

Suicide Prevention: A Guide for Military and Veteran Families

If you think a loved one is suicidal, you may be feeling scared and helpless. But you and other family members are often able to tell when a loved one is in crisis, because you know that person best. And there are ways you can help. ***This guide will help you recognize when someone is at risk for suicide and understand the actions you can take to help.***

1. Be Supportive, Active and Aware

Helping a person through a suicidal crisis is a team effort. Professionals can provide your loved one with guidance and therapy. Your role is to:

- Be aware of warning signs
- Know how to contact emergency help when needed
- Be supportive and non-judgmental to your loved one
- Stay involved, ask questions and express your concerns to professionals

2. Know the Common Warning Signs for Suicide

There are sometimes signs that warn that a person has an increased chance of attempting suicide in the near future. If you see one or more of these **DIRECT** warning signs, your loved one needs to see a professional **right away**.

Three DIRECT warning signs are most suggestive.	These signs are even more dangerous if the person:						
<table><tr><td>Writing or talking about suicide, a wish to die, or death</td><td><ul style="list-style-type: none">■ "I would be better off dead."■ "I have no reason to live."■ "Everyone would be happier if I weren't here."</td></tr><tr><td>Buying or storing things that can be used for suicide</td><td><ul style="list-style-type: none">■ The purchase or collection of medications, guns and ammunition, or other weapons■ Searching the internet for methods of suicide</td></tr><tr><td>Preparing for their own death</td><td><ul style="list-style-type: none">■ Making sure that children, pets, elderly parents will be cared for■ Updating wills, making financial arrangements for paying bills■ Saying goodbye to loved ones■ Giving away possessions</td></tr></table>	Writing or talking about suicide, a wish to die, or death	<ul style="list-style-type: none">■ "I would be better off dead."■ "I have no reason to live."■ "Everyone would be happier if I weren't here."	Buying or storing things that can be used for suicide	<ul style="list-style-type: none">■ The purchase or collection of medications, guns and ammunition, or other weapons■ Searching the internet for methods of suicide	Preparing for their own death	<ul style="list-style-type: none">■ Making sure that children, pets, elderly parents will be cared for■ Updating wills, making financial arrangements for paying bills■ Saying goodbye to loved ones■ Giving away possessions	<ul style="list-style-type: none">■ Has attempted suicide before■ Has a family member or close friend or battle buddy who died by suicide and/or■ Plans to use, and has access to, an effective method (e.g., gun)
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Other **INDIRECT** warning signs that should cause concern include:

- Substance use - increase or excessive use (alcohol, drugs, cigarettes)
- Hopelessness - like nothing can be done to improve a situation
- Purposelessness - feeling no sense of purpose, no reason for living
- Anger - rage, seeking revenge
- Recklessness or risky behavior
- Feeling trapped or stuck in a bad situation, with no way out
- Social withdrawal - staying away from family and friends
- Anxiety - agitated or irritable
- Mood changes - no interest in things they usually like to do
- Sleep disturbances - trouble sleeping or sleeping too much
- Guilt or shame

If your loved one shows **ANY** of the **DIRECT** warning signs or you are concerned about **INDIRECT** warning signs, take action:

- Call 911 or the Military/Veteran Crisis line at 1-800-273-8255 (press 1)
- If there is any chance that someone might get injured:
 - Remain calm
 - Remove yourself or children from any danger
 - If possible, remove items that the person can use in a suicide attempt
- Get professional help



3. Learn about Treatment

A person who is actively suicidal or attempts suicide often receives treatment in a hospital. This is the most protected setting. In the hospital, staff can supervise patients closely. Also, patients have limited access to things they can use to hurt themselves. When patients leave the hospital, the staff usually creates a discharge plan for follow-up care. Follow-up may be in a partial hospital program (PHP), intensive outpatient program (IOP), or an outpatient clinic. This discharge plan should include the use of a safety plan.

The Treatment Plan: A provider will work with your loved one to create a treatment plan that focuses on treatment goals. The plan should spell out how everyone will work together to achieve these goals. The goals can focus on any area that causes your loved one stress. The goals are tailored to each person and could include mental or physical health, relationship, occupational or financial problems. Whenever possible it is best to include family members and loved ones in this plan. These plans change over time as your loved one continues on a path to better health.

Mental health professionals can determine whether a person needs to be in the hospital or another treatment setting. They will always choose the setting that best meets the needs of each patient. Levels of care include:

- **Inpatient (hospital):** Staff can look after patients closely. Patients also receive more intensive care in the hospital.
- **PHP or IOP:** Patients in this setting usually stay in the program during the day. They are on their own overnight and on the week ends. This allows providers to watch patients' response to treatment closely.
- **Outpatient clinic:** Outpatient clinics can also help people at risk for suicide. When leaving the hospital, a person may attend a PHP before stepping down to an outpatient clinic.

Certain types of therapies and medications can help a person who is at risk for suicide. A professional will know what might help your loved one the most.

5. Get Additional Information and Support

Help is always available for you and your loved ones.

- In an emergency, call 911!
- If you or someone you know needs help right away, contact the Military/Veterans Crisis Line. Dial 1-800-273-8255 (press 1) or text 838255 for 24/7 crisis support.
- Find more information at:
 - <http://veteranscrisisline.net>
 - <http://suicideoutreach.org>
 - <http://militarycrisisline.net>

4. Help Your Loved One through Treatment Transitions

Transitions between levels of care are times of increased concern for suicide. Therefore, pay close attention to your loved one during transitions. Your loved one can work with his or her provider to create a safety plan to help with periods of transition and throughout recovery. Safety plans help pinpoint personal warning signs and the coping strategies that have been useful in the past. You might become involved in the development of the safety plan. Or you might be asked to support your loved one as they use their safety plan.

A **safety plan** identifies:

- Individual warning signs that may signal an increase in thoughts of suicide
- Activities, social supports and/or family members that may help to distract him or her from thoughts of suicide, and focus instead on reasons to live
- People he or she can call for help right away
- Professionals he or she can call for immediate help
- Steps to take that will keep the environment safe and limit any means to self-harm

It is important to check in with your family member and confirm the safety plan. Strategize how you can work together to help them use their safety plan. Ask who is included in the plan and what each person's role is.

