

**Governor’s Behavioral Health Services Planning Council
Service Members, Veterans, and their Families (SMVF) Subcommittee
2023 Annual Report**

Mission: To ensure that servicemembers, veterans and their families are involved in improving access to behavioral health services which are relevant to military culture in collaboration with key provider organizations and other stakeholders.

Vision: There is an expanded and identifiable network of service providers and community supports to adequately meet the behavioral health care needs of veterans, service members, and their families which includes training provider staff about key elements of military culture and organization as well as ongoing engagement of veterans, service members and family members in eliminating barriers to treatment and in creating flexible treatment and recovery options.

Membership: Subcommittee members represent individuals, agencies, and community partners who work with the SMVF population, are active service members, have veteran status, or are family members of a service member/veteran.

FY23 GBHSPC Veterans Subcommittee Membership

Chair: Kathy Shepard, Four County Mental Health

Vice Chair: Janell Stang, Wichita State University

Full Membership

NAME	ORGANIZATION
Charles Bartlett (Continuous Position)	KDADS
Gary Henault (Continuous Position)	KDADS
Laura Brake (Continuous Position)	KDADS
Carolyn Coyne (Continuous Position)	KDADS
Wes Cole (Continuous Position)	GBHSPC
Timothy Marlar (Continuous Position)	American Legion
Larry Salmans (Continuous Position)	Senator (Retired)
Alicia Carey (Continuous Position)	Community Engagement & Partnership VISN 15 VHA Office of Mental Health and Suicide Prevention
Dr. Christina Menager (Continuous Position)	Comery-O’Neil Veterans’ Administration Medical Center Dwight D. Eisenhower Department of Veterans Affairs Medical Center
Cassandra Blake (Continuous Position)	Robert J. Dole VA Medical Center
Maria Granados (Continuous Position)	Robert J. Dole VA Medical Center
Chairperson Kathy Shepard	Four County Mental Health
Vice Chair Janell Stang	WSU Community Engagement Institute
Steve Christenberry	Veteran
Shereen Ellis	Aetna Better Health of Kansas
Tony Nutz	NAMI
Lisa Chaney	Greenbush
Lori Bishop	Flint Hills Volunteer Center
Christopher Bowers	Washburn University & VFW Commander (Topeka)

Angela Gabel	Kansas Air Guard
Lisa Galindo	Kansas National Guard
Loran Osborn	Four County Mental Health Army and Navy Veteran
Bill Turner	Kansas Commission on Veterans Affairs Office
Jim Crosby	Together With Veterans and Morris County
Tom Reust	Ft Riley Public Affairs Specialist
Stacy Haines	DCCCA
Jessica Wilson	Aetna Better Health of Kansas
Michelle Ferrer	Kansas National Guard
Megan Willis	Central Kansas Mental Health Center

Year in Review: The SMVF Subcommittee has worked to continue strengthening collaboration and partnership opportunities and increase the effectiveness of State and local efforts to address SMVF issues. The sub-committee has continued to identify resources, and to address the broader behavioral healthcare needs of veterans, service members, and their families.

Per the Veterans Data Central (Appendix A) site, in 2022, the Kansas population was comprised of 167,573 adults (7.6%) who are veterans. Of the 167,573 adult veterans, 24,243 have housing issues, and 6.8% live in poverty. While the number of veterans in the state has decreased, the number of veterans living in poverty has increased.

In December, Jess Hegstrom with Montana’s Lewis & Clark Suicide Prevention Coalition presented information about their Suicide Prevention Campaign to the SMVF Subcommittee. Lewis & Clark Suicide Prevention Coalition used two commercials in their campaign. The first commercial, “The Conversation,” featured two adults in a horse arena having a difficult conversation about suicide. The second commercial, “Lock It Up,” featured young people sharing the message that locking up firearms can save their lives. The SMVF Subcommittee is interested in using one or both of these commercials in the future. Montana’s Lewis & Clark Suicide Prevention Coalition is willing to share these commercials with credit given.

In May, Alicia Carey, Community Engagement & Partnership Program Manager at the VHA Office of Mental Health and Suicide Prevention, presented the Community-Based Interventions for Suicide Prevention Priority Areas.

1. Identify Service Members, Veterans, and their Families and Screen for Suicide Risk
2. Promoting Connectedness and Improving Care Transitions
3. Increase Lethal Means Safety and Safety Planning

These priority areas helped guide the SMVF Subcommittee in goal setting for FY2024.

