



Reviewing President Biden's Strategy to Reduce Veteran Suicide by Addressing Economic Risk Factors

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Statement of

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Veterans of Foreign Wars of the United States

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With Respect To

“Reviewing President Biden’s Strategy to Reduce Veteran Suicide by Addressing

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Economic Risk Factors”

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Chairman Levin, Ranking Member Moore, and members of the subcommittee, on behalf of the men and women of the Veterans of Foreign Wars of the United States (VFW) and its Auxiliary, thank you for the opportunity to provide our remarks on legislation pending before this subcommittee.

VFW Commitment to Mitigating Suicide

Veteran suicide prevention is a complex, multi-faceted initiative requiring an approach informed by a multitude of upstream and protective factors. President Biden’s 2021 report titled “Reducing Military and Veteran Suicide: Advancing a Comprehensive, Cross-Sector, Evidence-Informed Approach” states the importance of identifying these factors that increase or mitigate veteran suicide, including economic factors such as financial strain, lack of housing, food insecurity, unemployment, and legal issues. The VFW firmly believes an upstream perspective, examining root causes and protective factors, is critical to identify as socio-economic factors that can be addressed before mental health reaches a critical juncture.

The VFW has a long-standing resolution and priority to end veteran suicide. Through engaging our membership in suicide prevention awareness, partnering with the Department of Veterans Affairs (VA) to support Accessing Telehealth through Local Area Stations (ATLAS), working to expand Green Alert initiatives, and promoting internal initiatives such as our #StillServing campaign, health surveys, and our Unmet Needs program, the VFW works diligently to combat upstream risk factors to veteran suicide. We also work with partners like PsychArmor, Give an Hour, and Humana to focus VFW Service Officer training on identifying social determinants of health and intervening with veterans as necessary. We firmly believe that as we better equip our local advocates to take upstream action, we are mitigating suicide. As our service officers help veterans navigate receiving the veterans benefits available to them due to their service-connected disabilities, they ultimately promote economic stability through sharing access to education, employment, and housing

benefits.

Each year, VA releases a “National Veteran Suicide Prevention Annual Report,” providing historical data related to veteran suicide counts and some data surrounding Veterans Health Administration (VHA) related indicators. However, this report falls short of being comprehensive and does not address or share data related to veterans in programs administered by the Veterans Benefits Administration (VBA) or other federal, public and private entities. The VFW stated during a congressional hearing before the House Committee on Veterans’ Affairs in fall 2021 that the current VA annual report, “...does not capture social determinants of health, which VA's own research indicates are often better predictors of suicide or suicidal ideation. Many VBA programs like disability compensation, the GI Bill, or home loan guaranty are facets of critical socio-economic determinants of health such as steady income, workforce skill attainment, and stable housing.”^[1] For many years, the VFW has been advocating for VA to integrate VBA data into these reports as we believe this data will provide critical insight needed to mitigate upstream risk related to economic factors. This data must be included if we are to properly address suicide.

Factors and Programs Reducing Economic Risk

Transition Programming

For many veterans, their experience while transitioning from active duty will set the stage for their long term financial and economic well-being. A 2020 study of over 150,000 transitioning service members found the highest suicide rates to be within one year of transition, when veterans often face the largest changes related to employment, finances, mental health, access to health care, and social support.^[2] Service members participating in the mandatory Department of Defense (DOD) Transition Assistance Program (TAP) as they prepare for separation from service are at a critical point in terms of veterans benefits and resources needed to combat these economic challenges.

The VFW provides a network of Accredited Service Officers and Pre-Discharge Representatives, including Benefits Delivery at Discharge (BDD) representatives embedded within the TAP program to help connect veterans with their benefits as they transition.

Unfortunately, these BDD representatives see all too often how many transitioning service members choose not to connect with VA services at this critical juncture. According to VFW BDD survey respondents, generally only 60 percent of transitioning service members report participating in a TAP track designed to provide two days of specialized Department of Labor (DOL), Small Business Administration (SBA), or VA employment and education training during this significant time of heightened risk.

