INSTRUCTOR GUIDE

U.S. ARMY

DIRECTORATE OF PREVENTION,
RESILIENCE AND READINESS

Ask, Care, Escort
Suicide Prevention Training
Fighting Stigma Module
for Circle of Support

ACE Base +1

September 2023

VERSION 1.3

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Introduction

The Army Suicide Prevention Program was instituted by CSA General John A. Wickham in 1984. Since that time, suicide prevention and awareness has evolved. In 2009, Ask, Care, Escort (ACE) training was introduced to update existing suicide prevention training and to respond to a rise in suicide rates.

ACE training introduced suicide prevention and intervention concepts that had proven successful outside of the Army. Its primary goals were to increase suicide awareness and improve the ability of Soldiers to identify team members who may be suicidal and get them to help.

In 2018, ACE training was updated to highlight its use not only during a crisis, but also before one occurs by incorporating Army team building and unit cohesion concepts. This training is aligned with the Center for Disease Control and Prevention's strategic comprehensive public health approach to suicide prevention.

In 2022, the ACE suicide prevention and intervention material was updated yet again and coined ACE Base + 1. The training now consists of a base module along with a menu of "+1" modules that the unit's command team can choose from based upon the unit's needs. Together, the base module and the +1 module make up the mandatory one hour of annual suicide prevention and intervention training.

In addition to the tailored training approach, the training is now designed to be more interactive and conversational. In contrast to a traditional "annual briefing," ACE Base +1 is an "annual conversation" at platoon level where Soldiers in the platoon are able to discuss how they can take care of one another on a human level as it pertains to suicide prevention and intervention.

In 2023, the Army's suicide prevention and intervention training expanded to include a tailored curriculum for the Soldiers' Circle of Support members and DA Civilians. A Soldier's Circle of Support includes anyone whom the Soldier considers to be a priority within their support system, such as a spouse, significant other, parent, sibling, other family member, mentor, and friend. The intent is that offering Circle of Support members the same knowledge and skills while using the same language and strategies can enable conversation between the Circle of Support member(s) and the Soldier regarding suicide prevention and intervention. What's more, it can promote effective communication, bolster protective factors like increased cohesion and connection, and increase suicide prevention efforts within the whole Army Family.

Intent

Cohesive efforts: This ACE module resembles the content and format of the ACE Base module for Soldiers but has been tailored for members of a Soldier's Circle of Support (e.g., spouse, significant other, parent(s), siblings, extended family, friends, mentors). It is strongly recommended that this training be offered around the same time frame that their Soldiers receive the ACE Unit Training. According to AR 600-63, ACE suicide prevention and intervention training must be offered to Circle of Support members on an annual basis.

A majority of the examples, discussions, and activities are focused on how a Circle of Support member might apply ACE concepts with their Soldier. The Soldier-focused examples are not to discount the importance of other people (e.g., family members, friends) or relationships that participants have with others; instead, it is done intentionally to keep the training focused on similar learning concepts. Also, it is the most universally relevant focus given every participant attending is there due to having vested interest in a Soldier.

Facilitated discussion and engagement: This training is designed to be facilitated by a single instructor and delivered in an interactive, discussion-based format (rather than conventional lecture or didactic format). Because this module utilizes group interaction, it is highly recommended that it be led by an instructor who is able and willing to elicit participant engagement through facilitating meaningful discussions and practical exercises. The practical exercises are essential in allowing participants the opportunity to try out the Ask, Care, Escort process strategies in a safe, non-threatening environment and develop competence and confidence to use the strategies in real-life scenarios.

Delivered in-person to small groups: The ACE training for Circle of Support is intended to be delivered in person and it is highly recommended that this training be conducted with small groups (fewer than 40). In-person training allows for optimal engagement and also fosters relationship building amidst the participants. For example, new friendships and support networks may be established among those attending this class. However, there may be circumstances that warrant a virtual training option in order to be realistic and inclusive to all Circle of Support members who wish to participate (e.g., Circle of Support members being geographically scattered, child-care constraints, work schedules). Trainers and command teams are advised to use their discretion to determine the best mode of delivery without compromising its value.

Training Requirements: The U.S. Army's requirement for annual suicide prevention training is for Soldiers to complete one hour of training that includes the "ACE Base" module along with one of the "+1" modules, and for the Circle of Support members to be offered annual training as well.

ACE Base

+

Fighting Stigma   or   Active Listening   or   Practicing ACE   or   Lethal Means
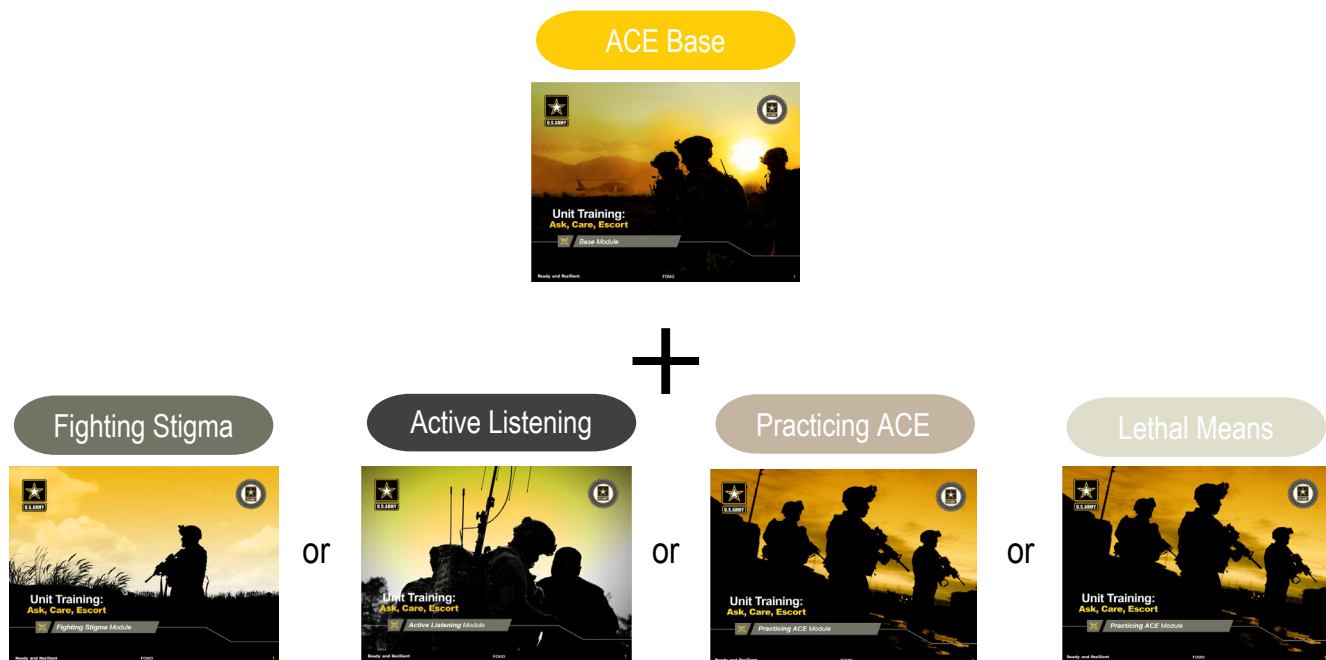
Note: Each module should be trained to standard and not to time, it is most effective when time is allowed for in-depth group discussion and participation. To maximize the benefits of this training, allow for extra time for dialogue and interaction.

