



ACT

SUICIDE PREVENTION PROGRAM

Navy Breakout Session

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OPNAV N135H
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Order of Magnitude

The odds greatly favor life over death



Things you did or said probably influenced others to live – you probably never realized it



Factors Seen In Navy Suicides

Relationship problem	>60%
Work-related problems	27-50%
Discipline/legal action	21-39%
Physical health problems	10-35%
Financial problems	16%

- Relationship breakups
- Transitions (pending separation / PCS)
- First 6 months after deployment

- >80% suicides on liberty or leave (only 4% on deployment)
- About half of suicides deaths used firearms
- About half of non-fatal attempts used drug ingestion (>60% did not have firearms around)

- Feeling ineffective, burdensome, not belonging
- Acquired capacity to inflict lethal harm

History

- About 1/5 had treatment or counseling ongoing or historic
- Suicide Exposure via family or recent workplace:
- 10% Death of significant other: 9%

Stressors

Disrupted Social Network

Judgment Factors

- **Anger** - argument or confrontation within 24 hours of death
- **Alcohol** – about 1/3 likely used alcohol near the time of death
- **Sleep Deprivation** - sleep problems linked to suicide

Access to Lethal Means

Compressed Intervention Window

- From case reviews - there can be a short time between suicide thoughts and action
- Overt warning signs may not be shown or are seen too late to intervene
- **A family member or significant other were most likely to know the Sailor was having problems or was suicidal**
- Almost 2/3 of non fatal attempters had not planned in advance to attempt suicide – they just acted on a thought.

