

DSPO Brief

Defense Health Board

Director, DSPO
November 1, 2016

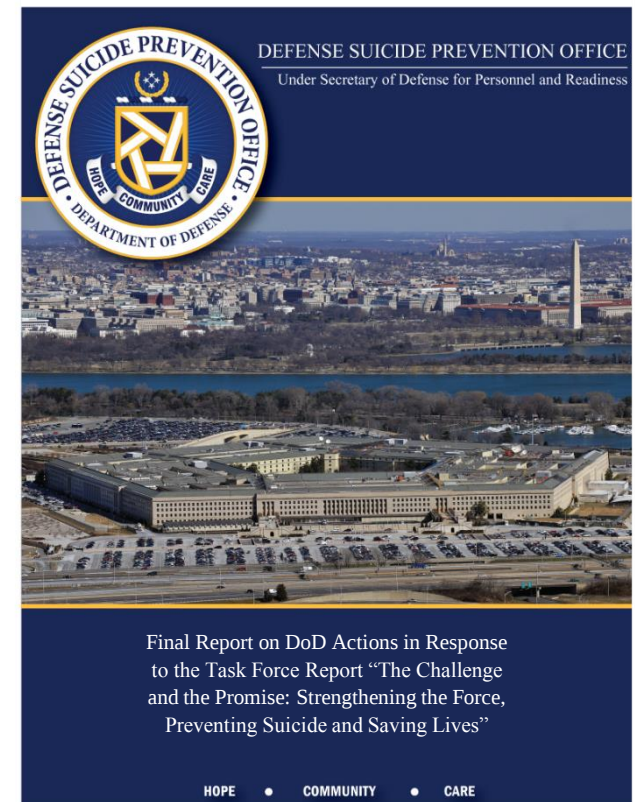


DEFENSE SUICIDE PREVENTION OFFICE



Summary of DoD Task Force Recommendations

- In August 2010, a DoD Task Force provided the basis for improvements to DoD Suicide Prevention programming
- After a comprehensive review of the 76 Task Force recommendations:
 - 29 are complete
 - 26 are in progress
 - 16 are enduring
 - 5 were not accepted for action
- DSPO has now transitioned from a Task Force oriented office to one with a forward vision based on the Defense Strategy for Suicide Prevention and an internal strategic plan.





Task Force Focus Areas

- Organization and Leadership – 25 recommendations
- Wellness and Enhancement Training – 10 recommendations
- Access to and delivery of quality care – 31 recommendations
- Surveillance, Investigations and Research – 10 recommendations



Task Force Priority Groups

- Under the leadership of the GOSC – 9 priority groups were created to implement task force recommendations
 - Policy
 - Data
 - Evaluation
 - Messaging & Stigma Reduction
 - Means Restriction Policy
 - Training Evaluation
 - Evaluation access and quality of BH Care
 - Review and standardize investigations
 - Research strategy



Highlights of Completed Actions – Focus Area: Organization and Leadership

- DoD Centralized Office
- Resource, staff, organize service HQ program offices
- BH validated risk questions added to unit climate survey
- Command level guidelines for use after a suicide event
- Stigma reduction campaign
 - Security clearance increased emphasis
- Change in terminology i.e. ‘malingering’ ‘commit’
- Guidelines for the management of suicide related behaviors during basic training



Highlights of Enduring Actions – Focus Area: Organization and Leadership

- Focus on resilience – spiritual, physical, psychological health
- Ensure training is current and focused; normalize help seeking
- Zero tolerance policies for prejudice, discrimination, harassment, public humiliation
- Ensure military PME is on target from basic training to senior service schools
- Maintain sufficient front line supervisor to subordinate ratios to ensure person centered leadership functions



Highlights of Enduring Actions – Focus Area: Wellness Enhancement and Training

- Improve evidence based training in areas of anger, stress, marriage, family, life skills, coping
- Embedded behavioral health
- Review Garrison based in person training requirements with a goal toward efficiencies where appropriate
- Target and train families
- Develop strategies to maintain contact with families during deployment cycle
- Collaborate with other federal and non-profit section agencies on family member issues



