

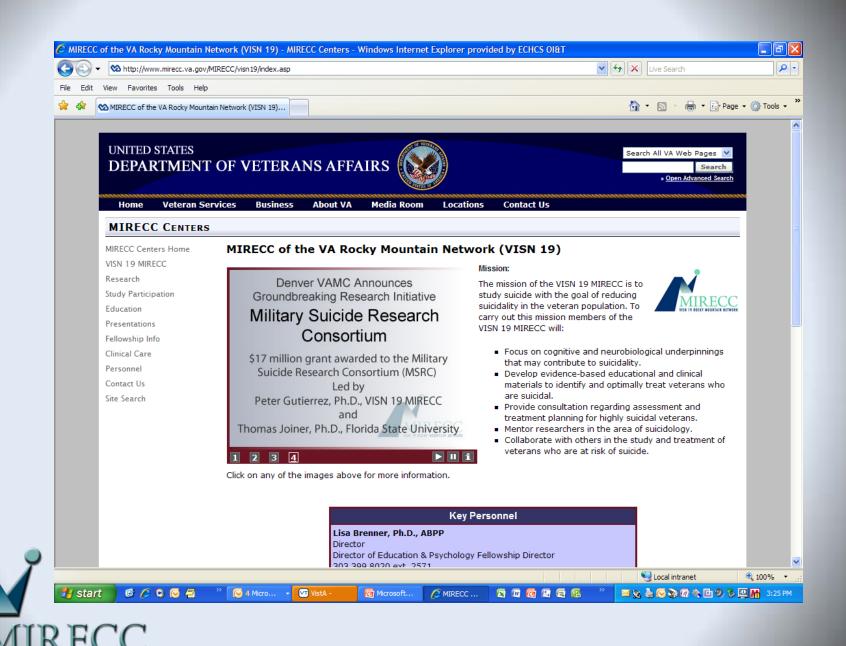
# Department of Veterans Affairs and Community Partnerships: An Update

