“Frankenstein”

A Cross Sector Integrated Training Model for Military/Veteran Suicide Prevention

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Veterans Health Administration
Employee Education System

“FRANKENSTEIN” TRAINING

STITCHING IT ALL TOGETHER

Frankenstein Partners

TriWest Healthcare Alliance®

WICHE Mental Health Program

Arizona Coalition for Military Families
Building support for all who serve

Arizona National Guard

Be Resilient Program

WHY "FRANKENSTEIN"?

THE CHALLENGES

CHALLENGE #1

CHANGE IS CONSTANT

THE STANDARD (DISORGANIZED) MODEL

Personal Financial Counselor

VA Crisis Line

Mobile Training Team

Vet Centers

Transition Assistance Advisor

Community Mental Health

Survivor Outreach Services

Military OneSource

Nonprofits

Vet Courts

Military Family Life Consultants

Base Medical Command

Yellow Ribbon Reintegration Program

Employment Programs

Faith-Based Orgs

First Responders

Wounded Warrior

Sexual Assault Response Coordinator

STATE-LEVEL CROSS-SECTOR COLLABORATION MODEL

THE STANDARD (DISORGANIZED) MODEL

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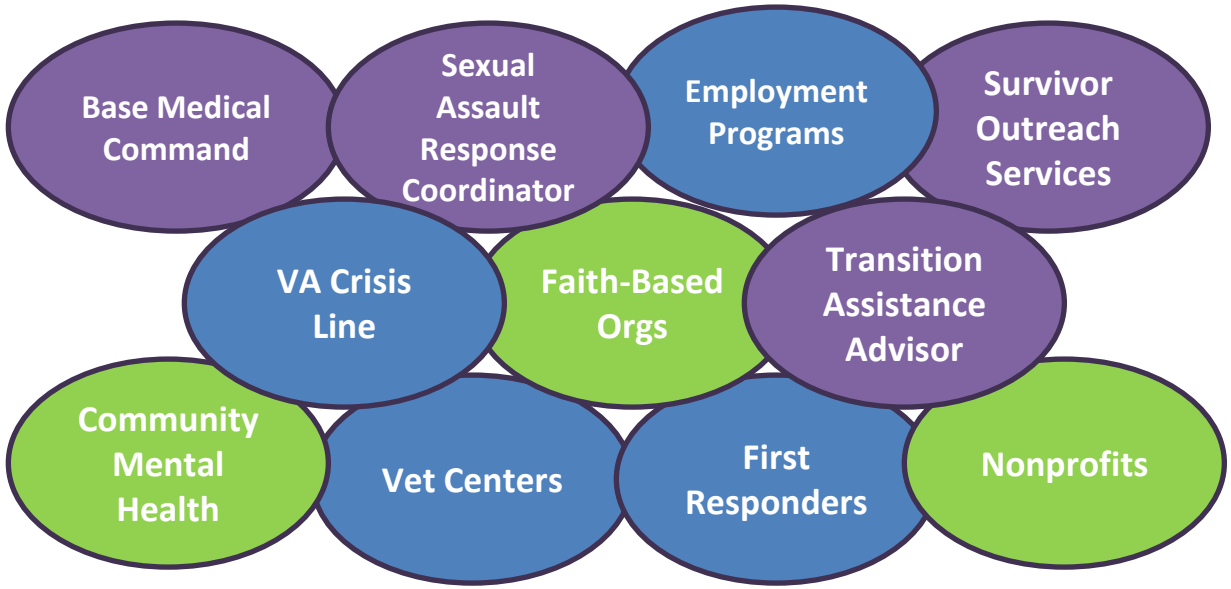
THE NEW MODEL - RESPONSIVE TO CHANGE & LEVERAGES RESOURCES

THE NEW MODEL
RESPONSIVE TO CHANGE

2015?
2020?
2025?



CHALLENGE #2

DISTINCT SYSTEMS & CULTURES

MILITARY

Organizations, People, Programs, Resources, Benefits

GOVERNMENT

Organizations, People, Programs, Resources, Benefits

COMMUNITY

Organizations, People, Programs, Resources, Benefits

MILITARY

Organizations
People
Programs
Resources
Benefits

GOVERNMENT

Organizations
People
Programs
Resources
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COMMUNITY

