

The Army must prioritize Soldiers' mental well-being and enhance program resources to ensure every Soldier has access to necessary support in times of crisis. The increasing rates of suicide erode the foundation of military readiness. (U.S. Army photo by Jean Graves)

Enhancing the Army Suicide Prevention Program

By Sgt. Maj. Jerald J. Stephens

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n military service, where honor, duty, and sacrifice are paramount, a profoundly troubling issue demands the Army's utmost attention. The escalating rates of suicide ideations, attempts, and completions in the Army reflect a severe mental health crisis among Soldiers.

Research in 2021 found that 30,177 active-duty Soldiers and veterans who served after 9/11 died by suicide compared to 7,057 service members killed in combat during the same period (DeSimone, 2023). This trend poses a significant threat to the Army's mission of maintaining readiness to defend the nation.

The Army must take decisive action to improve program resources, fostering a culture of resilience and mental health awareness. The Army, steeped in tradition, faces a new challenge that defies conventional warfare but is equally threatening. The increasing rates of suicide ideations, attempts, and completions erode the foundation of military readiness.

To address this issue, the Army must prioritize Soldiers' mental well-being and enhance program

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resources to ensure every Soldier has access to necessary support in times of crisis. It must implement ways to improve program resources to sustain readiness and decrease suicide ideations, attempts, and completions.

Understanding the Problem

Addressing the issue requires a comprehensive understanding of the problem's scope. The Army must effectively examine current statistics and trends related to suicide.

Psychosocial factors — including relationship difficulties, administrative or legal problems, and workplace challenges — play a significant role in increasing suicide risk among Soldiers. Certain medical conditions — such as traumatic brain injury (TBI), chronic pain, and sleep disorders — also elevate suicide risk. Notably, firearms are the most frequently employed method in suicide cases, constituting more than 60 percent of all military suicide deaths (Uniformed Services University, n.d.).

Statistics and Trends Related to Suicide in the Army

The current Army statistics are deeply concerning. Over the past decade, there has been a distressing upward trend in suicide rates among Soldiers, exceeding the national average.

In 2023's first quarter, there were 75 suicides: 49 in

the Regular Army (RA), 18 in the Army National Guard (ARNG), and 8 in the U.S. Army Reserves (USAR) (Department of Defense (DoD), 2023). The suicide rate among Soldiers has reached its highest point in recent years, underlining the urgency for intervention.

One recent study shared these findings: "Suicide is the tenth leading cause of death in America. Particularly at risk, Veterans are 1.5 times more likely to die by suicide than non-Veterans, and the suicide rate among service members has risen over the last decade." (Schafer et al., 2021, p. 1)

The Army's inability to adequately address the alarming suicide rates affects combat effectiveness and readiness.

Suicide's Impacts on Combat Effectiveness and Readiness

Suicide rates have profound impacts on the Army's readiness and effectiveness. Each loss of life deprives the force of valuable experience, skills, and capabilities, while the mental health crisis can erode unit cohesion, trust, and morale.

The number of suicides among active-duty Soldiers and veterans continued to rise over the past decade, highlighting the urgent need for the Army to address this issue (Uniformed Services University, n.d.). To sustain and enhance readiness and combat effectiveness, the Army must prioritize its Soldiers' mental well-being.



The Fort Drum Army Suicide Prevention Program coordinator speaks to Soldiers at Nash Gym on Fort Drum, New York, May 21, 2024. Evaluating and enhancing the ASPP is a moral imperative essential for maintaining the Army's readiness and effectiveness. By prioritizing Soldiers' mental well-being, senior leaders can work toward reducing suicides and ensuring the Army remains a strong and resilient force. (U.S. Army photo by Sgt. Amber Edwards)

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It must improve program resources and foster a culture of resilience and mental health awareness. Only by addressing the underlying causes of suicide and providing comprehensive support can the Army mitigate the impact of this crisis on its readiness and effectiveness.

Evaluating the Suicide Prevention Program

The Army must undertake a comprehensive evaluation of the current Army Suicide Prevention Program (ASPP). This evaluation should thoroughly assess program resources, policies, and practices to identify areas requiring enhancement. Engaging with mental health professionals, service members, and experts in suicide prevention will provide insights into the program's strengths and weaknesses.

Senior leaders must prioritize allocating additional resources to the ASPP, ensuring it has the necessary funding, personnel, and infrastructure to deliver

comprehensive and timely support to Soldiers in need. Evaluating and enhancing the ASPP is a moral imperative essential for maintaining the Army's readiness and effectiveness.

By prioritizing Soldiers' mental well-being and improving program resources, senior leaders can work toward reducing suicides, thereby ensuring the Army remains a strong and resilient force ready to defend the nation.

