Preventing Suicide Among Military Personnel
Overview of RAND Study

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DoD Patterns of Suicide Are Similar to Those in the Civilian Population

National suicide rate is 4 to 5-times higher for males than females

In each service, suicide rate is higher among males than females

National suicide rate among non-Hispanic Whites and Native Americans is double the rate for other ethnic minorities

Same racial trends in Navy, Marines, and Army (did not have evidence on Air Force)

Similarities suggest that effective programs in civilian sector would also work in DoD
### Literature Shows Three Strong Risk Factors

| Prior suicide attempts | • ~50% of suicides occur after a first attempt  
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<th>• 5-15% of non-fatal attempts die by suicide</th>
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| Mental Illness (MI)    | • 90% of suicides have mental disorder  
|                        | • 4% with depression will die by suicide  
|                        | • Relationships with PTSD, TBI, and comorbidity |
| Substance Use (SU) & Associated Disorders | • ~40% of suicides comorbid MI & SU disorder  
|                                       | • ~25% suicide cases intoxicated at time of death |
### Emerging Evidence in Other Areas

| Psychological Correlates                      | Among those with MI, hopelessness predicts suicide  
|                                               | Some evidence for impulsivity, problem solving deficits |
| Genetics                                      | Evidence from family, twin, & adoption studies       |
| Neurobiology                                  | Serotonin and norepinephrine getting attention       |
| External Factors                              | Child abuse may be independent or mediated effect   
|                                               | Triggering events interact with underlying vulnerability |
| Societal Factors                              | Firearm access is correlated with suicides           
|                                               | Clusters among teens, maybe military personnel      
|                                               | Imitative suicides interact with underlying vulnerability |
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
Approach

What are the DoD and each service doing to prevent suicides?
- Reviewed materials and policy on current approaches
- Conducted key-informant interviews with stakeholders

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

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

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

- Reviewed materials and policy on current approaches
- Conducted key-informant interviews with stakeholders

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

- Identified and reviewed literature
- Conducted key-informant interviews with experts

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

**What are the DoD and each service doing to prevent suicides?**
- Reviewed materials and policy on current approaches
- Conducted key-informant interviews with stakeholders

**What is considered “state of the art” for suicide prevention?**
- Identified and reviewed literature
- Conducted key-informant interviews with experts

**Do DoD and service-specific approaches reflect the “state of the art”?**
- Identify characteristics of effective programs
- Analyze DoD programs for presence of those characteristics

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Our Approach for Exploring Best Practices

Indicated Prevention
(e.g., Medical Management of Suicidality)

Selective Prevention
(e.g., Hotlines)

Primary Prevention
(e.g., Reduce Stigma)

Attempts

High Risk

Some Risk

General Population
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**High Risk**

**Some Risk**

**General Population**

**Postvention**
(e.g., reporting)
Forthcoming RAND Report

- Analyses of 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