SUICIDE PREVENTION MYTHS AND FACTS

DISCUSSION LEADER'S OUTLINE

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Good morning my name is today we will be talking about Suicide Myths and Facts.

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

You just heard there was a suicide in your buddy's unit. You didn't know the Marine well, but you met and hung out with him a few times. You remember him because he broke his leg in a motorcycle accident a few months ago and the last time everyone hung out he got really drunk and started crying about his wife leaving him. All of you laughed it off when he said "I can't live without her," and told him to find another one. He hadn't hung out with you guys recently so you didn't even know there was a problem. When you asked your buddy about him he said he hadn't seen him much and then out of nowhere you hear he died from suicide.

Key points for this discussion will be:

- (1) Recognize myths and facts
- (2) Discuss the R.A.C.E. method
- (3) Discuss ways to engage and refer a Marine you suspect may be experiencing issues

Learning Objective: After this guided discussion, you will have a better understanding of the myths and facts of suicide.

Note to Facilitator: Discussion continues on Page 2.

DISCUSSION

Facilitator: "I am going to read a statement to you and you will tell me whether the statement is a fact or a myth."

<u>Myths</u>	<u>Facts</u>					
Suicide occurs with little or no warning and	Most people communicate warning signs by					
people who talk about it don't complete the	direct statements, physical signs, emotional					
suicide.	reactions, or behaviors such as withdrawing from friends.					
Don't ask if they are thinking about suicide – it will give them the idea.	Talking about suicide does not increase the risk.					
Once a person is suicidal they are always	Causes of suicide are treatable (depression,					
suicidal.	anxiety, PTSD). With proper support, we can					
	recover from stress related issues.					
Suicidal people are fully intent on dying.	Most suicidal people are undecided about					
	living or dying, which is called "suicidal					
	ambivalence."					
People kill themselves because of a single	Series of unaddressed stressors increase the					
event.	risk factor of death by suicide.					
Once a person attempts suicide, the pain and	Suicidal behaviors are indicators of serious					
shame they experience afterward will keep	issues that require immediate help. Our					
them from trying again.	responsibility is to get the at-risk person help.					
Greatest numbers of suicides occur around	Highest rates are in May and June. December					
holidays in November and December.	shows lowest rate.					
Suicide is not preventable.	Suicide is <i>complicated</i> , yet <i>preventable</i> .					

It is important to note that Men are four times more likely to kill themselves than women. Women attempt suicide three times more often than men do.

KEY POINT 1

What fact or myth was most surprising to you and why?

Now that we've discussed several myths and facts, let's talk about how and when to intervene.

KEY POINT 2

What factors potentially contribute to suicide? This might include events that happen, or an individual's thoughts or feelings.

- Injuries
- Relationship issues
- Depression
- Feeling isolated
- Change in appearance
- Emphasis on feeling unfit
- Change in attitude towards self
- Fear of not meeting Marine Corps standards
- Facing pending judicial or administrative consequences
- Shame

KEY POINT 3

The most important thing to do if you are concerned or recognize warning signs is to TAKE ACTION. If a buddy is suicidal you may not get a second chance to save the Marine's life.

- Ask open-ended questions, i.e., "How are things going? I notice a difference and I am concerned. What is going on in your life?"
- Lend support/be willing to listen.
- Share your Concern for their well-being.
- Employ the R.A.C.E. method. (see below)

Recognize distress in the Marine

Note changes in personality, emotions or behavior.

Ask the Marine

Calmly question and if necessary ask directly, "Are you thinking about killing yourself?"

Care for the Marine

Don't judge, control situation peacefully and keep everyone safe.

Escort the Marine

Stay with your buddy and escort to chain of command chaplain, medical, or behavioral health professional.

Interim Summary: We just finished discussing how to respond to warning signs in a fellow Marine; now let's talk about what resources are available.

KEY POINT 4

What resources are available?

- Peers
- Chain of Command
- Chaplain
- Medical/ MCCS (such as Community Counseling Center)
- DSTRESS Line (1-877-476-7734)

SUMMARY/CONCLUSION

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. You should be alert if you recognize any signs or identify risk factors that may lead to suicide. Watch out for behavior change and take action.

Almost everyone who dies by suicide gives some clue or warning. Do not ignore suicide threats. It is not up to you to judge whether the person is "serious" or not; it is up to you to act using the principles of R.A.C.E. Suicidal behaviors are indicators of serious issues that require immediate help. Our responsibility is to get the at-risk person to help.

Closing Statement: The Marine Corps sees suicide prevention as the responsibility of the entire Marine Corps community. Each of us, as fellow Marines, family members, and friends are responsible for encouraging those who are troubled to seek help while their problems are still small, before they affect their relationships, work performance, career, mental health, or desire to live. Thus, suicide is prevented in your unit by addressing quality of life concerns and watching for "red

flags" on a daily basis. Watching out for each other helps keep us ready to serve.

END OF DISCUSSION

RESOURCES

- 1. MCO 1720.2; MARINE CORPS SUICIDE PREVENTION PROGRAM (MCSPP)
- 2. MCRP 6-11B W/Ch 1, Marine Corps Values: A User's Guide for Discussion Leaders
- 3. MAPIT Guide. Retrieved from http://bhin.usmc-mccs.org/uploads/MAPIT_Guide.pdf