



# Suicide Prevention: Educating Military Families





# Welcome

## *Moderator*

***Jill Harrington LaMorie, MSW, LSW, ACSW***  
*Director, Professional Education*  
*Tragedy Assistance Program for Survivors*





# Speakers

***Kim Ruocco, MSW, LSW***

Director, Suicide Education and Support  
Tragedy Assistance Program  
for Survivors

***Carla Stumpf-Patton, M.A., P.M.H.C., C.T.***

Founder and Director  
American Foundation for  
Suicide Prevention Sarasota,  
Florida Chapter

***Sergeant Burtan S. LaFleur, USMC***

VMMT-204  
Suicide Prevention Program Officer



# Learning Objectives

- Improve understanding of mental health factors, behaviors, risk factors, protective factors and warning signs of suicide.
- Provide a unique understanding of suicide risk assessment and prevention measures from the perspectives and insights of survivors who have lost a loved one to suicide in the military as well as those in the military who have attempted suicide.
- Identify actions to implement when a military service member is suicidal.





# Continuing Education Credits

- **Certificates of Attendance will be provided for all who attend the entire program and complete the evaluation.**
- **The Association of Professional Chaplains will accept certificates of attendance for use in reporting continuing education hours.**
- **This program is approved by the National Association of Social Workers, provider # 886505639, for 1.0 continuing education contact hours.**
- **Provider approved by the California Board of Registered Nursing, provider # CEP15218, for 1.0 continuing education contact hours.**
- **Please check with your state licensing board for your professional discipline requirements for continuing education.**



# Evaluation

- ALL participants seeking continuing education credits **MUST** fill out the online evaluation within **30 days**.
- You **MUST** provide your state and license number, as well as your email address on your evaluation in order to receive credit. CE certificates will be sent to you via email within 3-7 weeks of completion of the program.
- The evaluation form will appear instantly upon completion the program. The form and can also be found on our website at [www.taps.org/professionaleducation](http://www.taps.org/professionaleducation) once this program is completed.



## QUESTIONS TODAY?

If you have questions during today's program please submit them through the webinar toolbar located at the bottom left of your screen. Time at the end of the program will be dedicated to questions and answers.

To Download a Copy of Today's Powerpoint presentation, click on the toolbar to the left of your screen to **PRINT DOCUMENTS** and **VIEW LINKS**



# The Tragedy Assistance Program for Survivors

(T★A★P★S)

[www.taps.org](http://www.taps.org)

## Our Mission

**TAPS provides ongoing emotional help, hope, and healing to all who are grieving the death of a loved one in military service to America, regardless of relationship to the deceased, geography, or circumstance of the death.**

**TAPS meets its mission by providing peer-based support, crisis care, casualty casework assistance, and grief and trauma resources.**



Major General Mark Graham extending a hand of hope and healing to Billy Ruocco – both suicide loss survivors



Since it's inception, **T★A★P★S**  
has assisted more than 25,000  
surviving family members, casualty officers  
and professional caregivers

FOR MORE INFORMATION or TO  
REFER SOMEONE YOU KNOW:

*[www.taps.org](http://www.taps.org)*

*or*

800-959-TAPS (8277)





# National Suicide Statistics

## Centers for Disease Control- 2005

- 1 suicide every 16 minutes
- 11.01 suicides per 100,000 population
- 3<sup>rd</sup> leading cause of death for 15-24 year olds; 2<sup>nd</sup> leading cause of death for 25-34 year olds
- Males take their own lives at nearly four times the rate of females and represent 79.4% of all U.S. suicides
- Women attempt suicide about two to three times as often as men.
- Firearms are the most commonly used method of suicide among males (57.6%)
- Poisoning is the most common method of suicide for females (39.1%).



# Military Suicide Statistics 2008



- Army
  - 140 suicides – 28 year high
  - 20.2 per 100,000 troops – nearly twice national average of 11 per 100,000
- Marines
  - 41 suicides – up from 25 two years ago; another 146 attempted.
  - 19 per 100,000

Sources: [military.com](http://military.com)

Note: These numbers do not include deaths after individuals have left the military post 120 days.

