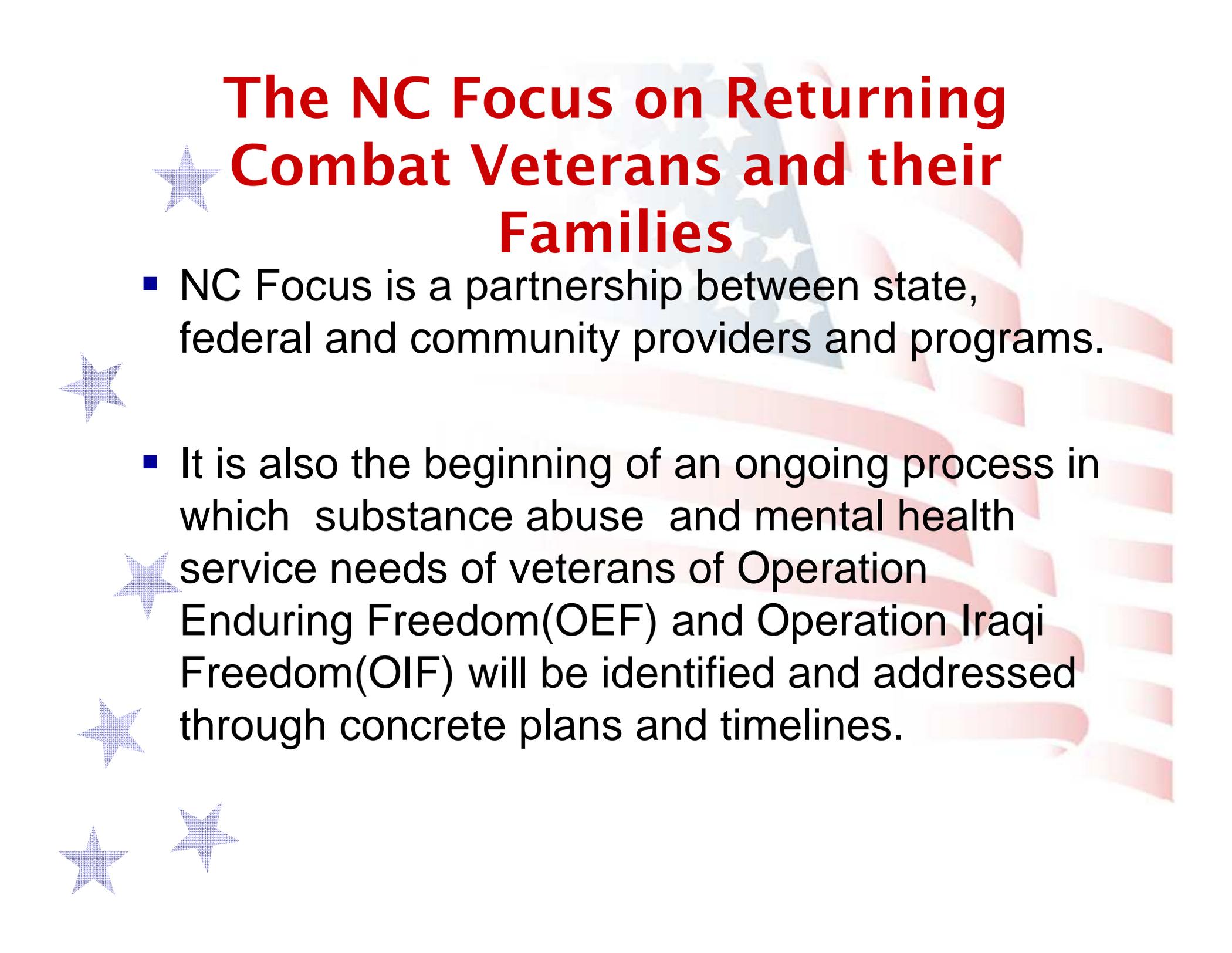


“Coming Home”





The NC Focus on Returning Combat Veterans and their Families

- NC Focus is a partnership between state, federal and community providers and programs.
- It is also the beginning of an ongoing process in which substance abuse and mental health service needs of veterans of Operation Enduring Freedom(OEF) and Operation Iraqi Freedom(OIF) will be identified and addressed through concrete plans and timelines.

The NC Focus and Vets & Families

- One product is an informational referral portal where citizens of North Carolina will have access to post-deployment and readjustment assistance for veterans and their families.
- The challenge is to maintain a creative, collaborative process in a rapidly changing public sector clinical environment in NC.

★ Profile of U.S. Military in North Carolina: 773,630 Veterans

Active Duty Members

- 107,000 Active-Duty
- ★ ■ 7 Military Bases
- By 2011 will add 45,000
- 1 billion economic impact
- Fourth largest military state
- Headquarters of U.S. Army Special Forces Command (“FORSCOM”)
- ★ ■ Headquarters of U. S. Army Reserve Command (“USARC”)

NG/Reserve Members

- 11,500 Soldiers, Marines & Airmen 85% have civilian jobs in communities across the state.
- Located at 95 army facilities in 75 counties.
- 3 Air Guard facilities.
- 6 NG military Commands.
- 11,312 NG deployed to OIF/OEF.
- 17K of 22k NCNG &/or Reserves deployed in GWOT.

The Changing Transitional Nature of Military Service

The nature of military service in North Carolina is changing. The U.S. military has in the past maintained large numbers of active duty members and their families overseas in foreign countries like Europe and Asia. Today's trend is to "home base" troops in the U.S. and deploy units overseas to meet the world-wide military operational demands.

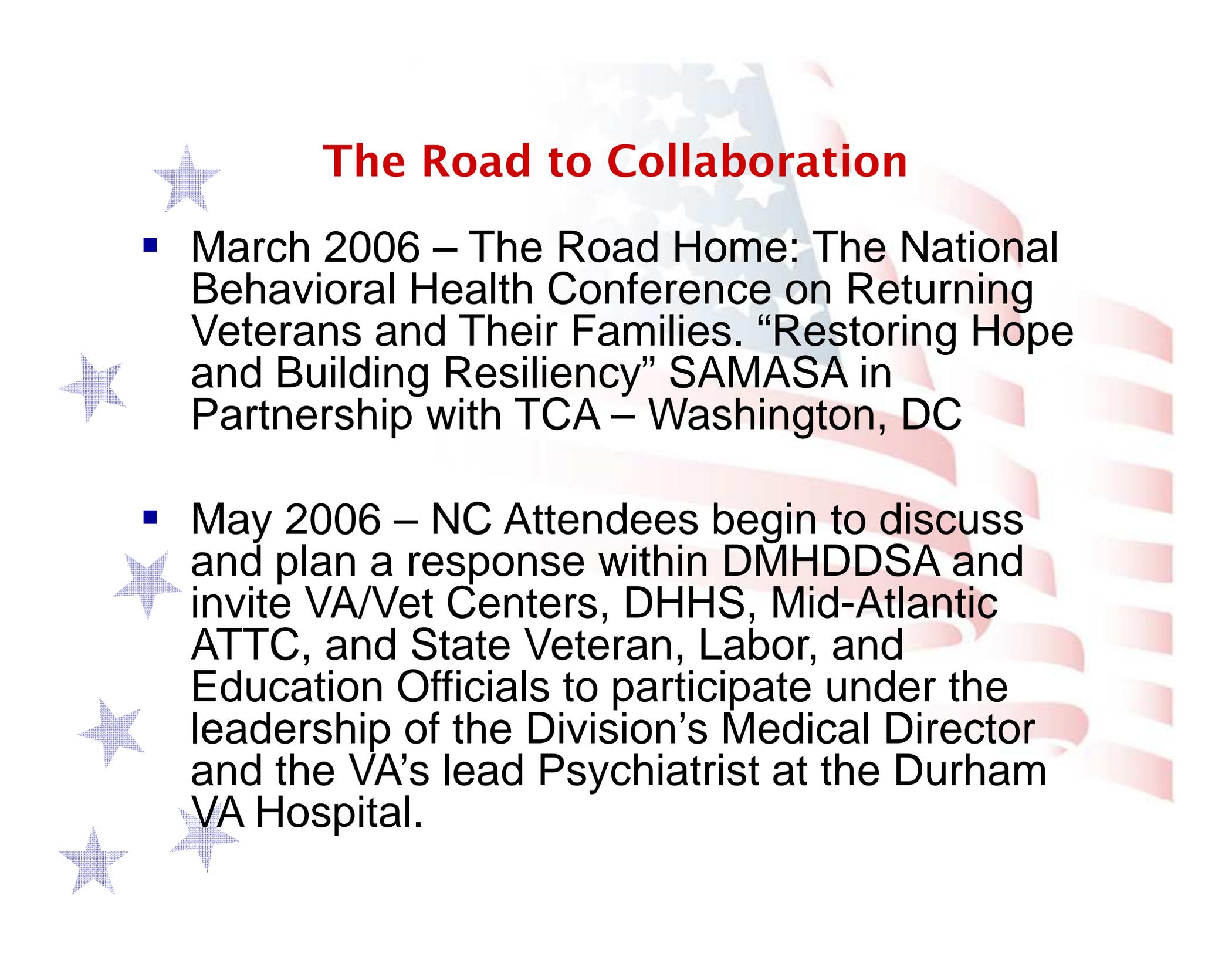
The Changing Transitional Nature of Military Family Life



- This transitional nature of military life has increased demands for support services for service members & their families, especially National Guard and Reserves.
- This demand for support services has also caused the military to embrace a community capacity building model of service delivery.