Pamela Staves, COL (Ret.) RN, MS, NP

VISN 19 Mental Illness Research Education and Clinical Center

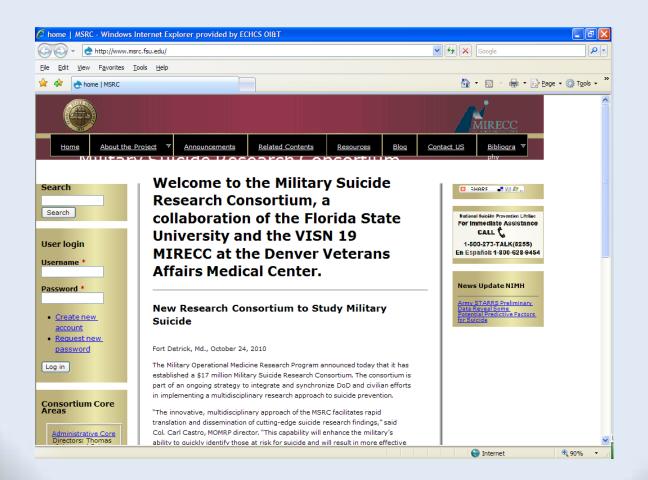
Military Suicide Research Consortium

Bridging The Divide Summit May 20, 2011



# Military Suicide Research Consortium (MSRC)

http://www.msrc.fsu.edu/

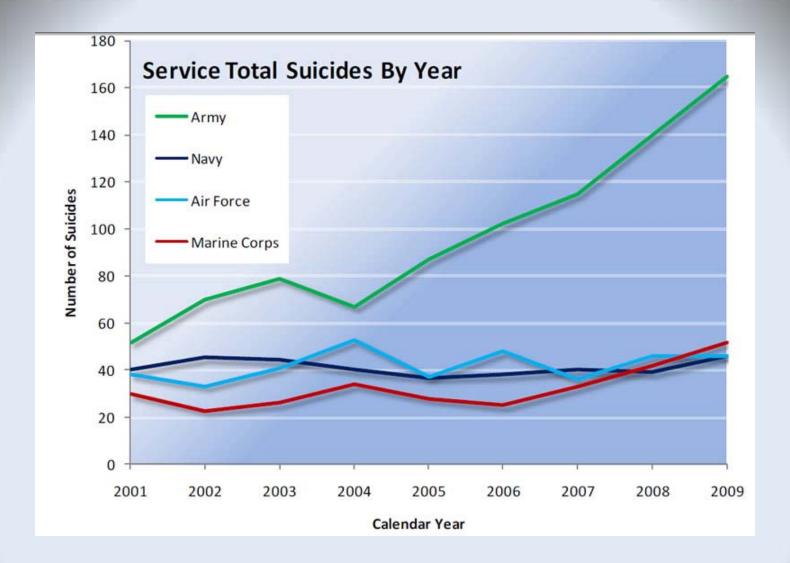


## **Objectives**

- Identify resources to learn about VA/DoD projects and research related to suicide
- Describe three "skills" from Battlemind Training that demonstrate an understanding of military culture
- Identify three products in development for the assessment, evaluation and treatment of suicidal behaviors

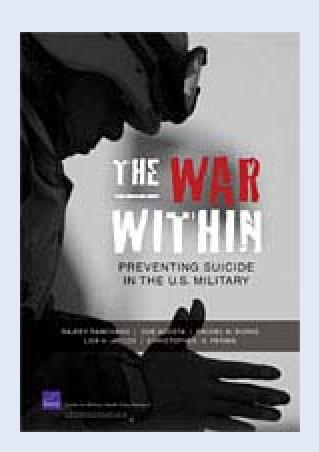
## Suicide in the Military







http://www.health.mil/dhb/downloa ds/Suicide%20Prevention%20Tas k%20Force%20final%20report%2 08-23-10.pdf





www.rand.org



The Challenge and the Promise: Strengthening the Force, Preventing Suicide and Saving Lives

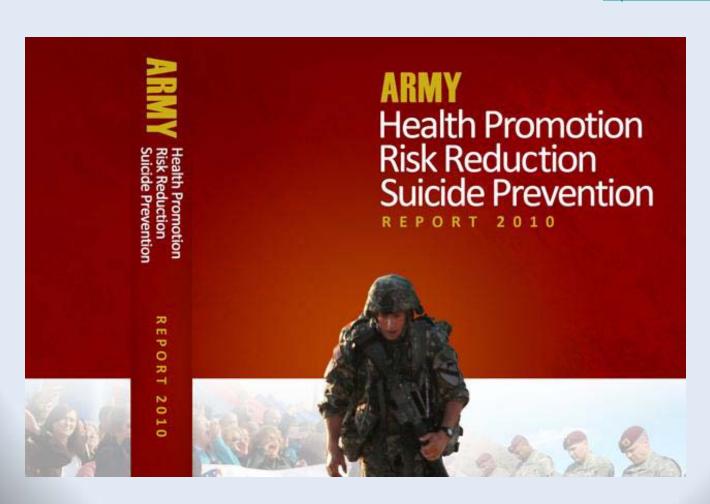
Final Report of the Department of Defense Task Force on the Prevention of Suicide by Members of the Armed Forces

August 2010



http://www.health.mil/dhb/downloa ds/Suicide%20Prevention%20Tas k%20Force%20final%20report%2 08-23-10.pdf

http://www.army.mil/news/2010/07/28/42934-armyhealth-promotion-risk-reductionand-suicide-preventionreport/index.html



## Introduction to Military Culture

- Are there any military personnel/veterans present today?
- Does anyone present today have family or friends in the military?
- Is anyone present today involved in health care?
- What is the latest media report you've heard talking about military suicide?