# Military Suicide Statistics (Cont.)

## 2008

- Navy
  - 41 suicides
  - 11.6 per 100,000
- Air Force
  - 38 suicides
  - 11.5 per 100,000



Source: [military.com](http://military.com)



We are Here Today to Share Our Stories Because



Doing nothing to try and prevent suicide is  
**UNACCEPTABLE**



# “Stupid Solutions: My battle with depression and suicide”

By:

Sergeant Burtan Lafleur, USMC  
VMMT-204 Suicide Prevention Officer



# Who? (My Profile)


- Young, 20 year old, Lance Corporal in the U.S. Marine Corps
- First deployment
- Enlisted for 2 years



# What? (Was Happening in My Life)

- Depressed
- Feeling Alone
- Stress
- Anxiety in a war zone

**SUICIDE AWARENESS & PREVENTION**



**MCSS** WE'RE PROUD TO SERVE YOU

**Semper Fit Health Promotion**  
**Bldg. 302 (Holcomb Blvd.)**  
**910-451-2865**

**Help is just a phone call away...**

24-hour suicide hotline: 1-800-273-8255 or 1-800-784-2433

# Why? (Did I think Suicide)

- Finances....
- Relationship....
- Family....
- Career....



# Going to do it right!

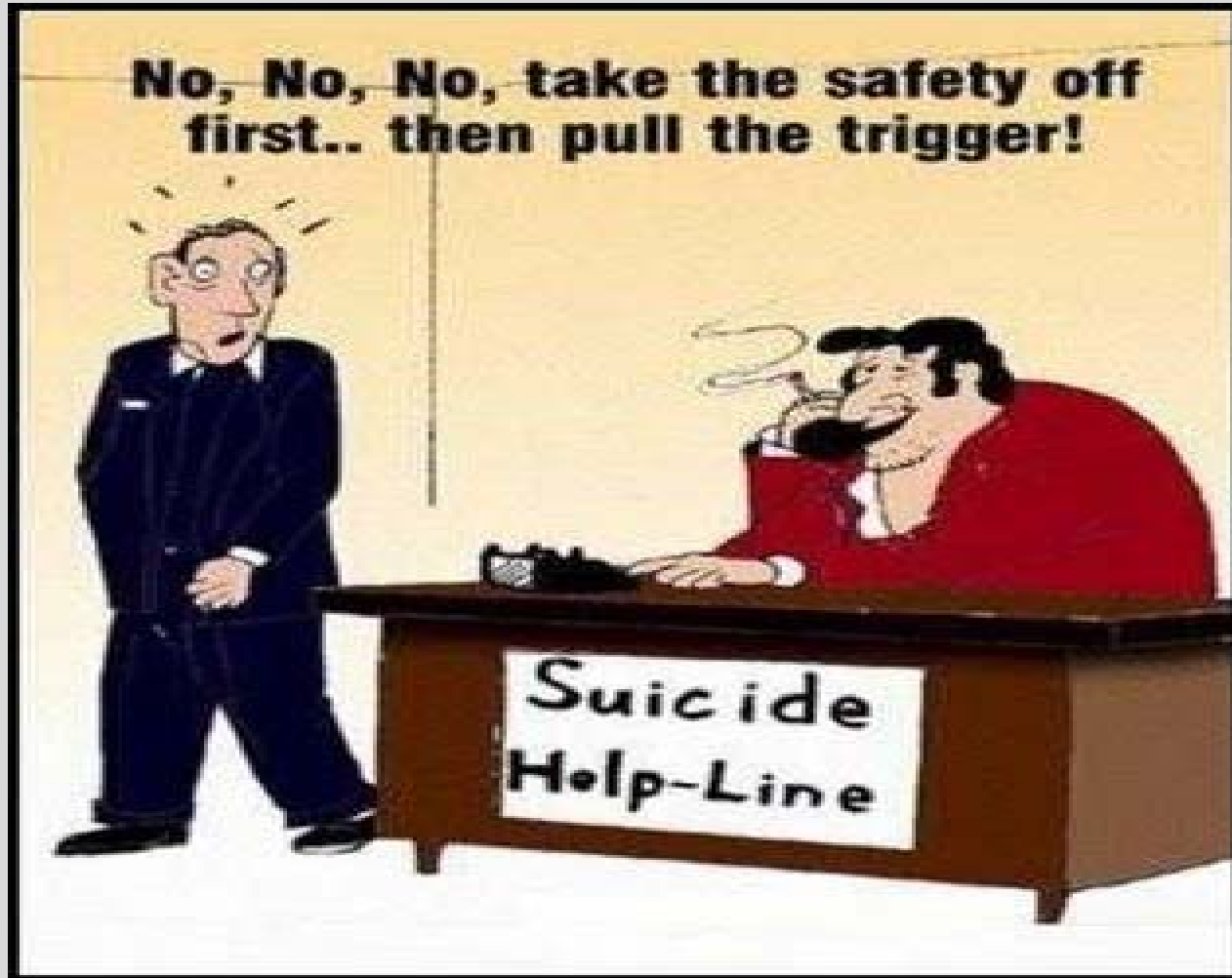
- Waited for right time....
- Issued the weapon I was going to use....
- Hid my emotions....
- Smiled, laughed, joked... threw anyone watching off
- Had the place....

