



RAND RESEARCH ON
**SUICIDE PREVENTION
IN THE U.S. AIR FORCE**



RAND PROJECT AIR FORCE

RAND’s research portfolio on suicide prevention in the U.S. Air Force centers on the evaluation of mental health and upstream targets for suicide prevention. RAND researchers have also evaluated Air Force suicide prevention and response programs, as well as mental health and resilience programs that address upstream targets for suicide prevention.

RESEARCH TOPICS

RAND research on suicide prevention in the U.S. Air Force has addressed the following topics:

- identifying suicide risk and suicide outcomes in the 2018 Department of Defense Health Related Behaviors Survey (HRBS)
- assessing upstream targets for suicide prevention, such as the underlying social, economic, and environmental factors that contribute to suicide risk
- understanding the mental health conditions and harmful behaviors that increase suicide risk
- evaluating the implementation and effectiveness of Air Force resilience, suicide prevention, and suicide postvention programs.

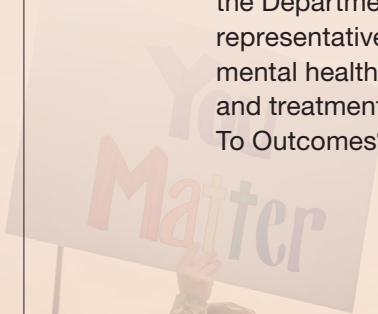
RESEARCH METHODS

RAND has used a diverse set of research methods to evaluate suicide risk and response in the Air Force. RAND has fielded the Department of Defense HRBS—a large, representative survey of service members’ mental health and substance use symptoms and treatments. RAND has also used Getting To Outcomes®, a research-based model for

implementing and evaluating prevention programs. Additional research methods include other surveys, key stakeholder interviews, and focus groups.

ACTIONABLE INFORMATION AND RECOMMENDATIONS

RAND research has identified several actionable recommendations. First, several projects have highlighted the need for the collection of accurate data on mental health, substance use, and suicide symptoms among airmen and for increased coordination to enable Air Force leadership and mental health teams to implement timely suicide prevention efforts. Second, many studies have highlighted barriers to mental health care that may exacerbate suicide risk. Efforts to increase access to care include stigma-reduction programs, expansion of the mental health workforce, and the use of such programs as Zero Suicide that support the coordination of mental health and resilience efforts. Finally, RAND research has identified several ways to improve the Task Force True North (TFTN) initiatives and suicide postvention efforts through workforce expansion and enhanced training.



IDENTIFYING SUICIDE RISK AND SUICIDE OUTCOMES IN THE 2018 DEPARTMENT OF DEFENSE HEALTH RELATED BEHAVIORS SURVEY



The Health Related Behaviors Survey (HRBS) is the U.S. Department of Defense's (DoD's) flagship survey for understanding the health, health-related behaviors, and overall well-being of service members. The survey assesses suicide risk factors, such as mental health, substance use, and combat exposure. A series of RAND research reports presents findings from these domains for both the active component and reserve component of each branch of service.

RAND PUBLICATIONS IN THIS AREA

2018 Department of Defense Health Related Behaviors Survey (HRBS): Results for the Active Component

RR-4222-OSD, www.rand.org/t/RR4222

The 2018 HRBS sought to collect survey responses from 10.4 percent of all active component airmen. The survey found that 4.8 percent of airmen experienced suicidal ideation, and 0.6 percent of airmen reported a suicide attempt in the past year. Suicide thoughts, plans, and attempts among airmen were also roughly comparable with those of the general U.S. adult population. Similarly, psychological distress and alcohol misuse among airmen were roughly comparable with that of the U.S. adult population, while rates of probable posttraumatic stress disorder (PTSD), sleep problems, and tobacco misuse among airmen were higher than those experienced by the U.S. adult population.

2018 Department of Defense Health Related Behaviors Survey (HRBS): Results for the Reserve Component

RR-4228-OSD, www.rand.org/t/RR4228

The 2018 HRBS sought to collect survey responses from 19 percent of Air Force reservists and 18.2 percent of the Air National Guard members. Among Air Force reservists, 2.5 percent reported suicidal ideation and 0.1 percent reported suicide attempts in the past year—both findings were in line with rates found in the general U.S. adult population. Reservists' levels of psychological distress were about the same as those for the U.S. adult population, while their rates of alcohol misuse, illicit substance misuse, and prescription drug misuse were lower. However, reservists' rates of probable PTSD, tobacco misuse, and sleep problems were higher than those found in the general U.S. adult population.

