



PERSONNEL AND
READINESS

UNDER SECRETARY OF DEFENSE

4000 DEFENSE PENTAGON
WASHINGTON, D.C. 20301-4000

MAY 17 2022

MEMORANDUM FOR SENIOR PENTAGON LEADERSHIP
COMMANDERS OF THE COMBATANT COMMANDS
DEFENSE AGENCY AND DOD FIELD ACTIVITY DIRECTORS

SUBJECT: Suicide Prevention and Response Independent Review Committee and Membership

On March 22, 2022, the Secretary of Defense announced the establishment of the Suicide Prevention and Response Independent Review Committee (SPRIRC). Today, I am pleased to provide additional details on the structure of the SPRIRC and identify the personnel that will be participating in this critical effort.

In order to balance the need for independent views and military cultural familiarity, the membership of the SPRIRC consists of independent subject matter experts with backgrounds and experiences collectively representing the public health approach to suicide prevention, clinical services for mental health, suicide epidemiology, the overlap between sexual assault and suicide behavior, and lethal means safety.

Special consultants assigned to the Office of the Under Secretary of Defense for Personnel and Readiness will assist the SPRIRC as technical experts. These special consultants will contribute critical perspective to the SPRIRC in the areas of spirituality/faith, officer and enlisted leadership, senior enlisted leadership, and the needs and perspectives of military family members.

The SPRIRC will be chaired by Dr. Gayle Iwamasa. Additional information about the membership of the SPRIRC and the special consultants serving as technical experts is provided at Attachment 1. The projected timeline for the SPRIRC to visit specific installations is provided at Attachment 2. The charter for the SPRIRC is provided at Attachment 3.

A handwritten signature in black ink, appearing to read "Gilbert R. Cisneros, Jr.", written in a cursive style.

Gilbert R. Cisneros, Jr.

Attachments:
As stated

Attachment

1

Suicide Prevention and Response Independent Review Committee (SPRIRC)

SPRIRC Membership		
Mental Health Service Provider / Team Lead	Dr. Gayle Iwamasa	Department of Veterans Affairs
Sexual Assault and Suicide Expert	Dr. Rebecca K. Blais	Arizona State University
Epidemiologist	Dr. Rajeev Ramchand	RAND Corporation
Substance Use Disorder Expert	Dr. Stephanie Gamble	Department of Veterans Affairs
Lethal Means Safety Expert	Dr. Craig Bryan	The Ohio State University

SPRIRC Consultants		
Former Senior Military Officer	LTG(Ret) Dr. Nadja West	[-]
Former Senior Enlisted Leader	CMSAF(Ret) Kaleth Wright	[-]
Public Health / Public Policy Expert	Dr. Jerry Reed	[-]
Military Family Member	Kathy Robertson, LCSW	[-]
Chaplain	CDR(Ret) Rev. Carl Trost	[-]

SPRIRC Member Biographical Summaries:

Gayle Iwamasa, Ph.D., HSPP



Dr. Iwamasa is a clinical psychologist, currently serving as the National Inpatient Mental Health Program Director in the Department of Veterans Affairs, Office of Mental Health and Suicide Prevention. Prior to her current assignment, Dr. Iwamasa served as the National Mental Health Quality Improvement and Implementation Consultant for 10 years. Prior to her career with VA, she spent 16 years in academia, educating and training clinical psychology graduate students. During this time, she also served as the Psychology Director at Logansport State Hospital, where she played an instrumental role in the implementation of process improvement strategies related to recover-oriented care. Dr. Iwamasa has been a licensed psychologist since 1993, and she received her Ph.D. in clinical psychology from Purdue University.

Rebecca K. Blais, Ph.D.



Dr. Blais is an Associate Professor of Psychology at Arizona State University. She is the principal investigator of the Military Social Science Laboratory (MiSSiLe). Dr. Blais' program of research focuses on individual (PTSD, depression, suicide) and interpersonal (relationship satisfaction, sexual function, social support) outcomes associated with military-related traumas, including combat and sexual assault. The overarching goal of her research is to increase detection of those who are at-risk for sexual victimization and to augment existing clinical interventions to provide a more holistic approach to healing from trauma. She received her Ph.D. in clinical psychology from the University of Utah, and completed a postdoctoral research fellowship in Trauma Psychology at Rush University, and a clinical postdoctoral fellowship at the VA Puget Sound Health Care System. She is licensed to practice clinical psychology in Utah and Arizona.

