers might ask about their access to lethal means—including firearms and medications—and highlight the importance of planning ahead to put space and time between thoughts of self-harm and access to lethal means; and
- Create a grant program—modelled after a program implemented in Utah by the Utah Department of Veterans & Military Affairs, Utah Department of Health and Human Services, and the Utah National Guard⁵—to provide free firearm lock boxes to any veteran who wants one.
 - The program would be authorized at \$2 million annually for five years, and would provide grants of up to \$100,000. Grants would be available to states, VSOs, non-profits, and tribes.
 - No names or personal information would be collected and veterans seeking lock boxes will not be asked about their gun ownership status.
 - In order to obtain a lock box, a veteran will only need to present their DD-214 or other approved method of confirming their veteran status.

Endorsements: DAV, VFW, American Legion, Wounded Warrior Project, Brady Campaign, Everytown, American Foundation for Suicide Prevention, American Psychiatric Association, National Alliance for Mental Illness (NAMI), NAMI-Maine, Spurwink.

¹ *Veteran Suicide Statistics*, Stop Soldier Suicide, <https://stopsoldiersuicide.org/vet-stats> (accessed June 18, 2024).

² *2023 National Veteran Suicide Prevention Annual Report*, VA Suicide Prevention, Office of Mental Health and Suicide Prevention. November 2023. Page 27.

³ Simon, OR, et al. "Characteristics of impulsive suicide attempts and attempters." *Suicide & Life-Threatening Behavior*, vol. 32 1 Suppl (2001): 49-59. <https://pubmed.ncbi.nlm.nih.gov/11924695/>

⁴ For FY24, total veteran population is estimated to be 17,916,954; estimated total number of patients receiving care at VA is 6,377,593. Panangala, Sidath Viranga and Sussman, Jared S. "Introduction to Veterans Health Care." <https://www.crs.gov/Reports/IF10555?source=search> Updated June 28, 2023 (accessed June 18, 2024).

⁵ *Gun Safes for SMVF*, <https://veterans.utah.gov/governors-challenge/lethalmeans/gunsafesmvf/> (accessed June 18, 2024).