Among Air National Guard members, 2.8 percent reported suicidal ideation and 0.3 percent reported suicide attempts in the past year. These rates were lower than rates for suicidal ideation and suicide attempts in the general U.S. adult population. Psychological distress and alcohol misuse were about as prevalent among Air National Guard members as they were in the general population, while rates for probable PTSD, sleep problems, and tobacco misuse were higher among Air National Guard members than in the general U.S. adult population.

2018 Health Related Behaviors Survey: Comparing the Active and Reserve Components

RB-10126, www.rand.org/t/RB10126

Compared with active component service members, reserve component members were generally found to have better outcomes in several areas, including strength training, the quantity and quality of their sleep, binge and heavy drinking, chronic physical health conditions, and risky sexual behaviors. Reserve component service members also had a lower prevalence of mental

health problems, such as suicidal thoughts and behaviors, serious psychological distress, and probable PTSD, compared with active component members. However, reserve component service members were more likely to report using illicit drugs and less likely to use mental health care services than their active component counterparts.

ADDITIONAL RAND RESEARCH ON THE EPIDEMIOLOGY OF SUICIDE RISK IN THE AIR FORCE

Prevalence of, Risk Factors for, and Consequences of Posttraumatic Stress Disorder and Other Mental Health Problems in Military Populations Deployed to Iraq and Afghanistan

published in *Current Psychiatry Reports*, www.rand.org/t/ep50677

The Behavioral Health of Minority Active Duty Service Members

RR-4247-OSD, www.rand.org/t/RR4247



UPSTREAM SUICIDE PREVENTION TARGETS



Upstream targets for suicide prevention are interventions and strategies that address the underlying social, economic, and environmental factors that contribute to suicide risk. Such efforts aim to prevent suicidal thoughts and behaviors before they occur by addressing the root causes that increase the likelihood of suicide.

RAND PUBLICATIONS IN THIS AREA

Airman and Family Resilience: Lessons from the Scientific Literature

RR-106-AF, www.rand.org/t/RR106

RAND researchers identified opportunities for the Air Force to promote resilience among airmen by reviewing concepts and measures of resilience, highlighting fitness domains, and recommending interventions that could improve overall airman health and well-being. The authors of this report recommended committing more resources to Health and Wellness Centers, promoting regular physical activity, and increasing the sharing of resilience-related data across the Air Staff. The authors also suggested filling gaps in data collection to better target messaging and programs, as well as adding a “Programs and Services” tab to the Air Force base website template to offer resources to airmen and their families to help them cope with stressors and build up resilience.

Assessing the Department of Defense’s Approach to Reducing Mental Health Stigma

RB-9881-OSD, www.rand.org/t/RB9881

RAND researchers conducted a study on mental health stigma in the military and found that stigma-reduction programs currently implemented by DoD target stigma in the public context but

do not support more-targeted programs for those already seeking mental health treatment. The authors also identified challenges to DoD’s efforts, including policy language barring service members with mental health disorders from career opportunities and tensions between protecting privacy and the need for commanders to assess individual and unit fitness. The report presents several recommendations to improve the effectiveness of DoD’s stigma-reduction efforts, including exploring interventions that directly increase treatment-seeking, modifying policies that contribute to mental health stigma, and improving measures of prevalence to better track stigma and other barriers to care.

ADDITIONAL RAND RESEARCH ON UPSTREAM TARGETS FOR SUICIDE PREVENTION IN THE AIR FORCE

Movement Behaviors Associated with Mental Health Among US Military Service Members

published in *Military Psychology*,
www.rand.org/t/EP68777

Ten Frequently Asked Questions About Veterans’ Transitions: Results of a Decade of RAND Work on Veteran Life

RR-1095-OSD, www.rand.org/t/RR1095

ADDRESSING MENTAL HEALTH CONDITIONS AND HARMFUL BEHAVIORS THAT INCREASE SUICIDE RISK



Research has shown that military service members who engage in or are affected by harmful behaviors, such as alcohol and drug misuse, are also at an increased risk for suicide. RAND researchers have assessed risk factors and treatments for harmful behaviors that increase suicide risk.

