



“Enabling MEF Personnel to Succeed”

I MEF Quarterly Newsletter

3rd Quarter, FY-2013



I MEF Newsletter POC : I MEF IG at 760-763-2547.

The 5 Pillars of Line of Operation 6 (LOO 6)

| | | | | |
|--------------------------|---------------|-------------------------|------------------------------------|------------------------|
| Mission Assurance | Safety | Family Readiness | Personal and Unit Readiness | Quality of Life |
|--------------------------|---------------|-------------------------|------------------------------------|------------------------|

Commanding General's Comments

I MEF Marines, Sailors, and Family Members,

Sexual Assault is a crime that threatens the Marine Corps position as the Warfighter of choice for our Nation. The Commandant has called on his commanders to reduce Sexual Assaults by 50% before the end of the year. To enable his commanders he has tasked I MEF senior leaders with hosting a leadership summit to bring together all Colonel and Lieutenant Colonel commanders and their senior enlisted advisors to discuss the crime of sexual assault and the art of Commandership. Carrying on the mission of “Enabling MEF Personnel to Succeed”, we will host the 2013 Leadership Summit 15 – 16 July to discuss these critical issues. Semper Fidelis, LtGen Toolan sends.

NEWS YOU CAN USE!

1. 2013 Leadership Summit. All of the Sexual Assault and Commandership information for the 2013 Leadership Summit can be viewed and downloaded at: [2013 Leadership Seminar](#). The SharePoint site is available to DoD CAC card holders with an eHQMC account. Click on the following link for instructions on registering for an [eHQMC Account](#) if you do not already have one.

2. Sexual Assault Prevention. Sexual Assault is a crime that must be reported. The Sexual Assault and Prevention hotline number is 760-500-1707.

3. Operation Supplement Safety (OPSS). OPSS is a joint initiative between the Human Performance Resource Center and the DoD to educate service members and retirees, their family members, leaders, healthcare providers and DoD civilians about dietary supplements and how to choose supplements wisely. There is an on-going and growing issue/concern with our service members and beneficiaries consuming supplements that have potential to cause harm. Most common are Rhabdomyolysis, seizures, stroke (CVA), heart attack (MI) and multi-organ failure. Leaders need to know what supplements and energy drinks are being marketed and used by a significant number of their personnel and the potential ramifications of excessive/inappropriate use. Documents, videos, and apps to help you make informed decisions about dietary supplement use can be found at: <http://hprc-online.org/dietary-supplements/opss>

4. Safety Awards. Recognition for a job well done is an effective and easy way to promote safe practices. The Marine Corps Safety Awards Program provides recognition of commands and personnel for significant contributions and accomplishments made in the field of safety and mishap prevention. The Navy League's General James L. Jones Safety Award recognizes individuals or groups whose actions and example have significantly improved the safety culture within the Marine Corps. The GEICO Military Service awards honor one enlisted member from each of the Military Services for their special achievements and contributions in multiple categories. Information on the awards process can be found at:

<http://www.safety.marines.mil/About/AwardsPrograms.aspx>

5. Unit Marine Awareness and Prevention Integrated Training (UMAPIT). UMAPIT is designed to increase the readiness of individuals and units to achieve the Marine Corps mission, particularly regarding unit and personal readiness. It will reduce required annual training redundancies within the Marine Corps focusing on the areas of Combat and Operational Stress Control, Substance Abuse, Family Advocacy, and Suicide Prevention. Click the following link for more information: [UMAPIT PowerPoint](#). I MEF POC is Mr. Julian Garibay at phone 760-725-4937 or at email julian.a.garibay@usmc.mil

6. Suicide Prevention Update. The suicide rate among members of I MEF declined significantly over the past three years. The following are the suicide rates for fiscal years per 100,000 of population.

| | Rate | Actual Number of Suicides |
|-------|--------------|-----------------------------|
| FY 11 | 24/100,000 | 13 |
| FY 12 | 14.8/100,000 | 8 |
| FY 13 | 7/100,000 | 3 (first 9 months of FY 13) |

The suicide rate in the Marine Corps, as a whole, averaged 18/100,000 during this time period. The civilian rate, matched to a population similar to I MEF, during this time period was 22/100,000.

Beginning in late 2010, I MEF began implementing several suicide prevention and awareness programs that may explain the reduction in suicides. The OSCAR mentor program was mandated in 2009 and expanded to include the entire force in 2011. I MEF hired a full-time COSC officer to oversee, administer and assure adequate training was completed. This program teaches the warning signs of mental health stressors and empowers Marines and Sailors to confront and assist those who are in need before more serious problems arise. The 1st Marine Division also received its full complement of nine OSCAR Mental Health providers and nine psych technicians in 2011.

The Never Leave a Marine Behind (NLMB) Suicide prevention program has been emphasized over the past two years and is responsible for significantly increasing suicide awareness among all Marines and Sailors. While the OSCAR program targets only a small number of personnel for extra training, the NLMB program provides all members of I MEF useful and actionable information about ways to recognize and prevent suicide.

I MEF also began implementation of Force Preservation Councils. These are conducted at the battalion and squadron level and identify Marines and Sailors with a variety of warning signs that may put them at risk for behavioral health problems. Commanders are then able to direct the proper resources and oversee interventions to address issues and provide solutions before problems become more serious.

I MEF initiated a high risk medication review and monitoring program in 2011. This effort identified all members of I MEF on three or more psychotropic or narcotic medications and provider medical personnel with a standardized monitoring program to ensure compliance with medication use and treatment. At the initial review, 132 members of I MEF were found to be at high risk for medical complications due to the type and amount of medication prescribed and the diagnosis and treatment plan given. After a six month period using the standardized monitoring program only 23 members remained in the high risk category. During this time period, there were no completed suicides involving the use of prescription medication.

Although there is no direct evidence linking any of these programs with changes in suicide rates, the trend over the past three years is a decrease in suicides. All of these programs have received heavy emphasis and support from leadership in the past three years. Engaged leadership and adherence to existing suicide prevention programs appears to be having a beneficial effect.