

Enclosure 2 (Suicide Prevention Talking Points) to Letter of Instruction (LOI) No. 92-12
– NYARNG Suicide Prevention Stand Down

Talking Points and Initiatives from:

http://www.armyg1.army.mil/hr/suicide/docs/ASPP%20Talking%20Points_17%20Jun%2011.pdf

Talking Points

- The National Guard's commitment to the health and well-being of our Soldiers, Airmen, and their Families is unwavering
- We will continue to promote the emotional, social, physical, and spiritual health of our Guard Family members and connect them with quality care
 - Asking for help when you need it is a sign of strength
 - Providing support when needed, makes you a good team player
 - Continued focus on mentoring and training our leaders and leveraging service providers is critical to our ability to provide our Guard Family with the best possible care and support
- Master Resilience Trainers and Resilience Trainer Assistants will eventually be assigned to every Company-sized unit to teach coping skills
- Part of leadership is creating an environment where it's okay to ask for help
- In keeping with the Army Warrior Ethos to never leave a fallen comrade, leaders are responsible to extend a helping hand
- National Guard Families and Employers are being trained to assist in identifying those who should be referred to unit leadership and support services

National Guard Initiatives

- The National Guard has established a Resilience, Risk Reduction and Suicide Prevention (R3SP) Task Force to focus efforts on specific actions which will increase resilience
- Each state and territory has an appointed Suicide Prevention Program Manager and is working to increase their pool of Master Resilience Trainers and Resilience Trainer Assistants
- The National Guard continues to partner with mental health professionals in an effort to constantly refine and improve its programs
- Each state and territory has a Director of Psychological Health (DPH) to provide case management support for Soldiers/Airmen in crisis. [Currently, all 54 DPHs are assigned]
- ARNG Programs: Ask, Care and Escort (ACE) materials, Comprehensive Soldier Fitness, Soldier-to-Soldier Peer Support
 - In May 2011, ARNG self-help magnets, containing key resources and specific contact information, were mass produced and distributed to all states, territories, and the District of Columbia
 - National Guard Vets4Warriors program will provide peer support services to a variety of high risk populations to prevent problems from escalating into crises by providing timely, non-stigmatizing assistance to soldiers, veterans and family members

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Facts reported by NGB at Annual Suicide Prevention Conference (June 2012)

Facts

- On 21 August 2012, a NYARNG Soldier took her own life.
 - This is the first suicide among a NYARNG Soldier in more than 18 months.

- In 2011, a total of 283 Soldiers took their own lives.
 - Suicides are occurring across every segment of the force – Active, Guard and Reserve; officers and enlisted Soldiers; deployed, non-deployed, and those who have not deployed, as well as Army Civilians and Family members.

- As of 10 August 2012, 191 Soldiers have taken their own lives during the current calendar year.

- As of 13 July 2012, a total of 54 ARNG Soldiers have taken their own lives during the current calendar year.

- There is no “profile” of deaths by suicide; the tragedy affects all Soldiers throughout the ranks. However, ARNG Soldiers who commit suicide tend to be:
 - White
 - Male
 - Married or single
 - M-day
 - Never deployed or deployed more than 365 days ago
 - 17-24 years old

- Of the 357,698 ARNG Soldiers:
 - 6% have had Suicidal Ideations
 - Of those with Suicidal Ideations, 30% made a plan
 - 1% of all ARNG Soldiers attempted suicide