## Ep. 16: Surviving suicide

Welcome to Sword and Shield, the official podcast of the 960th Cyberspace Wing. Join us for insight, knowledge, mentorship and some fun, as we discuss relevant topics in and around our wing. Please understand that the views expressed in this podcast are not necessarily the views of the U. S. Air Force, nor the Air Force Reserve, and no endorsement of any particular person or business is ever intended. (Light music)

[Frances] Good day, Gladiators. Frances Martinez, director of psychological health for the 960th Cyberspace Wing here, with a very special guest all the way from Hawaii. We're on the phone right now. I'm with retired Colonel Robert Swanson. I want to say I'm jealous that you're in beautiful Hawaii, soaking up some great vitamin D near the ocean. - [Robert] Yup. - [Frances] But I wanted to thank you so much for your participation today, but just so everyone knows I did hunt him down in order to have him here today especially during September is suicide prevention month. I know that the topics related to suicide are always difficult to talk about. So I am truly amazed by your resiliency story and how you survived two severe suicide attempts. So let's start by telling the Gladiators a little bit about yourself, your background and your military career. - [Robert] Good, I retired in 2015 after 34 and a half years in uniform. I started out as just that hard charging young airman. As soon as I got done with tech school, I started taking a bunch of college classes what AECP, which Airman Education Commissioning Program which most people don't know about anymore. But when you graduate you go to the college of your choice. They pay all books and tuition. They send you to OTs. You get to cross over to the dark side, turns out I was a pretty good student because came out with a three nine, four GPA. And within two years they sent me back to get masters. And about at the end of that program, they said well, heck you could just stay at, go ahead and get a PhD. - [Frances] Wow. - [Robert] My first assignment actually as an officer, I was a iumper airborne with the special operations weather team. I have read it in the academia, got to get out of their program. Some pretty cool, super high performance parallel computing scenes for a weather prediction models. They sent me to Hawaii. My first time after that, where I was a director of operations for weather squadron, and I got to do a stint as the exec for general David Deptula the guy that planned the air war for the first core all the way down. So it's really, really a super, super diverse career. Following that I was an assistant professor at the air force Academy. Following that I ended up going to Korea as a squadron commander and the Pentagon did a stint in Afghanistan. Came back out here again and after one more short tour at pentagon after 34 years. I said, this is about it. As suicide attempts were right after we actually towards the end to my PhD and then another one a year later. Most people don't spend that long in uniform. And I love what I did really good. - [Frances] And what would you say like your most challenging aspects of your career? - [Robert] I think a lot of times, one of the most challenging aspects was the pressure that I put on myself. I wanted to be the best I wanted best GPA best at any assignment promoted first. And all of these things drive you. Sorry, all of those

things drove me to just put an inordinate amount of pressure on myself and start to overvalue some things that just weren't that important in the grand scheme. And devalue others that I should've put first. I shouldn't have a lot more balance in my attack on things. I think some of that unbalanced and the internal pressure really contributed to where I ended up. - [Frances] Yeah, and I think that's one of, the big things we always talked about, right? Managing your work life, your home life and then your own self-care. Did you feel like you had any like family support where you know, as far as like spousal support any other family that were involved and what were their roles in your life? - [Robert] Leading up to the suicide attempts I felt like I had absolutely no support. You know, I'd come home late at night cause I wasn't doing well on the PhD research and I'd get berated for not being home. The kids should be like, well, dad, dad come home. And so in that regard there was no support. And then following the first suicide attempt there was so much anger being directed at me from family friends who were supportive coworkers were family was still just a lot of anger, a lot of, you know, get out of here. Cause the dirty little secret about suicide is that a lot of people don't realize is we actually convince ourselves the world is better off without us. And we're such a bad person that, you know, if we check out and mama gets a new husband, kids get a new daddy and there's a big insurance check on the horizon as well. - [Frances] Right, did you notice any early signs of depression or anxiety? - [Robert] I noticed them, but I don't think I really recognize them for what they were. - [Frances] Okay - [Robert] Sorry, it was sort of like a it was just sort of a slow descent and it was more of a, just I'm working hard. I'm not getting there. So I work harder now I'm not getting there and I'm getting velled at I'm working harder. And it just seems like before you could just plow through any obstacle and I wasn't getting it. And so I was losing the desire and the bed sounded like a really cool place to stay for half a day and I've thought that I had to those are signs of depression when