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VHA’s current outreach efforts represent “lessons learned” from VA’s experiences responding to the outreach, education, health care and other benefits needs of veterans returning from the 1991 Gulf War, and from the Vietnam War before that.

VHA has developed a wide range of outreach programs in response to the health care needs of combat veterans who served in the current conflicts in Iraq and Afghanistan and their families.
VHA’s Office of Public Health and Environmental Hazards has initiated many programs or collaborated with other offices within VHA to:

- Promote new eligibility rules that provide reservists and active duty personnel who served in a designated combat zone with 5 years of VA health care. [www.va.gov/EnvironAgents](http://www.va.gov/EnvironAgents)

- VA has developed a new Clinical Reminder (part of VA’s computerized medical records) to assist VA clinicians in identifying and providing timely and appropriate care to new combat veterans. Also provides for TBI Screening reminder.
– Opened up VA’s Gulf War registry to all new OIF veterans.
– VA offers a special depleted uranium screening program for concerned veterans:

• OIF veterans concerned about possible exposure to depleted uranium can be evaluated using a special DU exposure protocol that VA began after the 1991 Gulf War.

• This program offers free DU urine screening tests by referral from VA primary care physicians to veterans who have concerns about their possible exposure to this agent.

• OEF veterans are eligible to participate in the VA DU evaluation protocol/screening program for non-GW veterans.
Education for VHA Providers

• March 2003: Broadcast program to all VA health care providers, “Caring for the War Wounded” on the immediate health concerns for combat veterans

• April 2007: Held a three-day National Conference on “Providing Health Care for a New Generation of Combat Veterans Returning From OIF and OEF” to improve VA’s response to new combat veterans.
• Expanded VA provider education on combat health care, to include:
  – “Preparing for the Return of Women Veterans from Combat Theater,” on special care needs for women OIF/OEF combat veterans.
  – “Endemic Infectious Diseases of Southwest Asia” on infectious disease risks not typically seen in North America.
  – “Military Sexual Trauma” on recognition and treatment of health problems related to military sexual trauma.
  – “Post-Traumatic Stress Disorder: Implications for Primary Care” on PTSD diagnosis, treatment, referrals, support and education.
• Opened a new, 3rd VA “War-Related Illness & Injury Study Center” focusing on combat veterans with mild and moderate traumatic brain injury at the Palo Alto VAMC, which takes advantage of the co-located Polytrauma Unit program that integrates the medical, psychological, rehabilitation, and prosthetic needs of injured service members with traumatic brain injury, spinal cord injury, blindness and PTSD.

• Collaborated with DoD to publish and distribute one million copies of a new short brochure called “A Summary of VA Benefits for National Guard and Reservists Personnel.” The new brochure summarizes health care and other benefits available to combat veterans upon their return to civilian life (also available online at www.va.gov/EnvironAgents).

• “VA Health Care and Benefits Information for Veterans”: a new wallet care that summarizes all VA health and other benefits for veterans, along with contact information, in a single, wallet-sized card for easy reference (also at www.va.gov/EnvironAgents).
Readjustment Counseling Service (RCS), also known as the Vet Center Program, was established in 1979 to provide readjustment counseling to combat veterans in a community-based setting, easy for veterans to access.

The House Veterans Affairs Committee outlined ‘within the context of readjustment counseling, each Vet Center is tasked with three major functions: outreach, direct service delivery, and referral.

Over the course of the last 29 years the eligibility for Vet Center services has expanded to include combat veterans of all eras, veterans sexually traumatized while on active duty, and families of service members killed on active duty.
The 1997 President’s Advisory Committee on Gulf War Veterans’ Illnesses Report states:

- Department of Defense and VA should follow the model of field-based outreach demonstrated in the Vet Centers when developing health education and risk communication campaigns for active duty service members, Reserve and Guard personnel, and other veterans. The prompt response by the Vet Centers to the acute PTSD and other post-war readjustment difficulties, such as family and employment problems, illustrates VA’s commitment to early intervention and outreach.
In a 2004 report by the U.S. Medicine Institute of Health Studies with participants from the Department of Defense, SAMSHA, and VA, it was referenced that “VHA’s Vet Centers have proven a “best practice” model in fostering peer-to-peer relationships for those with combat stress disorders. The best way to overcome concerns about stigmatization is through person-to-person contact with someone who has recovered.”

The Vet Center program currently has on staff 113 Operation Desert Storm and 236 veterans who served in Iraq or Afghanistan.
A 2004 report by the U.S. Medicine Institute of Health Studies stated: “VHA’s Vet Centers have proven a “best practice” model in fostering peer-to-peer relationships for those with combat stress disorders. The best way to overcome concerns about stigmatization is through person-to-person contact with someone who has recovered.”

