

IT'S NO GAME

DISCUSSION LEADER'S OUTLINE

INTRODUCTION

Good morning my name is _____. Today we will be talking about how to intervene in a potential suicide situation.

The **ground rules** for this discussion are:

- (1) No personal attacks on anyone's opinions
- (2) Allow each participant to express themselves
- (3) Make head calls at your leisure, just don't interrupt the group
- (4) Keep your language clean as not to offend others
- (5) PARTICIPATION BY ALL!!!!!!

Gain Attention

"He's probably just had too much to drink...doubt he means what he's saying," thinks Cpl Myers as he finishes a beer at a bar near base. The Marine next to him has been heavily drinking all evening and talking to himself, saying things like, "It's my fault all the time, there's no future for me." The phone call the intoxicated Marine just received seems to have really taken him over the edge. Cpl Myers heard him yelling at the person on the phone, "Yeah, well who's looking out for me?!? I haven't slept in months. You know what, never mind, none of this is worth it...who cares anyway?" Cpl Myers isn't sure he should engage...is this an opportunity to help or will talking to this Marine stir up a bigger problem? After all, Cpl Myers can't stay; he's meeting up with some buddies tonight to watch the game. He doesn't have time for this; he doesn't even know this Marine. The bartender points to the intoxicated Marine and tells Cpl Myers that he'll cut that guy off. Cpl Myers thinks about calling that Marine a cab, it likely isn't that bad... this Marine will probably just sleep it off, right?

Key points for the discussion today will be:

- (1) Warning signs of suicidal behavior
- (2) The R.A.C.E suicide prevention method

Learning Objective: After this guided discussion, you will know exactly what to look for and how to address a Marine that is showing signs of suicidal behavior.

KEY POINT 1

Per MCO 1720.2, most suicides are not out of the blue, "deaths by suicide and other non-fatal suicide-related events often occur in association with relationships stressors, work related stressors, pending disciplinary action, and illness such as depression, and in association with periods of transition in duty status and between duty stations." Suicide is preventable, and timely intervention can stop many suicides, let's talk about some indicators.

1. Suicide is usually a desperate attempt to end suffering that has become unbearable. With overwhelming feelings of worthlessness, hopelessness, and isolation, a person may see death as the only remaining choice. Yet most suicidal people have mixed feelings about ending their lives, and (consciously or subconsciously) give off signals or warning signs of their intentions.
2. Sometimes those considering suicide will only display very subtle signs; we have to be alert to see

them. Friends, family members, and leaders may see different signs or only a few of the signs.

3. It is very important to take action when you observe any of the warning signs of suicide. Call 911 or seek immediate help from an emergency room or mental health care provider. The more of these warning signs a person shows, the greater the risk of suicide. These are examples of warning signs:
 - a) Ongoing or repeated pattern of high risk behaviors, such as excessive speeding in motor vehicle/motorcycle, drunk driving, etc.)
 - b) Recent suicidal ideation or attempt including hospitalization
 - c) Comments that suggest thoughts or plan of suicide
 - d) Changes in social patterns, such as withdrawal
 - e) Obsessing about death/dying
 - f) Significant change in mood
 - g) Significant changes in sleep patterns including increased sleep deprivation
 - h) Recent suicidal ideation or attempt including
 - i) Significant change in workplace performance
 - j) Appearing overwhelmed by a recent stressor
 - k) Decreased ability to envision the future
 - l) Legal problems (NJP, court marshal, excessive debt)
 - m) Relationship issues
 - n) Loss of a parent, sibling, fellow Marine, or close friend who may have provided support and a sense of connection
 - o) Alcohol or drug misuse and abuse
4. The fact is most people who are considering suicide will display warning signs or red flags (as many as 10 to 20) such as direct statements, physical signs, emotional reactions, or changes in behavior. Even though Cpl Myers doesn't know the Marine, what are the some red flags that show the Marine may be in distress? (Facilitator: Provide the audience with copies of the scenario to reference.)
 - a) He is drinking heavily
 - b) He thinks others don't care about him
 - c) He is making negative statements about himself, "It's my fault all the time..."
 - d) He expresses that he doesn't care anymore
5. Untreated diagnosable issues like anxiety or depression increase the risk of suicide. Here are additional warning signs that let you know someone is experiencing distress and may be considering suicide:
 - a) Talks or writes about suicide, death, or ways to die
 - b) Threatens to hurt or kill him or herself
 - c) Looks for ways to kill him or herself by trying to get pills, guns, or other means of ending his or her own life
6. What issues are impacting the intoxicated Marine in the scenario? (Participants need to provide all the answers below.)
 - a) It appears the intoxicated Marine is drinking excessively and is overwhelmed by stress. He shows a decreased ability to envision the future, saying "There's no future for me."
 - b) He mentions that he is sleep-deprived
 - c) He seems overwhelmed by the recent phone call he received
7. Do we have enough information to know if the intoxicated Marine is thinking of killing himself?
 - a) It's clear he's experiencing distress; a person can be in a bad place where he or she spirals down far enough to consider taking his or her own life.

