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'We Can Solve' Soldier Suicides, General Says

Army Staff Sgt. Jim Greenhill | National Guard Bureau

September 07, 2010

More vigilant leadership, pre-screening recruits for compatibility with military service and better post-deployment follow up are among solutions proposed by the acting director of the Army National Guard for stemming soldier suicides.

Speaking at a breakout session of 132nd general conference of the National Guard Association of the United States here Aug. 21, Army Maj. Gen. Raymond W. Carpenter sounded the alarm about the Army's current high suicide rate.

"We [could] be at 100 suicides by the end of this year," said Carpenter, who periodically briefs Gen. Peter W. Chiarelli, the Army's vice chief of staff, on the Army Guard's suicide rate and specific cases.

Carpenter emphasized that stopping soldier suicides isn't an insolvable problem.

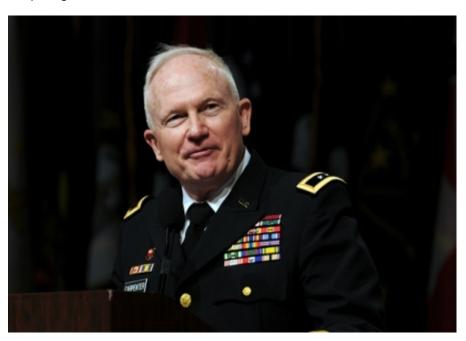
"We have an incredible amount of brainpower to put against this," he said. "We can solve this."

First, leaders at every level in the chain of command must be more vigilant about the welfare of their soldiers, the general said.

"I've got an obligation [as a leader] ... to know who is in my organization and what's going on with them," Carpenter said.

"If you're a squad leader, you're supposed to know your squad," he continued. "You need to know whether they're married, whether they have kids, whether they're going to school, whether they have a job."

In one recent suicide case, Carpenter recalled, a person had enlisted in the active Army and was "chaptered out" during basic training, meaning he was separated for inability to perform, or for lack of effort, or failure to adapt to the military, or for discipline issues.



This person later re-enlisted in the National Guard and failed basic training again - this time after a fight, Carpenter said.

Carpenter said this individual enlisted a third time - again in the Guard - and completed basic and advanced training and then returned home, where he had behavioral problems. Personal issues that culminated in the young soldier's suicide, he said, included an injury, prescription drug and alcohol abuse, and employment and marriage problems. The soldier, he said, had never deployed.

"I would not deny that young soldier help," Carpenter said. "But we've got to figure out whether [such] people are the kind of people who are going to be able to be soldiers in our formations and do what is asked of them by this country.

"We as an organization should have taken a long look at whether that young man was compatible with military service," he continued. "Three times, and he finally got in."

The issue of soldier suicides "isn't a deployment problem," Carpenter said, noting that the majority of suicides are committed by younger soldiers.

"It has to do with significant emotional events in their lives, but beyond that, it has to do with their ability to cope," the general said.

A third piece of the solution was suggested by a second case of soldier suicide that Carpenter said he had briefed to senior leaders. In this case, he said, the soldier had mobilized and deployed. On his post-deployment health assessment, the soldier said he'd experienced suicidal thoughts, had possible post-traumatic stress and slept poorly. The soldier also said he needed help.

The troubled soldier met with Veterans Affairs health care providers at least once and was prescribed medication, Carpenter said. However, he said, the soldier had discouraged his wife from talking with his unit to seek further help.

The lesson is that leaders must be more assertive and involved to help troubled soldiers before issues mushroom, the general said.

"We talk about being part of the Guard family," Carpenter said. "We're going to have to walk the walk instead of talk the talk. ... The soldier is the center of gravity.

"Committing suicide is not a viable alternative. ... We've got to get to the person who is making that decision. ... We have to make that a priority," the general added.

Carpenter highlighted National Guard-sponsored suicide prevention programs in Arkansas, California, New Hampshire and New Jersey.

"There are some great things going on out there," he said. "Every state has a great program."