you wanna kinda check out and not really participate in the rest of the world. And I didn't recognize it as that. I just knew I had that strongest desire to just check out. - [Frances] And then during any of that timeframe did you speak any mental health help or services and if not, what were some of the barriers to doing that? - [Robert] I mean, I could list a whole bunch of them. First of all, I was Superman, I was invincible and I could take care of any problem myself. Second of all, when you get to that dark place when I got to that dark place, I didn't want any help. I just, I just didn't. And that's one of the big obstacles nowadays is the fact that all of these resources are available but when you're in that dark place you're not necessarily wanting to access any of them. And then of course the stigma attached with, you know, would it affect my career? I mean, I didn't even want to go to marriage counseling because I thought that might impact my security clearance in my career. You know, a lot of the myths that are being perpetuated even today were in my mind. So it really was never a consideration initially for me, other than other than potential marriage counseling which my wife kept badgering me about. - [Robert] And would you say, I know that you said like the stressors of everything, would you, do you feel like a lot of your stressors were directly from the military? Or was it the stressor that you put on yourself? - [Robert] I guess the answer to that is the all of the above, the military has expectations. They demand excellence. They demand that you're doing the best that

you can whenever you go do a job, if you don't do it, you've failed. And in my case, I was getting toward the end of my PhD and it just wasn't coming together. So if I had left the school and you have a finite amount of time, so I had left the school without my degree, trying to finish it a PhD after the path when you're working full time is not there. So the military had expectations. My goal was always to exceed them. And so whatever pressures I felt. I went ahead and piled on and created additional pressure for myself. - [Frances] Gotcha, and can we talk a little bit about the actual suicide attempts? - [Robert] Yeah absolutely bottom line is, and it's interesting. It's kind of progressive throughout my discussions and presentations is preface with this. Each time I do this, I have to go back and relive that experience and it gets easier over time. But what the one thing that I really take away from it is, that person isn't here anymore. So the first suicide attempt, it was just a deliberate. I had a plan, I saved up, I had 30 flexeril. I washed them down with a half bottle of whiskey Hiked out into about a half a mile into the snow, to this private place that I used to love above the Lake and just lay down in the snow. Yeah, I know he had knew it wouldn't wake up. It was great, I just kind of went off to sleep and woke up in the hospital, 12 hours later I'd been here, lifted out both feet were frozen. Both hands were frozen, then half my face. And the first person I saw was my wife. Who's my ex now. And the first words out of her mouth were, how could you do this to us you son of? Which probably wasn't the best words, but she was angry and she had a right to be, we don't talk much about the impact on friends and family and coworkers alike. Second time, a year later, high-pressure job, I was the only with my PhD. I was the only guy in the entire United States Air Force, ret could either the work that I was doing and I had a long handled screwdriver from a one star back in the Pentagon that demanded excellence separated from the wife, separated from the kids. If you go down and you look at all the stressors you could have move new job, separation, divorce, all the rest, I had them all. Then I, garage pick up sock engine running. Once one car garage took some more medication, went to sleep and I'll be damned if I didn't wake up 12 hours later and the engine is still running and I'm still alive. So nobody can explain to me how I survived. Either attempt not to cross ties but I think the good Lord kept me around for a reason. And I think the work that I'm doing with the suicide prevention stuff is one of the reasons, - [Frances] yeah, you are spreading that word. - [Robert] Yup - [Frances] and you know, a lot of people that I met, I have come from an inpatient psychiatric hospital. That's where I spent the last six years of my work. And a lot of people tell me right then and there well, it was an argument or something happened. What were your thoughts right before you attempted - [Robert] That's actually a really good question in most of the time. It is you're on the edge anyway, but then something pushes you over the edge, which is why, some of the suicide prevention efforts just involve making a little bit harder to put the gun and the bullets together. Because if you're given a little bit of time to think about it, maybe you wouldn't. In my case, the first time I had a plan there was nothing in particular that day. It was just, here's another failed experiment. I really don't want to go home and face the wife again. And it's just like, you know, today's today. I remember standing in the restroom, 30 pills in hand looking down and the anxiety that you feel at that moment in time. And then the overwhelming sense of peace that I had when I had executed the plan not realizing

