



Helping our Veterans and their families reclaim the life they put on hold.





JEANNIE CAMPBELL, MSW

Executive Vice President, National Council and Retired Master Chief Petty Officer



✦ **Jeannie Campbell** serves as the chief operating officer of the National Council for Community Behavioral Healthcare, leading administrative and fiscal management, member services, communications, public policy and practice improvement functions.

A veteran of the U.S. Navy, Ms. Campbell also leads the National Council's efforts to improve healthcare for Veterans. She orchestrates the National Council Conference, the field's premier training and networking event.



PURPOSE OF WEBINAR

✧ To learn about:

- The **expanding role of civilian providers** caring for Veterans and their families in communities nationwide;
- The curriculum of the **Serving Our Veterans Behavioral Health Certificate** and how it can help you to enhance your services;
- The promising practices from the **Community Partnership of Southern Arizona**; and
- **One Veteran's perspective** on the importance of community health services.



SPEAKERS

- ✦ **Jeannie Campbell**, Retired Master Chief Petty Officer, U.S. Navy, Executive Vice President, National Council for Community Behavioral Healthcare (National Council)
- ✦ **William Brim**, PsyD, Deputy Director, U.S. Department of Defense Center for Deployment Psychology at Uniformed Services University
- ✦ **Vanessa Seaney**, MSW, BS, LCSW, CPHQ, Chief Clinical Officer, Community Partnership of Southern Arizona
- ✦ **Brett Rustand**, Veterans' Advocate and Board Member, Community Partnership of Southern Arizona



THE PROBLEM

An Unmet Need

- ✧ Since 2001, more than 2 million U.S. troops have deployed to Iraq and Afghanistan.
- ✧ Mental health disorders caused more hospitalizations among U.S. troops in 2009 than any other reason.
- ✧ Many of the 43,000 who have been injured return home with posttraumatic stress disorder, depression, traumatic brain injury, and addictions, and far too many die from suicide.
- ✧ Between 2005 and 2009, one member of the Armed Forces took his or her life every 36 hours.
- ✧ During 2010, the number of suicides in the National Guard and Reserves increased by 55 percent.





ON THE HOMEFRONT



- ✦ Nearly **40 percent** deployed to combat operations since 2001 are **National Guard and Reservists** — or “citizen soldiers” — and return to communities that may not be near a VA facility or military base.
- ✦ Veterans with a psychological problem are significantly **more likely to leave military service in the year following deployment**, shifting health needs to community providers.
- ✦ Only about **half of service members who need help for behavioral health problems seek it**, and **only half of those who seek help receive adequate care**.
- ✦ Understanding the **complex military culture** is important for providing **culturally sensitive and clinically competent services** to Veterans and their families.



RESPONDING TO THE NEED

The **National Council**, the **Center for Deployment Psychology**, and **Essential Learning** are partnering to train civilian behavioral health and primary care providers in any community health setting on military culture and the issues affecting Veterans and their families.

- ✧ The online curriculum comprises 14 self-paced courses that:
 - Provide the **latest clinical guidelines** from the U.S. Department of Defense;
 - Demonstrate **applicable knowledge and skills** through **real-life examples**; and
 - Emphasize **cultural sensitivities** to ensure **clinical competency**.



WILLIAM BRIM, PsyD

Deputy Director, Center for Deployment Psychology



- ✦ **William Brim** is a clinical psychologist and associate professor at the Uniformed Services University of the Health Sciences. He has been with the Center for Deployment Psychology since 2007, initially as a deployment behavioral health psychologist at Malcolm Grow (USAF) Medical Center and serving as the deputy director since 2008.

Dr. Brim served on active duty as a psychologist in the U.S. Air Force from 1997 to 2007.



ABOUT THE CENTER FOR DEPLOYMENT PSYCHOLOGY (CDP)

- ✦ Headquartered at the **Uniformed Services University of Health Sciences** of the U.S. Department of Defense.
- ✦ **Trains military and civilian behavioral health professionals** to provide high-quality deployment-related behavioral health services to military personnel and their families.
- ✦ Offers **trainings, seminars, publications, a monitored online forum**, and more to military and civilian providers.



ABOUT THE CURRICULUM

✧ Reflects CDP's in-person curriculum with **real-life examples** and the **latest clinical guidelines** for:

- Military cultural competency
- Posttraumatic stress disorder or "combat stress injuries"
- Depression
- Traumatic brain injury (TBI) and mild TBI
- Impact of combat and deployment on families
- Addictions
- Suicide prevention
- Working with homeless Veterans
- ...and more



VANESSA SEANEY, MSW, BS, LCSW, CPHQ **Chief Clinical Officer, Community Partnership of Southern Arizona (CPSA)**



- ✧ **Vanessa Seaney** is a licensed clinical social worker (LCSW) and is certified as a professional in healthcare quality (CPHQ). She has 28 years experience working in public behavioral healthcare in Southern Arizona, including 16 years with CPSA, the Regional Behavioral Health Authority that oversees public behavioral healthcare in Pima County, Arizona.



BRETT RUSTAND

Veterans' Advocate and Board Member of CPSCA



✦ **Brett Rustand** has a degree in international relations and Latin American studies from Brigham Young University and was commissioned in the U.S. Army as a second lieutenant. His assignments included the 101st Airborne and 2nd Infantry Division from Iraq to Korea.

A native of Arizona, Brett returned to Arizona with his family and is engaged with community behavioral health organizations and the U.S. Department of Defense in supporting returning Veterans.