Distorted Thinking + Lethal Action

Reference
DODSER and case review by OPNAV N135



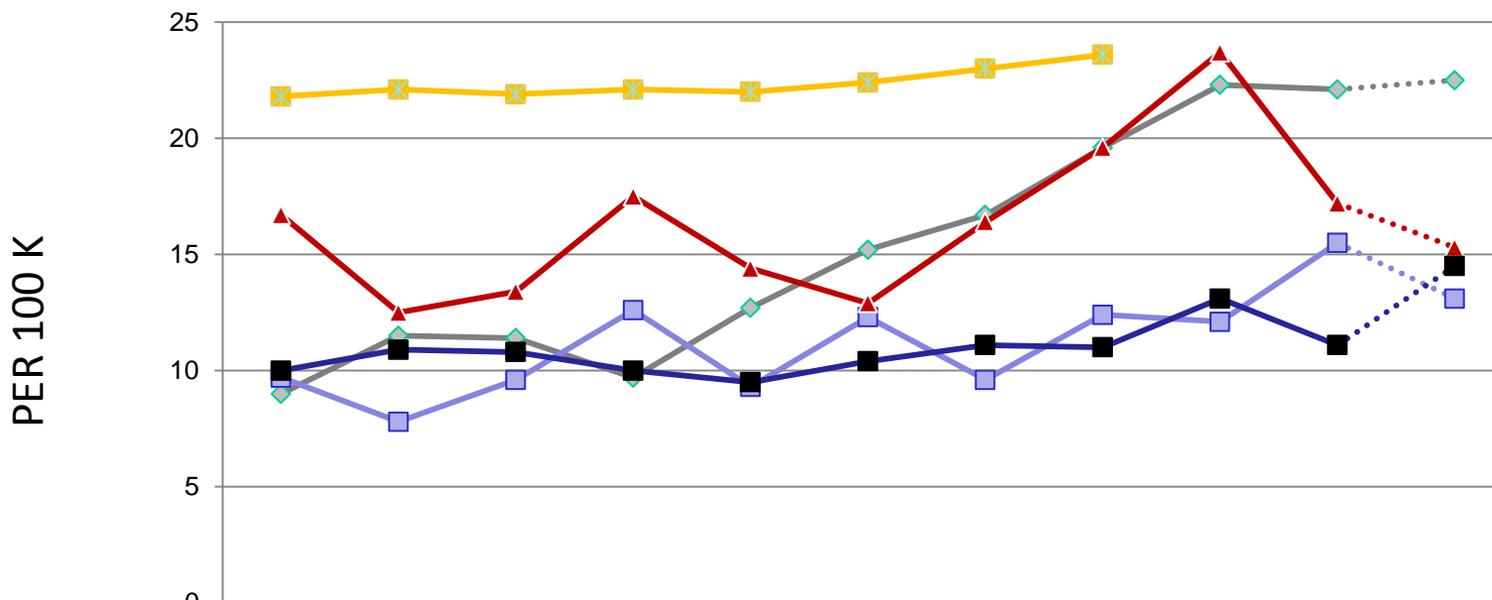
Suicide Rates: Past 20 Years

NAVY ACTIVE DUTY SUICIDE RATE PER 100K PER YEAR 1991-2011

* 2011 preliminary rate includes suspected cases pending confirmation



All Services Suicide Rates 2001-2011

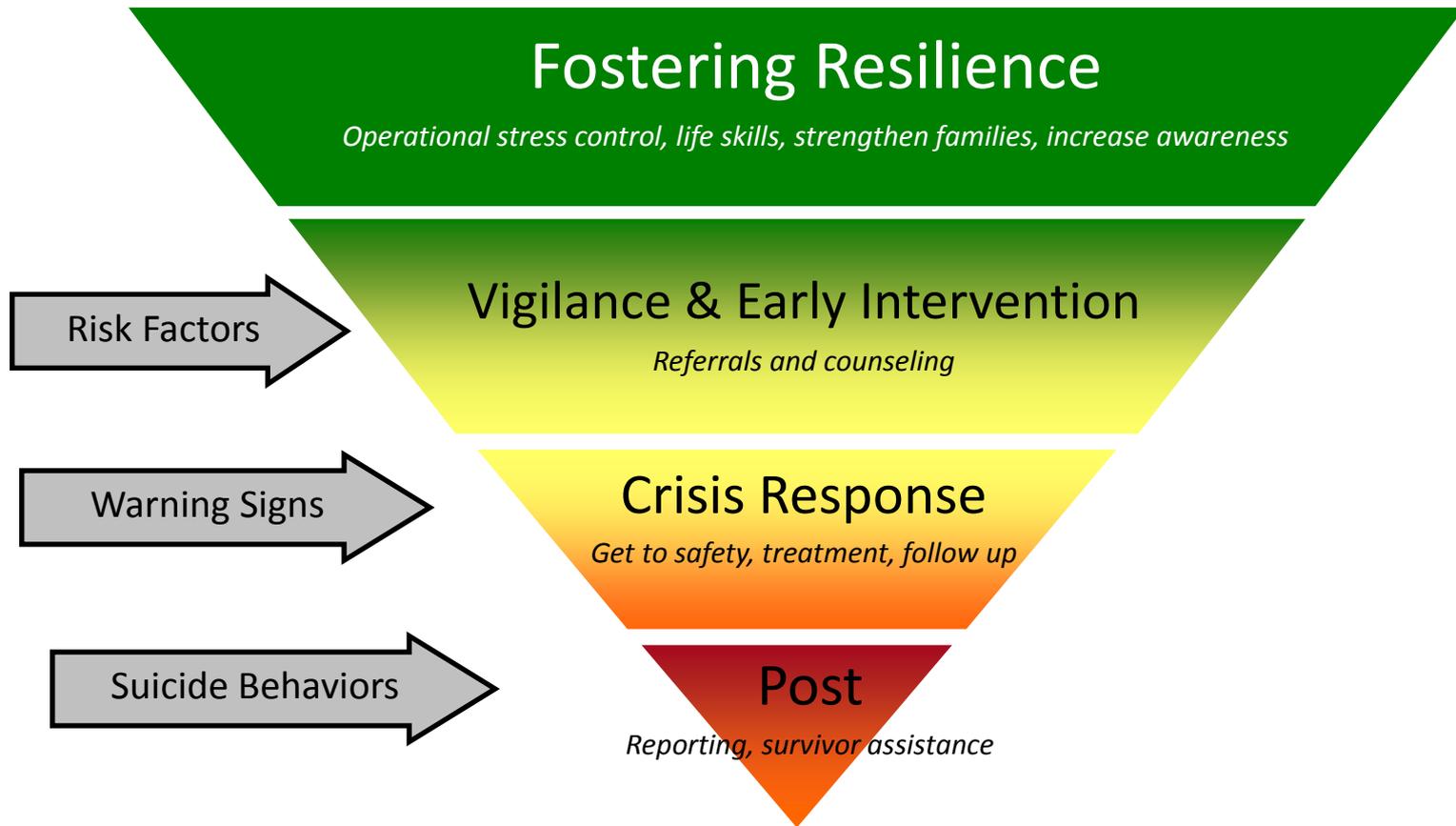


	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
◆ Army	9	11.5	11.4	9.7	12.7	15.2	16.7	19.6	22.3	22.1	22.5
□ Air Force	9.7	7.8	9.6	12.6	9.3	12.3	9.6	12.4	12.1	15.5	13.1
▲ Marine Corps	16.7	12.5	13.4	17.5	14.4	12.9	16.4	19.6	23.7	17.2	15.3
■ Navy	10	10.9	10.8	10	9.5	10.4	11.1	11	13.1	11.1	14.5
✕ US Civilian (Males ages 17-60)	21.8	22.1	21.9	22.1	22	22.4	23	23.6			

* 2011 numbers are preliminary rate estimates



Navy Program Approach



Enabling Local Action



2011 Needs Assessment Data Call

- 95% of Commands had all hands training in past 12 months
- 58% of Commands have a trained Suicide Prevention Coordinator
 - 8% have outdated training (2008 or older)
- 59% of Commands have a written Crisis Response Plan
 - 25% last updated 2010 or before

