Asking this Critical Question Can Make a Difference:
“Have you or a loved one ever served in the military?”

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Webinar
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The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).
Welcome

Donna Aligata, R.N.C.
Project Director, SAMHSA’s Service Members, Veterans, and their Families Technical Assistance (SMVF TA) Center,
Collaboration Across Federal Agencies

U.S. Department of Veterans Affairs (VA) ↔ U.S. Department of Health and Human Services (HHS) ↔ U.S. Department of Defense (DoD)

SAMHSA
Substance Abuse and Mental Health Services Administration

SAMHSA ★ SMVF TA CENTER
Service Members, Veterans, and their Families Technical Assistance Center
SAMHSA’s SMVF TA Center

- Strengthening ongoing collaboration among military and civilian stakeholders
- Providing a centralized mechanism for cities, states, and territories to learn, connect, and share
- Increasing awareness of and access to resources and programs that strengthen behavioral health care systems for service members, veterans, and their families (SMVF)
- Supporting coordinated responses to the behavioral health needs of SMVF
- Encouraging cities, states, and territories to implement promising, best, and evidence-based practices
Webinar Objectives

• Provide an overview of how to ask about prior military experience when screening
• Review recent studies that outline how quality care is tied to screening for military service
• Describe successfully implemented initiatives to identify SMVF in systems of care
• Strengthen support structures within behavioral health agencies
• Provide best-practice approaches to transforming a behavioral health system from within
• Describe how to engage stakeholders and leadership
• Discuss ways to create internal military liaisons and/or veteran and military family support teams
• Explore how to connect the Ask the Question campaign across all SMVF program areas
Many veterans receive care in the community

- Forty-eight percent of all veterans used at least one VA benefit or service in FY 2016
- Nearly all elderly (age 65+) veterans have Medicare coverage
- Majority of younger veterans (more than seventy-five percent) have coverage options other than VHA
Why Asking the Question is Important

- Connecting SMVF to tailored resources
- Understanding behavioral health needs of SMVF at a community level
- Planning, funding, tracking, and measuring of impact
Which Question?

• How and what do we ask?
• Who?
  – Family
• When?
Examples of Other Ask the Question Campaigns

- Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (HIV/AIDS)
- Suicide prevention
- Military service
Susan Budassi Sheehy, Ph.D., R.N., F.A.E.N., F.A.A.N.
Professor, University of Delaware, College of Health Sciences,
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Ask Every Adult Patient

A program created and managed by the American Academy of Nursing (AAN)

Susan Budassi Sheehy, Ph.D., R.N., F.A.E.N., F.A.A.N.  
AAN Expert Panel on Military & Veterans Health Co-Chair  
Professor, University of Delaware  
Adjunct Faculty – Uniformed Services University
Have You Ever Served (HYES) is an awareness initiative to improve veterans’ health...knowing where and when someone served and what they did when they served may help to identify a diagnosis, etiology, treatment, and VA assistance.
If the answer to HYES is “Yes” ...

Determine military history

- In which branch did you serve?
- When did you serve? Where?
- What did you do while you were in the military?
- Were you deployed to a hostile/combat area?
- Did you experience enemy fire/see combat/witness casualties?
• Were you wounded, injured, or hospitalized?
• Did you participate in any experimental projects or tests that you know of?
• Were you exposed to loud noises or explosives?
• Were you exposed to chemicals, gases, demolition, or other hazardous substances?
• Have you ever used VA for your health care?
  – Do you have a service-connected disability or condition?
  – When was your last visit to VA?
  – Do you have a VA primary care provider?
  – Do you have a place to live?
Veteran Homelessness

• January 2016
  – 39,471 veterans experiencing homelessness
  – Significant (56%) decrease since the 2010 count
  – *National Alliance to End Homelessness*

• December 2017
  – 45,056 veterans experiencing homelessness
  – Mostly on the West Coast (California and Washington)
    • 25,000 living in temporary facilities
    • >15,000 have no reliable shelter
  – *MilitaryTimes.com*
Poverty Among Veterans

In addition...