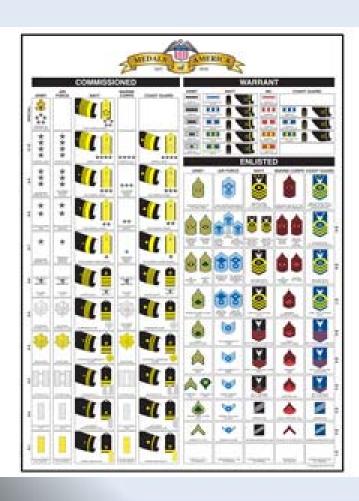


#### **Military Ranks**

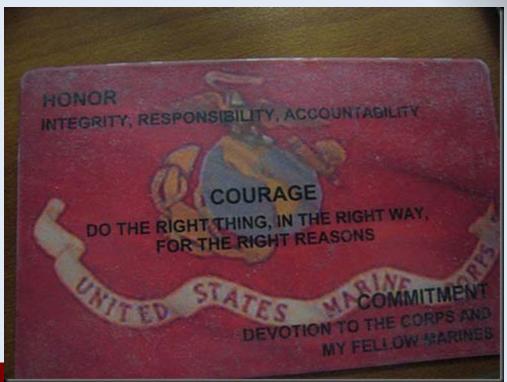
are more than just who salutes whom.

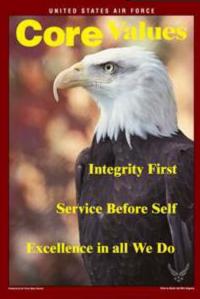
Military rank is a badge of leadership.

Responsibility for personnel, equipment, and mission grows with each increase in rank.













Honor Respect, & Devotion to Duty

#### MISSION OPSEC VS. SECRETIVENESS

#### In Combat:

 You talk about the mission only with those who need to know; you can only talk about combat experiences with unit members.

#### At home:

- You may avoid sharing <u>any</u> of your deployment experiences with your family, spouse and friends.
   TRANSITIONING THE COMBAT SKILL:
- OPSEC: the "need to know" now includes friends and family.

#### Battlemind Check (self and buddy):

- Haven't shared your deployment experiences with those closest to you?
- Get angry when someone asks about your deployment experiences?

#### INDVIDUAL RESPONSIBILITY VS. GUILT

#### In Combat:

 Your responsibility is to survive and do your best to keep your buddies alive.

#### At home:

- You may feel you have failed your buddies if they were killed or seriously injured.
- You may be bothered by memories of those wounded or killed.

#### TRANSITIONING THE COMBAT SKILL:

 Responsibility in combat involves making life and death decisions in the heat of battle; at home, it is learning from these decisions without second quessing.

#### Battlemind Check (self and buddy):

- · Certain memories of the deployment keep bothering you?
- Still feeling guilt about things that happened in combat?

#### Non-defensive (COMBAT) vs. AGGRESSIVE DRIVING

#### In Combat:

 Driving unpredictably, fast, using rapid lane changes, straddling the middle line and keeping other vehicles at a distance is designed to avoid IEDs and VBIEDs.

#### At home:

 Aggressive driving leads to speeding tickets, accidents and fatalities.

#### TRANSITIONING THE COMBAT SKILL:

 Combat driving is necessary to avoid danger in the combat zone, but is dangerous at home, even though it may "feel right".

#### Battlemind Check (self and buddy):

- Chasing adrenaline highs by driving fast?
- Involved in driving accidents?
- · Easily angered while driving?

#### DISCIPLINE & ORDERING VS. CONFLICT

#### In Combatt

Survival depends on discipline and obeying orders.

#### At home:

 Inflexible interactions (ordering and demanding behaviors) with your spouse, children and friends often lead to conflict.

#### TRANSITIONING THE COMBAT SKILL:

 Giving and following orders involves a clear chain of command which does not exist within families and friends.

#### Battlemind Check (self and buddy):

- Relationships are not going well?
- Ongoing conflicts over decisions?

#### THE ALCOHOL TRANSITION

#### In Combat

Alcohol use was limited.

#### At home:

Alcohol is now plentiful.

