



Alabama Department  
of Mental Health  
connecting mind and wellness

## Certified Community Behavioral Health Clinics

# Veterans and Members of the Armed Forces

PRESENTED BY:  
**Muriel Kramer, LCSW, FNAP, Veteran USAF**

## QUESTIONS AND ANSWERS

- Please use the Zoom Q&A feature to submit your questions throughout the session.
- We will answer as many as possible during the webinar and post a recording of the session on the ADMH website.
- Any unanswered questions will be documented, and responses will also be shared by ADMH following this orientation.
- Chat feature is open

## POLL

Take a moment and rank your understanding of the CCBHC requirements for meeting the needs of veterans, their family members, and caregivers on a scale of 1-5



## TODAY'S AGENDA

- Understanding the Veteran population
- CCBHC requirements
- Case discussion
- Evidence-based practices
- Leveraging the larger system of care



# **UNDERSTANDING THE POPULATION OF FOCUS – VETERANS AND MILITARY MEMBERS, THEIR FAMILIES, AND CAREGIVERS**

## What Do Veterans Want Health Care Providers to Ask or Know?

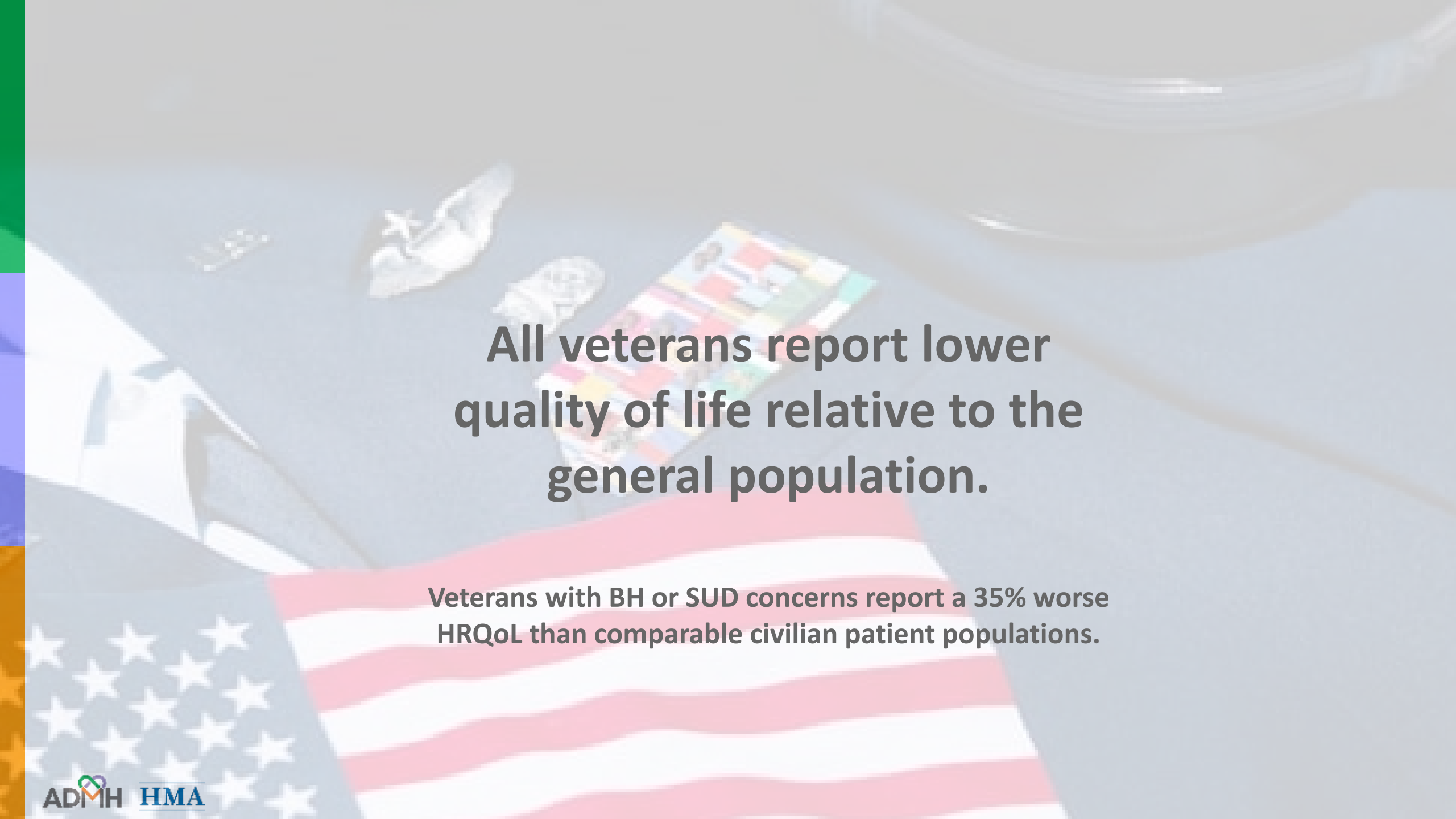
*Cultural awareness does not mean we need to be experts, but we do need to be respectfully curious, ready to learn.*

