

**Written Testimony of  
Lt Col James Lorraine, USAF (retired)  
President & CEO  
America's Warrior Partnership  
Augusta, GA**

**Before the  
U.S. Senate Committee on Veterans Affairs**

**September 9, 2020**

**Testimony on "S.785: Leading the Way to Comprehensive Mental Health Care and Suicide Prevention for Veterans".**

Chairman Moran, Ranking Member Tester, and Members of the Committee. Thank you for the invitation to testify today. I would like to ask that my written testimony and our Joint letter of August 18, 2020 be added for the record.

Since the 116<sup>th</sup> Congress convened on January 3<sup>rd</sup>, 2019, the President, Department of Veterans Affairs, and both the Senate and House Veterans Affairs Committees committed to addressing the veteran suicide epidemic. In those 615 days, approximately 12,300 veterans died by suicide, and despite increasing the VA's suicide prevention budget to stem veteran suicides, the number continues to rise.

In the last eighteen months, the President signed an executive order to prevent veteran suicide, the VA established the PREVENTS Task Force, and the Senate passed one of the most impactful veteran suicide prevention bills of the last ten years, yet we continue to lack a comprehensive, integrated law that can be implemented by the VA to end veteran suicide.

In early August, America's Warrior Partnership and thirty of our community partners provided this committee and the House Veterans Affairs Committee a letter strongly supporting Senate Bill 785, also known as the "Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019."

Senate Bill 785 is essential in both breadth and depth to getting upstream of veteran suicide. Section 201 provides structure and authorization of community grants similar in structure to the highly successful Department of Veterans Affairs "Supportive Services for Veterans and Families" Program, also known as "SSVF." These grants virtually ended veteran homelessness in many communities, and they also created an environment of community collaboration by integrating government and non-government resources around the crisis of veteran's homelessness. Additionally, the bill contains critical community enablers such as next-level research studies correlating opioid related deaths; pilot programs providing veterans access to complementary and integrative health services through animal therapy, agri-therapy, sports, post-traumatic growth, and recreation therapy; directs the VA to bolster their research on mental health biomarker work to increase the accuracy of care and to improve the treatment of mental health conditions; and increases the capacity of the VA and Vet Center counselors.

Solving the veteran suicide crisis requires a holistic solution. Veterans, their families, and the Nation are losing hope that the government will act, especially during these unknown times. You've done your job, and I hope the House of Representatives will do their job.

The need is now and the need is great. America's Warrior Partnership is leading a nation-wide veteran suicide study called "Operation Deep Dive." In partnership with the University of Alabama and funded by the Bristol Myers Squibb Foundation, this four-year study is showing that some states are under-counting veteran suicides by as much as 25 percent. To date, we've learned that the suicide rate among those dishonorably discharged is far less than that of an honorably discharged veteran; veterans younger than 64 die from all causes of death at a rate 4 times greater than non-veterans, and sadly, veterans between the ages of 18-34 die at a ten-times greater rate than non-veterans. We are diving deeper into data that indicates 25% of newly transitioning veterans who die within 5 years of discharge die by suicide. I would like to publicly thank Dr. Karin Orvis and her suicide prevention team at the Department of Defense for partnering with us as we peel back another layer of the suicide onion. Without DoD, these findings would not be possible. The military service experience data we've correlated to the deaths of veterans will provide us the ability to implement preventive measures tailored to the community and the individual. There is more work to be done and I encourage the committee to push for greater data sharing between public and private initiatives. Operation Deep Dive is currently working with four state data-sets (Florida, Minnesota, Massachusetts, and Alabama) with another four pending (North Carolina, Wisconsin, Montana, and Tennessee). Prospectively, we are working with thirteen states (Florida, Alabama, California, New York, South Carolina, North Carolina, Indiana, Minnesota, Ohio, Kentucky, Georgia, Texas and Nevada) and we welcome incorporating the Committee members states in the future.

Operation Deep Dive seeks to provide communities insight to help them get upstream of veteran suicide and to increase the hope and quality of life for veterans and their families. Getting upstream is reducing homelessness, increasing access to reliable transportation, maximizing education opportunities, working in sustainable employment, increasing volunteer opportunities, and having access to 22<sup>nd</sup> century physical and mental health care. Getting upstream is achieved when veterans look to the future with hope. America's Warrior Partnership leads the nation with our Community Integration approach refined with the assistance of the Center for Disease Control goes beyond a Collective Impact approach by not only focusing on coordinating community services, but focusing on relationship building with community veterans and their families. Getting upstream is more than a website, a collaborative network, or waiting for the veteran to reach out for assistance. We have seen great success in urban regions such as Orange County California, Greenville South Carolina, or Buffalo New York and we're very proud of our Community Integration work in the Navajo tribal areas of Arizona. There are many emerging programs gaining traction in preventing suicide. One program that we are proud to partner with is ETS

Sponsorship. This program created by a Department of Veterans Affairs psychologist mirrors the Department of Defense Permanent Change of Station sponsorship program providing a smooth transition to new duty stations. This program seeks to establish volunteer sponsors in communities across the nation to provide proactive engagement to transitioning service members and their families. But again, on this issue, time is not our friend.

Our Nation's veterans and their family provided their opinion through our program Mission Roll Call. We asked over 600,000 veterans and their families, we learned that 95% do not believe our country is doing enough for the mental health of our Veterans; 77% do not believe dishonorably discharged service members should receive VA healthcare, and 86% feel that the VA must partner with non-government organizations to prevent veteran suicide. Mission Roll Call seeks to unify the opinions of veterans and their families about issues they identify as important.

In summary, the time to act is now! The Senate Bill 785 is the right bill for right now. I join the leaders of our country's largest veteran community collaboratives in urging the House of Representatives to adopt and pass Senate Bill 785 immediately.

I am hopeful. Hopeful for our military, hopeful for our veterans, and hopeful for our success in ending veteran suicide. Thank you for the opportunity to present to the committee.