



U.S. Department of Veterans Affairs  
 Veterans Health Administration  
 Health Services Research & Development Service

# VETERANS CRISIS LINE (VCL) CARING LETTERS

## BOTTOM LINE UP FRONT

Veterans have suicide rates that are more than 50% greater than those of non-Veteran adults in the United States. Caring Letters is an intervention that targets users of the Veterans Crisis Line, a suicide prevention phone line, for outreach and support. Early evaluation findings are promising and may have implications for suicide prevention and mental health care within the Veterans Health Administration and beyond.

## Introduction

Suicide is a leading cause of death in the Veteran population. In 2019, Veterans accounted for 13.7% of all deaths by suicide among U.S. adults, and had a suicide rate that was 52.3% greater than the general population.<sup>1</sup> Suicide rates vary depending on service branch, age, sex/gender, and other factors.<sup>2</sup> In response to this need, the Department of Veterans Affairs (VA) and Veterans Health Administration (VHA) have undertaken numerous efforts to prevent Veteran suicide and improve mental health outcomes. The VA 2018-2024 Strategic Plan reflects this commitment, and a number of ongoing suicide prevention programs and interventions are being evaluated for their effectiveness in the Veteran population.<sup>3</sup>

One intervention that is currently being piloted within VHA is Caring Letters. Adapted from a civilian-focused prevention program, Caring Letters is an intervention in which simple, caring, supportive messages are sent to Veterans who contact the Veterans Crisis Line (VCL), a suicide prevention phone line. In the civilian population, Caring Letters has already been found to be effective in preventing suicide.<sup>4</sup> In order to study the use of this intervention within the Veteran population, a three-year Quality Enhancement Research Initiative-funded partnered evaluation is underway through FY2023.

## Evaluation

The goal of this evaluation is to determine what impact Caring Letters has on mental health care utilization and Veteran health outcomes. Secondary aims include identifying facilitators and barriers to program implementation and cost analyses to determine the long-term financial implications of the program. Using an effectiveness-implementation hybrid design, this evaluation will utilize both randomized and non-randomized components to study clinical effectiveness and implementation goals.

In the randomized portion of the study, all Veterans who meet the inclusion criteria will receive nine caring letters over the course of a year following their initial contact with VCL, randomized by signatory (by provider or by peer Veteran). Participants will be included in the evaluation cohort if they contact the VCL during the evaluation period and are an identifiable VCL engager (e.g., not an anonymous contactor); have a valid mailing address on file with VA; and are contacting about themselves (i.e., not about a loved one). Veterans are also allowed to opt-out of receiving letters.

## Intervention Mailing Sequence



Month 1



Month 2



Month 3



Month 4



Month 6



Month 8



Month 10



Month 12



Veterans Day\*

\* Does not follow sequence; mailed in observance of the holiday



In the non-randomized component, the study will evaluate mental health outcomes and care utilization pre- and post-intervention by comparing Veterans who engage with the VCL prior to Caring Letters (June 2018 – May 2020) and Veterans who engage with the VCL after implementation (June 2020 – June 2021). This pre-post design will provide data on differences in outcomes among VCL engagers who do and do not receive letters.

This evaluation is being led by investigators at the VA Puget Sound Healthcare System in collaboration with the Partnered Evidence-based Policy Resource Center. VA Central Arkansas is also responsible for a qualitative evaluation component.

## Dissemination & Policy Response

Status reports and preliminary findings are regularly disseminated to key stakeholders within VA leadership, including the Office of Mental Health and Suicide Prevention. These real-time updates provide leadership with insights into the impact of Caring Letters, as well as associated resource demands, which can then be used to inform implementation.

Evaluation findings will also be disseminated through other academic and clinical channels, including journal articles in peer-reviewed publications. This is the largest Caring Letters program to date and the results of this evaluation will have implications for suicide prevention within the VCL and VA system.

## Impact

The VCL Caring Letters program provides important outreach to Veterans at risk for suicide. This evaluation is crucial to understanding the impact of Caring Letters on VHA mental health care utilization, Veteran health outcomes, and the factors that promote or impede program implementation. A mounting body of literature contemplating Veterans' mental health needs, perceptions, and experiences illustrates the many factors that may facilitate or impede access to mental health care.<sup>5,6</sup> This evaluation will add to the evidence base by contributing findings on the impact of the Caring Letters intervention on engagement in mental health care. Further, this evaluation will have implications for suicide prevention, specifically how the Caring Letters intervention can be deployed as part of a comprehensive health system strategy for suicide prevention.

## References

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