#### THE TRANSITION:

- . Many Soldiers use alcohol as a way to cope with deployment
- · experiences, but this is not healthy. Learn to relax without it.
- Battlemind Check (self and buddy):
- Using alcohol to calm down or help you sleep?
- Others telling you that you are drinking too much?

#### MYTHS & FACTS OF MENTAL HEALTH

Myth 1: Only weak Soldiers have mental health problems.

Fact: Everyone is affected by combat.

Myth 2: If a Soldier has a problem, he/she will get help.

Fact: Most Soldiers do not get help because of stigma.

Myth 3: A fellow Soldier's mental health problems are none of

Fact: Soldiers most often turn to other Soldiers when they need help. Leaders are responsible for helping Soldiers.

Myth 4: The Army doesn't support Soldiers with mental health problems.

Fact: There are multiple ways to get help.

Myth 5: No one can help me if I have a mental health problem.

Fact: Professional treatment helps, the earlier the better.

#### MENTAL HEALTH RESOURCES

Unit: Buddies, Leadership, Chaplain

Post: Troop Medical Clinic, Behavioral Health Service Off-Post: Civilian Doctor or Mental Health Professional, VA

> Army/Military One Source: 1-800-342-9647 www.armyonesource.com

#### Battlemind Training was developed by the WRAIR Land Combat Study Team

POC: LTC Carl A. Castro, carlcastro@us.ammr.ml (301) 319-9174

The coinlons and views expressed here are those of the Land Combat Study Team, and do not necessarily reflect those of the U.S. Army or the Decaytment of Defense.

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## Battlemind Training II



#### Continuing the Transition Home



Training Timeframe: 3-6 months after deploymen (Reconstitution)





Walter Reed Army Institute of Research (WRAIR) U.S. Army Medical Research and Materiel Command

#### $\blacksquare$

## The Transitioning Warrior

## From "War zone" to "Home zone"

- Battlemind is the Servicemember's inner strength to face fear and adversity in combat with courage.
- Combat skills and battle mindset sustained your survival in the *war-zone*...
- But Battlemind may be "hazardous" to your social & behavioral health in the *home zone...*



## **Combat Skills You All Possess**

- Battlemind skills helped you survive in combat, but may cause you problems if not adapted when you get home.
  - **B** Buddies (cohesion) **vs.** Withdrawal
  - Accountability vs. Controlling
  - Targeted Aggression vs. Inappropriate Aggression
  - Tactical Awareness vs. Hypervigilance
  - Lethally Armed vs. "Locked and Loaded" at Home
  - E Emotional Control vs. Anger/Detachment
  - Mission Operational Security (OPSEC) vs. Secretiveness
  - Individual Responsibility vs. Guilt
  - Non-Defensive (combat) Driving vs. Aggressive Driving
  - **D** Discipline and Ordering vs. Conflict
  - Battlemind Checks allow Servicemembers and their Buddies to identify if and when help is needed.

# Vignette # 1 Driving

www.Battlemind.org



## How Do We Mitigate the Effects of Combat with the ultimate goal of reducing suicide in the Military?

- Recognize Problems Early
- Education/ Training
- Research
- Effective Interventions
  - Medical
  - Social
  - Mental Health
  - Spiritual
  - Cultural



## **Education**









## NEVER LEAVE A MARINE BEHIND

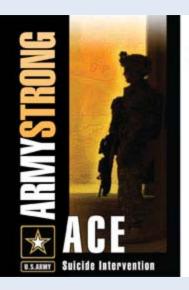
www.usmc-mccs.org/suicideprevent

PCN:50100435000

Distribution Statement A: Approved for public release: distribution is unlimited

## **Ace Cards**







#### Ask your buddy Have the courage to ask

- the question, but stay calm
- Ask the question directly, e.g., Are you thinking of killing yourself?