good God all the implications. I mean, you know, there's suicide rates for children of parents who have died are significantly higher. I sit there and think to myself, I love my kids so much. And yet in that moment in time, I didn't consider the impact that it might have or that my children might all up in that. So there was no major argument or anything else the first time, the second time, in addition to a lot of other things I had started dating again. So there was a relationship aspect to it. Also, she thought I was a little bit too wired a little bit too stressful about stressful. I strong just because I'm such a motivated guy so that wasn't working out. So in addition to going through a divorce I'm also just, just a ton of things piled up. And it was again just sort of like, you know what I'm done, but I had a plan, in both times it was weird. - [Frances] What were your thoughts after the attempt, did you have any regrets for attempting or any regrets for even survival? - [Robert] The first time I woke up and it was sort of, what the hell, how did I survive? And then it didn't take very long. I was really fighting the system. I'm sitting here with severe crossbite, both hands feet. And instead of treating the medical condition, they were more concerned about my mental health and my safety, so they can't be in a psych ward for a day. So after I started taking inventory of all of the impacts on me physically, yeah, it was, it was sort of soul crushing. And, but at that time I didn't really consider any impacts of my career or any big time regrets. The second time the career implications became you know, present really, really quick. And so it was sort of like, why did I survive? Because now I've really kind of really screwed up my life. I've really all the things that I thought were important. I just tossed right out the window. - [Frances] And you touched a little bit of what did your recovery look like? From a physical standpoint and also a mental health standpoint. - [Robert] I will say this first of all, we have come so far in suicide prevention, host intervention, pre intervention and just kind of understanding the first time I saw a good psychiatrist, we talked about all the issues she had gave me some meditation information and I was able to really convince her that look, I'm fine. I need to focus, I need something to do. That's going to take my mind of this. The most important thing to me is finishing this PhD. You've got to send me back to school. And so they did, and I finished the PhD and I moved on when I got to my next base I was still under mandatory psychological counseling which I was very frustrated about because I and the doctor we just went head to head. He kept putting me on pills. And number one I didn't like the impact that pills had me. Number two, they kept messing that this couldn't work. So we can try another one. We're going to try these different types dosages. It feels well for some people. Some people cannot function without them. For me they masked the problem, destroyed all the joy I had, had life. And quite frankly, I can't help feeling that. They were part of the reason that I tried the second time the real breakthrough came after the second attempt. And after switching doctors I got a really good doctor and this man just saw right through all of my macho. I'm Superman better than everybody else BAS I mean literally I walked in his office he tossed my file over to me. And he says, you may as well take off. There's nothing I can do for you. And I'm looking at him like, dude, your job is to cure me. And so I could go back to work and do my work. And he said no, you're smart. I've seen your test scores as senior IQ. You're smarter than I am. You're going to tell me everything I want to hear. I'm supposed to write it down and say, you're fine. And then you're gonna go back to

your miserable life where you're drinking whiskey in the dark all alone where you're laying at the bottom of the shower crying because you don't have the guts to get up and face the day. And that's the life you want go for it. Or you can give me a chance and we can talk about some things that are causing you to feel this way. And maybe we can untwist some of the ways that you're thinking about things in life. And maybe I could even get you to the point where you get up in the morning and you look forward to the day and you look forward to go into work and not just survive but actually go out, have a great life. And I was shocked. Nobody had ever talked to me like that before. And it was at just a sliver of hope. That you know, maybe things could get better. That just really, I let my guard down. And it was an amazing transformation from that point. - [Frances] Sometimes you need that little jolt right? That little confrontation to really put the mirror in front of yourself and say, this is you. This is what's happening. And this is a path that you're going down. -[Robert] The man saved my life. - [Frances] Wow, and so what keeps you going now? - [Robert] That's a great question, I'll tell you because one of the most dangerous times in a veteran's life is that one year after they hang the uniform up. When you're in the military you have a sense of higher purpose. You know, you're making a contribution to this nation. You've got friends and family and coworkers and you'll never have that sense. - [Frances] Comradery? - [Robert] Comradery in any other profession. So you need to find a way to continue to contribute, contribute to their areas around you. So since I retired, I had GI bill. So I went and got an MBA because I wanted to kind of keep my mind active, as I could, I began working with Make-A-Wish Foundation. I'd already been doing the suicide prevention work. I started that when I was on active duty. And so we fired up this