Education Benefits

Accessing education is often a veteran's introduction to and first interaction with VA. This critical touchpoint can often make or break how a veteran chooses to further engage with VA services and benefits through both VHA and VBA. A bedrock among VBA economic opportunity benefits has long been the GI Bill, which is designed to give access to higher education to veterans who might not otherwise have been able to pursue this path. This and other VBA education benefits, including education pathways provided through Veteran Readiness and Employment (VR&E) and newer initiatives such as Veteran Employment Through Technology Education Courses (VET TEC) and Veteran Rapid Retraining Assistance Program (VRRAP), are often the foundation needed for veterans that will set them up for a lifetime of employment stability and subsequent housing and food security.

Several studies have found educational attainment to be a critical social determinant to suicide risk, with level of education proving to have important prevention associations. A 2017 study in the *American Journal of Preventive Medicine* that documented the association between education and suicide risk between 2000 to 2014 found men with a college degree were half as likely to die by suicide compared to those with a high school education.^[3] A 2020 study of recently transitioned service members found those with fewer years of education had a higher hazard of suicide, with lack of education being a likely factor in difficulty finding post-military employment, potentially leading to financial instability.^[4]

Not only does educational attainment mitigate upstream risk by providing a greater likelihood of economic security, the act alone of pursuing education through VBA benefits can also provide protective factors to mitigate suicide. Many veterans report pursuing their degree following service to provide a sense of purpose and opportunities for inclusion and

acceptance as they can connect with affinity clubs and groups, to include Student Veterans of America (SVA) chapters.

Additionally, higher education institutions with programs such as Veterans Integration into Academic Leadership (VITAL) allow students who are using VBA education benefits to have an increased likelihood for intervention in cases of mental health crisis. VA promotes its VITAL program as providing seamless access to VA health care services, on-campus clinical counseling, and training for campus faculty and staff. Currently, this program has one pilot program at an institution operating primarily online—Western Governors University (WGU). In this pilot, remote staff have been trained to recognize signs of mental health concerns for veteran students and are equipped to provide quick referrals to VHA liaisons, typically social workers assigned to regional VA medical centers. For example, in WGU’s remote model, a program mentor sought guidance from a VITAL-trained employee when a student veteran in her course exhibited signs of mental distress. The VITAL-trained employee was able to quickly connect the student to the designated VITAL liaison at VA to receive services. In this example, the student veteran, the mentor, the trained staffer, and the VA liaison were all located in different areas throughout the country but were able to successfully implement intervention and ensure the student veteran received the critical services he needed prior to reaching a suicidal crisis.

Although use of education benefits such as the GI Bill can be the first building block toward a sustained economic security that may mitigate risk of suicide, the GI Bill has faced a utilization decline of seventeen percent over the past six years. In a recent Accenture study, although eighty-seven percent of students reported their GI Bill education as “beneficial to achieving their current position or income,” eleven percent of veterans not using the benefit cited a lack of financial resources. Nearly one in five veterans said they wanted to pursue the GI Bill, but the process was unclear or too burdensome, and the study found veterans who understood educational benefits available to them upon separation were twice as likely to use the benefit.^[5] It is imperative no service member transitions without a complete understanding of the available education benefits, as using these benefits may help to circumvent financial instability.

The VFW views the GI Bill as an incredibly important benefit for veterans. That is why the VFW has awarded over ten million dollars in aid through the VFW Sport Clips Help A Hero Scholarship to over 2,200 veterans since its creation in 2015. It is also crucial for those who want to use their education benefits to be able to do so with the support of allowances that provide for their basic financial health while pursuing a degree.

Employment Counseling and Preferential Hiring

In addition to education services, VBA also administers several programs geared at guiding veterans to successful employment. Among these benefits are VR&E, which helps veterans with disabilities re-enter the workforce, and the much lesser-known Personalized Career Planning and Guidance Program (PCPG), which helps veterans create employment plans and provides coaching on resume and interview skills. In concert with other government programs geared toward veteran employment, to include DOL Veterans' Employment and Training Service (VETS), federal and state preferential hiring programs, Veteran Business Outreach Centers (VBOCs), and American Job Centers, veterans using their earned benefits may be well posed to find meaningful employment to mitigate the upstream risk of suicide.

