

Resources to Support Soldiers at FSGA/HAAF

Understanding the facts about suicide in the military:

- Executive Summary - Department of Defense Annual Report on Suicide in the Military CY2022
 - Reference:
https://www.dspo.mil/Portals/113/Documents/ARSM_CY22.pdf



Executive Summary | Data

Service Members | 2022

492 Total Service members died by suicide

331 Active | 64 Reserve | 97 Guard

Suicide rates per 100,000
Service members

25.1 Active Component
Service members

19.1 Reserve
Service members

22.2 National Guard
Service members

Family Members | 2021*

168 Total Family Members died by suicide

114 Spouses | 54 Dependents

Suicide rates per 100,000
family members

6.5 Family Members
spouses and dependents

11.2 Spouses

3.4 Dependents**

*Latest year of available data

**Includes minor (<18 years) & non-minor (18-22 years)

KEY TAKEAWAYS

SERVICE MEMBERS

Active Component suicide rates gradually increased from 2011 to 2022. Although, rates in the last two years appear slightly lower than in 2020.



Reserve and National Guard suicide rates did not have an increasing or decreasing trend between 2011 and 2022, although they fluctuated year to year.

Military suicide rates were similar to the U.S. population in most years between 2011 and 2021,* after accounting for age and sex differences.

Use of a firearm was the most common method of suicide across Components and Services.



Most Service members who died by suicide were young, enlisted men. However, other Service members can still be at risk for suicide.

HEALTH AND LIFE STRESSORS

- 45% Select behavioral health diagnoses
- 42% Relationship problems
- 26% Workplace issues
- 26% Administrative/legal issues
- 10% Financial issues



Behavioral health problems are treatable, and seeking help is a sign of strength.

* 2021 was the latest year of available U.S. population data.

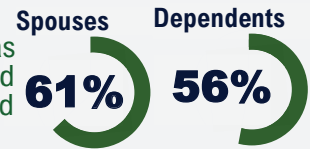
FAMILY MEMBERS

Suicide rates for family members (spouses and children) appear slightly lower than in previous years.

Of note, suicide rates for male spouses and dependents appear lower in 2021 versus 2020.

In 2021, suicide rates for **spouses and dependents were similar to the suicide rates in the U.S. population** when accounting for age and sex differences.

Use of a firearm was the most common method of suicide for spouses and dependents.



SPOUSES

- 52% Female
- 84% < 40 years old
- 48% Service history

DEPENDENTS

- 30% Female
- 69% < 18 years old
- <5% Service history

WHAT THIS TELLS US:

Suicide is multifaceted, and suicide prevention needs a comprehensive and integrated approach. Thus, DoD aims to:

- ▶ Foster supportive environments.
- ▶ Address stigma as a barrier to care.
- ▶ Improve delivery of mental health care.
- ▶ Promote a culture of lethal means safety.
- ▶ Revise suicide prevention training

Active Component

KEY INFORMATION FROM THE CY 2022 DoDSER

From the data submitted to the DoDSER system for **Active Component Service Members who died by suicide in 2022:**

- 45%** Reported select **behavioral health diagnoses** alcohol use disorder, depressive disorder, anxiety, trauma- or stressor-related disorder, sleep-wake disorder (one or more)
- 42%** Reported **intimate relationship problems**
- 26%** Reported **workplace difficulties**
- 26%** Reported **administrative/legal problems** nonjudicial punishment, under investigation, administrative separation
- 10%** Reported **financial difficulties** (within a year before death)

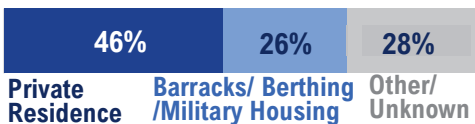


Experiencing different health or life stressors does not mean that someone is suicidal. Behavioral and mental health problems are treatable. **Seeking help for any of these problems is a sign of strength.**

Location information for 2022:

87% Reported suicide deaths occurred in the **Continental U.S. (CONUS)**. Suicide deaths typically occur where there are large concentrations of Service members; for example, in California, Texas, Virginia, and North Carolina.

Most suicide deaths occurred in either private residences or military barracks/berthing/housing.



New in the DoDSER:

- 4%** Identified as **gay, lesbian, or bisexual**
- 14%** Experienced **abuse** before age 18

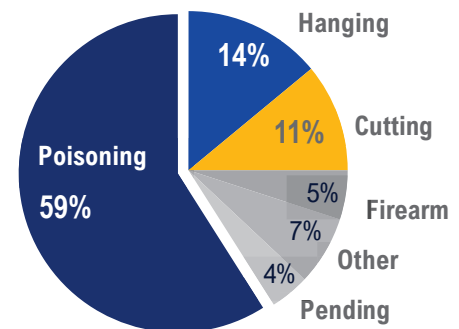
Over time, this new information from the DoDSER may help shape understanding of suicide risk.

From the data submitted to the DoDSER system for the **1,278 reported suicide attempts among Active Component Service members in 2022:**

319 Army | 274 Marine Corps | 282 Navy | 403 Air Force

31% of attempts were among **female** Service members.
69% of attempts were among **male** Service members.

- 48%** Reported select **behavioral health diagnoses** (one or more – see above)
- 38%** Reported **intimate relationship problems**
- 26%** Reported **workplace difficulties**
- 20%** Reported **administrative/legal problems** (see above)
- 11%** Reported experiencing **assault or harassment**
- 10%** Reported **financial difficulties** (within a year before the reported attempt)



