

2025-2026 ANNUAL REPORT

WISCONSIN SUICIDE MORTALITY REVIEW

Table Of Contents



Report Content	Page Number
Introduction.....	Page 1
Veteran Suicide in Wisconsin.....	Page 2
Meet Our Team.....	Page 3
Guiding Principles.....	Page 4
Recommendations.....	Page 5-9
Next Steps.....	Page 10
References.....	Page 11
Contact Us.....	Page 12

Introduction

A suicide review team is a group of local multi-disciplinary organizational representatives who convene to discuss risk factors and circumstances surrounding a death by suicide in order to recommend local prevention strategies. Suicide review is intended to be a “deep dive” of a suicide case, using all available data and information to understand the factors that preceded the death by suicide.

In 2024, through a partnership with the Department of Veterans Affairs, the Medical College of Wisconsin (MCW) Comprehensive Injury Center (CIC) received a grant to extend the work of suicide mortality review (SMR) across the state of Wisconsin and create the State of Wisconsin Suicide Mortality Review Team (WSMR) focused on reviewing suicides among Wisconsin Veterans.

This effort includes:

- Providing technical assistance and expanding local county SMRs
- Focusing on veteran mental health over the next two years
- Data collection and analysis

Dr. Sara Kohlbeck, the director of WSMR and director of Suicide Research and Healing in the MCW CIC notes that, “Suicide mortality review is a key public health-based activity designed to generate recommendations to prevent suicide. Focusing on the Veteran population in Wisconsin is a promising first step in expanding suicide review across the state, and through the partnerships we formed in WSMR, we hope to contribute actionable recommendations that will prevent suicide and promote healing among those who have served.”



Did you know? Wisconsin currently has **25** suicide mortality review teams serving urban and rural communities. Visit www.mcw.edu/cic to learn more!

Veteran Data

In partnership with the Wisconsin Department of Veteran Affairs (WDVA) and the Wisconsin Department of Health Services (DHS), the MCW CIC Division of Suicide Research and Healing (DSRH) was able to conduct data analysis on Veterans with verified status suicide deaths in 2022.

Verification Results

WDVA records verified 137 out of 145 Veterans from the 941 suicides that occurred in 2022. Then DHS took the list of Veterans with verified status and linked it with Wisconsin Violent Death Reporting System (WVDRS) records. WVDRS collects in depth information from Coroner/Medical Examiner and Law Enforcement reports on all violent deaths in the state, including suicides. Throughout this report, this data will be included and referred to as Veterans with verified status data.

Use

- Enhance Case Review

Verification not only confirms Veteran status but also provides broader information for case review.

- Decrease Silos

Partners conducting thorough case reviews, data analysis, and developing recommendations enhances work across systems.

- Identify Trends

Case reviews involve looking at one or two cases each meeting. In-depth data analysis allows for broader trend identification across a population, like Veterans.

Data Overview

Demographics

- Average age was **61 years**
- **97%** White, non-Hispanic
- Rate of **15** suicide deaths per 100,000 people

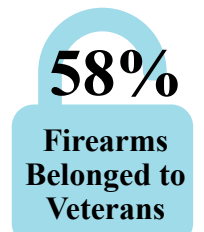
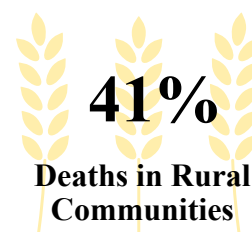
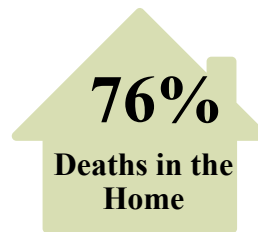
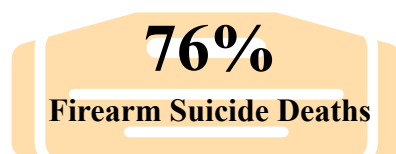
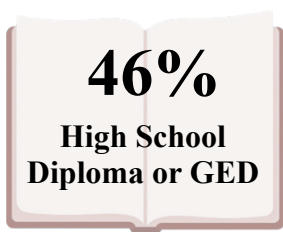
Injury

- **76%** of injuries involved firearms
- **76%** of deaths occurred in the Veteran's home

Additional Information

- **16%** had a history of suicide attempts
- **28%** had a history of suicidal thoughts

Additional Factors



Meet Our Team

The WSMR Team is made up of 14 dedicated individuals representing seven organizations across the state, as well as community members and Veterans. Thank you to each and every one of our team members for their dedication to this work.