8. Should Cpl Myers intervene at this point?

- a) Yes, Cpl Myers should intervene; he should not walk away from this Marine. It's better to deal with the temporary awkwardness of a difficult conversation, than let that problem fester into a crisis.

Interim Summary: We just finished discussing warning signs of suicidal behavior, a couple of those are risk-taking behaviors, appearing overwhelmed by a recent stressor, decreased ability to envision the future, legal problems, and relationship issues. When these warning signs of suicide are present, it is very important to take action. Now, let's talk about providing immediate help with the R.A.C.E suicide prevention method.

KEY POINT 2

Recognizing warning signs is the first step in the Marine Corps suicide prevention method called R.A.C.E. The steps are Recognize, Ask, Care, and Escort.

1. "Recognize" means that we must be alert to changes in our friends, family members, or fellow Marines that signal that something is different in their lives—or that something is severely bothering them.
 - a) Cpl Myers recognized subtle warning signs of suicide. Although he doesn't know the intoxicated Marine, he needs to take action.
2. "Ask" means just what it says—you need to ask that person some very direct questions:
 - a) You can start with "What's wrong?" They might just tell you.
 - b) Listen and read between the lines. Sometimes people in distress are good at hiding the truth. They may tell you that everything is OK even if it's not.
 - c) You'll have to ask, "Are you thinking of killing yourself?" Even if you think that's hard, you need to do it. You may worry that the person will get mad or defensive, but you have to take the chance. No matter what the person says, you have to care. Even if the person is not thinking about suicide, he or she may be experiencing severe distress, and it's your responsibility to offer the Marine help.
 - d) Think of some other questions you might ask if you encountered the Marine in this scenario.
(Facilitator: Reference enclosure 1 to practice asking open-ended questions)
3. "Care" means that you let your words and your actions show that you really do care about the person and the problem he or she is experiencing. Here's how:
 - a) Remember to listen and read between the lines. Sometimes you need to push a little harder to get to the truth.
 - b) Be direct. Be willing to listen. Don't judge.
 - c) Don't lecture the person.
 - d) If you are unsure about his/her state of mind, you should contact your chain of command or chaplain.
4. Now let's talk about the last step in R.A.C.E., "Escort." If a person has suicidal thoughts, stay with him or her until help arrives, or you physically take the person to someone who can help.
 - a) Remember, you are not a medical professional, but your job to get your fellow Marine help. This could be a doctor or a chaplain.
 - b) Help may be your chain of command, chaplain or a health professional, or you can call the DSTRESS Line (1-877-476-7734) with the person.
 - c) "Stay with him/her" means you don't let the person out of your sight, ever.
 - d) If you can do so safely, remove any means of suicide that you see, such as weapons or stockpiled pills, and keep the items away from the person.

- e) If you have no way to take the person to get help, call the help to come to you—the chaplain, the chain of command, 911, or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).
5. What if you are in a phone conversation and someone tells you that he/she is suicidal, keep the person on the phone talking to you and try to find out where he/she is.
- a) Keep the person talking while you text, email, or call on another line to get someone to go to where the suicidal person is.
- b) Ask if there's someone nearby who could offer support, and keep talking until help arrives.

SUMMARY/CONCLUSION

Today we discussed how to identify and address a Marine that is showing signs of suicidal behavior. We covered the R.A.C.E. method—Recognize, Ask, Care, and Escort. Employ the R.A.C.E method – Recognize, Ask, Care, and Escort. If Cpl Myers recognized the warning signs, asked the question directly, showed care with words and actions, and made a plan to escort the Marine to help, he could save a life.

Closing Statement:

Suicidal thoughts are very real and should always be taken seriously. Even if you can't relate to what the Marine is feeling, you must still be empathetic. Whether the person in distress is a buddy or someone you've never seen before, as a fellow Marine, you should take the same R.A.C.E. measures.

END OF DISCUSSION

RESOURCES

1. MCO 1720.2, *Marine Corps Suicide Prevention Program*
2. MCRP 6-11C, *Combat Stress*
3. *Suicide Prevention Fact Sheet*. Retrieved from <http://bhini.usmc-mccs.org/uploads/Suicide%20Prevention2.pdf>
4. Military OneSource. Retrieved from http://www.militaryonesource.mil/crisis-prevention?content_id=268663
5. UMAPIT R.A.C.E. scenarios

ENCLOSURE 1

Open-Ended Questions:

- “What are you most frustrated about?”
- “What other factors are contributing?”
- “I notice you have been (keeping to yourself more)...can you tell me more about what has been going on?”
- “Did you get any sleep at all last night?”
- What are your thoughts about living and dying?