Training Package Components: The complete "ACE Base +1" training package consists of five PowerPoint® presentations (i.e., ACE Base, Fighting the Stigma, Active Listening, Practicing ACE, and Lethal Means) and a SmartGuide with key information to be discussed for each slide (see notes page iv for SmartGuide overview).

Training Precautions: The ACE suicide prevention and awareness training deals with sensitive information and may trigger painful memories or other issues for training participants. It is possible that someone attending the training may have experienced thoughts of suicide or may have experienced a loved one who has struggled with suicidal thoughts, ideation, or worse – died by suicide.

If you are not a chaplain or behavioral health provider, it is recommended that you have someone from the chaplain's office or Behavioral Health Services on call during your training session. Be sure to coordinate before the training and obtain their name, title, and consent to act as an immediate resource if needed. Provide them with the date, time, and location of the training; on the day of the training, be sure to have the number(s) at which they can be reached or another plan for reaching them.

The mention of any non-federal entity and/or its products is not to be construed or interpreted, in any manner, as federal endorsement of that non-federal entity or its products.

Training Preparation:

Content: ACE Training is the U.S. Army's annual suicide prevention training, which is mandatory for Soldiers (IAW AR 600-63) and to be made available to Circle of Support members. The material is based on the most current research and academic literature on suicide prevention and follows educational best practices. The training is designed to enable the instructor to successfully lead participants through suicide prevention concepts with interactive activities and discussions to prompt critical thinking. For the training to be most effective, it is advised that instructors review all content in advance.

When instructing, follow the content as written. Insert personal stories/examples as appropriate. Prompts are written into the SmartGuide to highlight times when personal stories/examples can be most valuable. There are many benefits of sharing a personal story or example. For instance, stories/examples can help a trainer to capture the audience's attention, gain common ground with the audience, and engage the audience on a deeper level. Most importantly, effective use of personal stories or examples can help participants gain better contextual understanding of the material being taught.

The following guidelines can help ensure effective use of personal stories and examples. The story/example
- serves a clear purpose, specifically it reinforces the training objective/content
- helps participants to gain a better contextual understanding about the concepts
- does not distract participants from the focus of training (e.g., be mindful of using potentially triggering or traumatizing examples/stories)
- is simple, concise, and easy to follow/understand

Remember, sharing your personal stories/examples is to benefit the participant, not yourself. The story/example should highlight the content, not you as a person (e.g., avoid the mistake of making the training about yourself). Lastly, it is highly recommended that you practice your stories/examples before using them in a training session. Rehearsing the story/example can improve effective delivery, especially if the story/example is one that could be emotional for you to share.

Flow: This training module is comprised of four main sections.

Slides 1-3	Slides 4-7	Slides 8-10	Slides 11-14	
Introduction	Stigma, It's Impact, & Tactics	Practical Exercises	Application & Closing	Training Complete
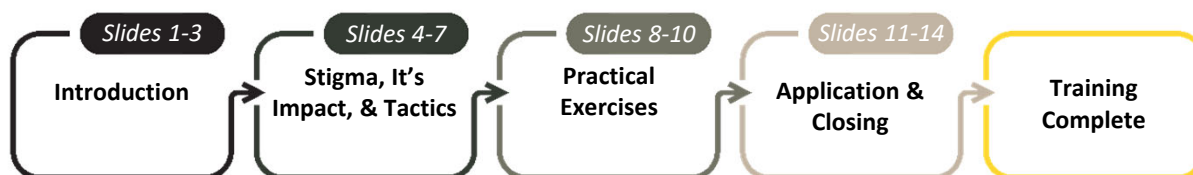
Training Preparation (continued):

Language: Suicide can be an uncomfortable topic to discuss, and it can be difficult to find the words to talk about it. As researchers continue to learn more about suicide and those impacted by it, the language used continues to evolve. For example, the term "committed suicide" perpetuates the idea that suicide is a criminal act, which can be stigmatizing. Instead, consider the phrase "died by suicide" or "attempted suicide."

Participants may unintentionally use stigmatizing language, as not everyone understands the harmful impact of these words. It is recommended that during the training, participants are allowed to use the words they feel comfortable with to promote open conversation; however, it is recommended that the instructor supports participant usage of destigmatized language and use those words themselves.

Important concepts: When Soldiers and Circle of Support members collectively implement the ACE process, use Active Listening and intentionally Fight the Stigma, it creates culture of trust and cohesion. Consequently, a culture of trust and cohesion encourages help-seeking behavior; Soldiers and Circle of Support members know that when they need someone, other members of the Army Family (e.g., Soldiers in the unit, Circle of Support members, DA Civilians) will have their back. As the trainer, work to present the material as a facilitated discussion so the participants are learning the material but also learning from one another and potentially growing their support network.

