



I THINK OF SUICIDE EVERY DAY

Chaplain Lou Koon

Twelve years ago, for a solid year, I had thoughts of suicide every day. Twelve years ago, crisis changed the trajectory of my life. A series of tragic events that put me on the edge of the abyss with a plan to end my life became the very catalyst that opened the door to a new life mission. Two years later, I founded Armed Forces Mission (AFM) along with AFM 911 and the Intervene Challenge. I continue to think of suicide every day, but it is not my thoughts; it is the thoughts of the 1 in 4 teens who have such thoughts and the 1.4 million Americans who attempt suicide each year. While I know we cannot save them all, through my work with AFM we are doing everything possible to save the ones we can.

AFM has one bold mission - the eradication of suicide within the communities we serve. The Intervene Challenge is the educational part of the mission that has trained more than 21,000 community members in the skills that save lives. AFM 911 is the First Responder, Military, and Veteran Division of AFM's Intervene

Challenge through which 5000 First Responders, Military, and Homeland Security personnel have been trained. The Challenge is based on a model of intervention I developed while serving as an Army Reserve Chaplain and the Subject Matter Expert in Suicide Intervention. In 2018 the book Listen Learn Lead was published based on the model and the experiential knowledge I have gained in conducting more than 1,600 successful suicide interventions.

While I have had the opportunity of training military personnel, nurses, mental health professionals, ministers, and everyday citizens, my greatest honor has been the privilege of interacting with thousands of law enforcement personnel from agencies across the country. Some have asked, "Why do you feel such a strong connection to law enforcement as opposed to other groups?" My wife adds to the question, "You were a soldier. You did your clinicals in a hospital setting and you have been a minister. Why law enforcement?" My simple answer— Awareness! Law

in Texas training ministers in suicide intervention. They are using the Listen Learn Lead (L3) model, and I have had the privilege of teaching their students. So, it would appear the law enforcement community has an incredible opportunity to lead the charge in demonstrating the need for this important training. Of all groups I work with, it seems law enforcement is most proactive in making the necessary changes to gain the skills that make a difference. Perhaps it is because agencies understand the vital importance of situational awareness as a critical skill for police officers, who must make quick decisions that can mean the difference between life and death. Are we where we need to be? Not yet, but we are moving in the right direction.

In the summer of 2017, I had the opportunity to train more than 500 officers from three states in Listen Learn Lead. These were not rookies, but seasoned officers; three were retiring before the end of the year. Yet 95% had never been trained in suicide intervention. That same year, in the training of 36 Fire and EMS personnel, only one had previous training while in the military. Thankfully, we are now more fully addressing this training need because we are AWARE there is a need for such training. I see it in the uptick from agencies requesting L3 training as well as the invites I have had to train the suicide and PTSD portions of the CIT program that is now offered through GPSTC. It is a move in the right direction. Intervention saves lives. Awareness is the critical key.

Moving into 2022, we should be aware of a surge in suicidal calls that is most certainly headed our way. Recently, a training participant attempted to correct me on a post I had made shortly after the start of the COVID crisis in the summer of 2020. I had stated that a suicide tsunami was coming. The participant eagerly informed the class that the suicide rate across the nation went down in 2020 by 5%. What the student failed to understand is that this is typical immediately following a mass casualty event - be it manufactured or natural disaster. It's called the honeymoon

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enforcement personnel are taught the importance of awareness. Some may argue, but the medical community is taught awareness. For example, they know the signs of an impending heart attack. I would also contend they are aware that 1 in 10 patients who enter their office is having thoughts of suicide. Yet such awareness has not resulted in additional training in the area of suicide prevention for medical personnel. Hundreds of Licensed Professional Counselors have shared with me they received minimal training in suicide intervention. I will never forget a call I received one night from a clinician. She thought her child was suicidal, but she did not want to ask him. When I asked her why she wouldn't ask, she responded, "I don't want him to think that I think he is suicidal." "But ma'am you do think he is suicidal. You need to ask him." The same is true of ministers who call me. They have a church member who they are not sure how to help because they have not been trained. I called my alma mater where I received my Master of Divinity degree thirty years ago. They have no training in suicide intervention. There is one theology school

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effect. During the early phase of a disaster, survival instinct kicks in. There is the feeling that we are in this together. But the tension that caused the decrease will be the same tension that projects the rate higher very rapidly. Just like the pulling of a bowstring that fires an arrow into the air. The arrow will move much faster up into the air than the tension that drew it back. So, while the rate went down, we should also know that the thoughts of suicide doubled in 2020. In previous years, it was estimated that 1 in 20 people have thoughts of suicide annually. As of August 2021, the Centers for Disease Control and Prevention (CDC) reported the estimated to be 1 in 10. We should also understand that, among teens, the completed suicide rate was up more than 20% in 2020 compared to 2019.

Finally, I will say one more time that intervention saves lives. There continues to be an undercurrent of thought that, if a person wants to kill themselves, there is nothing that we can really do to stop them. I will address this false notion with core value number one of the five core values from the L3 model. "Suicide is not the result of wanting to die." Having completed more than 1600 successful suicide interventions, I can

honestly say I have never met anyone who truly wants to die. Suicide is not the result of wanting to die, rather it is the result of loss that leads to hopelessness. That hopelessness is so overwhelming in the moment the person at risk believes suicide is the only option. Oftentimes simply asking the suicide question provides an installation of hope. The person at risk realizes they are not alone. Someone cares. Even the brief suicide intervention training in CIT states that nine out of ten people who are stopped from completing suicide will never go on to die by suicide.

When a caring person is ready to nonjudgmentally listen and is willing to learn how the person has come to the point of considering suicide, they can lead that person to a place of safety and a life will be saved. If you are ready, willing, and able to listen, willing to learn and to lead, the intervention will be a success. In 2022, Armed Forces Mission is expanding training opportunities to law enforcement agencies throughout the state of Georgia. L3 is a 4-hour POST approved training and grants are available to substantially reduce individual agency cost.

Learn more at AFM911.org



Chaplain Lou Koon's experience in intervention and emergency response, includes service in fire and police departments, military units, hospitals, schools, and the community at large. In 2018, Lou was inducted into the University of North Georgia Alumni Hall of Fame for his work in suicide intervention. He served on the Georgia Department of Behavioral Health Strategic Committee in the drafting of the 2020-2025 State Suicide Prevention Plan. Lou holds a Master of Divinity in Education and a Doctorate in Pastoral Counseling and completed Clinical Pastoral Education at Georgia Baptist and Piedmont Hospital. He is a member of the Georgia Chiefs of Police Association, International Critical Incident Stress Foundation, and the International Law Enforcement Educators and Trainers Association. He serves as a Chaplain for the Peachtree City and Fayetteville Police Departments and instructs the Suicide and PTSD portion of CIT.

Pictured Above: Chief/GACP President Janet Moon, Lou Koon and Peachtree City Assistant Chief Stan Pye (Ret.)