The subcommittee requested Kansas Veteran Suicide data from the Kansas Violent Death Reporting System (KsVDRS) at the Kansas Department of Health and Environment in May (Appendix B). The subcommittee was looking for more specific geographic data within Kansas. The KsVDRS report compiled data from 2019 and 2020 and showed that 17% of suicide deaths in Kansas were among veterans. The four counties with the highest rate of Veteran suicides were Sedgwick, Johnson, Geary, and Shawnee. Firearms were the most common method used in Veteran Suicides.

Throughout the year, the SMVF Subcommittee worked to build relationships with SMVF-focused groups in Kansas. Megan Willis with Central Kansas Mental Health Center presented during a subcommittee meeting on their work in Salina with Joining Community Forces. Megan joined the subcommittee as a representative from the group.

The former Chair, Shereen Ellis, stepped down in the Fall of 2022 due to moving out of state. Kathy Shepard assumed the position of Chair from Vice Chair, and Janell Stang accepted the position of Vice Chair. This past year, the subcommittee has re-evaluated the focus and goals of the subcommittee moving forward.

FY2023 Goals and Progress:

Ongoing support of LiveConnectedKS.org

- The SMVF Subcommittee continues to work towards increasing the diversity of events, trainings, and resources offered on the website.
- The SMVF Subcommittee created a Communication Task Force to help promote the website.
- A feedback survey was created and shared to gather feedback on the usefulness of LiveConnectedKS.org. Fifty-three responses were collected and shared with the subcommittee.

Encourage use of PsychArmor training to all subcommittee members, CCBHCs and other identified organizations that the training is available and free of charge.

- CCBHC are required to be culturally competent in military and veteran cultures. KDADS receives the PsychArmor training report for Kansas to track who has completed the Vet Ready Package.
- 80% of SMVF Subcommittee Members have completed the PsychArmor “15 Things” Training.

Create a Live Connected Campaign

- Worked to schedule a recording time with Governor Kelly’s team to create a PSA on Veteran Suicide. The PSA was filmed on July 10th, 2023.
- The subcommittee is creating a plan to distribute the PSA across the state through local channels and virtual platforms during FY2024.

Recommendations:

The SMVF Subcommittee recommends improved collaboration between state agencies that focus on improving the lives of the SMVF community in Kansas. The subcommittee recommends an annual meeting with the KDADS, SMVF Subcommittee Leadership, Kansas Commission on Veteran’s Affairs, and other identified veteran service organizations’ leadership in Kansas.

The SMVF Subcommittee recommends KDADS to dedicate funding for a statewide Lethal Means Safety Campaign. The subcommittee recommends prioritizing the SMVF community, especially veterans aged 65 and above based on Kansas specific suicide data.

The SMVF Subcommittee recommends KDADS dedicate funding for Mental Health First Aid or other identified suicide prevention training in partnership with local VSOs to provide training for the SMVF community.

Goals for FY2024:

Goal 1: Use Live Connected KS to share suicide prevention messages among the SMVF Community in Kansas

- 1.1 Create a promotion plan to promote the website within Kansas
- 1.2 Distribute Governor Kelly’s SMVF Suicide Prevention PSA on the website and social media
- 1.3 Review and update the plan as needed

Goal 2: Determine the best evidence-based program or strategy to promote lethal means safety

- 2.1 Research programs other states have used to promote lethal means safety among the SMVF Community
- 2.2 Determine what is currently being done in Kansas
- 2.3 Provide recommendation to the GBHSPC and KDADS Secretary

Goal 3: Advocate for KDADS’ Kansas Certified Peer Specialist Training to include additional SMVF peer support curriculum.

- 3.1 Request information on peer support services within the VA system
- 3.2 Identify and prioritize subjects that are available to and scalable for the Kansas Certified Peer Specialist Training
- 3.3 Establish contact with the KS Certified Peer Specialist Training Team and the Peer Support Subcommittee to share priorities, generate feedback, and determine next steps

Goal 4: Strengthen partnerships with SMVF organizations in Kansas

- 4.1 Continue building relationships with the Kansas Commission of Veteran’s Affairs (KCVA) through the subcommittee
- 4.2 Determine areas of the state not connected to Live Connected KS and work to fill the gap
- 4.3 Develop a means to identify and promote SMVF resources, events, and trainings

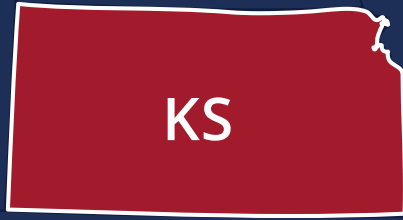
Summary: The SMVF Subcommittee has seen an increase in membership and participation in the last four years. Due to these changes, the subcommittee felt the need to re-evaluate goals and practices. Much of FY23 was dedicated to understanding our purpose as a subcommittee and realigning our practices. The subcommittee has and will continue to gather information to focus our direction toward improving behavioral health among Service Members, Veterans, and their Families.

