
LESSON PLAN
for
Suicide Prevention General Military Training



PREPARED BY
21ST CENTURY SAILOR OFFICE
SUICIDE PREVENTION BRANCH
OPNAV N17





LESSON PLAN

GENERAL MILITARY TRAINING

EVERY SAILOR, EVERY DAY

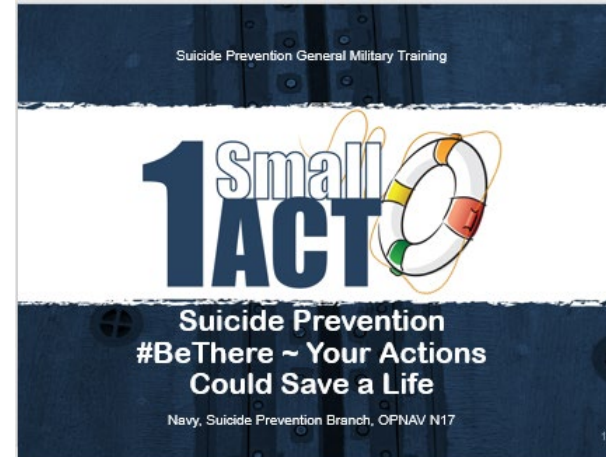
Topic 1 Introduction

DISCUSSION

1. Introduce yourself and provide background that might be of interest.
2. Refer to Slide one (1) and begin the lesson.
3. This training is designed to give Sailors the tools, resources and confidence to recognize a Sailor at risk and intervene.
4. It addresses the most popular theory of suicide, risk and protective factors, warning signs, lethal means safety and active postvention.
5. Each suicide is one too many and we need your help to save lives.

DISPLAY

1. **DISPLAY** Slide (1)





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Topic 1 Introduction

DISCUSSION

1. Go over slide 2 briefly.
2. This training includes the required suicide prevention learning objectives established by the Department of Defense Suicide Prevention Office such as suicide risk factors, warning signs and protective factors..

DISPLAY

1. **DISPLAY** Slide (2)

The screenshot shows a presentation slide with a dark blue header and footer. The header contains the '1Small 1ACT' logo on the right. The main content area is white and titled 'Agenda' in bold. It lists 11 items, each with a blue hyperlink: 1. Introduction, 2. Suicide Prevention Goals, 3. Just the Facts, 4. Risk Factors, 5. Is Path Warm – Warning Signs, 6. Resilience – Connecting the Dots, 7. Protective Factors, 8. Focusing on Resilience, 9. Helping a Suicidal Person, 10. Postvention, 11. Resources. The footer contains the hashtag '#BeThere for Every Sailor, Every Day' and a small number '2' on the right.



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Topic 2 Suicide Prevention Goals

DISCUSSION

1. The goal of Navy Suicide Prevention is to reduce suicides by developing resilient Sailors, supporting help seeking behaviors, and better identify and support those in need.
2. Resilience is the capacity to recover quickly from difficulties. It is NOT zero defects. Stress is inherent in the Navy and life and it's unrealistic to remove all stress. But we hope to rebound quickly from setbacks.
3. We aim to educate and empower leaders to understand their critical role in enhancing the command climate to achieve these goals.
4. 1 Small Act is the BUMED campaign message, encouraging simple actions that can make a difference in others' lives while leveraging relationships between peers and communities.
5. Every small act of kindness, connecting with each other, showing we care, can build relationships and protect against suicide.
6. The Navy is uniquely structured to enact community support for suicide prevention.
7. Every Sailor in the Navy is a leader and is responsible for creating a positive work environment. One where Sailors can ask for help, get the help they need, and remain a valued member of the team.

DISPLAY

1. **DISPLAY** Slide (3)

Navy Suicide Prevention Program

- The Navy Suicide Prevention Program provides policies and resources to the Fleet, encouraging an organizational climate that supports and develops leaders, fosters resilience and promotes Total Sailor Fitness.
- The program's goal is to reduce **suicides** by developing resilient Sailors, encouraging help seeking behaviors and providing support to those in need.