#### Care for your buddy

- Remove any means that could be used for self-injury
- Calmly control the situation;
   do not use force
- Actively listen to produce relief

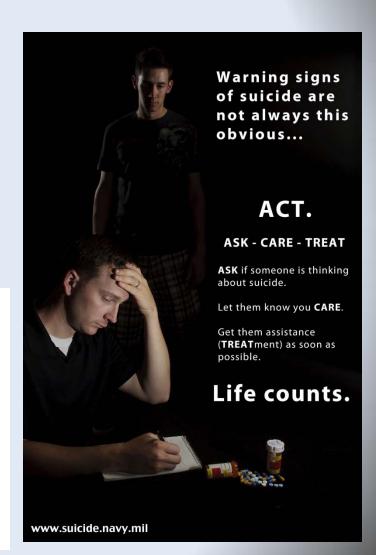
#### Escort your buddy

Never leave your buddy alone
 Escort to the chain of

 Escort to the chain of command, a Chaplain, a behavioral health professional, or a primary care provider

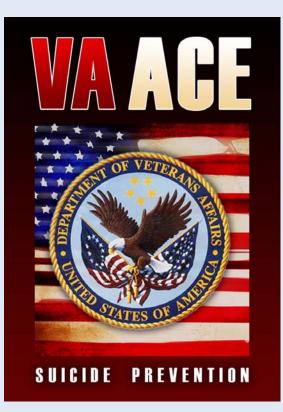
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## VA ACE CARDS

- These are wallet-sized, easily-accessible, and portable tools on which the steps for being an active and valuable participant in suicide prevention are summarized
- The accompanying brochure discusses warning signs of suicide, and provides safety guidelines for each step





#### Ask the Veteran

- · Ask the question:
  - Are you thinking about killing yourself?
  - Do you think you might try to hurt yourself?
- Ask directly

#### Care for the Veteran

- Remove any means that could be used for self-injury
- Stay calm and safe
- Actively listen to show understanding and produce relief

#### Escort the Veteran

- Never leave the Veteran alone
- Escort to emergency room or medical clinic
- Call VA Suicide Prevention Hotline