Rajeev Ramchand, Ph.D.



Dr. Ramchand is an epidemiologist who studies the prevalence, prevention, and treatment of substance use and mental health disorders. His research has focused on suicide prevention, behavioral health treatment, behavioral health epidemiology, military and veteran health, disasters and community resilience, and crime and justice. He has authored over 100 peer-reviewed publications, with his research funded by the National Institutes of Health, National Institute of Justice, Department of Veterans Affairs, and private foundations. He received his B.A. in economics from the University of Chicago and his Ph.D. in psychiatric epidemiology from the Johns Hopkins Bloomberg School of Public Health.

Craig Bryan, Psy.D., ABPP



Dr. Bryan is a board-certified clinical psychologist with expertise in cognitive-behavioral treatments for individuals experiencing suicidal thoughts and post-traumatic stress disorder. He is currently a professor in the Department of Psychiatry and Behavioral Health at The Ohio State University, and is a senior researcher with the Suicide and Trauma Reduction Initiative for Veterans (STRIVE). Dr. Bryan previously served as an officer in the United States Air Force, and is a veteran of Operation Iraqi Freedom. He received his Doctor of Psychology in clinical psychology from Baylor University and completed his residency in clinical psychology at Wilford Hall Medical Center.

Stephanie Gamble, Ph.D.



Dr. Gamble is the Deputy Director of the VA Center of Excellence for Suicide Prevention. Her research focuses on improving care for individuals with increased risk for suicide due to co-occurring substance use disorders and depression. She has pioneered interventions for the integrated treatment of these co-occurring disorders. Dr. Gamble received her Ph.D. in Clinical Psychology from the University at Buffalo, State University of New York, as well as a post-doctoral research fellowship at the University of Rochester Medical Center.

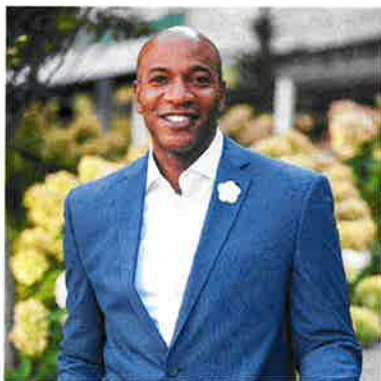
Office of the Under Secretary of Defense for Personnel and Readiness Consultant Biographical Summaries

LTG (Ret) Nadja West, MD



Retired Lieutenant General Nadja West culminated more than three decades of active duty service as the 44th Surgeon General of the Army. In this role, she was responsible for an \$11.2 billion global health enterprise and more than 130,000 healthcare professionals delivering the care of millions of current and former service members and their family members. Prior to that assignment, she previously served as the Joint Staff Surgeon, advising the Chairman of the Joint Chiefs of Staff on all aspects of medical readiness across the total force. Dr. West is currently a Hauser Leader at Harvard Kennedy School's Center for Public Leadership. She received her Doctorate of Medicine from George Washington University School of Medicine and is a graduate of the National War College.

CMSAF (Ret) Kaleth Wright, MBA



A 32-year veteran of the Air Force, Mr. Wright served as an enlisted leader at all echelons, culmination in his assignment as the 18th Chief Master Sergeant of the Air Force. While serving in this role, his priority was Airmen resiliency and readiness, including service-wide efforts on suicide prevention that reached nearly 600,000 Airmen and their families. Mr. Wright is currently the CEO of the Air Force Aid Society, the Air Force's official charity, where he guides a small team that provides \$20 million per year in emergency financial assistance, scholarships, and community programs to Service Members and their families. He holds a Master's Degree in Business Administration and is a graduate of the Air War College, as well as being a Certified Executive Coach.