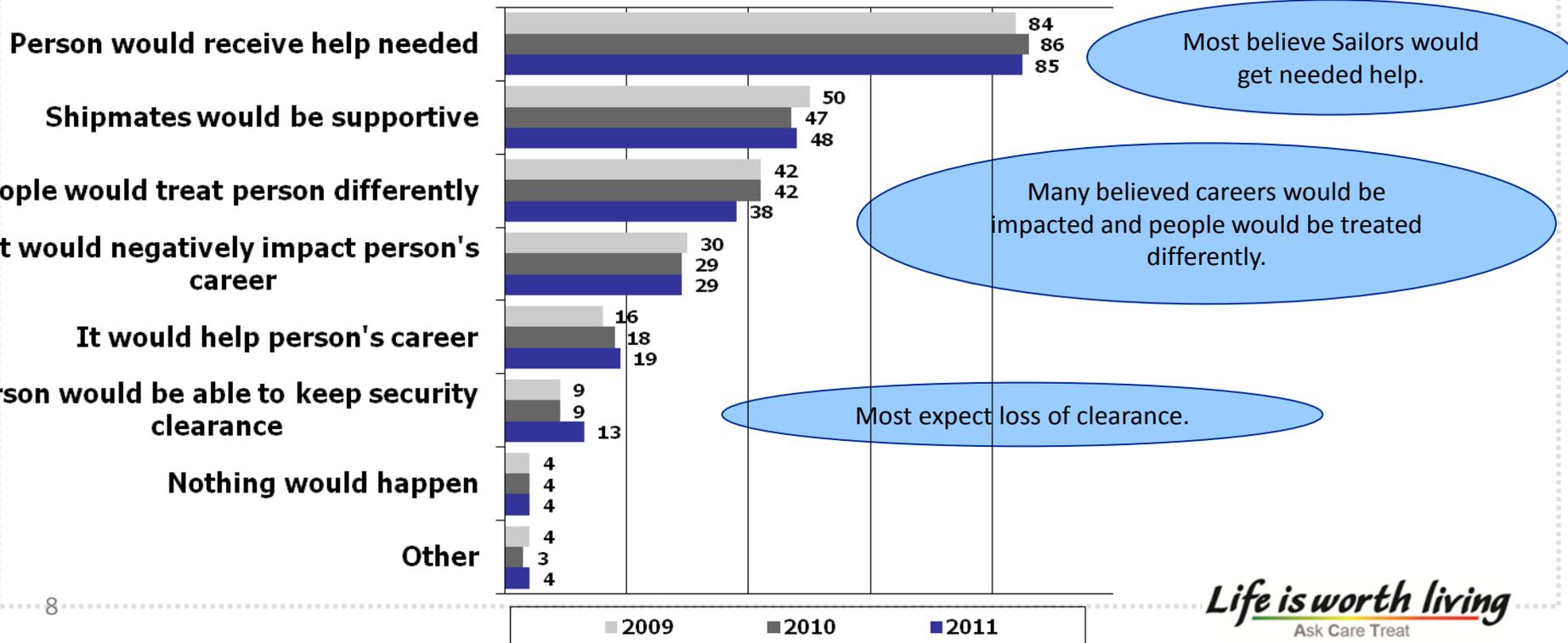


Behavioral Health Quick Poll 2011

88% of Sailors were trained
 84% of Sailors know Ask-Care-Treat
 75% prefer live trainers

More than 90% of Sailors feel they know what to do
