



Defense Suicide Prevention Office Podcast Transcript

Promoting Hope with the National Action Alliance for Suicide Prevention

Dacee Barnard:

Well, hello and welcome to the Defense Suicide Prevention Office's podcast series: Mental Health Is Health, Maximizing Your Wellbeing. I'm your host, Dacee Barnard, Senior Advisor of Integrated Primary Prevention here at DSPO. Today we'll be talking about promoting Hope with the National Alliance for Suicide Prevention. And I'm excited to introduce Sarah Brummet, director of the Executive Committee Action Alliance. Sarah works with the Action Alliance Leadership Team to provide oversight and support to the executive committee and the Action Alliance Task Force and Advisory Groups. She also identifies key opportunities to advance elements of the National strategy for suicide prevention. Welcome Sarah and thank you so much for joining us today.

Sarah Brummet:

Thanks, Stacy. Good to be here.

Dacee Barnard:

Great. Well, let's just dive right in. So, to get us started, can you tell us a little bit more about the Action Alliance for Suicide Prevention?

Sarah Brummet:

I'd be happy to. So, the Action Alliance is a committed group of National leaders from across the public and private sectors who've come together with the express purpose of advancing the National strategy for suicide prevention. It's a group that recognizes that no one organization or area of our society can be successful in isolation. So, we have representatives from the Federal Government, media, entertainment, sports construction, faith, public safety, veteran serving groups, and other industry leaders who roll up their sleeves and really work to amplify impact using a shared approach.

Dacee Barnard:

That is quite a broad mission. You guys are doing a lot there. And in our research, I did see on your website, you said that the Action Alliances' priority is to change the public conversation about suicide. Can you help me understand what that means and expand just a little bit more on that?



Sarah Brummet:

Yeah. How we talk about suicide really matters. So, it can shape a narrative of shock and despair and crisis, or it can provide hope and strength and offer stories of recovery and connection. So, for example, most folks don't realize that over 90% of people who survive a suicide attempt do not go on to die by suicide. Millions of Americans have thoughts of suicide every year, but millions of Americans don't die, thankfully. And the hope is the more we talk about suicide and despair and being human, the less alone people will face in those dark times. And how we talk about suicide can either create an open door to that conversation and create opportunities for support in a time of need or can further isolate and blame and stigmatize the very real pain that people are experiencing and potentially create additional barriers to reaching out for help in the future.

Dacee Barnard:

Wow. I know one of the words you kept using was hope and really promoting hope. I know that September 10th is National Hope for Life Day, and I know that that's something that also talks about suicide prevention, but for a special population. Can you tell us a little bit more about what's so special about that day?

Sarah Brummet:

Sure, so National Hope for Life Day, as you mentioned, occurs each September, which is also Suicide Prevention Month. And Hope for Life Day is a way to create space and acknowledgment for Native communities and the unique impact suicide has and the culturally resonant ways that communities can take concrete action in a way that connects back to and honors Indigenous culture. The idea of Hope for Life Day and the toolkit that goes along with it came from the American Indian Alaska Native Task Force of the Action Alliance and includes ways that all of the community can engage from young people to elders and really focus on that message of hope.

Dacee Barnard:

Wow, and I know that actually that National Hope for Life Day coincides with the World Suicide Prevention Day. What is the significance of these two important events being held on the same day?

Sarah Brummet:

For many of us these days, or even the full month of September, can carry different significance. So, for many of us, it creates visibility and acknowledgment of an issue that used to be taboo or not publicly discussed. It offers us a chance to honor and remember those we've lost a suicide or may be currently struggling. You know, many communities organize different events or activities geared towards calling attention to the issue of suicide and making sure folks are aware of resources that exist in the community for support. And those events have really become connection points of healing for those who have lost someone to be able to find community and support with others who have been there. September also generally involves a call to action from the suicide prevention field to organizations and



leaders who aren't traditionally involved to become part of the solution, because we really do believe everyone has a role to play when it comes to hope for life. Specifically, as I mentioned, that it shines a light on the disparities that we see in the data when it comes to suicide among young Indigenous populations specifically but does so in a way that's framed in hope, recovery, and resilience. And it's important to note the historical and generational trauma that lies behind some of the disparities we see and understand that people are not high risk, but people have been exposed to more life events that might increase the risk for experiencing suicidal despair.

Dacee Barnard:

I love how you worded that, how you said people aren't at high risk, but they might have been exposed to something. You know, as we think about that and we think about the unique needs for supporting suicide prevention for Native Americans, what are some of the other unique needs for other historically marginalized communities that we should think about as we support suicide prevention for those groups as well?

Sarah Brummet:

(I) think it really comes down to listening to the community, listening to the communities that you're trying to focus on or work with and learning from them and really not trying to force the one size fits all approach that that doesn't work and it doesn't resonate and it often further, you know, creates distance. And so, I think, you know, suicide prevention for communities, especially those who, you know, have experienced that historical marginalization or trauma or discrimination, it's really about cultural humility. So, working with and for Native communities might be more about really taking the time to understand and empower Indigenous ways of knowing and healing that have just as much, if not more value for that community as, you know, westernized medicalized, evidence-based, all of those tag words. And it might be more important to focus on and really when we're talking about, you know, suicide prevention, connection to community is the cure. So that human piece of connection that we all need is kind of the direction we should be going in the field. So, ensuring that when we are all talking about well-being or mental health promotion or suicide prevention, we're listening to the community first and foremost, and then framing the response or strategies and empowering things that really resonate with that community.