Highlights of Completed Actions – Focus Area: Access to and Delivery of Quality Care

- Train all care givers on governing rules on sharing of information
- Develop interdisciplinary treatment plans for members at risk for suicide
- Implement coordination of care during periods of transition
- Optimize and coordinate with community based services to enhance protective factors
- Ensure evidence based treatments in place
- Ensure all Reserve Component SM's receive face to face BH checks post deployment/post de-mobilization



Highlights of Enduring Actions – Focus Area: Access to and Delivery of Quality Care

- Develop, evaluate and widely disseminate peer-to-peer programming
- Develop a standard and systematic medical documentation system to identify high risk patients and track the care provided
- Promote the use of the national crisis line
- Formalize connectedness of all call centers; MOS, lifeline, MCL
- Train all military health care providers on evidence informed suicide risk assessment, management and treatment planning



Highlights of Enduring Actions – Focus Area: Surveillance Investigations and Research

- Develop structured surveillance efforts
- Standardize the DoDSER throughout the DoD
- Standardize suicide investigation processes across DoD
- Institute modified psychological autopsy process with root cause analysis protocol at OSD level
- Evaluate suicide prevention programming
- Develop a research strategy



Transition from Task Force Focus to Current Mission and Focus



DSPO: Mission and Vision

Mission

DSPO provides advocacy, program oversight, and policy for DoD suicide prevention, intervention, and postvention efforts to reduce suicidal behaviors in Service members, civilians, and their families.

Vision

Actively engage and partner with the Military Services, other Governmental Agencies, Non-Governmental Agencies, non-profit organizations, and the community to reduce the risk for suicide for Service members, civilians, and their families.

Strategic Goals

1 Data Surveillance & Analysis

Serve as the source for integrated suicide-related data in the DoD

2 Research & Program Evaluation

Ensure that Military suicide prevention research and its subsequent findings reflect and support an integrated public health, community-based approach to suicide prevention

3 Plans & Policy Oversight

Serve as the primary proponent of suicide prevention policy throughout DoD by providing guidance and oversight on suicide prevention policy

4 Outreach

Promote the DoD's suicide prevention efforts through strategic communication, targeted messaging, internal and external partnerships, and on-going public awareness

5 Training Oversight

Ensure the DoD Components are training their workforce on suicide prevention, intervention, and postvention that's aligned with the Departmental strategy for suicide prevention



Suicide Prevention and Awareness

DoD integrates a holistic approach to suicide prevention, intervention, and postvention using a range of medical and non-medical resources

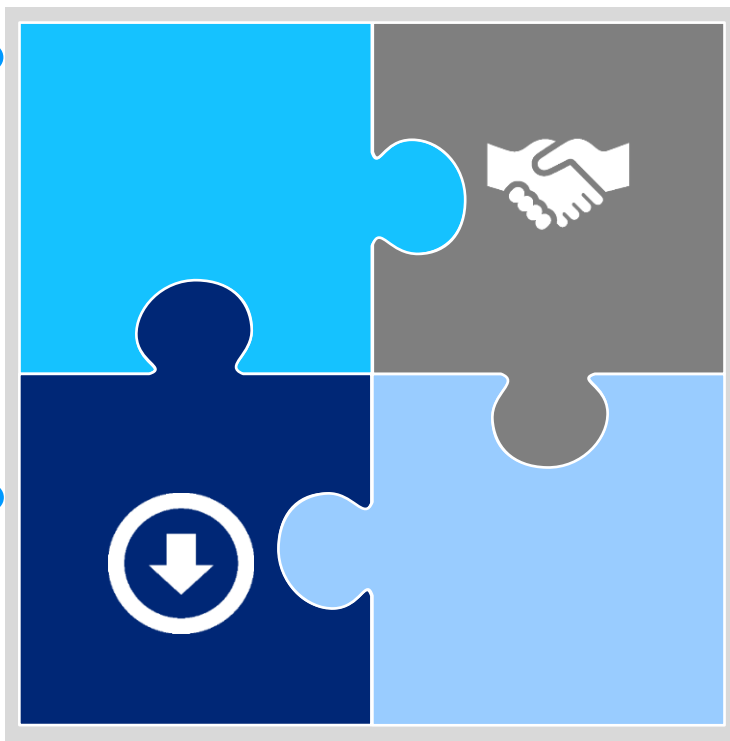
FOUNDATIONAL THEORIES

Borrowing and combining from evidence based and public health prevention models, the DoD applies an integrated community based public health approach that encompasses three foundational theories:

- Institute of Medicine (IOM) Model
- Interpersonal Theory of Suicide
- Ecological Systems Model

STIGMA REDUCTION

Reducing suicide risk entails creating a command climate that encourages Service members to seek help, reducing access to lethal means, and broadening communication and awareness to Service members and their families.



PARTNERSHIPS

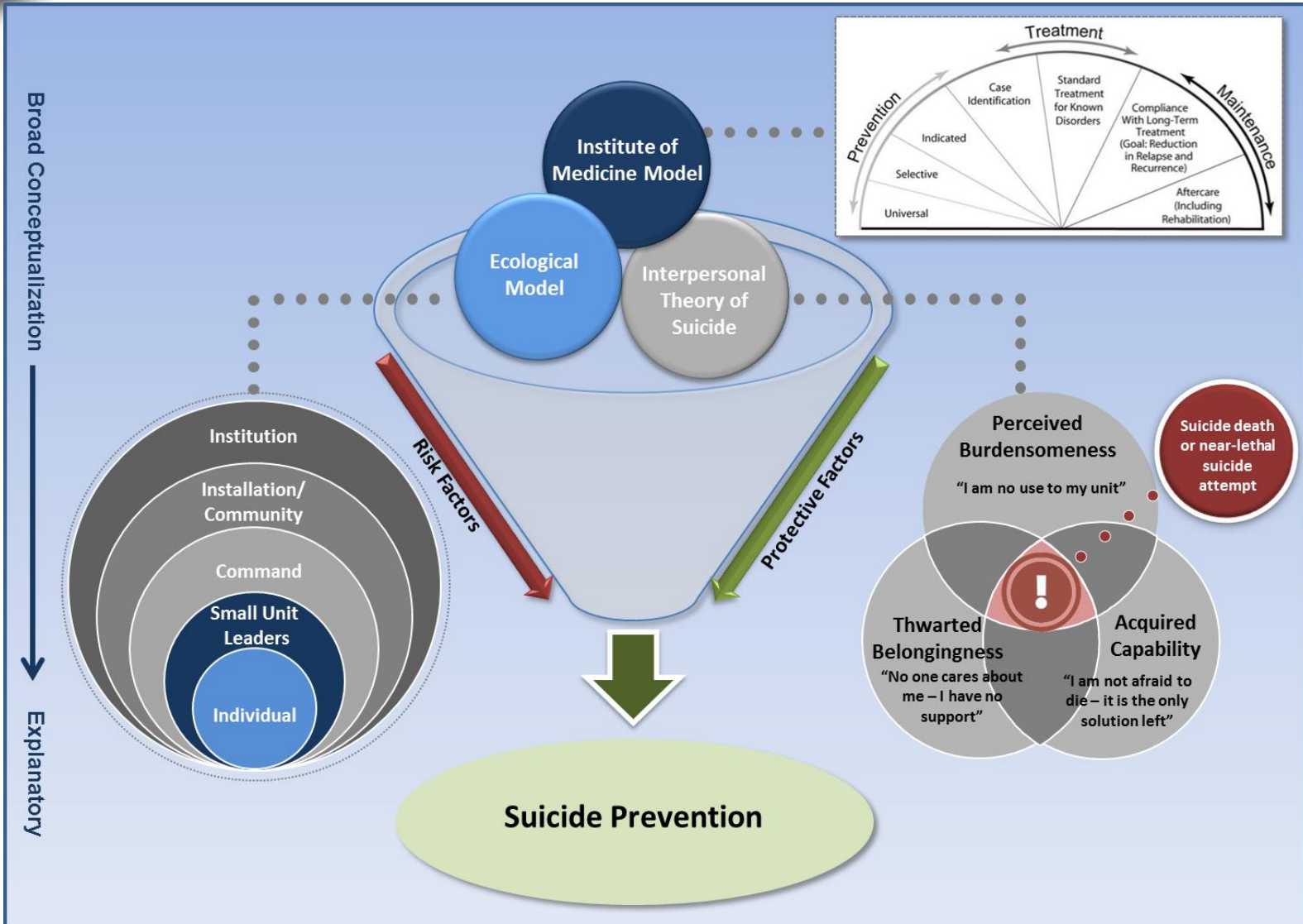
DoD partners with the Services, other Governmental Agencies, Non-Governmental Agencies, and non-profit organizations, and the community to reduce the risk for suicide.