• Forty-three percent of veterans receive food stamps
• Fifty-five percent of veterans with severe housing cost burdens fall below the poverty line
Female Veteran Homelessness

- There are approximately 3,600 female veterans experiencing homelessness*
- Female veterans are three times more likely to become homeless than non-veteran females
- One in four say they have been sexually assaulted while in the military**

*U.S. Department Housing and Urban Development: The 2017 Annual Homeless Assessment Report to Congress
** National Center for Post-traumatic Stress Disorder (PTSD): Sexual Assault Screening
Post-Traumatic Stress

• Have you ever experienced a traumatic or stressful event when your life or the lives of those around you were in danger?
• Have you experienced trauma-related thoughts or feelings?
• Are you having nightmares, vivid memories, or flashbacks about the event?
• Do you feel anxious or jittery?
• Are you experiencing a sense of panic that something bad is about to happen?
• Are you having difficulty concentrating or sleeping?
Four out of five Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) warriors have a friend who was seriously wounded or killed in action.

Wounded Warrior Project, 2013
Seventy-five percent of OIF and OEF Warriors report the memory of an upsetting military experience that has haunted them in the past month (Wounded Warrior Project, 2013)

Thirty-five percent have been diagnosed with PTSD
Military Sexual Trauma (MST)

- During military service, did you receive uninvited or unwanted sexual attention, such as touching, pressure for sexual favors, or sexual remarks?
- Did anyone ever use force or threat of force to have sexual contact with you against your will?
- Did you report the incident to your command and/or military or civilian authorities?
- Did you receive treatment?
- Were you offered medical or legal advice or both?
- Did you report this to VA?
• Did you experience heavy artillery fire; vehicular or aircraft accidents; explosions, such as improvised explosive devices (IEDs) or rocket propelled grenades (RPGs); shrapnel/fragments; or bullet wounds above the shoulders?

• Did you have any of these symptoms immediately afterwards:
  – Experiencing a loss of consciousness (being knocked out)
  – Being dazed (seeing stars)
  – Having trouble remembering the event
  – Being diagnosed with a concussion or head injury
Veteran suicide prevention is VA’s top priority

The rate of suicide in 2016 was 1.5 times higher among veterans compared with non-veteran adults

The rate of suicide among 18- to 34-year-old veterans continues to increase

In 2016, rates of suicide were highest among younger veterans (ages 18 to 34)

(VA, September 2018)
Possible Suicide Risk

- Shame
- Humiliation
- Irrational thinking
- Paranoia
- Agitation
- Anxiety
- Insomnia
- Irritability
- Despair
- Profound social isolation

- Individual presents with or communicates that they are:
  - Deteriorating physical appearance
  - Feeling trapped, no way out
  - Feeling of failure
  - Feeling that life is not worth living
  - Feeling that life has no purpose
  - Decreasing performance
  - Having a sense of hopelessness
  - Having a sense of desperation
  - Neglecting their personal welfare
Identified Military Health Risks by Conflict and/or Location
High Risks for Cancer

• World War II
• Amchitka, Alaska
• Hiroshima – Nagasaki – prisoners of war in Japan
• Korea – Submariners (exposed to nasopharyngeal radium treatment)
• Vietnam
• Gulf Wars
• Bosnia
• Afghanistan
**AGENT ORANGE: Painful legacy**

Agent Orange, a combination of herbicides and defoliants, was used by the U.S. military, particularly during the Vietnam War. The substance caused extensive medical problems, including cancers and birth defects, among people exposed to it.