Appendix A: Supporting Veterans in Kansas, Veterans Data Central

Appendix B: Kansas Veteran Suicide data, Kansas Violent Death Reporting System (KsVDRS)

Appendix A

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SUPPORTING VETERANS IN KANSAS



KS'S VETERANS

VETERAN POPULATION

167,573

Veterans in Kansas

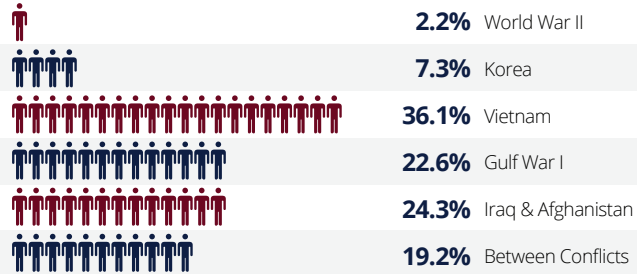


% VETERANS

7.6%

of Kansas's adult population are veterans of the U.S. military

SERVICE ERA*



Source: Housing Assistance Council tabulations of the 2017-2021 American Community Survey (ACS PUMs used for certain estimates)
* Totals may exceed 100%. Some veterans served in multiple eras.



LOCATION

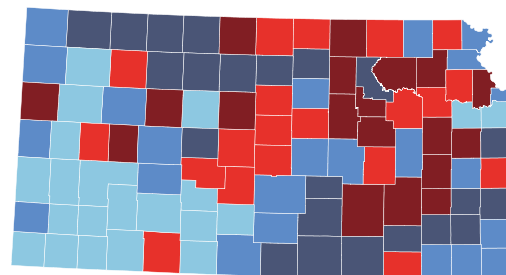
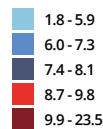


GEOGRAPHY

Veterans by County

Veterans as a percent of the adult population

Counties
Percent Veteran Population



Source: Housing Assistance Council tabulations of the 2017-2021 American Community Survey (ACS PUMs used for certain estimates)

To learn more about Veterans in your community visit

Veterans Data Central
at www.veteransdata.info



**ECONOMIC
WELL BEING**



3.2%

Unemployment rate for Kansas's veterans. The overall unemployment rate for Kansas is 4.0%. Younger persons have the highest rates of unemployment among veterans



6.8%

of Kansas's veterans live in poverty



\$64,300

Median household income of Kansas veterans. The median income of all Kansas households is \$63,553.



24.3%

of Kansas's veterans have a service connected disability rating (40,691 Veterans).

Source: Housing Assistance Council tabulations of the 2017-2021 American Community Survey (ACS PUMs used for certain estimates)



**HOUSING
&
HOMES**

**VETERAN
OCCUPIED
HOMES**

111,165



Approximately 111,165, or 9.8 percent, of Kansas's homes are occupied by veterans.

**HOME-
OWNERSHIP**

75.1%



Homeownership rate of Kansas's veterans

**HOME
VALUE**

\$150,000



The median value of Kansas veterans' homes is \$150,000. The state's overall median home value is \$160,000.

**HOUSING
PROBLEMS**

24,243



Approximately 24,243 Kansas veterans live in homes with one or more major problems of quality, crowding, or cost. Housing affordability is the greatest housing problem among veterans. Roughly 20.8 percent of Kansas veterans pay too much for their housing.

**VA
MORTGAGE
LOANS**

9,989



In 2021, 9,989 VA home loan guarantees were made in Kansas to support veteran homeowners. VA loans represented 9.9 percent of Kansas's home mortgage originations in 2021.

**HOME-
LESSNESS**

195



HUD estimates that approximately 195 Kansas veterans are homeless.

