

Written Testimony of
Melissa "Missy" Meyer
Director of Community Integration
America's Warrior Partnership (AWP)

**U.S. House Committee on Veterans Affairs
Subcommittee on Health**

December 12, 2023

10:30am, Cannon House Office Bldg., Room 360

Oversight Hearing:

**“SSG Fox Suicide Prevention Grants: Saving
Veterans’ Lives Through Community Connection.”**

Chairwoman Miller-Meeks, Ranking Member Brownley, and other honorable members of the Subcommittee

Thank you for the honor to testify before the House Veterans Affairs Subcommittee on Health. The issue of Fox Grants and ending veteran suicide means a lot to me personally, and my colleagues at America's Warrior Partnership (AWP).

The SSG Fox Suicide Prevention Grant, from the original idea and inception in this Committee, had a singular goal: find veterans in the community that are in need and help them.

While Congress has been very thoughtful and deliberate in crafting the law and providing generous funding, it is a big program that is still working through growing pains and in need of minor reforms and fixes to ensure it can meet the intended goal.

As a Fox Grant recipient that has done extensive work in the community, the process for how the grant was awarded was complex, time consuming, and met with repeated delays by the VA.

However, in September 2022, America's Warrior Partnership (AWP) began conducting outreach utilizing Fox Grant funds. This outreach is targeted at all veterans in each of our five communities across the country in alignment with AWP's upstream Community Integration (CI) Model. The idea behind CI is to find veterans that are not engaged in services and may have no connection to resources. This includes both veterans typically considered "at risk" which the Fox Grant has identified as primary candidates for outreach as well as community leaders, professionals, volunteers, etc. that may not currently need services or believe they do not qualify for benefits. Our mission is to partner with communities to prevent veteran suicide. Our programs accomplish this by starting at the community level and understanding the unique situations of veterans and their families. We connect local veteran-serving organizations with the appropriate resources, services, and partners that they need to support veterans, their families, and caregivers at every stage of veterans' lives. Our ultimate goal at AWP is to improve the quality of life

for veterans and to end veteran suicide by empowering local communities to serve them proactively and holistically before a crisis occurs.

In March of 2023, AWP was able to begin fully assessing and enrolling active service members, veterans, veteran spouses and caregivers in the SSG Parker Gordon Fox Suicide Prevention Grant Program. Since that time, AWP has completed intakes and suicide risk assessments, as required by the VA, via the Psycho-Social Assessment and Columbia-Suicide Severity Risk Scale for 1,057 warriors. 185 of those men and women have indicated some level of suicide risk. This means over 17% of those 1,057 veterans had suicidal ideations ranging from wishing they could fall asleep and not wake up to having active thoughts of taking their own life with a plan and an intention to act on that plan and/or having made a previous attempt to end their own life.

Once AWP knows a veteran or service member is in crisis, we must find them local mental health resources. In a crisis, this is achieved with a call to the “988” crisis line and a referral to their local counseling center. Veterans who do not wish to work with the VA are referred to community based mental health resources. There is no expedited care for Fox participants, there is no special number or intervention to get them services immediately.

As an example, on November 13th a veteran called AWP’s “The Network” with an active plan to take his own life. He was disillusioned with his care at the VA in New York but had an appointment with the Fort Meyers VA for a medical appointment the following morning. He was “tired of taking so many pills for my PTSD and Bi-Polar that the VA doctors keep giving me.” I called the Fort Meyers, FL Suicide Prevention Coordinator as required by the Fox Grant. I left several messages including the information that we had an actively suicidal individual that needed services. AWP was hoping to coordinate a mental health referral while the vet was in the VA for his other appointment. This call has still not been returned. The Network was able to connect with the 988 hotline and continued working with the veteran. He stated that he loved his girlfriend too much to kill himself, and we are still talking with him today to help improve his quality of life.

This is one of the major shortcomings of the SSG Fox Suicide Prevention Grant Program. There is no “program.” It is a transaction. It is a VA-sponsored phone call and assessment with no plan on the backend for care, or funding for connected services. As stated before, AWP’s mission is to assist veterans and end veteran suicide. We would serve these warriors exactly the same way even without Fox funding. However, these assessed veterans are not offered expedited care or a same day appointment for a mental health evaluation.