It is well established that unemployment can have a significant impact on mental health and is associated with an increased risk for suicide, though a risk that can be complex due to the circular impact both mental health and employment may have on one another.^[6] In addition to the financial security employment provides, steady employment can also facilitate a sense of purpose and access to social engagement that can be an additional protective factor to combat suicide. Many employers increasingly form affinity or Employee Resource Groups (ERGs), to include those especially for veteran and military-connected employees, making it easier to interact, engage, and share resources. Having access to an ERG with individuals who understand the struggles veterans face is another touchpoint that can allow for intervention for those suffering from mental health conditions. In a 2020 *Fast Company* article, LinkedIn's head of diversity shared, "One common thread we've heard across ERGs is the importance of mental and emotional health."^[7]

Despite employment playing a critical role in breaking the cycle of financial instability that may result in upstream risk of suicide, too many veterans remain unaware of the services available to them through VA and other government entities. For example, a 2021 Government Accountability Office (GAO) study found veterans with disabilities often do not even know the VR&E program exists, let alone their eligibility for the program.^[8] If programs like VR&E and PCPG, continue to be underutilized due to lack of veteran awareness, VA cannot fully leverage these programs to mitigate suicide through the protective factors of employment.

Housing and Food Security

In cases of gaps in unemployment, significant underemployment, or conditions impacted by mental health and substance abuse issues, veterans may find themselves experiencing homelessness and food insecurity. Increasingly, in the wake of current economic and housing conditions even employed veterans face housing insecurity and struggle to put food on their tables, both significant upstream risk factors in veteran suicide.

For eligible veterans, one of the most transformative benefits offered through VA is the ability to obtain a loan through the VA Home Loan Guaranty program, allowing veterans to purchase a home without needing the capital to provide a down payment. VA also offers programs that support these veterans in cases where they fall behind on mortgage payments and may face foreclosure, helping them arrange repayment plans, special forbearances, and loan modifications in order to keep them in their homes. Additionally, VA's Supportive Services for Veteran Families (SSVF) program provides services to prevent imminent loss or rapidly rehouse veterans in danger of experiencing homelessness. For veterans who are experiencing homelessness, VA collaborates with the Department of Housing and Urban Development (HUD) to provide vouchers for rental assistance through the HUD-Veterans Affairs Supportive Housing (HUD-VASH) program in concert with VA case management and other supportive services. VA also manages the Grant and Per Diem Program (GPD), assisting public and non-profit organizations establish and resource supportive services and housing for veterans experiencing homelessness.

In one study of veterans who self-reported housing instability between 2012 and 2016, data indicated over half of these veterans accessed homeless services and associated this use of services to a significant reduction in suicide risk, demonstrating a positive sign for the ability of these programs to perform upstream intervention. This study also noted the need for further research into the general ability for social service programs, outside of VHA health care and mental health treatment, to reduce suicide.^[9] A 2021 consensus statement by the VA Suicide Prevention Among Veterans Experiencing Homelessness Workgroup shared that multiple risk factors associated with veterans experiencing homelessness include extreme poverty, lack of housing, loneliness, and limited social support. Notably, this statement also highlighted the historic lack of focus on suicide-prevention measures for veterans not receiving VHA care, sharing “understanding the extent to which veterans experiencing homelessness who are not utilizing VHA care to receive suicide risk assessment and documentation in the community requires VA and community-based collaboration and communication of risk and treatment planning.”^[10]

Many veterans, regardless of housing stability, continue to battle with consistent access to food. One 2021 study examining the association between food insecurity and suicidal ideation among veterans found those with lower food security had a significantly higher risk of suicidal ideation. The study also found that as the severity of food insecurity increases, so does the severity of depression and suicidal ideation. [11] Additionally, data from a recent U.S. Department of Agriculture (USDA) study indicated an over seven percent higher risk for working-age veterans compared to their non-veteran counterparts. [12]

Data from the USDA survey also indicated certain subsets of veterans are particularly at risk of food insecurity, to include disabled veterans who are 22.5 percent more likely to experience food insecurity among the working-age veteran population. There are many state and government programs to assist individuals battling food insecurity, including the Supplemental Nutritional Assistance Program (SNAP). Unfortunately, many disabled veterans report that it is their income from VA disability payments that ultimately precludes them from the SNAP program. College students also face a higher likelihood of food insecurity, [13] with some small studies showing student veterans at even more increased risk than their non-veteran peers. [14] Similar to disabled veterans, student veterans also receive monthly compensation from VA that, while not taxable, still may be used in calculations that ultimately bar access to benefits such as SNAP.