Every leader has a responsibility to develop a command climate that allows Sailors to seek help, receive help and be welcomed back to the unit

#BeThere for Every Sailor, Every Day

8. Emphasize “Every Leader’s responsibility....”



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Topic 3 Just the Facts

DISCUSSION

1. This is an overview of suicides in the Navy. Although suicides represent less than 1% of the Navy, we are losing more Sailors to suicide than combat or other manners of death. For every suicide, there are about 40 suicide related behaviors.
2. At some point in your life you will know someone who died by suicide or made a suicide attempt. It is even more likely that you know someone who is thinking about suicide but afraid to tell anyone.
3. Most suicides in the Navy do not involve a suicide note and explicit intent was not communicated beforehand. Many attempts are impulsive decisions made in the final hours in the face of overwhelming stress and access to lethal means.
4. For every suicide and every attempt, countless others may be suffering in silence, afraid to let anyone know how they feel.
5. Most suicides are not with a military issued firearm. Sailors are urged to consider gun locks or safes for firearms in the home, to make it less likely there will be an impulsive act.

DISPLAY

1. **DISPLAY** Slide (4)

Navy Suicides: Just The Facts

- Among top three causes of death in the Navy annually
- Average ~2,000 suicide-related behaviors annually
- Navy rate is similar to USAF
- Most occur at home or off duty
- Not related to deployments
- 60-70% by personal firearm
- Barracks deaths by hanging
- Most victims <25, male, E3-E6 Caucasian
- Aviation, Nuclear rates, MAs and Medical have highest rates
- Relationship problems, transition periods, legal/NJP and mental health problems
- Only 30% of Sailors who died by suicide sought mental health care
- Gatekeepers include families, TPU staff, legal staff and instructors

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Topic 3 Just the Facts

DISCUSSION

- 6. Although most are young, Caucasian male, suicide can affect anyone and annually we have losses from every ethnic group, gender and rank.
- 7. Will address this later but Chaplains are a great source for Sailors and families to seek help and to begin to ask questions. They have 100% confidentiality for everyone.

DISPLAY

- 1. **KEEP** Slide (4) displayed

METHOD	2014	2015	2016	2017	2018	2019	2020
Firearm	56% (30)	60% (26)	58% (30)	65% (42)	62% (42)	61% (45)	59% (39)
Hanging	28% (15)	30% (13)	15% (8)	23% (15)	26% (18)	23% (17)	21% (14)
Jumping	11% (6)	5% (2)	12% (6)	0% (0)	4% (2)	5% (4)	6% (4)
Other	6% (3)	5% (2)	13% (7)	12% (8)	9% (6)	11% (8)	14% (9)

TOTAL/RATE	2014	2015	2016	2017	2018	2019	2020
Total Navy	69	57	62	74	79	81	79
Navy AC Rate/100K	16.6	13.1	15.9	20.1	20.7	21.8	19.3
Navy AC Total	54	43	52	65	68	74	66
Navy RC Total	15	14	10	9	11	7	13
Civilian Rate/100K (Adjusted: Males 17-60)	25.6	26.4	26.8	28.1	28.5	28.1	N/A



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Topic 3 Just the Facts

DISCUSSION

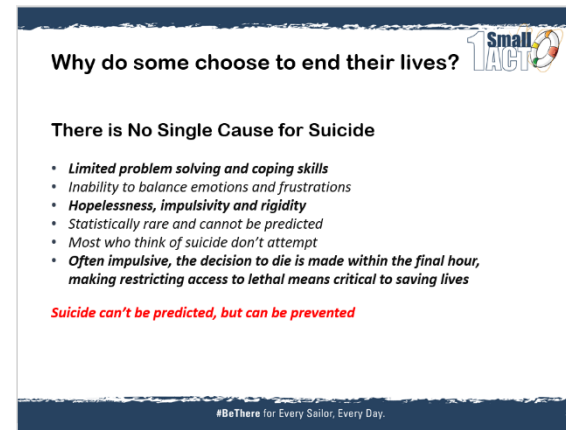
There is no single cause for suicide.