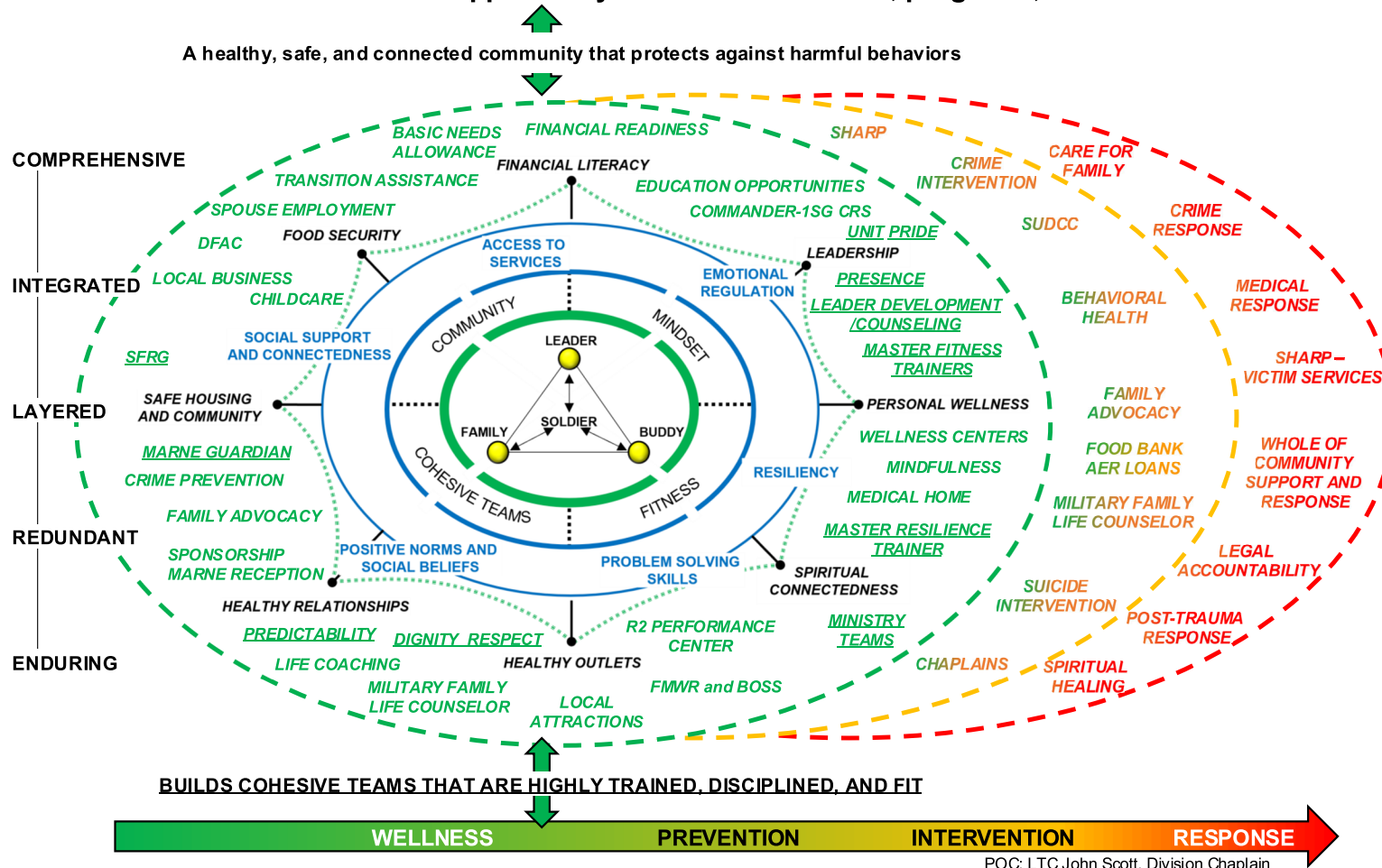
Poisoning (drug and nondrug) was the most common method among those who experienced a nonfatal suicide attempt.

Prevention – get left of the bang before risk level escalates

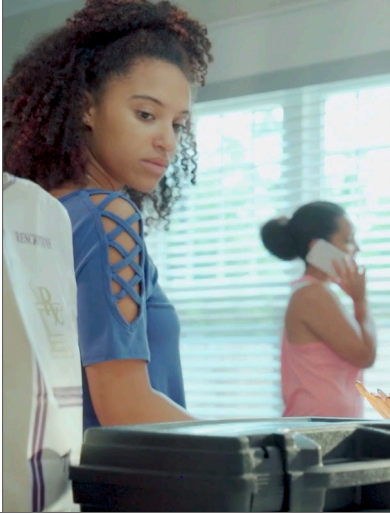
- Strengthening Protective Factors: 8 Protective Factors Model
- Preventing Suicide by Limiting Lethal Means: Lethal Means Safety Fact Sheet
 - Reference: <https://www.armyresilience.army.mil/ard/Lethal-Means-toolkit.html>

Getting Upstream to Thrive

DESIRED OUTCOME: Soldiers, families, and civilians work, play, and *thrive* in the best communities in America - supported by world-class facilities, programs, and resources



LETHAL MEANS SAFETY TOOLKIT



FACT SHEET

Lethal Means are methods used in a suicide attempt. 580 service members died by suicide in 2020, 64.3% of Active-duty, 75.3% of Reserve, and 79.8% of National Guard by firearm (DoD, ASR). Research has shown that a suicide attempt can occur within 5-10 minutes from idea to action. Lethal means safety is the practice of safely storing means that could be used in a suicide attempt. Increasing time and distance between an individual in crisis and a lethal mean allows for intervention and reconsideration. These simple actions can save lives!



Statistics reveal making lethal means less accessible has reduced death by suicide by 91%.



Studies state approx. 90% of attempters who survive a nonfatal attempt, will not try again.

EASY SAFETY STORAGE PRACTICES:

Ways to safely store firearms:

- Use a gunlock
- Disassembling the gun and place in a lockbox/safe
- Separately storing gun and ammunition

To prevent overdose, store/dispose medication:

- Take individually packaged pills
- Throw out expired medication
- Portion medication for the week and lock in a cabinet

Deter asphyxiation by reducing access to ligatures (ie: ropes, cords, and belts):

- Use specialized bed sheets resistant to tearing
- Purchase cordless appliances/electronics

Substitute/hide everyday sharp objects:

- Use knife covers and safes/locks
- Keep tools locked in sheds

Avoid chemicals/poisons:

- Purchase green/organic cleaning products or repellents that do not include toxic ingredients or pesticides
- Add carbon monoxide detectors to the house

RESOURCES AVAILABLE FOR SOLDIERS, THEIR FAMILIES, AND CIVILIANS.

Counseling on Access to Lethal Means or [CALM](#) is a training course that counsels individuals who work with people at risk and their Families providing information on how to reduce access.

Ask, Care, Escort or [ACE](#) is a training model offered by the Army that educates Soldiers and Family members on methods of prevention.

The [Suicide Prevention Resource Center](#) is a federally supported resource center funded by the Substance Abuse and Mental Health Services Administration or SAMHSA.

The [Army Suicide Prevention Program](#) or SP2 is a campaign that provides resources, builds awareness, and supports Soldiers and Families with suicide prevention tools.

DOD Lethal Means Safety Tools and Information: <https://www.dspo.mil/Tools/Download-Library/lethalmeanssafety/>

Properly storing lethal means and staying informed by taking advantage of suicide prevention resources available to Soldiers and their Families will significantly save lives. Adding time and space between an individual and lethal means makes a world of difference. Make every second count.



