



Center for Military Health Policy Research

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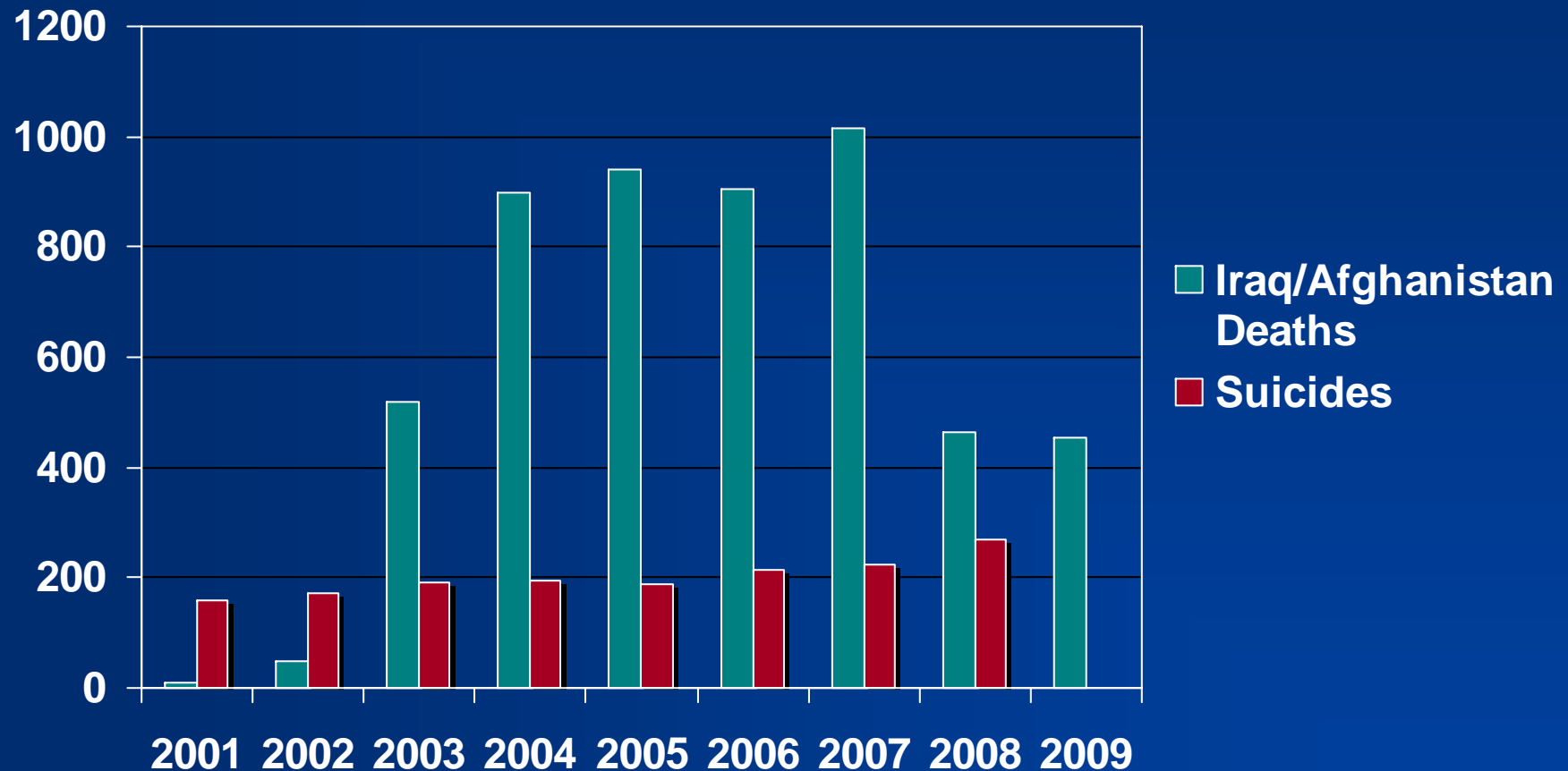
The War Within ***Preventing Suicide in the US Military***

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February 2011

Full report is available for download at:
<http://www.rand.org/pubs/monographs/MG953.html>

DoD Concerned About Increase in Suicides Among Military



We Posed Three Research Questions

What are the DoD and each service doing to prevent suicides?