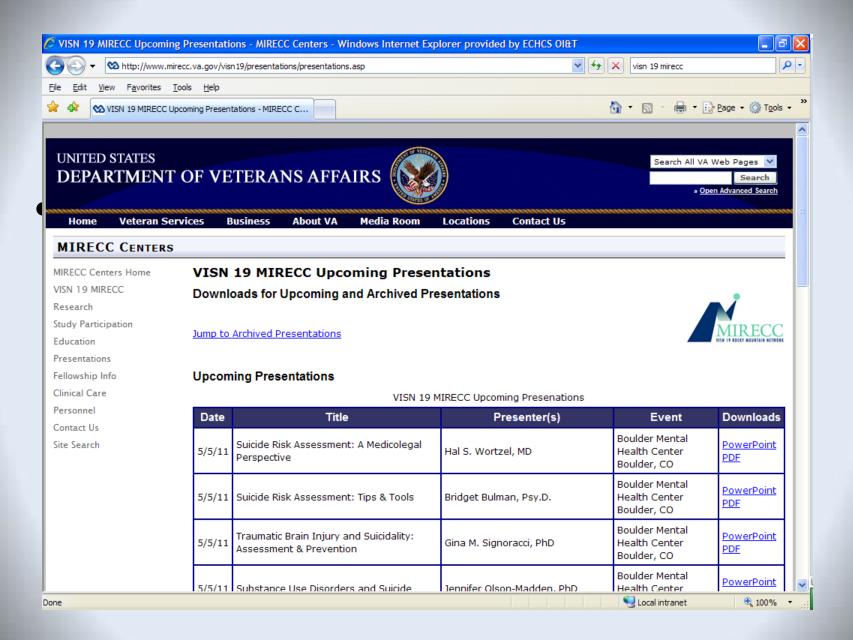


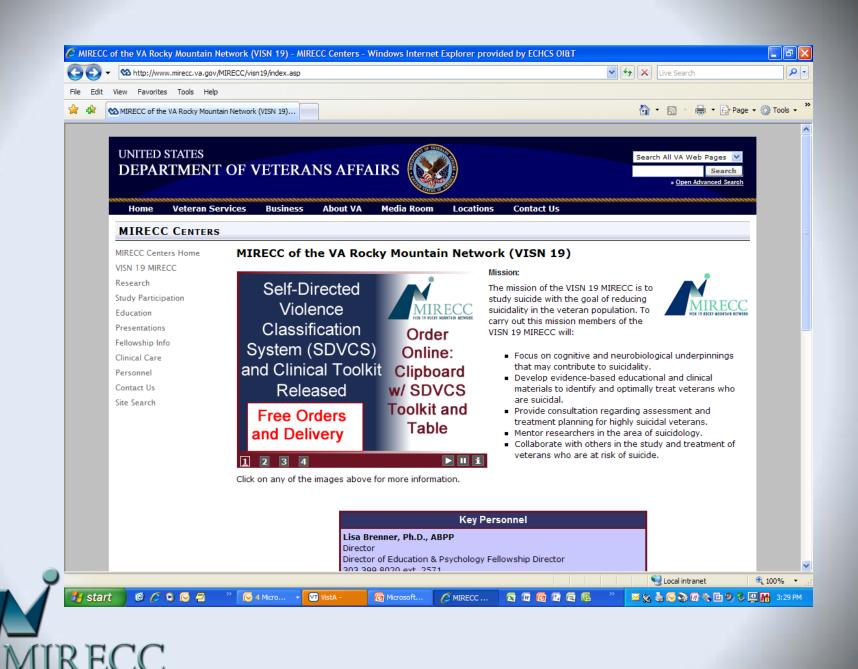


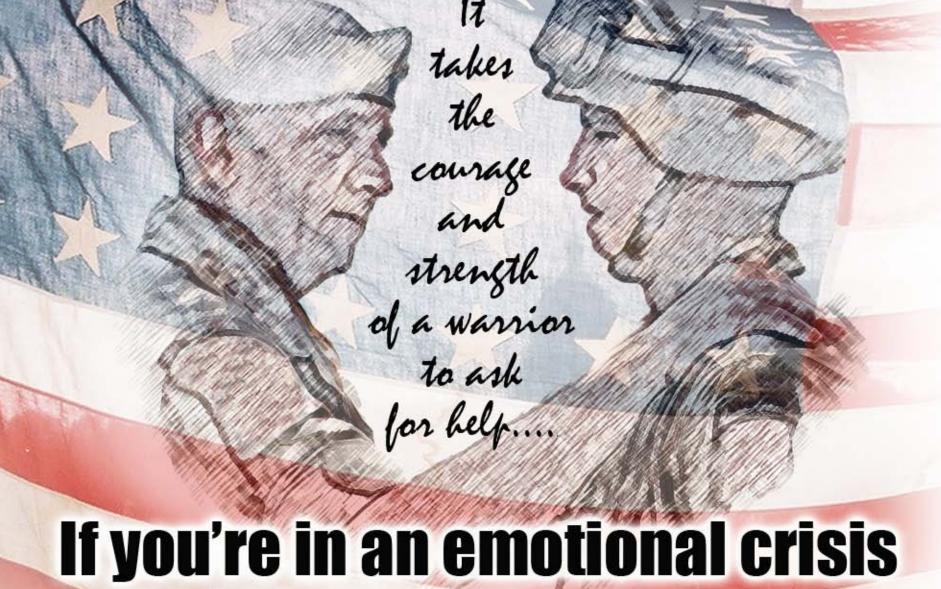
Front view

Back view

Prevention Hotline - 1-800-273-TALK(8255)