The Changing Transitional Nature of Military

- This shift places more responsibility on families to use community support systems that have increased funding from DOD, the service departments & individual states for family support.
- National Guard & Reserve families live in communities across the state. They don't always have easy access to VA or military bases and may enter care through local community services.



The Road to Collaboration

- March 2006 – The Road Home: The National Behavioral Health Conference on Returning Veterans and Their Families. “Restoring Hope and Building Resiliency” SAMASA in Partnership with TCA – Washington, DC
- May 2006 – NC Attendees begin to discuss and plan a response within DMHDDSA and invite VA/Vet Centers, DHHS, Mid-Atlantic ATTC, and State Veteran, Labor, and Education Officials to participate under the leadership of the Division’s Medical Director and the VA’s lead Psychiatrist at the Durham VA Hospital.



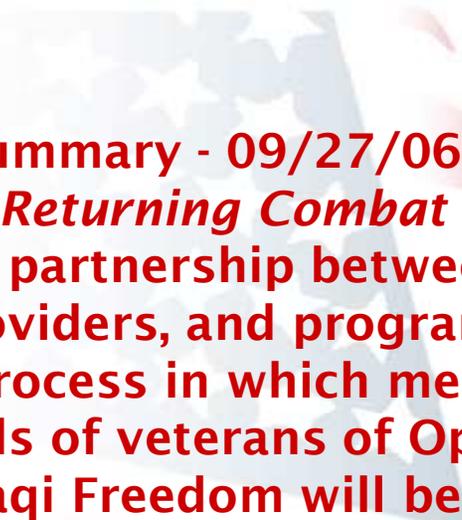
The Road to Collaboration

- **The Secretary of NC DHHS and the Governor's Office joined the discussion and "The Governor's Summit on Returning Combat Veteran's and their Families" was held on September 27th, 2006.**

- **An Action Agenda evolved from the afternoon workgroups and the "Governor's Focus on Returning Veterans and their Families" began monthly meetings to follow up on Action Agenda items.**

- **Participation has expanded to include other state groups with interest and involvement in Veteran's issues to implement this Agenda.**

- **Initial funding provided by the ATTC, Corporate Sponsors, and the NC Legislature.**

