

Military Sexual Trauma: Implications for Suicide Prevention

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Learning Objectives

- Define and discuss what constitutes an experience of Military Sexual Trauma (MST).
- Describe the prevalence of MST among men and women servicemembers and common mental health outcomes associated with the experience(s).
- Understand how the Dept. of Veterans Affairs (VA) screens for MST.
- Describe the implications for suicide prevention among survivors of MST.





What is Military Sexual Trauma (MST)?

The Dept. of Veterans Affairs defines Military Sexual Trauma, or MST, as experiences of sexual assault or sexual harassment experienced during military service.

- MST is an experience, not a diagnosis or a mental health condition.
- The identity or characteristics of the perpetrator, whether you were on or off duty at the time, and whether you were on or off base at the time do not matter.





Examples of MST

MST includes any sexual activity in which someone is involved against their will, including:

- Being physically forced into participation
- Being pressured into sexual activities (e.g., with threats of consequences)
- Being unable to consent to sexual activities (e.g., intoxicated)
- Experiencing threatening and unwelcome sexual advances
- Experiencing unwanted sexual touching or grabbing
- Experiencing threatening, offensive remarks about a person's body or sexual activities





How common is MST?

 Approximately 1 in 3 women and 1 in 50 men report experiencing sexual trauma in the military





*Although women experience MST in higher proportions than do men, because of the large number of men in the military there are significant numbers of men and women who have experienced MST.







Veterans Affairs MST Screen

The VA employs universal screening for MST at their facilities. Their screening tool includes the following questions -

While you were in the military:

- a) Did you receive uninvited and unwanted sexual attention, such as touching, cornering, pressure for sexual favors, or verbal remarks?
- b) Did someone ever use force or threat of force to have sexual contact with you against your will?





^{*}An affirmative response to either item is a positive screen for MST.

MST Outcomes

The diagnoses most associated with MST are:

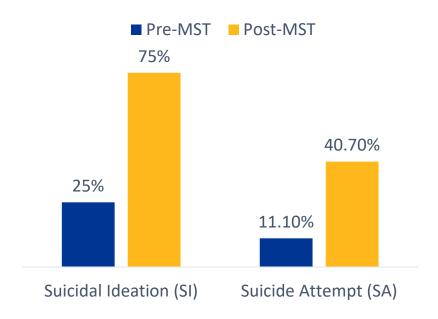
- PTSD
- Depression and other mood disorders
- Psychotic disorders
- Substance use disorders (SUD)
- Survivors of MST report more severe negative beliefs about themselves, the world, self-blame, and their ability to cope, compared to Veterans seeking treatment for combat-related trauma.
- Experiences of MST have also been shown to increase pain tolerance and lower fear of death among survivors, further increasing risk of suicide.





Suicide and MST

- 2019 study sample size of 108 MST survivors (66 women, 42 men)
- 75% reported post-MST suicidal ideation (SI)
- 40.7% reported attempting suicide following MST (SA)
- Drugs were the most reported method considered during SI, and used during SA (72.3% and 60.9%); followed by firearms (26.5% and 10.9%)
- The most common circumstances leading to SA: psychiatric symptoms (63%), interpersonal disputes (41.3%), and job/academic stressors (26.1%)







Implications for Suicide Prevention

- Assessment and management of lethal means
 - Drugs/medications reduce access to large quantities (e.g., blister packing, prescribing smaller quantities)
 - Firearms interventions for safe storage (e.g., gun locks and safes); equip firearm retailers and range owners with the skills to identify individuals at risk for suicide
- Increase education, outreach and access
 - Develop educational materials for veterans and providers about the symptoms associated with sexual trauma and the availability of services
 - Increase Veterans' access to evidence-based treatments through community partnerships with local providers, VA and Vet Centers





Integrating Existing Campaigns

- MST specific questions on screeners
- Assists in identifying survivors and connecting them to services/resources
- Highlights the need for trauma-informed care

Have you or has someone close to you ever served in the military?

- When did you serve?
- Which branch?
- What did you do while you were in the military?
- Were you assigned to a hostile or combative area?
- Did you experience enemy fire, see combat, or witness casualties?
- Were you wounded, injured, or hospitalized?
- Did you participate in any experimental projects or tests?
- Were you exposed to noise, chemicals, gases, demolition of munitions, pesticides, or other hazardous substances?

Have you ever used the VA for health care?

- When was your last visit to the VA?
- Do you have a service-connected disability or condition? Do you have a claim pending? If so, what is the nature of the claim?
- Do you have a VA primary care provider?

Do you have a safe place to go when you leave today?

 Do you need assistance in caring for yourself or members of your household?



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Questions?





References

- Kimerling, R., Gima, K., Smith, M. W., Street, A., & Frayne, S. (2007). The Veterans Health Administration and military sexual trauma. American journal of public health, 97(12), 2160–2166.
 https://doi.org/10.2105/AJPH.2006.092999
- National Action Alliance for Suicide Prevention, Lethal Means Stakeholder Group. (2020). Lethal means & suicide prevention: A guide for community & industry leaders. Washington, DC: Education Development Center.
- Monteith, L. L., Holliday, R., Schneider, A. L., Forster, J. E., & Bahraini, N. H. (2019). Identifying factors
 associated with suicidal ideation and suicide attempts following military sexual trauma. Journal of Affective
 Disorders, 252, 300–309. https://doi.org/10.1016/j.jad.2019.04.038
- U.S. Department of Veterans Affairs, Military Sexual Trauma Support Team. (2021, May). Military Sexual
 Trauma Fact Sheet. Retrieved February 2022, from https://www.mentalhealth.va.gov/docs/mst_general
 _factsheet.pdf







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