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SP2
SUICIDE PREVENTION
PROGRAM

Military Crisis Line: Dial 988 and press 1
In Europe, dial 00-800-1273-8255
In Korea, dial 0808-555-118
www.armyresilience.army.mil

Intervention for a Soldier in distress

- Introduction to Bystander Intervention and Crisis Response: ACE-SI Fact Sheet
 - Reference: https://www.armyresilience.army.mil/ard/pdf/ACE-SI%20Info%20Sheet_FINAL%201.pdf



SP2
SUICIDE PREVENTION
PROGRAM



ASK, CARE, ESCORT-SUICIDE INTERVENTION (ACE-SI)

WHAT IS IT

As the Army's enhanced suicide prevention unit training program, ACE-SI empowers service members by providing comprehensive instruction on how to appropriately and deliberately intervene in crisis situations, and to recognize and assist at-risk individuals who are dealing with challenges.

The program teaches participants to remain calm, ask directly about suicidal ideation, express empathy and safely escort at-risk individuals to the appropriate response agency or to remain with them until help arrives. Under ACE-SI, Army members are taught their roles in postvention response after someone dies by suicide as well as their reintegration responsibilities for individuals returning from after receiving behavior-health support.

TARGET AUDIENCE

All Army members should take this training, especially leaders, who hold positions of trust and can encourage subordinates to seek help. Examples include:

- Army first-line leaders
- Army Civilian supervisors
- Soldier and Family Readiness Group leaders



TYPES OF LESSONS

Based on scientific literature concerning suicide and best practices for intervention, the program includes record training for suicide prevention: ACE Base +1 training, material to include *Reducing Stigma*, *Active Listening*, and *Practicing ACE*. The Base module is required annually and includes the steps of "Ask, Care, Escort" and then unit leadership elects one of the three +1 modules to train. In addition, the program covers risk factors for harmful behaviors and protective (resilience) factors. Certified ACE-SI instructors explain the far-reaching effects of suicide and Army members' prevention and intervention responsibilities. They arm students with conversation tools to promote active listening so that individuals in crisis feel heard and understood.

All Army units will have ACE-SI trainers to support commanders with prevention and intervention. It is recommended that they conduct the annual Personal Readiness Training, ACE Base +1, for their units. Instructors are supported by a behavioral health professional or on-call chaplain.

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SP2
SUICIDE PREVENTION
PROGRAM



ACE-SI CONVERSATION TOOLS

ACE-SI training uses the following conversation tools:

- **Open-ended questions:** These queries will elicit more than a yes/no response; they allow someone to tell you more of their story than a close-ended question.
- **Paraphrasing and clarifying:** Using this technique helps convey that you heard what was said and want to make sure you understand.
- **Affirmations:** These are statements that recognize the strengths of the individual and that highlight behaviors that can result in positive change.
- **Reflective listening:** This type of listening lets the at-risk person know that they have accurately told their story.
- **Summarizing:** By recapping key elements of the conversation and identifying the most important points, the listener demonstrates to the at-risk person that they have been understood.

WHY ACE-SI TRAINING IS IMPORTANT

ACE-SI is the Army's only suicide intervention training program and teaches participants the warning signs of mental health challenges as well as how to appropriately intervene with individuals who exhibit them. The program shows service members at all levels how to promote help-seeking behavior and intervention, with the goal of ensuring the wellness, health and morale of everyone in the Army community. ACE-SI supports the Army's People First initiative by building cohesive and resilient teams through strategic suicide prevention and response planning.

WHO CAN CONDUCT ACE-SI TRAINING

Every unit/organization will have a training-certified leader, Suicide Prevention Program Manager (SPPM), chaplain, Religious Affairs Specialist or behavioral health counselor to provide in-person training. ACE-SI Trainers (T-2, T-3, T-4) should be selected by their immediate Commanders, Civilian leaders, installation Suicide Prevention Program Coordinators (SPPCs), and COMPO SPPMs and are certified by attending training workshops conducted by National Guard Bureau (NGB) Ready and Resilient Schoolhouse or HQ U.S. Army Installation Management Command (IMCOM). The Army has found that small-group suicide prevention training sessions are more effective and encourage participation and discussion among Soldiers, Civilians and Circle of Support.

HOW TO SCHEDULE ACE-SI TRAINING

To schedule ACE-SI training, follow this link:

<https://www.armyresilience.army.mil/ard/R2/I-Want-to-Schedule-Training.html>.

WHERE TO FIND ACE-SI EDUCATIONAL MATERIALS

Materials on the program can be found at:

<https://www.armyresilience.army.mil/suicide-prevention/pages/about.html>.

LEARN MORE

988 SUICIDE & CRISIS
and press 1 **LIFELINE**



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Connecting with Counseling and Support Resources at FSGA/HAAF

- FSGA/HAAF utilizes the **Targeted Care System** to give Soldiers a one-stop solution to connect with counseling resources available across the installation
 - In the Targeted Care System, all Soldiers seeking counseling services are seen for an initial “vectoring” appointment at their aligned Embedded Behavioral Health (EBH) clinic.
 - During the “vectoring” appointment, the EBH staff assesses the Soldier’s level of distress and connects them with the counseling resource matching this need. This is known as the “continuum of care” model – see attached diagram.
 - Vectoring appointments can be completed on a walk-in basis during regular clinic operating hours at the Soldier’s aligned EBH.
 - See the attached FAQ for more details about the Targeted Care System.

FREQUENTLY ASKED QUESTIONS

DHA Targeted Care Program

What is Targeted Care?

Targeted Care matches individuals seeking care to the appropriate support. Examples of support include making an appointment with a Specialty Behavioral Health care provider or a Primary Care Behavioral Health Consultant, or connecting them to non-medical support such as Military and Family Life Counselors, Chaplains, Military OneSource, etc.

Individuals who are vectored into Specialty Behavioral Health care may attend group therapy sessions that meet their needs. Individual therapy within Behavioral Health also remains an option.

What is Vectoring?

Vectoring is a preliminary evaluation to match an individual's needs with the right resource. Individuals can call or visit a Specialty Behavioral Health Clinic and a technician will begin the Vectoring process.

What is the purpose of the Targeted Care Program?

Targeted Care allows providers to more efficiently use existing mental health resources to meet current demands. With Targeted Care, beneficiaries are connected to the most appropriate resource to support their needs. This allows them to have the best course of care most efficiently.

