

Air Force Prevention Program reduces suicide rates significantly

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The U.S. Air Force Suicide Prevention Program (AFSPP) has reduced suicide rates significantly since it was launched in 1996, according to a new study that examined almost three decades of data.

"The enduring public health message from 12 years of this program is that [suicide rates](#) can be reduced, and that program success requires interventions to be consistently supported, maintained, and monitored for compliance," the researchers conclude in the study published by the [American Journal of Public Health](#).

Kerry L. Knox, Ph.D., associate professor of Psychiatry at the University of Rochester Medical Center, led the study. She also directed a landmark assessment of the AFSPP almost seven years ago.

In the current study, which examined suicide rates in the Air Force from 1981 to 2008, Knox and her colleagues found a reduction in the mean suicide rate after the implementation of the prevention program of about 21 percent that was consistent except for one year, 2004.

Still, the researchers called the AFSPP "the first long-term sustained effort of its kind to serve as an example of what communities can accomplish in reducing morbidity and mortality attributable to suicidal behaviors if there is ongoing commitment to do so."

The AFSPP encourages members of the Air Force to seek help, promotes the development of coping skills and fights the stigma

associated with receiving mental health care. The program stresses the absence of negative career consequences for seeking and receiving treatment.

Through the AFSPP, suicide prevention is included in all military training. Commanders receive training on how and when to use mental health services, and their role in encouraging early help-seeking behavior. Trauma [stress response](#) teams were established worldwide to respond to traumatic incidents such as terrorist attacks, serious accidents, or suicide. These teams help personnel deal with the emotions they experience in reaction to traumatic incidents.

Information on all Air Force active duty suicides and suicide attempts are entered into a central database that tracks suicide events and facilitates the analysis of potential risk factors for suicide in air force personnel.

After the implementation of the AFSPP, the researchers found, the mean suicide rate declined from 3.033 per 100,000 per quarter to 2.387 per 100,000, a reduction of about 21 percent.

The actual number of suicides per year fell from a high of 68 in 1994 before the implementation of the program to a low of 20 in 1999.

The researchers did find a spike in the suicide rate in 2004. The study also included a long-term assessment of the implementation of the AFSPP and its activities. The researchers suggest program implementation efforts diminished in 2004. Air Force leadership responded to the increase in suicide rates by initiating service-wide compliance with the program.

The researchers note that the [Air Force](#) has achieved success in reducing suicide rates while there has been no reduction in overall suicide rates in

the civilian population of the United States since the 1940s.

The 27-year period examined in the study provides an important historical perspective on suicide rates in an organization that underwent rapid, widespread change in force structure and that dealt with the onset and continuation of Operation Enduring Freedom in Afghanistan in 2001 and Operation Iraqi Freedom in 2003, the researchers stated.

Because of the wars in Afghanistan and Iraq, the researchers state that a large population of combat veterans will experience mental health disorders, and many of these individuals may not seek care.

"It will be critical for clinicians who encounter returning military personnel to be trained to recognize the early risk factors and warning signs of suicidal behaviors, and specifically those associated with combat exposures," the researchers conclude. "The larger challenge for communities worldwide is whether the pervasive stigma associated with mental health disorders and psychosocial problems will be overcome as a result of acceptance that these significant, adverse [mental health](#) outcomes are a normal human response to the exposures associated with serving in the military."

Provided by University of Rochester Medical Center

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