program called fight for each other, where we have a series of speakers and go out and do appearances, talk about the success stories and the impact that it has on friends and family. And I'm also a personal development slash leadership coach for a another program that I worked with. So finding ways to meaningfully contribute to those around you. You know, we talk about our resilience and the four pillars obviously would be mental physical, spiritual, social, and we can talk well. So spiritual isn't necessarily religion. Spiritual is your interaction with society. And it's contributing as best you can to the world around you. And that gives us meaning, being able to find that balance being able to, try still go out and run every morning. I still like to do a lot of reading. Keep up on the mental side. I like to do the work with the community and you know Make-A-Wish people have a chance to be a Make-A-Wish volunteer, do it. It's not only making the kids smile because they get their wish, but it turns out the anticipation of the wish actually really favorably contributes to the outcome of their treatment. - [Frances] Sounds like you're doing some great things out there. One of the one things I did wanna ask, you touched on it a little bit, with the career like yours and having several are certain levels of security clearances. Can you talk to me about how you overcame those obstacles? You know, my wing is a cyberspace wing and I'm sure that's one of the biggest things, people worry about with mental health related issues right? That you have clearance aspect of it. So can you talk a little bit about that? - [Robert] You bad, you guys have great questions I'm telling ya. So bottom line is the air force has made it very clear that as long as you seek help, you're not gonna lose your clearance. And obviously there might be one or two

exceptions to that, but I've been really amazed, especially toward the end of my career, how careful they are to not pull clearances just because it's such a disincentive to seeking treatment. I lost my clearance. I had a TSS and I lost mine and people will say if you got help, why did you lose it? Well, because at that moment in time I had tried, I didn't seek help before I tried. I had actually tried. And so I demonstrated that I wasn't in the proper frame of mind to be defending and guarding mission secrets, getting it back was a challenge. Once you, they temporarily suspended. It's not that difficult, mine was actually both. And what ended up happening. I needed a clean bill health from mental health and they have several tests. One of them is like 1300 questions. I mean they're all cross-referenced and you just can't lie on them. And when I got to the point in my therapy where they truly could show that the depression was in remission, it was kind of transformational. I also had the support of my friends and coworkers writing letters of support. It had to be adjudicated at the Air Force level, but because of my recovery, because of the work that I had done and the rest it was reinstated. And you know, I worked at the Pentagon. I went down the range and all the rest and it was a remarkable transformation it awesome, they were actually able to give me another chance but it was entirely hinged on my recovery. I will tell you that later on, I applied for a job and I needed a class 3 flying physical to get into it. And part of there is mental health evaluation. So they gave me the test again. And the psychiatrist that I talked to said that he had never seen such a remarkable transformation based on my initial diagnosis to where I was at that point. That was a Testament to the treatment that I received and working through that. And then he looked at me and he says, so unfortunately even though it looks like everything's great can't put you, I can't recommend you for this job. What do you think about that? And the old me would have been devastated. The new me says, not a problem. I've got a lot lined up. I'm gonna go be an assistant professor in the Air Force Academy, door closes a window opens. That's the transformed out book that I took, based on the therapy that I received. - [Frances] And some people don't realize right? That therapy is only as good as what you put into it. - [Robert] Absolutely. -[Frances] And they have to take ownership of what's really happening. Sometimes they lose sight and they say well this therapist isn't helping me out, but what are you really putting into it yourself? - [Robert] There is that, I mean there's a bunch of things that go with it. Like I said, I went head to head with my first therapist and you gotta, you gotta have a level of trust. I needed the confidence in the second one that he actually had my best interest at heart. And he was subtle. There were exercises that we would go through that worked really good for a guy who was an analyst, just simple things like get invited to a party. You don't want to go write down how you feel the party is going to go. Write what your expectations are. Then force yourself to go to the party come back and write down how it was. And compare those two. Start to get some insight into the way that you kind of distort your view of things. And that was tremendous. And so I had to do the exercises but I also had a huge care hanging in front of me, happiness, my air force career, a future if you've figured out, gosh, everything it always gets better, problem is when you get to that dark space you don't see a future. And he showed me that there was a little bit of a future but you're right, I had worked for it. - [Frances] Right, and how would you say like