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• According to the latest Gulf War Veterans Information System (GWVIS) report the Vet Center program has provided readjustment counseling services to 496,877 Operation Desert Storm Veterans since 1991.

• Through the end of the first quarter FY 2009 the Vet Center program has provided readjustment counseling services to 346,796 OEF-OIF Veterans
• VA’s Office of Mental Health services provides a number of outreach activities designed to impact veterans of all Service Eras, to include veterans of the Gulf War
Collaboration with Vet Centers

• VA Medical Center programs, including specialized PTSD programs, collaborate with Vet Centers (RCS) which are the leaders in outreach to veterans of all War Eras.

• Bi-directional patient referral and supportive clinical services, provided on site or by telemental health, are examples of collaborative VAMC/ RCS activities.
• 154,000 Veterans are estimated to be homeless on any given night
• The VA provides Outreach to find homeless Veterans and tell them about available services
• 313 Outreach staff go to local soup kitchens, shelters, under bridges – any place where a homeless Veteran may be
• Our Outreach staff provided services to over 40,000 homeless Veterans last year
• Health Care for Re-entry Veterans
  – Pre-release outreach, assessment, and case management services are provided for Veterans released from State and Federal prisons
  – As of February 2009, 8,603 Veterans have been provided with pre-release reentry services
  – VA Reentry Specialists have contacted Veterans in over 450 State and Federal prisons
Outreach to Justice-Involved Veterans

• Veterans Justice Outreach
  – Outreach also is provided to Veterans at earlier stages of criminal justice involvement
    • Police encounter (training for law enforcement)
    • Adjudication (Veterans’ Courts, other problem-solving courts)
    • Jail “inreach” and linkage to post-release services
It takes the courage and strength of a warrior to ask for help...

If you or someone you know is in an emotional crisis call 1-800-273-TALK Press 1 for Veterans

www.suicidepreventionlifeline.org
• Suicide Prevention Hotline:
  
  1 800 273-TALK

  – Established July 26, 2007
  – As of March 31, 2009: over 3,000 rescues to date
  – Half of callers are not veterans (families, Active Duty)
Suicide Prevention Hotline

- Currently averaging about 300 calls/day
- Volume steadily increasing
- Anticipate full 12 lines operational by September 1, 2009
- New enhanced collaboration with DoD’s including DoD’s Center of Excellence for Psychological Health & TBI
Suicide Prevention: Public Service Announcements

• Pilot project Winter 2008: Posters on DC area transportation system promoting VA Suicide Prevention hotline
  – Calls increased to the hotline from DC area codes
• Media campaign is beginning its Second Phase
  – Project being piloted in eight new cities across the nation
• PSAs for TV by Gary Sinise and Deborah Norville continue to be shown (available at: http://www1.va.gov/health/index.asp)
Suicide Prevention Coordinators (SPCs) and Teams located throughout the system

- Provide a minimum of 2 community outreach activities per month

National FY09 activities:

- AMSUS presentation – November
- VA / DoD Suicide Prevention conference - January
- Marine Corp call center - March
- VA/ SAMHSA joint activities – Jan, May, June
- VA Volunteer Conference – May
- Missouri State Conference – July
- American Legion Commissioners training & roll-out – August
- Maryland State Conference - October
Demobilization Enrollment Initiative:

- DoD provides VA with the dates and locations of Reserve Component units demobilizing.
- Since May 2008, VHA OEF/OIF Outreach Office coordinates with local VAMCs staff at all demob sites:
  - 15 Army sites; 4 Navy sites; 3 USMC sites; 36 AFR sites; and 3 CGR sites
  - >35,044 demobilized with >32,832 enrolled into VA health care
- VA staff provide a standardized 46 minute overview on:
  - Monitor utilization rates for healthcare and dental
VA is vigorously enhancing its efforts to assist Veterans transitioning from combat to civilian life.

Last year, VA began an OEF/OIF Veteran Call Center initiative to contact every OEF/OIF Veteran who had not enrolled in VA for care.

Special emphasis placed on reaching combat Veterans who had possible illnesses or injuries who may have care management needs.

So far, we have reached out to 660,000 Veterans and have spoken with almost 158,000 of them; we continue to contact more every day.
• PDHRA: Post Deployment Health Reassessment:
  – DoD mandated Program initiated in March 2005 for all deployed service members
  – PDHRA is a global health assessment conducted 90-180 days post-deployment with outreach, education, early identification & referral components
  – PDHRA’s intent is to identify deployment-related physical health, mental health and readjustment concerns and provide follow-up evaluation and care
  – VA has participated in DoD’s Post-Deployment Health Reassessments (PDHRAs) since November 2005. A total of 96,000 referrals resulted from the PDHRA outcomes; 75,000 of those referrals were made to VAMCs and Vet Centers.