What is the benefit of the Targeted Care Program over the current process?

Targeted Care helps coordinate all installation resources. This increases access to care, reduces the time spent waiting for both initial and follow-up mental health appointments, and increases readiness.

What is the goal of the Targeted Care Program?

The goal of the Targeted Care Program is to:

- increase access to care
- reduce wait times, and
- increase readiness through ensuring that beneficiaries are offered the best resource to match their presenting concerns.

What is the Continuum of Care?

The Continuum of Care is a scale that matches a beneficiary's stress/distress level with the appropriate resources and care for them. The Continuum identifies distress level in individuals and matches them to the appropriate resource for the individual's needs.

What makes the Targeted Care Program process different from the current process?

The current process primarily focuses on Specialty Behavioral Health as the resource to handle ALL mental health needs, including those that can be addressed through prevention and other

non-clinical resources. Targeted Care synchronizes and expands the number of resources available (clinical and non-clinical) to address an individual's needs. It better aligns the resource to the individual need and optimally utilizes resources to address various levels of distress across a continuum of care.

What kind of professionals will be working with me to get me the appropriate care?

Behavioral Health Clinics participating in the pilot will be staffed by Licensed Psychologists, Licensed Clinical Social Workers, and Licensed Professional Counselors

What mental health services can I get within my Primary Care Setting?

- Primary Care Behavioral Health Consultants (BHCs) are licensed psychologists, social workers, or professional counselors available in many primary care clinics to address behavioral health concerns
- BHCs treat behavioral health conditions by providing skills that you can practice at home to reduce symptoms and improve daily functioning

Do I need a referral to be seen by a Behavioral Health Consultant (BHC)?

No. You do not need a referral to be seen by a BHC.

How can I make an appointment with a Behavioral Health Consultant (BHC)?

Contact your Primary Care clinic to make an appt with your Behavioral Health Consultant.

What if I just want to be seen by a specialty care provider, not another resource??

No one will be turned away or denied specialty care that wants it. You will be able to schedule an appointment with the next available specialty care provider.

CONTINUUM OF CARE MODEL

No/Minimal Distress

Low Distress

Moderate Distress

High Distress

PREVENTION

- ★ Unit Behavioral Health Assets (BHO and CH)
-
- ★ Military & Family Life Counselors (MFLC) 912-312-4906



QR code for Unit MFLC #

- ★ www.MilitaryOneSource.mil 800-342-9647

In-person counseling, by phone, or online chat

—
Chaplains

- ★ Army Substance Abuse Program (ASAP) Prime for Life Class
-

Friends, peers, supervisors, mentors, and coaches

Focus areas at this level:

Self-care
Sleep
Exercise
Nutrition
Social Support
Stress Management
Cognitive Restructuring
Substance Use Education

SHARE with a Friend or Supervisor

-
- ★ Unit Behavioral Health Assets (BHO or CH)
-
- ★ Military & Family Life Counselors (MFLC) 912-312-4906



QR code for Unit MFLC #

-
- ★ Primary Care Behavioral Health (BHC)
- Contact your Primary Care Clinic
-

- ★ www.MilitaryOneSource.mil 800-342-9647

In-person counseling, by phone, or online chat

—
Family Life Chaplain

Common concerns at this level:

Sadness
Anger/Frustration
Relationship Difficulties
Job or School Stress
Anxious about Future
Life Transition Stress
Sleep Improvement

- ★ Unit Behavioral Health Assets (BHO and CH)
-

- ★ Primary Care Behavioral Health (BHC)
- Contact your Primary Care Clinic
-

- ★ ACS/ Family Advocacy Program HAAF: 571-801-7497 FSGA: 571-801-1687/1688

- ★ DV/ Family Advocacy Program HAAF: 571-801-7132 FSGA: 571-802-0356
-

- ★ Domestic Abuse Victim Advocate 24/7 Hotline: 800-799-7233
-

- ★ SUDCC in Specialty Behavioral Health Clinic (EBH)
-

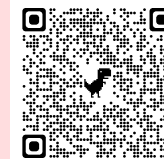
Family Life Chaplain

Common concerns at this level:

Persistent Sadness
Major Relationship Changes
Sleep Difficulties
Significant Life Transitions
Anxiety Affecting Performance
Notable Negative Events Occur
Deployment Stress
Family Difficulties
Alcohol/Substance Use issues

- ★ Specialty Behavioral Health (EBH) Group and Individual Therapy

- ★ SUDCC in EBH



QR Code for EBH #/ Bldg

Crisis Walk-in (7:30a.m.-4:00 p.m.)

If after hours: Nearest ER or 911

-
- ★ Suicide Crisis Line (24/7) Dial 988 or 1-800-273-8255 (Press 1) Text 838255 Chat Online at www.veteranscrisisline.net

Common concerns at this level:

Thoughts about Death/
Dying Thoughts about Suicide
Thoughts of Hurting Others
Severe Anger
Persistent Depressed Mood
Hopelessness/Helplessness
Social Isolation
Severe Nightmares
Anxiety or Panic most days
Alcohol or Substance Problems

988 Suicide and Crisis Lifeline: 988

DOD Safe Helpline (24-7): 1-877-995-5247

★ These venues, under specific conditions, have the potential to report limited information to Command to ensure safety is a priority. Chaplains have 100% privileged communication and are not mandated reporters.

Connecting with Counseling and Support Resources at FSGA/HAAF

- **Which Behavioral Health clinic do I go to for a vectoring appointment to connect with counseling services?**
 - **1ABCT Soldiers** – Raider Embedded Behavioral Health Clinic
 - BLDG 707, 1746 William H. Wilson Ave Fort Stewart, GA 31314. # 571-801-6634/6635
 - **2ABCT Soldiers** – Spartan Embedded Behavioral Health Clinic
 - BLDG. 8435, 306 Vanguard Rd. Fort Stewart, GA 31314. 571-801-6863
 - **3DSB, DIVARTY, HHBN Soldiers** – Provider Embedded Behavioral Health Clinic
 - BLDG. 607, 952 William H. Wilson Ave Fort Stewart, GA 31314. # 571-801-6610/6611
 - **3CAB/SOF Soldiers** - Falcon Embedded Behavioral Health Clinic
 - Bldg 1228, 38 North Schmidt St., Hunter AAF 31409. #571-801-7462/7463
 - **Tenant Unit Soldiers at FSGA** – Winn Multidisciplinary Behavioral Health Clinic
 - Winn Army Community Hospital 1061 Harmon Ave, Liberty Wing, 2nd Floor # 571-802-0354/ 0355
 - **Tenant Unit Soldiers at HAAF** – Tuttle Army Health Clinic
 - 230 Casablanca Drive, Hunter Army Airfield, Savannah, GA 31409. # 571-802-0435