# Busted!

- Mentor caught me in time by a split second
- Rifle and rounds were taken from me
- Sent to see the Chaplain
- Sent to see a Psychologist
- Given a “shadow”
- Lucky save...
- Didn't do any good, there were 499 others
- Didn't take my knives
- Chaplain wouldn't talk to me once he found out about my religion
- Psych helped some
- “Shadow” saw duty as a burden



# The Help I Received



# How did I cope?

## What worked for me....

- What will tomorrow bring???
- Maybe the sun will be brighter.....
- Was it really going to be worth it???
- I'M WORTH MORE THAN THAT!!!

# Me Now....

Invincible!!!!



# I learned???

- ANYONE is at risk for suicide....
- Suicide is never the solution...
- No matter how you feel... tomorrow may have the answer
- There are people who understand...
- I'm stronger
- There is no problem I can't solve

# SUICIDE “Is the Path To The Dark Side”

- Fear Leads to Anger
- Anger Leads To Hate
- Hate..... Leads to  
SUFFERING!!!
- Negative Emotions can  
affect a person's  
mentality
- All can lead to a bad  
night.



# Negative emotions can be influential



- Fear (relationship, financial, professional, personal)
- Anger/Resentment (suicide can be used as a way to “Get back”)
- Sorrow (depression, anxiety, remorse)
- ALL CAN BE CONTRIBUTING FACTORS

# How to watch for Suicide

- Keep your eyes open....
- ASK!!!! Don't be afraid to be insulting!!!
- Watch!! Is someone's behavior changing???
- Has someone mentioned it? Acted? Joked?  
HAVE THEY SAID ANYTHING ABOUT  
COMMITTING SUICIDE!!!
- Remember A.C.E (Ask, Care, Escort)





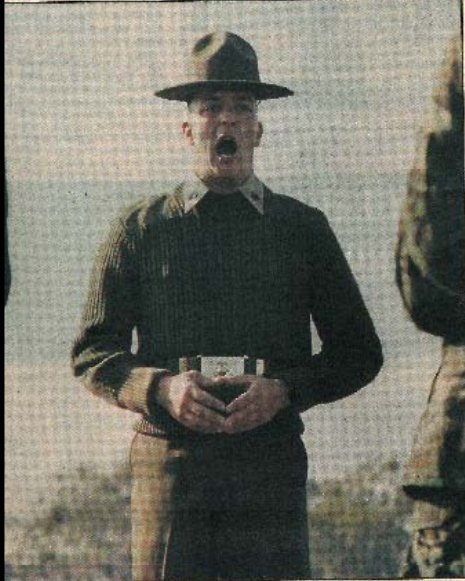
## **“In Memory of Rich”**

**November 25, 1969 ~ October 31, 1994  
Drill Instructor Sgt. Richard Stumpf,  
United States Marine Corps**

*By Carla Stumpf Patton*



# THE MAKING OF A “POSTER MARINE”



**Cover Story**

## They mold Marines

What you need to know to be a D.I.

Story and photos by staff writer Chris Lawson

PARRIS ISLAND, S.C.

**W**hen most people think “Marine,” one image inevitably comes to mind.

The Drill Instructor.

On this inferno island where Marines have been born and bred for 85 years, there is but one kind of Marine who reigns supreme. Whether they wear the green campaign cover or sport the scarlet shoulder cord, Marine Corps drill instructors are what make this place what it is for all enlisted Marines: “Where It All Begins.”

Ironically, while new Marines begin their careers here and at the Corps’ San Diego boot camp, more and more career Marines are coming to the recruit depot to jumpstart their own careers. More than 1,100 Marines are currently serving two-year tours as drill instructors and, in the process, acting themselves apart from their peers in the career force. A successful tour as a DI can mean:

- A shot at meritorious promotion.
- The possibility of medals and other awards.
- Special consideration for future duty assignments.
- The opportunity to directly impact the quality of the Corps.
- A break from the Fleet Marine Force.
- An unmatched feeling of pride and accomplishment.

