CFAY wins USFJ installation environmental awards

By Ronald Inman, NAVFAC FE Public Affairs

Commander, Fleet Activities Yokosuka (CFAY) won two United States Forces Japan (USFJ) Installation Environmental Excellence Awards at the recent Joint Environmental Conference at Yokota Air Base Sept. 5-6.

CFAY won in the Environmental Compliance and USFJ/Host Nation Coordination categories, and was runner-up in the Pollution Prevention category.

"Our team couldn't have accomplished this without the support of all of the organizations which make up CFAY," said CFAY Environmental Director, Jack Gilbertsen. "This was our first win in the Environmental Compliance category, and our second consecutive win for CNFJ/Host Nation Coordination."

The award program's Environmental Compliance category requires that an installation must have taken corrective actions to eliminate an environmental shortfall noted during an audit report, such as the Environmental, Safety and Occupational Health Compliance Assessment and Management Program, Environmental Compliance Assessment System, or Environmental Compliance Evaluation.

According to the award submission package, "CFAY excelled in Environmental Compliance by integrating its Environmental Management System (EMS) with Environmental Quality Assessments into a single Environmental Compliance program. By working closely with tenants and outside organizations to foster a deeper understanding of processes at the operational level and how compliance issues can be integrated with minimal impact to mission objectives, CFAY was able to place an effective tool at just the right parts of key processes in order to achieve a level of sustained, long-term compliance support."

The USFJ/Host Nation category criteria call for the installation to meet its commitment to serve as a responsible environmental steward and initiate positive efforts to live in harmony with our Japanese hosts.

The installation must also conduct a combined celebration of Earth Day/Green Day activities with the local community and satisfactorily fulfill the reporting requirements for pollution incidents.

CFAY conducted a comprehensive program including natural, cultural and historical tours; plant and animal surveys; the discovery and restoration of numerous cultural and historical artifacts, facilities and relics; more than 50 volunteer events to promote environmental health; three Earth Day awareness events; the preservation of natural resources and habitats; and an 'Adopt-A-Monument' program for 21 monuments throughout the Yokosuka Naval Complex – all in close collaboration with many local organizations, entities and city offices.

The Pollution Prevention category stipulates that an installation must aggressively promote educational awareness on hazardous material/waste reduction, recycling, recovery and reuse programs.

An effective environmental program must exist for managing polychlorinated biphenyl (PCB), air emissions, drinking water, waste water, hazardous material and waste, solid waste, medical waste, pesticides, asbestos, and underground storage tanks.

"This has been a great year for CFAY Environmental," concluded Gilbertsen. "Having recently won the Secretary of the Navy Award for Environmental Quality and the Chief of Naval Operations Award for Cultural Resources Management, these new awards show that our team has horsepower and momentum, and we are going to do our best to keep the ball in motion as we move into 2013."

Suicide Prevention Awareness Month emphasizes encouraging bystander intervention

Provided by FFCS FAST Office

Editors note: This is part three of a four-part series.

Getting help for a psychological injury is similar to getting help for a physical injury. Imagine someone falls off their bike and hits their head on the curb. Usually it's a bystander, a passerby, or a friend riding with them who sees the injury occur and responds first. They would most likely use common first aid strategies (even if they aren't first aid trained): Ask if they are okay, check for injuries, ask where it hurts, look for signs that they're coherent, and call 911 or get them to the ER (particularly since our head houses such a precious organ, our brain.)

A psychological or stress injury is similar, though may seem more challenging to see and approach. It isn't visible, and many people don't know what to say or do. This may intimidate bystanders, usually the friends, coworkers and family members, who may be afraid of how to intervene. Battling common myths, learning to recognize warning signs of suicide, getting comfortable with ways to ASK, CARE, and TREAT are critical and can save a life. Since psychological and stress injuries happen to all of us at some point in our lives, we all become bystanders to those around us. Suicide prevention is, thus, referred to as "an all hands evolution – all of the time."