PREVENTION STRATEGIES

DoD has adopted the National Strategy for Suicide Prevention as the guiding framework within the DoD and developed a Defense Strategy for Suicide Prevention (DSSP) that leverages DSPO's five lines of effort: data surveillance, program assessment, advocacy, policy oversight, and outreach and education.



DSPO Strategy: Integrating Models of Suicide Prevention





Challenges and Barriers

- Suicide is the culmination of complex interactions between biological, social, economic, cultural and psychological factors operating at the individual, community and societal levels
- Significant challenge between DoD and Veterans Affairs is with the concept of the “grey space”



Challenge	Barrier
Instilling help-seeking behaviors into a warrior culture	Overall pride and desire to solve own problems
Developing an evidence-based DoD-wide suicide prevention program	Individual Service culture and customs
Comprehensively collecting, maintaining, reporting, and interpreting military suicide data	Multiple reporting agencies and reports/data interpretation
Assessment and evaluation of Services evidence-based programs	Resources, service-level procedural differences, expertise and knowledge of implementation science



Tennent's of Public Health Approach

- Endorses multipronged “bundled” approach
- Access to medical and non-medical care
- Data driven decisions
- Research gaps
- Innovative strategies – evaluated across a range of settings
- Safe responsible messaging
- Focus on problem solving/coping skills
- Implementing evidence based practices
- Means safety
- Community connectedness
- Sense of prosperity for the future



DSPO Lines of Efforts

DSPO is engaging in a responsible, measurable, and deliberate approach towards suicide prevention, intervention, and postvention efforts

Strategic Goals and Current Initiatives

Data Surveillance & Analysis	Research & Program Evaluation	Plans & Policy Oversight	Outreach	Training Oversight
• Quarterly Suicide Data • Weekly Suicide Data • Suicide Data Repository • Dependent Suicide Data (Section 567, FY15 NDAA) • Reserve Component Deaths by Suicide data capture improvements (Section 567, FY15 NDAA) • Reserve Component Suicide attempts data capture improvements (Section 567, FY15 NDAA)	• Defense Research Action Plan for Suicide Prevention (DRAP) • Evaluating Service programs with measures of effectiveness (MOEs) • Translation, Implementation, and Evaluation of Research Studies (TIERS) Pilot Program • Research Studies • Pilot Programs • Means Method Initiatives	• DoD Strategy for Suicide Prevention (DSSP) • Chaplain Training Report to Congress • DoD Instruction 6490.XX ○ Will incorporate and cancel DoDD 6490.14 ○ Integrates policy and procedural guidance and incorporates policy memos and Directive-Type Memos • Steering and Governance Committees: ○ Suicide Prevention General Officer Steering Committee (SPGOSC) ○ Suicide Prevention and Risk Reduction Committee (SPARRC)	• “#BeThere” joint DoD and VA campaign • Developing social media presence • Conferences, Webinars, Summits • Outreach and Partnership with: ○ Military Crisis Line/Veterans Crisis Line ○ National Suicide Prevention Lifeline ○ Military OneSource ○ American Association of Suicidology (AAS) ○ Tragedy Assistance Program for Survivors ○ P2P Call Center	• Training Competency Framework • Development of a DoD Postvention Checklist • Developing an accredited suicide prevention training program for DoD

