DoD Task Force on the Prevention of Suicide by Members of the Armed Forces

Update for the Defense Health Board
8 June 2010

Ms. Bonnie Carroll, Co-Chair
MG Philip Volpe, Co-Chair

Col Joanne P. McPherson
Executive Secretary
Overview

• Task Force Membership
• “Charter” (specified tasks from NDAA 09)
• March, April, May Meeting Summaries
• Site Visit Update
• General Observations
• General “Findings”
• Future Sessions
• Feedback (Questions; Thoughts)
Task Force Membership

- Dr. Alan Berman
- COL (Dr) John Bradley
- Dr. Robert Certain
- CMSgt Jeffory Gabrelcik
- SgtMaj Ronald Green
- Ms. Bonnie Carroll
- Dr. Janet Kemp
- Dr. Marjan Holloway
- Dr. David Jobes
- Dr. David Litts
- Dr. Richard McKeon
- MGySgt Peter Proietto
- CDR Aaron Werbel
- MG (Dr) Philip Volpe
• Methods to **identify trends and common causal factors** in suicides by members of the Armed Forces.

• **Methods to establish or update suicide education and prevention programs** conducted by each military department based on identified trends and causal factors.

• An **assessment of current suicide education and prevention programs** of each military department.

• An **assessment of suicide incidence by military occupation** to include identification of military occupations with a high incidence of suicide.

• The appropriate **type and method of investigation** to determine the causes and factors surrounding each suicide by a member of the Armed Forces.
Charter from Congress

- The **qualifications of the individual appointed** to conduct an investigation.

- The **required information to be determined by an investigation** in order to determine causes and factors.

- The appropriate **reporting requirements following an investigation**.

- The appropriate **official or executive agent within the military department and DoD** to receive and analyze reports on investigations.

- The appropriate **use of the information gathered** during investigations.

- Methods for **protecting confidentiality** of information contained in reports of investigations.
• Veterans Affairs Suicide Prevention Program
• US Army Reserve
• Army National Guard
• Suicide Prevention in Primary Care Community Health Approach
• Warrior Resiliency Program Research
April Meeting

- Michigan Buddy to Buddy Support Program
- US Coast Guard
- VISN 19 suicide prevention research
- Medical Incident Investigation
- The Role of Messaging
• New Jersey Veterans Helpline
• ABHIDE database
• Anti-stigma programs

May 11-14, 2010

• Task Force Deliberations and Writing Sessions
March 2010
- Camp Pendleton, CA
- Ft Benning, GA
- Ft Bliss, TX
- Lackland AFB, TX
- Langley AFB, VA
- Naval Station SD, CA
- Robins AFB, GA

April 2010
- Ft Carson, CO
- Ft Riley, KS
- Jacksonville NAS, FL
- Peterson AFB, CO

May 2010
- Ft Campbell, KY
General Observations

• The Services are heavily engaged in Suicide Prevention.
• Leadership is involved at all levels.
• Cannot know for sure just how many suicides there would be if it were not for current program and leadership efforts.
• There is a relationship between increased optempo, deployments & separations with overall stress on the force and increased suicide rates.
• Suicide is multi-factorial; Suicide Prevention must be multi-solutional.
General Findings

- Prevention
  - Stigma & Culture
  - Deployment/Dwell Time
  - Ops Tempo/Stress on the Force
  - Leadership
  - Training – Buddy, Family & Supervisory
- Intervention
  - Peer to Peer Programs
  - Crisis Intervention
  - Resiliency
- Postvention
  - BH Resources & Utilization
  - Investigations
Future Sessions

• June 9-10, 2010
  – Task Force continues drafting report

• June 22-24, 2010
  – Review final draft
  – Conduct “Red Cell” review

• July 13-15, 2010
  – Review & Finalize Report; Briefing to DHB

• August 2010 – Socialization; Brief ASD-HA & SECDEF
Questions?

Other Considerations?

Offers of Advice and/or Assistance?