What is considered “state of the art” for suicide prevention?

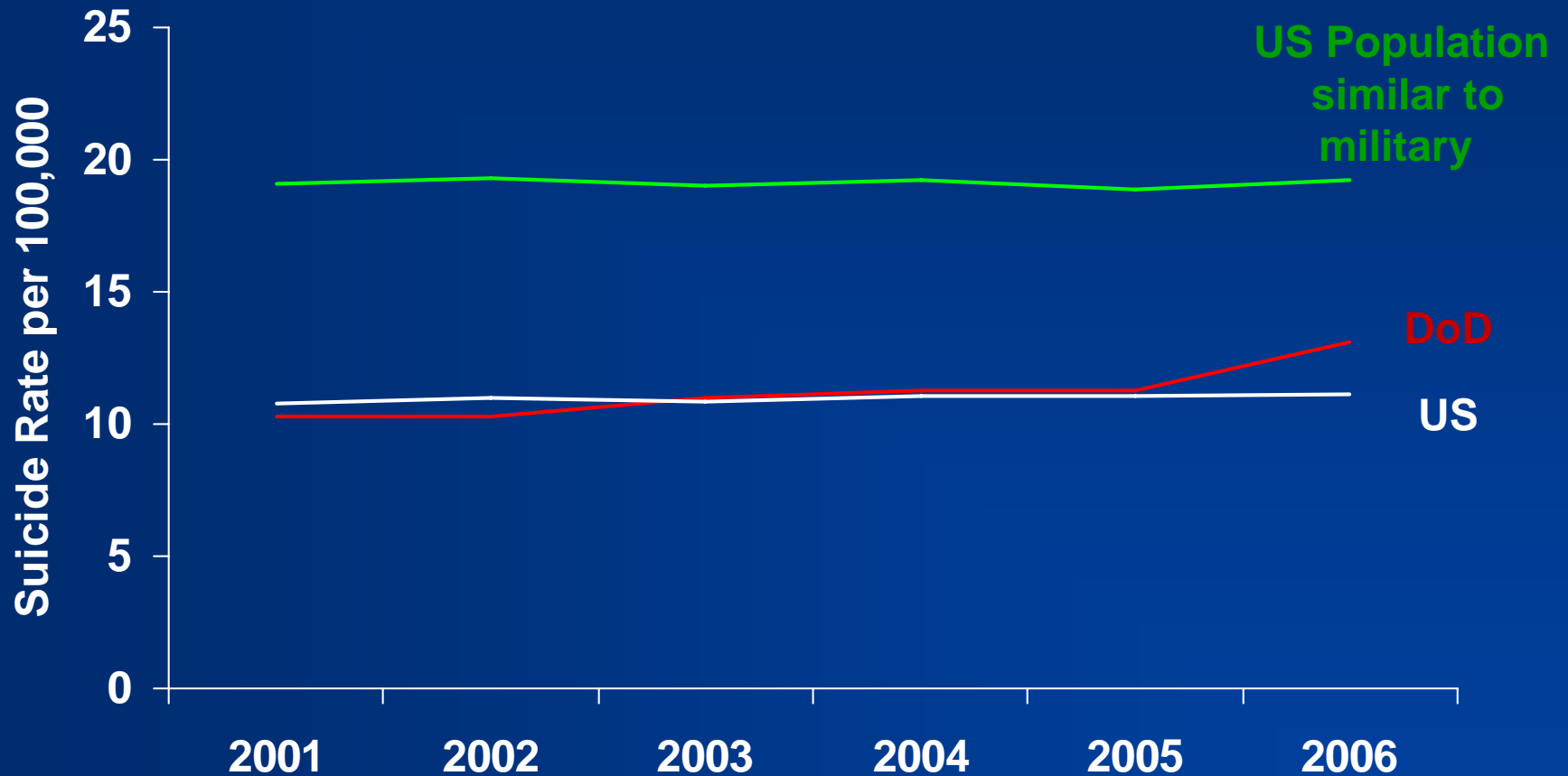
Do DoD and service-specific approaches reflect the “state of the art”?

