

Suicide Deaths in Special Operations Forces (SOF)



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Suicide Death Counts & Rates

Service Members | 2022

492 Total Service members

331 Active | 64 Reserve | 97 Guard

Suicide rates per 100,000

25.1 Active Component
Service members

19.1 Reserve
Service members

22.2 National Guard
Service members

Key Takeaways

Active Component suicide rates gradually increased between 2011-2021. Since 2011, rates are similar to the U.S. Population in most years

Firearms are the most common method used in 67% of Active Component suicide deaths.

Demographic factors largely reflect the Total Force:

68% Under 30

91% Enlisted

93% Male

U.S. Suicide Counts and Rates | 2021*

48,183 Total

Suicide rates per 100,000

22.8 Male

5.7 Female

14.0 Total

Key Takeaways

The rate of suicides increased from 2020 to 2021, which is still lower than the modern peak in 2018.

The increase in suicides was higher among males (4%) than females (2%).

Firearms are the most common method used in suicides. Firearms are used in more than 50% of suicides.

In 2021, suicide was the 11th-leading cause of death, and the second-leading cause of death among ages 10- 34.

Family Members | 2021*

168 Total Family Members

114 Spouses | 54 Dependents

Suicide rates per 100,000

6.5 Family Members
spouses and dependents

11.2 Spouses

3.4 Dependents

Key Takeaways

Suicide rates for Family members appear slightly lower than in previous years.

Male spouses accounted for about 48% of spouse suicides but made up about 14% of all military spouses.

Firearms are the most common method used in 61% of Spouse suicide deaths and 56% of dependent Suicide deaths.

About 48% of Spouses had any service history and less than 5% of dependents had any service history.

Veteran Report | 2021*

6,392 Total

Suicide rates per 100,000

35.9 Male

17.5 Female

33.9 Total

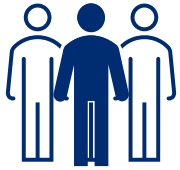
49.6 Age 18-34

Key Takeaways

Among U.S. adults who died from suicide in 2021, firearms were more commonly involved among Veteran deaths (72.2%) than among non-Veteran deaths (52.2%).

In 2021, suicide was the 13th-leading cause of death for Veterans overall, and the second-leading cause of death among Veterans under age 45-years-old.

The data across 20 years reveals that Veterans engaged in VHA care have shown a less sharp rise in suicide rates, underscoring the importance of VHA care.



- According to SOCOM records, there were 117 suicides among Special Operations Forces (SOF) from 2007 to 2015, peaking at 23 in 2012 — a rate of **39.3** per 100,000, compared with **22.9** per 100,000 for the armed forces as a whole.(1)



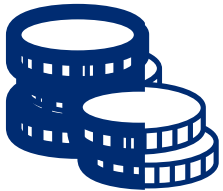
- Suicide deaths have **increased** over the past five years among the elite troops of Army's Special Operations Command, or USASOC. In 2022, USASOC reported 18 suicide deaths, up from six in 2017 and 12 in 2018.



- Despite researchers' consistent assertions that SOF are highly resilient and at low risk for suicide, granular analysis of pertinent research and escalating suicide in SOF reveals no empirical basis for those beliefs.(2)



72.5% were in a relationship at the time of death. Of those **51.7%** were having **relationship issues** at the time of death.



58.7% had **financial problems** within 6 months of death. The most common reason for financial problems was because of relationship issues.