ACE Training Facilitation Strategies:

Review the SmartGuide prior to the training session. Take notes on when you may use different facilitation strategies to promote an effective learning experience for participants.

Facilitation Strategies	When/How to Use
Asking Quality Questions - Asking quality questions is important for generating participation and group discussions, which is why scripted questions have been included within the material.	Use closed-ended questions for a check on learning or to get a group consensus. Use open-ended questions when you want to generate discussion. Restate your question when it seems unclear. Poll the audience to get a show of hands, then ask participants to provide examples or explain their rationale. Let participants know, when appropriate, if there is "no right or wrong answer for this question," which can ease the pressure on the group.
Efficient Instructions - Efficient instructions for exercises are clear and concise directions resulting in participants' understanding of the intent of the exercise, what actions they need to take, and how long they have to complete the work.	Include timings in your instructions to help participants understand how in-depth their discussions should be. Provide time prompts such as "one minute left," to keep the group on track during activities. Demonstrate lengthy instructions with another individual.
Conducting Effective Discussions - Discussions can sometimes get off track. It is important to be purposeful when leading a conversation about a particular topic or activity.	Effective discussions are learner-centric; keep the conversation moving forward and include a summary with key takeaway points. If restricted in your available time, consider having partners/small groups discuss then select a few representatives to share with the larger group.
Handling Challenges Effectively - There can be many challenges that occur when teaching a class. Having strategies for challenges that are likely to arise can help you be more prepared.	Be prepared to handle difficult questions, manage emotionally-charged contributions, and allow the participants time to process what you have just said or asked (be okay with silence). Utilize on-call resources (e.g., chaplain, Behavioral Health) if/when necessary.
Be Aware of Timing - Pace yourself to ensure there is sufficient time for practical exercises and group discussion.	Leave ample time to review instructions, execute exercises, and hold discussion. If restricted in your available time, consider having volunteers demonstrate an activity for the whole group rather than working in pairs.

Instructor SmartGuide Format:

This SmartGuide has been designed to be user-friendly while containing as much information as possible to help you present this suicide prevention training module.

At the beginning of the module is a very short introduction for the trainer, which explains the intent of the material.

When notes pages are printed and the booklet is opened, you will see the format below. On Side A is an image of the slide, a statement of slide intent (i.e., the target), and then key points and sample talking points. Key points and sample talking points may continue on to Side B when necessary.

The key points are highlighted in yellow and they briefly describe what must be covered to meet the intent of the slide. These are followed by more details or instructions.

The key points tell you _what you need to do_, while the bulleted notes explain _how to do it_.

When you start preparing to train the module, you should read all of the detailed information. When you become more familiar with the material, the highlighted key points will be enough to remind you how to train each slide effectively.

SmartGuide Symbols:

The following symbols are used throughout the ACE Base +1 material.

Training Module Symbol Guide

Symbol	Represents	Explanation
(clock)	Timing	This symbol indicates the amount of time allotted for a given section of the material.
(target)	Target / Intent	This symbol indicates the main function or rationale for a given slide.
1.	Key Point	Numbers are used to indicate the main points that must be addressed in order to meet a given slide's target / intent.
●	Sample Talking Point	Bullets are potential talking points that a trainer can choose to use to elaborate on key points or to review as context to the key points.
[NOTE]	Note to Trainer	Bracketed text indicates a note to the trainer which is not intended to be read aloud. These provide hints on how to present the material and tips to avoid potential issues that may arise within a given topic.
(weightlifter)	Exercise	This symbol indicates the start of an exercise or activity. To avoid down-time, keep an eye out for these and plan accordingly.
[?]	Discussion Question(s)	This symbol identifies when there is a non-rhetorical discussion question(s) in the instructional content that follows.
(green triangle)	Continue	This symbol indicates that the training material for a given slide continues onto the next page.
(red square)	Stop	This symbol indicates that the training material for a given slide ends on this page.

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Circle of Support Training:
Ask, Care, Escort

Fighting Stigma Module

DPRR   1

◎ **Introduce the module (and yourself, if necessary) and state the impact of fighting stigma and building protective factors.**

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1.   Introduce the module (and yourself, if necessary).

- Welcome to the second part of the ACE Base + 1 suicide prevention and intervention training, specifically the *Fighting Stigma* module.

2.   State the impact of stigma and that active participation in today's training can help participants develop tactics to fight stigma and build protective factors.

- Stigma has negative impacts. It's not just about hurting someone's feelings—stigma can undermine trust within individual relationships and groups or communities.

- Actively participating in today's discussions about stigma and working with fellow participants through the practical exercises can help you develop tactics to fight stigma and also help to build protective factors within yourself and others in your Circle of Support.

*[**NOTE**: This is a natural transition to the next slide.]*

Record your own notes here:

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Concrete Experience
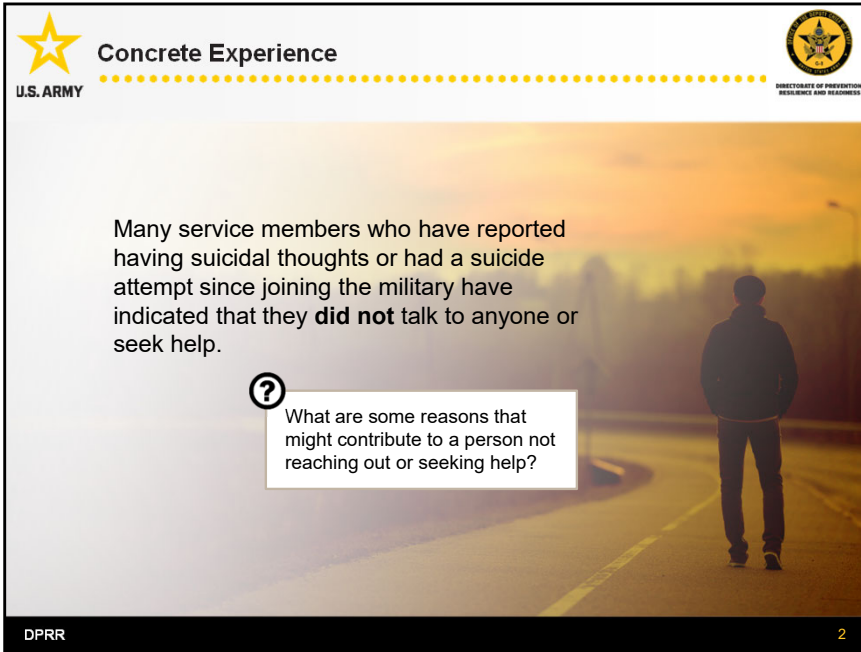
Many service members who have reported having suicidal thoughts or had a suicide attempt since joining the military have indicated that they **did not** talk to anyone or seek help.