 67% know their Suicide Prevention Coordinator (SPC)

If a Sailor sought help from the Navy for suicidal thoughts or actions, what would be the likely results?



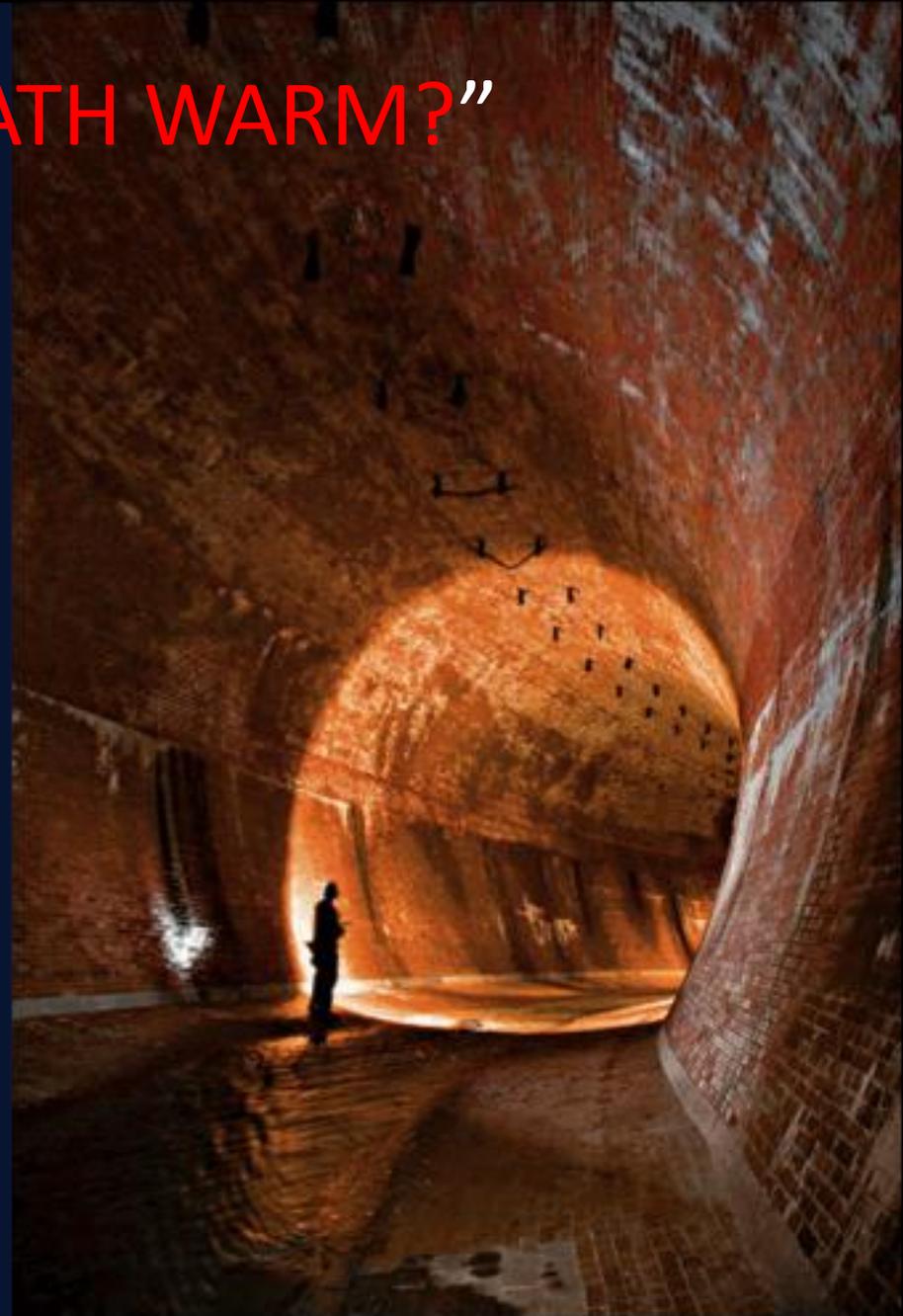
WARNING SIGNS: “IS PATH WARM?”