Jerry Reed, PhD, MSW



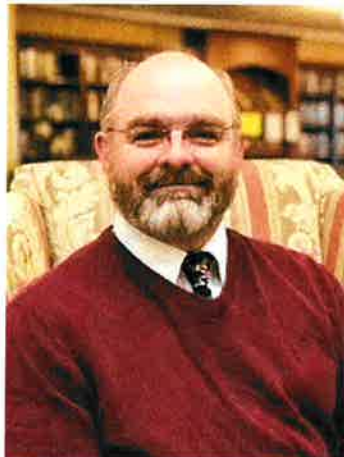
Dr. Reed is a nationally recognized leader in the field of suicide prevention. He previously served as a suicide prevention lead at the Substance Abuse and Mental Health Services Administration, as well as the co-director of the Injury Control Research Center for Suicide Prevention. He was one of the key members in creating the first National Strategy for Suicide Prevention in 2002 and led its revision in 2012. In 2010, Dr. Reed spearheaded the launch of the National Action Alliance for Suicide Prevention, a public-private partnership advancing the National Strategy for Suicide Prevention. Dr. Reed also served in the U.S. Navy from 1974 to 1978. He received his Master of Social Work degree from the University of Maryland Baltimore and his Ph.D. in Health Services from Virginia Commonwealth University.

Kathy Robertson, MEd, MSW, LCSW



Ms. Robertson is a 27-year Army spouse (retired) and the mother of two sons – one currently serving as an Active-Duty Air Force officer and one an Army combat veteran. Professionally, she is a Licensed Clinical Social Worker with more than 35 years of experience in developing, leading, and managing a wide spectrum of military quality-of-life programs in the DoD, Army, and Navy. She has broad interdisciplinary clinical and management experience and knowledge of the breadth of military family programs from installation, region, military service department to the DoD. She retired from civil service after serving 7 years as the Family Advocacy Program Manager, Office of the Deputy Assistant Secretary of Defense for Military Community and Family Policy. She received her MSW from the University of South Carolina.

CDR (Ret) Rev. Carl Trost, MDiv



A 25-year veteran of the Navy, Reverend Trost served all over the globe, delivering pastoral leadership to military members, their families, and Department of Defense civilians. While working at Naval District Washington, he served as the director of the Chaplains Religious Enrichment Development Operation. He also led service-wide initiatives improving crisis pastoral care and counseling. Since retiring from active duty, his volunteer experience includes service as a Board Member for the Virginia Chapter of the Association for Suicide Prevention, and as a volunteer chaplain for the Staunton Police Department. He currently serves as a Pastor at the New Mt. Olive Lutheran Church. He received his Masters of Divinity from the Lutheran School of

Theology at Chicago.

Attachment

2

Projected Timeline for SPRIRC Installation Visits

Locations	Projected Dates
Nellis Air Force Base, NV	July 25-29, 2022
Fort Campbell, KY	August 8-12, 2022
Naval Air Station North Island, CA	August 22-26, 2022
North Carolina National Guard	September 7-11, 2022
Camp Lejeune, NC	September 12-16, 2022
Camp Humphreys, Republic of Korea	September 26-30, 2022
Joint Base Elmendorf-Richardson, AK Fort Wainwright, AK Eielson Air Force Base, AK	October 12-22, 2022

Note. Dates subject to change at the direction of the SPRIRC Chair

Attachment

3

**Charter
for
Suicide Prevention and Response
Independent Review Committee**

A. Official Designation: This committee shall be known as the Suicide Prevention and Response Independent Review Committee (SPRIRC).

B. Mission: In accordance with section 738 of the National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2022, the SPRIRC will provide its report containing its findings and recommendations for preventing suicide in the military to the Secretary of Defense (SecDef) no later than 270 days, and to the Committees on Armed Services of the Senate and the House of Representatives no later than 330 days, from the establishment of the SPRIRC. The Federal Advisory Committee Act (5 U.S.C. App.) shall not apply to this committee in accordance with section 738(h).