Connecting with Counseling and Support Resources at FSGA/HAAF

- **Where can family members of Soldiers get counseling?**
 - **Children, Adolescent, and Adult Family Members:** Child and Family Behavioral Health Services
 - **FSGA:** Winn CAFBHS Clinic - 2nd Floor Liberty Wing 1061 Harmon Ave Fort Stewart, GA 31314. # 571-802-0354/0355
 - **HAAF:** Tuttle Army Health Clinic - 230 Casablanca Drive, Hunter Army Airfield, Savannah, GA 31409. # 571-802-0435

Connecting with Counseling and Support Resources at FSGA/HAAF

- **Services Available through the Targeted Care System:**
 - FSGA HAAF Supportive Services/Resources Contact Sheet
 - FSGA HAAF BH Resources Contact Sheet

Fort Stewart/Hunter Army Airfield –Supportive Services/ Resources

Military and Family Life Consultants

MFLCs are available to help service members, spouses, children and staff address the following: deployment and reintegration, marriage and relationship, parenting and family, communication, stress and anxiety, sadness, grief and loss, and daily life.

Military One Source - MOS provides 24/7 access to confidential services, including non-medical counseling and specialty consultations and marital sessions. It is a confidential and DOD funded. Contact Number: 1-800-342-9647; www.militaryonesource.mil

inTransition – inTransition provides coaching and support from Service Members transitions between established BH care due to PCS or ETS. It is confidential and DOD funded. Contact Number: 1- 800-424-7877 www.health.mil/inTransition

Soldier Support Center Resources

- **Army Community Services** - ACS provides services designed to assist with strengthening families, volunteering, employment readiness, EFMP, new parent support, relocation readiness, and victim advocacy programs. Classes include: Anger Management, Stress Management, and Financial Readiness. Contact number: Fort Stewart (571)801- 1687/1688 HAAF (571)801-7497.
- **Army Substance Abuse Program** - ASAP is an educational/motivational intervention which focuses on the adverse effects and consequences of drug and alcohol abuse. Prime for Life Workshop is a 12- hour course that extends over 2 days. Contact Number: (571)801-0468/ HAAF (571)801-7483.
- **Soldier for Life: Transition Assistance Program** - TAP delivers a world-class transition program for soldiers leaving the Army, assisting with all areas of career decisions. Location: 976 William H Wilson Ave, Fort Stewart, GA 31314 Contact number: (571) 801-3808
- **USO Georgia, Fort Stewart Center** - Location: 1639 Gulick Ave Bldg. 703, Fort Stewart, GA 31314 Contact number: (912) 332-5488. Website: <https://www.fortstewart.uso.org/>

Fort Stewart/HAAF - Other Services

- **Education Center** - The Education Center serves active-duty military, reserve component military, retirees, Department of the Army civilians and their adult family members. Services may include counseling, information about financial aid and local programs, and enrollment in selected programs. Location: Fort Stewart: 100 Knowledge Dr., Fort Stewart GA. Contact number: (912) 767-8331. HAAF Location: 165 Markwell St., Hunter Army Airfield GA 31409. Contact number: (912) 315-6130.
- **R2 Performance Center** - The Fort Stewart/HAAF R2PC program supports the Ready and Resilient Campaign by providing training that improves individuals' and units' resilience and performance. It also provides guidance and resources for MRTs and their commanders. Location: 810 Worchester Avenue, Fort Stewart, GA 31314. Contact number: (571) 801-1591.
- **BOSS - Better Opportunities for Single Service Members**- The Better Opportunities for Single Service Members (BOSS) program represents the voice of the single Service member. If you're a single Service member, BOSS advocates for you by advancing quality of life issues on the installation, and in the barracks, to senior leaders on post and throughout the Army. Fort Stewart Location: 778 Gulick Ave., Suite 110 BLDG 443, Fort Stewart. HAAF Location: 685 Wilson Blvd., Hunter army Airfield 31409. Contact number: (571) 801-2302.
- **Fort Stewart/HAAF Family and MWR (Morale, Welfare, and Recreation)**- information about social and dining opportunities, recreation, sports & fitness, arts, and crafts, etc. <https://stewarhunter.armymwr.com>
- **Victim Advocacy Program**- VAP provides emergency and follow-up support services to adult victims of domestic abuse. Advocacy services are available to Service members, their current or former spouses, and individual with whom the Service member shares a child, and significant others of Service members who live together. Services are available 24/7. Fort Stewart Location: 211 Lindquist Rd. Primary number: (912) 767-2882. Secondary number (24/7 hotline): (571)802-7474. HAAF Location: 171 Haley Ave. Contact number: (571) 801-7494. 24/7 Hotline contact number: (912)-315-5343.
- **Armed Forces Wellness Center (AFWC)**- Health coaching, sleep, weight loss, body composition, nutrition assistance, and more. Location: 808 Worchester Ave Fort Stewart, GA 31314 (571)801-0574

Family Advocacy Program, Clinical (Treatment)

FAP provides commanders with assistance in addressing the problems of spouse and child abuse while providing evaluation, assessment, and supportive services for individuals of spouse or partner abuse and child abuse or neglect. FGSA: Winn ACH, Liberty Wing, 2nd Floor; # ;571-802-0356; HAAF: Tuttle BLDG 1440 # 571-801-7132

Fort Stewart/Hunter Army Airfield – Behavioral Health Resources

Child, Adolescent, and Family Behavioral Health Services

CAFBHS serves as the Army Surgeon General’s lead agent for developing, implementing programs that promote healthy, strong Children and Families. Services include family therapy, marital therapy, and psychiatric services (for children). Obtain referral from or FAP, PCM, or BH provider.