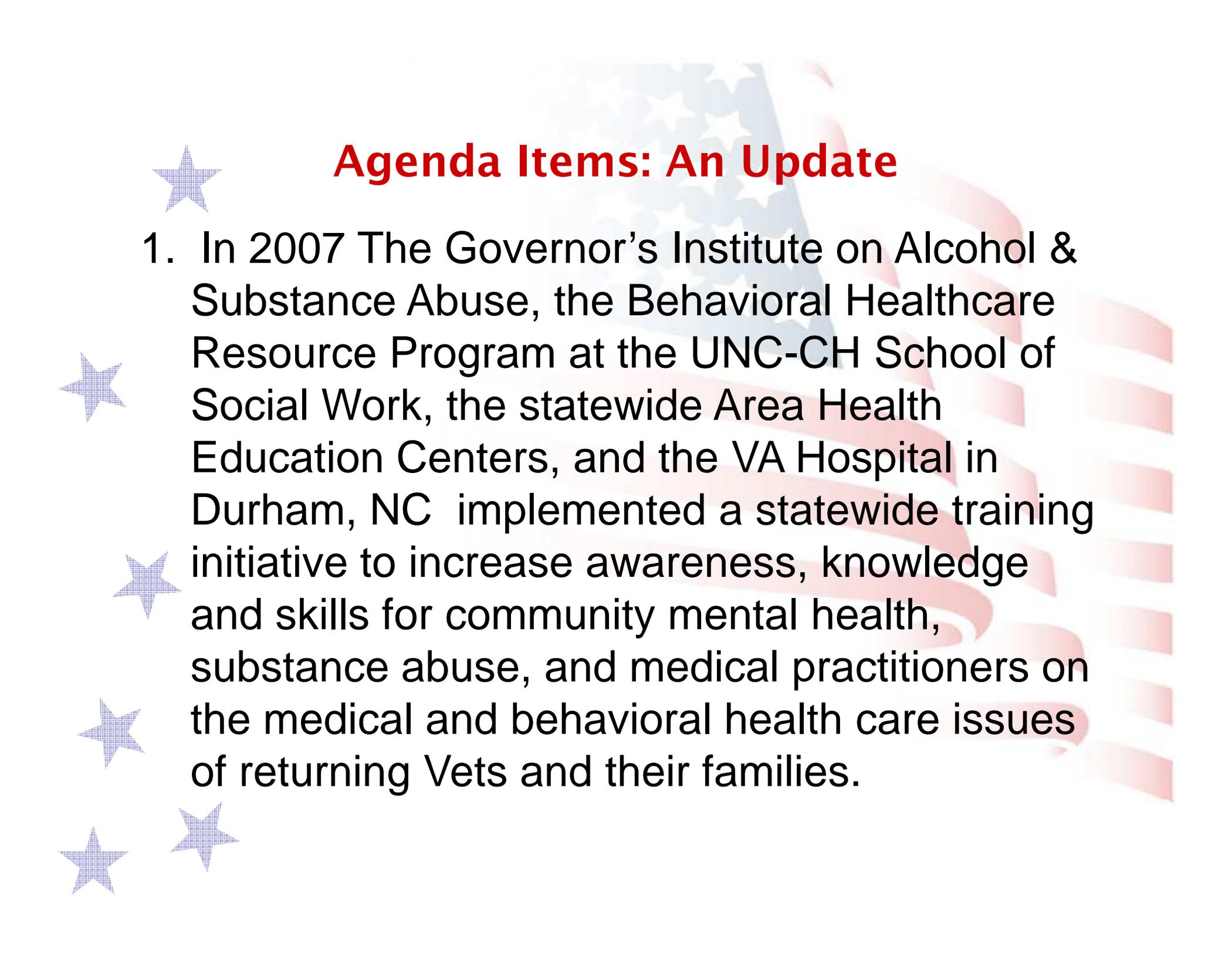


Executive Summary - 09/27/06



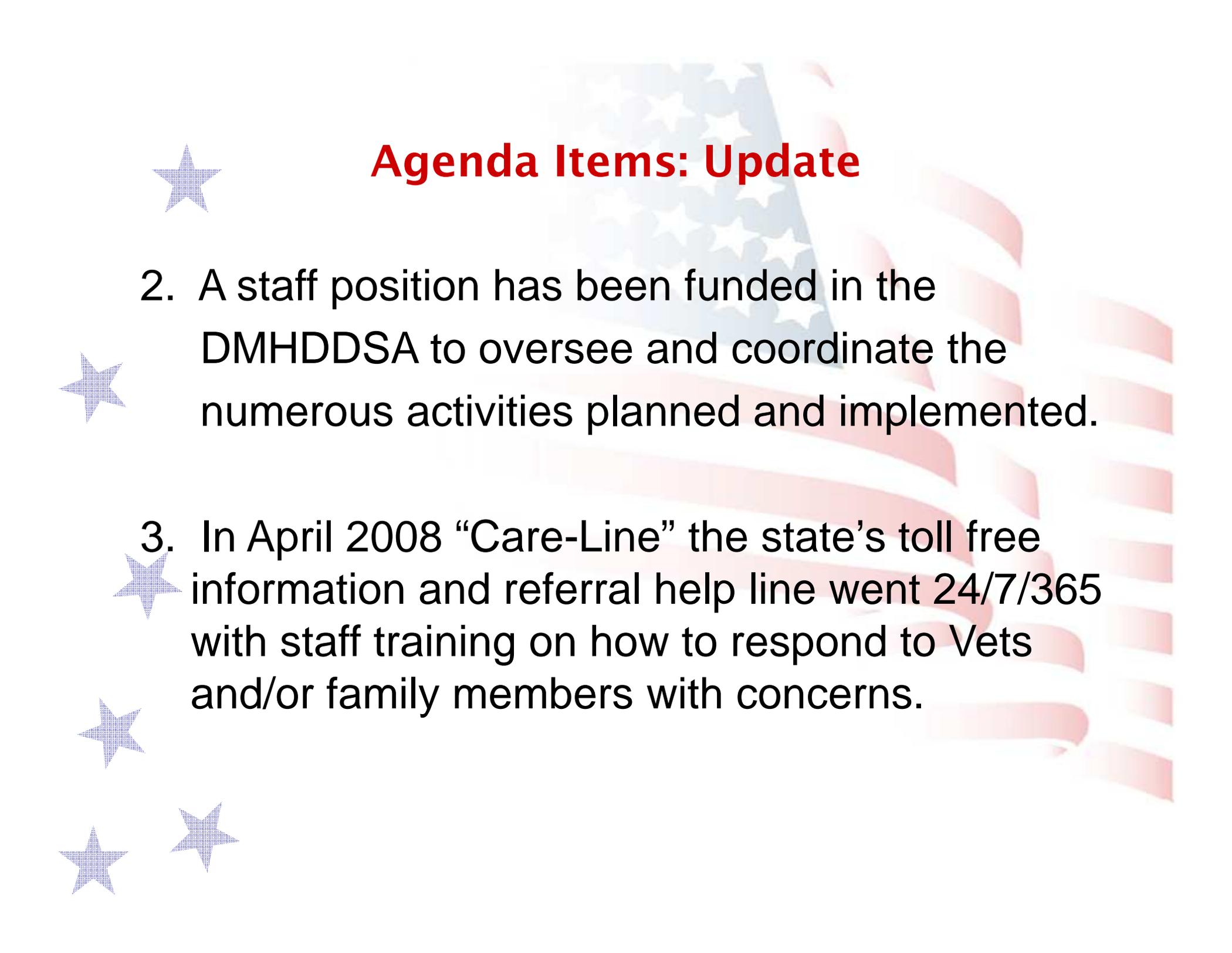
*“The Governor’s Summit on Returning Combat Veterans and their Families is the beginning of a partnership between State & Federal Government, community providers, and programs. It is also the beginning of an ongoing process in which mental health and substance abuse service needs of veterans of Operation Enduring Freedom and Operation Iraqi Freedom will be identified and addressed through specific recommendations and concrete plans & timelines. By exchanging information about their respective agencies’ assets and goals and identifying strategic partnerships, Summit attendees began the work of articulating an integrated continuum of care that emphasizes access, quality, effectiveness, efficiency, and compassion. Principles of resilience, prevention, and recovery were emphasized along with state-of-the-art clinical services as part of a balanced public health approach. *The product envisioned is a referral network of informational, supportive, clinical, and administrative services that will comprise a system through which citizens of North Carolina will have access to post-deployment readjustment assistance for veterans and their families.”**



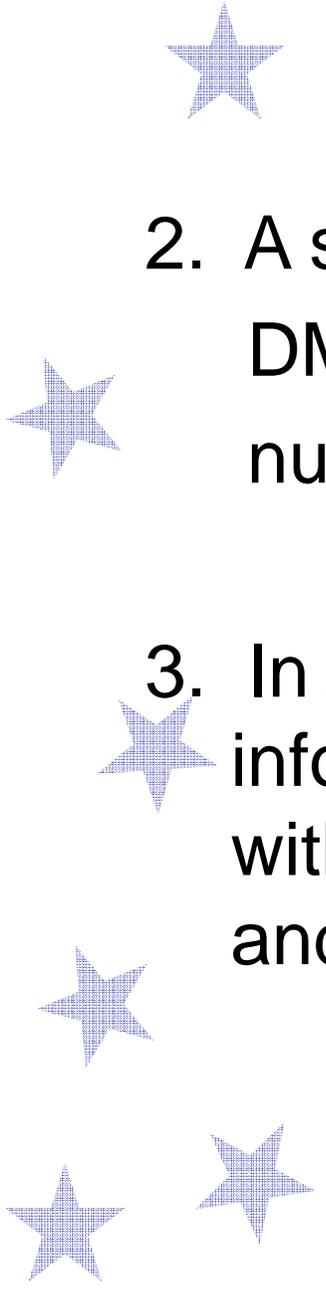


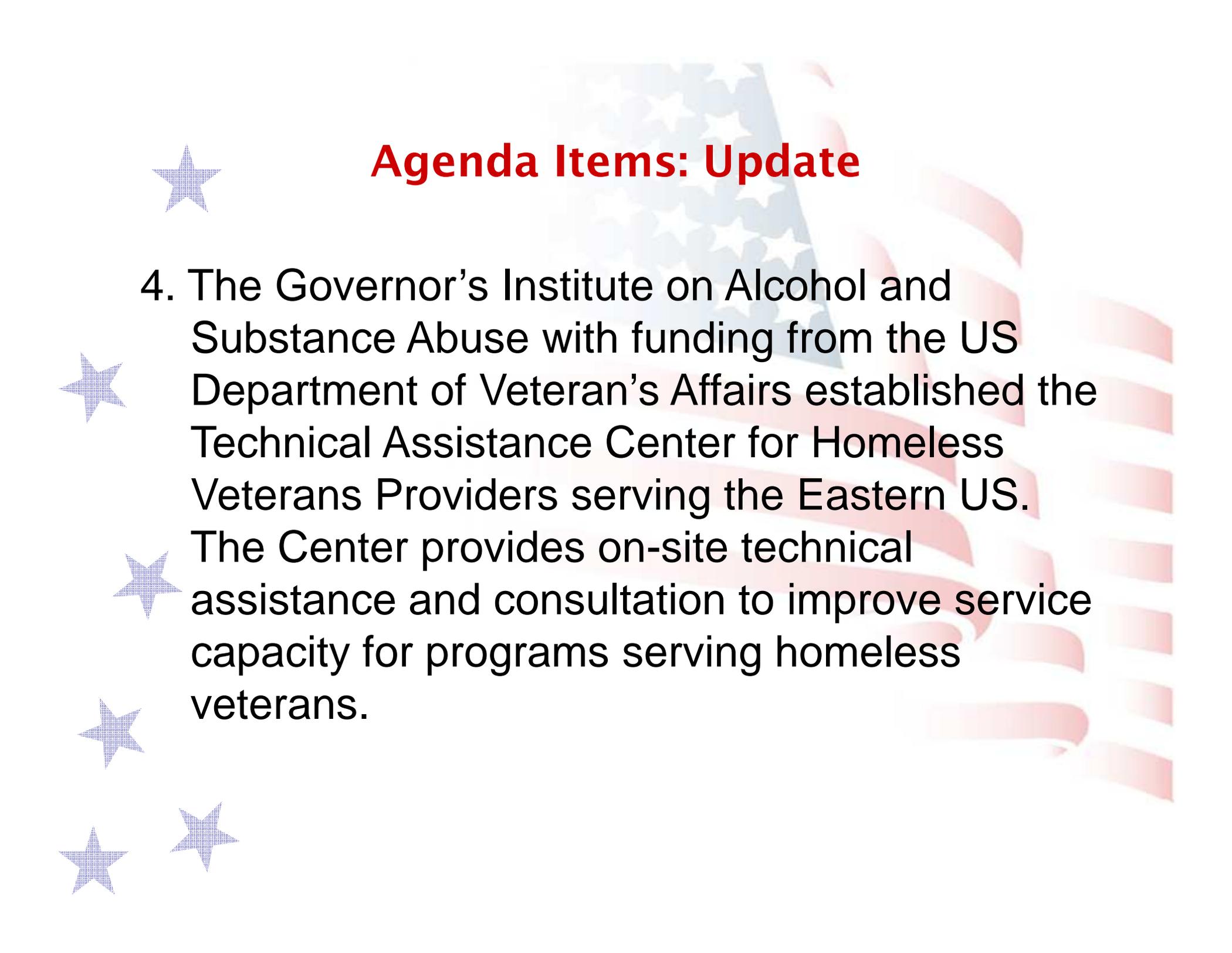
★ **Agenda Items: An Update**

- ★ 1. In 2007 The Governor's Institute on Alcohol & Substance Abuse, the Behavioral Healthcare Resource Program at the UNC-CH School of Social Work, the statewide Area Health Education Centers, and the VA Hospital in Durham, NC implemented a statewide training initiative to increase awareness, knowledge and skills for community mental health, substance abuse, and medical practitioners on the medical and behavioral health care issues of returning Vets and their families.
- 