In 1991, the Agent Orange Act made veterans exposed to the chemical eligible for compensation and medical care. The U.S. Department of Veterans Affairs recognizes a "presumptive" link between Agent Orange and a range of illnesses:

- Type II diabetes
- Hodgkin’s disease
- Soft-tissue sarcoma
- Peripheral neuropathy
- Spina bifida in children of veterans
- Various other forms of cancer, including prostate and respiratory cases

Added to the list in August 2010:

- B-cell leukemias
- Parkinson’s disease
- Ischemic heart disease
January 1, 1957 to December 31, 1987

Veterans and family members stationed at Camp Lejeune, North Carolina who were exposed to chemical contaminants in the groundwater are at risk for the following cancers and conditions:

- Bladder
- Breast
- Esophageal
- Lung
- Renal
- Leukemia
- Blood dyscrasias
- Multiple myeloma
- Myelodysplastic syndromes
- Non-Hodgkin’s lymphoma
- Female infertility
- Miscarriage
- Hepatic stenosis
- Renal toxicity
- Scleroderma
Vietnam

- Hepatitis C
  - Transfusions prior to 1992
  - Battlefield exposures to blood and human fluids
  - Group use of needles, razors, toothbrushes, and other personal items
Vietnam, Iraq, Afghanistan

“The agent orange of the post 9/11 generation”
- Congresswoman and Veteran, Tulsi Gabbard

• Open-air burn pits
  – Everyday trash
  – Non-serviceable uniforms
  – Medical waste
  – Chemicals
  – Pesticides
  – Etc.

• High risk for respiratory illnesses and a wide variety of cancers, including leukemia
Gulf War Syndrome

- Characterized by:
  - Fibromyalgia
  - Chronic fatigue syndrome
  - Headaches
  - Gastrointestinal problems
  - Cognitive impairments
  - Pain
  - High rates of brain and testicular cancers
  - Neurodegenerative diseases (e.g., amyotrophic lateral sclerosis [ALS], multiple sclerosis [MS])
• Depleted uranium
  – Inhaled or ingested microparticles $\rightarrow$ heavy metal toxicity
  – High risk for respiratory and renal diseases
Infectious Diseases

• Malaria
• Typhoid fever
• Viral hepatitis
• Leishmaniasis (from sandflies)
• Tuberculosis
• Rabies (from animal bites)
• Christine Kasper, Ph.D., R.N., F.A.A.N.
  – Lead poisoning from ammunitions packed in lead powder (Navy Seals)
  – Long-term effects of embedded metals (shrapnel)
Always Ask the Question

Always ask the question of each patient you see...

“Have you ever served in the military?”
(or “Has anyone in your family served?”)

...so we can better identify possible diagnoses and etiologies of diseases and provide the appropriate treatments, support, and financial assistance that our veterans and their family members need and deserve.
For more information or for copy-permissive material

www.haveyoueverserved.com
Thank You!
Jo Moncher
Former Bureau Chief, Community-based Military Programs,
New Hampshire Department of Health and Human Services
The “Ask the Question” Campaign is dedicated to Lt. Col. Stephanie Riley, a former nurse with the New Hampshire National Guard. Lt. Col. Riley died of lung cancer in December 2014.
“Ask the Question” Provides an Opportunity to...

• Acknowledge that military service is important
• Open up a dialogue of support
• Understand the relationship between military experiences and today’s medical symptoms
• Help connect veterans to VA
• Identify a warrior’s transferable job skills
• Address service-related barriers to stable housing
• Assist military widows to access survivor benefits
• Help a student thrive when a parent is deployed

“Ask the Question” provides an opportunity to create a well-informed and collaborative system of care and services for veterans, service members, and military families!
It’s Okay to “Ask the Question!”

www.askthequestionnh.com
What Are Your Barriers in Accessing Care?

2012-2013: 1,200 New Hampshire veterans responded
1. Stigma, embarrassment, and shame
2. “I do not feel understood by the providers who serve me”
3. Don’t know where to go; nothing available to help; I will only speak to another veteran; no one wants to help

2017-2018: 950 NH veterans responded
1. Stigma, embarrassment, and shame (Making significant headway!)
2. “I do not feel understood by the providers who serve me” (Making significant headway!)

Seventy-five percent of veterans surveyed said yes—they have been “asked the question” in the last 2 years.