I IDEAS
S SUBSTANCE USE

P PURPOSELESS
A ANXIETY
T TRAPPED

H HOPELESS

W WITHDRAWAL
A ANGER
R RECKLESS
M MOOD CHANGES





Training

- GMT
- Suicide Prevention: A Message From Survivors
- Front Line Supervisor Training
- Peer to Peer Training

- ASIST



Targeted Training

- Assessment and Management of Suicide Risk (Mental Health)
- Navy JAG Training
- Suicide Prevention Coordinator
- **First Responder**
- **Primary Care Provider Training**
- **Public Affairs Officer Training**
- **....Chaplain Training**



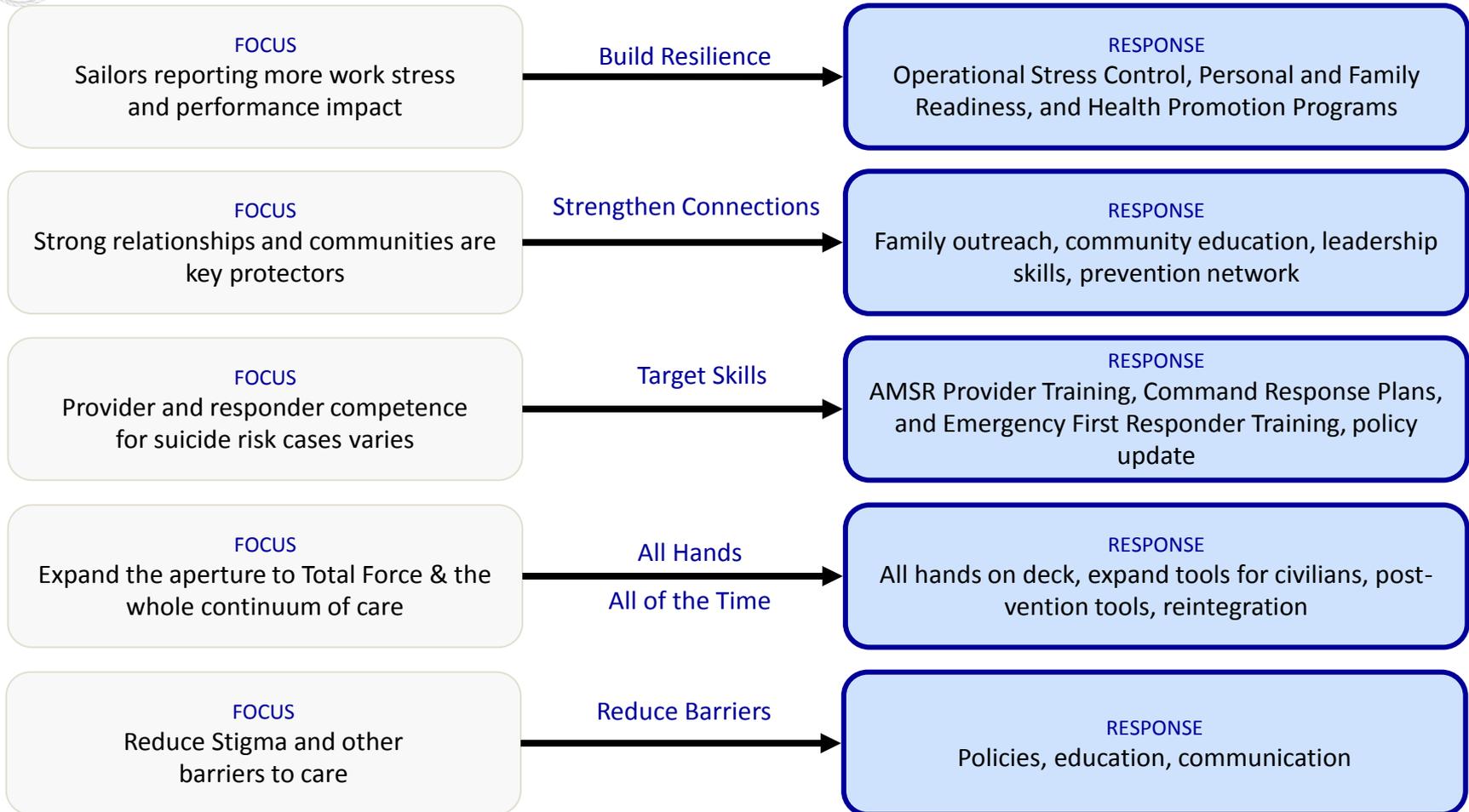
Communications and Resources



- www.suicide.navy.mil
- CO's Toolkit
- Navy Logistics Library



Strategic Focus – Navy Suicide Prevention



Lives Worth Living



Shipmates

Take Care Of Shipmates



Take care of our people - our families - the mission.



Training Objectives

- Conduct and integrate suicide risk assessments into routine office visits
- Reinforce skills and confidence in working with individuals at risk for suicide
- Recognize co-occurring physical and mental health issues that impact suicide risk
- Manage at-risk individuals through changes in practice patterns
- Work collaboratively with patients to create treatment plans based on level of risk
- Identify the elements to be included in documentation of assessments, treatment plans, and communications to the Commanding Officer