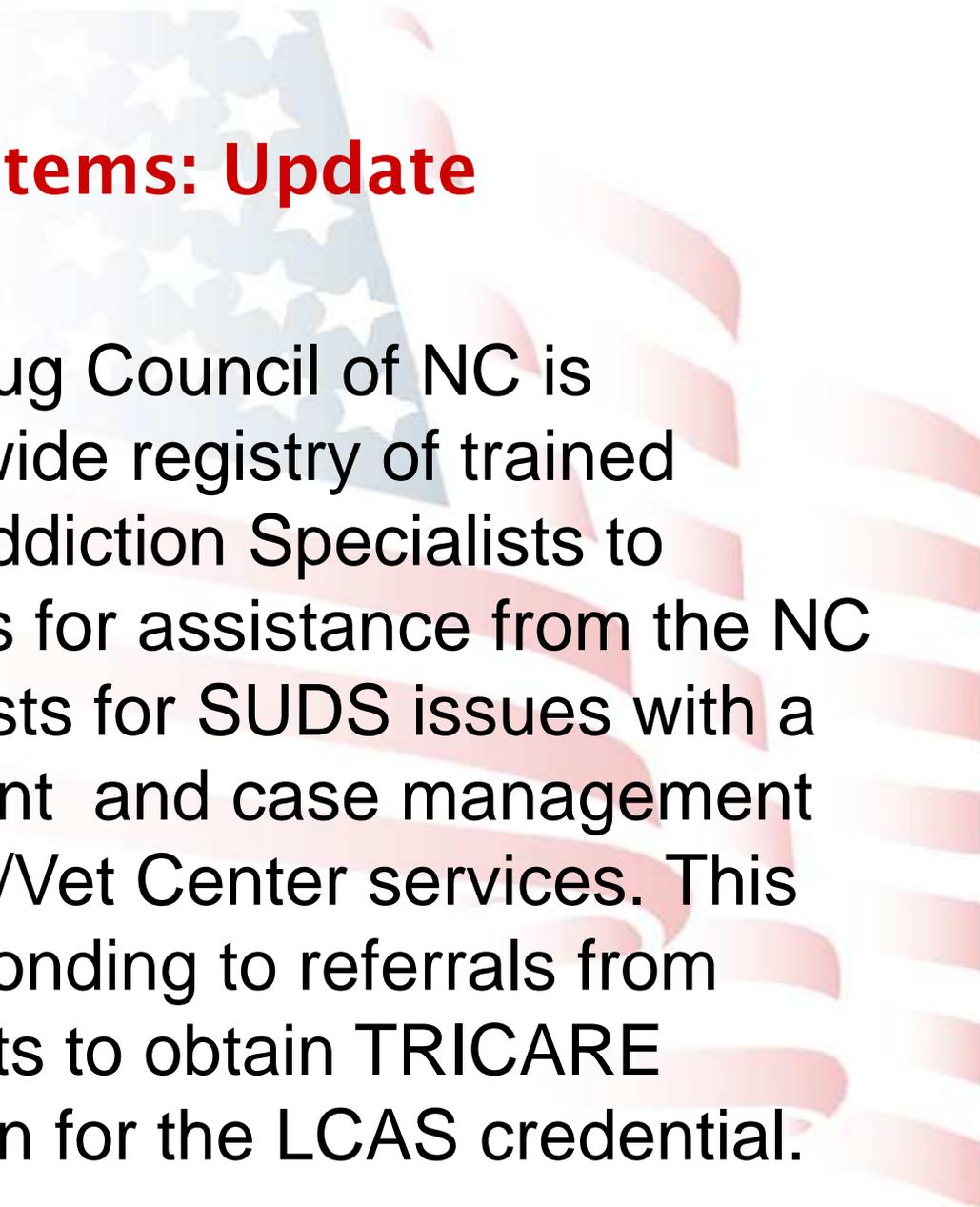
★ Agenda Items: Update

- ★ 2. A staff position has been funded in the DMHDDSA to oversee and coordinate the numerous activities planned and implemented.
 - ★ 3. In April 2008 “Care-Line” the state’s toll free information and referral help line went 24/7/365 with staff training on how to respond to Vets and/or family members with concerns.
- 



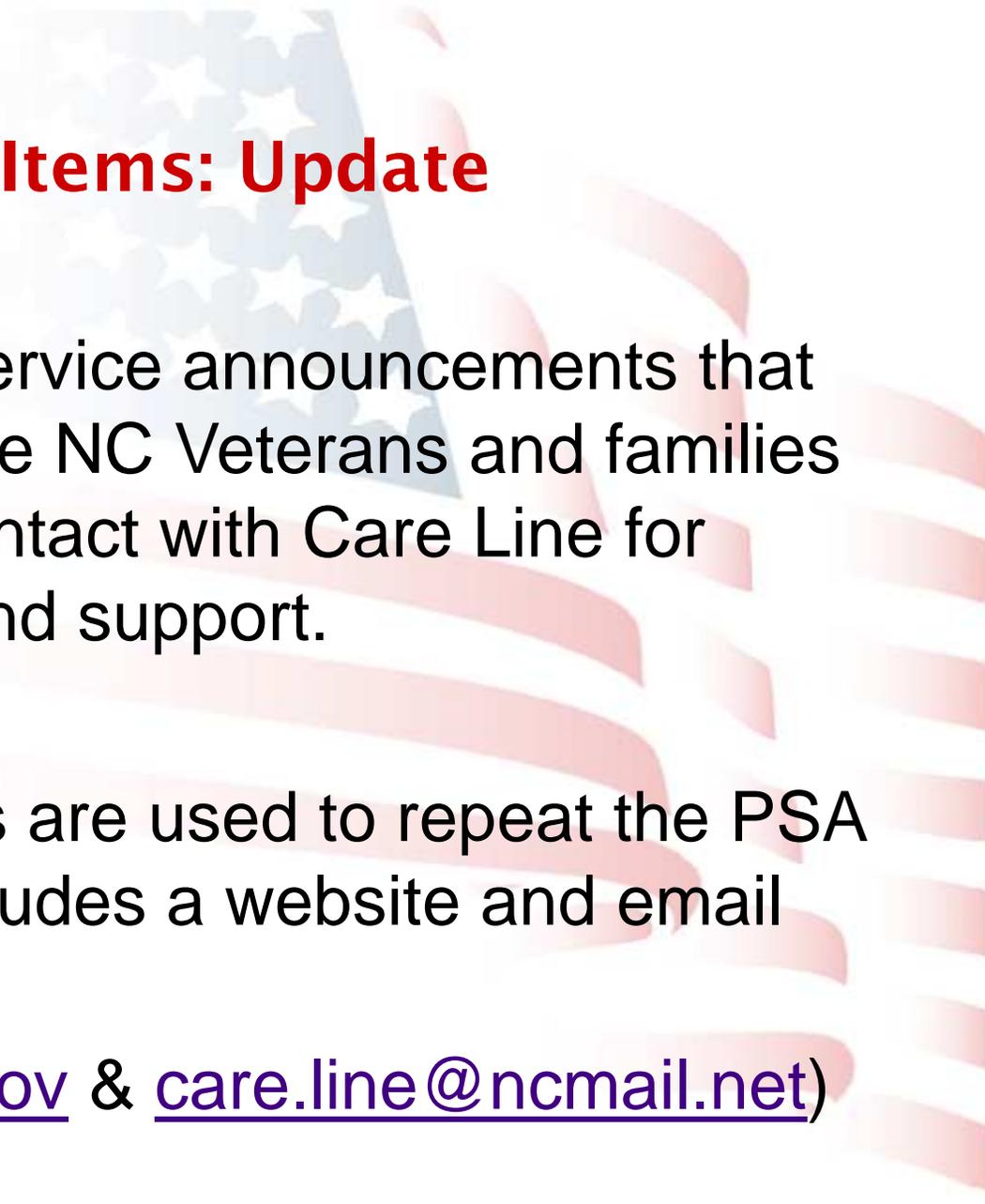
★ Agenda Items: Update

- ★ 4. The Governor's Institute on Alcohol and Substance Abuse with funding from the US Department of Veteran's Affairs established the Technical Assistance Center for Homeless Veterans Providers serving the Eastern US. The Center provides on-site technical assistance and consultation to improve service capacity for programs serving homeless veterans.
- ★
- ★
- ★
- ★



★ Agenda Items: Update

- ★ 5. The Alcohol and Drug Council of NC is developing a statewide registry of trained Licensed Clinical Addiction Specialists to respond to requests for assistance from the NC Guard and Reservists for SUDS issues with a focus on assessment and case management and referral into VA/Vet Center services. This effort includes responding to referrals from Care Link and efforts to obtain TRICARE Provider designation for the LCAS credential.
- ★
- ★
- ★
- ★



