

## **RESEARCH & PUBLICATIONS**

TAPS relies on empirical evidence and publications to provide the highest quality of comfort, care, and resources to all those grieving the death of a military or veteran loved one.

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## **MILITARY BEREAVEMENT: SUICIDE LOSS**

RUOCCO, K. A., PATTON, C. S., BURDITT, K., CARROLL, B., & MABE, M. (2022). TAPS SUICIDE POSTVENTION MODEL: A COMPREHENSIVE FRAMEWORK OF HEALING AND GROWTH. DEATH STUDIES, 46(8), 1897–1908. DOI:10.1080/07481187.2020.1866241



This article provides a comprehensive framework for a suicide postvention model. This TAPS Suicide Postvention Model is built on the understanding that suicide loss, especially in the military, is a uniquely complicated loss that can have disparate grief experiences if not addressed. The three-phase model consists of Stabilization, Grief Work, and Posttraumatic Growth, with each phase defined by three pertinent tasks. Stabilization involves the mental health and suicide risk assessment and subsequent referral, trauma assessment and referral, as well as the identification and stabilization of all other suicide-specific issues. Grief Work is modeled around Stroebe and Schut's Dual Process Model of Coping (1999), in which the tasks are to shift focus away from the cause of death, incorporate grief and manage the ebbs and flows of grief, and redefine the relationship with the deceased. The third and final phase is Posttraumatic Growth, based on the works of Tedeschi and Calhoun (1996). In this phase, survivors find meaning from their loss, share the story of their person in a healthy and healing manner, and ultimately discover a new appreciation of life. Postvention, with peer and clinical support, is vital for suicide prevention by addressing the challenges and growth potential of survivors.





This report is the result of a year-long evaluation of suicide and suicide prevention among members of the armed forces. The investigative task force includes DOD and non-DOD professionals, and the Tragedy Assistance Program for Survivors (TAPS). Founded in 1994, TAPS is a national non-profit organization providing 24/7 support to all those grieving the death of a military loved one across all manners of death and all duty statuses' at the time of death. Every year, TAPS hosts the largest gathering of military survivors bereaved by suicide known as the National Military Suicide Survivor Seminar and Good Grief Camp to provide Postvention care. At the 2009 TAPS National Military Suicide Survivor Seminar, the investigative task force heard directly from bereaved suicide survivors about their experiences and perceptions of death by suicide in the military community. The report culminated in 49 findings and 79 recommendations to focus efforts and reduce the rates of suicide amongst servicemembers. One such recommendation is to provide comprehensive emotional support to the families to cope with grief and trauma across all sudden, traumatic, and unexpected deaths.

STERLING, A. G., 4TH, BAKALAR, J. L., PERERA, K. U., DEYOUNG, K. A., HARRINGTON-LAMORIE, J., HAIGNEY, D., & GHAHRAMANLOU-HOLLOWAY, M. (2017). PERSPECTIVES OF SUICIDE BEREAVED INDIVIDUALS ON MILITARY SUICIDE DECEDENTS' LIFE STRESSORS AND MALE GENDER ROLE STRESS. ARCHIVES OF SUICIDE RESEARCH:OFFICIAL JOURNAL OF THE INTERNATIONAL ACADEMY FOR

SUICIDE RESEARCH, 21(1), 155-168. DOI:10.1080/13811118.2016.1166087



This article is the first of its kind to systematically examine male gender role stress from the perspective of 65 TAPS military survivors who grieve the death of a loved one to suicide. The study focuses specifically on male military service members and how their experiences with life stressors can contribute to suicide risk. The researchers developed a 16-item Male Gender Role Stressor Inventory (MGRSI) to assess the level of male gender role stress. They found that individuals who experienced life stressors in the year leading up to the suicide had higher MGRS scores, highlighting the importance of addressing life stressors in suicide prevention efforts, particularly among male military service members.

OHYE, B., MOORE, C., CHARNEY, M., LAIFER, L. M., BLACKBURN, A. M., BUI, E., & SIMON, N. M. (2022). INTENSIVE OUTPATIENT TREATMENT OF PTSD AND COMPLICATED GRIEF IN SUICIDE-BEREAVED MILITARY WIDOWS. DEATH STUDIES, 46(2), 501–507. DOI:10.1080/07481187.2020.1740832



This article highlights a novel two-week intensive outpatient treatment for suicide-surviving military widows living with PTSD and complicated grief. Participants attended a two-week intensive outpatient treatment program with Home Base where they engaged with individual sessions of Prolonged Exposure, Complicated Grief Therapy, and semi-structured group therapy based. Each session emphasized dialectical behavior skills therapy. Following this intensive outpatient intervention, and in comparison to baseline scores, participants self-reported statistically significant reductions in symptoms of PTSD, depression, complicated grief, and maladaptive loss-related cognitions. However, there were no significant changes in grief-related avoidance. In sum, the work of Ohye et al. suggests the need for additional treatment development and testing.

MOORE, M., PALMER, J. K., CEREL, J., & RUOCCO, K. (2022). GROWTH AND HOPE AFTER LOSS: HOW TAPS FACILITATES POSTTRAUMATIC GROWTH IN THOSE GRIEVING MILITARY DEATHS. FRONTIERS IN PSYCHOLOGY, 13, 996041. DOI:10.3389/FPSYG.2022.996041



This article examines the correlation between peer-based emotional support and Post Traumatic Growth (PTG) among military survivors bereaved by suicide. This study surveys a total of 691 Tragedy Assistance Program for Survivors (TAPS) Peer Mentors and found that those who have active involvement with TAPS Peer Mentor programs demonstrate higher levels of PTG and spirituality and lower levels of depression, anxiety, and loneliness



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