These are the most common factors in Navy deaths

1. Transitions: Moves (PCS, LIMDU, TPU, Med Hold); Pending Separation/Retirement from Navy; etc.
2. Relationship issues: Break-ups, Separation, Divorce, Death
3. Fall from glory: Damage to Status, Reputation, Career, etc. (Occupational/Academic Setbacks, Disciplinary/Legal Issues)

DISPLAY

1. **DISPLAY** Slide (5)



** Often times we see different warning signs, but don't speak up because we don't want to harm the person's career. We do not connect the dots and intervene. And the Sailor takes their life.
**Simply owning a weapon doesn't make a person at risk, but procuring a weapon in the midst of overwhelming stress should send off warning signals.

**You wouldn't let a friend drive drunk. Asking a friend to store personal firearms in the armory during stressful times is lifesaving.



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Topic 4 Risk Factors
DISCUSSION

These are chronic risk factors for suicide. These don't indicate that suicide is imminent but should help you connect the dots and seek resources.

1. Many of the civilian factors can be found in the Navy as well. Sailors bring their individual, family and cultural backgrounds with them.
2. Individual factors include problem solving skills, coping skills, frustration tolerance and emotional regulation, or how well you handle life's ups and downs.
3. Sailors come from various ethnic backgrounds, each with a view of seeking help and using mental health resources.
4. Sexual abuse, physical abuse and even verbal abuse can make some more vulnerable later in life.
5. Most substances lower inhibitions, making an impulsive suicide more likely.
6. A Sailor facing academic failure or losing an NEC is at much higher risk. The fear of losing one's career, financial stability, reputation, or family can put a Sailor at risk.
7. Many preexisting issues (before Navy) don't come to light until there is a documented incident or it is disclosed to a provider. Sailors won't tell you if they don't trust you.

DISPLAY

1. DISPLAY Slide (6)

The slide is titled "Suicide Risk Factors" and features the Small 1ACT logo in the top right corner. It is divided into two columns of bullet points. The left column is titled "Navy Mirrors Society" and lists factors such as rejection, relationship loss, culture, economic issues, history of abuse, substance abuse, mental health history, legal problems, access to care, barriers to seeking help, chronic pain, and sexual harassment. The right column is titled "Stressors Unique to the Navy" and lists factors such as unpredictability in job, long hours, warrior pride, lack of privacy, frequent transitions/PCS, being away from families/support, fear of career loss, security clearances, chronic sleep deprivation, familiarity with weapons, and excessive use of energy drinks. At the bottom of the slide, it states "No single risk factor predicts suicide" and includes the hashtag "#BeThere for Every Sailor, Every Day." with a small number 6 in the bottom right corner.

**Some stress and risk factors are unique to our Navy culture and environment. Do you recognize any of these?

**Many Sailors are angry, but exhibiting rage after a stressor is a major risk factor and warning sign for suicide - especially if the person has a history of making impulsive and self-destructive decisions when enraged.

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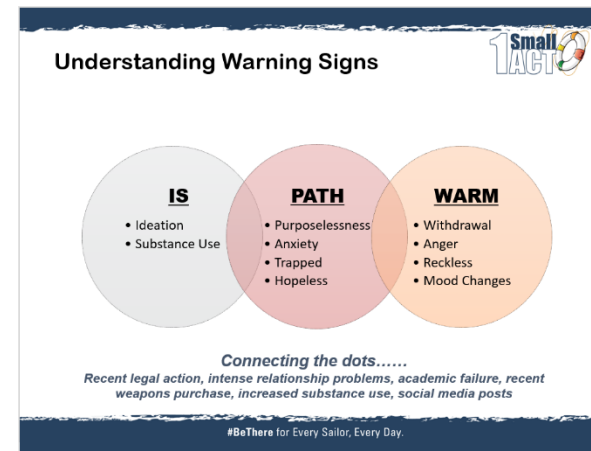
Topic 5 IS PATH WARM/Understanding Warning Signs