**Most important job**

diols placed strict new standards on recruit training. Officers were given more oversight control, DIs were given less indiscriminate authority, and more emphasis was placed on selecting only the best Marines to post to the drill field. No one understands that responsibility more than Maj. Thomas Corbett, the director of Parris Island’s Drill Instructor School.

“Being a drill instructor is the most important job in the Marine Corps, bar none,” said Corbett. “He is taking the American youth and making him a basic Marine. That in itself is a tremendous responsibility, but the future of our Corps also depends on how well that job is done.”

Four times each year, Corbett and his 10-instructor staff train classes of NOCs and SNOCs on how to become drill instructors. The students come from all around the Corps, with wide and varied backgrounds. But after 66 days and more than 600 hours of instruction in everything from drill, leadership, general military subjects and more, the students emerge as the epitome of a Marine Corps leader: the DI.

“We rekindle a fire in these Marines. We re-spark those reasons that they originally joined the Marine Corps for,” said 1st Sgt. Richard Arnold, the school’s chief instructor. “They get around other Marines who are motivated and they start ‘OORAHing’ again. They start feeling good and rolling their shoulders back and they want to strut. It’s an amazing transformation.”

**What to expect**

**What:** Sgt. Richard Stumpt, an amtrucker from Camp Lejeune, N.C., said he listed in order to serve on the drill field. “I want to give something back.”

- Military Career, Expectations, and Achievements
- Identity As a Marine: Values, Beliefs, Attitudes, Dreams
- Protective Factors: Married, Family, Friends, Successful, Career, Socially Outgoing, Confident, About to Become a New father, Starting a new family



- “Everything to Live For...” Interpretations, distorted thinking/perceptions, misconceptions
- “Life of the Party”; Outlandish, reckless, impulsive behaviors
- Insight & Judgment as Factors