Clement J. Zablocki
VA Medical Center

Graham Knowlton

Community/Indigenous Leader

Mark Denning

Department of Justice
(DOJ)

Katie Snell

Department of Health
Services (DHS)

Lindsay Emer

Department of
Veteran Affairs (DVA)

Jeremy Lyon
Chandler Miller

Medical College of
Wisconsin (MCW)

Lindsay Fuss
Sara Kohlbeck
Tricia Monroe
Ben Weston

Marathon County
Medical Examiner's
Office

Jessica Blahnik
Leah Schuppener

Milwaukee County Medical
Examiner's Office

Jessica Lelinski

Veteran

Mark Flower

Guiding Principles

The State of Wisconsin Suicide Mortality Review (WSMR) Team comes together to identify gaps, address systemic challenges, and uplift lived experiences—working collectively to reduce harm and prevent suicide across our state.

Guiding Principles



- **Advance Systemic Change:** We focus on identifying and addressing root causes and structural barriers to prevent suicide through long-term, sustainable solutions.



- **Ground in Evidence and Data:** We use research, data, and best practices to guide our recommendations, while recognizing where evidence is emerging or incomplete.



- **Act with Humility and Respect:** We approach our work with openness, empathy, and care for all participants, survivors, and community partners.



- **Center Lived Experience:** We honor and elevate the voices of those who have died by suicide, their loved ones, and those impacted—using their stories to inform our work and humanize our data.



- **Promote Equity and Inclusion:** We acknowledge and actively address disparities that exist in suicide risk and access to care, ensuring our approaches are inclusive and just.

Together, we use our community agreement and guiding principles to remain grounded in our shared goal—to prevent suicide and reduce harm in Wisconsin through intentional, coordinated action.

Recommendations

Suicide is a biopsychosocial health issue, and suicide reviews follow a biopsychosocial format! We consider the biological (physical), psychological, and social factors that were present in the life of the decedent.

Physical Factors

Example:

- Disability

Psychological Factors

Example:

- Mental Health Issues

Social Factors

Example:

- Legal Issues

Breaking down a suicide review in this manner is helpful to ensure that all facets of the case and all prevention opportunities related to physical health, psychological health, and social functioning are considered.

Levels of Prevention



Tertiary

Help people impacted.



Secondary

Identify people at risk.



Primary

Reduce risk factors and increase protective factors.

Each meeting, our team asks one another two questions:

1. What gaps were identified during this review?
2. What actions can we take to address these gaps?

As we review these questions, we consider various types of recommendations and what level of prevention they address. There are three levels of prevention considered, which are primary, secondary, and tertiary prevention.

WSMR reviewed four cases during year 1. From these reviews, 25 recommendations were identified. These recommendations are categorized in four overall themes:

1. Education/Training
2. Firearm Safety
3. Legislative Action
4. Peer-to-Peer Support

Education/Training

This theme involves recommendations that identified opportunities for education or training. These recommendations primarily fall under primary prevention, aiming to reduce risk factors and increase protective factors among populations. Risk factors include history of suicide attempts, diagnosed mental health conditions, and legal issues. Protective factors include having a support system, participation in treatment, and decreased access to lethal means.



Increase Access to
Financial Planning
Services

In 2022, 7% of Veterans with verified status had financial issues and 3% experienced housing insecurity.



Increase Access to
Legal Support
Services

25% of Veterans were experiencing intimate partner issues, including divorce²



Bolster Education
amongst Family of
Veterans/Service
Members

This includes signs of suicide and mental health challenges. In 2022, 16% had a history of suicide attempts and 28% had suicidal thoughts.



Expand Education
and Awareness of
Resources for
Gambling and
Substance Use

39% of Veteran decedents had a history of mental health or substance use treatment²

Firearm Safety

This theme proposes recommendations to increase firearm safety and decrease risk of harm from firearms. These recommendations primarily fall under secondary prevention, aiming to identify people at risk and address needs before harm occurs. Data indicates increasing time and distance between individual and lethal means (ex. firearm) can reduce risk for suicide attempts. Additionally, having a handgun can double the risk of suicide.³



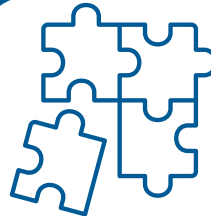
Increase Access
to Firearm
Hygiene Kits

In 2022, 76% of Veterans with verified status died by suicide via firearm.



Include Secure
Firearm Storage in
All Suicide
Prevention Trainings

58% of Veterans with verified status owned the firearm used in their death in 2022.



