

**Army Suicide Prevention Month
September 2011
“Shoulder to Shoulder: Building Resilience in the Army
Family”**

Suicide prevention is an “All Hands” evolution all the time. However, National Suicide Prevention Week is observed in September. It makes sense to pause, once in a while, from our day-to-day efforts and consider some additional preventive actions.

1) Topics/Themes

Promote/advertise local resources, i.e., Suicide Prevention Program Managers, Chaplains, Military Family Life Consultants, Behavioral Health providers, off-post community services, churches, medical centers, crisis centers, welcome centers, Suicide Prevention Lifeline 1-800-273-TALK (8255), etc.

Disseminate information about national and local resources; 24x7 hot lines; websites; faith based organizations; non-profit Veteran’s organizations; services; clubs; and private, public, and non-profit organizations in the community. Invite local resources to set up booths/tables and provide hand-outs.

Promote community and individual awareness of risk factors, warning signs, and triggering events (anniversary of the death of a Family member).

Take the opportunity to ensure suicide prevention and awareness and positive life coping skills are included in town hall meetings, Family Readiness Group meetings, and Welcome Centers.

Publicize availability of resources to include ensuring Family members’ access and awareness.

Promote the value of seeking behavioral health care...the importance of taking care of one’s self...maintaining one’s personal health and self care. Behavioral health care is as important as physical health care (i.e., it is as important as going to the doctor for a broken leg). Suicide is preventable.

Ensure and promote access to quality care (physical, mental, spiritual). Include addresses, phone numbers, websites, and hand-outs. Use media outlets - local radio stations, newsletters, newspapers, sign boards, and bulletin boards.

Ensure programs are in place to identify those in a high risk category, such as behavioral health screening - one of the strongest risk factors for suicide. Incorporate suicide-risk screening at the primary health care level.

Develop processes for reaching out to the geographically dispersed Soldier and their Families.

Reach out to public/private schools and colleges - include them in activities as appropriate.

Collaborate with public health and cooperative extensions to leverage educational materials on depression and suicide prevention and delivery of comprehensive suicide prevention activities.

Build activities to reduce stigma associated with seeking help for behavioral health concerns. Engage local foundations to promote activities associated with behavioral illness awareness week, suicide prevention month, and mental health month.

Promote community crisis management services and suicide survivors groups for dealing with a loss as a result of suicide e.g., Tragedy Assistance Program for Survivors, National Military Family Association, and Survivor Outreach Services (SOS).

Develop, implement, and/or publicize integrated community-based suicide prevention programs that build life skills and resiliency, beliefs and values, and connections to Family and community support known to reduce the risk of suicide.

Improve suicide prevention education and training for health care professionals, counselors, clergy, teachers and other key "gatekeepers."

Conduct activities that involve Soldiers, DA Civilian, and Families, work centers/services or commands.

2) Activities

You make a difference – Pass it on! (www.blueribbonmovie.com) - Small seeds of hope or a sense of effectiveness and belonging can grow to form the threads that sustain us through tough times.

Let three people in your life (family, friends, battle buddies, people who you cross paths with routinely) know that they make a difference to you. Be specific about how and why you appreciate who they are and what they do that makes a difference in your life. Ask them to pass it on by honoring three people in their lives this way. To see a real life example of this process in action, see www.blueribbonmovie.com.

Run a "fire" drill - While we may not expect to be in a fire, we go through drills to learn the escape routes in case we ever need them; even if they are hard to see because of

smoke or darkness. However, it is not often that we consider or practice what to do if our brains or hearts are “on fire” (when we encounter a personal crisis or have a chance to help another person in crisis).

Consider what you would do in a personal crisis within yourself or someone else. Run a drill to practice your plan. It may feel awkward to practice saying “I am so upset, I am thinking of hurting myself,” “I have so many problems piled up and am so overwhelmed that I am desperate and need to talk so I can think straight,” or “I am feeling suicidal and need help;” but, it also feels awkward doing CPR on a mannequin or jumping into a sawdust pit to learn how to land properly for a parachute jump. The bottom line is that you do not want to have to figure out how to do chest compressions with a person unconscious in front of you; you don’t want to figure out how to land right on the way to the ground; and, you don’t want to figure out how to reach out when you or someone else is already in the middle of the darkness of a personal crisis.