Recommendations for enhancing current approaches

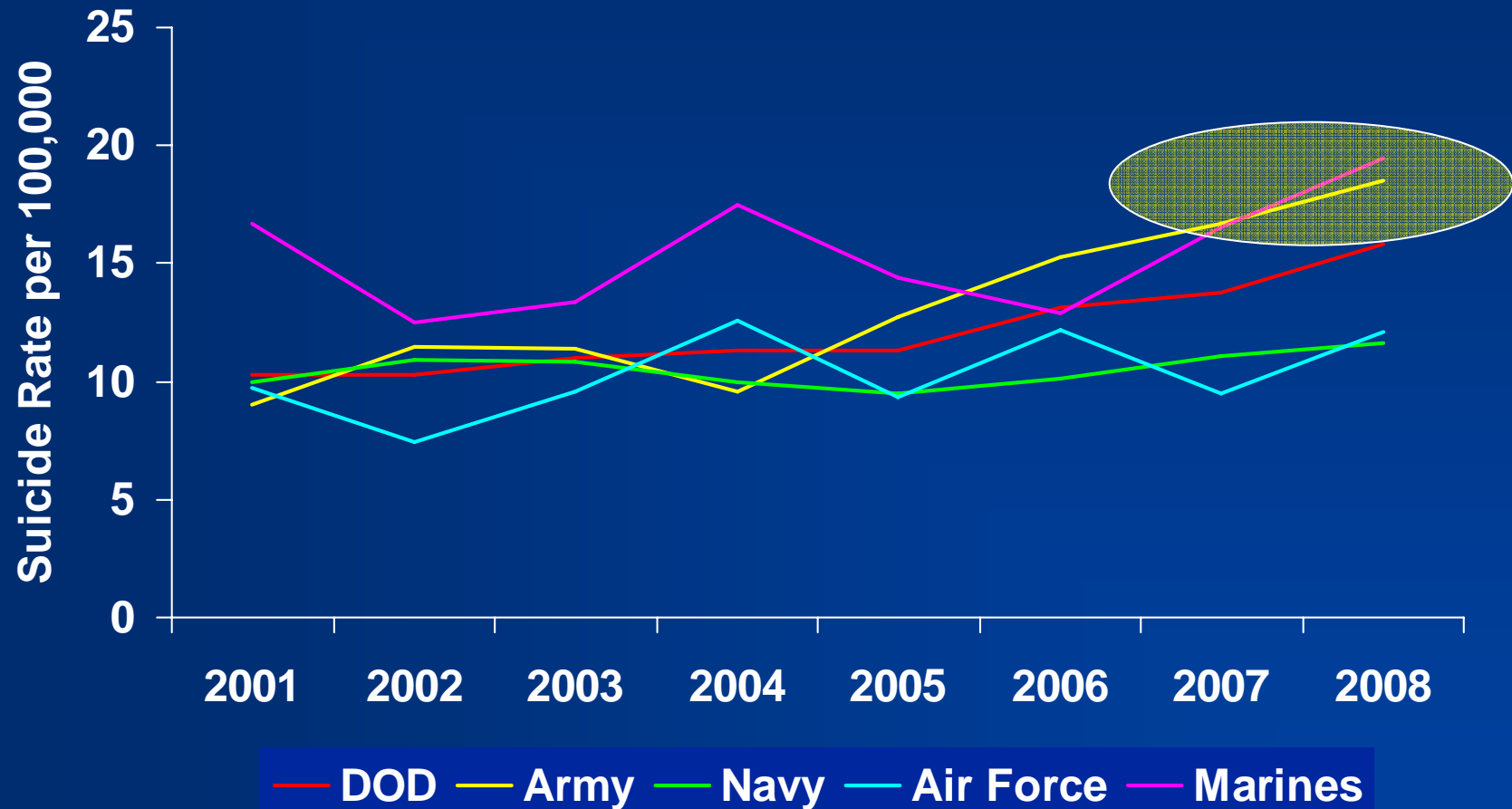
Outline

- ➔ • **The epidemiology of suicide**
 - **Characteristics of state-of-the-art prevention programs**