leadership in the wing can support airmen better in order to help prevent suicide -[Robert] Leadership, and speak from what I've seen in the program as well. You got to encourage people to build their people. After I tried, you know, my former boss he's like, what could I have done to stop this? Cause I didn't have any of the signs. I wasn't walking around with plans. I wasn't doing all of these things. I was the funniest guy around. I was funny as Robin Williams. - [Frances] We wear those masks right? - [Robert] We wear those masks. So knowing your people, even though he didn't see signs he knew I was getting divorced. He knew I was highly stressed. He knew I didn't go to any parties and all the rest of the things. So being able to know that, see that, but the other thing is, people need to feel valued. Everybody in that wing does a job. And every job there contributes to the air force mission. If you're processing paperwork for fuel for a jet, that jet doesn't fly without that fuel. And so getting the word out, letting people know directly how important they are. not only to the air force and the mission but personally to people in family and friends around them. You know, if you don't feel valued that's when you start taking trip down into that. The other thing with leadership is they kind of walk the walk. The first time I did a presentation provide for each other. We had reserved parking spaces out in front of the auditorium and for the all the group commanders all those, the wing commander the command chief and the like, and all the airmen were told that this was a mandatory function and they all started shuffling in and all of those parking spaces were empty. Every single one of them. And the airman saw that. And you know, it's reminiscent of my dad with a cigarette in his hand telling me not to smoke. You gotta walk the walk. If it's important for the airman it's important for everybody its in that chain of command. And they got to make sure that they know that we lost a wing commander up at Hailstone we lost a two star general downrange. This can happen to anybody, it really can. But it always gets better because the tools air force has available. They work, if you're willing to work it, they work. - [Frances] And what do you say some of the best resources available for our airmen? - [Robert] I like the program that we have and that it's real people telling real stories, because I think, obviously the mental health counseling the ability for leadership to understand that sometimes people need a little bit of time to get back on track. That's all important. But as we discussed, you have that critical time period. That's 15 seconds or 30 seconds when something bad happens and you just want to say screw it. And if we can actually plant a seed in some our airman's minds about the impact that it has on friends and family, around them and the success stories, success stories should drive them to seeking help. The impact that it has on friends and family should be there to give people pause. I present with a lady, her husband, a hard charge a Marine shot himself 35 years ago it was witnessed by her and her son. She lost 25 years of his life and she lost her six-year-old son, 15 years later when she came home and found him hanging from the ceiling board that's the impact it has on friends and family. So reaching people, connecting with them on a personal level to let them know the consequences and the impact that it has on people around them. I think it'd be a great tool to get them into the programs can be wildly successful. Nobody's going to build adage. Nobody's going to get help unless they want it. How do we get them to want it? That's the key right there. How do we get them to want it? - [Frances] Being at the air force as a whole is focusing on

decreasing suicide, through different prevention measures. Where do you feel that in a lacking, in some areas to improve? - [Robert] The two big ones that I always kind of beat the drum on are, as I said, not recognizing the, or not talking about the impact, it has a friends and family and because it's devastating, one suicide can affect in concentric circles, 150 other people. And then not talking about our success stories, and this is real people, talking and discussing, we have this stigma attached with suicide discussions. I was a full-bird colonel when I came out and most people think full-bird colonel, they're perfect, they have this great career, they do everything right, they run six minute miles. They all have PhDs. They're all pilots and all the rest of the stuff. And it's like, no, come on. Let's just talk about it. We can't remove the stigma unless we're willing to talk about it. 15 years ago we didn't talk about cancer. 25 years ago someone in your family got AIDS, nobody talked about it. That was hush hush. We're curing both now. We're curing them. And it's time for people to stand up and let others know that they've also had struggles that they were able to overcome them and how they were able overcome them. When we're talking about the receiving help. People think the receiving help is just so you can get through the day. No, you can actually get to the point where you have the great life where you look forward to getting up in the morning, I run 30 marathon since then I drive around the Island in the 65 Corvette stingray, I'm married again, I retired in Hawaii. All of these things that I would not have had if I didn't checked out, I got to spend 18 more years in uniform. I got to save people's lives, careers and everything else, show them the impact that they can have on lives