Source: Housing Assistance Council tabulations of the 2017-2021 American Community Survey (ACS PUMs used for certain estimates), 2021 Home Mortgage Disclosure Act (HMDA) Data, 2022 HUD Point in Time Homeless Estimate (PIT)

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**Veterans
Data Central**
at www.veteransdata.info



Housing Assistance Council

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Appendix B

KsVDRS- Veteran Suicides

Date: 5/5/2023
Requested by: Janell Stang, SMVF Subcommittee for the Governor's Behavioral Health Services Planning Council,
Data Requested: Veteran suicide deaths in Kansas
Prepared by: Sophia Ringering MPH, Epidemiologist (Sophia.Ringering@ks.gov)

Technical Notes

Data Source: Kansas Violent Death Reporting System (KsVDRS), Kansas Department of Health and Environment

Statistical Methods: KSVDRS is a state-based surveillance system that collects data from multiple sources including death certificates, coroner/medical examiner reports, and law enforcement reports. KSVDRS data was analyzed to describe the burden, characteristics, and geographic locations of veteran suicides (>18 years) in Kansas.

- 97% of these deaths had circumstances reported from coroner/ medical examiner and law enforcement reports.

Calculations: Rates and 95% confidence intervals are age-adjusted using the direct standardization method. Non-overlapping confidence intervals are considered significant when comparing rates.

Data Years: 2019-2020

Geography: Kansas, trauma regions, and reportable* counties

Limitations: Non-zero counts less than 6 are suppressed

Data

Key Findings from 2019-2020:

- In Kansas, 17% of suicide deaths were among veterans (N=160/968) (Table 1).
- About 24.1 per 100,000 veterans died by suicide which was nearly three times the rate of non-veterans (8.2 per 100,000) (Table 1).
- Veteran suicides varied across victim demographics.
 - Males accounted for 96% of veteran suicides (N=153) (Table 2)
 - Victims ages 65+ made up 47% of veteran suicides (Table 3)
- Counties with the highest veteran suicide counts include Sedgwick, Johnson, Geary, and Shawnee (Table 5). These four counties accounted for 51% of all veteran suicides in 2019-2020.

- According to the KsVDRS, among veteran suicides (Figure 2):
 - 27% experienced crisis within 2 weeks of death
 - Over 2 in 5 victims were identified as having current depressed mood (43%) or had mental health problems (41%) at the time of death
 - 2 in 5 (40%) had a physical health problem
 - Over 1 in 4 (27%) had a intimate partner problem
 - Over 1 in 4 (26%) had an alcohol problem
 - 1 in 5 (20%) had a history of mental health treatment

- Suicide-specific (Figure 2):
 - Over 1 in 3 (37%) had a history of suicidal thoughts
 - About 1 in 3 (32%) told someone their thoughts and/or plans to die by suicide
 - Over 1 in 4 (28%) had left a suicide note

Table 1. Frequency, Percent, and Age-Adjusted Rate per 100,000 of Veteran and non-Veteran Suicides, Kansas, 2019-2020

Kansas	N (%)	Rate per 100,000 Residents (95% CI)
Veterans	160 (17%)	24.1 (19.2-29.0)
Non-veterans	808 (83%)	8.2 (7.6-8.8)

Table 2. Frequency and Percent of Veteran Suicides by Sex and Race/Ethnicity, Kansas, 2019-2020

Sex	N (%)
Male	153 (96%)
Female	7 (4%)
Race/Ethnicity	
White, Non-Hispanic	145 (91%)
Black, Non-Hispanic	7 (4%)
American Indian/Alaska Native, Non-Hispanic	0
Asian/Pacific Islander, Non-Hispanic	*
Hispanic	*

* Counts less than 6 are suppressed.

Table 3. Frequency and Percent of Veteran Suicides by Age Group (>18 years), Kansas, 2019-2020

Age Group	N (%)
18-24 years	17 (10%)
25-34 years	22 (14%)
35-44 years	11 (7%)
45-54 years	19 (12%)
55-64 years	16 (10%)
65-74 years	27 (17%)
75+ years	48 (30%)

Table 4. Frequency and Percent of Veteran Suicides by Trauma Region, Kansas, 2019-2020