Partner Across
Organizations
on Secure
Firearm Storage

Regardless of Veteran status, firearms make up over 50% of the methods of suicide. Increased awareness and partnership is needed to expand knowledge.²



Advocate for
Additional Funds for
Firearm Safety
Materials

In 2022, 6% of firearms related to Veterans with verified status deaths were stored loaded.

Legislative Action

This theme includes recommendations that identified opportunities for legislative action that advocates for additional funding support or seeks to strengthen current legislation in Wisconsin benefitting Veterans and their families. These recommendations primarily fall under primary prevention. Wisconsin has made efforts to strengthen legislation in the past regarding secure firearm storage and financial support of these efforts, but these legislative efforts have not passed.⁴



Increase Funding for Veteran Support Programming

Wisconsin ranks #21 for number of Veterans living in the state. In 2024, over 300,000 veterans were living across the state.⁵



Strengthen Protections for Organizations Participating in Safe Storage Programs

Across 72 counties, only 60 organizations provide temporary firearm storage, with the majority of locations in more urban communities.⁶

Peer-To-Peer Support

This theme highlights recommendations that identified opportunities to increase engagement and conversations amongst peers. Peers are individuals who have experienced significant mental health, substance use, or other health challenges and may have additional shared experiences like military service. These recommendations primarily fall under primary prevention, but peer support is often found within all three levels of prevention, helping identify individuals at increased risk and supporting loved ones impacted. Peer support can be an invaluable addition to programming aimed at Veterans, service members, and their families. Veterans have shared that peer support keeps them engaged with the VA, provides feelings of support and hope, and data shows that Veterans are more likely to use their benefits.⁷



Engage in Expanded Civil Life Transitions through Peer-to-Peer Training

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Veterans transitioning from active duty to civilian life are at higher risk for suicide.⁸



Improve Peer-to-Peer Firearm Security Discussions

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Preprogram surveys showed that 69.1% supported the opportunity for peer provided lethal means training.⁹



Discuss Secure Storage during Primary/Specialty Care Visits at VA

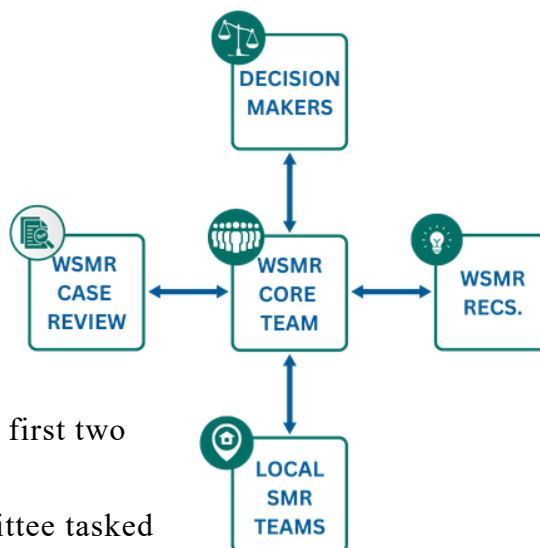
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Data supports this as an appropriate intervention for Veterans.¹⁰

Next Steps

Recommendation Committee

The next step for the WSMR Team is to create a committee dedicated to reviewing and advancing recommendations. The figure is WSMR's communication matrix, which includes active communication between WSMR, local teams, and decision makers.



WSMR is dedicated to Veteran-specific cases for the first two years, and we are considering a Veteran-specific recommendation committee and an additional committee tasked with reviewing broader recommendations. This process is being developed with an estimated launch of December 31, 2027.

Year 2 Case Review

WSMR begins reviewing cases for year 2 in September 2026 and will review four cases between September 2026-June 2027. Year 2 will be a continuation of Veteran deaths that occurred in 2022. Additional analysis will also be reviewed to identify additional trends. Changes will be made starting in year 3 (2027-2028) to expand case review efforts based on evidence-based data, WSMR, and organizational priorities.

Sustainability Efforts

The MCW CIC Division of Suicide Research and Healing remains committed to identifying additional funding and opportunities to expand suicide review across Wisconsin, as well as maintain WSMR activities. Furthermore, WSMR continues to grow, identifying new partners and collaborations and actively engaging the Veteran community to ensure this work is culturally appropriate, infused with lived experience, and relevant across military branches and historical contexts.