The next step in the Fox Grant, following the intake and suicide risk assessment, is to create a holistic service plan based around the veteran’s needs and wants. We set goals and connect each veteran to various services as needed. Then AWP is mandated to conduct a series of additional assessments with each participant. There are nine forms over all that must be complete for the participant to be enrolled. The Veteran (or Veteran Family Member) Intake Form, Columbia-Suicide Severity Rating Scale, Psycho-Social, Socio-Economic Status, Personal Health Questionnaire, Participant Communication Confirmation Form, General Self-Efficacy Scale, Interpersonal Support Evaluation and Warwick-Edinburgh Mental Well-Being Scale. In addition, there is a service attendance form, referral form and various others that are submitted monthly or as needed.

The Columbia Scale has been a life saving measure since AWP integrated the questions into every warrior intake. This allows us to take a veteran reaching out for rental assistance and ensure they do not need immediate mental health support as well. In my opinion, this is the biggest success of the Fox Grant. All grantees are required to “ask the question.” This gives our veterans the opportunity to express any ideations to someone they have already connected with.

Once the participant has received support and been connected to referrals, AWP is required to readminister the baseline assessments: PHQ-9, ISEL-12, GSE, SES and Warwick. AWP has only successfully completed both sets of assessments with 6 of our 180 Fox Eligible participants largely due to lack of engagement.

In addition, the program itself needs metrics and accountability. There is no clear measure of success for the Fox Grant program. The grantee has key performance indicators set forth in their grant agreement, but the Fox Program overall has no

measurable indicator of success other than individual improvement that is supported solely by individual organizations. How will we use this data once we have it? What will the VA do differently with the knowledge from these assessments? We already know that depression, isolation and financial stressors are risks for suicide. How does continually assessing known stressors better our prevention model?

With this in mind, there are several recommendations below that may be good to focus on during upcoming discussions about changes and fixes to the program.

First, AWP is often asked about the Fox Program and what it entails. The honest answer is this program is a data gathering mission that gives the veteran the opportunity to share their feelings and experiences to help the VA improve future prevention measures. Yet there is no direct benefit to the veteran, and it may even be a detriment. These assessments ask people that are actively in crisis to elaborate on feelings of isolation, depression, and lack of resources with no licensed mental health professional present to assist in debriefing that individual. Many VA staff members have no idea what the Fox Grant is or why grantees are calling asking for assistance with a “Fox Participant.” At the Fox Grantee Conference this past week there were several grantees that noted having an issue connecting with their local Suicide Prevention Coordinators. There needs to be more education that extends to frontline staff on the Fox Grant and what to do with those enrolled.

The Fox Grant program cannot be transactional. It needs to have follow-up programs available for veterans in need. Calling and asking for information, with no infrastructure to assist, is defeating for many veterans opening up to Fox Grant recipient organizations in hopes of getting help. Several assessments ended with an additional call to the 988 Crisis line. There needs to be a better plan for how to help these individuals. Again, these participants receive no preferential or expedited care for their time and efforts.

Next – the assessments need to be refined and slimmed down to eliminate redundancy. The Psycho-Social asks participants that have already indicated some level of suicide about suicide risk factors. The ISEL-12 and GSE ask questions already addressed in our holistic intake as far as support and self-efficacy. All three

of these assessments could be done away with, as there are certainly similar assessments conducted as soon as the veteran enters the VA, or other resources, for mental health assistance.

Both AWP staff and clients describe the assessments as repetitive and exhausting. The amount of data gathered is significant. AWP has submitted thousands of forms to account for both outreach efforts to find veterans not connected with resources and complete Fox mandated forms. Every AWP outreach event requires its own form submitted in a PDF form via email. The massive amount of paperwork has resulted in AWP having to hire additional administrative staff to handle the data entry load. We are in year two of the grant's life cycle, and the Data Collection Tool is not yet available to AWP to lighten the load of saving and emailing individual PDFs by the dozens every month.

Finally, the VA needs to fully detail and expand their measures of success. Is it a number or outcome? Does success come with a potential increase in funding? And are those organizations that are unable to meet those metrics held to account and removed, or reduced? Organizations like AWP take this very seriously and believe the Fox Grant can be incredibly helpful for outreach to veterans that are otherwise not in the VA system. Accordingly, we want this program to be successful, and it takes metrics and accountability to determine that success.

Metrics and goals with accountability build trust with veterans as well, but only if it fits the overarching aim of the program itself. Recently, during our in-person Fox Grant conference, VA staff outlined program goals: reduce suicide risk, improve mental health status and improve well-being of participants. However, the issue remains: there is no bigger picture on how the data grantees spend hours compiling and reporting will impact VA policy.

Members of the Subcommittee, thank you again for the opportunity to testify today. We look forward to our continued work together and would like to thank each of you for all your hard work and dedication to those who served in our nation's armed forces.

###