

## **Suicide Prevention**

1. Suicide is a leading cause of death in the Army during peacetime. It is imperative for leaders at all levels to take a proactive stand on this issue to prevent suicide and respond to those who may be at risk. You are the first line of defense for the people you work with and interact with on a daily basis, because you will be the first to detect the warning signs and changes. Bell Sends #4 discusses the losses to USAREUR caused by suicide. Army in Europe Command Policy Letter 28 sets the requirements for suicide prevention.
2. Suicide warning signs include verbal warnings (talk of suicide or stating a wish to be dead), behavioral warnings (isolation, moodiness, arranging affairs (for example, paying off debts, giving away possessions)), and symptoms of depression. Specific information is available in DA Pamphlet 600-70. Concern, observation, and early intervention are the main weapons we have in the fight against this foe.
3. Commanders at all levels must be sensitive and responsive to the needs of Soldiers, civilian employees, and their families, and familiar with the community agencies and individuals available for suicide-prevention activities. Immediate resources for suicide-prevention activities include members of unit ministry teams, behavioral health professionals, local health professionals, and social work services. Know the telephone numbers in your local community or command for emergency counseling assistance.
4. Ensure that your unit suicide-prevention training is current. Check with your chaplain or unit ministry team to repeat training during Sergeants Time Training if your last training was in the fall. In addition to annual training, advanced training is available for hand-picked individuals in a unit. The Army has adopted Applied Suicide Intervention Skills Training (ASIST). It is a new approach to enhance our suicide-prevention efforts. ASIST is the most widely used, acclaimed, and researched suicide-intervention skills training available today. ASIST involves 2 days (16 hours) of intense training—no exceptions—during which select individuals become additional eyes and ears for the command. ASIST provides high-quality recognition and enhanced intervention skills. Certified ASIST trainers are available in every ASG to provide advanced suicide training.
5. Suicide prevention should be a primary topic during noncommissioned officer professional development. Army in Europe Command Policy Letter 28 endorses suicide-prevention training as an element of Sergeants Time Training and considers suicide prevention a direct contributor to the health of a unit and its readiness.
6. First-line leaders should ensure that every Soldier and DOD civilian receives the wallet-size suicide prevention card (AE Poster 600-63-5).
7. Soldiers potentially at risk of suicide must be promptly referred to the appropriate servicing mental health agency. Commanders are reminded of the requirements of DOD Directives 6490.1 and 6490.5. Consult with a mental-health provider to ensure compliance. Commanders must ensure that any Soldier referred to mental-health agencies makes all scheduled appointments.