



DEFENSE SUICIDE PREVENTION OFFICE

Defense Suicide Prevention Office Podcast Transcript

Suicide Prevention Awareness Month 2025 Podcast

Suicide Prevention and Postvention: Every Rank. Every Role. Every Day.

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Dr. Mary Crenshaw:

Hello, I am Dr. Mary Crenshaw, program manager for Postvention and Lived Experience at the Defense Suicide Prevention Office. Today, I'm honored to welcome Dr. T.J. Owens, section head of the Suicide Prevention Capability Marine and Family Program Division, and a former Service member, to the podcast. We will be discussing the critical role of Service members in suicide prevention and postvention within the greater military community and how we can support Service members, family members, and veterans who are survivors of suicide loss.

Before we begin our conversation today, I'm going to take a couple of minutes to provide some of your background for our listeners. Dr. Owens served as an infantry officer in the U.S. Marine Corps. He earned his Doctor of Ministry degree from Regent University, his Master of Public Health from George Mason University, and Master of Leadership and Management from Webster University. Dr. Owens specializes in promoting health within populations and preventing unhealthy behaviors such as suicidal thoughts and sexual assault. He collaborates with DSPO on initiatives such as the Suicide Prevention and Risk Reduction Committee, the Suicide Prevention General Officer Steering Committee, and other installation-based initiatives.

Dr. Owens, you are part of several remarkable committees working toward ending suicide among Service members and the greater military community. It is a privilege to speak with you today and to hear your insights on some critical issues affecting Service members and their families. Your experience as an Active Duty Marine and expertise in health outcomes across populations bring a unique and invaluable perspective to this discussion. So, thank you for being here.

As we know, suicide is a National public health issue that also affects the military community. The Department observes National Suicide Prevention Awareness Month each September. For the past two years, 2024 and 2025, the Department has adopted the campaign theme, "Joining Your Fight: Connect to Protect," to highlight the importance of connection and collective action.

Research shows that a suicide death affects a wide circle, from immediate family to colleagues and community members. Reactions can vary, including intense grief, emotional distress, or even a sense of relief if the individual has suffered for a long time. This brings up the importance of postvention, which refers to the care of those impacted by suicide. Dr. Owens, to start, could you define postvention in your own words and explain why it's such a critical part of the suicide prevention framework?

Dr. T.J. Owens:

Yes, Dr. Crenshaw, thank you so much for having me. To put it simply, when it comes to postvention, these are the actions that we'll take or that the leadership of a unit will take in the wake of a death by





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suicide. These actions have to do with the local and outside resources, such as embedded staff assistance from headquarters, the Marine Corps itself, or any resources that just are not indigenous to the unit, all of those coming together, so that the commander has in their hands what they need in order to address the situation.

Postvention is a critical aspect of prevention because it is in and of itself prevention. Postvention allows the command the ability to prevent the next death by suicide, and that's the cycle of what we want to get in. We want to definitely have the opportunity for the commander to establish that environment where everyone knows that the narrative that is being pushed in that environment addresses any thoughts that anyone might have, or it puts the occurrence of a death in the proper perspective.

Dr. Mary Crenshaw:

Thank you, Dr. Owens, for sharing your perspective on postvention and how important it is for our military community. How does suicide prevention and postvention directly strengthen the readiness and effectiveness of military units and the greater military community?

Dr. T.J. Owens:

That's a good question, Dr. Crenshaw. And it's definitely one that we would need to make sure that we address correctly, given the downrange intent of our military forces is lethality. So, suicide-related behaviors, in spite of how they may be thought of by many people, are very common responses. Let me explain what I mean there. It doesn't matter whether it's an ideation or an attempt. What a lot of people don't know it's that the job of being in the military is in the top five most stressful jobs that you can have. And so, when these stressors, for lack of a better word, or the things that we deal with in life, how we deal with them actually leads us to having thoughts such as ideations or even moving us to a position where we might think about dying by suicide. We need to have control of the narrative on these events, which we do so as a result of prevention or postvention.