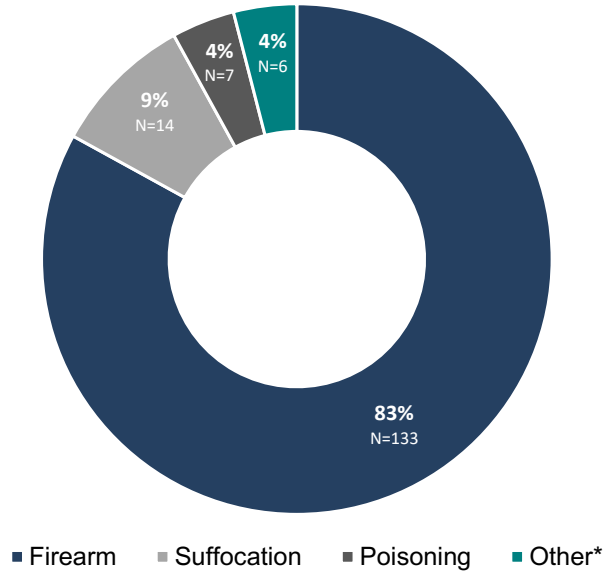
Trauma Region	Counties in each region	N (%)
NW	Cheyenne, Decatur, Ellis, Gove, Graham, Logan, Ness, Norton, Phillips, Rawlins, Rooks, Rush, Russell, Sheridan, Sherman, Thomas, Trego, and Wallace	7 (4%)
NC	Clay, Cloud, Dickinson, Ellsworth, Jewell, Lincoln, Mitchell, Osborne, Ottawa, Republic, Saline, and Smith	7 (4%)
NE	Anderson, Atchison, Brown, Chase, Coffey, Doniphan, Douglas, Franklin, Geary, Jackson, Jefferson, Johnson, Leavenworth, Linn, Lyon, Marshall, Miami, Morris, Nemaha, Osage, Pottawatomie, Riley, Shawnee, Wabaunsee, Washington, and Wyandotte	75 (47%)
SE	Allen, Bourbon, Chautauqua, Cherokee, Crawford, Elk, Greenwood, Labette, Montgomery, Neosho, Wilson, and Woodson	11 (7%)
SC	Barber, Barton, Butler, Comanche, Cowley, Edwards, Harper, Harvey, Kingman, Kiowa, Marion, McPherson, Pawnee, Pratt, Reno, Rice, Sedgwick, Stafford, and Sumner	53 (34%)
SW	Clark, Finney, Ford, Grant, Gray, Greeley, Hamilton, Haskell, Hodgeman, Kearny, Lane, Meade, Morton, Scott, Seward, Stanton, Stevens, and Wichita	6 (4%)

Table 5. Counts and Percentages of Veteran Suicides by Reportable* Counties, Kansas, 2019-2020

County	N (%)
Sedgwick	32 (20%)
Johnson	30 (19%)
Geary	12 (8%)
Shawnee	7 (4%)

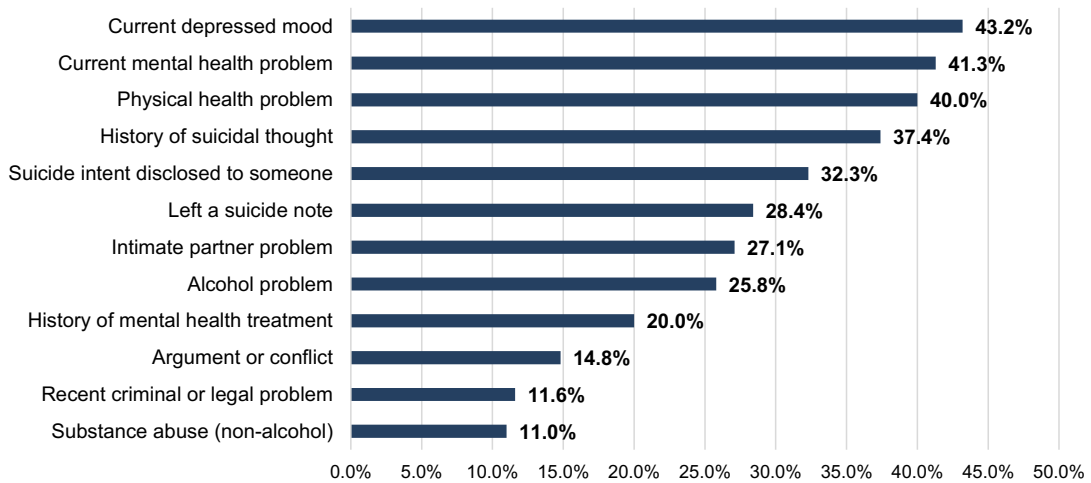
*Counties with counts less than 6 are suppressed.

Figure 1. Veteran Suicides by Method, Kansas, 2019-2020



*Cut or pierce, transportation, or others

Figure 2. Percent of Veteran Suicides by Top Reported Circumstances, Kansas, 2019-2020



Report completed by

Kathy Shepard, Chair of the SMVF Subcommittee

Janell Stang, Vice Chair of the SMVF Subcommittee

References:

HAC Veterans Data Central - informing strategies to help veterans. HAC Veterans Data Central
- Informing Strategies to Help Veterans. (n.d.). <https://veteransdata.info/>

Ringer, S. (2023, May 5). Kansas Violent Death Reporting System- Veteran Suicides.