Back-Up Slides

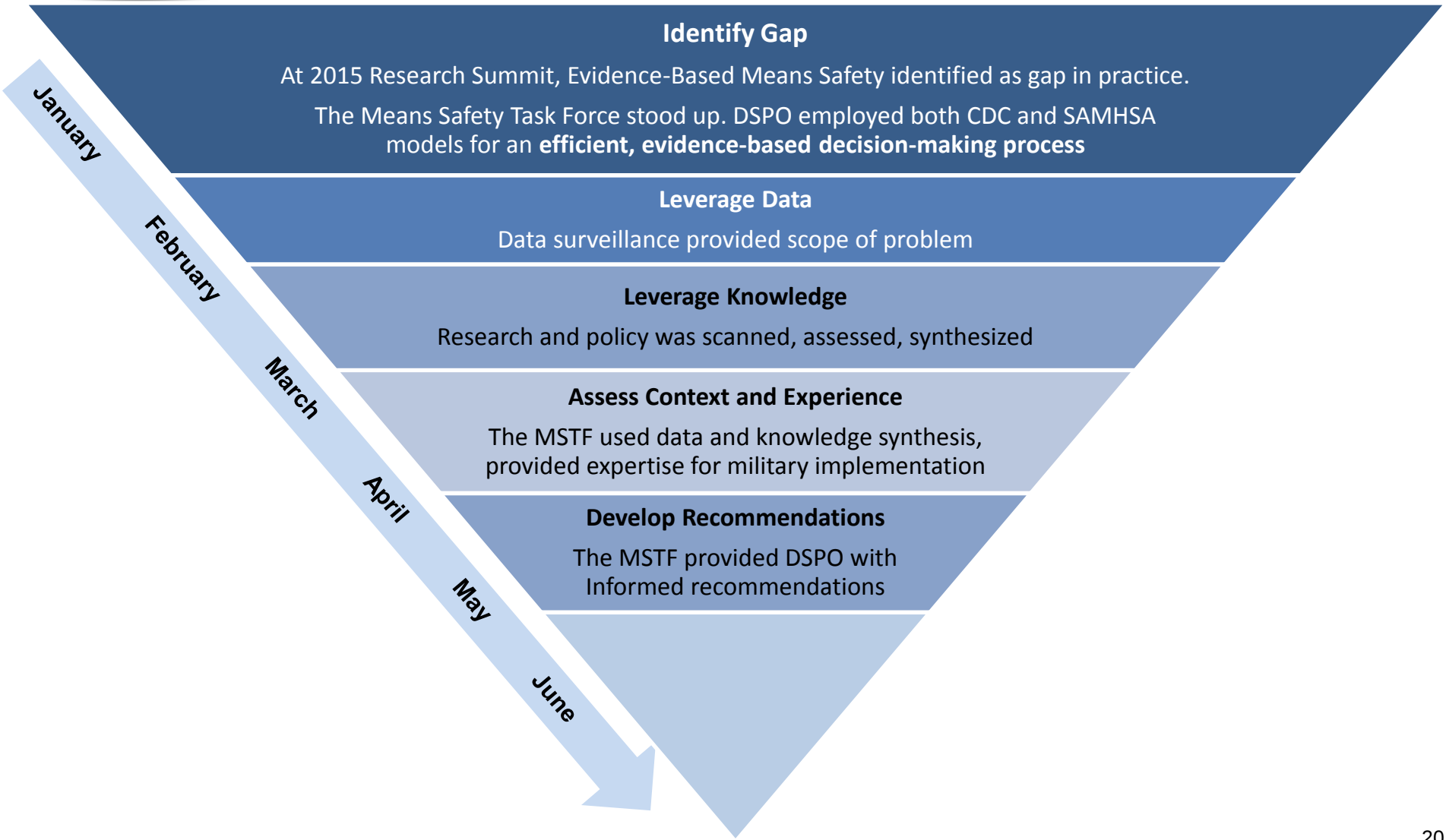




CURRENT INITIATIVES



Means Safety Task Force





Underway

- Gun Shop Intervention Pilot
 - Educational materials adapted for military culture
- Research Study: Perception of Gunlocks
- Means Safety Embedded Training
- Partnership with the National Rifle Association (NRA)
 - Gun safety and community-based suicide prevention initiatives on and around Texas military bases
- AAFES/NEXCOM Means Safety Collaboration