We have to create an environment where Service members understand that stress is a part of what they do. In addition, they learn how to work within the bounds of the stress. In other words, to grow with the stressors so that they actually conquer the stress rather than having to stress conquer them. This normalization approach to prevention and postvention builds resilience in the individual Service member and also in the unit, and therefore, that is how we have a greater effectiveness in our military units and in our military community.

Dr. Mary Crenshaw:

Thank you for sharing how stress can impact our lives. How can chaplains, Service members, colleagues, friends, and even our loved ones, how can they all look out for each other?

Dr. T.J. Owens:

Well, if I understand what you're getting at there, I would say right off the bat, communication, because that's something that from the headquarters level, we try to encourage our embedded members to do more of by looking out for one another.





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I think you're trying to say, "How can we get them involved in the actual effort that we're doing here?" In the Marine Corps, and I know this to be the case with my other colleagues and other Services, the program is structured in such a way that the embedded stakeholders, the commanders, and anyone who is involved in this particular effort, they have access and knowledge of resources that maybe are outside the gate, for lack of a better word, when it comes to the location of the installation. Each of our outreach methods features best practices, and it teaches our embedded stakeholders how they can use resources, connect with family members, friends of Service members, and let them know that they're very much important in this effort.

And so ultimately, communication and collaboration move us to a place where we are aware of the role that we have in preventing suicide, no matter who you are.

Dr. Mary Crenshaw:

Thank you, Dr. Owens, for sharing how communication and also being knowledgeable of those key resources is an important aspect of being able to look out and support each other, and you mentioned about resources, so that ties into my next question. What are resources that are available to those who might be feeling overwhelmed by life's challenges, experiencing suicidal thoughts, or even grieving someone close?

Dr. T.J. Owens:

Again, Dr. Crenshaw, good question. And that covers the whole gamut of some of the efforts that we have in place. So, what I'm going to do is take it bit by bit here, and I will speak first of all to what can be done about being overwhelmed by life's challenges.

A particular resource that we push, and we do it in the prevention and postvention space, is community counseling. Community counseling, or any counseling for that reason, can serve as a resource where a member can access counseling that would teach them how to deal or give them tools to use to deal with various stresses. Tools and measures that the individual can apply to their normal life. And it doesn't mean that you have a problem per se, because we know that some of the problems that we see on the surface aren't really the source of the problem. And so, this counseling actually drills down and gets to whatever the source may be before it becomes a problem. And that is very important.

In the area of whether someone is experiencing suicidal thoughts, the greatest resource that a Service member can have is actually that individual to their left or the right. It's what we call peer-to-peer or mentor leadership, in the case of someone who is senior to them, to help them navigate the stresses in military life, even if a suicidal behavioral adult may occur, this actually works.

Some of my colleagues in particular, and it's definitely in the Marine Corps, we position the commander as the program manager because the commander is there with the Marines. We can do a whole lot from Headquarters Marine Corps, but we like to equip our commanders in such a way that they can manage the program locally. Their leadership team encompasses our program structure within the unit that has suicide prevention program officers and coordinators, they have chaplains, they have OSCAR*





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Team members and leaders. And so, we encourage the Service member to start with their supervisors and the unit chaplain.

A simple conversation that they can have with the Marine, or the sailor, or the airman, or the soldier, they will gain a valuable insight and an understanding of the particular stress in life that that Service member is dealing with, and therefore, because we train them in the kinds of resources that are available, they can help that Service member participates in or get connected with that service, best practices to come alongside and go along with. And so that we want the commanders or a member of a leadership team, in particular, maybe the immediate supervisor, to go with the Service member to this resource. And it can be something as simple as getting financial counseling or something that allows them to better maneuver whatever the stressor was; you alleviate that, you alleviate the downstream problems, and that's what we're trying to get at.

Grieving a loss is totally different. It's very much key to or centers the sum of the postvention efforts that you'll see. This is really a loss has occurred, and so we're trying to reintegrate something that we do in the end of this loop of prevention and postvention is reintegration, and sometimes we are reintegrating those who have experienced the loss back into normal life, back into the unit in a capacity where they can still serve. That's just how broad we want that net of the resources to go so that everyone, no matter what the situation is, has the ability to grieve the loss. They have the ability to utilize external resources such as Tragedy Assistance Program for Survivors, TAPS, and I know that a lot of people are familiar with that.