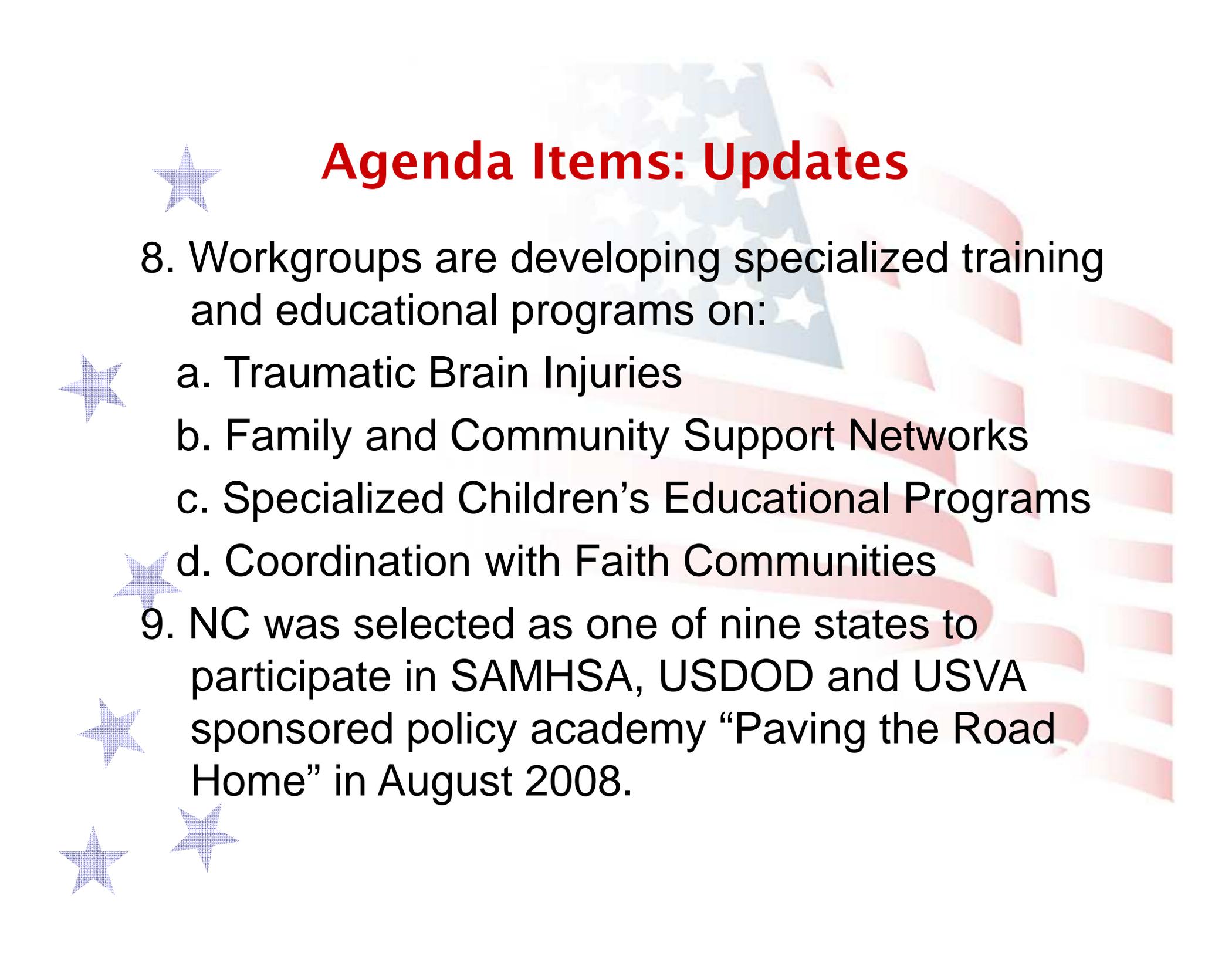
★ Agenda Items: Update

★ 6. Statewide public service announcements that air featuring notable NC Veterans and families who encourage contact with Care Line for confidential help and support.

★ 7. Highway Billboards are used to repeat the PSA messages and includes a website and email address.

★ (www.NCcareLINK.gov & care.line@ncmail.net)

★ ★



★ **Agenda Items: Updates**

8. Workgroups are developing specialized training and educational programs on:

★ a. Traumatic Brain Injuries

b. Family and Community Support Networks

c. Specialized Children's Educational Programs

★ d. Coordination with Faith Communities

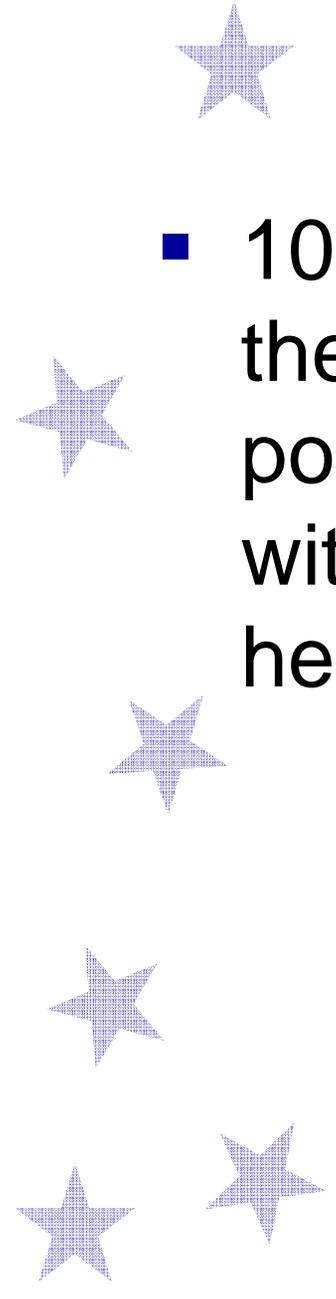
9. NC was selected as one of nine states to participate in SAMHSA, USDOD and USVA sponsored policy academy "Paving the Road Home" in August 2008.

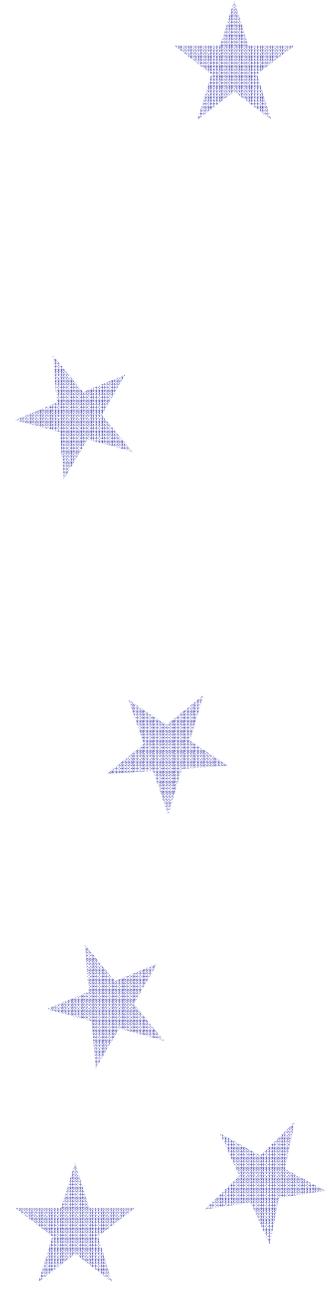
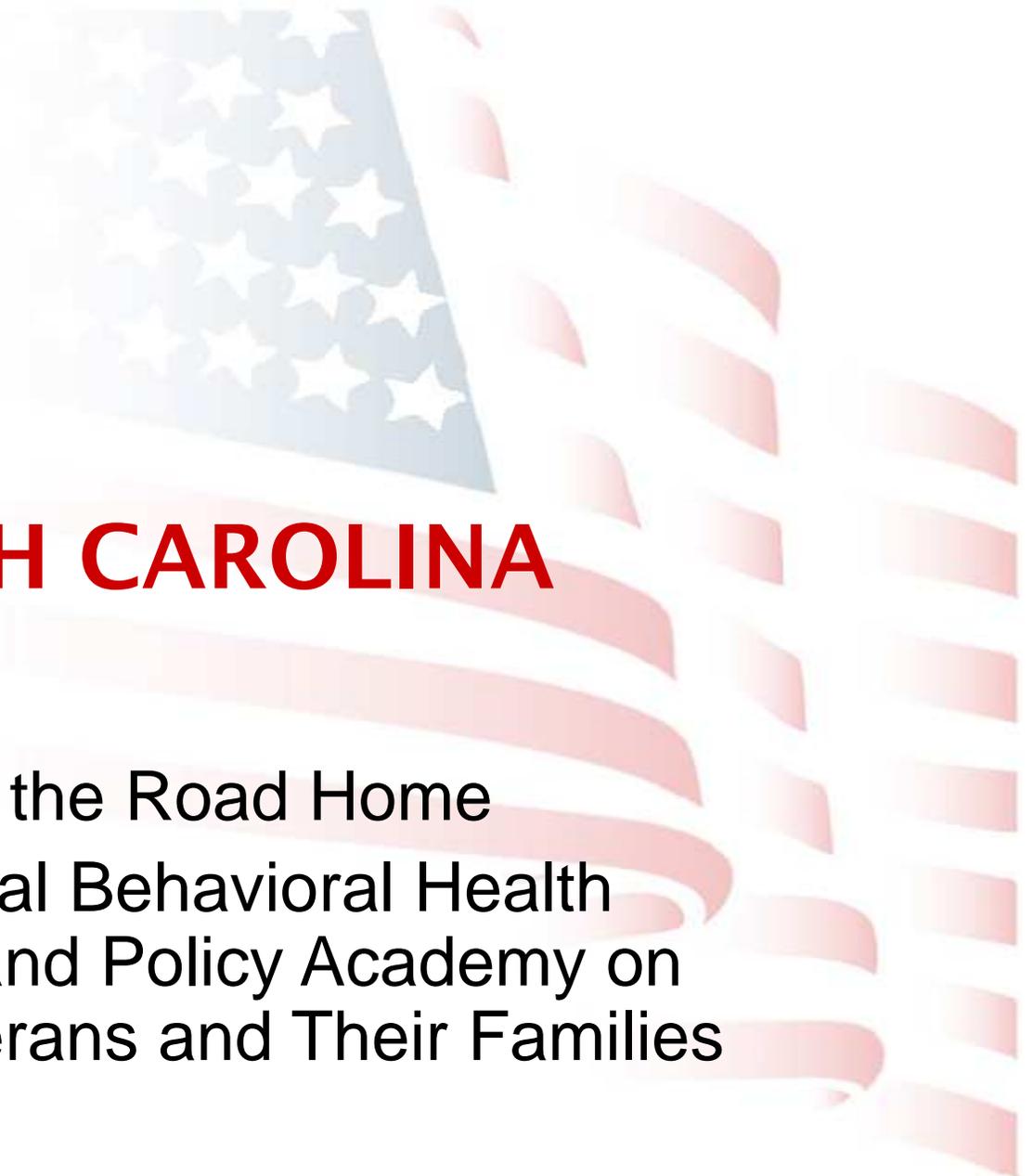
★

