

**STATEMENT OF MELISSA COHEN, EXECUTIVE DIRECTOR,
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VETERANS BENEFITS ADMINISTRATION (VBA)
DEPARTMENT OF VETERANS AFFAIRS (VA)
BEFORE THE
HOUSE COMMITTEE ON VETERANS' AFFAIRS
SUBCOMMITTEE ON ECONOMIC OPPORTUNITY
U.S. HOUSE OF REPRESENTATIVES**

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Chairman Van Orden, Ranking Member Levin, and distinguished members of the Subcommittee, I appreciate the opportunity to appear before you today to discuss access to mental health care programs and services during the transition from military to civilian life. Accompanying me today from the Veterans Health Administration (VHA) is Ms. Jill DeBord, LCSW, Executive Director, Care Management and Social Work. I appreciate your continued support of the Nation's Veterans, their families, caregivers, and survivors. Within VA, our focus is on increasing transparency, improving collaboration, and keeping Veterans at the center of everything we do.

The transition period can present many challenges for Service members, including increased risk for suicide, homelessness, post-traumatic stress, and substance use disorders, to name just a few. In the 2023 National Veteran Suicide Prevention Annual Report¹ 48,100 adult Americans died by suicide. Of those, 6,392 (13.3%) were Veterans. This report also shows that rates of suicide in the 12 months following separations ranged from 34.8 per 100,000, for Veterans who separated in 2010, to 48.9 per 100,000, for Veterans who separated in 2019. These numbers reflect individual lives prematurely ended and grieved by family members, loved ones, and the Nation as a whole.

VA must always do everything we can to drive that number to zero – especially during transition, which arguably is one of the most vulnerable periods in a Service member's life.

Transition Support

TAP is an interagency effort designed to help the nearly 200,000 transitioning Service members annually. Together with Department of Defense (DoD), Department of Labor (DOL), the Small Business Administration, the Department of Homeland Security, the Department of Education, the Office of Personnel Management and the military services, we equip Service members with the tools they need to succeed in civilian life and we connect them with the benefits and services they have earned and deserve. VA works closely with our interagency federal partners at the Department of Labor (DOL) and Department of Defense (DoD), and our collective efforts are aimed at ensuring

¹ <https://www.mentalhealth.va.gov/docs/data-sheets/2023/2023-National-Veteran-Suicide-Prevention-Annual-Report-FINAL-508.pdf>.

transitioning Service members receive comprehensive, standardized, and non-clinical individualized self-assessments across VA and DoD; are informed and educated about all post-separation VA, DOL, and DoD benefits and services for which they are eligible, and are equipped with the tools they need to succeed and reintegrate into their communities.

The VA Benefits and Services course delivered as part of the week -long TAP course provides an overview of the wide array of benefits and services, available to transitioning Service members and Veterans, and addresses topics specific to health care, mental health care, suicide risk factors, and available mental health programs and resources. For example, included in the curriculum is information about the VA Liaison Program which utilizes VA social workers and nurses either onsite at DoD installations or providing virtual support to coordinate a clinical transition of health and mental health care to VHA, customized to the needs of the individual transitioning Service member. Through this process, a transitioning Service member is registered for VA health care and connected to the Post-9/11 Military2VA (M2VA) Case Management Program at their home VA medical facility and over 80% of the time, have initial VA health care appointments scheduled prior to separation from the military. In fiscal year (FY) 2023, over 14,240 Service members received a coordinated transition of health and mental health care from DoD to VA through the VA Liaison Program.

In addition to the VA Benefits and Services course, Service members and their families have access to Military Life Cycle (MLC) modules. MLC modules are 45- to 60-minute information sessions that may be taken at any time and address a specific in-depth topic such as benefits; education; home loans or life insurance; social and emotional health resources; integration into a civilian community; or survivor and casualty assistance.

VA TAP also provides one-on-one sessions with a Benefits Advisor, offering Service members individualized assistance. One-on-one assistance sessions are based on the individual's needs and are driven by the information covered during the VA Benefits and Services course. The most requested discussion topics include VA home loans, education benefits, and disability compensation.

Warm Handovers

VA strives to ensure Service members are connected with the specific resources they need at the time they need them. Our interagency partners share that commitment. DoD TAP Counselors and VA Benefits Advisors utilize a combination of local, state and National resources and contacts on a myriad of topics spanning mental health, disability compensation, health care resources, education, and housing, to name a few.

