



SAMHSA Strategic Initiative: Military Service Members, Veterans, and Their Families



Behavioral Health is Essential To Health



Prevention Works



Treatment is Effective



People Recover

Overview

- History of SAMHSA's involvement with military and veterans behavioral health issues
- Military Families Strategic Initiative
- Policy Examples
- Partnerships
- Programs
- Service Members, Veterans & their Families Policy Academies

History of SAMHSA's Military Families Strategic Initiative

- 2005—Grantees/provider agencies asked for guidance in working with ↑ military/veterans seeking community-based care.
- Served on DoD Mental Health Task Force
- Developed voluntary internal workgroup
- Established linkages and contacts at DoD, VA, and National Guard Bureau
- 2007—Partnered with VA to establish Veterans Crisis Line
- 2009—Served on DoD Task Force on the Prevention of Suicide by Members of the Armed Forces
- 2010—For HHS, co-chaired Psychological Health Workgroup for PSD-9/Interagency Policy Council, producing the President's Report *Strengthening Our Military Families*.
- 2010—"Military Families" officially designated a SAMHSA strategic priority

SAMHSA's Strategic Initiatives

1. Health Reform
2. Prevention of Substance Abuse and Mental Illness
3. Trauma and Justice
4. ***Military Families—Active, Guard, Reserve, Veteran***
5. Recovery Support
6. Health Information Technology
7. Data, Outcomes, and Quality
8. Public Awareness and Support

Strategic Initiative 4: Military Families

Support America's service men and women—Active Duty, National Guard, Reserve, and Veterans—together with their families and communities by leading efforts to ensure needed behavioral health services are accessible and outcomes are positive.

Goals of Military Families SI

- **Goal 3.1:** Improve military families' access to community-based behavioral health care through coordination among SAMHSA, TRICARE, DoD, and Veterans Health Administration services.
- **Goal 3.2:** Improve the quality of behavioral health prevention, treatment, and recovery support services by helping providers respond to the needs within the military family culture.
- **Goal 3.3:** Promote the behavioral health of military families with programs and evidence-based practices that support their resilience and emotional health and prevent suicide.
- **Goal 3.4:** Develop an effective and seamless behavioral health service system for military families through coordination of policies and resources across federal, national, state, territorial, tribal, and local organizations.

Affecting Change Through...

- Policy
- Partnerships
- Behavioral Health Service System
 - Accessible
 - Positive Outcomes

Policy Examples

- President's Report, "Strengthening Military Families" (Jan 2011)
- Presidential Executive Order on Improving Access to Mental Health Services for Veterans, Service Members, and Military Families (Aug 2012)
- Working to expand the number of credentialed practitioners in the TRICARE network

Partnership: VA

Preventing Suicide Among Veterans

- One in five suicides is by a veteran
 - 18-22 veteran suicides each day
 - Most veterans who die by suicide are men, age 50+ (similar to overall U.S. deaths by suicide)
- There are currently ~22,658,000 veterans in U.S.
 - ~30 percent are enrolled in VHA
 - Every VA Medical Center and large Community-based Outpatient Center (CBOC) has at least one suicide prevention coordinator.
 - Suicide rate for veterans age 18-29 who use VA healthcare services are lower than those who do not.



Partnership: VA

Preventing Suicide Among Veterans

- Interagency Agreement
- 800-273-TALK “press 1”
- Veterans Crisis Line answered 6,125 calls monthly
 - 85% identified themselves as veterans, service members, or their friends and family members (FY12)
 - Majority of callers are men, ages 50 – 59.
- 6,462 emergency rescues (FY12)
- Chat service 24/7 (4,122 chats/month)
- Texting
- VA adopted SAMHSA’s Treatment Improvement Protocol *Addressing Suicidal Thoughts and Behaviors in Substance Abuse Treatment* and created a complementary training video.



Partnership: National Guard Bureau

- MOU for FTE National Guard Counterdrug Liaison on-site at SAMHSA. ↑ SAMHSA's understanding of NG behavioral health needs and identify community resources for NG members and their families.