- Ask your clients if they are Veterans AND ask which branch they served in, the services have different subcultures. Ask them what it means to them to have been a marine, a soldier, a sailor, etc.?
- There are “Leaders” at every level.
- Veterans take pride in their conduct and appearance.
- Please DO NOT ask if they have killed someone unless clinically necessary.
- Veterans as a group find it very hard to ask for help.
- Veterans differ with how they identify with their military service after separating from service.



## UNDERSTANDING THE CHANGING VETERAN POPULATION

- The US Veteran population will evolve over the next 20 years, with a **steadily decreasing population**, changing demographics, and increasing care demands that will include **more complex needs and higher costs of care**.
- **Younger** and with more complex needs
- **More frequent and longer deployments**, with greater combat experience combined with **higher survival rates from more serious injuries**



**All veterans report lower  
quality of life relative to the  
general population.**

**Veterans with BH or SUD concerns report a 35% worse  
HRQoL than comparable civilian patient populations.**



# UNDERSTANDING THE CHANGING VETERAN POPULATION

**Veterans face significantly higher risks for suicide, PTSD, and chronic health conditions, with unique needs for specialized, trauma-informed care.**



## Mental Health & Suicide Risk

- Veterans with BH or SU disorders have up to **90% higher suicide risk**, nearly 6 times that of civilians.
- **Suicide rates** for post-9/11 veterans have **increased 73%** in the past 15 years.
- **Female veterans attempt suicide 3x more often** than male veterans.
- **PTSD prevalence is 5–23% higher** in veterans.



## Trauma & Specialized Support Needs

Military Sexual Trauma (MST) survivors require specialized treatment and support.



## Physical Health Risks

- PTSD increases risk for chronic diseases like heart disease, arthritis, asthma, liver, and arterial disease.
- Traumatic Brain Injury (TBI) raises the risk for seizures, neurocognitive disorders, dementia, and other chronic conditions.

# ALABAMA VETERANS

- **22.13% decrease** in the veteran population since 2012
- As of 2022, **303,619 veterans lived in AL** representing 7.7% of the overall population.
  - **7.3% earned income below the poverty line** comparatively better than nonveterans at 15.3%
  - **2.9% unemployed** compared to 4.5% for nonveterans
  - **31.3% of those over 25 years old hold bachelor's degrees** vs 28.5% for nonveterans
  - **33.5% have a disability** vs 19.3% for nonveterans

**Do you know the number of veterans in your catchment area?**





## POLL

How many veterans are you serving?

Do you track clients who have veterans and/or military-involved status??

Do you know / track who are veterans as part of your staff?



## FAMILY MEMBERS & CAREGIVERS

**~275,000 to 1 million family members care for wounded, ill, or injured service members.**

- More complex injuries may negatively impact family functioning.

# FAMILY MEMBERS & CAREGIVERS

Military service involves frequent relocations, typically every 2 to 3 years

- » Career challenges for military spouses
- » Educational disruptions
- » Disrupted social connections

## **After leaving military service:**

- » individuals may find it difficult to translate military experience to the civilian workforce
- » families may face challenges accessing promised financial, educational, or medical benefits

**TRANSFORMING CARE**

# TRANSFORMATION TO INCREASE ACCESS AND POSITIVE OUTCOMES

## 9 CCBHC required services

- Screening, Assessment and Diagnosis
- Comprehensive outpatient MH & SUD services across the entire life cycle
- Patient-centered care planning
- Targeted case management
- Peer and family support
- Psychiatric rehabilitation
- Primary care screening and monitoring
- Services for the armed forces and veterans
- Crisis Services



## Integrated care

through the CCBHC model can address the unique needs of veterans and others by providing coordinated services that combine physical, mental, and social health care.