DISCUSSION

1. A Sailor or family member may have a few or all of these warning signs. Warning signs indicate a more acute risk and may signal that suicide may be imminent.
2. Various people may notice different signs. It is important to “connect the dots” and share information to piece it together.
3. Each of them may have their own concerns about reporting or not know to whom to report. Some may not take it seriously. Sometimes we’ve become so accustomed to the signs that we don’t notice them as a change.
4. Peers may minimize the significance, families may fear loss of career and parents may not know who to tell. Each person may dismiss what they’re seeing. How often do we downplay someone’s drinking or relationship problems?
5. While most suicides do not involve alcohol, they involve firearms; a pattern of increased substance abuse may decrease inhibitions against suicide.
6. Mood changes could indicate depression or anxiety.

DISPLAY

1. DISPLAY Slide (7)



**Impulsivity is not listed but is a major warning sign. It’s similar to recklessness.

Be aware that someone who has been **depressed who suddenly appears better is at **greater risk as well, as they may have already decided to take their life.**



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Topic 5 IS PATH WARM – Understanding Warning Signs

DISCUSSION

1. Read the examples on the slide.
2. These are some comments you may hear that would cause concern because they indicate the loss of belonging, the major loss, the warning signs and cries for help.
3. These comments are indications that the person is at a greater risk for suicide.
4. How might you approach someone after hearing one of these comments?
5. What resources can you think of to provide this Sailor? What about words of encouragement, what would you say?

DISPLAY

1. **DISPLAY** slide (8)

Recognizing Risk in Sailors

- Listen to your Sailor:
 - "This isn't worth it. I'd rather be dead; you're better off without me."
 - "I can't do anything right."
 - "I don't know what I'm going to do, I have no where to go."
 - "I can't believe s/he hurt me this way. It hurts too bad"
- Things to look for:
 - Declining self care (weight loss or gain, disheveled appearance)
 - No future plans, seems to have given up
 - Social media posts with increasing images of alcohol, weapons and feelings of loneliness and rejection

Suicide is preventable

Know the WARNING SIGNS!

I P W S A R H T A R M

- Isolation
- Pessimism
- Withdrawal
- Suicidal Thoughts
- Anxiety
- Risk Taking
- Helplessness
- Thoughts of Suicide
- Anxiety
- Risk Taking
- Mood Change

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8

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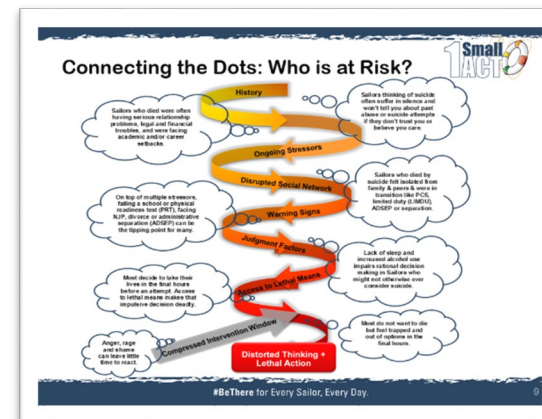
Topic 6 Resilience/Connecting the Dots

DISCUSSION

1. Taken from 2014 “Deep Dive” a case review done by Navy Suicide Prevention to study all the suicides in the Navy. This illustration shows how a person spirals downward towards suicide.
2. History plays a large role, but few will know the person’s history if there isn’t trust. This history may lower a person’s ability to cope with stress. Most of the past abuse or attempts were not reported to MEPS.
3. Most who died were experiencing multiple stressors that overwhelmed their ability to cope. Loss of relationships, break ups, separations, or even toxic relationships can increase suicide risk.
4. On top of these overwhelming stressors, the person lost their normal social support. Transitions are a high-risk period because the person is no longer connected to the command and not yet a part of another command, there is less sense of belonging, a major protective factor.
5. Sleep problems affect judgment, decisions, anger, stress, health and so does alcohol!!!!
6. These overwhelming stressors and losses, on top of an already tough background, add to feelings of hopelessness, shame, guilt and isolation.