Concurrently, VA and interagency partners continue to pursue more seamless connections to transitioning servicemembers. In May 2022, VA launched a pilot across 30 DoD military installations to test a single point of entry, where DoD TAP Managers initiate a warm handover during Capstone (90 days before separation) to VA in areas of

education, disability compensation, health care, housing, mental health resources and other VA services. This single point of entry allowed for tracking and validation of the warm handover from DoD to VA. During the pilot (May 2022 – June 2024), VA confirmed 100% of transitioning Service members identified as needing a warm handover (288 individuals), were connected to VA by a DoD TAP manager. VA is currently analyzing the findings to develop a way forward to ensure Service members and Veterans receive timely warm handover to benefits and services they need.

M2VA Case Management Program

Additionally, recently separated Veterans who are receiving coaching services through DoD's inTransitionTransition Program and who request assistance with accessing VA mental health care are referred via a referral to the Post-9/11 M2VA Case Management Program at their local VA medical facility.

Embedded within each VA health care system, Post-9/11 M2VA teams are led by a social work or nurse program manager and comprised of clinical case managers and a non-clinical transition patient advocate. Post-9/11 M2VA teams serve as the point of entry into VA health care systems for tens of thousands of transitioning Service members and Post-9/11 era Veterans annually. Moreover, these teams provide personalized, proactive screenings to over 200,000 transitioning Service members and Post-9/11 era Veterans newly establishing their care at VA medical facilities annually. The purpose of these screenings is to identify at risk Veterans (such as those with suicidal ideations or housing instability), and when a risk factor is identified, further assessment is completed to determine ongoing clinical case management needs in collaboration with the Veteran. Case management services include care coordination and monitoring, and linkage to VA care, benefits and services as well as community resources that will support a Veteran's health and wellness. Ongoing case management is provided to approximately 38,000 Post-9/11 era Veterans annually by these Post-9/11 M2VA teams.

VA Solid Start (VASS)

The VASS Program launched on December 2, 2019, as part of the Military to Civilian Readiness Pathway to make early, consistent, and caring contact with newly separated Veterans. On October 17, 2022, VASS was signed into law (P.L. 117-205), permanently authorizing VA to expand VASS with DoD coordination. VASS calls all eligible Veterans, regardless of their character of discharge, at 3 key stages (90-, 180-, and 365-days post-separation) during their first year after separation from active duty. Using data provided by DoD, VASS provides priority contact to Veterans meeting certain mental health risk factors, supporting continuity of care and lowering any barriers to access to mental health care treatment and support through VA. These representatives receive special training to recognize the signs of crisis and, when needed, can provide a direct transfer to the Veterans and Military Crisis Line for additional support. Veterans, Service members, and their loved ones can call 988 and

Press 1, chat online, or send a text message to 838255 to receive confidential support 24 hours a day, 7 days a week, 365 days a year.

VASS representatives address challenges the Veteran may be facing at the time of the call by connecting the Veteran with the appropriate benefits or resources for assistance. VASS calls are not scripted. Representatives ask open-ended questions that seek to establish the current status and potential needs of the Veteran. Each call is different and is driven by the needs of each Veteran at the time of the call. There are no talk time limitations for the calls. By establishing this relationship with Veterans in the first critical year post-separation from active duty, VASS aims to increase the likelihood that they will get connected to VA earlier and utilize VA benefits and services, to include mental health resources, when needed.

From the program launch in December 2019 through August 2024, VASS has successfully connected with 511,460 (73.9%) recently separated Veterans, helping them connect with the benefits and services they have earned. For example, in calendar year 2023, of Veterans who had a successful VASS connection, 67.19% applied for or are receiving compensation benefits and 69.52% applied for, or are enrolled in, VHA services. Veterans who did not have a successful connection with VASS had utilization rates of 22.94% and 41.74%, respectively.

To further assist Veterans with access to VHA care, including mental health services, VASS representatives can make referrals to the Post-9/11 M2VA Case Management Program at their local VA medical facility. VASS successfully connected 3,644 Veterans to their local Post-9/11 M2VA team from October 2020 to August 2024.