★



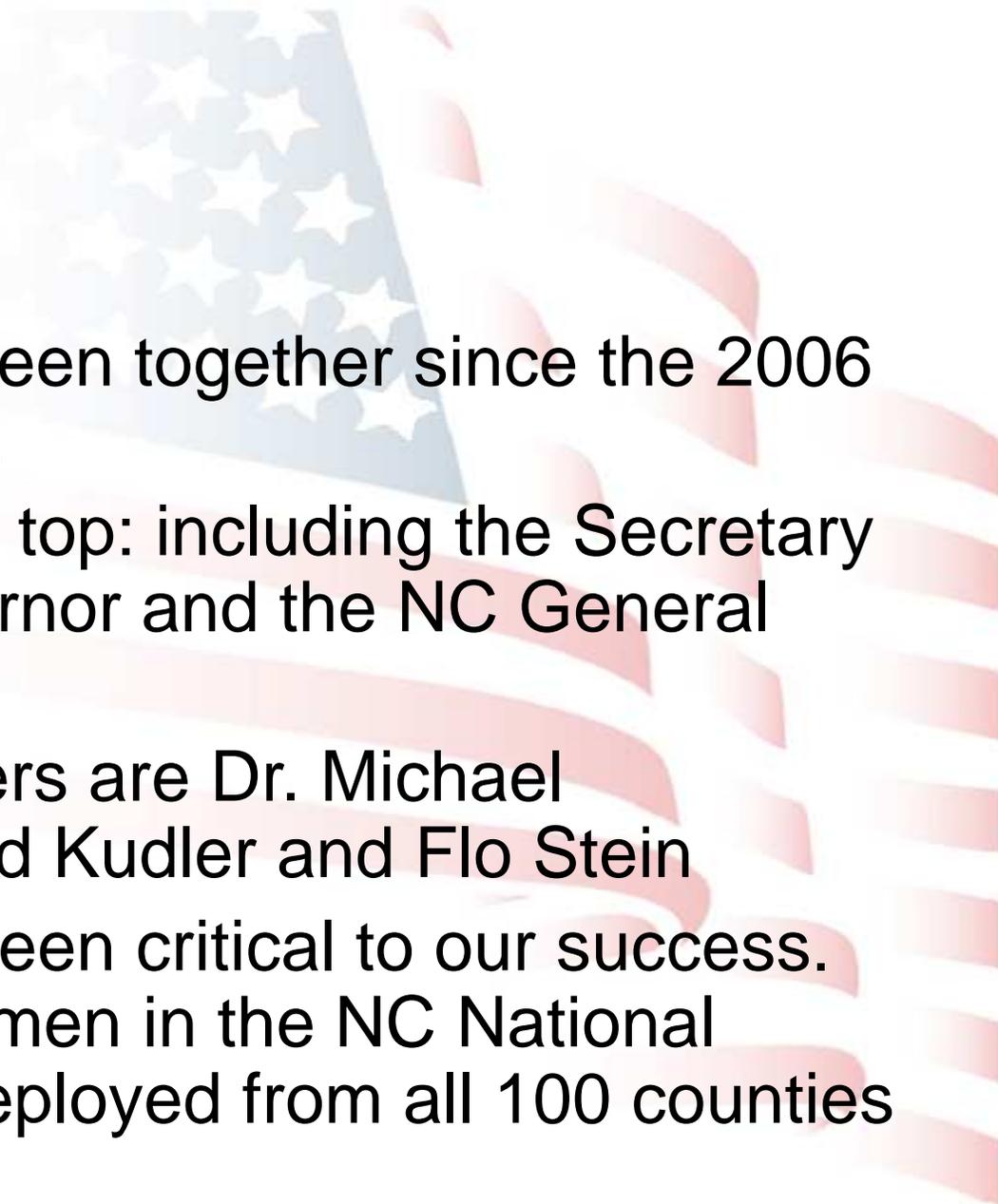
★ Agenda Items: Update

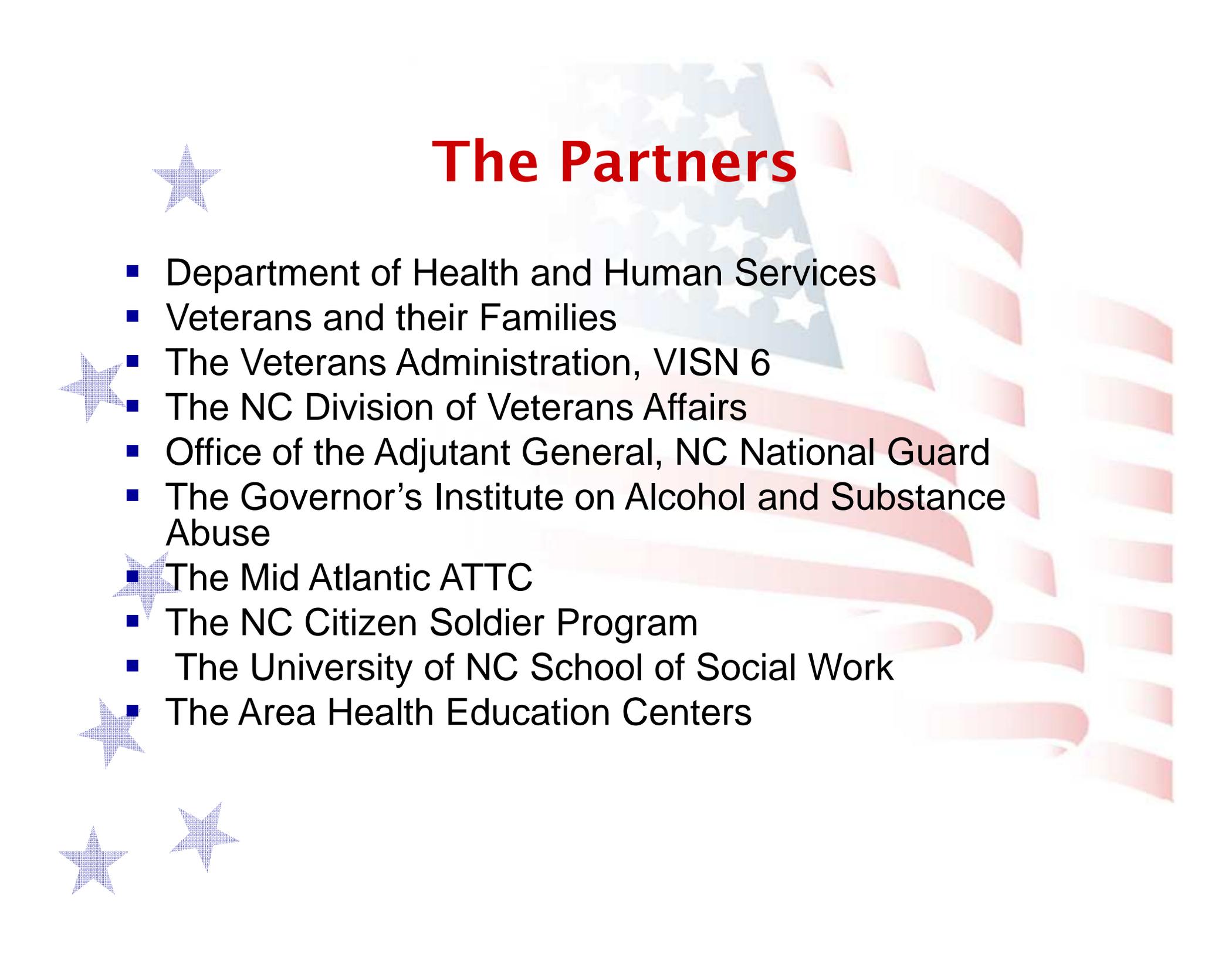
- ★ ■ 10. LOC recommendation approved by the NC General Assembly to add a target population for veterans and their families with substance use disorders mental health problem and TBI injuries
- 