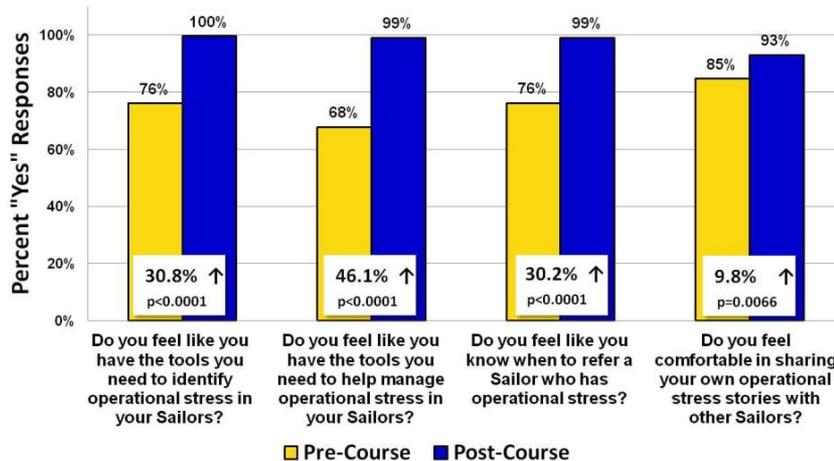
OSC Wavetops

NAV OSC Leader (4-hour course)

- USS TRUMAN, first large deck to receive 4-hour course
- 9 classes, over 220 Sailors trained
- Overall positive results and comments
- CO said training “exceptionally beneficial”
- West Coast carrier scheduled for training in late June

- Command Stress Assessment
 - Taken with every command climate survey
 - Over 120K Sailors, civilians, contractors taken since 1 Nov
 - *Initial analysis indicates:
 - 72% reported some or a lot of work stress
 - The higher the perceived stress, the less likely to report seeking help for stress
 - Stress and number of hours of sleep are negatively correlated
 - Stress is correlated with other DEOCS elements (sexual harassment, low trust in organization, poor workgroup cohesion, etc.)
 - Report of aggregated initial findings expected in late June

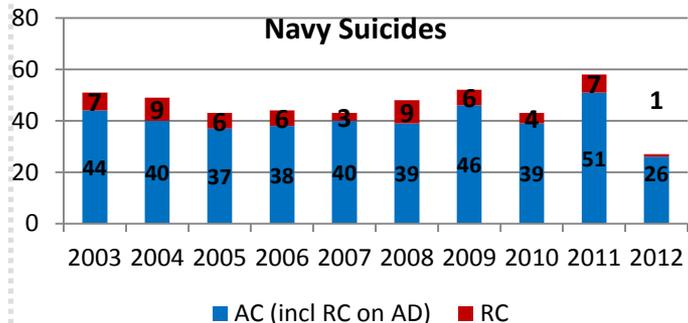
Indicators: USS Harry S. Truman (9 Courses) 16 April - 04 May 2012



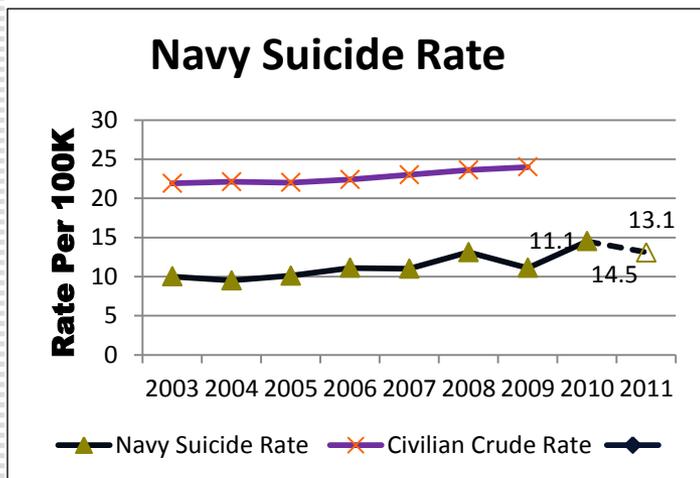


Suicides Snapshot

Average of 3.8 suicides per month on AD last 12 months



JUNE 2012 Update									
Date	Demographics						PTS*	Deploy History**	Probable Stressors***
	Age	Grade	Rating	Gndr	Mar Sts	Assigned to			
6/1	29	O1	6442	M	Mar	LPD	NA	R	TBD



Suicide Related Behaviors
 CY12: 847 = 831 + (16)
 CY11: 1,906 = 1,892 + (14)