(?) What are some reasons that might contribute to a person not reaching out or seeking help?

DPRR   2

◎ **Discuss challenges that a person may face that could interfere with implementing the ASK, CARE, ESCORT process.** **[?]**

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1. **Share the reality about many service members not seeking help when needed.**

- Many service members who have reported suicidal thoughts or a suicide attempt since joining the military have indicated that they did not talk to anyone or seek help.

[NOTE: This information was included in the notes of the ACE Base module but is used here for engagement purposes.]

2. **Discuss reasons that might contribute to a person not reaching out or seeking help.**

- *[ASK]* What are some reasons that might contribute to a person not reaching out or seeking help?

[NOTE: Allow for responses. Possible examples include

- *believing that asking for help is a sign of weakness; feeling ashamed or embarrassed*

- *scared of ramifications; fear of being labeled or criticized by others*

- *financial costs or time commitment*

- *thinking you can handle the problem on your own (preconceived stereotypes of self-reliance)*

- *accessibility issues such as finding services accepting new patients and/or within insurance.]*

2-A

Record your own notes here:

3. **Briefly explain the connection between a person's behavior (e.g., seeking help), beliefs, and stigma.**

- A person's behavior is influenced by their thoughts, beliefs, and emotions.

- Judgmental beliefs like "something is wrong with me" or "if I get help, then people will think I'm weak" can lead to emotions like shame and fear, which can then lead to avoidance behaviors.

- Stigma is what can influence a person's beliefs and their willingness to seek the help they need.

*[**NOTE**: Do not go into any greater depth on stigma; the intent of this slide (i.e., group discussion and explanation of the connection between behavior, beliefs, and stigma) is to set up the purpose of the module, set a foundation, and foreshadow the deeper learning that is forthcoming.]*

4. **Transition.**

- That brings us to the purpose of today's training.

Record your own notes here:

Training Purpose

U.S. ARMY

To enhance Circle of Support members' ability to recognize and fight stigma and build trust and cohesive relationships to help prevent suicide within their families and communities

DPRR   3

🎯 **State the training purpose and provide a brief overview of what the module entails.**

---

1.   State the training purpose.

- The purpose of this module is to enhance Circle of Support members' ability to recognize and fight stigma and build trust and cohesion to help prevent suicide within their families and communities.

2.   Provide a brief overview of what the module entails.

- We will begin by discussing what stigma is and the impact it can have on help-seeking behaviors.

- Then each of you will have the opportunity to put the training into practice by using stigma-fighting tactics and the ACE process.

- Lastly we will discuss how taking an active role to fight stigma in yourself, your families, and your communities can help reduce the risk of suicide.

Record your own notes here:

3-A

Record your own notes here:

3. **State that this training uses Soldier-focused examples to ensure relevance for all participants but that ACE concepts, skills, and strategies are applicable in supporting anyone.**

[*NOTE*: *If the Fighting Stigma module is trained directly after the ACE Base module, then this key point may not need to be addressed again.]*

- In today's training a majority of the examples, discussions, and activities will be focused on how a Circle of Support member might apply ACE and fighting stigma concepts with their Soldier.

- The Soldier-focused examples are not to discount the importance of other people or relationships in your lives such as family members, friends, or colleagues.

- The Soldier-focused examples are simply the most relevant given every participant attending this training today is here because you have a vested interest in a Soldier.

- Please note that the concepts, skills, and strategies you learn today can help you provide support to anyone, not just your Soldier.

4. **Transition.**

- Let's start by taking a closer look at what stigma is so that you are more capable of identifying it.

Record your own notes here:

Define stigma and discuss the two main types **[?]** of stigma.

1. **Define stigma and state the two main types.**

    [NOTE: Even though stigma was likely discussed earlier, it is still important to provide this clear definition for everyone to be on the same page.]

    • Stigma is the negative attitude toward people or ideas based on certain characteristics such as one's mental or physical health, or social attributes like gender, sexuality, or race that might distinguish them from others in the group.

    • Stigma comes in multiple forms. Two of the main types of stigma are public stigma and self-stigma.

2. **Explain public stigma and discuss indicators/signs of public stigma.**

    • **Public stigma** is when an individual or a group stereotypes certain characteristics or behaviors, then discriminates against other people displaying those characteristics or behaviors.

    • An example of public stigma might be a unit stereotyping those who seek help as mentally weak.

Record your own notes here:

- **[ASK]** What are some signs or indicators of a public stigma being present?

[**NOTE**: Allow for responses. Possible responses may include

- *singling someone out*

- *bullying, hazing or harassment*

- *labeling someone/group (like "weak" or "crazy")*

- *gossiping about others; making unfavorable comments about someone or a group of people*

- *shunning certain people; rejecting them; being exclusive rather than inclusive*

- *showing favoritism*

- *judging someone based on their preferences and/or appearances.]*

3. **Explain self-stigma and discuss indicators/signs of self-stigma.**

- **Self-stigma** is buying into the public stigma and applying it to themselves. It occurs when someone perceives a negative attitude toward themselves from others and then internalizes it. This process usually results in a person having a negative view of themselves and commonly experiencing emotions like shame and fear.

- **[ASK]** What are some signs or indicators that someone is experiencing self-stigma?

[**NOTE**: Allow for responses. Possible responses may include

- *choosing not to participate*

- *disclosure concerns*

- *avoiding others, intentionally avoiding groups or social situations*

- *talking badly about themselves*

- *lowering expectations of themselves.]*

4. **Transition.**

- Knowing the signs or indicators of stigma can increase your ability to recognize stigma when it is present within yourself or another person within your Circle of Support or your communities.