VASS provides priority contact to Veterans meeting certain risk factors (such as having a mental health appointment) during their last year of active duty. From December 2019 through August 2024, VASS successfully connected with 90,948 Priority Veterans (representing 83.0% of the eligible population). Additionally, since the program launch in December 2019, through August 2024, VASS has successfully connected with 9,046, or 55.8%, of recently separated Veterans with an other than honorable (OTH) discharge.

Furthermore, in July 2023, VASS launched a VSignals survey to assess Veteran satisfaction with the VASS program. Since its launch through August 2024, VASS-eligible Veterans rated their satisfaction with the VASS program as 4.5 on a 5-point Likert scale.

Economic Factors During the Transition Period

Some Veterans report difficulty in transitioning to civilian positions and translating military-related skills to higher-paying civilian jobs. Unemployment and poverty are correlated with homelessness among Veterans. Financial hardship and economic stressors are major predictors of mental health crisis and Veteran suicide. VBA provides a variety of benefits and services that can help reduce or eliminate risk factors

associated with suicide and promote protective factors for some Veterans. Benefits such as disability compensation, pension, Veteran Readiness and Employment services and education/GI Bill benefits assist Veterans with transitioning to civilian life, connecting with benefits, establishing, and achieving educational, vocational, and career goals, and supporting financial well-being. Below are some examples of programs used to support transitioning Service members pre- and post-service that can impact their financial stability and lessen economic stressors.

Personalized Career Planning and Guidance (PCPG)

PCPG, also known as Chapter 36 services, fulfills 38 U.S.C. § 3697A requirements by supporting transitioning Service members, Veterans, and qualified dependents. PCPG services provide participants with personalized counseling and support to help guide career paths, ensure the most effective use of VA benefits, and achieve educational and career goals. Services are available to transitioning Service members within 6 months of leaving the military, to Veterans who have left the military within the past 12 months, or (at any time) to individuals who are eligible to use a VA education benefit. PCPG career and education counseling services include résumé support; education and employment planning; detailed skills assessment; a personalized action plan to achieve education and career goals; adjustment counseling to successfully transition to civilian employment; and a direct connection to VA benefits and services. From October through July of FY 2024, PCPG received 7,308 applications requesting services.

Separation Health Assessment (SHA)

Executive Order 13822 of January 9, 2018, established requirements for the Secretary of Defense, the Secretary of Veterans Affairs, and the Secretary of Homeland Security to submit a Joint Action Plan describing actions to provide seamless access to mental health care and suicide prevention resources for transitioning uniformed Service members during the year following discharge, separation, or retirement. Since the order, VA and DoD have partnered in including mental health screening questions in the SHA questionnaire.

The SHA establishes a consistent opportunity for separating Service members to discuss illnesses, injuries, and psychological harm incurred or aggravated during military service, including but not limited to, those arising from or related to occupational exposures, physical hazards, or sexual trauma. The SHA promotes efficient, effective, standardized electronic processes for obtaining and documenting information to support continuity of health care, development of transition support plans, understanding of potential health effects of military service, and contemporaneous or future determinations of eligibility for disability benefits and services from VA.

The mental health assessment elements of the SHA require a person-to-person discussion between the examining clinician and the Service member. DD Form 3146/SHA Part A includes a general self-assessment of the Service member's mental health at separation. The SHA includes screening questionnaires on post-traumatic stress disorder (PTSD), depression, and alcohol use. The examining clinician reviews these screening results along with the results of a clinical assessment to provide a suicide risk assessment and violence risk assessment and, if indicated, refer the Service member for mental health transition assistance.

When a Service member applies for disability compensation through VA's Benefits Delivery at Discharge (BDD) Program, VA conducts the SHA examination. When SHA mental health screening indicates a risk or mental health condition, the VA examining provider refers the Service member to DoD's inTransition Program for mental health assistance. The inTransition program is a free, confidential program that offers specialized coaching and assistance for active-duty service members, National Guard members, Reservists, Veterans, and retirees who need access to mental health care. In consultation with VA, DoD assists Service members' by providing information and referrals, if necessary, for care, treatment, and other services that VA may provide. Information provided includes available clinical services resources (counseling and treatment for PTSD and other mental health conditions), other care and treatment services, information on private sector sources of treatments available in the member's community and assistance to enroll in VA for health care benefits.