Examining ASPP Strengths and Weaknesses

The ASPP promotes positive behavioral change, strengthens bonds, and builds resilience. However, persistently high suicide rates indicate that the ASPP has not been effective in reducing suicides.

Ongoing high suicide rates among veterans and service members, despite prevention efforts, reveal the complex nature of suicide and the need for more effective strategies to address it comprehensively (U.S. Department of Veterans Affairs & U.S. DoD, n.d.).

There is a significant gap between the demand for mental health support and the available resources. According to the U.S. Department of Veterans Affairs and U.S. DoD, previous research and program assessments suggest mental health care access should be viewed through three key areas:

- Emergency or same-day care
- Nonurgent care engagement
- Follow-up care (U.S. Department of

Veterans Affairs & U.S. DoD, n.d.) Providing evidence-based, high-quality care in these areas has been shown to support recovery and enhance wellness. Therefore, initiatives aimed at expanding capacity, improving accessibility, and optimizing evidence-based care delivery are crucial to effective suicide prevention efforts (U.S. Department of Veterans Affairs & U.S. DoD, n.d.).

The stigma associated with seeking help for mental health issues remains a challenge, deterring Soldiers from reaching out for support. Improved training and awareness campaigns targeting Soldiers and leaders are essential to address this issue.

Efforts to reduce the stigma associated with seeking mental health care are essential, as this stigma continues to prevent service members from accessing necessary support (U.S. Department of Veterans Affairs, Office of Mental Health and Suicide Prevention, 2018). The ASPP

must intensify efforts to reduce this stigma, as it can deter Soldiers from seeking the assistance needed to maintain a healthy mental state of mind.

Improved training and awareness campaigns are needed. These campaigns should target Soldiers and leaders at all levels. Leaders must be better equipped to recognize signs of distress among their subordinates so they can take appropriate action. To enhance the ASPP, the Army must identify ways to eliminate barriers and the stigma associated with

Soldiers seeking help for mental health care.

Barriers and Stigma Create Limitations for the ASPP

The ASPP faces significant limitations due to barriers and the stigma that deters Soldiers from seeking mental health support. Poor leadership creates a hostile and stigmatizing environment for Soldiers in a unit under psychological or emotional duress (Meadows et al., 2018).

In a culture valuing toughness and self-reliance, admitting vulnerability and seeking help can be perceived as a sign of weakness, which discourages Soldiers from seeking the support they need.

Additionally, the program's resources may not be sufficient to meet the demand, resulting in delayed or inadequate assistance. Effective training and awareness campaigns for Soldiers and leaders are crucial to addressing these barriers.

One critical barrier is the need for more effective

Suicide rates have profound impacts on the Army's readiness and effectiveness. Each loss of life deprives the force of valuable experience, skills, and capabilities, while the mental health crisis can erode unit cohesion, trust, and morale. (U.S. Army photo by Jenn DeHaan)



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training and awareness campaigns for Soldiers and Army leaders. Leaders at all levels need better training to recognize signs of mental distress among their subordinates so they can respond appropriately. The absence of such training can lead to missed early intervention and support opportunities.

According to the Government Accountability Office (GAO), various DoD policies and guidance cover the general response to suicide attempts but lack specifics on commanders' roles in these situations.

For instance, while DoD's suicide prevention policy outlines requirements for reporting suicide attempts among servicemembers, it does not provide guidance for how commanders should respond.

DoD's suicide prevention strategy includes general approaches to handling suicide attempts, like ensuring continuity of care by clinical providers. Still, it does not offer direct guidance for commanders' actions in these cases (U.S. Government Accountability Office, 2022).

With the significant ASPP training gaps and lack of leader awareness of the program, the Army needs to enhance Soldier programs and support.

Enhancing ASPP Resources and Support

Enhancing the ASPP requires making mental health services more accessible and available. The Army must expand the number of mental health professionals, reduce appointment wait times, and create a more Soldier-friendly environment for those seeking help.

Integrating advanced technology can enhance access to mental health resources, self-assessment tools, and crisis hotlines. Fostering a sense of camaraderie and emotional support among Soldiers is crucial.

Encouraging peer-to-peer support networks and mentoring programs can create a culture where



Efforts to reduce the stigma associated with seeking mental health care are essential, as this stigma continues to prevent service members from accessing necessary support. The Army Suicide Prevention Program must intensify efforts to reduce this stigma, as it can deter Soldiers from seeking the assistance needed to maintain a healthy mental state of mind. (U.S. Army photo by Sgt. Eve Moore)

Soldiers feel comfortable discussing their mental health concerns. Continuous evaluation of the ASPP is essential to ensure its effectiveness.

Resilience and Mental Health Awareness

Cultivating a culture of resilience and mental health awareness in the Army is vital. Establishing a culture of resilience begins with Army leaders at all levels setting the example by openly discussing mental health concerns and seeking help when needed.