 - **DoD suicide prevention programs & how they compare with state of the art**
 - **Conclusions and Recommendations**

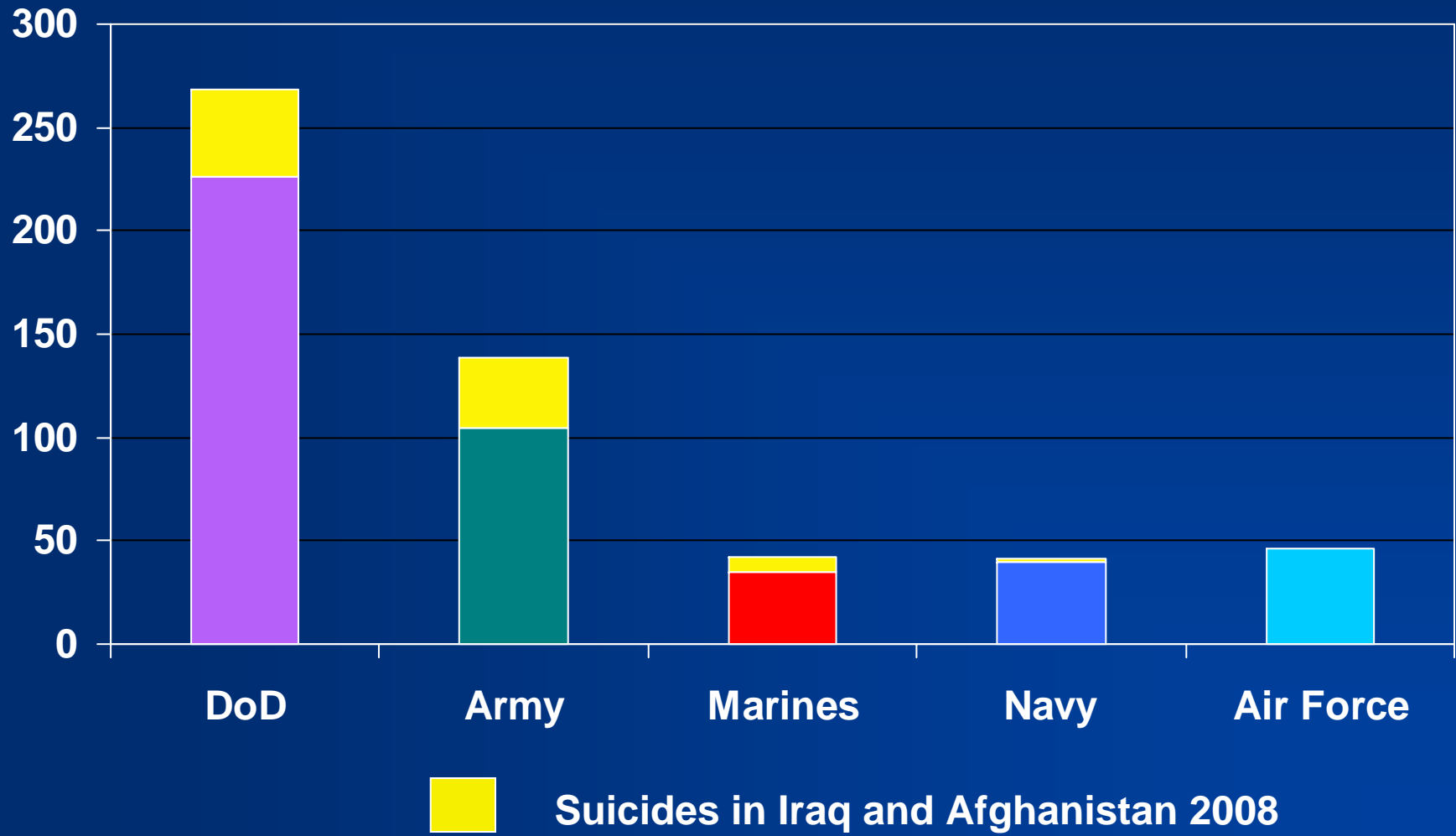
Compared With Similar Demographic Group, Military Rates Are Lower