DISPLAY

1. DISPLAY Slide (9)



7. Many of those who died by suicide in the Navy made the decision within the final hours preceding death, and because they had access to a lethal method, such as a firearm, there was little time to intervene once they’d made their decision. This highlights the need to know your people and connect the dots early and reduce access to lethal means during acute stress periods.



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Topic 7 Protective Factors

DISCUSSION

1. The military provides numerous services that may be a barrier for civilians such as access to free mental health care, family services, steady income, and unit cohesion and support.
2. Self-care is a list of things you can do to protect your own mental health, such as proper nutrition, exercise, adequate sleep and having hobbies and social support.
3. Cognitive flexibility allows you to see various angles and solutions to a problem. Extremes of thinking or rigid thinking can lead you to feel trapped.
4. Being willing to seek help when you recognize a problem is something else YOU can do to protect your health, instead of being swayed by peer pressure or sea doctors and sea lawyers who tell you it will ruin your career.
5. Commands and leaders play an important role in protecting your health, such as supporting work life balance, providing adequate training so you can feel good about your job and work performance, building a positive command climate of respect, and supporting programs that support Sailors, like providing time for PT and having a work place free of harassment, bullying or favoritism.

DISPLAY

1. DISPLAY Slide (10)

Individual Protective Factors	Command-level Protective Factors
Good problem-solving skills	Unit cohesion, peer support
Cognitive flexibility	Belonging and purpose
Coping skills and hobbies	Engaged and concerned leaders
Good self-care	Strong relationships
Willing to seek help	Time for sleep and exercise
Emotional regulation	Access to good nutrition
Spirituality	Work-life balance
Resilience	Professional environment

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** One of the best protective factors is SLEEP! You and your command both play a role in protecting sleep for Sailors!



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Topic 8 Focusing on Resilience

DISCUSSION

1. The emphasis should be on, building and supporting resilience, and education about risk factors, warning signs, and resources. This is where you want to focus most of your efforts.
2. To support Sailors, use leadership, Fleet and Family Support Center, MWR, Chaplain and medical.
3. Staying healthy includes self-care, adequate sleep, nutrition, activity, quality time, having sense of control, financial health, communication, spiritual support. These are things we should do all the time. They help us bounce back from stress.
4. Knowing the resources for help, encouraging seeking help early before things worsen (watch self-medicating, substance use, violent behavior, not sleeping).

DISPLAY

1. **DISPLAY** Slide (11)

Prevent Suicide by Focusing on Resilience

- Focusing on Protective Factors
- Life skills – coping skills
- Strengthen social & family relations connected
- Deepen sense of purpose
- Recognize belonging

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**Preventing suicide isn't just about recognizing someone at risk, but making resilience the focus so that Sailors don't become suicidal.

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Topic 9 Seeking Help


DISCUSSION

Most Sailors believe they'd receive help if they asked and their peers would be supportive..... **However.....**

1. Many believe they'd be treated differently.
2. Many fear they would lose the trust of their leaders.
3. Many believe it would negatively impact their career.
4. Some believe they'd lose their security clearance.
5. Most fear loss of privacy.
6. Most fear gossip, being perceived as weak.
7. Discouraging command climate, "get over it."
8. Families fear repercussions to the Sailor's career if they seek help.
9. While fears of losing security clearances and careers factor in, overwhelming Sailors fear the gossip and mistreatment by peers.
10. Unfortunately, our Sailors don't trust us when we tell them it's okay to ask for help.