Embedding Means Safety into Current Training Programs

- Training specific to peers, command, family
- CALM (Counseling for Access to Lethal Means)
 - Free training program on SPRC website
- DoD/VA Webinars; e.g. Peer-to-peer training
- Joint Knowledge Online: potential to embed means safety training for DoD



Way Forward: Collaboration to Address All Means Safety

- Collaboration driven by the National Action Alliance for Suicide Prevention including:
 - Centers for Disease Control and Prevention
 - Substance Abuse and Mental Health Administration
 - Suicide Prevention Resource Center
 - American Foundation for Suicide Prevention
 - Veterans Affairs
 - Union Pacific Railroad
 - Pharmaceutical Industry
 - Poison Control



DSPO 2016 Research Efforts

1. Elements of Effective Practical Application Techniques within Suicide Prevention Training: Evaluation of ASIST Training

- IDA: Research Team Kick-off meeting planned for August 19

2. Building Mastery of Rational-Thinking and Emotional-Regulation through Problem-Solving (REPS) during Military Basic Training

- USUHS: Research Team being assembled, to begin September

3. Understanding the Perception and Beliefs Behind Gun Lock Policies within the Military Culture of Gun Usage

- CNA: Developing Gun Lock Survey to measure perceptions and beliefs
- Will also determine degree to which guns used in a suicide death was registered on base

4. Developing Evidence-Based Suicide Prevention Communications to Promote Help-Seeking Behaviors

- CNA: Translation of Minimizing Stigma to Facilitate Help-Seeking Behaviors
- To be initiated on completion of the first study



DSPO 2016 Research Efforts

5. Controlled Study to Understand Military Suicide Bereavement and Postvention Needs Across Groups

- PERSEREC: Will look at both bereaved family and unit members
- To begin data collection with family members (recruiting via long-term case managers) in September

6. Estimating and Understanding the Non-Help Seeking Population

- PERSEREC: Requests assistance from SPPMs for installation locations and recruitment
- Study to use focus groups (using assist from gatekeepers to identify) to understand population

7. Understanding the Characteristics and Trajectory of Non-Suicidal Self-Injury and Suicide Attempt

- DMDC/PERSEREC: Requests assistance from SPPMs for installation locations and recruitment
- Study to use clinical interview to understand population
- Survey items also embedded in the SOFA (Status of Forces survey)



DSPO 2016 Newly Funded Studies

1. DoD-Wide Annual Suicide Death Reviews: Generating Lessons Learned and Recommendations for Military Suicide Prevention
2. Efficacy of Cognitive Behavioral Strategies as Delivered by United States Navy Chaplains for the Prevention of Suicide: A Randomized Controlled Trial of Chaplains-CARE Program (*Navy*)
3. Training Chaplains in Evidence-Based and Integrated Care to Promote Suicide Prevention and Mental Health (*National Guard and Reserve*)
4. Evaluation of the Marine Intercept Program (*Marines*)
5. 21st Century Public Awareness Campaign (*Air Force*)
6. C-SSRS and Safety Planning for Gatekeepers and Trainers (*Navy*)
7. Zero Suicide Framework Implementation Pilot (*AF, ANG*)



DEOCS Suicide Sub-scale

- DSPO has worked with DEOMI to develop a suicide sub-scale for the DEOCS
 - Four questions comprise the scale
 - One additional question assesses prevalence of ideations, attempts, and suicides
- Questions will permanently appear on DEOCS version 4.1 due for release in October 2016
- First data release expected in Spring 2017



Key Stakeholders and Partners

- DSPO is committed to fostering collaboration and cooperation to develop suicide prevention efforts among all stakeholders including the Military Services; federal agencies; public, private, and international entities, and institutions of higher education.



**Military/Veterans
Crisis Line**
1-800-273-8255

Confidential chat at MilitaryCrisisLine.net or text 838255