When it comes to indigenous to the unit, that's the Chaplaincy Corps. We push that in our policies and our messaging and everything that we do to help Service members understand that this is a valuable asset, and when you look at the Total Force aspect of an individual, some in the Department of Defense call it Total Force Fitness. In the Marine Corps, we call it Marine Corps Total Fitness, but it has to do with every domain of an individual's being, and we try to address that, and the chaplaincy can help with that.

Of course, you have the spiritual domain, but the other domains, as well, social, mental, and physical, can use that resource and be directed in a way that you come up with a plan that allows you to move forward, which is really the importance of grieving. Leaders are being trained by our headquarters to oversee this effort, increasing the possibility that units will be able to recover from the loss and return to a lethal state of readiness.

Dr. Mary Crenshaw:

Thank you so much, Dr. Owens, for those amazing resources that are so key. We have the peer-to-peer support, the leadership, counseling, and even our Chaplain Corps. So, thank you for highlighting those for our listeners. So, switching gears just a little bit, transitioning from Active Duty Service to civilian status, can be a vulnerable time. You have made that transition successfully, and you continue to serve our Nation. Can you share what helped you during that period? And is there any advice or resources you would suggest for Service members who are also making this transition?





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Dr. T.J. Owens:

That's a tough one, because for different Service members that time period will have different and very unique challenges. However, for me, being a Marine was one part of a whole. At the time, I was other things. I was a father, a husband, a friend, a pastor of a church, and many other things, so much more. And what I found as I look back on that time is that I managed by the grace of God to be whole in all of those areas. If one area or aspect of my life is lacking, usually the wholeness of the other aspects will reach out and grab that.

And let's look at a practical understanding of what that means, okay? Transitioning means that you're not going to have that full-time job in the Services, right? It doesn't mean that you're no longer a Marine or Serviceman, or soldier, or an airman, or a sailor. It means that it's time to transition. And so having a holistic perspective of all the parts of your being at that time and able to bring them together, marshal the resources that are available, take the transitional courses that are offered by military. Connect with the VA services that on the other side of the transition and actually have a plan and think about how every aspect of your life is going to be impacted. Your family, your social network, which is very important for helping you marshal across the finish line into the next phases of your life. All of that was very important to my transition. No aspect of my life was operated in isolation.

I hope it gets at a way of understanding that. And so, to continue that explanation, that practical example I was giving you, without an income, the social aspect of my life came alive because I had friends, I had Marines who were still in service. I had leaders that had helped me along the way on both sides of the transition line, and I used those resources. I stayed in connection with them. And it goes back to the theme that the Department of Defense Suicide Prevention Office has for us for the last two years, "Joining Your Fight."

Okay, so I got to let someone in. I got to connect with my environment. I got to strengthen the aspects of my beings, and I can't just exist in isolation — I never have. And so, I shouldn't start that then because that is a very critical mistake that a Service member can make. And so, it's really allowing everything that you are to strengthen everything that may be impacted by the transition.

Dr. Mary Crenshaw:

Thank you so much Dr. Owens for sharing your thoughts and giving our listeners those golden nuggets and advice for Service members who began to transition from Active Duty and ensuring they maintain those connections, and we really appreciate those key insights and what was helpful to you as you made the transition.

Dr. T.J. Owens:

Oh, definitely my pleasure.

Dr. Mary Crenshaw:

Thank you. And thank you to our listeners for being a part of DSPO's podcast. Please share the podcast on social media with your friends and loved ones. "Joining Your Fight: Connect to Protect" is a call to





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action for the greater military community to focus on community, collaboration, and hope, supporting a strong and resilient Total Force. For more podcasts like this one, visit DSPO at www.DSPO.mil.

If you, or someone you know, is in crisis right now, don't wait. Dial 988 and press one for the Military and Veterans Crisis Line, or text 838255. You can also use a chat online feature of the VCL/MCL by visiting Veteranscrisisline.net. For confidential non-crisis related confidential support, call Military OneSource at (800) 342-9647.

*Operational Stress Control and Readiness (OSCAR) teams are essential components of the Marine Corps, designed to support Marines in managing stress and maintaining operational readiness.

