

Putting Research to Work for Military Families



Focus:
Army

Mental Disorder, Comorbidity, and Pre-enlistment Suicidal Behavior Among New Soldiers in the U.S. Army: Results From the Army Study to Assess Risk and Resilience in Service Members (Army STARRS)

Nock, M. K., Ursano, R. J., Heringa, S. G., Stein, M. B., Jain, S., Raman, R., ... Army STARRS Collaborators (2015). Mental disorder, comorbidity, and pre-enlistment suicidal behavior among new soldiers in the U.S. Army: Results from the Army Study to Assess Risk and Resilience in Service members (Army STARRS). *Suicide and Life Threatening Behavior*, 45(5), 588-599. doi:10.1111/sltb.12153

SUMMARY: Newly recruited Soldiers participated in a study examining the associations between mental disorders and suicidal behavior (ideation, plans, and attempts). Having a mental disorder was associated with increased odds of suicidal behavior. Only posttraumatic stress disorder (PTSD) and other mental health disorders (those characterized by irritability and impulsive and aggressive behavior) predicted unplanned suicide attempts among those who thought about suicide.

KEY FINDINGS:

- Most new Soldiers who had attempted suicide prior to enlistment had a mental disorder, commonly including intermittent explosive disorder and chemical dependency.
- Each mental health disorder examined was significantly associated with increased odds of suicidal ideation and attempts.
- No single disorder assessed in this study predicted which Soldiers with a suicidal plan would go on to make a suicide attempt.
- Only PTSD, bipolar disorder, chemical dependency, and oppositional defiant disorder predicted which Soldiers would move beyond suicidal ideation to unplanned attempts.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Disseminate information about suicide hotline and intervention resources for Service members and their families in offices and clinics across the installation
- Conduct outreach with the families of new recruits while they are in basic training to provide support and information for those families
- Offer peer support programs for families whose Service members are experiencing emotional distress

IMPLICATIONS FOR POLICIES:

Policies could:

- Recommend the screening of new recruits for previous mental health concerns
- Encourage Service members with a history of suicidal behavior to participate in programs to support their wellbeing and fitness for duty
- Encourage the development and continuation of programs that can promote resilience in Service members, their partners, and children

This product is the result of a partnership funded by the Department of Defense between the Office of Military Community and Family Policy and the USDA's National Institute of Food and Agriculture through a grant/cooperative agreement with The University of Minnesota.



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METHODS

- New Army recruits attending Basic Combat Training at three installations in 2011-2012 were invited to participate.
- Ninety-four percent of the approached military personnel consented and completed the questionnaire.
- Soldiers completed a questionnaire with measures of suicidal behavior and a computerized psychiatric diagnostic interview.
- Soldiers also consented to have their Army and DoD administrative records accessed and linked to their responses.

PARTICIPANTS

- A total of 38,507 new Army recruits participated.
- No information on participants' race/ethnicity, gender, or age was presented.
- No data on previous mental health services or treatment were presented.

LIMITATIONS

- The sample was entirely comprised of Army recruits; the findings may not apply to other service branches or Soldiers who have longer service records.
- The measures were self-reported and may be biased; bias could also stem from fears about how honest reporting might impact their career.
- Only a small range of mental disorders was assessed and personality disorders (not assessed) may be related to suicidal behavior.
- The study was correlational and causal conclusions are not appropriate.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Examine the efficacy of early interventions for mental disorders among Army recruits to prevent suicide attempts
- Gather data on Service members who attempt suicide in order to identify risk factors
- Replicate this study with Service members from other branches

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