



REPLY TO  
ATTENTION OF

DEPARTMENT OF THE ARMY  
UNITED STATES ARMY GARRISON WIESBADEN  
UNIT 29623  
APO AE 09096-0050

IMEU-WSB-ZA

8 FEB '10

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: US Army Garrison Wiesbaden Command Policy Letter 37, Health Promotion, Risk Reduction and Suicide Prevention

1. References:

a. Army Campaign Plan for Health Promotion, Risk Reduction and Suicide Prevention (ACPHP), 16 April 2009.

b. Army Regulation 600-63, Army Health Promotion, 20 September 2009.

c. DA Pamphlet 600-24, Health Promotion, Risk Reduction and Suicide Prevention, 24 November 2009.

2. The readiness of our Army is paramount in our ability to fight and win on the battlefield. Sustaining the health and wellbeing of our Soldiers, Family members, military retirees, and Army DA civilians is a preeminent responsibility of Army senior leaders and personnel at all levels. The Army's strategic approach to mitigating suicide and high-risk behaviors helps build cohesive units. Promoting healthy lifestyles, reducing risk-seeking behavior and preventing suicide are priorities in this command.

3. All commanders, leaders, supervisors, Soldiers, and Army DA civilians are responsible for creating an environment that reduces the stigma of seeking help for behavioral health issues. On a daily basis, it is incumbent on all of us to be aware of and recognize when someone may be at risk, and to be empowered to take appropriate action to save lives. Each of us is responsible for eliminating policies, procedures, and actions that inadvertently discriminate, punish, or discourage Soldiers or employees from seeking professional counseling.

4. To this end, ensure that no Soldier is belittled for requesting behavioral health assistance. Similarly, ensure civilian employees are encouraged to access help available for them. Leaders will utilize an extraordinary degree of discretion when identifying and sharing information regarding Soldiers and civilian personnel seeking help.

5. Each life lost to suicide is one life too many. Suicide prevention spans the gamut of effort from prevention to intervention to post-intervention and response. Each one of us has a personal role to play in preventing suicide. Task forces such as the Community Health Promotion Council can identify trends. Annual training and refresher training provide information for intervention. Response teams assist the commander in the event of a suicide.

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6. There are numerous resources available for those in need of help. Locally, behavioral health professionals, social work services, military family life consultants, alcohol and substance abuse counselors, and chaplains stand ready to assist. Military One Source is an excellent resource for persons in need of help: [www.militaryonesource.com](http://www.militaryonesource.com) details how to call from Germany at no cost to speak with a trained professional. From a fundamental perspective, the Army's "ACE" - Act, Care, Escort - initiative reflects this command's perspective on caring for the Army's most vital resource, our Soldiers.

7. The POC for this program is the garrison Health Promotion Officer at DSN (314) 337-7244 or e-mail: [tahroma.e.skugrud@eur.army.mil](mailto:tahroma.e.skugrud@eur.army.mil).



JEFFREY W. DILL  
COL, IN  
Commanding

8 Feb '10

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