Chairman Takano, Ranking Member Bost, and distinguished members of the Committee, thank you for inviting the Association of VA Psychologist Leaders (AVAPL) to submit a statement for the record for this important hearing: “Veteran Suicide Prevention: Innovative Research and Expanded Public Health Efforts.” AVAPL is a non-profit organization with a voluntary membership of psychologists with various roles within the Department of Veterans Affairs (VA).

We represent more than 1400 psychologists from trainees to clinical executives and VA policymakers in Central Office. Psychologists are on the cutting edge of suicide prevention research and clinical care, providing evidence-based treatments to Veterans with an unshakable commitment to saving lives. In light of suicide prevention month, thank you for holding this important hearing and continuing to highlight the important issue of suicide prevention for our nation’s Veterans.

AVAPL believes there are several key bills that will improve suicide prevention services provided by VA and ultimately save Veteran lives.

**EVEST Act** (H.R. 4673) – AVAPL believes it is critical to enact the EVEST Act, which would auto-enroll Veterans into VA’s patient enrollment system. We know from recent studies examining Veteran suicide that many Veterans die within the first 30 days following their discharge from active duty. Yet, many Veterans are unaware of the Veterans Health Administration (VHA) benefits they may be eligible for, including mental health services, and may not enroll to receive the care they have earned through their service. In contrast, this bill would make accessing VA care easier for thousands of Veterans, allowing them to utilize VA’s high-quality, evidence-based mental health care and potentially saving many lives. AVAPL strongly supports this bill.

**Veterans’ Culturally Competent Care Act** (H.R. 4627) – Enacting this bill would require non-VA mental health providers to receive specific training in military cultural competency, suicide prevention, military sexual trauma, and other Veteran-relevant health conditions that increase risk for suicide. Increasing the number of providers who are skilled in meaningful care for Veterans experiencing suicidal ideation will save Veteran lives. AVAPL strongly supports this bill.
**Lethal Means Safety Training Act** (H.R. 2749) – This vital bill requires non-VA mental health providers, Veterans Benefits Administration employees, and others to take a specific course in suicide prevention and lethal means safety counseling. Lethal means safety is an evidence-based approach that saves lives and is required training for every VA clinician. Veterans who die by suicide are much more likely to use firearms compared to their civilian counterparts, and the simple act of locking away a weapon, can put time and space between a suicidal thought and action. Lethal means safety, not just for firearms but also medication and other means, saves lives. AVAPL strongly supports this bill.

In addition to specific legislation that will improve access to and quality of mental health care for Veterans both within and outside VA, there are additional steps that can be taken to help reduce Veteran suicide.

- **Increase investment in suicide prevention research within VA.** VA researchers, many of whom are psychologists and AVAPL members, are on the cutting edge of suicide prevention, intervention, and management research. The Rocky Mountain MIRECC, run by psychologist Lisa Brenner, PhD, is producing research that informs how VA provides care to Veterans each day. Robustly funding suicide prevention research within VA ensures that we are able to continuously improve how VA manages Veterans experiencing suicidal ideation, ultimately saving lives. Within VA’s research portfolio, it is vital to pay specific attention to those at increased risk for suicide, including Veterans who identify as part of the LGBTQIA+ community.

- **Improve psychologist hiring and retention.** Psychologists conduct life-saving research into mental health conditions and suicide prevention as well as support Veterans as clinicians, providing high-quality, evidence-based care. However, psychologists have been one of the top five critical staffing shortage list since 2015, with the 2021 report expected to be released this month. More must be done in order to recruit and retain psychologists, including moving psychologists to full Title 38 hiring authority and ensuring they have equal access to VA’s education support programs such as the Health Professional Scholarship Program and the Education Debt Reduction Program. Additionally, guaranteeing funds for yearly continuing education is also an inexpensive way to improve retention. Psychologists play critical roles within VA as trainees, clinicians, researchers, and supervisors. Ensuring VA is able to recruit and retain

---

- **Support in-house VA mental health care.** VA remains one of the largest integrated healthcare systems in the county, providing care to millions of Veterans each year. This integration improves continuity of care and makes it easier for Veterans to access mental health services if they are already engaged in VA care for other conditions. Additionally, many VA providers are Veterans themselves and can more easily relate to their Veteran patients than providers in the community. Maintaining a strong VA mental health infrastructure will ensure that VA can continue to provide a strong, integrated network of care to all Veterans.

Thank you for inviting AVAPL to submit a statement for the record for this important hearing. If you have any questions or would like additional information, I can be reached at president1@avapl.org.

Kaki York-Ward, PhD
President, AVAPL
Kaki York-Ward, PhD
President, Association of VA Psychologist Leaders

Kaki York-Ward is the Deputy Clinical Executive for Mental Health at the Houston VA, the first psychologist to hold this position. She is board certified in Clinical Health Psychology. Dr. York also served as the Treasurer for the Academy of Clinical Health Psychology from 2013 through 2016. In addition to her role as a clinician and administrator, Dr. York is a strong supporter of both the research and teaching missions of VA. She is a past preceptor for the HIV HEP C Fellowship, instructor for several seminars throughout the year and has demonstrated service to research as a past member of the local IRB, and co-author on academic projects as time permits. Dr. York is also an advocate for VA’s public health initiatives and for the critical role of Psychologists in developing patient centered integrated health services.