RAND PUBLICATIONS IN THIS AREA

Psychological Harms and Treatment of Sexual Assault and Sexual Harassment in Adults: Systematic and Scoping Reviews to Inform Improved Care for Military Populations

RR-A668-1, www.rand.org/t/RR668-1

RAND researchers conducted three studies on sexual assault and harassment in adults, focusing on the effectiveness of psychotherapy interventions for victims in military settings, barriers and facilitators to accessing care, and the association between victimization and such mental health conditions as PTSD, depression, and substance use disorders. Study findings showed that psychotherapy was effective in reducing symptoms of PTSD and depression among military victims, but barriers to accessing care, such as stigma and logistical issues, were prevalent.

Improving Oversight and Coordination of Department of Defense Programs That Address Problematic Behaviors Among Military Personnel: Final Report

RR-1352-OSD, www.rand.org/t/RR1352

RAND researchers evaluated the oversight and coordination of DoD suicide prevention programs that address problematic behaviors, such as sexual assault, hazing, and substance abuse. Study findings showed that, while some Office of the Secretary of Defense (OSD) organizations

have implemented effective managerial principles, others lack adequate policies, plans, and resources to establish a departmental approach to certain behavioral issues. There is a need for better OSD-supervised tracking and accountability mechanisms for problematic behavior. The lack of coordination among OSD organizations dealing with issues related to individual and multiple problematic behaviors is hindering effective management. In this report, RAND researchers recommend establishing clear authority and accountability structures, better tracking mechanisms, a single coordinating organization, and a more coordinated approach to address problematic behaviors in DoD.

ADDITIONAL RAND RESEARCH ADDRESSING RISK FACTORS FOR SUICIDE IN THE AIR FORCE

Quality of Care for PTSD and Depression in the Military Health System: Final Report

RR-1542-OSD, www.rand.org/t/RR1542

Centrally Assisted Collaborative Telecare for Posttraumatic Stress Disorder and Depression Among Military Personnel Attending Primary Care: A Randomized Clinical Trial

published in *JAMA Internal Medicine*, www.rand.org/t/EP66510

EVALUATING THE IMPLEMENTATION AND EFFECTIVENESS OF AIR FORCE RESILIENCE, SUICIDE PREVENTION, AND SUICIDE POSTVENTION PROGRAMS

Evaluating the implementation and effectiveness of Air Force resilience, suicide prevention, and suicide postvention programs is critical for ensuring that these programs are meeting their intended goals and objectives. RAND researchers have evaluated several Air Force mental health treatment and resilience programs.

RAND PUBLICATIONS IN THIS AREA

An Evaluation of Task Force True North Initiatives for the Promotion of Resilience and Well-Being Within the Air Force

RR-3190-AF, www.rand.org/t/RR3190

RAND researchers conducted interviews and focus groups to evaluate the Air Force's TFTN initiatives. Four of the five initiatives were perceived positively by stakeholders, and the authors recommended improvements to expand these initiatives across the Air Force. Such improvements include conducting frequent evaluations, pursuing funding for civil service providers to fill embedded mental health technician (EMHT) and operational stress technician (OST) roles, and developing standardized training for EMHTs and OSTs.

Getting To Outcomes® Operations Guide for U.S. Air Force Community Action Teams: Content Area Module for Air Force Suicide Prevention

TL-311/1-AF, www.rand.org/t/TL311z1

This content area module for Air Force suicide prevention includes guidance, resources, and examples of completed tools for Community Action Teams that have an interest in planning, implementing, and evaluating suicide prevention initiatives as part of a Community Action Plan.

Suicide Postvention in the Department of Defense: Evidence, Policies and Procedures, and Perspectives of Loss Survivors

RR-586-OSD, www.rand.org/t/RR586

This report revealed that DoD could benefit from additional guidance and improvements to its Suicide Event Report (DoDSER) system to prevent subsequent suicides. Military suicide loss survivors reported different experiences with DoD-provided casualty assistance officers

(CAOs): Some found them extremely knowledgeable and supportive, while others felt that they provided confusing or conflicting information. Recommendations presented in the report include strengthening the DoDSER system, developing a plan to respond to suicide, and educating leaders, CAOs, and other support personnel about complicated grief.