FSGA: Winn Army Community Hospital 1061 Harmon Ave, Liberty Wing, 2nd Floor # 571-802-0354/ 0355
HAAF; Tuttle BLDG 1440, # 571-801-7133

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Military and Family Life Consultants (MFLC) MFLCs are available to help service members, spouses, children and staff address the following: deployment and reintegration, marriage and relationship, parenting and family, communication, stress and anxiety, sadness, grief and loss, and daily life. (see chart for MFLC)

3 rd INF DIV	
1ABCT MFLC	(912) 318-9284 1-64 AR, 5-7 CAV, 3 BSB, 83 CBRNE & 731 EOD (912) 531-0493
2ABCT MFLC	3-15IN 3-67AR (912) 318-9283 6-8CAV, 703BSB & 2BDE HQ (912) 318-9281 9 BEB & 2-69AR (912) 531-8358
3SB/DIVARTY MFLC	(912) 255-0915 87CSSB & BOSS (912) 531-8647 92EN, 38EOD, 756EOD (912) 259-2556 63SIG, ACS, Garrison HHC, USO (912) 531-8445 HHB, 1-41FA & 1-9FA (912) 570-5490
Other Stewart Units	NCO Academy, 3CAB Echo Trp, 224MI (912) 531-8128 38th MP & 188th Infantry (912) 531-8241 EOD (912) 259-2556 63rd Signal (912) 531-8445 DHHB, JAG, IG, Band, Museum (912) 622-2694 83rd CBRNE (912) 531-0493 (912) 531-8241 MEDDAC, DENTAC, WTB, 15ASOS & Wellness Center (912) 531-8417
Hunter Army Airfield Units	3CAB (912) 663-9753 or (912) 844-0749 224MI, HAAF Garrison, HHC 4/3AHB (912) 346-9705 3-17CAV, MP, Marines, Medac, Dentac (912) 484-1915 1-75 Ranger & 160 SOAR (912) 433-7135 Pulsaki Elementry (912) 210-8532 Southwest Middle /Beach HS (912) 414-1250 ACS, USCG, National Guard & Reserves, Behavioral Health (912) 248-5253

Military One Source - MOS provides 24/7 access to confidential services, including non-medical counseling and specialty consultations and marital sessions. It is a confidential and DOD funded. Contact Number: 1-800-342-9647; www.militaryonesource.mil

inTransition – inTransition provides coaching and support from Service Members transitions between established BH care due to PCS or ETS. It is confidential and DOD funded. Contact Number: 1- 800-424-7877; www.health.mil/inTransition

Soldier Support Center Resources

- **Army Community Services** - ACS provides services designed to assist with strengthening families, volunteering, employment readiness, EFMP, new parent support, relocation readiness, and victim advocacy programs. Classes include: Anger Management, Stress Management, and Financial Readiness. Contact number: Fort Stewart (571)801-1687/1688 HAAF (571)801-7497.
- **Army Substance Abuse Program** - ASAP is an educational/motivational intervention which focuses on the adverse effects and consequences of drug and alcohol abuse. Prime for Life Workshop is a 12- hour course that extends over 2 days. Contact Number: (571)801-0468/HAAF (571)801-7483.
- **Soldier for Life: Transition Assistance Program** - TAP delivers a world-class transition program for soldiers leaving the Army, assisting with all areas of career decisions. Location: 976 William H Wilson Ave, Fort Stewart, GA 31314 Contact number: (571)801-3808
- **USO Georgia, Fort Stewart Center** - Location: 1639 Gulick Ave Bldg. 703, Fort Stewart, GA 31314 Contact number: (912) 332-5488. Website: <https://www.fortstewart.uso.org/>

Fort Stewart/HAAF - Other Service

- **Education Center** - The Education Center serves active-duty military, reserve component military, retirees, Department of the Army civilians and their adult family members. Services may include counseling, information about financial aid and local programs, and enrollment in selected programs. Location: Fort Stewart: 100 Knowledge Dr., Fort Stewart GA. Contact number: (912) 767-8331. HAAF Location: 165 Markwell St., Hunter Army Airfield GA 31409. Contact number: (912) 315-6130.
- **R2 Performance Center** - The Fort Stewart/HAAF R2PC program supports the Ready and Resilient Campaign by providing training that improves individuals' and units' resilience and performance. It also provides guidance and resources for MRTs and their commanders. Location: 810 Worchester Avenue, Fort Stewart, GA 31314. Contact number: (571)801-1591.
- **BOSS - Better Opportunities for Single Service Members**- The Better Opportunities for Single Service Members (BOSS) program represents the voice of the single Service member. If you're a single Service member, BOSS advocates for you by advancing quality of life issues on the installation, and in the barracks, to senior leaders on post and throughout the Army. Fort Stewart Location: 778 Gulick Ave., Suite 110 BLDG 443, Fort Stewart. HAAF Location: 685 Wilson Blvd., Hunter army Airfield 31409. Contact number: (571) 801-2302.
- **Fort Stewart/HAAF Family and MWR (Morale, Welfare, and Recreation)**- information about social and dining opportunities, recreation, sports & fitness, arts, and crafts, etc. <https://stewarhunter.armymwr.com>
- **Victim Advocacy Program**- VAP provides emergency and follow-up support services to adult victims of domestic abuse. Advocacy services are available to Service members, their current or former spouses, and individual with whom the Service member shares a child, and significant others of Service members who live together. Services are available 24/7. Fort Stewart Location: 211 Lindquist Rd. Primary contact number: (912) 767-2882. Secondary contact number (24/7 hotline): (571)802-7474. HAAF Location: 171 Haley Ave. Contact number: (571) 801-7494. 24/7 Hotline contact number: (912)-315-5343.
- **Armed Forces Wellness Center (AFWC)**- Health coaching, sleep, weight loss, body composition, nutrition assistance, and more. Location: 808 Worchester Ave Fort Stewart, GA 31314 (571)801-0574

Crisis Numbers: Most numbers are 24/7/365

- WACH Emergency Care – (912) 435-6721/5900
- National Suicide Prevention/ Military Crisis Line –**988** Or **(800)-273-TALK (8255)** Press 1 or Text to 838255, www.militarycrisisline.net
- Veterans crisis hotline- 24 hour hotline: dial 988 then press 1 to speak to a trained responder
- National Domestic Violence Hotline - (800)799-7233
- Army Domestic Violence Hotline / Victim Advocate: (808)624-SAFE (7233)
- National Sexual Assault Hotline: 1 (800)656-HOPE
- DoD Sexual Assault Hotline – (877)995-5247
- Child help National Child Abuse Hotline - (800)-4-A-CHILD (800-422-4453)
- Child Protection Services, Liberty County- (912) 370-2555
- On Call Chaplain – (912) 320-5051
- Military Police, non- emergency – Fort Stewart (912) 767-4264. HAAF: (912) 315-6134/6135
- Wounded Soldier and Family Hotline – (800)984-8523

Self-Help

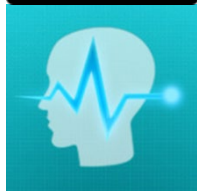
- Alcoholics Anonymous, enter zip code for locations at <http://www.aa.org/>
- Narcotics Anonymous (drug addiction), find a meeting at <https://www.na.org/>
- Celebrate Recovery (Christian based program for helping with substance abuse and addictive behavior, depression, and PTSD); <http://www.celebraterecovery.com/>
- National Eating Disorders Association: <https://www.nationaleatingdisorders.org/>

Useful Mobile Apps



Breathe2Relax

Manage stress by learning and practicing deep-breathing exercises.



