



2022 HEALTH OF THE FORCE

Create a healthier force for tomorrow.

Executive Summary Report

This EXSUM provides a summary of data for calendar year 2021. For additional context, interpretation, and methodology, see the full *Health of the Force* report at <https://phc.amedd.army.mil/topics/campaigns/hof/Pages/default.aspx>.

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Welcome to the 2022 *Health of the Force* Report

When leveraged and used to prioritize interventions, population health data serve as a powerful force multiplier. Now in its 8th annual installment, the *Health of the Force* report documents conditions that influence the health and medical readiness of the U.S. Army Active Component (AC) Soldier population. Leaders can use *Health of the Force* to optimize health promotion measures, and it can effect culture changes that influence both individual Soldiers and Army institutions. *Health of the Force* presents Army-wide and installation-level demographics and data for more than 20 health, wellness, and environmental indicators at 41 installations worldwide. Installations included in *Health of the Force* are those where the AC population exceeds 1,000 Soldiers. Data presented in this report reflect status for the prior year (i.e., the 2022 report reflects calendar year 2021 data).

EVOLVING HEALTHCARE DATA REPORTING

In line with changes in the previous two *Health of the Force* reports, additional installations have transitioned from the Armed Forces Health Longitudinal Technology Application (AHLTA) to the Military Health System (MHS) GENESIS electronic health record system. Six installations transitioned to MHS GENESIS in 2021: Hawaii and Forts Carson, Huachuca, Leavenworth, Leonard Wood, and Riley. **For the 11 total transitioned installations, metrics derived from Soldiers' medical records are reported in *Health of the Force* but are physically separated from the presentation of AHLTA installation data.** Readers are cautioned against comparing installation data across health record systems, as medical encounter data are decremented in the new record system compared to historical data for these installations.

HEALTH EQUITY: CONTINUING THE CONVERSATION


As the Coronavirus Disease 2019 (COVID-19) pandemic continues to impact military operations and healthcare delivery, the 2022 *Health of the Force* report retains COVID-19 metrics and provides deep dives into prevention strategies, impacts of modified training on injury rates, and infection disparities. The report also sheds light on other areas where health inequities or disparities exist, including women's reproductive health, food insecurity, and substance use among sexual minority Service members. These highlights not only continue some of the conversations that have become key elements of the report, but also foster ongoing progress toward health equity.

APPLYING DATA FOR REAL LIFE CHANGE

Army Senior Leaders rely on robust data to characterize the health of their Soldiers, including strengths that should be sustained and challenges that require mitigation. The *Health of the Force* Online data platform can be used to dynamically display health outcomes, compare populations, and examine trends in data over time. The Spotlight and Local Action vignettes provide information on both how the *Health of the Force* data may be used to inform community health improvement and prevention strategies as well as how to address specific health and readiness issues through resources and calls to action.

Selected Medical Metrics

Presented values are adjusted for age and sex




	Injury (rate per 1,000)	Behavioral health (%)	Substance use disorder (%)	Sleep disorder (%)	Obesity (%)	Tobacco product use (%)	STIs: Chlamydia infection (rate per 1,000)	Chronic disease (%)
AHLTA - CONUS								
Fort Belvoir	1,483	25	3.3	19	22	20	16	22
Fort Benning	1,670	14	2.0	14	19	27	12	19
Fort Bliss	1,360	19	4.4	18	22	28	30	18
Fort Bragg	1,535	14	3.7	15	18	27	23	17
Fort Campbell	1,429	16	2.9	15	21	30	19	19
Fort Drum	1,525	14	3.2	12	22	27	17	19
Fort Gordon	1,556	18	2.5	15	25	22	12	19
Fort Hood	1,465	19	4.6	18	22	29	25	19
Fort Jackson	1,927	17	1.9	12	19	26	8.0	19
Fort Knox	1,459	20	2.1	19	22	23	12	24
Fort Lee	1,642	17	2.4	15	20	22	4.1	20
Fort Meade	1,276	21	2.7	18	27	22	*	20
Fort Polk	1,307	22	5.0	19	21	31	22	23
Fort Rucker	1,501	11	1.8	16	20	17	10	20
Fort Sill	1,762	24	3.9	18	24	32	11	21
Fort Stewart	1,387	20	4.0	16	21	29	24	20
JB San Antonio	1,409	21	2.2	19	21	18	13	22
JB Langley-Eustis	1,774	18	2.4	15	24	24	19	21
JB Myer-Henderson Hall	1,286	19	2.4	13	17	23	18	17
USAG West Point	1,187	15	2.4	11	17	16	*	22
Army	1,368	16	3.3	14	20	27	20	17

Footnotes: See page 10.