# call 1-800-273-TALK "Press 1 for Veterans"

www.suicidepreventionlifeline.org

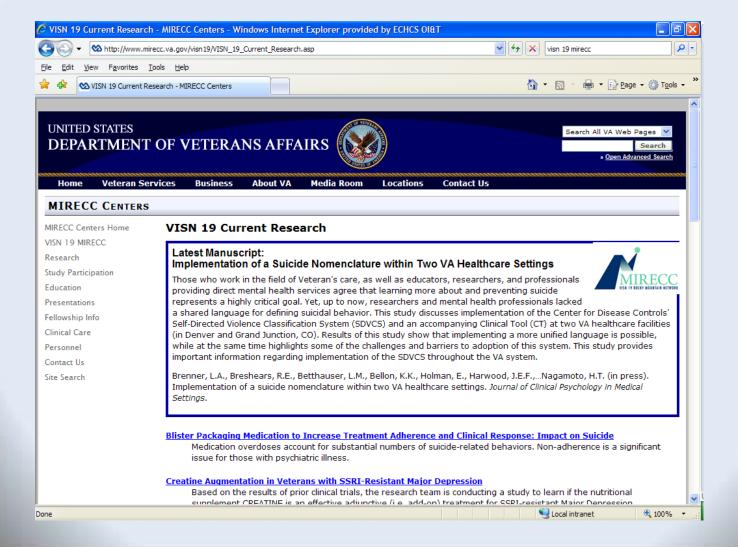


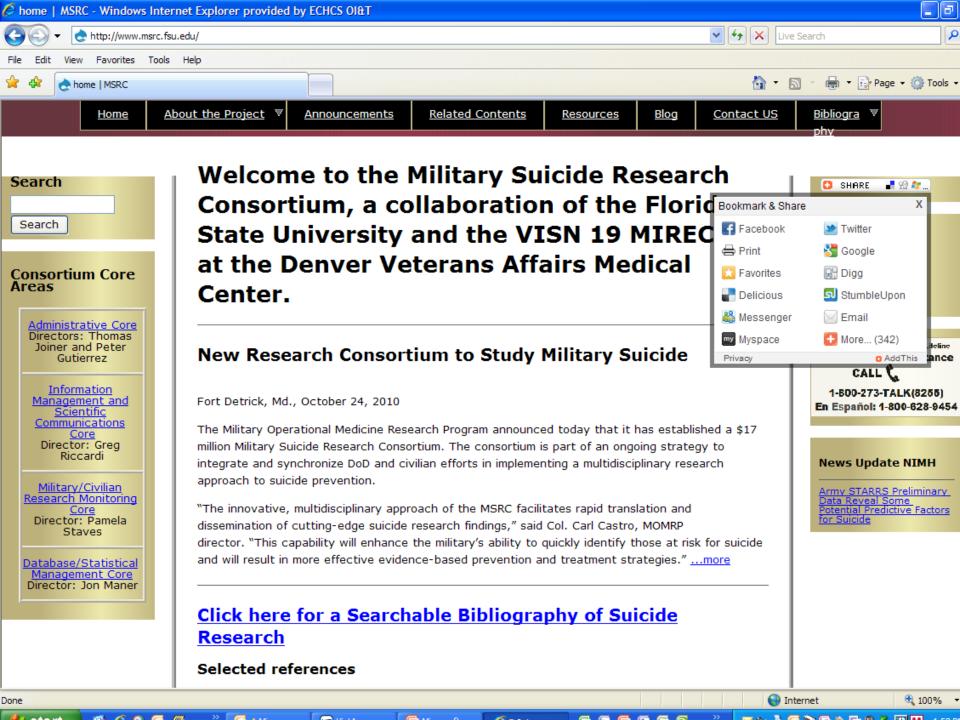


1-800-273-8255



## Research





## **Review**

- Suicidality is a complex dynamic process
- At this time there is no one strategy or intervention to predict/prevent behaviors
- Military Culture is an important variable
- Education materials/programs are readily available
- Research is ongoing



# We invite you to contact us and/or visit our websites

- www.mirecc.va.gov/MIRECC/visn19/index.asp
- www.msrc.fsu.edu

## Thank you

Pamela.Staves@va.gov



# Use Your Smartphone to Visit the VISN 19 MIRECC Website

### **Requirements:**

1. Smartphone with a camera

2. QR scanning software (available for free download just look at your

phones marketplace)



## www.mirecc.va.gov/visn19