DISPLAY

1. **DISPLAY** Slide (12)

Why Sailors Don't or Won't Seek Help 

Most Sailors believe they would receive help if they asked and their peers would be supportive. However...

- o Many believe they would be treated differently
- o Many fear they would lose the trust of their leaders
- o Many believe it would negatively impact their career
- o Some believe they would lose their security clearance
- o Most fear loss of privacy
- o Most fear gossip, being perceived as weak
- o Discouraging command climate, "get over it."



#BeThere for Every Sailor. Every Day. 12

**These polls are taken from the Behavioral Health Quick Polls.

**Despite the truth about seeking help, many will listen to their peers and scuttlebutt (Sea Doctors and Sea Lawyers) and won't get the help they need.



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Topic 9 Seeking Help

DISCUSSION

Standard Form 86 (SF86) “Questionnaire for National Security Positions” is used to evaluate individuals under consideration for Confidential, Secret, and Top Secret security clearances. One of the many reasons service members choose not to seek help for psychological health concerns is fear that doing so will jeopardize their clearance eligibility and careers. Here are the facts about answering Question 21:

1. Less than 1% of security clearance denials and revocations involve psychological health concerns.
2. Seeking help to promote personal wellness and recovery may favorably impact a person’s security clearance eligibility.
3. Not all psychological health treatment is required to be reported when answering question 21.
4. Any psychological health care you report when answering Question 21 is protected by privacy rights.

DISPLAY

1. DISPLAY slide (13)

The Truth About Seeking Help

Know the Facts:

- Less than 1% of security clearance denials and revocations involve psychological health concerns.
- A psychological health condition or seeking professional help will not automatically disqualify you for a security clearance.
- What does **not** need to be reported for a security clearance?
 - Counseling related to adjustments from service in a military combat environment
 - Marital or family concerns (not related to violence by the service member)
 - Grief counseling
 - Counseling related to being a victim of sexual assault
- **Seeking help is a sign of strength**

KNOW THE FACTS:
Less than 1% of security clearance denials and revocations involve psychological health concerns.

DID YOU KNOW?
A psychological health condition or seeking professional help will not automatically disqualify you for a security clearance.

WHAT DOES NOT NEED TO BE REPORTED FOR A SECURITY CLEARANCE?
Counseling related to adjustments from service in a military combat environment
Marital or family concerns (not related to violence by the service member)
Grief counseling
Counseling related to being a victim of sexual assault

#BeThere for Every Sailor, Every Day 13

**Leaders set the tone, guard your words carefully when you talk about suicide and seeking help. Vulnerable Sailors are listening.



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EVERY SAILOR, EVERY DAY

Topic 9 Seeking Help

DISCUSSION

1. Firearms are highly lethal, and if under stress we want to assist with safe storage.
2. Reminder – The Navy has a policy in place for voluntary temporary surrender of personally owned firearms for safety. Please be familiar with the Navy policy on reducing access to lethal means (OPNAVINST 1720.4b)
3. Read infographic:
 - A stored firearm can save lives
 - Store firearms unloaded and separate ammunition/rounds.
4. Asking a struggling colleague about their firearm is an act of friendship, protection and connectedness.

DISPLAY

1. **DISPLAY** slide (14)