Battle common myths: Know the truth about suicide

• Truth: Discussing suicide openly promotes help-seeking behavior.

By starting the discussion before these feelings occur, you are not giving a suicidal person morbid ideas or increasing risk. The opposite is true – bringing up the subject of suicide and discussing it openly is one of the most helpful things you can do.

• Truth: Outreach from someone's support network can help curtail the impulse to end his/her life.

Even the most severely depressed person has mixed feelings about death, wavering until the very last moment. If the people that someone regards the highest—loved ones, leadership, command, peers, etc—ACT (Ask Care Treat), the urge to "end it all" can be conquered. Most suicidal people are open to a helpful intervention, sometimes even a forced one, to show them that their circumstances will not last forever and that Life Is Worth Living.

• Truth: Very few suicides occur without some sort of warning.

Most people communicate warning signs of how they are reacting to or feeling about stressful events in their lives, whether it is relationship problems, problems at work, financial matters, a recent loss or trauma, or legal issues. When stressors are present, the person may wrongly consider suicide as the option to escape pain, relieve tension, maintain control, or cope with stress.

• Truth: A non-fatal suicide attempt should be taken seriously, not down played as an attention-seeking act.

A non-fatal attempt by someone is an opportunity to help him/her live. Rather than punishing or reprimanding someone who has expressed suicidal thoughts, offer help and alternative answers. Get them to talk to a chaplain or counselor. Suicidal behaviors must be taken seriously. If not addressed, a thought of suicide can become an act of suicide.

• Truth: Suicide is often viewed as an alternative to make the pain stop, not because he/she actually wants to die.

Very few people who consider suicide are absolutely determined or completely decided about ending their life. Most suicidal people do not want death; they want the pain to stop. Traumatic life events or jolting changes may be beyond one's own ability to cope, causing him/her to suffer through hopelessness alone. However, the majority of those who consider suicide at some time in their life find a way to continue living.

Know what to do: A-C-T (Ask, Care, Treat)

Ask when you see warning signs. When you see someone with these warning signs, ask them, "Are you feeling suicidal?" or "Are you having thoughts of suicide?"

Red flags to look for: Remember "Is Path Warm":

I: Ideation (Threatening to hurt or kill self, looking for ways to die)

S: Substance Abuse (Increased or excessive substance (alcohol or drug) use)

P Purposelessness (No reason for living; no sense of purpose in life)

A: Anxiety (Anxiety, agitation, unable to sleep or sleeping all the time)

T: Trapped (Feeling trapped - like there's no way out; resistance to help)

H: Hopelessness (Hopelessness about the future)

W: Withdrawal (Withdrawing from friends, family and society)

A: Anger (Rage, uncontrolled anger, seeking revenge)

R: Recklessness (Acting reckless or engaging in risky activities, seemingly without thinking)

M: Mood Changes (Dramatic mood changes)

Show them you care: Tell them they are important and you CARE about them. Encourage them to talk about what they are feeling and thinking. Let them know you are worried about them. Small seeds of hope can help bring us through tough times.

Treat those who need help: The last step, TREAT, suggests getting someone the help they need from a qualified source, like a chaplain, counselor, doctor, or psychologist. This is often the biggest challenge for bystanders, fearing what may happen or what to say or do. Connecting someone to TREATment can be as simple as taking them to see a chaplain or counselor, especially if the suicide thoughts are unclear, but warning signs are present. If someone is currently suicidal (says they want to die and/or has a plan on how they will carry this out), get them to the ER or call 911 or security, and do not leave the person alone. If there's concern, it's best to act on it, not ignore it. We wouldn't leave a physically injured person alone to die on the side of the curb, so we should not ignore a psychologically injured person at risk of suicide.

To sign up for Applied Suicide Intervention Skills Training (ASIST) and learn ways to A-C-T (AKA suicide first aid), email kimberly.tullos.ctr@fe.navy.mil or call 243-6931. For suicide prevention trainings/resources or to talk with a counselor, call 243-7878 or 243-FFSC.