Outreach

Transition can be a time of great stress for Service members, increasing risks of homelessness, substance use, and economic hardships, all of which are high-risk factors for suicide and more likely to occur in underserved communities. That is why VBA maintains a robust outreach program to frequently share and connect Veterans to the resources and benefits available to them. For special emphasis populations, VBA maintains policies to ensure these vulnerable populations are regularly connected. VA believes that no Veteran should be without a place to call home and is committed to assisting in ending homelessness among Veterans. Our focus is threefold.

- **Outreach:** Conducting coordinated outreach to proactively seek out Veterans and transitioning Service members in need of assistance.
- **Claims:** Expediting claims for benefits for those who are homeless or at risk of homelessness.
- **Stakeholders:** Collaborating with Federal and state agencies, community nonprofits, and others to ensure Veterans are connected with services they need to attain and remain in permanent, stable housing.

VBA has Homeless Veterans Outreach Coordinators (HVOC) at 25 regional offices (RO). These individuals are dedicated full-time employees, who provide access to VA benefits and information through outreach efforts to homeless Veterans and to

Veterans at risk of being homeless. As of October 2023, five new locations (Denver, Honolulu, Portland, Reno, and San Diego) received full-time HVOCs.

Table 1: Regional Offices with full-time Homeless Veteran Outreach Coordinators

Atlanta	Detroit	Nashville	Phoenix	Saint Petersburg
Boston	Honolulu	New York	Portland	San Diego
Chicago	Houston	Newark	Reno	Seattle
Cleveland	Indianapolis	Oakland	Roanoke	Waco
Denver	Los Angeles	Philadelphia	Saint Louis	Winston-Salem

VBA has Homeless Veterans Claims Coordinators (HVCC) in the remainder of ROs to expedite processing of claims from Veterans who are homeless or in imminent risk of homelessness and to report on prioritization of homeless claims activities. VBA provides homeless program updates to the homeless coordinators via the quarterly National Outreach Call and hosts an annual Homeless Veterans Outreach Training Symposium. As of July 31, 2024, VBA Outreach held 1,965 homeless Veteran events in FY 2024, totaling 6,575 hours of outreach to homeless Veterans.

To ensure VA meets the needs of the rural Veteran population, ROs designate one regional outreach coordinator (ROC) to provide VA benefits information to Veterans, dependents, and survivors residing in rural areas. As of July 31, 2024, VBA Outreach has held 1,412 rural Veteran events in FY 2024, totaling 2,230 hours of outreach to rural Veterans.

VA is committed to providing outreach to LGBTQ+ Service members and Veterans. VA recognizes the need for direct outreach to ensure awareness of the VA benefits and services to which they may be entitled. Each RO must host at least one event per quarter for this special emphasis group. As of July 31, 2024, VBA Outreach has held 631 LGBTQ+ Veteran events in FY 2024, totaling 913 hours of outreach to LGBTQ+ Veterans.

Military Sexual Trauma (MST) Survivors Coordinators at ROs assist Veterans who have experienced MST. VBA established the MST Outreach Program to educate, empower, and spread awareness about increased benefits and special services that may be available to this Veteran population. MST Coordinators assist by:

- conducting outreach and disseminating MST-related information,
- navigating the process of filing a claim related to MST,
- providing trauma-sensitive customer service, and
- initiating telephone contact with Veterans.

Each of VA's 56 ROs must provide 12 hours of outreach per quarter related to MST. VBA exceeded the fiscal year requirement of 2,688 hours by hosting 2,264 MST Veteran events, totaling 3,983 hours of outreach to MST Veterans.

Additional programs embedded in VBA's outreach program to assist in spreading information about benefits and getting transitioning Service Members and Veterans connected to their benefits. For example, transitioning Service members, Veterans, and their families are educated about employment opportunities, special hiring authorities, and career support resources, through VBA-hosted Economic Development Initiative (EDI) events. EDIs are 2 or 3 -day, no-cost events, which connect Veterans with resources promoting financial stability, career opportunities, mental health, and wellness initiatives. Veterans can obtain information on benefits from VA and other organizations, get help filing disability compensation claims, receive private, on-site disability medical examinations, learn about education and home loan guaranty benefits, and find resources for mental health support.

VA also partners with the Off-Base Transition Training (OBTT) pilot. OBTT workshops are currently scheduled as virtual 1-hour sessions with 45 minutes of material and 15 minutes for questions and answers. OBTT is a supplemental briefing for Veterans, beneficiaries, and caregivers who fall outside of the TAP eligibility window as well as any National Guard and Reserve members.