NORTH CAROLINA

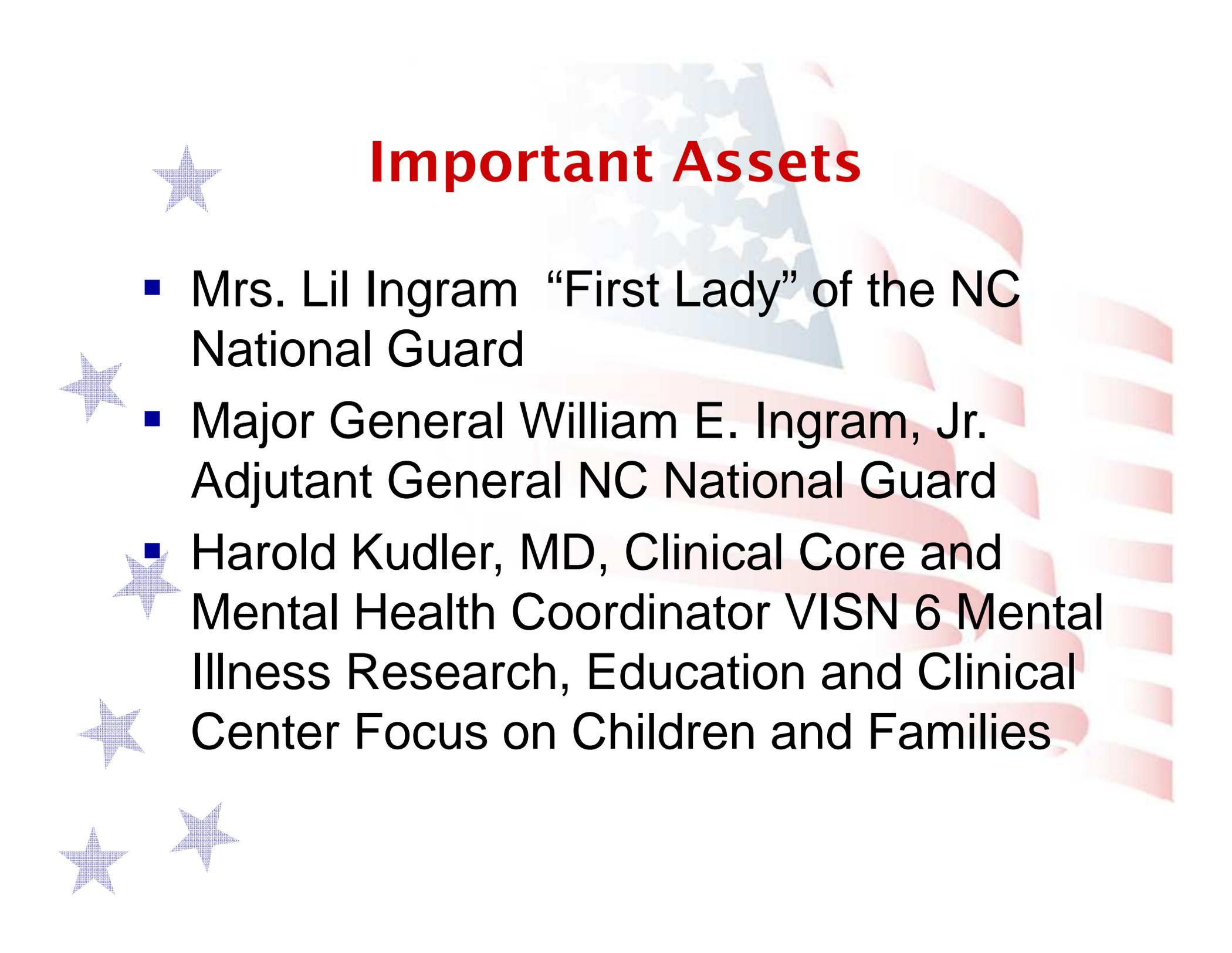
Paving the Road Home
The National Behavioral Health
Conference and Policy Academy on
Returning Veterans and Their Families

- 
- ★
 - The NC Team has been together since the 2006 national conference.
 - ★ ■ Leadership from the top: including the Secretary of DHHS, The Governor and the NC General Assembly.
 - Our Co-Team Leaders are Dr. Michael Lancaster. Dr. Harold Kudler and Flo Stein
 - ★ ■ Partnerships have been critical to our success. 11,000 men and women in the NC National Guard have been deployed from all 100 counties
 - ★
 - ★



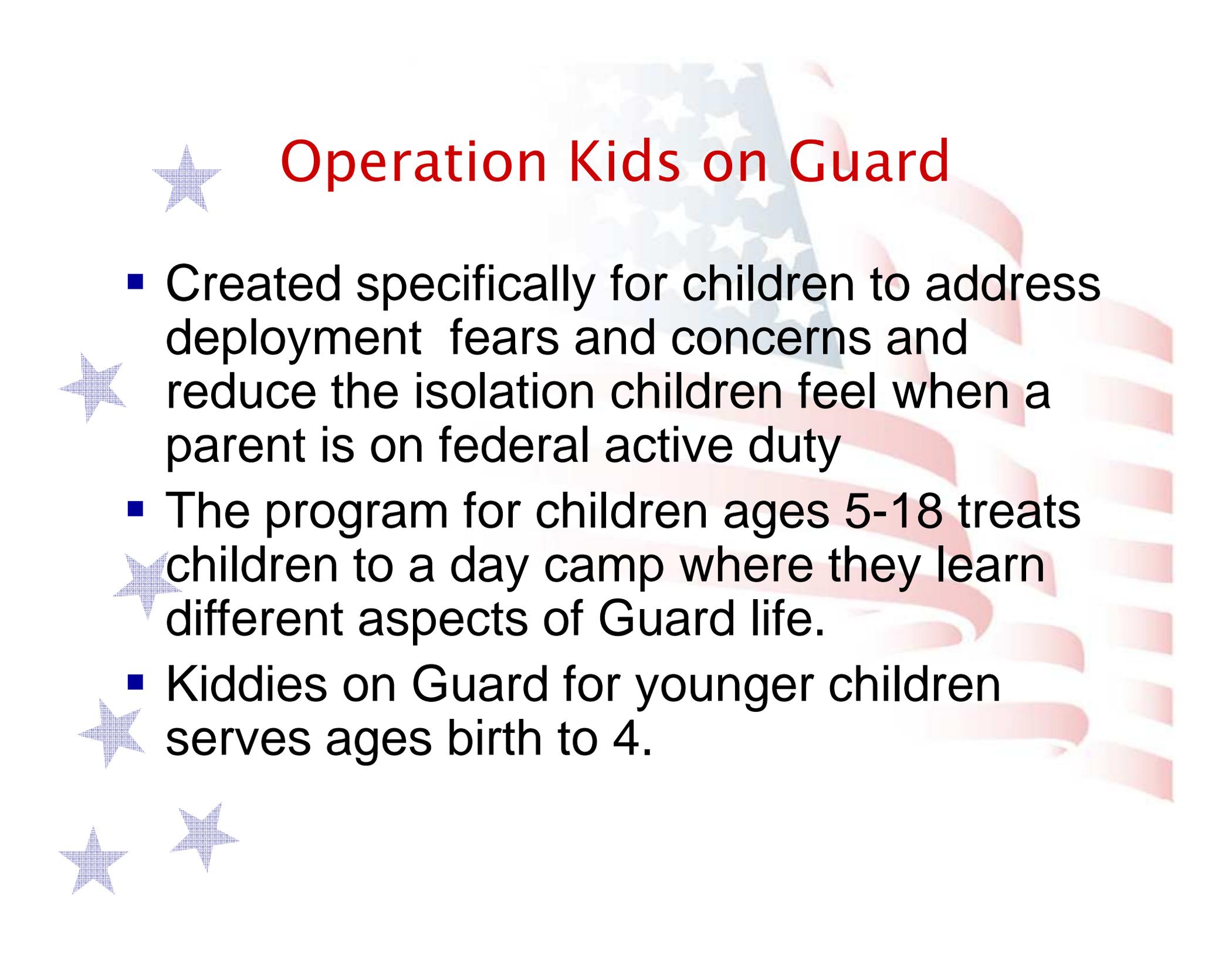
The Partners

- Department of Health and Human Services
- Veterans and their Families
- The Veterans Administration, VISN 6
- The NC Division of Veterans Affairs
- Office of the Adjutant General, NC National Guard
- The Governor's Institute on Alcohol and Substance Abuse
- The Mid Atlantic ATTC
- The NC Citizen Soldier Program
- The University of NC School of Social Work
- The Area Health Education Centers