Organizations
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Programs
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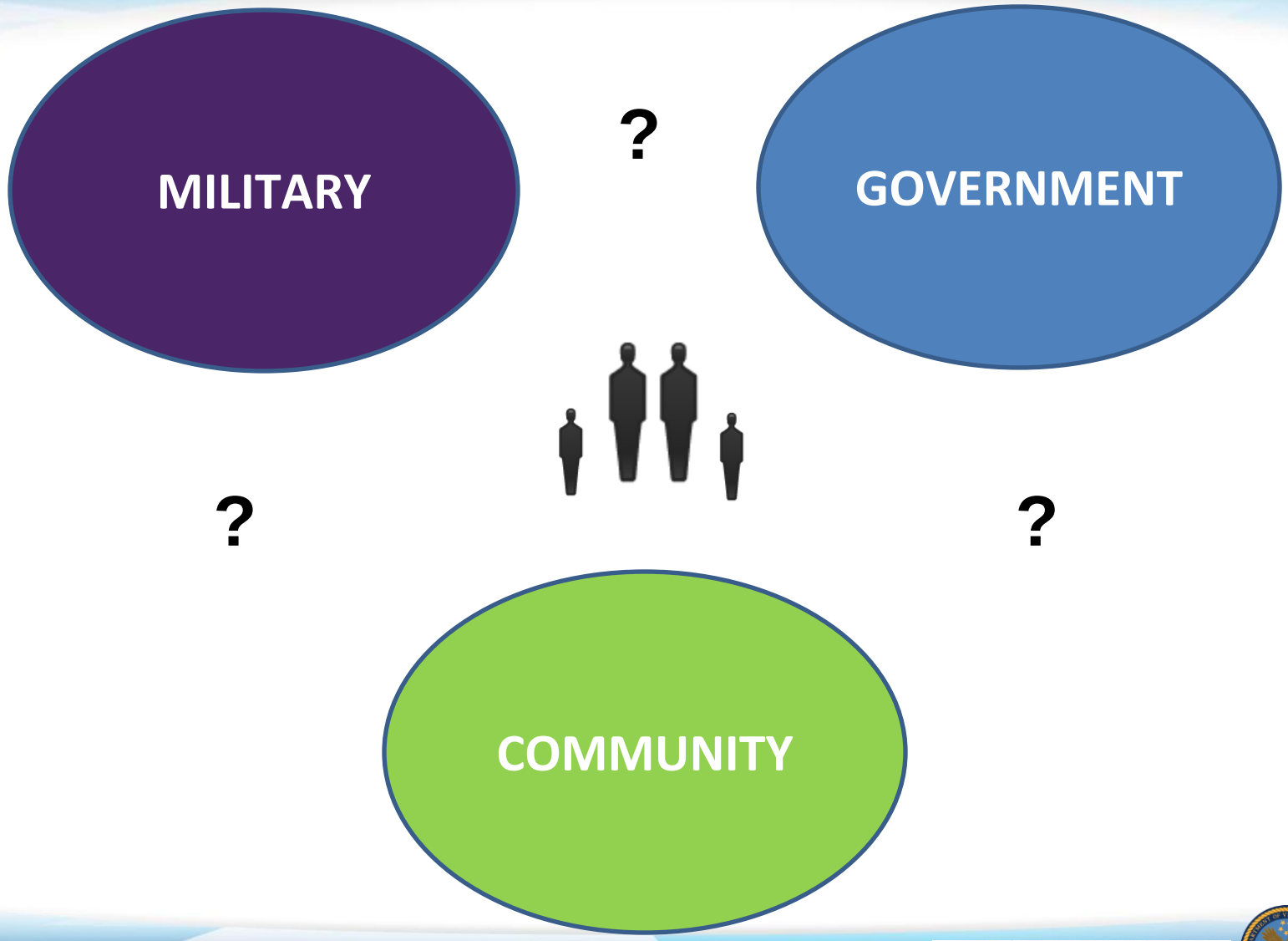
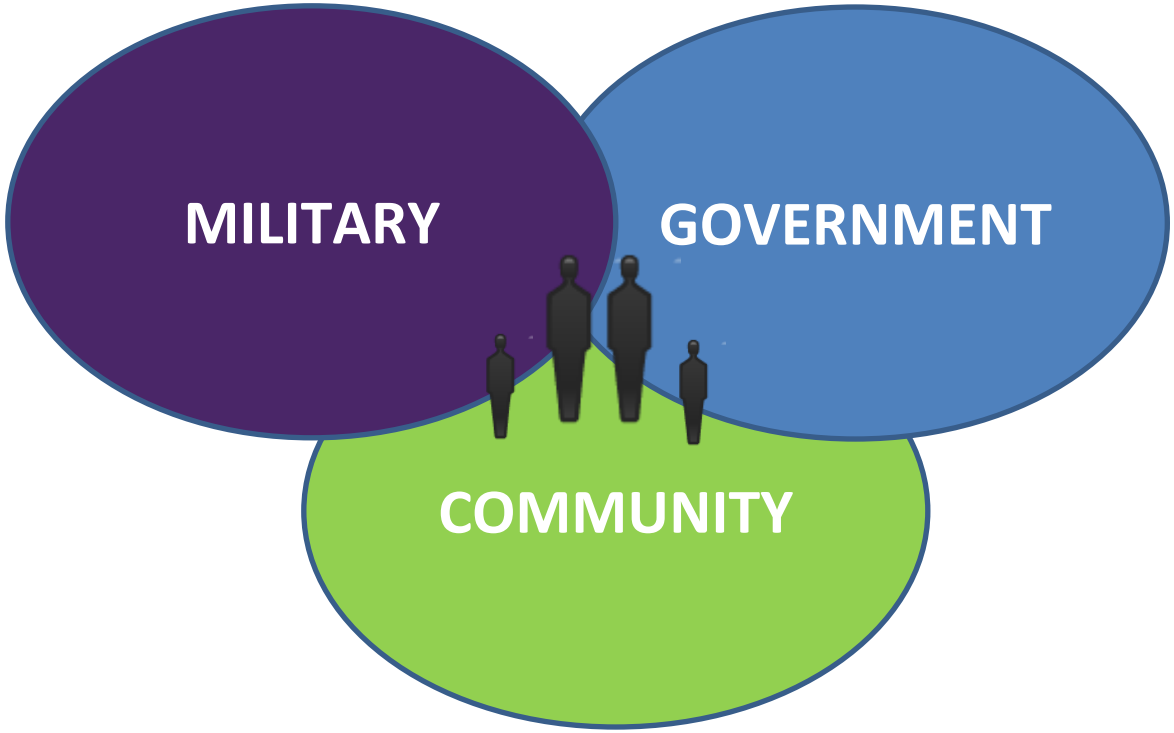

