

# Suicide Risk: A Guide for Department of Defense Line Leaders



This tool is intended to help you identify and offer support to your service members who may be at risk for suicide. Support your service members who may be at risk for suicide by:

- Building relationships so you are more likely to notice changes in mood or behaviors
- Learning about the warning signs and risk factors for suicide risk so you can be vigilant
- Connecting them to mental health care and encouraging them as they complete treatment

You are playing an important role in building a mission-ready force and promoting the resilience and health of those you lead.<sup>1</sup>

## What are some warning signs for suicide?

If your service member shows any of the following warning signs, it may indicate they are experiencing suicidal ideation and may benefit from clinical support:<sup>1</sup>

- Suicide related communication (e.g., suicide note, mention of wishing to die)
- Preparation for suicide (e.g., giving items away)
- Seeking access or recent use of lethal means
- Substance use: uses substances increasingly or excessively
- Hopelessness: feels that nothing can be done to improve the situation
- Purposelessness: feels no sense of purpose, no reason for living
- Anger: exhibits rage, seeks revenge
- Recklessness: engages impulsively in risky behavior
- Feeling trapped: experiences feelings of being trapped with no way out
- Social withdrawal: withdraws from family, friends, society
- Anxiety: feels agitated or irritable, wants to “jump out of my skin”
- Mood changes: exhibits dramatic changes in mood, lack of interest in usual activities
- Sleep disturbances: experiences insomnia, inability to sleep, or sleeping all the time
- Guilt or shame: expresses overwhelming self-blame or remorse



# What may increase the risk for suicide?

Be vigilant. The following may increase risk for suicide among your service members:<sup>1</sup>

- Self-directed violence (SDV) thoughts and behaviors
- Current psychiatric conditions and current or past mental/behavioral health treatment
- Psychiatric symptoms
- Social determinants of health and adverse life events
- Availability of lethal means
- Physical health conditions
- Demographic characteristics



# What helps protect against risk for suicide?

The following factors may be bolstered to help protect against risk for suicide:<sup>1</sup>

- Access to mental/behavioral health care
- Sense of connectedness
- Problem-solving skills
- Sense of spirituality
- Mission or purpose
- Physical health
- Employment
- Social and emotional well-being



# How can line leaders intervene?



If you are a line leader and are concerned by a service member's behavior, you can speak to your commanding officer to request a command-directed mental health evaluation. If you are a commander, you should take actions in accordance with DODI 6490.04<sup>2</sup>

- If it is an emergency (a situation in which a service member is found or determined to be at risk for harm to self or others), the commander refers them for an emergency command-directed mental health evaluation in accordance with DODI 6490.04, and ensures they arrive safely for the evaluation<sup>2</sup>
- If a non-emergency, follow DODI 6490.04 for your commander to refer your service member for a non-emergency command-directed mental health evaluation expert assessment, and to obtain recommendations related to fitness and suitability for continued military service<sup>2</sup>

You can help your service member by [encouraging them to seek care](#) so they can receive proper treatment and/or support. **Call or text 988 the Suicide and Crisis Lifeline if they begin to experience thoughts of death or suicide (OCONUS options are available).** Continue to develop communication strategies for dealing with [stressful events](#), [caring for unit members](#), [career implications of help seeking](#), and [sustaining](#) readiness.



# Relevant Policies

- [DODI 6490.04 Mental Health Evaluations of Members of the Military Services](#) outlines the responsibilities and procedures for commanders who refer service members for mental health evaluations<sup>2</sup>
- [DODI 6490.05 Maintenance of Psychological Health in Military Operations](#) outlines responsibilities for combat and operational stress control programs within the Military Departments, Combatant Commands, and Joint Service Operations<sup>3</sup>
- [DODI 6000.14 DoD Patient Bill of Rights and Responsibilities in the Military Health System \(MHS\)](#) outlines patient rights and responsibilities<sup>4</sup>
- [DODI 6130.03, Vol. 2 Medical Standards for Military Service: Retention](#) establishes medical retention standards<sup>5</sup>
- [DODI 6490.16 Defense Suicide Prevention Program](#) establishes policies and procedures for the DOD Suicide Prevention Program, including reporting suicides and suicide attempts of service members<sup>6</sup>
- [DODI 6490.08 Command Notification Requirements to Dispel Stigma in Providing Mental Health Care to Service Members](#) outlines the protected health information a healthcare provider is required to share with commanders and provides guidance on how to balance patient confidentiality with commander's right to know and risk management decisions<sup>7</sup>