NOTE: Data for SELRES not on AD in parentheses
 All other data reflect AC + RC on AD

*PTS
 AC=Appr conv, AFTS=Appr FTS, AIR=Appr in rate, AS=Appr SELRES
 BW=Beyond window for TIS,
 FD=(Final Sep (denied), FI=Final Sep ineligible)
 NA=Not applicable FVOL=Final Sep (vol), LR=Looks Remaining,
 NIW=Not in window,
 ERB=selected for separation at ERB
 SECB=selected for separation at Senior Enlisted Continuation Board

** Deployment History
 N=None, O=On, P=Prior (>6mos), R=Recent (< 6 mos.) BOG (Boots on Ground)

*** Probable Stressors
 D=Discipline, F=Fina, LE=Life Events, MH= Med Hist, R=Relationship, SA= Sub Abuse, SEP=Separation, W=Work

2011 = preliminary rate

Life is worth living

Ask Care Treat
 4 JUN 2012 Source: OPNAV N135



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	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
CY12	5 (1)	6 (0)	4 (0)	5 (0)	4 (0)	8 (0)							32 (1)
CY11	4 (0)	8 (0)	5 (2)	5 (0)	6 (0)	3 (0)	2 (1)	4 (1)	4 (0)	4 (2)	1 (0)	5 (1)	51 (7)

Suicide Related Behaviors

CY12: 847 = 831 + (16)

CY11: 1,906 = 1,892 + (14)

Suicides YTD

CY12: 33 = 32 + (1)

CY11: 33 = 31 + (2)

Suicide Rates (per 100K)

(12 Mo) Jun 11 – May12: 13.1

(CY11) Jan 11 – Dec 11: 14.5

Service Comparison

USN: 52 / 14.6

USMC: 32 / 14.7

USAF: 50 / 13.3

USA: 167 / 22.3

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Navy Suicide Demographics

	2008	2009	2010	2011	2012YTD
Male	38	44	37	50	21
Female	1	2	2	1	3
Caucasian	27	32	29	34	16
Hispanic	6	4	5	9	2
African American	2	7	2	4	5
Asian/PI	3	3	1	3	1
Native American	1	0	1	1	0
Other	0	0	1	0	0
17-24	17	14	22	14	12
25-34	14	21	9	24	7
35-44	4	8	8	11	5
45+	4	3	0	2	0

	2008	2009	2010	2011	2012YTD
E1-E3	11	5	15	7	7
E4-E6	23	32	18	35	10
E7-E9	2	7	3	4	2
W-03	2	1	2	3	5
O4-O6	1	1	1	2	0
Gunshot	21	21	17	30	15
Asphyxiation	11	15	13	15	8
Ingestion	1	1	4	4	0
Carbon Monoxide	2	4	1	1	0
Jumping	0	2	2	1	1
Stabbing/ Cutting	2	3	2	0	0
Unknown /	2	0	0	0	0

** 2012 deaths include suspected suicides pending final medical examiner determination of cause of death.*

YTD 4 June 2012

Suicide demographics generally reflect Navy's population distribution



Assessing Effectiveness

All Commands

Requirements

- All Hands Training
- Suicide Prevention Coordinator
- Crisis Response Plans

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MOP

800+ SPCs trained since the assessment (FY12)

Parentheses indicate SELRES not on duty

Risk Target

- JAG Defense Counsel, Prosecutors, and Legal Assistance Counselors trained in JAG alert intervention in CY11
- TPU leadership trained in awareness of transition risk CY12
- Primary Care Provider training in pilot for 2012 delivery
- Installation First Responder training

MOP

1000+ mental health providers
Assessment and Management of Suicide Risk trained in CY11

Effects

Awareness of Stress Continuum increased from 61% in 2009 to 75% in 2011

85% of Sailors believe a person will get help if they seek assistance from the Navy - but most expect negative career effects

88 % of Sailors say they know what to do if someone talks about suicide

