The Behavioral Health Risk Assessment Data Report (BH-RADR),

released annually, contains data regarding behavioral health diagnoses, encounters, and referrals among active-duty Army. Data collected from deployment health assessments, as well as annual health assessments, are analyzed and reported.

Highlights of the BH-RADR: 2013-2014



Of Soldiers that had deployed within 5 years of the PHA:

10% screened positive for symptoms of depression and 13% screened positive for symptoms of PTSD.

These Soldiers may experience:

- moderate to severe PTSD and/or depression symptoms, making it difficult to function.
- strained relationships with their spouses/partners, children, and friends. The Soldier's spouse/partner is also at risk for anxiety and depression, and their children are at greater risk for behavioral problems.



16% of Soldiers screened positive 90-180 days post-deployment for

hazardous drinking.

These Soldiers may:

- experience feelings that make it extremely difficult to function, affecting unit readiness.
- self-medicate with drugs/alcohol in an attempt to sleep or to cope with painful memories. Problems with sleep can result in tardiness or missing formations, trouble concentrating on work, irritability, and withdrawal from those around them.

For your Consideration...

support is essential to helping Soldiers who screen positive or have concerning changes in behavior. Soldiers should be made aware of the BH care available to them and their Families and know exactly where to go to get caring, compassionate, and respectful assistance on the installation.

Leaders play a key role in the health of Soldiers; minimizing stigma is as important as reaching out when observing concerning changes in behavior.

- Mission readiness is the #1 priority.
- Readiness is achieved by promoting, improving, conserving, and/or restoring BH and physical well-being of our Soldiers and Family members.

STRATEGIC

OPERATIONAL

- Policies, practices, and messages from BDE and BN leaders should help maintain readiness and protect Soldiers from BH problems that interfere with the Soldiers' and Family Members' well-being.
- Adaptive and agile leaders can best accomplish the mission.

TACTICAL

- BH screenings help identify Soldiers in need
- Company leadership should be informed when warning signs persist so both the first-line leader and the company leader can support the Soldier and encourage the Soldier to seek help.
- Leadership team should minimize behaviors that foster stigma and prevent help-seeking.

Division of Behavioral and Social Health Outcomes Practice (BSHOP)