Army and Marine Corps Have Highest Suicide Rates



...And the Highest Number of Suicides in Theatre



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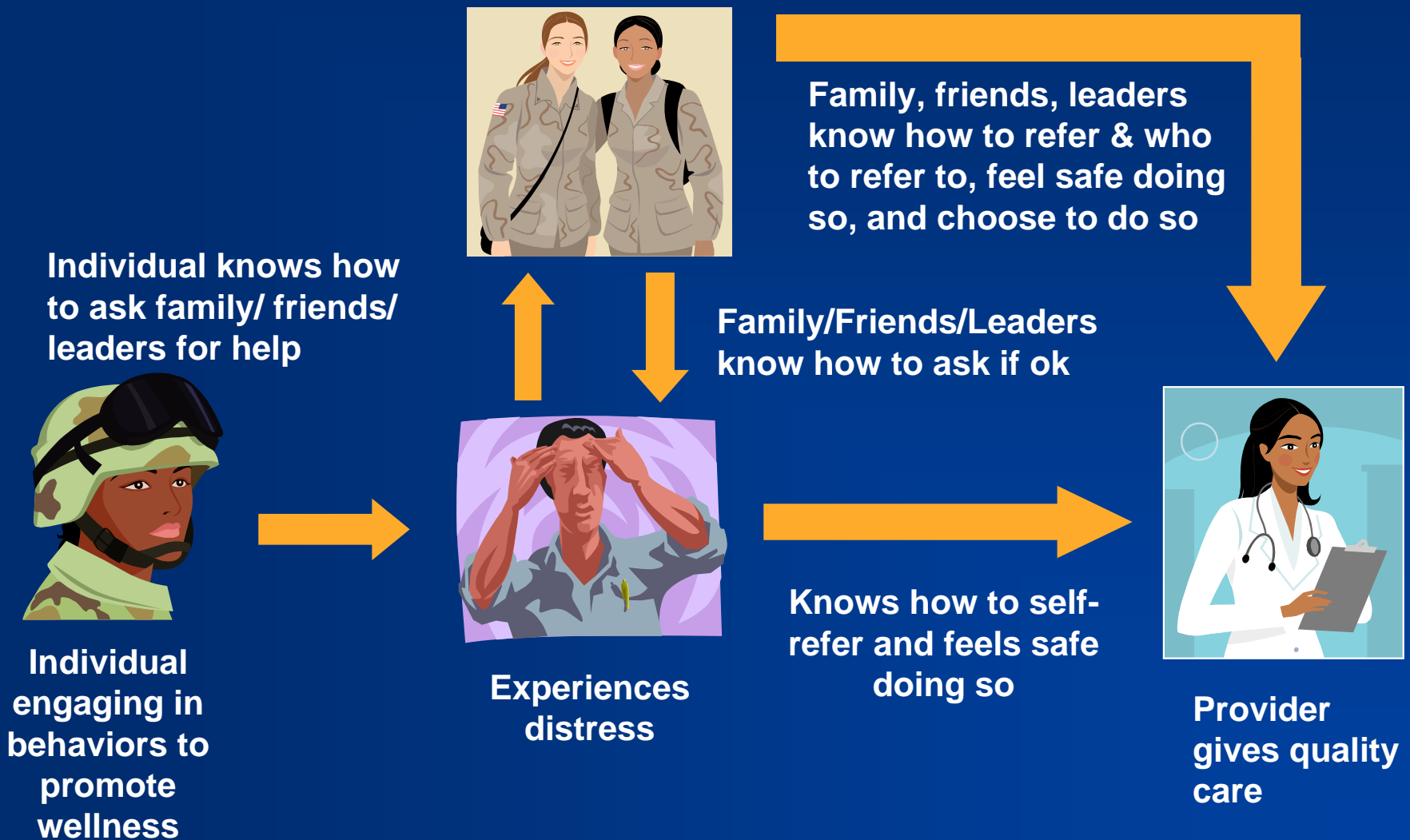
RAND Identified Six Components of a Comprehensive Suicide Prevention Strategy