around them. And that will get them, hopefully get them in the doors. You go watch Jimmy Stewart. It's a wonderful life. Here's what life would have been if you'd never been born and let people know that they make such a contribution to the world around them, their friends, family and coworkers, because the fact that they're here - [Frances] Right and that's the whole thing right? Building that resiliency and speaking about it and talking it, living through all your troubles, start learning how to bounce back. Those are some of the big key things that I'm trying to help in the wing and trying to facilitate that piece. - [Robert] Yeah, and I'll tell you we have one more problem, whereas military, we tend to trust people who wear our uniform more than people who haven't. And so some of the resources have never worn a uniform. It doesn't mean they don't care. It just means that how can you relate to me if we don't have a common set of experiences and everything else like that. So having mental health providers who are in uniform, I think is also a good thing, I think it helps. It's just one less hurdle to establish and again trust you need to have in, that relationship that you need to have. - [ Frances] Right, and you know, we're in that disconnected timeframe right? With COVID everyone's disconnected teleworking and we can only suspect COVID has significantly impacted suicide. Unfortunately, we won't know the results of that, for a couple of years, but what are your thoughts on that? - [Robert] I'm in the middle of it right now. And I am watching people's lives literary di-swayed out here in Hawaii, tourism is everything. So we when the nation was in like a 20% unemployment rate. We were up in the 30%. I mean, we were just, it's been devastated. We've been locked down, we're still locked down. The governor just extended the lockdown. And I really fear, you read stories about domestic violence increases. I think divorce rates are up 37%. You've got people who can't pay their

bills. You've got people who started businesses and they've been in business for 20 years. And now because of some arbitrary shutdown I understand that they want to help keep people safe but you can't keep everybody safe from everything all the time. And I fear that we're going to find the number of people who feel that their lives have been destroyed. The number of divorces, the number of domestic violence incidents and all the rest of the things. I think those numbers are going to be a lot higher than the number of deaths from COVID. And it's just heartbreaking. It is absolutely heartbreaking. - [Frances] And one final note, what would you say to someone right now that's possibly listening, contemplating suicide. - [Robert] I would say first consider the impact that it has on friends and family. Second, remember that, you are an incredibly important addition to this planet, to your friends, your family and coworkers, and they're just reach out just reach out to friends, to anybody. Good, gosh, give them my phone number you know, to just to let people know that it's possible. It's amazing that the tool box That I was given that allowed me to cope with different circumstances in ways that I hadn't even imagined I know it's hard because when you're in that dark place, you're not looking at reaching out, I guess, a better response would be, how do you keep from getting to that dark place? Maybe here's a thought, if you're not feeling particularly well go make an appointment. And if you're a boss, talk to your (muffled speaking) and say yeah, I am kinda a bit down a little bit, when talked to. Yeah really the doc was really, kind of pretty cool about this and let people know that, you know, the people that work for, you know, that, hey, it's so cool to go there and you might actually get some benefit out of it. - [Frances] Colonel Swanson, thank you so much for talking with us today. I can't express how thankful I am and for really sharing your story being vulnerable right, because listening or having to repeat yourself and talk through these events, it's triggering, I'm sure sometimes it takes you back to that place, but I really want to thank you for your time today and sharing your story. -[Robert] Sure, one last thing, like I said, that guy died on the Seinfeld. So that's one of the things that keeps me grounded throughout this process. The final thing and I've asked this a few times when I'm talking to the audience, you said you appreciate my vulnerability and transparency and authenticity. A lot of people wouldn't don't want to talk about it because they think that it might make them look weak. And so I would ask your audience members if there's anybody out there that thinks that I'm a weak person. And if the answer to that question is no then I've just shown them that it's okay to talk about it. And it's okay to bounce back because it doesn't make you a weak person actually seeking the help makes you stronger than most of the people around you. - [Frances] Right, thank you for that. And gladiators thank you for tuning in for this episode of sword and shield, if you are thinking about suicide or a worried about a friend or a loved one just provide them emotional support. The lifeline network is available 24 seven across the United States. Call the national suicide prevention lifeline 1-800-273 CALL to reach a trained counselor. And you can use that same number and press number one to reach the veteran crisis line. Thank you again. And I look forward to continue to work with you in the future Colonel Swanson, - [Robert] you betcha take care. - [Frances] Thank you. (Upbeat music)