ABOUT THE CPSA

- ✦ Since 1995, the Community Partnership of Southern Arizona (CPSA) has administered the public behavioral healthcare system in Pima County for the state of Arizona.
- ✦ CPSA coordinates routine and crisis mental health and substance use treatment services for both children and adults.



ABOUT THE CPSA (cont.)

- ✧ CPSA oversees 30,000 members in Pima County.
- ✧ Services are provided by a network of organizations, which range from traditional treatment services to rehabilitation and support services, including living skills, supported employment, and peer support.



ABOUT THE CPSA (cont.)

- ✧ Receives funding from the Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS), Arizona Health Care Cost Containment System (AHCCCS), and Substance Abuse and Mental Health Services Administration (SAMHSA).



CPSA'S FOCUS ON VETERANS

Why is it so important?



- ✦ As a Regional Behavioral Health Organization, CPSA identified a need for focused behavioral health services for Veterans in Pima County.
- ✦ CPSA data: 600 identified Veterans in 2008; 405 Veterans in 2011.
- ✦ CPSA organized a focused effort based on coordination of care, outreach to the community, and educating provider staff to better serve Veterans and their families.



CPSA'S FOCUS ON VETERANS

Why is it so important? (cont.)



✧ Behavioral health needs of Veterans include:

- Reintegration assistance, particularly when a Veteran is diagnosed with PTSD or TBI.
- Suicide prevention services. Suicide rates are high, particularly in the Guard and Reserve.
- Family support, which is often needed during deployment and upon the Veteran's return.



COMMUNITY-BASED BEHAVIORAL HEALTH VETERANS INITIATIVE



- ✧ Forum facilitated by Rep. Gabrielle Giffords (D-AZ) and Rep. Michael Michaud (D-MN) in September 2008
- ✧ 50+ participants in attendance
- ✧ Goal: To identify and discuss the status of behavioral health needs for Veterans
- ✧ Outcomes:
 - Commitment to increase coordination of care efforts;
 - Commitment to increase peer support services;
 - Commitment to establish contracts between public behavioral health and other Federal entities, like Veterans Affairs; and
 - Decrease suicide risk



VETERANS STRATEGIC PLAN

✧ Four Goals

1. CPSA initiatives with Veteran members
2. Community initiatives with Veterans
3. Community initiatives with military families
4. Collaboration with other government entities for Veterans' services



GOAL 2: Community Initiatives with Veterans

- ✧ Participation with the Veteran Alliance of Local Organizations for Reintegration (VALOR)
- ✧ Behavioral Health and Military/Veteran Members Community Training Series:
 - Introduction to Military Culture
 - Common Behavioral Health Issues
 - Suicide Trends, Assessment, and Prevention
 - Unique Dynamics and Needs of Military/Veteran Families
 - Collaborative Commitment to Effective Services Panel Discussion
- ✧ Suicide Prevention Conference in 2009 and 2011
 - In collaboration with Southern Arizona VA Health Care System (SAVAHCS)



GOAL 3:

Community Initiatives with Military Families

- ✦ Collaboration with the Arizona Coalition for Military Families (ACMF)
- ✦ Military Immersion Training
- ✦ Mental Health First Aid partnership in Pima County



GOAL 4:

Collaboration with other Government Agencies on Veterans Services

- ✦ Facilitated a contract between the SAVAHCS and a consumer-run agency in the CPSA system
- ✦ Entered into an agreement with SAVAHCS to place Veterans in the Recovery Support Institute
- ✦ Worked in collaboration with SAVAHCS and SAMHSA on filming the May episode of the *Road to Recovery* Series, which focused on Veterans' behavioral health

<http://www.cpsa-rbha.org/static/index.cfm?contentID=3293>



NEXT STEPS AND FUTURE DIRECTIONS



✧ Facilitate a discussion with community stakeholders to create a centralized hub to coordinate all Veterans' services in southern Arizona

- Behavioral Health
- Peer Support
- Employment Services
- In-home Counseling and Family Support
- Housing
- Suicide Prevention
- Family Support
- Transition and Reintegration



CALL TO ACTION

Respond to the needs of Veterans and their families in your community.

14 self-paced online courses earning 20+ hours of continuing education for only \$350

- ❖ Cognitive Processing Therapy for PTSD in Veterans and Military Personnel
- ❖ Domestic and Intimate Partner Violence
- ❖ Epidemiology of PTSD in Military Personnel and Veterans
- ❖ Fundamentals of Traumatic Brain Injury
- ❖ Improving Substance Abuse Treatment Compliance
- ❖ Meeting the Behavioral Health Needs of Returning Veterans
- ❖ Military Cultural Competence
- ❖ Overview of Suicide Prevention
- ❖ Prolonged Exposure Therapy for PTSD for Veterans and Military Service Personnel
- ❖ Provider Resiliency and Self-Care: An Ethical Issue
- ❖ PTSD Then and Now, There and Here
- ❖ The Impact of Deployment and Combat Stress on Families and Children:
 - Part I: Understanding Military Families and the Deployment Cycle
 - Part II: Enhancing the Resilience of Military Families
- ❖ Working with the Homeless: An Overview

Enroll now! Visit www.TheNationalCouncil.org/Veterans



Q&A

Join us at 3 p.m. EST/11 a.m. PST
for a **Facebook Chat!**

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www.thenationalcouncil.org/veterans