MILITARY
?
GOVERNMENT
?
?
COMMUNITY

WHY IS CROSS-SECTOR COLLABORATION A PRIORITY?

Philosophy

- Crosses over and connects
  - **Military**: Active Duty, Guard, Reserve
  - **Government**: federal, tribal, state, local
  - **Community**: All different sectors
- Creates a common language
- Alignment of purpose & intelligent use of assets (in-kind, existing funding, direct funding)
- Promotion of best practices & consistency



Engage and equip all public and private sector partners to collectively provide the best care and support possible to all service members, veterans & family members.

HOW DOES IT IMPROVE CARE WHEN SYSTEMS WORK TOGETHER?

THE “FRANKENSTEIN” MODEL

Integrated Training Model Format

- Audience
  - Combinations of military, government & community
  - Integrated when possible
  - Sector/organization specific when appropriate

- Goals for training participants
  - Increase awareness of unique experiences and needs of service members, veterans and family members.
  - Increase confidence and willingness to intervene if/when they see someone struggling.
  - Equip them with practical tools to facilitate building rapport and responding effectively.
  - Connect them to the dynamic military/veteran community and to resources.

Integrated Training Model Format

- Content options ("menu")
  - Military/Veteran Culture & Perspective
  - Resilience Skills Training
  - Combat & Operational Stress First Aid (COSFA)
  - Suicide Prevention
  - Navigating the Military/Veteran/Civilian Systems of Care
  - Clinical training (PTS, TBI, Substance Use)
  - Mental Health First Aid
  - Experiential learning (e.g. Military Immersion Training)
  - Custom modules (e.g. spirituality, crisis management, etc.)

Integrated Training Model Format

- Promotion of best practices

Uses existing programs from military/government/community:

Comprehensive Soldier/Airmen Fitness – RTA & modules
Combat & Operational Stress First Aid
ASIST & ACE
Suicide Prevention Pocket Guide (based on WICHE toolkit)
Military culture