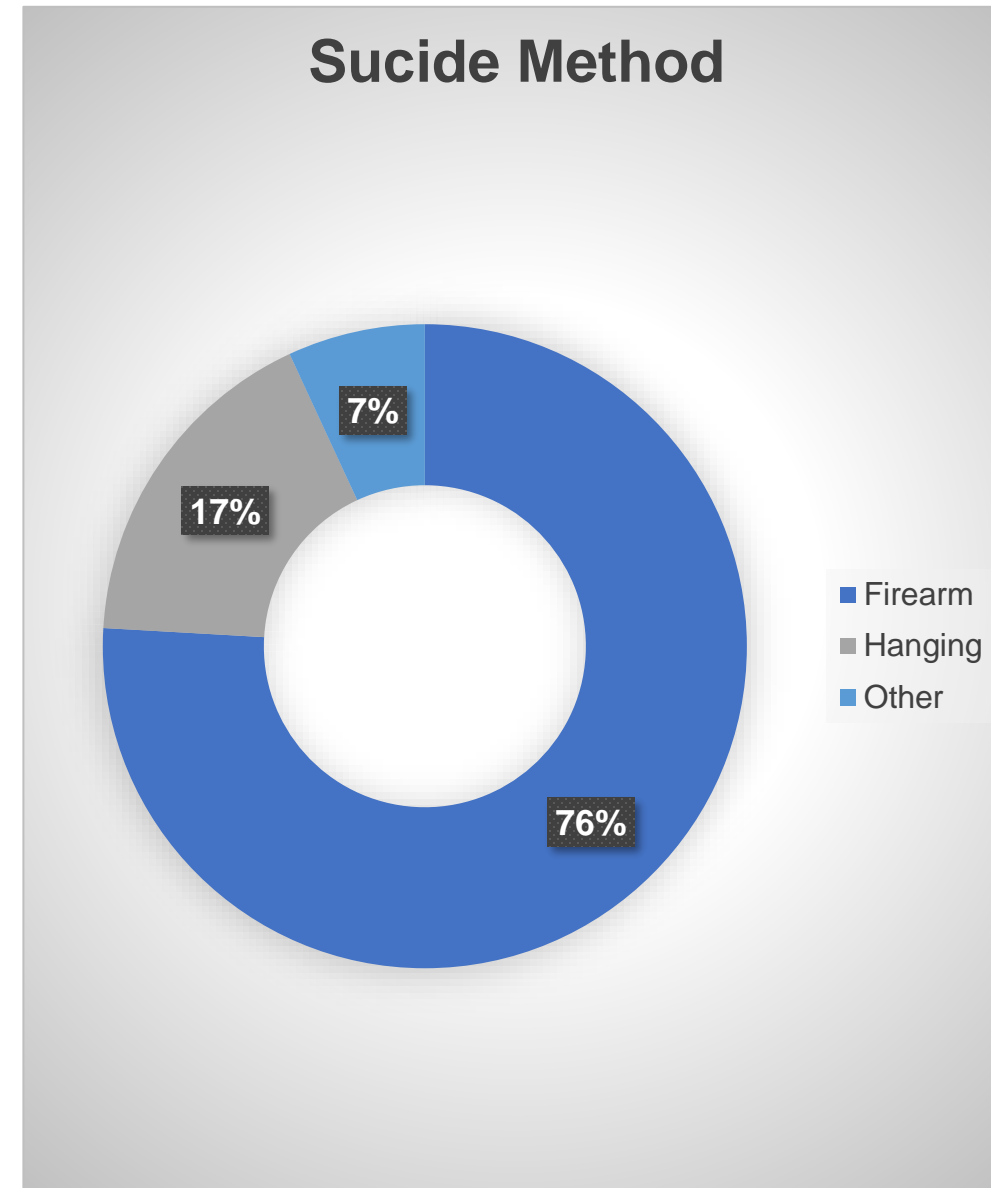


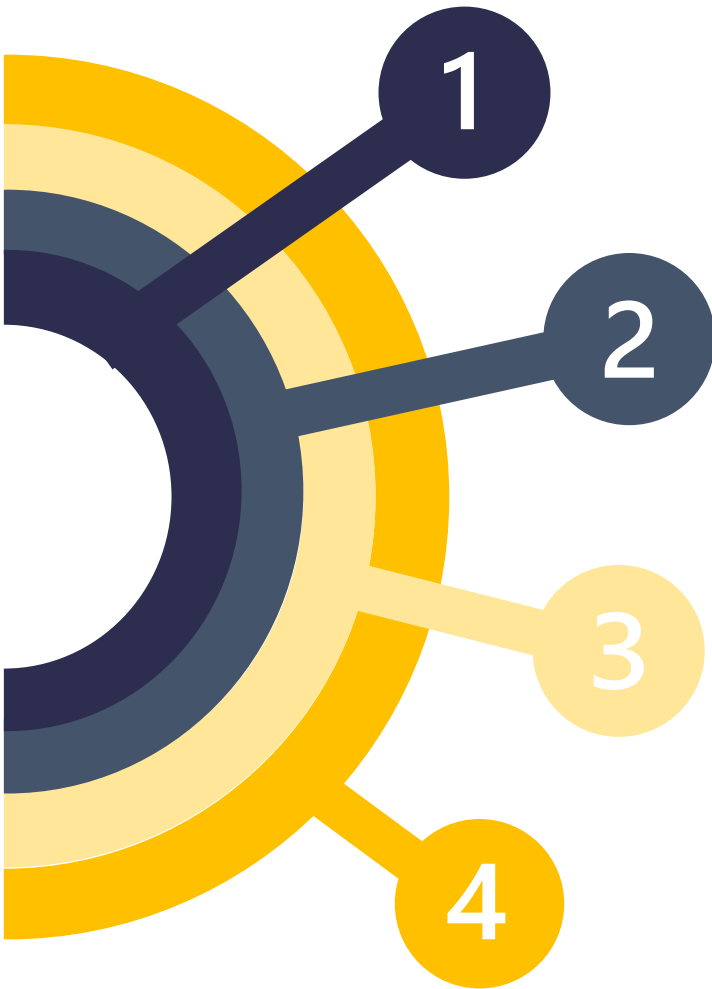
48.2% SOF members felt a strained **connection to the military** within 6 months prior to their deaths. Some reasons were: problems with supervisor and colleagues, disciplinary actions, duty reassignments.



44.8% were diagnosed with a **mental illness**. Of those **36.4%** were diagnosed with depression. Fear of being separated from their unit, being singled out as a problem, and of losing a security clearance were common barriers to seeking care.

- More than **75%** of SOF Suicides were by Firearm.
- All the decedents who owned a firearm used it to end their life.
- Personal firearms were used even when the SOF member had access to a military-issued firearm.
- The second most common method was asphyxiation due to hanging. None of the SOF members who died using this method owned a personal firearm.





Individual

Highlights specific personal risk factors, such as age, history of abuse, and education.

Relationship

Investigates the individual's close relationships (e.g., peers, partners, family members) that may provide influence.

Community

Explores the variety of settings the individual was a member of (e.g., workplaces, schools, command climate) and the relationships formed from these areas.

Societal

Examines larger-scale factors that may contribute to a climate of violence, such as cultural norms or policies.

**Prevention
requires
understanding
the contextual
factors that
influence suicide**

SPRIRC Key Enabling Actions



Foster a Supportive Environment

