



AMC: We Care...We Connect

Topic: We Are **CONNECTED**

GOAL: Build connections and bring people together around a common goal

FACILITATOR NOTES

TOOLS TO PREPARE YOURSELF

1. Now, more than ever, where physical distances may be an issue, "checking in" to maintain connection with your personnel is essential.
2. This tool has been tailored to allow supervisors the flexibility in facilitating this month's discussion topic. Some suggested methods include incorporating into individual conversations, office telecons (phone or video) or consider the development of a group chat using Microsoft Teams or ZoomGov.
3. Consider sharing a story of when you worked for a caring supervisor or in a caring environment and how that experience increased your commitment to the mission and/or the Air Force.

THE EXTRA MILE

ADDITIONAL RESOURCES

1. Guided Activity Option: "Building Connections." Encourage your personnel to reach out and have a discussion with someone they may not know as well...then create a group chat to share what everyone has learned.

MISSION PLAN (30 mins)

HOW TO EXECUTE

FRAMING THE CONVERSATION

Airmen are our most valuable resource in AMC. To build solid connections means to provide a supportive environment that embraces Total Force culture. As we find ourselves caught up in the daily grind, we must combat the tendency to be desensitized towards the needs and feelings of our teammates. It is about putting our Airmen first before policies and procedures. You don't have to wait around for a problem to occur to get involved. Rather, challenge yourself to break down barriers and establish solid communication early. By taking the time to get to know one another you'll make more meaningful connections that create an environment built on trust.

Part of building a community of connectedness is aligning what you believe in as an organization. Establish an environment where all Airmen understand their part in the mission and how their contributions make a difference. Consider what actions we can take today that will lead our Airmen toward developing hope and increased resilience over time as individuals and as an organization.

SUGGESTED DISCUSSION POINTS:

1. Describe how it feels when you work in a connected environment.
2. Discuss ideas that you think would improve connectedness to each other in our work center. What can we do better? What role does leadership have with connectedness?
3. Whom do you reach out to when you are struggling with something?
4. Be sure that all of your team members know about the available resources that are standing by ready to help (A&FRC, Mental Health, SAPR, EO, Chaplains, EAP, Military One Source, First Sergeants and more...). (See attached)

MISSION CHALLENGE HOW TO APPLY THE LESSON

Be Engaged—Review the attached Resilience/Prevention Resource and re-familiarize your group with SLO, Recognizing Signs of Distress, A.C.E. model, and local installation helping resources.

Be Connected—Connectedness means that people feel a sense of belonging. They feel seen and heard, and know that others care and will be there for them. Review the attached Case Study (Connectedness) and discuss the questions with your group. Imagine you are a co-worker or supervisor in this Airman's work center. Remember that listening and being connected allows us to learn more about one another, recognize changes in behavior indicating someone is stressed or in distress, and work as a team to build up and support one another.

AMC We Care...We Connect topics encourage open, genuine discussions with your employees on the values and culture that represent the Air Force. This short discussion reinforces concepts introduced in formalized training and allows leadership and supervisors to frame the concepts in the way that best meets the needs of your Airmen

Symptoms/states of distress may be overwhelming and lead to having thoughts of death, self-harm, or suicide. It is important to ASK someone directly “are you thinking about harming yourself, or of suicide?” Do not avoid this important question.

**GO
SLO**

If someone demonstrates signs of distress, consider their access to LETHAL means including firearms, medications or other means of fatal methods. Airmen should remember to “go SLO” - use **Safes, Locks,** or store means **Outside** the home.

SMALL STEPS SAVE LIVES.

www.resilience.af.mil

DAF RESILIENCE



PROMOTE RESILIENCE

Practice self-care such as regular exercise, sufficient sleep, and relaxation time. Invest in resilience skills like balance your thinking, mindfulness, and looking for the good to manage stress.

RECOGNIZE SIGNS OF DISTRESS

Mood changes, such as depression or anxiety
Irritability, agitation, or anger
Sleep difficulties
Withdrawing from social activities, family, friends, or others
Lack of interest in activities that were previously enjoyed (hobbies, work, etc.)

ASK

Directly ask the individual if they are having thoughts of death, self-harm, or suicide.

CARE

Care about their answer. If they hesitate, or seem uncertain, ask follow-up questions to convey that you care about their well-being.

ESCORT

If the individual is having thoughts of suicide or needs help, escort them to a qualified professional or leadership.