Selected Medical Metrics

Presented values are adjusted for age and sex



	Injury (rate per 1,000)	Behavioral health (%)	Substance use disorder (%)	Sleep disorder (%)	Obesity (%)	Tobacco product use (%)	STIs: Chlamydia infection (rate per 1,000)	Chronic disease (%)
AHLTA - OCONUS								
Japan	1,122	14	2.2	10	23	24	21	17
USAG Ansbach	1,020	15	2.9	12	20	29	27	14
USAG Bavaria	1,148	15	3.4	13	19	30	19	18
USAG Daegu	1,033	13	2.2	14	20	27	32	17
USAG Humphreys	1,100	14	3.4	13	19	25	32	16
USAG Rheinland-Pfalz	1,368	20	4.3	20	22	25	31	20
USAG Stuttgart	1,349	17	4.1	19	17	26	28	17
USAG Vicenza	1,126	15	3.5	13	17	27	18	15
USAG Wiesbaden	1,216	17	3.4	17	20	25	20	18
USAG Yongsan-Casey	1,097	14	3.2	13	20	28	30	17
MHS GENESIS								
Fort Carson	1,116	16	4.2	14	19	29	17	17
Fort Huachuca	1,320	13	2.3	13	20	25	7	21
Fort Irwin	1,195	16	4.5	16	23	30	17	18
Fort Leavenworth	1,213	17	2.8	14	22	24	*	22
Fort Leonard Wood	1,554	16	1.8	15	21	29	10	20
Fort Riley	930	14	3.7	12	21	31	20	18
Fort Wainwright	1,185	15	2.5	15	20	31	19	19
Hawaii	1,356	15	2.7	15	21	23	23	18
JB Elmendorf-Richardson	1,277	13	3.6	11	14	28	8.0	16
JB Lewis-McChord	1,173	15	2.7	14	19	27	24	15
Presidio of Monterey	1,054	17	3.1	13	10	15	*	16
Army	1,368	16	3.3	14	20	27	20	17

Footnotes: See page 10.

Environmental Health Indicators

	Poor air quality (days per year)	Poor water quality (days per year)	Water fluoridation (mg/L)	Solid waste diversion rate (%)	Mosquito-borne disease risk	Lyme disease risk	Heat risk (days per year)
Fort Belvoir	4	0	0.69	37	Moderate	High	61
Fort Benning	3	0	0.77	20	Moderate	Low	97
Fort Bliss	19	0	0.86	56	Moderate	Low	68
Fort Bragg	1	0	0.67	30	High	Moderate	85
Fort Campbell	0	0	0.64	36	Moderate	Low	58
Fort Carson	28	0	0.50	38	Low	Low	1
Fort Drum	0	0	0.73	42	Low	High	11
Fort Gordon	7	0	0.72	18	High	Low	100
Fort Hood	3	0	0.20	37	Moderate	Low	103
Fort Huachuca	2	0	0.65	0.0	Moderate	Low	25
Fort Irwin	30	0	1.35	16	Moderate	Moderate	90
Fort Jackson	1	0	0.50	29	High	Low	85
Fort Knox	1	0	0.67	46	Moderate	Low	37
Fort Leavenworth	2	0	0.46	35	Moderate	Low	65
Fort Lee	No Data	0	0.46	30	Moderate	Moderate	61
Fort Leonard Wood	No Data	0	1	43	Moderate	Moderate	60
Fort Meade	1	0	0.62	34	Moderate	Moderate	65
Fort Polk	No Data	0	0.90	55	High	Moderate	109
Fort Riley	No Data	0	0.84	60	Moderate	Low	73
Fort Rucker	No Data	0	0.68	57	Moderate	Low	88
Fort Sill	2	0	0.61	44	Moderate	Low	103
Fort Stewart	No Data	0	0.99	62	High	Moderate	105

Footnotes: See page 10.