Information is vetted through trusted subject matter experts

Integrated Training Model Format

- Supporting materials - App

Arizona National Guard
***Be Resilient Program* App**
iPhone
Android

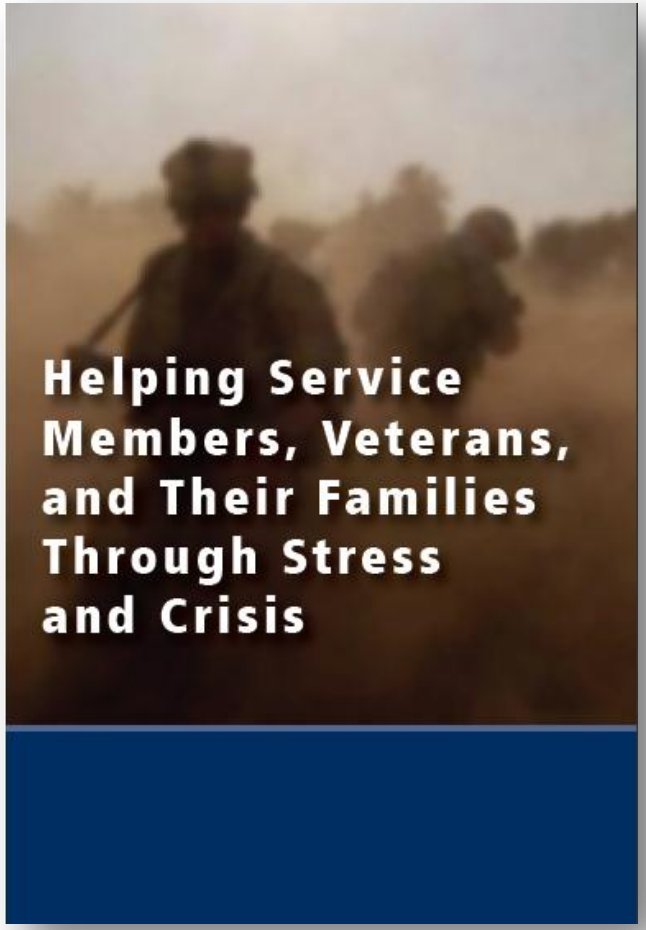
Includes stress continuum, resources and more.

Integrated Training Model Format

- Supporting materials – videos

Integrated Training Model Format

- Supporting materials – Pocket Guide



Integrated Training Model Format

- Supporting materials - *AZ Military/Veteran Resource Network*

Veterans Health Administration
Employee Education System

Integrated Training Model Format

- Flexible time frames
  - 1 – 2 hours
  - Half-day & full-day
  - Developing online options

- Flexible locations
  - Military installations
  - Government & community facilities
  - Onsite, in-service training (e.g. Firefighters)

Examples from Pilot Testing in Arizona

- Faith-Based Summit
- Higher Education
- Behavioral Health & Social Services
- Legal, Law Enforcement and First Responders
  - Trained over 1000 Paramedics
  - Will train law enforcement, court staff, all Phoenix firefighters, all crisis system staff

HOW DOES THIS MODEL HELP YOUR ORGANIZATION FULFILL ITS MISSION?

Examples of Outcomes
Pre/Post Testing

	PRE	POST
I am familiar with military culture.	60%	93%
I can recognize the signs that someone is experiencing a stress illness or injury.	76%	95%
I know what steps to take to assist someone who is struggling.	73%	90%
If I found out someone was suicidal, I would know what to do.	80%	93%
I know who to contact if there is a crisis (e.g., VA crisis line, local crisis line, closest emergency room).	78%	97%

Outcomes – Participant Evaluations

Would you recommend this training to your colleagues/other organizations?

Yes 100% No 0% Maybe 0%

Comments:

"I have always had a high respect for the Military. This training makes me realize that the civilian community needs to get more involved and aware of their needs."

"Learning about issues helps me gain perspective into the lives of these individuals. Having that perspective improves my services."

Outcomes – Participant Evaluations

What was the most helpful thing you learned?

"Experiencing what the Arizona National Guard is training & how they are supporting their own troops."

"The kind of effort being put into prevention/resilience."

"The professionals who presented [military trainers] were VERY professional, real and credible."

"What the military is doing for mental health."

OTHER EXAMPLES OF IMPACT OF TRAINING

Replication/Implementation

- Assets
  - Partners – Examples from Arizona:
    - Arizona Coalition for Military Families
    - Arizona Department of Veterans' Services
    - Arizona Department of Health Services & Regional Behavioral Health Authorities
    - Arizona National Guard Total Force Team
    - Governor's Council on Spinal and Head Injuries
    - Governor's Office for Children, Youth & Families
    - Northern Arizona University
    - Phoenix Fire Department
    - Southern Arizona Chapter – American Red Cross
    - TriWest Healthcare Alliance
    - U.S. Department of Veterans Affairs
    - Western Interstate Commission for Higher Education

Replication/Implementation

- Assets (continued)
  - People/Subject Matter Experts
    - Program development
    - Military/veteran culture and needs
    - Clinical issues
    - Systems & collaboration
  - Funding
    - In-kind (space, trainers, admin/staff support, planning partnership, printing, supplies, etc.)
    - Existing funding (alignment between funding guidelines and project activities)
    - Dedicated funding via grants (military, government and community sources)

Replication/Implementation

- Identify areas of need *(go with the path of least resistance that makes the most sense)*
- Target audience & relevant content
- Logistics

RECOMMENDATIONS FOR REPLICATION

Contact Info

www.ArizonaCoalition.org

www.AZGuard.gov/resilience/index.html

www.TriWest.com

www.WICHE.edu