Impact of Stigma

What impact does stigma have on Soldiers and Circle of Support members?

- Stigma undermines relationships by negatively impacting trust and feelings of psychological safety within the relationship or environment

- Stigma is one of the main barriers for people getting the help and support they need when facing life challenges

- Not seeking help early – or at all – can increase a person's risk for crisis, and subsequently contribute to a greater risk for suicidal thinking and/or behaviors

DPRR   5

🎯 **Discuss the impact of stigma on cohesive relationships, help-seeking, and suicide risk.**   **[?]**

[SLIDE BUILDS]

1. **Discuss the broad impacts of stigma, to include the presence of stereotypes or use of labels on Soldiers and Circle of Support members.**

- *[ASK]* What impact can stigma have on Soldiers and Circle of Support members?

[NOTE: Allow for discussion. Responses might include

- *it could cause fear to seek care if it is legitimately needed*

- *it could decrease a person's willingness to speak up if injured or experiencing mental health struggles*

- *it can cause a divide between family members or conflict within relationships*

- *it lowers morale and trust.]*

[CLICK TO ADVANCE]

- There are two concerning outcomes of stigma that are important to highlight: (1) stigma can break down trust and cohesive relationships, and (2) stigma is a main barrier to people, especially Soldiers, seeking help when they need it. Let's further explore each outcome.

▶

Record your own notes here:

Record your own notes here:

2. **Highlight the impact of stigmatizing words and behaviors on individuals and relationships.**

- When stigmatizing words or behaviors are shared by members of a family or community and go unchallenged, it signals social acceptance—that it's okay to isolate and separate certain individuals, that it is okay to discriminate or treat them differently.

- Stigma not only disrespects the individual, it undermines relationships by negatively impacting trust and feelings of psychological safety within the relationship or environment.

3. **Explain how stigma can impact someone's willingness to seek help when facing a challenge.**

- At the start of this module we discussed reasons that might contribute to a person not reaching out or seeking help when facing life challenges. A main barrier is stigma.

- If there is a negative stigma about help-seeking, a person's concern for being labeled or discriminated against can result in the delay or prevention of getting the support they legitimately need.

- Help-seeking refers to seeking help or support to face any type of life challenge such as financial, relationship, emotional, mental health, family issues, sleep problems, or any other reason.

- Whatever the reason, delaying getting the necessary help can often make the problems worse and make resolving them even more difficult.

4. **Explain the connection among stigma, help-seeking, and suicide risk.**

- Not seeking help early, or at all, can increase a person's risk for crisis, and subsequently contribute to a greater risk for suicidal thinking and/or behaviors.
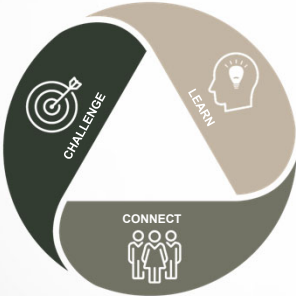
5. **Transition.**

- Discussing stigma's negative impact might feel like doom and gloom right now. The reality of stigma's negative impact is heavy stuff. There's some good news, however: you play an important role in reversing the effects.

Fighting Stigma

When a person senses others in their environment to be supportive of mental health, then the person is more likely to talk about their problems with others and to seek help from mental health professionals.

CHALLENGE

LEARN

CONNECT

(?) How have you seen other people in your family, community, or society at large fight against stigma?

DPRR   6

Record your own notes here:

🎯 **Explore how Circle of Support members play a role in reducing the stigma and outline three** **[?]** **overarching tactics to fight stigma.**

[SLIDE BUILDS]

1. **Explain that if a person believes others around them are supportive of help-seeking, then they are more likely to seek the help they need.**

- Research has shown that when a person perceives that others in their environment – such as family members, leaders, or fellow Soldiers – to be supportive of mental health, then the person is more likely to talk about their problems or stressors with others in their family or community and seek help from a professional.

▶

6-A

	Record your own notes here:

2. **Ask participants how they have seen other people in their community or in society at large fight against stigma.**

- *[ASK]* How have you seen other people in your family, community, or society at large fight against stigma?

[NOTE: Allow for responses. Some examples might include

- *professional athletes/celebrities speaking out about behavioral health issues and seeking help*

- *changes in Army policy*

- *openness to share about experiences of utilizing helping resources (e.g., therapy, Behavioral Health, Family Advocacy Program, Army Community Services)*

The intent of this discussion is to provide them the opportunity to consider ways stigma can be challenged/fought before telling them of three overarching tactics. While receiving participant responses, consider how they align with the three overarching tactics of learn, connect, and challenge.]

3. **State that there are three overarching tactics that can help to fight stigma and engaging in these tactics shows others that you CARE.**

[CLICK TO ADVANCE]

- There are three overarching tactics that can help you to fight stigma: **learn, connect,** and **challenge.**

- Taking an active role to learn, connect, and challenge stigmatizing language and behavior demonstrates to people that you CARE and that you will not tolerate stigma, discrimination, and disrespect within your community.

- Remember, when people know you care, then they are more likely to trust you and reach out before a problem escalates to a crisis.

- Let's explore each of these tactics a little further, specifically how you can use them to fight stigma.

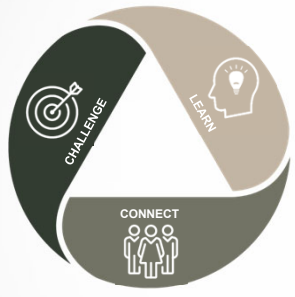*[NOTE: This is a natural transition to the next slide.]*

[NOTE: As you review each tactic in more detail on the next slide, connect some of the participants' responses to their respective category/strategy.]

Tactics to Fighting Stigma

LEARN - Be open to learn, take initiative to educate yourself about people and experiences different than your own to gain a deeper understanding.

CONNECT - Be a reliable community member, promote strong peer bonds and a sense of team unity, and demonstrate concern for each other.

CHALLENGE - Make on-the-spot corrections, challenge self-beliefs, and lead by example with your actions.

