MILITARY ONESOURCE

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Suicide Awareness

Suicide is a serious concern in military communities; service members and their families deal with a great number of stressors. Research shows that strong social connections and a sense of belonging can reduce the risk of suicide. The Department of Defense is committed to taking care of service members and their families and this includes supporting mental health. You can help by paying attention to those around you — or reach out to talk to someone if you feel you can't cope.

Recognizing possible warning signs of suicide risk

You can help reduce the risk of suicide by offering support to those around you, and seeking help if you need it yourself. Keep an eye out for friends, family or coworkers distancing themselves from their community, unit or loved ones. Seek help if a person:

- Talks or writes about suicide, death or ways to die
- Threatens to hurt or kill themselves
- Tries to obtain pills, guns or other means of self-harm
- Suffers a sudden or dramatic change in mood or behavior
- Expresses feeling hopeless or trapped
- Begins preparing a will, giving away possessions or making arrangements for pets
- Suffers from intense rage or desire for revenge
- Increases alcohol or drug use

When a service member may be at risk for suicide

A service member under prolonged, constant stress or who is having a negative experience could be at greater risk for suicide. One or more of the following factors may increase the risk:

- Being a young, unmarried male
- A recent return from deployment
- Combat-related psychological injuries
- Lack of advancement or career setback
- A sense of a loss or honor, disciplinary actions
- Relationship problems
- Grief from loss
- Heavy drinking or other substance use problems
- Mental or medical health problems
- Negative attitude toward getting help

Suicidal people sometimes have mixed feelings about ending their lives and either intentionally or unintentionally signal their intentions. Contact a mental health professional or call the National Suicide Prevention Lifeline at 800-273-8255 if you see warning signs, such as talking or writing about suicide, feeling hopeless or trapped or expressing an intense rage or desire for revenge.

Common misconceptions about suicide

Certain misconceptions about suicide can make it harder to get or give help. Separating fact from fiction can reduce stigma and connect people with support.

Myth: Suicide is planned, not impulsive.

Fact: Research shows it can take less than 10 minutes between thinking about suicide and acting on it. It's important to intervene when someone talks about suicide.

Myth: Owning a firearm is not associated with suicide risk.

Fact: While owning a firearm does not cause someone to be suicidal, having access to a loaded firearm increases the risk of dying by suicide by four to six times.

Myth: Most deaths by firearm in the military happen during combat. Fact: Most firearm deaths of service members – 83% – are the result of suicide.

Myth: A person at risk of suicide will find another method if you take away their firearm. Fact: Research has shown that without access to a firearm or other lethal means, a person who is at risk of suicide will generally not look for other means.

Myth: The rate of suicide in the military is higher than in the general population.

Fact: After controlling for differences in age and sex, military suicide rates are roughly the same or lower than in the U.S. population.

Myth: Deployment increases suicide risk.

Fact: Although it may be a factor for some, studies show that being deployed is not associated with suicide risk among service members.

Myth: The majority of service members who die by suicide had a mental illness.Fact: Less than half of service members who died by suicide had a mental health diagnosis.

Myth: Suicidal behavior is hereditary.Fact: Suicide may occur more often in some families but suicidal behavior is not genetic.

Myth: Only mental health professionals can help those who are at risk of suicide. Fact: Everyone has a role in preventing suicide, including friends, family, fellow service members and community members.

Myth: Talking about suicide will only encourage it.

Fact: Talking about suicide in a supportive way will not lead to suicide. It will give the person an opportunity to express their thoughts and feelings and get connected to the help and support they need.

Ways to help

Reaching out and building connections is an important way to reduce the risk of suicide. If someone you know seems to be struggling you can be there for them in the following ways:

- Be direct. Talk openly and matter-of-factly about suicide.
- Be willing to listen. Allow them to express their feelings. Accept the feelings.
- Be nonjudgmental. Don't debate whether suicide is right or wrong, or whether feelings are good or bad. Don't lecture about the value of life.
- Get involved. Become available. Show interest and support.
- Offer hope that alternatives are available, but do not offer general reassurance such as "It will get better," or "It could be worse."
- Get help from persons or agencies specializing in crisis intervention and suicide prevention.

If you believe a person is in immediate danger of suicide:

- Stay until help arrives. Never leave a person experiencing suicidal thoughts alone.
- Remove any weapons, drugs or other means of self-injury from the area.
- If you're on the phone, try to keep the person on the line while you or someone else calls

911, the <u>Military Crisis Line</u> at 800-273-8255 or the <u>National Suicide Prevention Hotline</u> at 800-273-TALK (8255). Keep talking until help arrives.

If the person is unwilling to accept help, contact command or law enforcement.

If you or someone you know is suicidal or in a state of crisis, you can contact the <u>Military Crisis</u> <u>Line</u> 24 hours a day (800-273-8255 and Press 1). You can also start a conversation via <u>online</u> <u>chat</u> or text (838255).

Note: Military OneSource does not provide medical counseling services for issues such as depression, substance abuse, suicide prevention or post-traumatic stress disorder. This article is intended for informational purposes only. Military OneSource can provide referrals to your local military treatment facility, TRICARE or another appropriate resource.