Discharge Barriers to Economic Opportunity Benefits

In comparison to VA health care and some other VBA benefits, many economic opportunity benefits offered through VA and other federal and local government programs require a higher threshold of discharge for eligibility. For example, access to the GI Bill requires an honorable discharge, with no caveats to the discharge permitted. Federal hiring preference consideration, VA-guaranteed home loans, VR&E, and other benefits also require a discharge from active duty under honorable conditions, though may include a general discharge. For the many veterans who were separated with less than honorable discharges under the defunct “Don’t Ask Don’t Tell” policy or for behavior following a mental health diagnosis, there has been a long-standing barrier to access the economic opportunity benefits they earned in service.

Although we have passed the ten-year anniversary of the repeal of “Don’t Ask Don’t Tell,”—a policy put in place to prevent lesbian, gay, and bisexual service members from openly serving in the military—there is a need to make whole the individuals discharged for violating this policy, particularly those with less than honorable discharges who are precluded from full VBA benefit access. According to VA, during the seventeen-year tenure of “Don’t Ask Don’t Tell,” approximately 14,000 service members were discharged under the policy, adding to a historical estimate of 100,000 service members who were discharged due to their sexual orientation even prior to the policy.^[15] One 2020 cohort study found risk of death from suicide for sexual minority veterans from 2000 to 2017 was higher than not only the general U.S. population but also their veteran counterparts.^[16]

Also at significantly greater risk of suicide are veterans suffering from post-traumatic stress disorder (PTSD) and diagnosed mental health conditions or substance use disorders.^[17] A 2017 GAO report found service members were receiving “other than honorable” discharges, despite diagnoses with PTSD, traumatic brain injury (TBI), and other mental health conditions that could be linked to misconduct.^[18] Their findings included that not all branches of military service had policies in place for these occurrences and recommended that DOD establishes consistent separation policies. The report found that of those veterans separated for misconduct, sixty-two percent had an established diagnosis of PTSD, TBI, or condition related to mental health. Of those discharges, only four percent were “honorable,” accounting for approximately 55,000 individuals with diagnosed mental health conditions who were discharged between 2011 and 2015 and would have been precluded from full access to the economic opportunity benefits providing protective factors to mitigate suicide risk. In the wake of the recent settlement in *Manker v. Del Toro* class action suit,^[19] it is imperative all branches of DOD make considerable efforts to ensure adequate review procedures are in place to quickly process requests from veterans who were given improper discharges, despite documented evidence of their mental health conditions.

Way Forward and VFW Recommendations

Expand Mental Health Access at VBA and Economic Opportunity Touchpoints

Each time a veteran uses a VBA or government-managed economic opportunity program or

benefit is an opportunity to provide resources and suicide intervention as appropriate. Access to economic opportunity benefits from the point of transition is critical. Congress must provide oversight to DOD and VA to ensure service members are adequately introduced to these benefits at transition, to include requiring reporting on the success of VA's Solid Start program. When transitioning service members are aware of their economic opportunity benefits at the beginning of their transition, they will be significantly more likely to connect with VA and use these benefits. This sets them on a track to not only have touchpoints established for VA intervention, but also to set themselves on track for economic stability and a reduction in suicide for recently separated veterans.

The VFW urges Congress to expand resources for programs such as VITAL that ease access to VHA mental health care. The VFW was pleased the House passed H.R. 5516, *VITAL Assessment Act*, and will continue to urge the Senate to quickly pass similar legislation that would direct VA to collect and report on important data surrounding the VITAL program. We also recommend that VA seeks to further expand VITAL in ways that support the large number of student veterans pursuing their degrees at primarily online institutions who may be in particular need of these resources. The VFW also thanks the House for passing H.R. 4233, *Student Veterans Counseling Centers Eligibility Act*, which would expand access to all student veterans for VA's Vet Centers. We now ask the Senate to pass companion legislation to ensure these veterans are able to use this critical resource for mental health services within their communities.