You can tap into other tactics and/or draw upon personal values to help you overcome potential discomfort in using one of the stigma-fighting tactics.

DPRR   7

Review three overarching tactics that can help to fight stigma: learn, connect, and challenge.

[NOTE: If comfortable, consider sharing a personal story/example of how you have used one of the tactics to fight self- or public stigma.]

1. Describe the tactic "Learn" and how it can help to fight stigma.

- Stigma usually arises from a lack of awareness, lack of education, or misguided beliefs about the behavior or characteristic being judged.

- The "Learn" tactic means to educate yourself and teach others about the characteristics or differences that are subject to stigma, such as mental health.

- Learning can be done through formal means like formal education (e.g., college classes) or through informal means like self-paced learning (e.g., seminars, speaker events), reading, and through connection and conversation with others.

2. Describe the tactic "Connect" and how it can help to fight stigma.

- The "Connect" tactic means to promote strong bonds and a sense of unity that fosters a shared concern for each other.

- You can help others feel connected by being a reliable person (i.e., support network) and by supporting them in their family, friend, and spiritual connections.

Record your own notes here:

7-A

- Furthermore, connection is a key protective factor that mitigates the risk of negative outcomes.

3. **Describe the tactic "Challenge" and how it can help to fight stigma.**

- Stigma can result from inaccurate information left unchallenged or uncorrected (e.g., rumors).

- The "Challenge" tactic means to recognize stigma and respond accordingly. This can include challenging self-beliefs as well as making on-the-spot corrections within the unit when necessary.

- Challenge can also include leading by example and speaking up as an advocate like openly sharing about your positive experience with talking to others about problems or seeking help from behavioral health.

4. **Emphasize the interconnectedness of the tactics (i.e., the arrows in the diagram) and drawing upon personal values when using the tactics seems difficult or uncomfortable.**

- Engaging in these stigma-fighting tactics can sometimes be difficult and uncomfortable. There are two ways to help you in these situations.

- First, you might tap into the other two tactics. For example, when challenging stigma, then connection and rapport can help others be more receptive to your challenging actions, and with more accurate knowledge (from learning), you can be more equipped to challenge stigma when you see it.

- Second, you might draw on your personal values. For example, you might pull on values of open-mindedness, seeking truth, or learning new things to engage in the tactics of challenge or learning. Or you might draw on the value of unity to reach out and connect with someone who is experiencing the impact of stigmatizing behavior.

5. **Transition.**

- Now let's get in some practice to deliberately use these tactics to fight stigma.

Record your own notes here:

Fighting Stigma: Practical Exercise 1

Part 1: While attending a local BBQ, you are sitting at a picnic table with several of your friends. The conversation turns onto the topic of a local teenager who attempted suicide. It starts out as being compassionate, but changes to be about how weak and selfish a person must be to try something so awful.

? What might a person with your knowledge of stigma and suicide prevention and intervention do in this situation?

CHALLENGE LEARN CONNECT

DPRR   8

🎯 **Facilitate Part 1 of the Practical Exercise.**   **[?]**

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1. **Set up the practical exercise (PE) and state the intent.**

- This is a three-part practical exercise that you will work through in small groups.

- After each part, we will debrief before moving to the next. This will give you the opportunity to hear ideas, experiences, and perspectives from other groups.

- The intent of this practical exercise is to be able to process the steps you might take to fight stigma when you encounter it in your environment or yourself so that you are more equipped to do so when you complete this training.

2. **Conduct Part 1 of the PE: Using the tactics.**

- Here's the scenario for Part 1.

- While attending a local BBQ, you are sitting at a picnic table with several of your friends. The conversation turns to the topic of a local teenager who attempted suicide. It starts out as being compassionate, but changes to be about how weak and selfish a person must be to try something so awful.

▶

Record your own notes here:

*[**NOTE:** Encourage small groups of 3-5 participants as this size promotes a task-focus and optimal engagement from all members.]*

Record your own notes here:

- In your small groups, consider the scenario along with the tactics of learn, connect, and challenge, and discuss the question.

- *[ASK]* What might a person with your knowledge of stigma and suicide prevention and intervention do in this situation?

[NOTE: Allow small group discussions.

Then, restate the question and let a couple of groups share their key ideas. When participants offer their ideas, help them to connect their actions to one of the three tactics (learn, connect, challenge) without forcing it. Example responses might include

- *Challenge: "I don't think we should assume someone is weak or selfish without fully knowing a person's situation. There's always more to the story, we shouldn't make assumptions."*

- *Learn/Education: "Suicide is complex and many factors can contribute to a suicide attempt; it doesn't make them weak or selfish."*

- *Connect: Others at the picnic table observe you challenge the stigmatizing words and behavior, which shows you care about others and it builds a sense of trust from others witnessing your actions.]*

3. **Ask participants what values they or another person might draw on to engage in stigma-fighting tactics and behaviors.**

- This might be a situation where it is uncomfortable to speak up or to specifically challenge the stigmatizing behavior that you've noticed.

- *[ASK]* What values might you or another person draw on to engage in stigma-fighting tactics in this scenario?

[NOTE: Allow for responses. Examples might include

- *fairness: speaking out to encourage respect for the person that is not present to defend themselves*

- *open-mindedness: considering other perspectives or possibilities and encouraging others to do the same.]*

4. **Transition.**

- Let's move on to Part 2.

Fighting Stigma: Practical Exercise 2

Part 2: A few moments after you speak up to educate, challenge, and connect with the people at the table on what can bring a person to a suicide attempt, people naturally get up from the table and go their separate ways. In the moment, it seemed that everyone was accepting of your comments and have gone on with the BBQ and all its activities, but you notice that one individual, Sam, has returned to the table and is looking off into the distance away from the gathering.

? How could a person use the steps of **ACE** to check in on Sam?

DPRR   9

Record your own notes here:

🎯 **Facilitate Part 2 of the Practical Exercise.**   **[?]**

---

1.   Conduct Part 2 of the PE: Using the ACE process.

- A few moments after you speak up and educate, challenge, and connect with the people at the table on what can bring a person to a suicide attempt, people naturally get up from the table and go their separate ways. In the moment, it seemed that everyone was accepting of your comments and have gone on with the BBQ and all its activities, but you notice that one individual, Sam, has returned to the table and is looking off into the distance away from the gathering.