Education and training should be continuous, with Soldiers receiving regular briefings on mental health resources and self-care techniques. Encouraging peer support and mentorship programs can help Soldiers feel connected and supported.

Reducing the stigma associated with seeking mental health assistance by promoting confidentiality and emphasizing that mental health issues are treatable medical conditions is crucial.

The Army can enhance its screening and monitoring processes to identify individuals at risk of suicide early on. By regularly assessing Soldiers' mental health and stress levels, it can proactively intervene and provide necessary support.

It must ensure mental health resources are easily accessible and well-publicized to promote transparency and encourage Soldiers to seek help. Soldiers should know where to turn when they need help, whether through unit chaplains, behavioral health specialists, or crisis hotlines.

Army leaders must create a culture of resilience and mental health awareness. This requires a multifaceted approach that addresses attitudes, education, prevention, and support. It also requires engaged leadership, normalizing seeking help, and providing accessible resources.

By fostering such a culture, the Army can work toward reducing suicides and ensuring its Soldiers' well-being.

Conclusion

Escalating Army suicide rates represent a profound challenge that demands immediate attention. Suicide statistics and trends are deeply concerning. They directly impact the Army's readiness and effectiveness.

Evaluating and enhancing the ASPP is essential, including addressing barriers and stigmas that hinder Soldiers from seeking help. Proposing specific improvements — such as increased funding, resources, and personnel dedicated to mental health support — is crucial. Cultivating a culture of resilience and mental health awareness, led by committed leadership, can reduce the stigma associated with seeking help and promote open discussions about mental well-being.

The Army's commitment to Soldiers' mental health and well-being is essential for maintaining readiness and fulfilling its core mission to defend the U.S.A. ■

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A 3rd Infantry Division Soldier exits Marne Embedded Behavioral Health Clinic on Fort Stewart, Georgia, Oct. 7, 2021. The Army must ensure mental health resources are easily accessible and well-publicized to promote transparency and encourage Soldiers to seek help. (U.S. Army photo by Spc. Daniel Thompson)

References

- Department of Defense. (2023). *Department of Defense* (*DoD*) quarterly suicide report (QSR) 1st quarter, cy 2023. Defense Suicide Prevention Office. <u>https://www.dspo.mil/</u> <u>Portals/113/Documents/QSR/2023/TAB%20A_20230623</u> QSR%20Rpt_Q1%20CY23_vf.pdf
- DeSimone, D. (2023, September 6). Concerns rise over military suicide rates; here's how the uso is trying to help. <u>https://</u> <u>www.uso.org/stories/2664-military-suicide-rates-are-at-</u> <u>an-all-time-high-heres-how-were-trying-to-help</u>
- Meadows, S. O., Engel, C. C., Collins, R. L., Beckman, R. L., Breslau, J., Bloom, E. L., Dunbar, M. S., Gilbert, M., Grant, D., Hawes-Dawson, J., Holliday, S.B., Maccarthy, S., Pederson, E. R., Robbins, M. W., Rose, A. J., Ryan, J., Schell, T. L., & Simmons, M. M. (2018). 2018 Department of Defense health-related behaviors survey (HRBS). RAND Corporation. https://www.rand.org/pubs/research reports/RR4222.html
- Schafer, K.M., Duffy, M., Kennedy, G., Stentz, L., Leon, J., Herrerias, G., Fulcher, S. & Joiner, T.E. (2021). Suicidal ideation, suicide attempts, and suicide death among veterans and service members: a comprehensive meta-

analysis of risk factors. *Military Psychology*, 34(2), 129-146. https://doi.org/10.1080/08995605.2021.1976544

- Uniformed Services University. (n.d.). *Suicide in the military*. <u>https://deploymentpsych.org/disorders/suicide-main</u>
- U.S. Department of Veterans Affairs & U.S. Department of Defense, (n.d.). *Reducing military and veteran suicide: Advancing a comprehensive, cross-sector, evidenceinformed public health strategy.* Retrieved from <u>https://</u> <u>www.whitehouse.gov/wp-content/uploads/2021/11/</u> <u>Military-and-Veteran-Suicide-Prevention-Strategy.pdf</u>
- U.S. Department of Veterans Affairs, Office of Mental Health and Suicide Prevention. (2018). National strategy for preventing veteran suicide: 2018–2028. <u>https://www. mentalhealth.va.gov/suicide_prevention/docs/Office-of-Mental-Health-and-Suicide-Prevention-National-Strategyfor-Preventing-Veterans-Suicide.pdf</u>
- U.S. Government Accountability Office. (2022). Suicide prevention: DOD should enhance oversight, staffing, guidance, and training affecting certain remote installations. U.S. Government Printing Office. <u>https://</u> www.gao.gov/products/GAO-22-105108

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