## Community Health Care Leaders: Recommendations in Community-Based Interventions

If you are a health care leader in the community, become familiar with The *VA/DOD CPG for Assessment and Management of Patients at Risk for Suicide*. It suggests the following community-based interventions:

- Multi-component community interventions to reduce the risk of suicide<sup>1</sup>
  - Common components include but are not limited to: training on mental/behavioral health topics and/or suicide risk factors; local networking and/or community facilitation; and providing mental/behavioral health and/or suicide prevention materials<sup>1</sup>
- Reducing access to lethal means to reduce the risk of suicide by firearms, jumping, or medication overdose<sup>1</sup>

# Resources



**Military OneSource** provides 24/7 support and information on housing, financial, legal, medical, and psychological services.

- State-side: 800-342-9647
- Overseas: 800-342-9647
- Collect: 484-530-5908

[militaryonesource.mil](https://militaryonesource.mil)



**988 Suicide and Crisis Lifeline** and the associated **Military/Veterans Crisis Line** provides free and confidential support for individuals in crisis. If you or someone you know is struggling or in crisis, call, or text 988 or [988lifeline.org](https://988lifeline.org); you can also press 1 or text 838255 to chat live with a counselor focused on military and veteran callers. For OCONUS calling options and online chat accessible from anywhere in the world, visit [militarycrisisline.net](https://militarycrisisline.net)



**inTransition** offers specialized coaching and assistance for active duty service members, National Guard members, reservists, veterans, and retirees to help them adapt to their transitions between systems of behavioral health care.

- State-side: 800-424-7877
- Overseas: 800-748-81111 (in Australia, Germany, Italy, Japan, and South Korea only)

[health.mil/inTransition](https://health.mil/inTransition)



**Real Warriors Campaign** is a public health campaign designed to decrease stigma, increase psychological health literacy, and open doors to access care by encouraging service members, veterans, and their families to seek psychological health support. Reaching out is a sign of strength.

[health.mil/RealWarriors](https://health.mil/RealWarriors)

# References

- 1 Veterans Affairs and Department of Defense. (2024). VA/DOD Clinical Practice Guideline for Assessment and Management of Patients at Risk for Suicide. Version 3.0. <https://www.healthquality.va.gov/guidelines/MH/srb/>
- 2 Department of Defense. (2020, April 22). Mental health evaluations of members of the military service (DOD Instruction 6490.04). <https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/649004p.pdf>
- 3 Department of Defense. (2020, May 29). Maintenance of psychological health in military operations (DOD Instruction 6490.05). <https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/649005p.pdf>
- 4 Department of Defense. (2020, April 3). DoD Patient bill of rights and responsibilities in the Military Health System (MHS) (DOD Instruction 6000.14). <https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/600014p.pdf>
- 5 Department of Defense. (2022, June 6). Medical standards for military service: Retention (DOD Instruction 6130.03, Vol. 2). [https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/613003\\_vol02.PDF](https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/613003_vol02.PDF)
- 6 Department of Defense. (2023, February 2). Defense Suicide Prevention Program (DOD Instruction 6490.16). <https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/649016p.pdf?ver=2020-09-11-122632-850>
- 7 Department of Defense. (2023, September 6). Command notification requirements to dispel stigma in providing mental health care to service members (DOD Instruction 6490.08). <https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/649008p.pdf>