5 Things to Know About Reducing Access to Lethal Means

- **Why was the guidance developed?**
Firearms are used in over half of all Navy suicide deaths and continue to be the primary method of both military and civilian suicides.
- **What does the guidance do?**
Commanding officers and health professionals may ask Sailors, who are believed to be at risk for suicide or causing harm to others, to voluntarily allow their privately-owned firearms to be stored for safekeeping by the command.
- **What does it mean to "voluntarily surrender my privately-owned firearm?"**
If a Sailor agrees to temporarily surrender his or her weapon for safekeeping, the commanding officer will ensure that it is securely stored on the installation or other available location in consultation with local authorities. It will be returned to a Sailor from the command requested at the end of the predetermined storage period set between the CO and the Sailor.
- **Can a CO or health professional take my privately-owned firearm without my consent?**
No. While CO's and health professionals are authorized to inquire about a Sailor's privately-owned firearms if they believe the Sailor is at risk, surrendering the firearm is entirely voluntary.
- **What are common warning signs that may indicate a Sailor is "at risk" for suicide?**
Signs may include expressing thoughts of hurting oneself or others, developing plans to take lethal action, giving away possessions, social withdrawal, unexpected feelings of hopelessness or despair, uncharacteristic substance abuse or violence.

• Suicide is preventable

Properly storing YOUR FIREARM can help PREVENT SUICIDE

A few extra moments to retrieve and store your firearms can interrupt the trigger for suicide and open the door for help.

Store firearms unloaded with a magazine in a secured cabinet, safe or box. Every ammunition round requires secured storage location.

Sailors are encouraged to consider using their personal firearms during highly stressful periods. Commanders and health professionals should be consulted for more information. See OPNAVINST 1720.4b.

Help is always available through your local Navy chaplain, Fleet and Family Support Center or the Military Crisis Line at 1-800-273-TALK (Press 1).

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LESSON PLAN

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Topic 10 Helping a Suicidal Person

EVERY SAILOR, EVERY DAY

DISCUSSION

1. Ask, Care, Treat:
2. Don't be afraid to ask, it's hard, but just ask them. Facilitator should ask a few people to ask the facilitator if he/she is thinking of suicide. Help Sailors become comfortable with asking the question. Ask participants to read the questions on the slide.
3. Don't judge! Don't tell a person their problems aren't that bad.
4. You can call Security to remove weapons and the command can arrange storage in the base armory, but it's best to ask the person to voluntarily store their weapons because we care!
5. Don't keep suicidal thoughts a secret, ever!

DISPLAY

1. **DISPLAY** slide (15)

Helping A Suicidal Person

- **ASK: "Are you thinking about suicide?"**
 - "Do you wish you were dead? Do you wish you wouldn't wake up? Have you thought about a way to kill yourself?"
 - Leading questions are okay, "With this amount of stress, it's common for people to feel they would be better off dead. Have you had those thoughts?"
 - Ask the Sailor if he/she is getting support
 - Is the person taking more risks, drinking more?
- **CARE: Listen without judgment**
 - Don't give your opinions of suicide, don't tell them that others have it worse
 - You don't have to have the answers, just listen and be present
- **TREAT: Get the person to a professional**
 - Take them to a chaplain, medical, the command or call 911 ~ don't leave a suicidal person alone
 - Remove any weapons (guns, pills, knives, ropes), stay with the person until safe
 - It's okay to ask about safety in every conversation
 - Maintain privacy as much as possible

#BeThere for Every Sailor, Every Day. 15



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EVERY SAILOR, EVERY DAY

Topic 11 Postvention

DISCUSSION

1. Postvention refers to actions that occur after a suicide to support shipmates (command & Sailors), family & friends affected by the loss.
2. Because each situation is unique, examples of postvention efforts can include thoughtfully informing Sailors about the death to minimize speculation, one-on-one outreach to those most affected by the suicide, encouraging use of support resources and monitoring for reactions.
3. The **Principles of Resilience** can assist with the recovery process following a suicide, helping to promote a healthy grieving process and a return to mission-readiness.
 - **Predictability:** Encourage your shipmates to speak up when they are down and reassure them that seeking help is a sign of strength. Ensure that support resources are in place and accessible (chaplain, medical, FFSC counselor, and/or Deployed Resilience Counselor).
 - **Controllability:** After a suicide, it's normal for things to seem out of one's personal control. Patience with oneself and others who may be grieving differently will help during the healing process. It's okay to set limits and say "no" to things that may hamper the healing process.
 - **Relationships:** Take a moment out of each day to ask shipmates how they are doing – and actively listen. Start the conversation. It's all about being there for Every Sailor, Every Day.
 - **Trust:** The presence of trust before and after a tragedy promotes a supportive command climate and can help preserve mission readiness while promoting emotional health.
 - **Meaning:** While a full understanding of the surrounding events may not occur, leaning on the support of shipmates and leaders can help strengthen the recovery process.