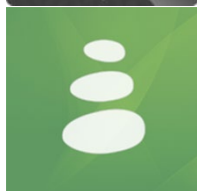
Concussion Coach

Identify concussion symptoms and cope with related problems.



LifeArmor

Take self-assessments and learn more about topics like PTSD, anger, depression and more.



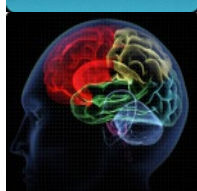
Mindfulness Coach

Learn to practice mindfulness meditation to live in the present.



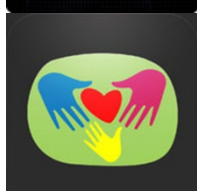
Moving Forward

Learn problem-solving techniques that help you make better decisions.



mTBI Guide

The Mild Traumatic Brain Injury app assists when assessing symptoms of mild TBI.



Parenting2Go

Strengthen your relationships with your children.



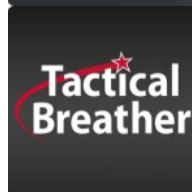
Positive Activity Jackpot

Find local activities to improve your mood and avoid negative thinking.



T2 Mood Tracker

Monitor your emotional health by tracking your moods over time.



Tactical Breather

Learn to use breathing to control your response during times of stress.



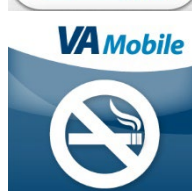
Virtual Hope Box

Helps reduce symptoms of depression with a digital version of hope box therapy.



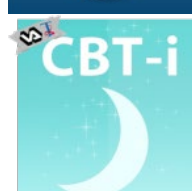
Feel Electric

Help your grade-school children identify and express their feelings.



Stay Quit Coach

Get help either while in smoking cessation treatment or to prevent relapse.



CBT-i Coach

Learn about sleep, improve habits, practice relaxation training, maintain sleep diary.

Connecting with Counseling and Support Resources at FSGA/HAAF

- **Additional Community Resources at FSGA/HAAF:**
 - FSGA Army Community Services Resource List

Army Community Service



Real Life Solutions for Successful Army Living

Services				
Work and Careers	Making a Move	Exceptional Families	Deployment Cycle	Resilience
Help lessen challenges associated with the search process	Help reduce or eliminate the problems associated with frequent moves	Help navigating the Exceptional Family Member Program	Help manage the phases of deployments and separations	DA Civilians, Family Members and Couples
Programs				
Employment Readiness Program	Relocation Readiness Program	Exceptional Family Member Program	Mobilization/Deployment Stability & Support Program	Resilience Training
571-801-6944	571-801-2017	571-801-6944	571-801-2016	571-801-2016
<p>Offers the competitive edge needed to secure employment:</p> <ul style="list-style-type: none"> • Resume and career coaching • Job-search assistance • Individual skill and interest self-assessments • Free classes and workshops covering resume writing, interviewing, job search, and applying to federal jobs • Job Fairs and local hiring events 	<p>Provides Soldiers and Families undergoing transitions, whether inbound or outbound, with counseling and relocation planning assistance:</p> <ul style="list-style-type: none"> • Personal relocation counseling • Customized welcome packets • Local maps and phone books • Kids on the Move: free backpacks with fun activities • Lending Closet - Basic household items to borrow free • Information on your next duty station • Sponsorship Training at unit level (for 10 or more) • Mandatory Overseas Orientations 	<p>EFMP consists of three components:</p> <ul style="list-style-type: none"> • Medical EFMP at Winn Army Community Hospital (WACH) • Family Support at ACS EFMP • Human Resource Command (HRC) for assignment coordination <p>Enrollment, disenrollment, overseas screenings, and updates are completed by using E-EFMP.</p> <p>Contact ACS EFMP for IEP assistance, non-clinical case management, information, & referral, and all EFMP family support needs.</p>	<p>Dedicated to assisting and educating Soldiers and Families to maintain readiness throughout the deployment cycle:</p> <ul style="list-style-type: none"> • Deployment and Reintegration briefing and training • Pre/Post Deployment Resiliency training • Rear Detachment training • Soldier Family Readiness Group Leader, Treasurer and Key Contact training • SFRG Command Team training • SFRL training • C.A.R.E. Team training • Emergency Family Assistance Center (EFAC) training and support 	<p>Participants enhance their resiliency to more effectively “bounce back” from challenges:</p> <ul style="list-style-type: none"> • Handle everyday stressors more effectively • Learn to <i>Hunt the Good Stuff</i> and increase wellbeing • Promote self awareness and self regulation • Build strong relationships with connection and communication

FS Army Community Service — 201 Linquist Rd, Fort Stewart, GA 31314 — 571-801-1688

HAAF Army Community Service — 171 Haley Ave, Savannah, GA 31409 — 571-801-7494

All classes free for Active Duty, Army Reserve, National Guard, Family Members, Retirees, and DA Civilians.