MILITARY CRISIS LINE: 1 (800) 273-8255

| HELPING RESOURCE: | COMMANDER/ SUPERVISOR | AIRMAN & FAMILY READINESS CENTER | MILITARY ONESOURCE/ MILITARY FAMILY LIFE COUNSELOR (MFLC) | CHAPLAIN | CIVILIAN EMPLOYEE ASSISTANCE PROGRAM | MENTAL HEALTH (MH) CLINIC | EMERGENCY ROOM |
|---------------------------------|--------------------------|-------------------------------------|-----------------------------------------------------------------|-------------------------------|--------------------------------------------|------------------------------|-------------------|
| Contact: | | | | | | | |
| CAN ASSIST: | All | All | Military and Family Members | All (full confidentiality) | Civ/NAF | Military | All |
| Suicidal Thoughts | ✓ | | ✓ | ✓ | ✓ | ✓ | ✓ |
| Relationship Problems | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | |
| Loneliness / Isolation | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | |
| Workplace Stress or Problems | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | |
| Alcohol / Drugs | must report to ADAPT | | | ✓ | ✓ | ✓ | |
| Fatigue / Sleep | ✓ | | ✓ | ✓ | ✓ | ✓ | |
| Anxiety / Panic Depression | ✓ | | | ✓ | ✓ | ✓ | |
| Grief and Loss | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | |
| Deployment | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | |
| Finances / Budget | ✓ | ✓ | ✓ (OneSource) | ✓ | ✓ | | |
| Retirement / Separation | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | |



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Connectedness Case Study

Phase 1:

SSgt Jinks is 23 years old, married to his high school sweetheart (4 years) and has a 3 year old toddler. His wife recently found out she is pregnant. He is an average worker, always eager to volunteer to support squadron events, an avid hunter, and has an overall positive attitude. His spouse often complained to others that he was “married to his job” and she doesn’t really understand how the Air Force works. SSgt Jinks is a team player, and according to his supervisor, a go-to Airman for urgent tasks. SSgt Jinks also is known to be a “drinker” and stays to himself sometimes at work.

Phase 1 Questions:

1. What are some of the red flags in Phase 1 for this family, if any?
2. If you had an opportunity to mentor SSgt Jinks, what would you say to him?
3. Are there any concerns for this family at this point?

Phase 2:

Everyone knew that SSgt Jinks declared himself to be a “career Airman.” He became more involved with his buddies, staying out late hours, which created more tension in his marriage. He expressed that occasional arguments with his spouse was pretty normal; he thought they were okay overall. His drinking and going out began to cause financial hardship. His spouse was not working and often SSgt Jinks reminded her that if he doesn’t work, “we will not have any money.” They had received several grants from the Air Force Aid Society for food, and once for car repair. His time spent drinking with his buddies seemed to increase, and tension began to mount at home. Mrs. Jinks threatened to leave and return back to her out-of-state hometown with the children and did not express hope that things would change. Shortly thereafter, SSgt Jinks showed up late to work with alcohol on his breath. This prompted a referral to ADAPT.

Phase 2 Questions:

1. We often speak in terms of protective factors and risk factors. List protective factors for SSgt Jinks and Mrs. Jinks, if any? List risk factors for SSgt Jinks and Mrs. Jinks, if any?
2. What are your immediate concerns? Secondary concerns?
3. As a friend or wingman to Mrs. Jinks (or SSgt Jinks), would you intervene at this point? Describe how you would intervene.
4. What other community agencies/entities, if any, would you involve at this point?

Phase 3:

This was the last straw for Mrs. Jinks and she announced that she was leaving the next day. She told her husband that her mom had sent her the money and she already had her and the children's plane tickets. No surprise to Mrs. Jinks, he began drinking early in the afternoon. He tried to convince her to stay throughout the evening. Exhausted, she went to bed and asked him to stop drinking and go to bed so he could take her to the Airport and go to work the next day. She asked if he wanted her to call his supervisor to take her to the airport. Things appeared to calm down and Mrs. Jinks felt perhaps he had reconciled that the distance would do them both good. She awoke the next morning to a gun shot and discovered SSgt Jinks dead on the basement floor.

Phase 3 Questions:

1. What, if anything, would you have done differently?
2. As a friend or wingman to Mrs. Jinks (or SSgt Jinks), how would you intervene?
3. At what point, if any, during this scenario would you involve SSgt Jinks chain of command?
4. What are command options with Mrs. Jinks?

Final Wrap-Up Discussion:

What are some things that could have been done to build connectedness with SSgt Jinks and Mrs. Jinks prior to Phase 1? How might this impact your ability to engage?