**What To Do**

- Take the risk factors and signals seriously. If you think someone is considering suicide, ASK HIM OR HER “Are you suicidal?” or “Do you want to kill yourself?” If the answer is “yes,” GET HELP.
- Show interest in the person and be supportive.
- Offer hope that there are alternatives to suicide. DO NOT LEAVE THE PERSON ALONE.
- Take action. Remove methods he or she might use to kill him or herself.
- Seek help from his or her family, friends, physician, clergy, etc.
- IMMEDIATELY contact a person or organization that specializes in crisis intervention or suicide prevention for help. (See the back of this brochure.)

**Clinical Care**

**TN Veterans Administration Medical Centers**
Nashville Campus: 1-800-228-4973
Murfreesboro: 1-800-876-7093
Memphis: 1-800-636-8262
Mountain Home – Johnson City: 1-877-573-3529
For outpatient clinics, Community Based Outpatient Clinics, and Vet Centers, see the US Department of Veteran Affairs website.

**Returning Service Members (OEF/OIF/OND)**
Clarksville / Ft. Campbell / Hopkinsville:
(615) 815-5226 or (270) 956-0458
Chattanooga: (423) 893-6500, ext. 27060
Memphis: 1-800-636-8262, ext. 7319
Johnson City/Mountain Home: (423) 926-1171 ext. 2231
Murfreesboro/Nashville: (615) 873-8638
Tullahoma: (615) 225-3937

**Also see:**
Centerstone Military Services (counseling): (866) 781-8010
Wounded Warrior Project (Nashville office): (615) 782-7226
VA Returning Combat Veteran Site www.oefeovgov

**Where To Get Help**

If you or someone you know is thinking about suicide, call **1-800-273-TALK** (8255).

The National Suicide Prevention Lifeline will automatically connect you with a certified local crisis center 24 hours a day, 7 days a week.

Get the TSPN APP

ph: 615-297-1077  www.tspn.org

**Saving Veteran Lives in Tennessee**

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The Facts

- Between 2010 and 2014, there were 796 confirmed suicides among active-duty personnel. 50 of these involved soldiers assigned to Fort Campbell.
- The leading stress triggers for military personnel are failing relationships, financial troubles, and legal issues.
- 90% of all Army suicides involve substance abuse, primarily alcohol.
- The 2013 Defense Department Suicide Event Report shows that the suicide rate for active-duty military personnel was down from previous years, but still above the rate for the general population.

Risk Factors

- Calling old friends, particularly those from the military, to say goodbye
- Cleaning a weapon kept as a souvenir
- Visits to cemeteries
- Obsession with news coverage of current military operations
- Wearing dress uniform or part of their uniform, when not required
- Frequent talking about how honorable it is to be a soldier
- Change in sleeping patterns
- Becoming overprotective of children
- Standing guard over the house
- Abusing alcohol or other drugs
- Give away prized possessions
- Defensive speech
- Believe they are a burden to others
- Talking about wanting to hurt or kill oneself
- Trying to obtain pills, guns, or other items that could be used to inflict self-harm
- Talking or writing about death, dying, or suicide
- Feelings of hopelessness or helplessness
- Rage, uncontrolled anger, seeking revenge
- Acting in a reckless or risky way
- Feeling trapped, like there’s no way out
- Saying or feeling there’s no reason for living

PTSD and TBI

POST-TRAUMATIC STRESS DISORDER

PTSD is an anxiety disorder that can occur after a traumatic event. Some of those include:
- Explosions, such as bomb blasts or improvised explosive device (IED) detonations
- Sniper attacks
- Terrorist attacks
- “Friendly fire” incidents
- Exposure to civilian or military casualties

Common symptoms:
- Reliving the event
- Avoiding situations that remind you of the event
- Feeling numb
- Feeling “keyed up”, always on alert and expecting danger

TRAUMATIC BRAIN INJURY

Traumatic brain injury (TBI) is caused by an external physical force resulting in total or partial disability. TBI is common in active war zones as a result of explosions. Symptoms can include:
- Problems with judgment, memory, and decision making
- Headaches
- Seizures
- Failure of motor skills
- Mood swings
- Sexual difficulties

After a traumatic event, it is normal to feel frightened, angry, or disoriented. If these feelings continue for an extended period of time or becomes disruptive to everyday activities, seek professional help.

The Tennessee Suicide Prevention Network offers further information on veteran suicide prevention on its website, including links to information on health benefits, armed forces suicide prevention and mental health programs, depression, PTSD, and TBI:

tspn.org/veterans