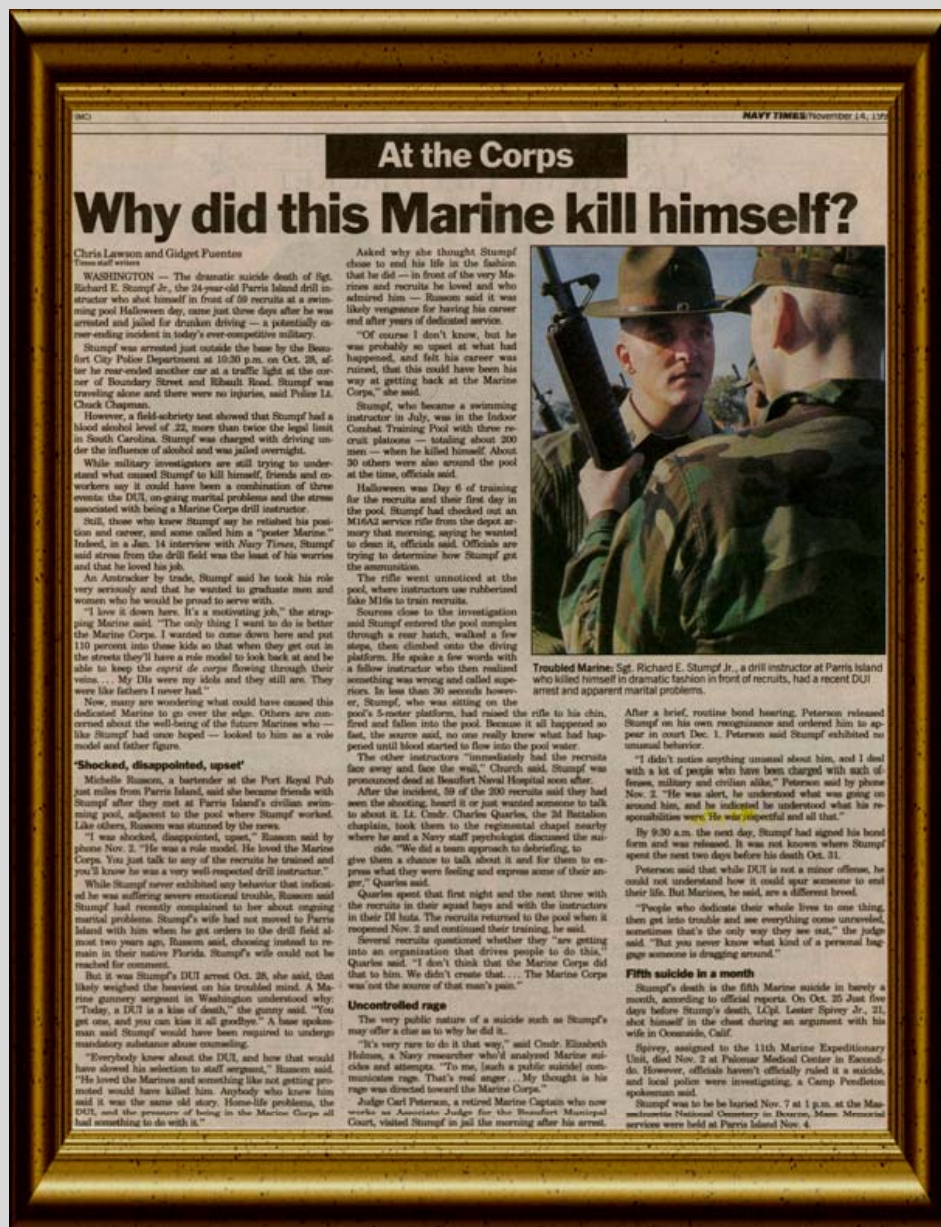


# We always ask “Why?...”

## Warning Signs, Red Flags, & Indicators

### RISK FACTORS:

- Family History of Mood D/O & Substance Abuse
- Early Risk Factors in adolescence (trouble in school, at home, sub. abuse, w/ legal system, etc.)
- Age, Occupation, Combat Status, Stressors in the Military (24 year old, Gulf War Combat Veteran)
- Unresolved prior life conflicts, trauma , and loss





## RISK FACTORS (Continued)

- Lacked strong coping skills; low frustration tolerance, easily overwhelmed under stress
- Decline in performance / impaired functioning in relationships, work performance, finances.
- All began to interfere with identity in USMC Service; The “Perfect Storm of Events” or “process” that led up to suicidal behavior.
- STIGMA’; Fear of admitting need for help and jeopardizing career interfered with help-seeking behaviors.

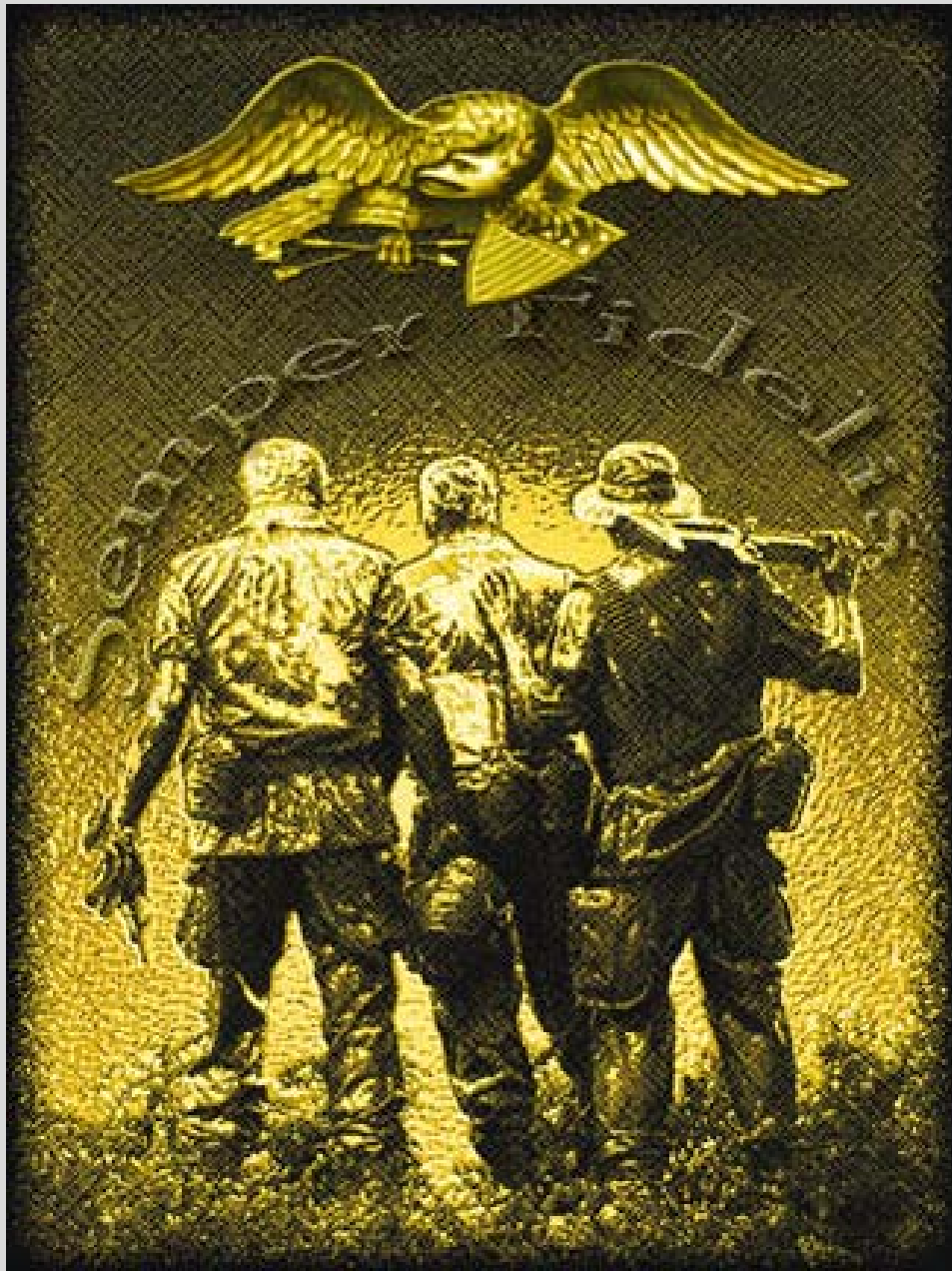
# **“Continuing to Instruct” Lessons Learned in Hindsight..**