In their *National Strategy for Preventing Veteran Suicide 2018-2028*, VA resolved to engage stakeholders at touchpoints, including employers and institutions of higher learning, with a specific intent to reach veterans who are not receiving VA benefits or services.^[20] VA must be proactive in this strategy and conduct concerted outreach to these touchpoints, to include engaging stakeholders at ERGs and SVA chapters. The VFW recommends that Congress conducts oversight on this outreach and requires data that can be correlated to economic risk.

In cases where veterans are using VA services that indicate their risk of financial instability, such as foreclosure or housing assistance programs, VA must ensure suicide mitigation resources are provided at these critical junctures. However, it is paramount that these communications are done with sensitivity and intention. For example, one veteran participating in VR&E shared a VBA collection notice due to housing overpayments. The letter informed him that he owed thousands of dollars in debt, then included links to VHA services in the case he was having suicidal ideation. The veteran understandably found this

message jarring, especially coupled with the fact he was having an extremely difficult time reaching someone from VA to explain the overpayments. VA must ensure all resources provided at these touchpoints are not simply checks in a box, and are shared in ways that demonstrate compassion and are adjusted according to veteran feedback.

Expand Existing Resources Available through VBA and Government Programs

As veterans continue to face an ever-changing economic climate with increasing housing and food insecurity during a period of inflation and housing shortages, it is critical that Congress passes legislation to extend COVID-19 policies that offer resources to veterans experiencing homelessness and to the providers assisting them. The VFW urges Congress to quickly pass

S. 2172, *Building Solutions for Veterans Experiencing Homelessness Act of 2021*, and corresponding House bills, to continue to resource veteran reintegration, GPD, SSVF and HUD-VASH programs.

Congress must also pass H.R. 7272, *Feed Hungry Veterans Act of 2022*, to expand access to SNAP for eligible disabled veterans. Although VA has made advances in food insecurity screenings to identify veterans at risk,^[21] there is still a significant participation gap in programs such as SNAP with eligible veterans participating at considerably lower rates than the general population.^[22] VA must conduct outreach to veterans to understand their eligibility, as well as use data collected to determine the barriers to veteran participation.

Congress must continue to fund short-term training programs that demonstrate metrics of success toward employment, to include VET TEC, to ensure veterans at risk of financial instability from unemployment are able to quickly break this cycle before escalating to other upstream risk factors such as housing and food insecurity. Congress must also address the basic needs of student veterans in order to combat the decline in use of this important benefit providing protective factors to suicide. The VFW urges Congress and VA to analyze the current Monthly Housing Allowance (MHA) provided to veterans using VBA education benefits and provide adequate adjustments to support basic financial stability for these students.

The VFW believes the dedication of resources needed to leverage the ability of economic opportunity benefits to mitigate suicide cannot be fully accomplished without a fourth administration. We are thankful the House passed H.R. 2494 and we urge the Senate to now pass S. 1093, as we strongly believe a fourth administration dedicated to Economic Opportunity and Transition focused on specific needs to include food insecurity is necessary to effectively accomplish the goals this testimony sets forth.

Conduct Oversight for Discharge Upgrades for At-Risk Populations

Although VA has shared its dedication in clarifying policy so that VA adjudicators may now find veterans discharged under “Don’t Ask Don’t Tell” eligible for their benefits,^[23] there must be significant strides made to ensure these clarifications result in the desired outcomes and effectively combat a decade of affected veterans experiencing denials of their upgrades.^[24] Similarly, DOD must take action across branches to ensure swift recourse for veterans who were given improper discharges, despite documented evidence of their mental health conditions. Congress must provide oversight to DOD and VA to ensure adequate outreach is conducted for veterans deserving of discharge upgrades and to ensure these upgrades are conducted efficiently, with minimal burden to the veteran, so they are quickly given access to economic opportunity benefits that provide protective factors to mitigate suicide.

Collect, Track, and Correlate VBA Data in VA Suicide Mitigation Efforts

As the VFW has advocated for many years, VA must immediately incorporate VBA data into its annual suicide report, to include data on disability compensation, education and employment benefit use, home loan use and foreclosure assistance, and participation in housing and food insecurity programs. Short of this incorporation, economic opportunity benefits cannot be fully leveraged to successfully mitigate upstream risk of suicide among veterans.