VHA's Readjustment Counseling Service (RCS) consists of more than 300 Vet Centers located in all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, and American Samoa. Vet Centers are community-based counseling centers that provide a wide range of social and psychological services, including professional readjustment counseling to eligible Veterans, active-duty service members, including National Guard and Reserve components, and their families. Readjustment counseling is offered to make a successful transition from military to civilian life or after a traumatic event experienced in the military. Individual, group, marriage and family counseling is offered in addition to referral and connection to other VA or community benefits and services. Vet Center counselors and outreach staff, many of whom are Veterans themselves, are experienced and prepared to discuss the tragedies of war, loss, grief, and transition after trauma.

Character of Discharge Final Rule

Eligibility for VA benefits depends upon type of military service performed, duration of service, and character of discharge (COD) or separation. Former service members (FSMs) must receive a COD under other than dishonorable conditions (honorable, under honorable conditions, general) to be eligible for most VA benefits. Veterans with a dishonorable discharge or statutory bar pertaining to a period of service are prohibited from receiving most VA benefits based on that period of service. Other types of discharges, such as OTH, Undesirable, or Bad Conduct discharges, require VA to make a COD determination for eligibility for VA health care and/or compensation and other monetary benefits.

In September 2022, the Veterans Experience Office published the report "Veteran Journeys: Other than Honorable (OTH) Discharge," which summarized

customer research to better understand current and desired experiences over the lifetime of OTH Veterans. This research found that Veterans with an OTH discharge often do not receive adequate information or support to connect with the VA benefits and services they are eligible for, which may have detrimental downstream effects on a population already prone to crisis situations such as mental health emergencies, suicidality, and homelessness. The report findings also noted that because the OTH discharge process typically does not provide support or services for those who have experienced trauma, OTH Veterans often struggle to adjust to life after the military - making crises, such as mental health emergencies, suicidality, homelessness, and/or drug/alcohol addiction, common. The report identified opportunities to simplify eligibility pathways to mental health, addiction, and housing support for OTH Veterans.

VA addressed this opportunity in the final rule ([AQ95](https://www.federalregister.gov/documents/2024/04/26/2024-09012/update-and-clarify-regulatory-bars-to-benefits-based-on-character-of-discharge)), "[Update and Clarify Regulatory Bars to Benefits Based on Character of Discharge](https://www.federalregister.gov/documents/2024/04/26/2024-09012/update-and-clarify-regulatory-bars-to-benefits-based-on-character-of-discharge)," (<https://www.federalregister.gov/documents/2024/04/26/2024-09012/update-and-clarify-regulatory-bars-to-benefits-based-on-character-of-discharge>), which became effective on June 25, 2024. VA recognizes there are some Service members, even those with an OTH discharge, who may have earned the status of "Veteran" and the benefits to which Veterans are entitled. VA also recognizes the extraordinary situations and circumstances involved in service, which could lead to injuries or other circumstances that increase risk for behaviors or conduct that military commanders deem inappropriate.

To ensure VA considers all facts and circumstances in each case, VA included a compelling circumstances exception in this final rule which is applicable to the willful and persistent misconduct and moral turpitude regulatory bars and the "absent without leave" statutory bar to VA benefits. This ensures VA considers the length and character of service exclusive of a period of misconduct and potential mitigating reasons for the misconduct such as mental and physical health, hardship, sexual abuse/assault, duress, obligations to others, age, education, cultural background, and judgmental maturity. Although not specifically included in the regulatory text, VA will consider discrimination, including based on race or sex, in the compelling circumstances analysis.

The compelling circumstances exception, coupled with more specific criteria defined for the willful and persistent misconduct regulatory bar, will serve to expand eligibility to additional Veterans. These modifications will help distinguish those who committed serious misconduct that renders their service dishonorable from those whose misconduct comes with a mitigating circumstance or is outweighed by otherwise meritorious service.

While relaxing the bars to eligibility, this final rule does not extend VA benefits eligibility to all FSMs. FSMs who do not meet the criteria for benefits eligibility may still be entitled to certain critical benefits to address the harms caused by their military service, such as mental health and substance use care, emergent suicide care, and medical care in emergency situations.