Partnership: U.S. Marine Corps

- MOU provides on-site SAMHSA liaison at Camp Pendleton to support the development of suicide prevention initiatives and provide direct suicide prevention training and services to Marines, Sailors, and their families.

Partnership: Health Resources and Services Administration

- Interagency Agreement to conduct military culture training in Area Health Education Centers across the country. (4,500 providers trained to-date in 112 AHECs)

Behavioral Health Service System: Program Examples

Access to Recovery (ATR)

Voucher program for substance abuse treatment and recovery support services.

24 of the 30 grantees cite Service Members, Veterans, and their Families as a priority population in their grant applications.

Behavioral Health Service System: Programs

Jail Diversion & Trauma Recovery— Priority to Veterans

Supports implementation of trauma-integrated jail diversion programs for justice-involved veterans and other individuals with PTSD and trauma-related disorders.

Behavioral Health Service System: Programs and Support

Service Members, Veterans and Their Families Technical Assistance Center

Helps states and territories develop effective, responsive behavioral health systems for Service Members, Veterans, and their Families (SMVF), through public/private collaboration among federal, state, territorial, tribal, and local agencies.

Service Members, Veterans & their Families (SMVF) Policy Academies

- Partnerships
 - DoD, National Guard Bureau, VA, The National Council, NASMHPD, NASADAD
- Goal
 - For States and territories to strengthen behavioral health systems for service members, veterans, and their families.
- Mechanism
 - State/territory establishes a long-term, 10-member interagency team, endorsed by the Governor.

SMVF Policy Academy Process

**Pre-Meeting Work,
Technical Assistance Site Visit
and S.W.O.T. Analysis**

**Formal Academy Meeting
(On-site Technical Assistance)**

**Post-Meeting On-site Technical Assistance
and Follow-up**

Technical Assistance for Ongoing Implementation

State/Territory Plans

- Strategic plans address
 - Increasing access to appropriate care
 - Closing gaps in the system
 - Building the system's capacity
 - Increasing interagency communication/
collaboration
 - Incorporating promising-, best- and evidence-
based practices
 - Sustaining efforts

Policy Academy Themes

- Infrastructure and leadership
- Needs assessment, data, data sharing
- Service system design (“no wrong door”)
- Best practice integration
- Workforce development
- Financing, sustainability, health care reform

