

FACILITATOR NOTES

The Department of Air Force (DAF) and Headquarters Air Force Materiel Command (HQ AFMC) recognize that Suicide Prevention must be prioritized to promote core values, reinforce healthy behaviors, and establish social norms to increase resilience of the total force.

1. The objective of AFMC Connect is to provide an opportunity for meaningful conversations to occur within our units – resulting in stronger connections and increased unit cohesion.
2. This month serves as your unit’s annual Suicide Prevention Training and creates an additional opportunity for increased connection on an important topic.
3. Training: Attend an AFMC Connect facilitator training offered through your Integrated Resilience Office (IRO) to help navigate the best way to deliver small group sessions and clarify questions on the Suicide Prevention (SP) content. NOTE: Have your (IRO) provide you with a list of local support resources to handout during your session.
4. **Before starting training, please provide the following disclaimer:**
This topic may be difficult to discuss; those of you with a personal experience with suicide may find it hard to participate today. Please feel free to step away at any time.
5. For additional information the full implementation guidance is available and includes local points of contact:
<https://www.afmc.af.mil/connect>

STRESS V. DISTRESS

We all deal with stress throughout our lifetimes. Not all stress is bad; some stress helps us survive and keeps us alert. Often, those who struggle managing or coping with stress have difficulty finding or seeing a positive outcome in their situations.

Stress is a feeling of emotional or physical tension. It can come from an event or a thought that makes you feel frustrated, angry, or nervous. Some individuals cope with stress better than others, but it can be managed and its effects lessened. However, being stressed for prolonged amounts of time can lead to distress.

Distress occurs when an individual is unable to adapt to one or more stressors, is no longer successfully coping within their environment, or their well-being is compromised. During distress is when depression and desperate thinking are more readily experienced. An individual in distress is in a state of extreme anxiety, sadness, anguish, worry, sorrow, or emotional pain.

Some stressors that can lead to distress are: Extended deployments, financial problems, a life-threatening diagnosis or debilitating illness, death of a loved one, filing for divorce, being neglected/abused, and feeling burnt out.

Discussion Question:

Can you tell me the difference between stress and distress?

RESPONSE: Stress is something that can/could be managed while distress is what happens when someone cannot take any more stress.



RECOGNIZE SIGNS OF DISTRESS

Risk factors are circumstances, characteristics or certain conditions that may increase the likelihood that someone may think about, attempt, or die by suicide. Examples include isolation, history of depression, relationship problems, financial challenges, substance misuse, serious illness, history of trauma, etc.

Warning signs for suicide are often observable and can be different for every person. The common indicator you can look for is change. Friends, family, coworkers, and leaders are important sensors because they are often the first to notice these changes and signs. Warning signs can be early or more immediate and will require different ways to intervene depending upon the category under which they fall.

Early warning signs include impulsivity, mood swings, misuse of alcohol, talking about being lonely, trouble concentrating, etc. Immediate warning signs indicate current suicidal ideation or thoughts with a strong intention to act or plan. They include threatening to hurt themselves, talking about wanting to hurt themselves, talking about death or dying, and unexpected communications that sound like a “goodbye”.

Discussion Question:

What is the difference between early warning signs and more immediate warning signs?

RESPONSE: Early warning signs show that a person is in distress and may be looking for help or support, while immediate warning signs may indicate that a person is now thinking suicide is a viable option or already has a plan.

SUICIDE PREVENTION CONTINUED

PROTECTIVE FACTORS

Suicide is preventable, and we all play a part in building or enhancing protective factors. **Protective factors** are characteristics that reduce the likelihood someone will consider, attempt, or die by suicide. They include behaviors, environments, and relationships that support and enhance our resilience.

We can build protective factors through simple actions focused on increasing connectedness, belonging, and positive norms in our work centers where early help-seeking is supported and encouraged.

Protective factors also include coping strategies that increase our own resilience. It is important for us to take care of ourselves to take care of those around us. Examples of protective factors include being proactive about seeking mental health care, building a sense of community, strengthening personal resilience, building an ability to cope and problem solve, and connecting with others.

Connectedness helps us recognize signs of stress and distress earlier in others as well as ourselves.

Discussion Questions:

1. What are some things you could do to support a positive culture or create healthier norms in our work center?

RESPONSE: Encourage work/life balance, self-care, make sure everyone feels included, share local resources regularly, etc.

2. What are some activities we can do to build connectedness?

RESPONSE: Join a group/club activity (running, hiking, book club), be thoughtful and willing to listen to each other, team lunch, “unofficial” check-ins, celebrate successes and support each other’s challenges.

3. Are there other healthy coping or problem-solving skills that could help with stress?

RESPONSE: Positive self-talk, practice reflection or mindfulness, promote a growth mindset, encourage kindness and empathy

TIME-BASED PREVENTION

Limiting access to and encouraging safe storage of lethal means contributes to creating safe environments and can help reduce the risk of serious injury or death.

Time-Based Prevention (TBP) places a strong emphasis on creating life-saving time between those who are suicidal and proper storage of lethal means.

“**Go SLO**” is a DAF TBP campaign representing three recommended options for lethal means storage: in Safes, with Locks, or outside of the home.

4. **SAFES.** Store firearms in proper storage safes.
5. **LOCKS.** Use cable locks when firearm is not in use.
6. **OUTSIDE.** Use local armories or ranges with storage options outside the home.



TIME + DISTANCE

Putting time and distance between a suicidal person and a lethal means of suicide may save a life. The odds of survival go up for **three** reasons:

- 1 A personal crisis is often brief.
- 2 Lethality of an attempt often depends in part on the method (e.g., firearms, drugs/medications, etc.).
- 3 90% of those who attempt suicide and survive, do not attempt suicide again.

If someone you know is at risk, help reduce access to lethal means until they are no longer in distress.

Discussion Question:

What are some other examples of lethal means that we should be aware of?

RESPONSE: Medications, rope/cords, cleaning products, sharp objects, etc.

INTERVENTION

Intervention is an important step. Intervention converts bystanders into active, caring allies that address the issue. The bigger picture to suicide prevention is to provide services and support before challenges become overwhelming. Make time for daily connection; even the smallest moment can have a big impact for someone experiencing stress/distress.

Be genuine, there is no special training to show you care. Foster a culture of help seeking behavior, and if you notice warning signs in someone, talk to them.

When you notice elevated warning signs, start with **ACE (Ask, Care, Escort)**. ACE is an easy acronym to remind you of the steps to take when you become concerned about someone you know.

Ask your teammate “Are you thinking of harming yourself?”

Care for your Teammate by actively listening and not judging.

Escort your Teammate to the appropriate support resources right away.

Discussion Question:

What support resources would be available if you need to escort a peer who is in distress?

RESPONSE: Commander, First Sergeant, Mental Health, 988 Suicide Crisis Lifeline, Medical Provider, etc.