Services

Gold Star Spouses	Home and Family	Soldiers in Transition	Money Matters	Volunteering
Support and connect Gold Star spouses	Enhance relationship skills and improve quality of life	Care for Soldiers/Families in Transition so they can focus on their mission to heal	Financial education, counseling and support services to resolve financial literacy	Volunteer your time to grow skills and give back to the community

Programs

Survivor Outreach Services	Family Advocacy Program	Soldiers & Family Transition Assistance Center (SFAC)	Financial Readiness Program	Army Volunteer Corps
571-801-7494	571-801-1698	571-801-7494	571-801-1688	571-801-7494

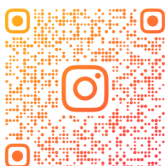
<p>Offers holistic programming and support for Families of the Fallen.</p> <ul style="list-style-type: none"> • Education, referral and outreach services • Advocates for issues or concerns affecting Gold Star and Surviving Families. • Ensures Surviving Families remain a part of the Army Family. 	<p>Coordinates services and activities that support our Families, enhance their relationship skills, and improve their quality of life:</p> <ul style="list-style-type: none"> • Couples Communication • Parenting and discipline skills • Stress and Anger Management • Life skills 	<p>One-stop location for Soldiers and Families transitioning to or from Ft. Stewart and Soldiers & Families with the Soldier Recovery Unit ensuring a seamless PCS or ETS.</p> <ul style="list-style-type: none"> • Information & referral (I&R) • Exceptional Family Member Program (EFMP) • Employment Readiness Program (ERP) • Army Volunteer Corps (AVC) • Relocation Readiness Program (RRP) • Transition Assistance Program (TAP) • Army Recovery Care Program (ARCP) • Internet Computer Café • VA Liaison for Health Care • VFW Disability Claims • Veteran's Readiness & Employment Program (VR&E) • Operation Warfighter (OWF)/Education & Employment Initiative (E2I) 	<p>One-on-one counseling to help with financial issues:</p> <ul style="list-style-type: none"> • Budgeting and money management • Bank account principles • Consumer complaints • Preparing your finances for deployment • Home buying workshops • Financial problem-solving • Managing and paying off debt • Insurance • Long-term financial planning (investing) • Wise use of credit 	<p>Whether you want to give your time every week, once a month, or once a year, there is a volunteer opportunity for you:</p> <ul style="list-style-type: none"> • Establishes partnerships to support personal growth • Promotes and strengthens community efforts • Enhances volunteer career mobility • Teaches new skills and helps establish new friendships
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Websites & Social Media

ACS website



Instagram



Facebook



New Parent Support Program

<p>Support for expectant parents and parents with children ages 0 to 36 months:</p> <ul style="list-style-type: none"> • Home visits and caring services to enhance parent and infant/toddler attachment • Information and child development • Referrals to community resources • Breastfeeding support • Play Mornings • Baby Bootcamp for Dads • Parenting classes

Victim Advocates

<p>Support and information on personal safety and available resource for victims of domestic violence:</p> <ul style="list-style-type: none"> •Victim Advocates are on call 24 hours, 7 days a week:

Stewart – (571) 802-7474
Hunter – (571) 802-0110

Army Emergency Relief	Army Family Team Building (AFTB)
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<p>Emergency financial assistance for unforeseen financial crisis:</p> <ul style="list-style-type: none"> • Non-receipt of pay • Rent/utilities to prevent eviction • Repair of essential POV • Critical emergency Travel • Loss of funds • Funeral expenses • Critical medical, dental, or hospital expenses • Fire or disaster <p>** Money is provided through an interest free loan or grant</p>	<p>Strong Families are the pillar of support behind strong Soldiers. AFTB provides training and readiness to prepare Army Families for success:</p> <ul style="list-style-type: none"> • Level K: Military Knowledge • Level G: Personal Growth and Resiliency • Level L: Leadership Development
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Resources for Commanders:

- Category Focused Assessment Tool for Stratifying At-Risk Soldiers
- Army Resilience Directorate BN and BDE Commanders' Guide to Suicide Prevention – available at [this link](#)
- Reference for Additional Suicide Prevention Leader Resources:
<https://www.armyresilience.army.mil/suicide-prevention/pages/LeaderResources.html>

X Company Commanders Assessment Matrix

Risk Type	RANK	NAME	Soldier Behavioral Health Issues	Family Issues	Financial Issues	UCMJ/Legal Status	SUDCC	Occupational Stressors	Other important variables	MITIGATION Tasks/COA
CAT 4	SGT	Dog-faced, Soldier	Routine Appts. in EBH	Wife emailed pictures of her Infidelity	Mortgage default	Pending AR 15 for lost weapon	Completed SUDCC 20JUN12	On 5 th Combat Deployment	- has been late to work; not showing same effort in PT and at work	<input type="checkbox"/> Follow up with ACS Finance Class <input type="checkbox"/> Ensure SM attends all EBH appts

**Category 5
Extremely High Concern**

**Category 4
High Concern/ Command Interest**

**Category 3
Moderate Concern/ Command Interest**

Category Focused Assessment

Category	Event/Experience	Behavior/Appearance	Actions for Leadership
Category 4 Extremely High Concern	Example Events: - Suicide: Attempt or Ideations (recent inpatient hospitalization) - Homicide: Ideations or significant Statements - Concerning Event: Crime, Loss, etc.	- Giving things away, statements to the effect that he/she would “be better off dead” or the like - Statements that another should “pay” or “will be sorry” - Spending excessive time with personal weapon cleaning, care, or operation	- Command refer and escort to EBH or ED after-hours (if immediate safety is a concern) - Coordinate with helping agencies for holistic approach to care (i.e., EBH, ACS, and Chaplains) - Support intervention(s) through engaged leadership - Assess eight protective factors
		- Extremely Distracted, “checked out,” preoccupied - Possibly disheveled, disregard to hygiene & appearance - Extreme change from previous appearance	
Category 3 High Interest/ Command Interest	Example Events: - Accused of felony crime - Pending Court Martial/ Unwanted Administrative Separation - Downgraded from Cat 4 in past 30 Days	- Stops doing things he/she used to be interested in - Frequent careless mistakes at work - Change in social behavior (e.g. more/ less talkative, more risk taking than normal, significantly more isolative behavior)	- Encourage engagement with helping agencies for holistic approach to care (i.e., EBH, ACS, MFLC, and Chaplains) - Support intervention(s) through engaged leadership - Assess eight protective factors
		- Change in SMs appearance - Frequently forgetting simple uniform/appearance req Appears sad, disinterested, amotivated, anxious, angry	
Category 2 Moderate Concern/ Command Interest	Example Events: - Recently experienced a personal crisis or family tragedy (Divorce, DUI, Death, Extended Hospitalization of Family Member) - Life altering event (to include Field Grade or Higher Disciplinary Action) - Complex medical care - Perceived failure (Failing school or training)	- Change in social behavior (e.g. more talkative or isolated than normal) - SM appears more distracted at work and/or appears unnecessarily impatient with a “short fuse” - Frequently forgetting items, suspense times or not present for duty	- Engaged leadership - Provide opportunity to utilize helping agencies - Assess eight protective factors
		- SM appears unusually sad, disinterested, amotivated, and/or angry - Difficulty focusing on work or obsessively talking about the event or circumstances - Diminished professionalism, military bearing and respectful behavior	

Category 1 Low