These actions aim to improve the quality of life for Service members and empower leaders to address problems before concerns become challenges and escalate to crises

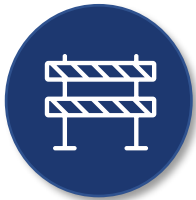
- Improve schedule predictability and after-hours communication
- Promote leadership focused on strengthening support to Service Members & their Families



Improve the Delivery of Mental Health Care

These actions aim to improve access to, and delivery of, behavioral and mental health care, and better support, recruit, and retain mental health providers

- Recruit and retain behavioral health providers
- Improve coordination of care
- Increase appointment availability



Address Stigma and Other Barriers to Care

These actions aim to help Service members overcome stigma and reduce barriers to mental health care to promote a culture of help-seeking behavior

- Expand non-medical counseling for suicide prevention; mental health services in primary care; telehealth services; "Episodes of care;" treatment models



Revise Suicide Training

These actions aim to modernize the delivery of suicide prevention and postvention training, emphasizing the integration of primary prevention principles to reduce harmful behaviors

- Modernize training
- Train behavioral health techs in evidence-based practices
- Tools for leaders to facilitate difficult conversations



Promote a Culture of Lethal Means Safety

These actions aim to promote lethal means safety, with a goal to improve the overall safety culture within the Department

- Incentivize secure firearm storage
- Safe storage education campaign
- Safety in barracks and dorms
- Provide additional storage locations on installations

Questions?