- **Raise awareness and promote self-care**
- **Identify those at risk**
- **Facilitate access to quality care**
- **Deliver quality care**
- **Restrict access to lethal means**
- **Respond appropriately**

Necessary to ensure access to quality care

Strongest evidence of effect

Components of Comprehensive Suicide Prevention Program Work Together



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Prevention Philosophies of Service Programs in a Few Words

Army	Buddy System (peers as gatekeepers) and resiliency training
Navy	Suicide as an adverse event on a “stress continuum” → early intervention
Air Force	Community-based approach that promotes culture change
Marines	Community-based approach that relies heavily on gatekeepers

How Do Military Programs Compare with State of the Art?

	Army	Navy	Air Force	Marines
Raise awareness and promote self-care	Awareness campaigns are generally good, though more efforts are needed in promoting self-care			
ID those at risk	Expansive but rely mostly on gatekeepers	Mostly rely on gatekeepers	Investigation policy a good start; others? (deployment)	Mostly rely on gatekeepers
Facilitate access to quality care	Stigma addressed primarily by locating behavioral health care in non-traditional settings			
	No policy to assuage privacy or professional concerns		Limited Privilege	No Policy
	No education about benefits of accessing behavioral health care			
Deliver quality care	Not considered in domain of suicide prevention		Past efforts exist with a sustainment plan	Past efforts exist, but not sustained
Restrict access to lethal means	No current policies exist		Limited Guidance	No Policy
Respond appropriately	Personnel/teams available, but limited guidance			



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Conclusions

- **Most DoD and Service efforts to prevent suicides fall under:**
 - Raising awareness about suicide
 - Gatekeeper trainings to identify those at risk
 - Addressing stigma by locating behavioral health in untraditional settings
- **More efforts are needed to:**
 - Promote self-care
 - Facilitate access to quality behavioral health care
 - Educate behavioral health care providers
 - Restrict access to lethal means
 - Guide interventions following suicide (“postvention”)