## Prioritizing holistic care

and leveraging partnerships across the state, CCBHCs can reduce disparities, improve health outcomes, and connect previously underserved populations to necessary resources.

# INTEGRATING PRIMARY CARE SCREENING

## Screening and Monitoring Protocols:

- Universal screening for general health risk factors
- Standardized tools for systematic screening and follow-up

## Care Coordination and Referral Systems:

- Formal partnerships with primary care providers
- Ensure follow-up mechanisms are in place to monitor engagement with referred care. ★

## Workforce Development:

- Train staff on managing chronic health conditions and administering evidence-based interventions
- Build multidisciplinary teams

## Data Sharing and Technology:

- EHRs for integrated care planning, population health management, and tracking patient progress
- Interoperability between behavioral health and primary care systems.

## Patient Engagement and Education:

- Empower patients through education on self-management strategies
- Use culturally tailored strategies to address SDOH and enhance patient activation



## HOW DO WE RESPOND BEST TO THE UNIQUE NEEDS OF VETERANS?

- Screen on intake for military experience
- Utilize clinicians with military experience when possible
- Train staff to understand unique health and BH needs
- Ensure clinicians provide EB treatment with fidelity
- Practice trauma informed care
- Understand stigma and potential impacts.



## CASE VIGNETTE - DISCUSSION

38-year-old female – Anna

- Single mom of two middle school age children
- Newly unemployed
- Lives in rural Alabama
- Opioid use disorder
- PTSD
- Severe Anxiety Disorder
- Survivor of military sexual trauma (MST)
- Combat experience
- Honorable Discharge / Fully qualified for VA benefits
- Has not yet successfully connected to BH services through the VA

Anna has left her children with a neighbor and is seeking services because she is not able to access her medications now that she is unemployed. She reports being scared that she might hurt herself or her kids. “I am desperate for help.”





## EVIDENCE-BASED PRACTICES (EBPS)

- Cognitive Behavioral Therapy (CBT)/CBT-D for depression/CBT-I for insomnia
- CBT-SUD
- Cognitive Behavioral Conjoint Therapy (CBCT) with family
- Contingency Management (CM)
- Eye Movement Desensitization Reprocessing for PTSD (EMDR-PTSD)
- Safety Planning (SP)
- Suicide Prevention



## CHAT

What areas are your organization's biggest challenges or worries about meeting the needs of veterans, their families, and caregivers ?

What areas are your organization's biggest strengths in this area?

**LEVERAGING THE LARGER SYSTEM**

# LEVERAGE THE ALABAMA DEPARTMENT OF VETERANS AFFAIRS (ADVA)

- **ADVA Mission** – To promote awareness, assist eligible veterans, their families, and survivors to receive from the U.S. and State Governments any and all benefits to which they may be entitled under existing or future laws to be enacted.
- **ADVA Vision** – To ensure that all veterans and their families understand and receive all the benefits, support, care, and recognition that they have earned and are entitled to, by expertly administering all current programs, anticipating future needs and taking appropriate action to meet these needs.
- **ADVA Core Values** – Accountability | Professionalism | Integrity | Compassion | Commitment | Teamwork

# ADVA GOALS – JULY 2024

Goal 1	Goal 2	Goal 3	Goal 4	Goal 5
Begin full operations at Command Sgt. Maj. Bennie G. Adkins State Veterans Home	Step up personal advocacy role as Commissioner*	Initiate second committal shelter at Spanish Fort and begin process of establishing a State Veterans Cemetery in north Alabama	Improve delivery of services via ADVA Veterans Service Offices.	Continue progress on long-term veterans well-being program

\*Alabama Code Section 31-5-7: “(b) It shall be the duty of the state commissioner to: ... (4) Cooperate and negotiate with the federal government, all national, state and local governmental, or private agencies for securing additional services or benefits for veterans, their families, and dependents who are residents of the State of Alabama.”