- In your small groups, consider the scenario, and discuss the question.

- *[ASK]* How could a person use the steps of ACE to check in on Sam?

[NOTE: Encourage participants to be specific in how they would use each step. Allow small group discussions.

Then, restate the question and let a couple of groups share their key ideas. Example responses might include

- *ASK: "I can't help but notice that your behavior has changed since the suicide attempt was brought up. Are you doing okay?"*

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Record your own notes here:

- *CARE: you actively listen by giving Sam your attention, and encourage Sam to share what they are experiencing.*

- *ESCORT: help Sam transition back into the BBQ activities (e.g., playing cornhole) and positively interacting with the others at the BBQ.*

  During the conversation with Sam, if any risk factors or warning signs are indicated, then consider escorting to a helping resource.]

2. Transition.

• Let's now move on to Part 3.

Record your own notes here:

🎯 **Facilitate Part 3 of the Practical Exercise.**   **[?]**

---

1. **Conduct Part 3 of the PE: Follow-up and ongoing effort.**

- Using the concepts of ACE, through asking questions and actively listening to Sam, you discover that Sam is friends with the teenager's family. The views spoken by the people at the table have caused Sam to re-experience the anguish from learning about the attempt.

- In your small groups, consider the scenario, and discuss the question:

- *[ASK]* What actions might a person take next to best support Sam, and why?

[NOTE: Allow small group discussions.

Then, restate the question and let a couple of groups share their key ideas. Example responses might include

 - *share resources with Sam that might be helpful for her personally such as the phone number to the MFLC or local counseling office (Learn/Educate)*

 - *follow up with Sam a few days after the BBQ to check in (Connect)*

 - *work with a local Behavioral Health Specialist to set up a community event on suicide awareness (Learn, Challenge, Connect).]*

▶

10-A

2. **State that fighting the stigma is not just important in the moment it presents itself, but it is an ongoing effort.**

- Confronting stigma the moment you encounter it is important. Fighting stigma is not a "one and done" approach, however.

- In this scenario, following up with Sam and others who were at the table can have great benefits to the individuals involved and the community as a whole. Continue to have conversations to raise awareness about suicide and how each person can play a role in prevention and intervention of suicide.

3. **Transition.**

- Now let's transition from fighting the stigma in a training setting to fighting it in reality.

Record your own notes here:

Practical Application

U.S. ARMY

DIRECTORATE OF PREVENTION, RESILIENCE AND READINESS

CHALLENGE

LEARN

CONNECT

What specific actions will you take to fight stigma within your family or local community?

- Fighting stigma within one's family or fighting public stigma often starts with taking a pause to look inward.

- During challenging times, draw on your personal values (or Army Values) for motivation to engage in stigma-reducing behaviors and in the ACE process.

DPRR   11

Facilitate a discussion on how participants will practically apply knowledge from today's training to fight stigma inside their formation. **[?]**

[SLIDE BUILDS]

1. **Acknowledge the participants' efforts within this training to increase their capability to fight stigma.**

- Addressing stigma in hypothetical scenarios, in a low-stress environment like this training session, has value. It allowed you to work together with other Circle of Support members and think through what actions can be taken.

- Now having done that, and having increased your awareness and knowledge of stigma and tactics to fight it, let's discuss how you can personally and practically apply this knowledge within your families or communities.

2. **Facilitate a discussion on how participants will practically apply knowledge from today's training to fight stigma within their communities.**

- *[ASK]* What specific actions will you take to fight stigma within your family or local community?

[NOTE: Allow for responses. Examples may include

- *having deliberate conversations about respecting others and appreciating diversity*

- *family bonding activities*

▶

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11-A

Record your own notes here:

- *when stigma is recognized, bringing it to light and having the courage to address it*

- *building protective factors: connecting with individuals who might be experiencing effects of stigma; connecting with those demonstrating stigmatizing behavior so you have the rapport to help educate and challenge their stereotyping and discriminatory behaviors*

- *being an advocate and role model: speaking up about your personal experiences with utilizing helping resources.]*

3. **Encourage participants to look inward and identify any beliefs or behaviors that fuel stigma.**

[CLICK TO ADVANCE]

- Fighting stigma within your family or fighting public stigma often starts with taking a pause to look inward. Take an honest look at your attitudes and behaviors that might be fueling a stigma.

[NOTE: Pose the following questions rhetorically to stimulate internal thought/introspection.]

- *[ASK]:* Are you the first barrier preventing others from reaching out for and getting the help they need? Are your beliefs, your words, and your actions aligned when it comes to people asking for help?

- You or others may unintentionally or innocently use language or behaviors that are in fact harmful or stigmatizing. If or when this happens, be receptive with being challenged and corrected.

4. **Encourage participants to draw on their personal values to engage in stigma-reducing behaviors in challenging situations.**

- There will likely be times when taking action to fight stigma is difficult or uncomfortable. During these more challenging times, draw upon your personal values or the Army Values for motivation to engage in stigma-reducing behaviors and in the ACE process.

- For example, you can draw on your personal values such as *courage* to challenge the stigma, *curiosity* to learn more about mental health, or on *loyalty* to foster a stronger connection with a someone who is different than you.

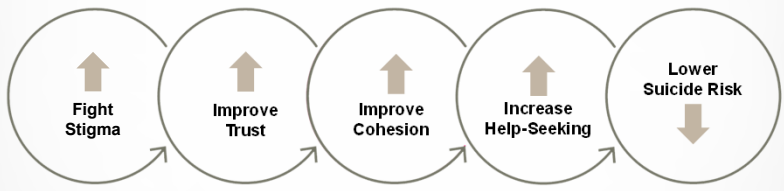*[NOTE: This is a natural transition to the next slide.]*

Fighting Stigma and Suicide Prevention

Fighting stigma helps to lower the risk of suicide;

it shows you CARE!

Fight Stigma → Improve Trust → Improve Cohesion → Increase Help-Seeking → Lower Suicide Risk

DPRR   12

Review the connection between reducing stigma and suicide prevention.