ADDITIONAL RAND RESEARCH ON AIR FORCE SUICIDE PREVENTION AND POSTVENTION EFFORTS

Alternative Approaches for Expanding the Air Force's Task Force True North Program

RR-A269-1, www.rand.org/t/RRA269-1

Getting to Outcomes® Operations Guide for U.S. Air Force Community Action Teams

TL-311-AF, www.rand.org/t/TL311

Getting To Outcomes® Operations Guide for U.S. Air Force Community Action Teams: Content Area Module for Air Force Sexual Harassment Prevention

TL-311/3-AF, www.rand.org/t/TL311z3

Getting To Outcomes® Operations Guide for U.S. Air Force Community Action Teams: Content Area Module for Air Force Sleep Health Promotion

TL-311/4-AF, www.rand.org/t/TL311z4

Getting To Outcomes® Operations Guide for U.S. Air Force Community Action Teams: Content Area Module for Workplace Stress Prevention and Reduction in the Air Force

TL-311/2-AF, www.rand.org/t/TL311z2

Getting To Outcomes® Operations Guide for Air National Guard Community Action Teams

TL-311/5-AF, www.rand.org/t/TL311z5

WORKING WITH US

WHAT WE DELIVER

RAND Project AIR FORCE's (PAF's) studies and analyses are tailored to the needs of the sponsor. Generally, PAF provides

- continuous interaction with PAF subject-matter experts throughout the project
- accessible, timely, and policy-focused reports that address senior leader concerns and recommend courses of action
- descriptive, transparent, and rigorous supporting materials that describe the project's methodology and support the project's conclusions
- as appropriate, additional outreach materials to help socialize the work to other interested stakeholders, such as the Department of the Air Force (DAF), DoD, Congress, or the public.

SPONSOR IDENTIFICATION

All PAF research projects must be sponsored by an Air Force general officer (GO) or member of the senior executive service (SES). Most sponsors assign one or more action officers (AOs) to manage the technical and administrative aspects of their PAF projects.

LINES OF FUNDING

DAF organizations can initiate a PAF research project in two ways:

1. **Centrally Funded** (also referred to as “core projects”). Air Force Studies, Analyses, and Assessments (SAF/SA; formerly HAF/A9) employs a rigorous, iterative, GO/SES voting process to select projects for inclusion in its annual research plan. This process accounts for about 70 percent of the projects that PAF

will conduct during a fiscal year. Funding for these projects is part of a line item in the congressional budget and is awarded through the competitive selection process. Project topics are submitted in January, and the research plan is approved by a steering group consisting of three- and four-star GOs between June and July. Maintaining a balance of projects across the DAF and the four PAF programs is key to this selection process.

2. **Sponsor-Funded** (also referred to as “add-on projects” because they are add-ons to the core research agenda). This process accounts for about 30 percent of the projects that PAF will conduct during a fiscal year. Funding for these projects comes directly from the organization requesting the research and does not require a competitive selection process, because the requesting organization is paying for the research (and not competing with others). DAF sponsors may initiate a PAF add-on research project at any time of the year by requesting the work, submitting required documentation, and transmitting organizational funds. Ideas and requests for PAF add-on projects may originate from a variety of circumstances (e.g., continuation of prior PAF work or new challenges). To initiate the process, a sponsor or AO typically contacts the appropriate PAF program director or subject-matter expert. The timeline of add-on projects is flexible.

PAF also supports DAF organizations in many informal ways. To request Workforce, Development, and Health (WDH) research reports highlighted here or to discuss pressing DAF challenges, contact the director of PAF's WDH program at www.rand.org/paf/about/pafmanagement.

RAND Project AIR FORCE (PAF), a division of RAND, is the Department of the Air Force's (DAF's) federally funded research and development center for studies and analyses, supporting both the United States Air Force and the United States Space Force. PAF provides the DAF with independent analyses of policy alternatives affecting the development, employment, combat readiness, and support of current and future air, space, and cyber forces. Research is conducted in four programs: Strategy and Doctrine; Force Modernization and Employment; Resource Management; and Workforce, Development, and Health.

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