One common thread across each of the studies and reports cited in this testimony is an almost universal call for more research and data in order to understand the complex relationship between socio-economic factors and veteran suicide risk. In 2019, among the

average 17.2 veteran suicides per day, 10.4 of them involved veterans with no VHA encounter between 2018 and 2019.^[25] VA cannot rely upon VHA data and access alone to successfully defeat suicide among veterans and we must address economic factors as soon as possible. We need the research and data on veterans using economic opportunity benefits, but we must also encourage veterans to engage in these earned benefits and provide them critical resources and appropriate intervention once they do engage. The VFW stands by ready to work with you to ensure a way forward toward the collective mission to end veteran suicide once and for all.

Chairman Levin, Ranking Member Moore, this concludes my testimony. Thank you for the opportunity to provide our remarks. I look forward to engaging in further discussions on this subject.

Information Required by Rule XI2(g)(4) of the House of Representatives

Pursuant to Rule XI2(g)(4) of the House of Representatives, the VFW has not received any federal grants in Fiscal Year 2022, nor has it received any federal grants in the two previous Fiscal Years.

The VFW has not received payments or contracts from any foreign governments in the current year or preceding two calendar years.

[1] Barlet, Tammy. *Statement of Tammy Barlet, Deputy Director National Legislative Service Veterans of Foreign Wars of the United States before the United States House of Representatives Committee on Veterans' Affairs with respect to Veteran Suicide Prevention: Innovative Research and Expanded Public Health Efforts*. 22 Sep 2021: <https://docs.house.gov/meetings/VR/VR00/20210922/114047/HHRG-117-VR00-Wstate-BarletT-20210922-U2.pdf>

[2] Ravindran, Chandru et al. *Association of Suicide Risk with Transition to Civilian Life Among US Military Service Members*. 11 Sep 2020: <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2770538>

[3] Phillips J and Hempstead K. *Differences in U.S. Suicide Rates by Educational Attainment, 2000-2014*. *American Journal of Preventative Medicine*. Oct 2017: <https://pubmed.ncbi.nlm.nih.gov/28756896/>

[4] Ravindran, Chandru et al. *Association of Suicide Risk with Transition to Civilian Life Among US Military Service Members*. 11 Sep 2020: <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2770538>

[5] Pollard Maggie and Sarah Berger. *Factors that Fuel Post-9/11 GI Bill Education Benefits Usage*. Accenture. Feb 2022: https://acn-marketing-blog.accenture.com/wp-content/uploads/2022/02/Final_Report_Factors-that-Fuel-Post_9_11-GI-BillEducation-Benefits-Usage_compressed.pdf

[6] U.S. Department of Veterans Affairs. *From Science to Practice: The Effect of Unemployment on Suicide Risk*. 19 Aug 2019: https://www.mentalhealth.va.gov/suicide_prevention/docs/Literature_Review_FSTP_Unemployment_FINAL_508_8-19-2019.pdf

[7] Durruthy, Rosanna. *Employee resource groups help strengthen connection in times of uncertainty*. Fast Company. 30 May 2020:

<https://www.fastcompany.com/90511029/employee-resource-groups-help-strengthen-connection-in-times-of-uncertainty>

[8] Government Accountability Office. *Veterans with Disabilities: VA Could Better Inform Veterans with Disabilities about Their Education Benefit Options*. July 2021:

<https://www.gao.gov/assets/gao-21-450.pdf>

[9] Montgomery, Ann Elizabeth et al. *Intervention to address homelessness and all-cause and suicide mortality among unstably housed US Veterans, 2012–2016*. Epidemiol Community Health. 10 Mar 2021:

<https://jech.bmj.com/content/75/4/380>

[10] Holliday, Ryan et al. *Preventing Suicide Among Homeless Veterans: A Consensus Statement by the Veterans Affairs Suicide Prevention Among Veterans Experiencing Homelessness Workgroup*. Medical Care. April 2021:

https://journals.lww.com/lww-medicalcare/Fulltext/2021/04001/Preventing_Suicide_Among_Homeless_Veterans_A.4.aspx