Source: [Commissioners-Goals-2024.pdf](#)

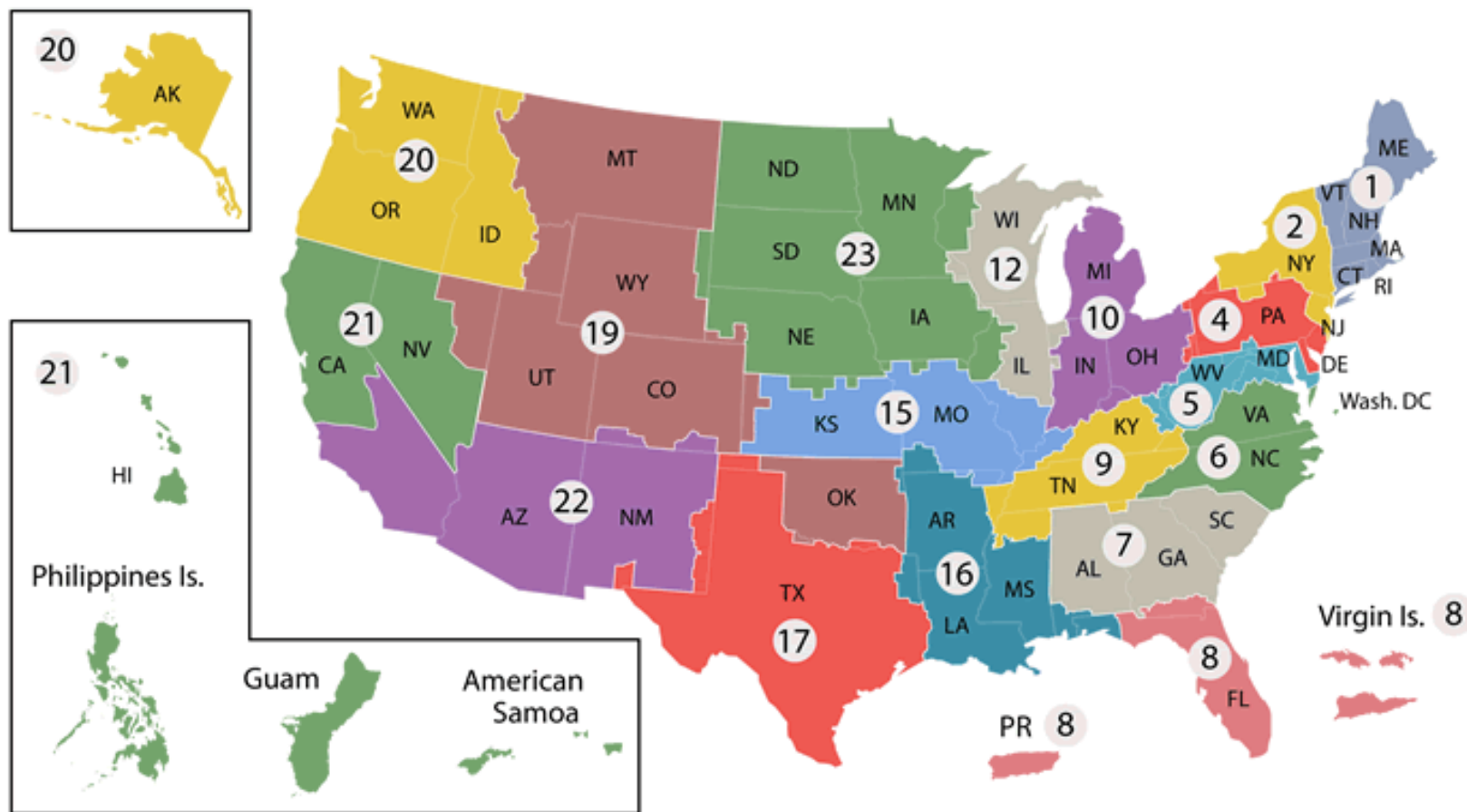
# VA FOOTPRINT IN ALABAMA

- VA Facilities in Alabama [Facility Listing – Locations](#)
  - » **Medical Centers:** [Birmingham](#), [Tuskegee](#), [Montgomery](#), [Tuscaloosa](#)
  - » **Outpatient Clinics:** [Dothan](#), [Selma](#)
  - » **Community Based Outpatient Clinics:** [Bessemer](#), [Birmingham](#), [Childersgurg](#), [Columbus](#), [Dothan](#), [Florence](#), [Fort Moore](#), [Fort Novosel](#), [Gadsen](#), [Guntersville](#), [Huntsville](#), [Irondale](#), [Jasper](#), [Monroe County](#), [Montgomery](#), [Oxford](#), and [Robert S. Poydasheff \(Columbus\)](#)
  - » **Vet Centers** (services from talk therapy to recreational activities): [Hoover](#), [Huntsville](#), [Montgomery](#), and [Mobile](#)
  - » [Regional Benefits Office \(Montgomery\)](#)
  - » Veterans Homes: [Alexander City](#), [Huntsville](#), [Bay Minette](#), [Pell City](#), and [Enterprise](#)
- Veterans Service Offices Statewide [FIND YOUR VETERANS SERVICE OFFICE – Alabama Department of Veterans Affairs](#)
- Alabama Department of Veterans Affairs Org Chart [ADVA-Org-Chart-May-2023.pdf](#)



## Veterans Integrated Services Networks (VISNs)

**Veterans Integrated Services Network:** The U.S. is divided into 18 Veterans Integrated Service Networks, or VISNs — regional systems of care working together to better meet local health care needs and provides greater access to care.