DISPLAY

1. DISPLAY Slide (16-17)

Postvention

- Any activity following a suicide that promotes recovery and healing of shipmates & family
 - Can help prevent anxiety, depression and other negative impacts of suicide exposure, such as contagion
- Goals of postvention:
 - Set a foundation for healthy grieving
 - Identify and refer those most at risk for behavioral health concerns, including suicide
 - Safely memorialize the deceased
- 3 Phases of postvention:
 - Stabilize – address issues that prevent healing
 - Grieve – facilitate and support healthy grieving
 - Grow – Assist survivors in finding ways to experience post traumatic growth

RELATIONSHIPS

Staying connected to your command and your shipmates is important for your recovery. Relationships can provide a sense of community, hope and purpose. Reach out, share and actively listen.

Like **predictability**, the presence of **trust** before and after a tragedy promotes emotional health.

Share **meaning** and foster **hope** with your shipmates and command.

#BeThere for Every Sailor, Every Day.



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EVERY SAILOR, EVERY DAY

Topic 12 Resources

DISCUSSION

1. Know the resources.
2. Promote seeking help as a sign of strength. Guard your words carefully about resources and those seeking help.
3. Sailors don't have to be religious to talk to a Chaplain and Chaplains offer 100% confidentiality.

DISPLAY

1. **DISPLAY** Slide (18)

Resources for Sailors

- Local Resources:
 - Chain of command for support, mentorship and guidance
 - Chaplains: **100% confidentiality**, CREDO, premarital & marital counseling, spiritual guidance and support
 - Fleet and Family Support Centers (FFSCs): counseling, classes, education, support programs
 - Sailor Assistance and Intercept for Life (SAIL)
 - Primary Care Manager and Primary Care Mental Health Provider – Integrated Behavioral Health, assessments and treatment
- National 24/7 Resources:
 - Military OneSource: 1-800-342-9647
 - National Suicide Prevention Lifeline: 1-800-273-8255
 - Veterans' Military Crisis Line: 1-800-273-8255, Press 1
 - DoD Safe Helpline: 877-965-5247

Together, we can be there for EVERY SAILOR EVERY DAY.

#BeThere for Every Sailor, Every Day. 19



LESSON PLAN

GENERAL MILITARY TRAINING

EVERY SAILOR, EVERY DAY

Topic 12 Resources

DISCUSSION

1. There are multiple resources on the Navy Suicide Prevention Program website for all hands, leaders, peers, families and Sailors.
2. The last bullet is a link to online training on the Columbia Suicide Severity Rating Scale.. You can show this before the training or at any point.

DISPLAY

1. **DISPLAY** slide (19)

The slide is titled "Other Resources" and features the "Small 1ACT" logo in the top right corner. It lists two main categories of resources:

- General Suicide Prevention Resources**
 - Navy Suicide Prevention: www.suicide.navy.mil
 - Contact information
 - Facts and warning signs
 - Informational products and resources
 - Suicide Prevention Resource Center: www.sprc.org
- Navy Operational Stress Control Resources**
 - Wordpress blog: <https://navstress.wordpress.com/>
 - Twitter: [www.twitter.com/Proj1SmallACT](https://twitter.com/Proj1SmallACT)
 - Facebook: www.facebook.com/Project1SmallACT

At the bottom of the slide, it says "#BeThere for Every Sailor, Every Day." and the number "20" is in the bottom right corner.



Every Sailor, Every Day

END OF LESSON