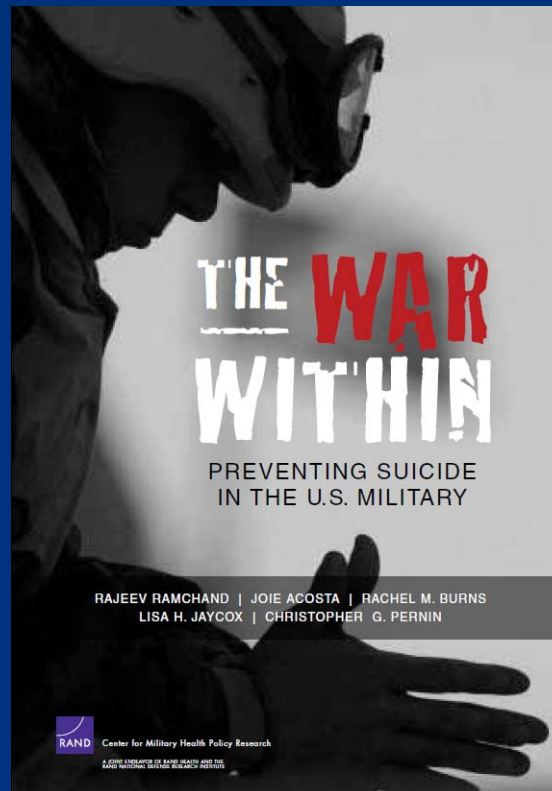
Recommendations

Overarching	<ol style="list-style-type: none">1. Systematic Surveillance2. Evaluate existing and new initiatives
Raise Awareness and Promote Self-Care	<ol style="list-style-type: none">3. Teach Skill-Building & Help-Seeking4. Form Partnerships
Identify Those At High Risk	<ol style="list-style-type: none">5. Evaluate Gatekeeper Trainings6. Conduct Research to Identify Risk Factors7. Respectfully Ensure Continuity of Care
Facilitate Access to Quality Care	<ol style="list-style-type: none">8. Inform servicemembers about benefits of and repercussions for accessing behavioral health care9. Inform servicemembers about referral endpoints10. Improve communication between caregivers11. Assess capacity of providers & chaplains
Provide Quality Care	<ol style="list-style-type: none">12. Train providers & chaplains to deliver quality care
Restrict Access to Lethal Means	<ol style="list-style-type: none">13. Consider creative ways to restrict access
Respond Appropriately	<ol style="list-style-type: none">14. Provide policies and procedures to facilitate postvention



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Various Policies, Organizations, and Funding Sources Support Suicide Prevention Efforts

	Army	Navy	Air Force	Marines
Policy	<ul style="list-style-type: none"> • AR 600-63 • Army Pam 600-24 • AR 600-85 • TRADOC Pam 600-22 	<ul style="list-style-type: none"> • OPNAVINST 1720.4 • NAVADMINs 	<ul style="list-style-type: none"> • AFPAM 44-160 • AFI 44-154 • AFI 44-109 • AFI 44-153 • AFI 90-501 • Health Services Inspection Guide • AF Guide for Managing Suicidal Behavior 	<ul style="list-style-type: none"> • MCO P1700.24B • MCO P1700.27A • MCO P1700.29 • MCO P3040.4E • MCRP 6-11C • MCO 1510.89B • MARADMINs
Organizations	<p><u>Headquarters</u></p> <ul style="list-style-type: none"> - G1 (Personnel) (SPPM) - G3 (Operations) - Surgeon General (CHPPM) <p><u>Installations</u></p> <ul style="list-style-type: none"> - CHPC - ISRT - Gatekeepers (AR 600-63) - MEDCOM <p><u>Theatre</u></p> <ul style="list-style-type: none"> - HSS - CSC teams 	<p><u>Headquarters</u></p> <ul style="list-style-type: none"> - Educ and Training C. - Chief Naval Ops. (SPPM) - BUMED - NMCPHC <p><u>Installations</u></p> <ul style="list-style-type: none"> - Install. Commanders - Suicide prev. coordinator 	<p><u>Headquarters</u></p> <ul style="list-style-type: none"> - AF Suicide Prevention IPT - Chief of Staff - CAIB - Surgeon General (SPPM) <p><u>Installations</u></p> <ul style="list-style-type: none"> - CAIB - IDS - Traumatic Stress Response 	<p><u>Headquarters</u></p> <ul style="list-style-type: none"> - Pers. Fam Read. (SPPM) - Combat Devel C. - TRADOC <p><u>Installations</u></p> <ul style="list-style-type: none"> - Install. Commanders - Suicide prev. coordinator
Funding	<ul style="list-style-type: none"> • Internal org. funds • No dedicated funding 	<ul style="list-style-type: none"> • Internal org. funds • Grants • Dedicated funding 	<ul style="list-style-type: none"> • Internal org. funds • Dedicated funding 	<ul style="list-style-type: none"> • Dedicated funding