Environmental Health Indicators

	Poor air quality (days per year)	Poor water quality (days per year)	Water fluoridation (mg/L)	Solid waste diversion rate (%)	Mosquito-borne disease risk	Lyme disease risk	Heat risk (days per year)
Fort Wainwright	34	0	0.39	No data	Low	Low	0
Hawaii	0	0	0.71	29	Moderate	Low	0
JB Elmendorf-Richardson	2	0	0.38	13	Low	Low	0
JB Langley-Eustis	0	0	0.74	59	Moderate	Moderate	71
JB Lewis-McChord	0	0	0.81	36	Low	Moderate	6
JB Myer-Henderson Hall	4	0	0.70	52	Moderate	Moderate	62
JB San Antonio	12	0	0.25	24	High	Moderate	132
Presidio of Monterey	0	0	0.25	7.0	Low	Moderate	0
USAG West Point	1	0	0.69	50	Moderate	High	28
INSTALLATIONS OUTSIDE THE UNITED STATES							
Japan	14	0	0.99	40	Moderate	Low	51
USAG Ansbach	0	0	0.6	63	Moderate	High	0
USAG Bavaria	0	365	0.64	50	Moderate	High	11
USAG Daegu	51	0	0.70	67	Moderate	Moderate	45
USAG Humphreys	113	0	0.0	75	Moderate	Moderate	42
USAG Rheinland-Pfalz	0	0	0.73	40	Moderate	High	4
USAG Stuttgart	2	0	0.8	58	Moderate	High	3
USAG Vicenza	97	0	0.0	56	Moderate	Low	47
USAG Wiesbaden	5	0	0.0	55	Moderate	Moderate	2
USAG Yongsan	38	0	0.25	34	Moderate	Moderate	41
Camp Casey	52	0	No Data	54	Moderate	Moderate	36

Footnotes: See page 10.

Performance Triad

	7+ hours of sleep [weeknights] (%)	7+ hours of sleep [weekends] (%)	2+ days per week of resistance training (%)	150+ minutes per week of aerobic activity (%)	Met aerobic and resistance target (%)	2+ servings of fruits per day (%)	2+ servings of vegetables per day (%)
Fort Belvoir	35	67	74	87	69	29	43
Fort Benning	32	67	80	90	75	27	39
Fort Bliss	33	65	79	88	73	27	37
Fort Bragg	36	69	79	88	73	29	40
Fort Campbell	37	70	80	89	75	28	39
Fort Carson	34	67	79	88	73	29	40
Fort Drum	34	69	79	88	73	28	41
Fort Gordon	32	70	74	88	70	31	43
Fort Hood	29	63	77	87	71	25	33
Fort Huachuca	36	71	75	88	70	30	42
Fort Irwin	35	67	76	88	69	24	33
Fort Jackson	33	64	79	88	74	32	42
Fort Knox	40	66	78	89	73	28	41
Fort Leavenworth	42	66	77	87	71	29	42
Fort Lee	31	63	78	87	71	35	43
Fort Leonard Wood	28	64	77	87	70	23	35
Fort Meade	37	74	75	88	69	26	41
Fort Polk	29	66	76	86	70	25	35
Fort Riley	33	68	76	87	69	25	34
Fort Rucker	45	72	78	89	72	26	40
Fort Sill	27	63	81	89	75	24	38
Fort Stewart	30	65	77	87	71	25	34
Army	34	68	78	88	72	27	38

Footnotes: See page 10.

Performance Triad

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Fort Wainwright	34	71	79	89	74	27	37
Hawaii	36	69	78	90	73	26	37
JB Elmendorf-Richardson	29	73	80	88	73	28	42
JB Langley-Eustis	33	65	75	89	71	28	36
JB Lewis-McChord	33	69	79	88	73	28	37
JB Myer-Henderson Hall	42	70	78	91	75	38	52
JB San Antonio	31	65	73	84	68	29	43
Presidio of Monterey	35	84	76	93	73	49	61
USAG West Point	41	73	77	85	69	33	50
INSTALLATIONS OUTSIDE THE UNITED STATES							
Japan	34	70	82	89	76	21	34
USAG Ansbach	31	69	81	89	76	22	31
USAG Bavaria	30	66	80	89	74	25	35
USAG Daegu	32	68	78	89	74	24	33
USAG Humphreys	34	71	77	89	72	26	37
USAG Rheinland-Pfalz	33	67	76	87	70	28	36
USAG Stuttgart	33	70	78	86	72	27	40
USAG Vicenza	33	72	78	89	73	27	36
USAG Wiesbaden	36	74	76	90	70	24	36
USAG Yongsan-Casey	33	70	79	86	70	28	36
Army	34	68	78	88	72	27	38

Footnotes: See page 10.

Footnotes

1. Adjusted values are weighted averages of crude age- and sex-specific frequencies, where the weights are the proportions of Soldiers in the corresponding age and sex categories of the 2015 Army AC population. By using a common adjustment standard, we are able to make valid comparisons across installations because it controls for age and sex differences in the population which might influence crude rates.
2. The Army values represent crude values for the entire Army.

* Medical metric values were not displayed if <20 cases were reported.

2022

HEALTH OF THE FORCE EXECUTIVE SUMMARY REPORT



DCPH-A
(formerly U.S. Army Public Health Center)



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