VISN map - click on VISN number for website

## CHAT

Are you working with other organizations that work with Veterans?



# MENTAL ILLNESS RESEARCH, EDUCATION AND CLINICAL CENTER OF EXCELLENCE

[MIRECC / CoE](#)

## Mission

To generate new knowledge about the causes and treatments of mental disorders, apply new findings to model clinical programs, and widely disseminate new findings through education to improve the quality of veterans' lives and their daily functioning in their recovering from mental illness.

### Blog posts examples

[CogSMART program improves Veterans' cognitive functions - VA News](#)  
[Mindfulness, values-based goal setting can improve lives of Veterans with PTSD and alcohol use disorder - VA News](#)  
[VA releases new findings on the connection between TBI and dementia - VA News](#)

### Educational Offerings

[MIRECC/CoE Education Group - MIRECC / CoE](#)

### Resources

[Resources - MIRECC / CoE](#)

**VISN 7 does not yet have its own MIRECC/ CoE, but the VA Site has many resources to offer**



**QUESTIONS**

## POLL

Take a moment and rank your understanding of the CCBHC requirements for meeting the needs of veterans, their family members, and caregivers on a scale of 1-5



WATCH  
THIS  
SPACE

## ADDITIONAL TUESDAY TA SESSIONS

- Workflows for Centralized Intake, Triage & Staffing
- Quality and Reporting

# CONTACT US

We're here to help! If you're interested in learning more about CCBHCs or have questions, contact us at [ccbhc.dmh@mh.alabama.gov](mailto:ccbhc.dmh@mh.alabama.gov)

Check out our CCBHC Implementation Bulletins here:

<https://mh.alabama.gov/ccbhc-implementation-bulletins/>

# RESOURCES & REFERENCES



# RESOURCES

- [About Us - Priority Veteran](#) – homelessness resources for veterans in AL
- [Bing Videos - 15 Things Vets Want Health Care Providers to Know](#)
- [Commissioners-Goals-2024.pdf](#)
- [Evidence-Based Treatment - Mental Health](#)
- [Federal Benefits for Veterans, Dependents Survivors and Caregivers](#)
- [MIRECC / CoE Home](#)
- [MIRECC/CoE Education Group - MIRECC / CoE](#)
- [Psycharmor](#)
- [PTSD: National Center for PTSD Home](#)
- [Support for Military Personnel & Families | Military OneSource](#)
- [Veterans Integrated Services Networks \(VISNs\) - Veterans Health Administration](#)
- [Vets4VetsFoundation.Org - Vets4VetsFoundation.org](#)
- [VISN 7: VA Southeast Network – Locations](#)

# REFERENCES

- [Veterans in Alabama: Statistics, rankings, and data trends on population, demographics, and more | USAFacts](#)
- [Military Community Demographics Reports | Military OneSource](#)
- [Veterans - Census Bureau Tables](#)
- [For Veterans Day, facts about the US veteran population | Pew Research Center](#)
- [The changing face of America's veteran population | Pew Research Center](#)
- [Those Who Served: America's Veterans From World War II to the War on Terror \(census.gov\)](#)
- [Improving the Quality of Mental Health Care for Veterans: Lessons from RAND Research](#)
- Katz LS, Huffman C, Cojucar G. In Her Own Words: Semi-structured Interviews of Women Veterans Who Experienced Military Sexual Assault. *Journal of Contemporary Psychotherapy*, 2017;47(3):181–189. doi:10.1007/s10879-016-9349-0
- Oppezzo, MA, Michalek AK, Delucchi K, Baiocchi MT, Barnett PG, Prochaska JJ. Health-Related Quality of Life Among Veterans in Addictions Treatment: Identifying Behavioral Targets for Future Intervention. *Quality of Life Research : An International Journal of Quality-of-Life Aspects of Treatment, Care and Rehabilitation*. 2016;25(8):1949-1957. doi:10.1007/s11136-016-1236-3