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Contact Us

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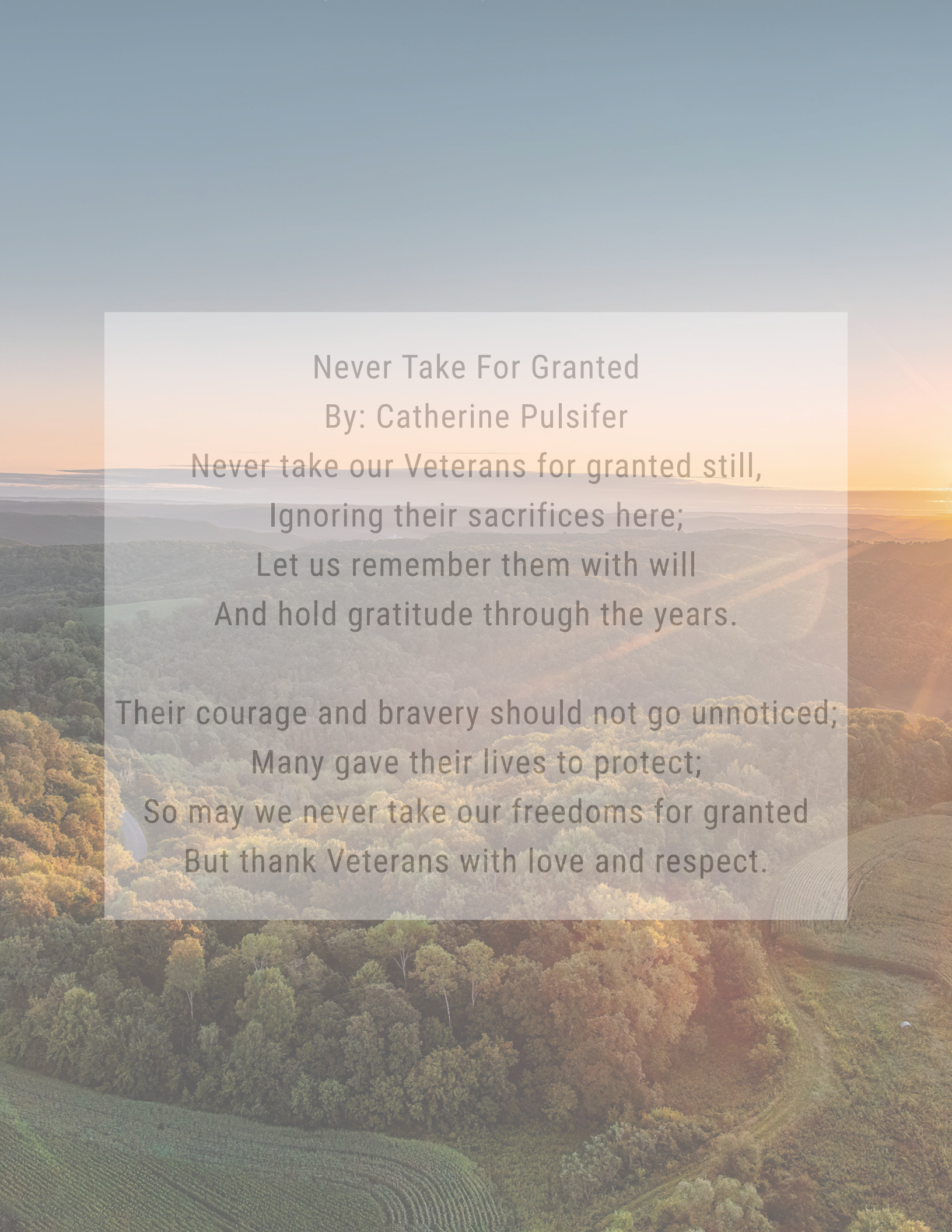


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Collaboration of the Medical College of Wisconsin (MCW), Wisconsin Department of Health Services: Division of Public Health (DHS), Wisconsin Department of Veterans Affairs, and U.S. Department of Veterans Affairs.

An aerial photograph of a vast, rolling landscape. In the foreground, there are dense green forests covering hillsides. Below the forests, there are agricultural fields, some of which are planted in rows of crops like corn. In the distance, more hills and valleys are visible under a sky that transitions from a deep blue at the top to a warm orange and yellow near the horizon, suggesting a sunset or sunrise. The overall scene is peaceful and majestic.

Never Take For Granted

By: Catherine Pulsifer

Never take our Veterans for granted still,
Ignoring their sacrifices here;
Let us remember them with will
And hold gratitude through the years.

Their courage and bravery should not go unnoticed;
Many gave their lives to protect;
So may we never take our freedoms for granted
But thank Veterans with love and respect.




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