Too often, FSMs are either incorrectly told or self-select away from VA, based on the belief that the OTH discharge makes them ineligible for VA benefits and services. However, in many instances, FSMs may be found eligible to receive health care and/or disability compensation. VA encourages FSMs to file a claim and let VA determine their eligibility to benefits. In addition, any FSM with a previous unfavorable character of discharge determination from VA may request a new determination under the new final. VA, in all its efforts, is always looking to ensure that benefits and services are provided to all who are entitled to them.

Updated VA Form 21-0781

With the enactment of P.L. 117-271, *VA Peer Support Enhancement for MST Survivors Act* and P.L. 117-303 *MST Claims Coordination Act*, VA combined two previous forms related to PTSD² and personal assault³ into a single form titled *Statement in Support of Claimed Mental Health Disorder(s) Due to an In-Service Traumatic Event(s)*, released June 29, 2024. By combining the forms, VA reduced the respondent burden, which is the estimated number of minutes it takes for a respondent to fill out a form, by 50%.

This reduction in the respondent burden also decreases the potential for respondents to provide information that is not needed and allowing for other mental health conditions (other than PTSD) to be submitted on the form. When developing the new form, VA utilized a workgroup of subject matter experts including clinicians from the VHA, to balance the need for collection of pertinent information and trauma sensitivity. The new VA Form 21-0781 includes new sections that help the Veteran complete the form for their type of in-service traumatic event(s), guidance with examples for describing the traumatic event(s), and expansion of the behavioral changes question, among other changes.

Although the previous VA Form 21-0781a was discontinued when the new form was released, VA recognizes that requesting the new VA Form 21-0781 when a completed VA Form 21-0781a is received has the potential to retraumatize the Veteran. As such, on or after June 29, 2024, when a completed VA Form 21-0781a is received, claims processors will review outdated and discontinued versions of the forms to determine their evidentiary value and ensure that requests for an examination or claim development are not unnecessarily delayed. This will help ensure a more streamlined and trauma-informed experience for Veterans who submit claims for mental health conditions related to in-service traumatic events.

Employee Training

² VA Form 21-0781, *Statement in Support of Claim for Service Connection for PTSD*

³ VA Form 21-0781a, *Statement in Support of Claim for Service Connection for PTSD Secondary to Personal Assault*

VA follows the tenets of the S.A.V.E. model (Signs of suicide, Ask about suicide, Validate feelings, Encourage help/Expedite treatment) when training employees to identify Veterans at risk and provide assistance. VA S.A.V.E. training is a yearly mandatory requirement for all employees. For VBA positions that involve direct contact with Veterans, such as RO public contact teams and National Contact Center call agents, training is comprehensive and aimed at providing care and support when talking with individuals in crisis. Veteran-facing employees complete mandatory training as new hires and subsequently receive at least two refresher training hours each calendar year focused on crisis management and suicide prevention.

Additional Initiatives

VA understands that news of a reduction, severance, or adverse action regarding VA benefits can increase strain on Veterans. This is especially concerning for Veterans already identified as high-risk. Economic and financial uncertainty can increase the risk of suicide. In March 2024, VA launched a new website to help Veterans manage financial stressors that can affect their mental health and wellbeing⁴. Developed by the National Veterans Financial Resource Center (FINVET), the website aims to boost protective factors that promote mental health and reduce suicide risk by helping Veterans learn about and manage their finances. Economic and financial uncertainty can increase the risk of suicide. FINVET helps mitigate that risk by connecting Veterans to trustworthy financial tools, information, videos, calculators, and worksheets – serving as a one-stop website for Veterans to learn a variety of essential information to help meet their financial goals. Using simple navigation, FINVET empowers Veterans to learn about financial goals such as meeting basic needs, saving or earning more money, lowering bills and debt, and protecting their assets.

VBA is increasing suicide prevention awareness for employees by providing training in lethal means safety, and trauma-informed communications, especially with Veterans who experienced MST. VBA has conducted extensive efforts to improve trauma-informed communications and interactions for MST survivors by updating forms, written communication, and providing staff training in trauma-informed best practices.

Conclusion

We appreciate the Committee's continued support and collaboration in this shared mission. Mr. Chairman, this concludes my statement. My colleague and I are ready to answer any questions you and the Committee may have.

⁴ <https://news.va.gov/press-room/va-financial-website-reduce-suicide/>