## *Personal Reflections:*

- STIGMA; fear that interfered with family seeking help
- Understand the implications of behaviors
- Listen to instincts, address issues directly
- Be aware of resources, course of action to seek support
- Be proactive *before* crisis presents.







- Directly ASK about suicide intent, Saving a life outweighs the risk that they might be angry at you.
- Suicidality cannot simply be “willed” away.
- Suicidality should be equally treated as a medical crisis
- Personal responsibility to share experiences which may save lives.
- My loved one deserves to be remembered with dignity and compassion for how they lived and served their country.

Watch Your Battle Buddy at Home and On the Field....



## **"In Memory of Johnny"**

**Major John Ruocco,  
November 1, 1964~February 7, 2005  
United States Marine Corps**

*By Kim Ruocco*



IRAQ





IRAQ

# Exhaustion







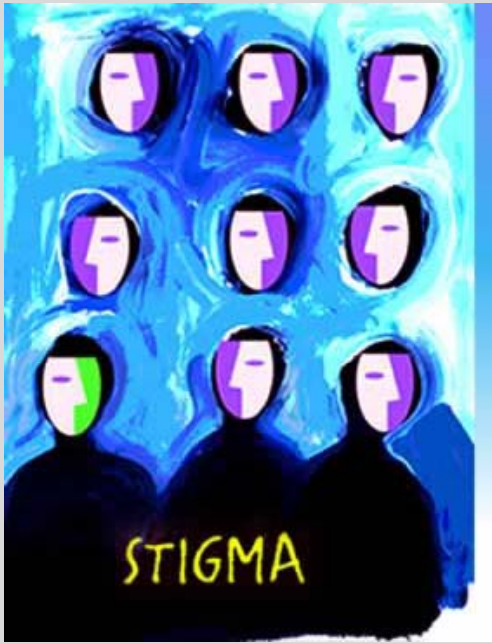
# “The Perfect Storm”





## WARNING SIGNS

- LOSS OF PLEASURE
- SELF DESTRUCTIVE BEHAVIOR
- ANGRY OUTBURSTS
- WITHDRAWAL
- AGITATION
- HOPLESSNESS
- HELPLESSNESS
- SIGNIFICANT CHANGE IN PHYSICAL APPEARANCE



# STIGMA

- LEADERSHIP LANGUAGE AND BEHAVIOR REGARDING HELPSEEKING
- MILITARY IDENTITY
- FEAR OF LOSING RESPECT OF PEERS
- FEAR OF LOSING CAREER OR RANK
- FEAR OF LETTING OTHERS DOWN
- FEAR OF NOT BEING BELIEVED