Conduct a self-assessment - <http://www.militarymentalhealth.org/Welcome.aspx> -

Stress affects us all and health problems like sleep difficulties, depression, and anxiety are extremely common. For example, one in five people will have at least one episode of major depression. Sometimes wear and tear or illness creeps up on us slowly like a cancer and we do not feel quite right but really do not understand that anything is wrong until it really takes a toll. The link above leads to an anonymous online self-assessment tool. Take a few minutes and see where you are. If you can recognize a concern early, there are many resources to address it before it starts to impact your work performance, relationships, and health in negative ways.

3) Training

a. Ask-Care-Escort (ACE). Invest a couple of hours in the ACE program. Develop and use scenarios and practice ACE with a partner or small group.

Ask – If someone is thinking of suicide.

Care – Listen, offer hope, and don’t judge.

Escort – Take action, don’t leave the person alone, escort them to assistance.

ACE is a suicide prevention training course that provides an excellent opportunity to discuss and role-play realistic scenarios and practice communication and intervention skills.

b. Applied Suicide Intervention Skills Training (ASIST). The ASIST workshop is for caregivers who want to feel more comfortable, confident and competent in helping to prevent the immediate risk of suicide. Thousands of gatekeepers have participated in

this two-day, highly interactive, practical, practice-oriented workshop in the Army throughout the years...Be part of the experience, get involved.

Test your crisis response plan. Have someone call the duty office and have the duty section practice going through their plan to talk, gather information, and access support. Practice your plan to assist someone who is at acute risk. Check your safety considerations. Update the recall roster. For emergency responders or medical commands, run a drill to practice your protocols for suicide risk and response.

4) Resources

National Suicide Prevention Lifeline: 1-800-273-TALK (8255) -

www.suicidepreventionlifeline.org

Military OneSource: 1-800-342-9647 - www.militaryonesource.com

Military Pathways: 1-877-877-3647 - www.militarymentalhealth.org

Signs of Suicide (SOS) Military Program :

<http://www.mentalhealthscreening.org/military/index.aspx>

Chaplains: <http://www.army.mil/info/organization/chaplaincy>

Office of the Chief of Public Affairs: <https://www.us.army.mil/suite/page/216363>

Army Family Medical Life Counselors

Family Readiness Groups

Real Warriors Campaign: 1-866-966-1020 - www.realwarriors.net

Wellness Resources for the Military Community www.afterdeployment.org

TAPS (Tragedy Assistance Program for Survivors): 1-800-959-TAPS (8277) -

www.taps.org

TRICARE (now offering remote and web-based counseling in CONUS): 1-800-600-9332 (CONUS) - www.tricareonline.com

Warrior and Family Assistance Center (WFAC): 1-800-436-6290 -

www.arfp.org/WFAC

National Guard's Director of Psychological Health Program:

<http://www.realwarriors.net/guardreserve/treatment/NGPHP.php>

DCoE Outreach Center For Psychological Health and Traumatic Brain Injury Information and Resources: 1-866-966-1020) [Connect with the Community](#)

Suicide affects every state, community, and demographic group. Don't go it alone. Identify organizations and opportunities in your community. Organizations that can give you ideas and information on local activities include:

- American Association of Suicidology - www.suicidology.org
- American Foundation for Suicide Prevention - www.afsp.org
- Suicide Prevention Resource Counsel - www.sprc.org

6) Engage in Fellowship, Meditation, or Prayer

In keeping with beliefs, work with the local chaplain, faith group, or community to hold a breakfast or lunch in which suicide awareness (warning signs, risk and protective factors) and benefits of behavioral health care are discussed. Set aside time for meditation or prayer on behalf of those struggling with personal crisis. Use the opportunity to discuss the benefits of communication, helping one another, and the importance of taking care of one's emotional well being. Share stories of success, positive coping skills; give life a chance.

7) Good Grief

Surveys show that upwards of half of our personnel knew someone personally who lost a struggle to suicide. The pain caused by suicide loss does not heal quickly or easily and some studies estimate that the effects of suicide on a family last for generations. Grieving a loss (or putting off even thinking about it for years), may take some time to sort out and facilitate healing.

8) Share your Story

Every day, people find hope and strength amidst adversity and reach out to help one another. If you have overcome a personal crisis or helped someone through a crisis and assisted in saving a life, we invite you to email us your story at www.preventsuicide.army.mil. Submissions can be anonymous. We will share them throughout the year (with no names or identifiers).

We also welcome emails about successful suicide prevention program practices that can be highlighted as "best practices."