Dacee Barnard:

Thank you for that. One of the things I love about the military community is how it's one big community that's made up of so many other smaller groups and communities and ethnic backgrounds and genders, and it comes together to really build this very positive military community. And as we look at that, what can our listeners do just to promote hope for all the groups within our military community and just for all the groups around them, even if they're in uniform or not?



Sarah Brummet:

Yeah, I think that's a good, good point. You mentioned Dacee, that that really is at the core of a lot of military service is being there and supporting each other and serving when it comes to struggle and suicide, that can be really scary. And you know, we could be worried that we'll say the wrong thing or not know what to say and that's okay, but it can't prevent us from having that conversation. So, if I was to say, what's one thing you know your listeners can do, if you're worried about someone, ask and ask the question directly, are you thinking about suicide? You don't have to have the solutions or know how to navigate the next steps or solve things, but letting someone know that you care, and you'll listen to what they're going through can be lifesaving and there's other resources out there to help you navigate what might come next. If the answer is yes whether that's, you know, 988, or the Trevor Project Hotline, or the Trans Lifeline, or local community resources or things that might be available based on military service, there's hope and there's help available 24/7/365. So really be open to asking the question and being ready for an answer.

Dacee Barnard:

I've heard, and I know that there's some key tag words out there in the suicide prevention community that we talk about when we talk about prevention, and one of those is protective factors. Can you help us understand what we mean when we say protective factors and truly what that is, how that relates to suicide prevention?

Sarah Brummet:

Yeah, so as you mentioned, there's jargon out there in the prevention field. We talk about risk factors or protective factors. And risk factors are, are things that might make a negative outcome more likely or increase your chances. And protective factors would do the opposite. They would reduce risk; they would prevent kind of the chances of a negative outcome. Neither risk nor protective factors are determinative. So, they don't determine outcomes at all. It's just about chances. When we're talking about protective factors, the ones that are really important in suicide prevention, connection to community, connection to purpose, and creating a sense of belonging are really, really important. So, the othering that we see occur in our communities, it's so detrimental to our well-being as humans, you know, discrimination and bias that some members of our community face is directly opposed to having that sense of belonging and connection to community that we all need.

So for example, for young people, one of the super protective factors is having a caring, trusted adult that you can go to if you need help, someone that's validating of your identity and your experiences can not only help to reduce suicide risk but also a whole host of other negative outcomes like interpersonal violence, substance use, dating violence, binge drinking and I could go on. At the community level some of the protective factors that might seem like no-brainers include economic stability, so think housing security, food security, affordable childcare, livable wages, access to responsive healthcare, and even, you know, positive social norms about mental health and the promotion of well-being or what it means to access care. All of these are preventative of a lot of negative outcomes, not just suicide.



Dacee Barnard:

That's a lot of really great information and it sounds like there's a lot of ways in which the military community can come by and support each other just in day-to-day life, not only in hard times. I know that there is a conversation that's been going on surrounding lethal means safety and actually that's one of the Action Alliance's key actions is to ensure lethal means safety. Can you tell our listeners what do we mean when we say lethal means safety and how can they start incorporating these safety strategies into their daily life?

Sarah Brummet:

At the point of crisis, if you're struggling, one protective factor can be putting time and distance between someone who's struggling and a potentially lethal method. And it's really about a temporary action during that period of crisis; making sure that you don't have ready access to something. So, for instance, I might be an avid sport shooter and hunter, but when and if I go through a crisis, I know that the best thing for me and my family is to temporarily explore some options that might give me some space from my firearms. The same might be true if let's say, you know, I maybe go out to happy hour and have one too many or two too many drinks means that right now it's not a good time for me to be driving, but it doesn't mean I can never drive again. You know, once I sober up tomorrow, I'll be okay, and I can return. And the same is true around lethal means safety. We're really talking about a point in time where the normal decisions you might make are different based on that context that you're in.

Dacee Barnard:

Wow, that sounds really powerful, and it sounds like it's something that might seem challenging to do, but it's so important for safety, not just in suicide, but just all-around community safety. I love how you connected that to alcohol and driving that makes it really make sense and resonate. But you've given us quite a bit of information. You've talked so much about what you do and the resources. Do you have any other suicide prevention resources or tools that you can think of that Service members and their families should be aware of?

Sarah Brummet:

There is a lot out there. You know, the biggest one that's newer in the country is our new three-digit dialing code 988 that you can dial or text and there's even an online way to chat as well that folks can receive support in crisis, whether that's suicide, mental health, substance use, you name it, that's available no matter where you live in the country, 24/7/365. And it's important that folks know that's just about making it easier and more readily accessible to receive that support in a tough time. You know, action Alliance certainly has National-level resources, but really, it's our partners who have resources and support available. You know, some that already exist really come from, you know, the American Foundation for Suicide Prevention and the community-focused resources and supports they have, both for folks who might be concerned about someone, but also those who have lost a loved one



to suicide. And finding that connection to others who have that experience and are willing to talk about it can be tremendously healing to folks who are going through that.

Dacee Barnard:

Sarah, thank you so much for sharing all this information. It really does inspire hope for me as someone who works in the field, just to know that there's so much out there for our military community and so many ways that they can feel connected and engaged if they have a hard time. It has been just truly an absolute pleasure to have the Action Alliance join DSPO for this really important conversation about suicide prevention. For all of our listeners, thank you so much for joining us and we hope that you've enjoyed this episode and that you'll join us again. Have a good day.