## Why don't we force them to get help?

- BETRAYAL
- LOSS OF CAREER OR STATUS
- LACK OF KNOWLEDGE OF RESOURCES
- LACK OF KNOWLEDGE OF PROTOCOLS
- UNWRITTEN CODE



**What has our history taught us?**



# You Can't Prevent What Can't Predict





## **Discussion Group**

### *Panelists:*

*Kim Ruocco, MSW, LSW (Suicide Loss Survivor),  
Carla Stumpf-Patton, M.A., P.M.H.C., C.T. (Survivor Loss Survivor),  
Sgt. Burtan LaFleur, USMC (Suicide Attempt Survivor)*

Moderator: Jill Harrington-LaMorie, MSW, LSW, ACSW

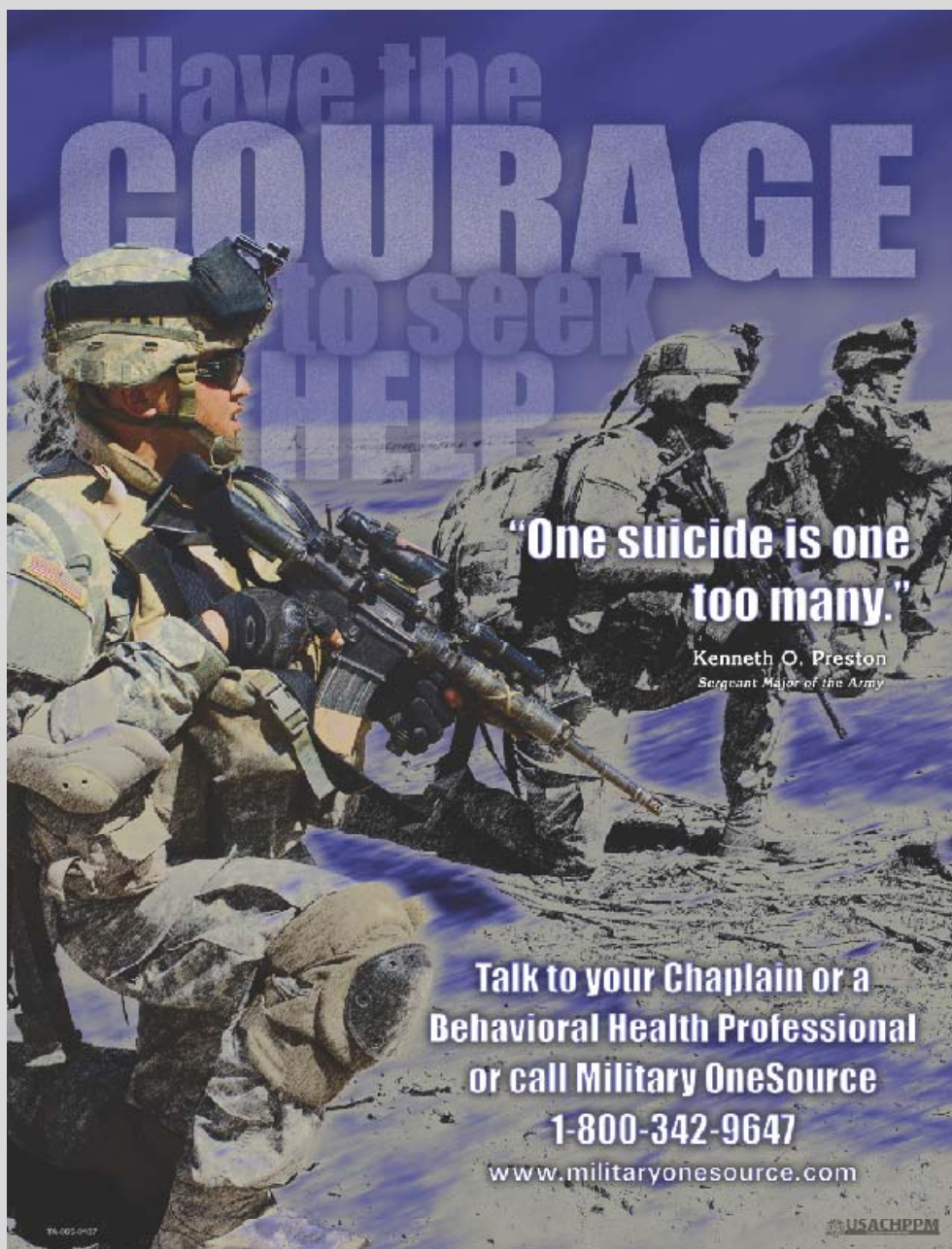


# A.C.E

ASK

CARE

ESCORT



Have the  
**COURAGE**  
to seek  
HELP

**"One suicide is one too many."**

Kenneth O. Preston  
*Sergeant Major of the Army*

Talk to your Chaplain or a  
Behavioral Health Professional  
or call Military OneSource  
**1-800-342-9647**  
[www.militaryonesource.com](http://www.militaryonesource.com)