C. Scope and Focus of Activities: The SPRIRC will conduct a comprehensive review of both clinical and non-clinical suicide prevention and response programs and factors that may prevent suicide, focusing on the specific locations designated by the SecDef for this review (see Attachment). The SPRIRC will review the suicide prevention and response programs and other factors that may contribute to the incidence or prevention of suicide at the military installations selected for review, and make recommendations to adapt policies and programs to the emerging needs of the total force. Methods for this review include policy review, installation visits, focus groups, individual interviews, and a confidential survey of Service members stationed at the designated locations. The SPRIRC will review relevant suicide prevention and response activities at the designated locations, as well as actions underway to address related recommendations of the Independent Review Commission on Sexual Assault in the Military, to ensure SPRIRC recommendations align, where possible, with current and developing prevention activities and capabilities. This review will include:

- Evaluation of military policies, programs, and processes related to suicide prevention and response;
- Review previous DoD and external efforts (e.g., studies, assessments, reports), including prior and recent recommendations from academic research, industry best practices, interagency partnerships, Military Service Organizations, and Veterans Service Organizations; and
- Recommendations to improve policies, programs, processes, and resources to reduce the incidence of suicide and improve suicide prevention and response efforts at the designated locations and potential enterprise-wide recommendations and actions.

The Director of the Office of People Analytics and the Executive Director, Force Resiliency will coordinate and cooperate with the SPRIRC.

D. Deliverables: In addition to the final report, at the discretion of the SPRIRC, it will provide periodic updates on interim findings to the Under Secretary of Defense for Personnel and Readiness (USD(P&R)). The final report will be released publicly.

E. Governance and Management: A member of the SPRIRC will be designated by the SecDef as the Chair. The Chair will oversee the work of the SPRIRC and establish the agenda for meetings.

The Military Departments and the National Guard Bureau, as appropriate, will identify a designated point of contact at each specified installation in the Attachment. This point of contact will be an officer in the grade of O-5 or higher who will assist the SPRIRC in coordinating the details of the installation visits, as well as ensure that visit dates do not unreasonably interfere with operational and training requirements for units stationed at the specified installations.

F. Membership: Pursuant to section 738 of the NDAA for FY 2022, the SPRIRC members shall be appointed by the SecDef, none of whom may be members of the Armed Forces or DoD civilian employees. Members may be compensated for their work related to the SPRIRC through reimbursable agreements with their affiliated external organizations pursuant to the Intergovernmental Personnel Act in accordance with 5 U.S.C. §§ 3371-3375. The members will be subject matter experts with backgrounds and experiences collectively representing the public health approach to suicide prevention, clinical services for mental health, epidemiology with regard to suicide, the overlap between sexual assault and suicide behavior, and lethal means safety.

The USD(P&R), according to DoD policies and procedures, may select experts or consultants as subject matter experts under the authority of 5 U.S.C. § 3109 to advise the SPRIRC. Such experts or consultants are not members of the SPRIRC. These individuals will not vote on recommendations of the SPRIRC. They may, however, participate in site visits, interviews, and briefings, and may offer advice within their respective subject matter expertise, upon the request of the SPRIRC.

G. Support: The DoD, through the Office of the Under Secretary of Defense for Personnel and Readiness, shall provide staffing and resources as deemed necessary for the performance of the SPRIRC.

H. Recordkeeping: Records of the SPRIRC shall be handled according to applicable DoD policies and procedures. These records may be subject to the Freedom of Information Act of 1966 (5 U.S.C. § 552, as amended).

I. Meetings: The SPRIRC will convene at the call of the Chair, and will meet a minimum of eight times during the year. The Chair will schedule meetings as often as needed. The meetings generally will be in person. At the discretion of the Chair, meetings may be conducted virtually. Regular SPRIRC meetings will be scheduled until completion of the mission. The Committee Chair will oversee SPRIRC meetings.


J. Estimated Annual Operating Costs and Staff Years: The estimated annual operating cost of the SPRIRC, to include compensation of members through reimbursable agreements (5 full-time equivalents (FTEs)), compensation of consultants (5 FTEs), travel, meetings, and contract support (approximately 3 FTEs), is approximately \$1.8 million.

K. Duration: This charter is effective upon signature.

L. Termination Date: March 25, 2023

M. Charter Modification: The USD(P&R) reserves the authority to modify this charter in writing.

N. Approval:

Signature:  Date: MAY 17 2022

Attachment: Designated Locations for the SPRIRC Review

Site Visit Locations	
Army	Fort Campbell, KY
Marine Corps	Camp Lejeune, NC
Navy	Naval Air Station North Island, CA
Air Force / Space Force	Nellis Air Force Base, NV
Remote / OCONUS	Camp Humphreys, ROK Joint Base Elmendorf-Richardson, AK Fort Wainwright, AK Eielson Air Force Base, AK
National Guard	North Carolina National Guard