[SLIDE BUILDS]

1. State that fighting stigma can help to lower the risk of suicide.

- Now, let's take a look at the positive outcomes that can come from your efforts to fight stigma.

- Throughout this module, we have demonstrated that stigma is associated with negative outcomes to include increased risk of suicide.

- Fighting stigma can, therefore, help to lower the risk of suicide.

2. Use the image to demonstrate the positive impact of fighting the stigma and how it can contribute to a lower risk of suicide.

[CLICK TO ADVANCE]

- Stigma is disrespectful; actively fighting stigma with tactics such as learning, connecting, and challenging shows that you will not tolerate disrespect within the community. It shows that you CARE.

- When you know someone cares, you are more apt to trust them.

- A family or community with members who can trust one another will naturally help to improve cohesion and relationships.

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Record your own notes here:

- Higher levels of cohesion can lead people to be less tolerant of stigmatizing behavior, resulting in higher rates of help-seeking and fewer barriers to care.

- Furthermore, when a group of people – whether that is a family, a community, or an Army unit – has strong relationships, trust, and cohesion, it enhances the ability of its members to successfully Ask, Care, Escort and take action, all crucial steps in the ACE process.

- By fighting the stigma with effective tactics, you are doing your part to positively affect the suicide prevention efforts within your family, your community, and within the Army as a whole, and help to lower the risk of suicide.

3. Transition.

- Now that we've discussed stigma, its impact, and ways to fight against it, let's talk about your next steps.

Ask participants to consider their next steps in implementing what they've gained from today's training and encourage them to talk about suicide prevention with others.

1. **Ask participants to identify one thing to implement from today's training in the next week or two that can help lower the risk of suicide.**

- Throughout a typical day or week, you have many opportunities to apply what you've learned today.

- *[ASK]* Based on what we've covered today, what is one thing you plan to do within the next week or two that can help lower the risk of suicide with those in your Circle of Support?

[NOTE: Allow for responses. Encourage participants to consider specific, tangible actions. Examples may include

- *speaking up when I recognize stigmatizing words or behaviors*

- *educating myself more about mental health and the benefits of utilizing mental health services*

- *drawing on one of my personal values when tempted to avoid uncomfortable conversations or needing to use one of the stigma-fighting tactics*

- *inviting a friend or family member over for dinner.]*

Record your own notes here:

2. **Encourage participants to talk to their Soldier and to members of their Circle of Support about effective strategies to prevent suicide.**

[CLICK TO ADVANCE]

- Preventing suicide requires taking proactive steps.

- In addition to the plans you all have just shared, here are some proactive steps you might consider taking with your Soldier and other members within your Circle of Support:

    - openly discuss benefits of utilizing professional resources for support through life's challenges

    - be open-minded and willing to have your beliefs challenged by new information and new circumstances

    - together, learn about various resources as well as solutions for people facing barriers to care so that you can share accurate, helpful information with others

    - ask who they feel most comfortable talking with if there is ever a concern or moment of crisis, and share that same information with them about you

    - when they are facing a challenge, encourage them to use resources proactively such as when there is even a hint of concern rather than waiting until it's a crisis situation, and you yourself seeking help early and proactively to role model this proactive and preventative behavior

*[**NOTE**: This is a natural transition to the next slide.]*

Record your own notes here:

Fighting Stigma Makes a Difference

You are now armed with tactics to fight against stigma and aid the suicide prevention efforts of your family, community, and the Army.

Army policies are changing to be more supportive of Soldiers seeking help, but true change happens at the personal level.

Thank You!

DPRR   14

🎯 **Recognize that reducing stigma is everyone's responsibility, and thank participants for attending.**

---

1. **Empower participants to commit to fighting the stigma within themselves and their communities to help mitigate the risk of suicide.**

- After today's session, you should now know more about stigma and its negative impact on individuals, families, and communities, to include the Army. You may also be more aware of tactics that can be used to help fight the stigma and aid the suicide prevention efforts of your family, communities, and the Army.

- It might be helpful for you to know that Army policies are changing to be more supportive of Soldiers getting the help they need, but true change happens at the personal level.

- Take the knowledge you've received to help sustain and improve the culture within your family and communities as it pertains to help-seeking behavior and mitigating risk of suicide.

- Commit to the stigma-fighting actions you established a few moments ago.

- Each individual has the responsibility and the power to make a positive difference. Be the difference with your Soldier, friend, family member, and neighbor.
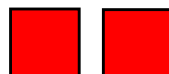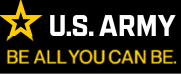
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14-A

2.   Thank participants for attending.

- Lastly, thank you for attending today's training. Your participation is evidence of your support and care for your Soldier and others in your Circle of Support.

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★ **U.S. ARMY**
BE ALL YOU CAN BE.

Post-Training Survey

https://wrair.gov1.qualtrics.com/jfe/form/SV_aXFrN0d3WYotliy

Participants: You have just completed

the **ACE Fighting Stigma** module.

Completing the survey will assist the DPRR in determining the effectiveness of training and will inform curriculum revisions during the next update cycle.

If you received the Base module prior to this module, please select the Base + Fighting Stigma option on the survey.

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◎ **Introduce Post-Training Survey**

1. **Introduce survey.**

- Before we dismiss, please take a few moments to complete the ACE Post-Training Survey.

- The survey was developed by the Walter Reed Army Institute of Research on behalf of the DPRR.

[**NOTE**: *Emphasize the importance of the survey.*]

- Completing the survey will assist the DPRR in determining the effectiveness of training and will inform curriculum revisions.

- Participation is optional and responses are anonymous.

- You can access the survey by either scanning the QR code with your phone or by going to the website URL, which is shown in blue.

- Please note the module you are surveying and select the matching bubble on your survey.

[**NOTE**: ***Participants should only take survey at the end of the base module if it is the only module trained. If a second module is trained, check the box that represents the ACE Base + (appropriate subsequent module) Example: ACE Base + Active Listening.***]

[**NOTE**: *For survey issues, contact CPT John Eric M. Novosel-Lingat at* johneric.m.novosel-lingat.mil@health.mil*]*

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