

# Suicide Prevention & Awareness

## RCC Fact Sheet

### What causes suicide?

There is no simple answer to the question of why people choose to kill themselves. Some just want to “stop the pain.” Others feel a sense of loneliness and isolation, while some people feel helpless, hopeless and worthless. Some people who contemplate or die by suicide feel they cannot cope with their problems.

Generally, it is a combination of events that leads a person to believe suicide is the only answer. Precipitating events may include a break-up or difficulties in interpersonal relationships, the death of a loved one, worry about job or school performance, moving to a new environment, loss of social or financial status, legal issues, mental health problems, or drug and/or alcohol abuse.

### Are there apparent Warning signs or signals for those who may be at higher risk for suicide?

There are several suicide warning signs. For example, a person who has made a previous suicide attempt may be at greater risk to try again. In addition, a family history of suicide or alcoholism, a medical illness or chronic pain, mental illness, sleeplessness, the loss of a relationship or changes in personality and behavior can also be warning signs that someone is at increased risk for suicide. Immediate danger signals include: talking about or making plans to kill themselves, putting personal affairs in order (e.g., making insurance changes), giving away personal possessions, obsessing about death, abusing drugs and/or alcohol, and acquiring access to lethal means.

### How does this issue affect wounded warriors and their families?

The stress of deployment and returning home after deployment can put Service members and wounded warriors at increased risk for suicidal thoughts or behavior. Service members who die by suicide affect their family in many ways. Along with the devastating experience of losing a loved one to suicide, survivors may lose base housing, which could yield to the loss

of community support structures, such as social organizations, neighbors, and schools.

### How can knowledge of this issue help Recovery Care Coordinators?

Anyone may be in the position to help someone who is suicidal, including Recovery Care Coordinators (RCCs). Most suicides and suicide attempts are reactions to intense feelings of loneliness, worthlessness, helplessness, and depression, and people who threaten or attempt suicide are often trying to reach out for help. RCCs who can identify and respond to the warning signs and immediate danger signals of suicide will be able to guide Service members and families to resources that can help them. RCCs should alert their medical team or the chaplain with any concerns regarding a wounded warrior who has expressed thoughts of suicide. Suicidal thoughts are a medical emergency. Recovery Care Coordinators should also be prepared to comfort and work with Service members and families who are affected by a suicide.

### Where can I find more information?

Available resources include:

#### **Prevention:**

**Military Crisis Line**  
[www.Militarycrisisline.net](http://www.Militarycrisisline.net)  
1-800-273-8255 Press 1

**Military OneSource**  
[www.militaryonesource.com](http://www.militaryonesource.com)  
1-800-342-9647

**Defense Suicide Prevention Office (DoD Policy)**  
[www.suicideoutreach.org](http://www.suicideoutreach.org)