TA 002-0107

USACHPPM

NATIONAL

**SUICIDE**

**PREVENTION**

LIFELINE™

**1-800-273-TALK**

[www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)



[www.RealWarriors.net](http://www.RealWarriors.net)



When you joined the military, you knew you might face difficult and stressful situations. Combat stress responses can be common responses to uncommon circumstances that are unique to military life. Many times you can successfully deal with this stress and find ways that it can actually help you. Real Warriors can help you recognize the signs of combat stress and when you may need to reach out for help.

# Resources for Prevention, Advocacy, Education, and Outreach

## Military & Government Specific Resources:

- T.A.P.S. (Tragedy Assistance Program for Survivors ): [www.TAPS.org](http://www.TAPS.org)
- DCoE for Psych. Health & Traumatic Brain Injury (Def. Cntrs. of Excellence): <http://www.dcoe.health.mil/default.aspx>
- Real Warriors Campaign (Dept. of Defense & DCoE): [www.RealWarriors.net](http://www.RealWarriors.net)
- Veterans Administration (V.A.) Mental Health : <http://www.mentalhealth.va.gov/>  
(V.A. Suicide Specific Resources : [http://www.mentalhealth.va.gov/suicide\\_prevention/index.asp](http://www.mentalhealth.va.gov/suicide_prevention/index.asp))
- SAMSA Veterans Resources (Sub. Abuse & Mental Health Services Administration : <http://samhsa.gov/vets/>)
- Military One Source , for Military Members, Spouses, Families, & Providers: [www.militaryonesource.com](http://www.militaryonesource.com)
- National Resource Directory (for Military, Veterans, & Family Members): [www.nationalresourcedirectory.org](http://www.nationalresourcedirectory.org)

# Resources for Prevention, Advocacy, Education, and Outreach

## National Organizations and Resources:

- A.F.S.P. (The American Foundation for Suicide Prevention);  
[www.AFSP.org](http://www.AFSP.org)
- S.P.A.N. (Suicide Prevention Action Network , a Division of AFSP): [www.SpanUSA.org](http://www.SpanUSA.org)
- A.A.S. (American Association of Suicidology):  
[www.SUICIDOLOGY.org](http://www.SUICIDOLOGY.org)
- Suicide Prevention Lifeline (Help Lines & Crisis Centers) :  
[www.SuicidePreventionLifeline.org](http://www.SuicidePreventionLifeline.org)



# Clinicians, Crisis Workers, Team Leaders, Professional Caregivers

## **“ETHICAL & PROFESSIONAL RESPONSIBILITIES”**

- Above all else, we must protect and promote the welfare of the population served by fully understanding the dynamics of suicide prevention, intervention, and postvention.
- One must uphold standards for ethical, legal, and professional competencies at all times, while doing what is in best interest of the person(s) being served.
- Acquire additional and continued trainings. Consult, Collaborate, and/or Refer when needed.
- Be Cognizant of Personal Biases, Values, & Beliefs; Practice According to Best Practices & National Standards.
- Attend to Self-care, Address Personal Trauma and Losses, both Past and/or Present. Know when you need to get help.
- Work in collaboration with all gate keepers (Commands, Spouses, Parents, Clergy, MP's, Counselors, Doctors, Civilians, etc); Use universal language, and present in a team support effort as a united front.

**For more information and  
resources for support, please  
contact TAPS at 1-800-959-8277 or  
[www.taps.org](http://www.taps.org)**



**QUESTIONS**

# Thank You for Joining Us



To receive credit or certificate of attendance, fill out an evaluation of today's program at:

[www.taps.org/professionaleducation](http://www.taps.org/professionaleducation)

**This evaluation must be completed within 30 days.**

Please join us for our next webinar on September 14, 2009, 12PM-1PM EST featuring:  
*Brigadier General Loree Sutton, Director of the Defense Centers of Excellence for Psychological Health & Traumatic Brain Injury, "Reducing Mental Health Stigma"*  
Registration will begin next week: [www.taps.org/professionaleducation](http://www.taps.org/professionaleducation)