[11] Kamdar, Nipa et al. *Risk for depression and suicidal ideation among food insecure US veterans: data from the National Health and Nutrition Examination Study*. Social Psychiatry and Psychiatric Epidemiology. Dec 2021:

<https://pubmed.ncbi.nlm.nih.gov/33770225/>

[12] Rabbit, Matthew and Michael Smith. *Food Insecurity Among Working-Age Veterans*. United States Department of Agriculture Economic Research Service. May 2021:

<https://www.ers.usda.gov/webdocs/publications/101269/err-829.pdf?v=4555>

[13] El Zein, Aseel et al. *Prevalence and correlates of food insecurity among U.S. college students: a multi-institutional study*. BMC Public Health. 7 May 2019:

<https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-019-6943-6>

[14] Saltsman, Adam et al. *Hunger & Homelessness at Worcester State University*. Urban Action Institute of Worcester State University and WSU's Department of Urban Studies CityLab. Mar 2019:

<https://www.worcester.edu/WorkArea/DownloadAsset.aspx?id=13534>

[15] Zaru, Deena. *LGBTQ veterans discharged dishonorably for sexual orientation to get full benefits, VA says*. ABC News. 20 Sep 2021: <https://abcnews.go.com/Politics/lgbtq-veterans-discharged-dishonorably-sexual-orientation-full-benefits/story?id=80129318>

[16] Lynch, Kristine et al. *Evaluation of Suicide Mortality Among Sexual Minority US Veterans From 2000 to 2017*. 28 Dec 2020: <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2774495?resultClick=3>

[17] U.S. Department of Veterans Affairs, Office of Mental Health and Suicide Prevention. *2020 National Veteran Suicide Prevention Annual Report*. 2020: <https://www.mentalhealth.va.gov/docs/data-sheets/2020/2020-National-Veteran-Suicide-Prevention-Annual-Report-11-2020-508.pdf>

[18] Government Accountability Office. *DOD Health: Actions Needed to Ensure Post-Traumatic Stress Disorder and Traumatic Brain Injury Are Considered in Misconduct Separations*. May 2017: <https://www.gao.gov/products/gao-17-260>

[19] United States District Court for the District of Connecticut. *Manker v. Toro*. Case 3:18-CV-372. 15 Feb 2022: https://law.yale.edu/sites/default/files/area/clinic/2022.02.15_final_approval_order_vlsc.pdf

[20] U.S. Department of Veterans Affairs, Office of Mental Health and Suicide Prevention. *National Strategy for Preventing Veteran Suicide 2018-2028*. 2018. https://www.mentalhealth.va.gov/suicide_prevention/docs/Office-of-Mental-Health-and-Suicide-Prevention-National-Strategy-for-Preventing-Veterans-Suicide.pdf

[21] Going, Christine and Anne Utech. *Food insecurity screenings connect Veterans, resources*. Vantage Point Blog. 2 Sep 2021: <https://blogs.va.gov/Vantage/94006/food-insecurity-screenings-connect-veterans-resources/>

[22] Hall, Lauren. *SNAP Helps 1.2 Million Low-Income Veterans, Including Thousands in Every State*. Center on Budget and Policy Priorities. 9 Nov 2021: <https://www.cbpp.org/sites/default/files/atoms/files/11-9-17fa.pdf>

[23] Williams, Kayla. *Tenth anniversary of the repeal of Don't Ask, Don't Tell*. VAntage Point Blog. 20 Sep 2021: <https://blogs.va.gov/VAntage/94920/tenth-anniversary-of-the-repeal-of-dont-ask-dont-tell/>

[24] Phillips, Dave. *Ousted as Gay, Aging Veterans Are Battling Again for Honorable Discharges*. The New York Times. 7 Sep 2015: <https://www.nytimes.com/2015/09/07/us/gay-veterans-push-for-honorable-discharges-they-were-denied.html>

[25] U.S. Department of Veterans Affairs, Office of Mental Health and Suicide Prevention. *2021 National Veteran Suicide Prevention Annual Report*. 2021: <https://www.mentalhealth.va.gov/docs/data-sheets/2021/2021-National-Veteran-Suicide-Prevention-Annual-Report-FINAL-9-8-21.pdf>