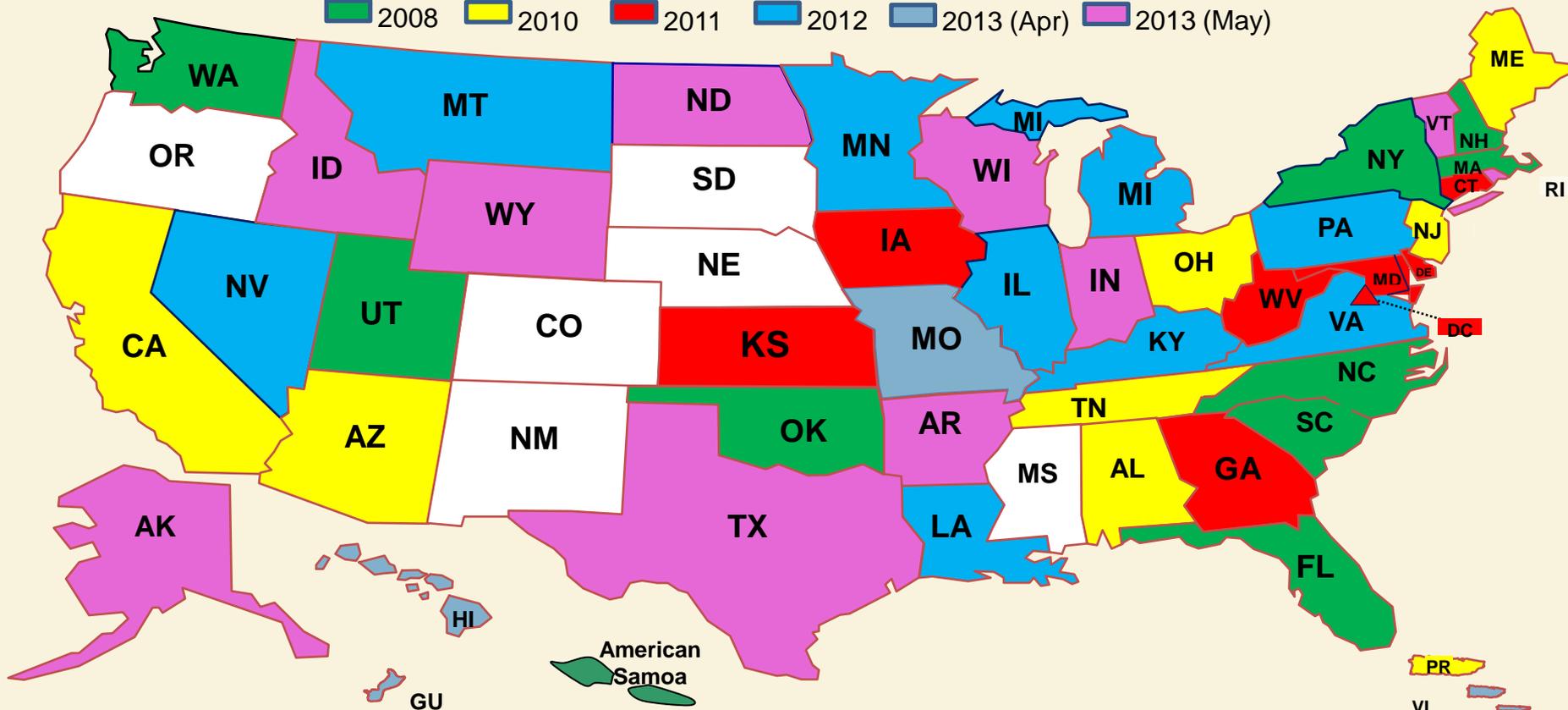
SMVF Policy Academies

- Conducted in 2008, 2010, 2011, 2012, 2013.
- 44 states, Washington, D.C., and 4 territories have “graduated” from a Policy Academy.
- SAMHSA provides follow-up TA to facilitate implementation of strategic plans.
- By September 30, 2013, all interested states and territories will have an opportunity to participate in an SMVF Policy Academy.

States/Territories that Completed SMVF Policy Academies

Service Member, Veterans, and Their Families Policy Academy Graduates

2008 2010 2011 2012 2013 (Apr) 2013 (May)



Resources

- SAMHSA's Service Members, Veterans, and their Families TA Center
 - Provides TA to state level entities for improving the BH needs of Military/Veterans, and families
 - www.samhsa.gov/militaryfamilies
- Community Provider Treatment Locator Website for National Guard and others
 - www.communityproviders.samhsa.gov
- Veterans Crisis Line (800-273-8255; Press 1)
 - Partnership with SAMHSA and National Suicide Prevention Lifeline
 - <http://www.veteranscrisisline.net/>
- Access to Recovery (30 States/Tribes) most have identified a priority to serve Military/Veteran and families
 - Voucher program for SA Treatment and recovery support services
- Jail Diversion for Military/Veteran population
 - Jail Diversion programs from arrest to re-entry in 13 States (CO, CT, GA, FL, IL, MA, NM, NC, OH, PA, RI, TX and VT)
 - http://gains.prainc.com/grant_programs/jdtr.asp
- National Child Traumatic Stress Network
 - Resource center focused on Child Trauma and Military/Veterans, and families
 - <http://www.nctsn.org/resources/topics/military-children-and-families>



Contact information:
A. Kathryn Power, M.Ed
Lead

Military Families Strategic Initiative
(617) 565-1482
Kathryn.Power@samhsa.hhs.gov