Seventy percent of veterans surveyed said yes—coordination and communication between military, VA, and/or civilian healthcare providers has improved.
To improve access to and quality of care for veterans, service members, and military families by:

1. Strengthening systems for identifying military members being served
   - “Ask the Question” has identified 18 percent of clients served monthly as military-connected (21,000 clients served monthly)
   - Increased TRICARE enrollment from 2 to 9 centers over 250 credentialed clinicians
2. Enhancing military cultural competence
   - Providing military culture training to staff, board, and volunteers

3. Partnering with civilian-military partners and the community
   - Client referral coordination/support with VA Medical Centers, Vet Centers, and National Guard
<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>September 22, 2015</td>
<td>SAMHSA National Webinar (700 participants)</td>
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<tr>
<td>November 6, 2015</td>
<td>VA Presents “Ask the Question” at International Trauma Conference</td>
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<tr>
<td>January 15, 2016</td>
<td>White House Joining Forces Conference Call</td>
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<td>May 3, 2016</td>
<td>National Military Mental Health Summit (San Diego, California)</td>
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<td>June 13, 2016</td>
<td>Association of American Medical Conferences</td>
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<tr>
<td>July 20, 2017</td>
<td>DoD, VA, and HHS–DC Mental Health Summit</td>
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<tr>
<td>August 6, 2017</td>
<td>National Legislative Summit (Boston, Massachusetts)</td>
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<tr>
<td>August 28, 2017</td>
<td>George W. Bush Institute Conference Call</td>
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<tr>
<td>August 30, 2018</td>
<td>Home and Community-based Care Services Conference (Baltimore, Maryland)</td>
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Transforming a Healthcare System

1. Secure top leadership
2. Organize internal military team
3. Identify a military liaison
4. Host a military culture training
5. Share resources
6. Train intake staff
7. Engage information technology (IT) staff
8. Partner with VA and military partners
Definition of a Veteran

“A veteran is someone who at one point in their life wrote a blank check made payable to the United States of America for up to and including their life.”

-Unknown
Ask the Question – New Hampshire - [https://askthequestionnh.com/](https://askthequestionnh.com/)

Thank You
Military Culture Resources

- U.S. Department of Veterans Affairs
  - Community Provider Toolkit -
    [http://www.mentalhealth.va.gov/communityproviders/](http://www.mentalhealth.va.gov/communityproviders/)
  - Military Culture Training for Community Providers -

- Uniformed Services University, Center for Deployment Psychology -
  [https://deploymentpsych.org/search/node/military%20culture](https://deploymentpsych.org/search/node/military%20culture)
Military Culture Resources (cont’d)

• Psychological Health Center of Excellence (formerly Deployment Health Clinical Center) - http://www.pdhealth.mil/education-training
  - Real Warriors Campaign (Understanding and Using Evidence-Based Clinical Practice Guidelines) - https://www.realwarriors.net/healthprofessionals/guidelines/clinical
• National Child Traumatic Stress Network - https://learn.nctsn.org/
• PsychArmor Institute (online training resources) - https://psycharmor.org/
• American Academy of Nursing – Have You Ever Served in the Military - www.haveyoueverserved.com
• New Hampshire Department of Health and Human Services Ask the Question initiative - https://askthequestionnh.com/
Join the SAMHSA’s SMVF TA Center in celebrating Veterans Day throughout November by sharing this important webinar!

Throughout the month of November, in honor of our service members, veterans, and their families, SAMHSA’s SMVF TA Center will be featuring this webinar on YouTube at https://www.youtube.com/channel/UCRB0o73fyfB4P6H6hXysjZQ.

You will receive the direct link to the webinar archive by 11/9/18. Please pass it along to others so they can learn about the critical question!
SAMHSA’s mission is to reduce the impact of substance abuse and mental illness on America’s communities.

www.samhsa.gov

1-877-SAMHSA-7 (1-877-726-4727) ● 1-800-487-4889 (TDD)