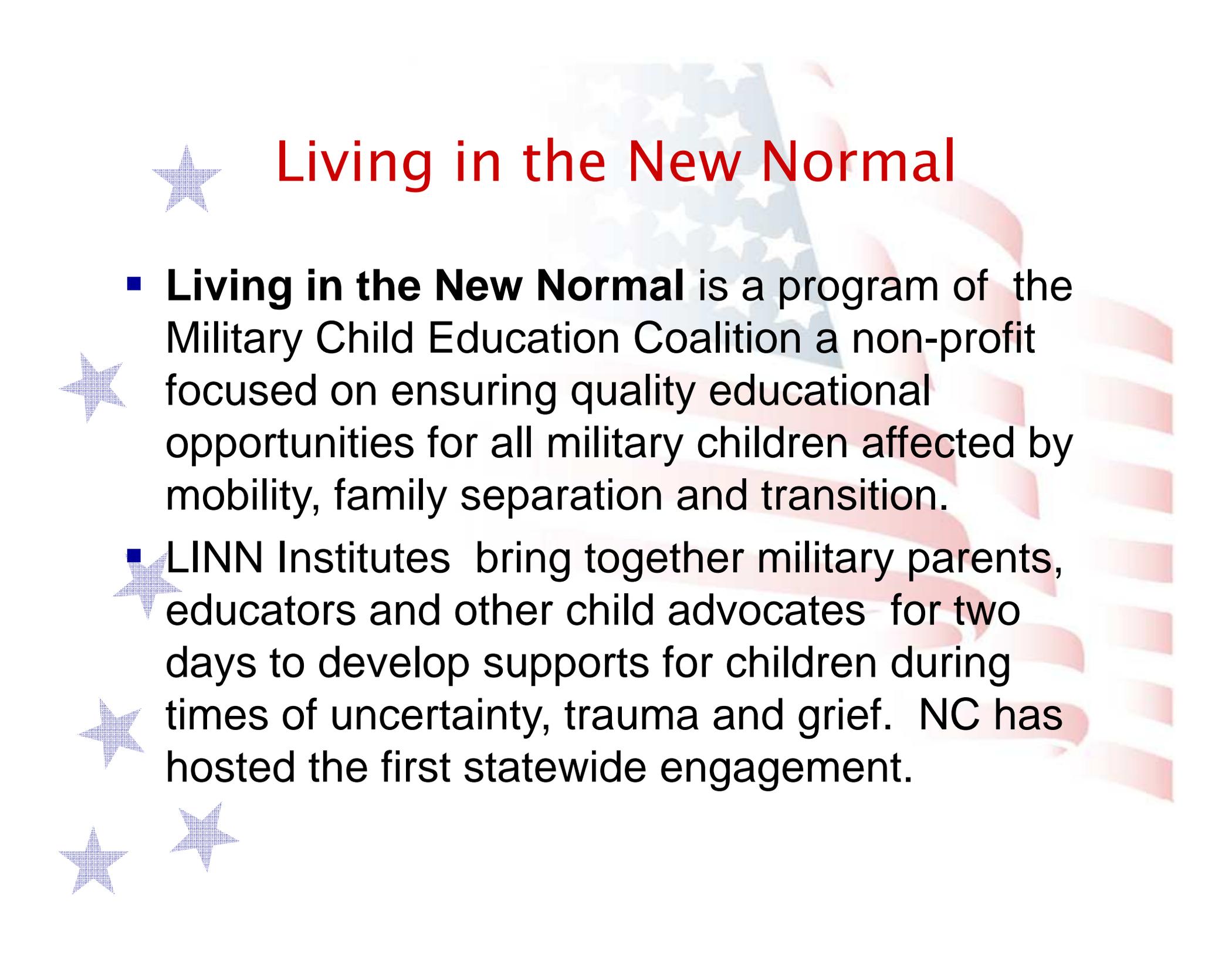
★ Important Assets

- Mrs. Lil Ingram “First Lady” of the NC National Guard
 - ★ ■ Major General William E. Ingram, Jr. Adjutant General NC National Guard
 - ★ ■ Harold Kudler, MD, Clinical Core and Mental Health Coordinator VISN 6 Mental Illness Research, Education and Clinical Center Focus on Children and Families
- 



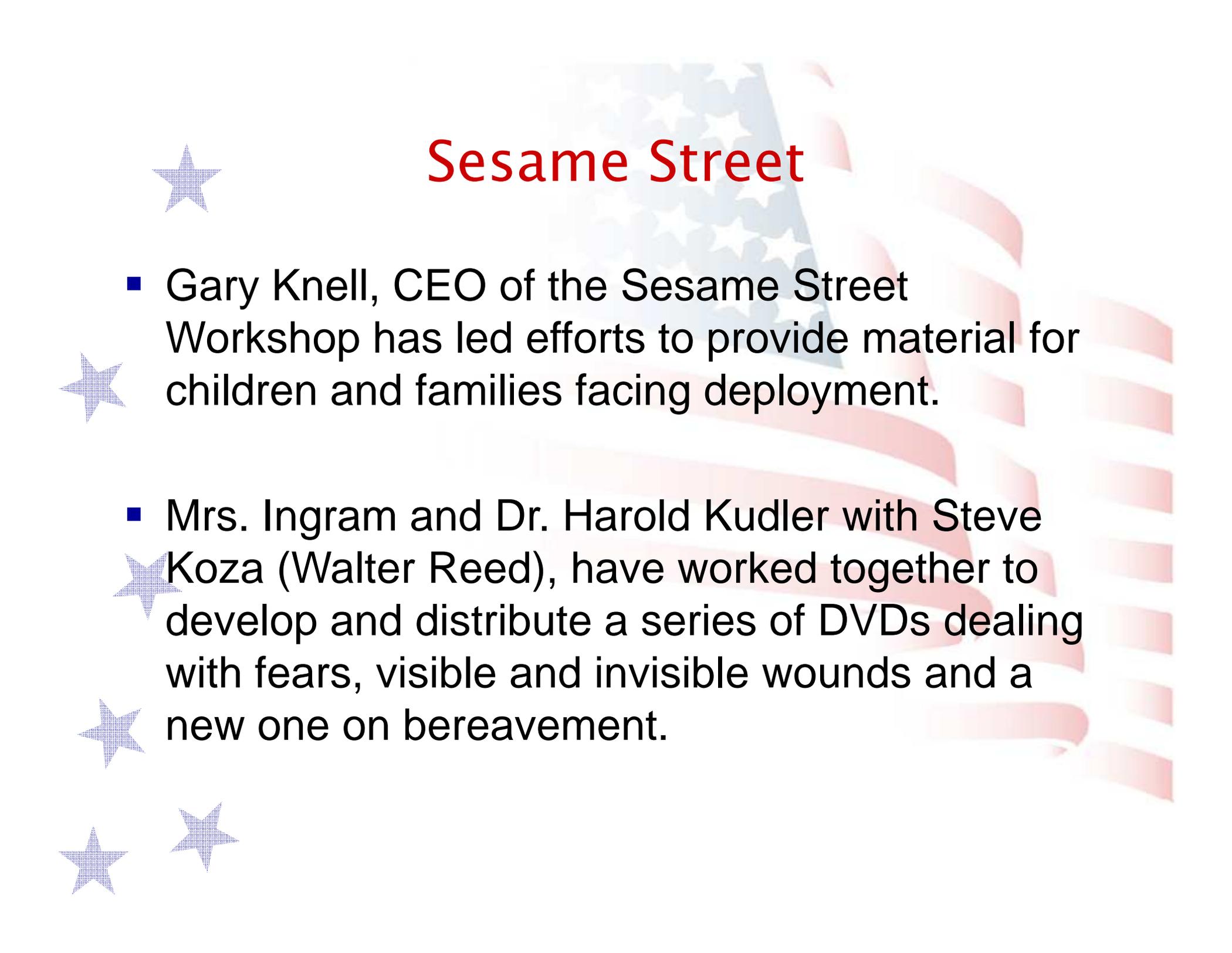
★ Operation Kids on Guard

- ★
 - Created specifically for children to address deployment fears and concerns and reduce the isolation children feel when a parent is on federal active duty
 - ★
 - The program for children ages 5-18 treats children to a day camp where they learn different aspects of Guard life.
 - ★
 - Kiddies on Guard for younger children serves ages birth to 4.



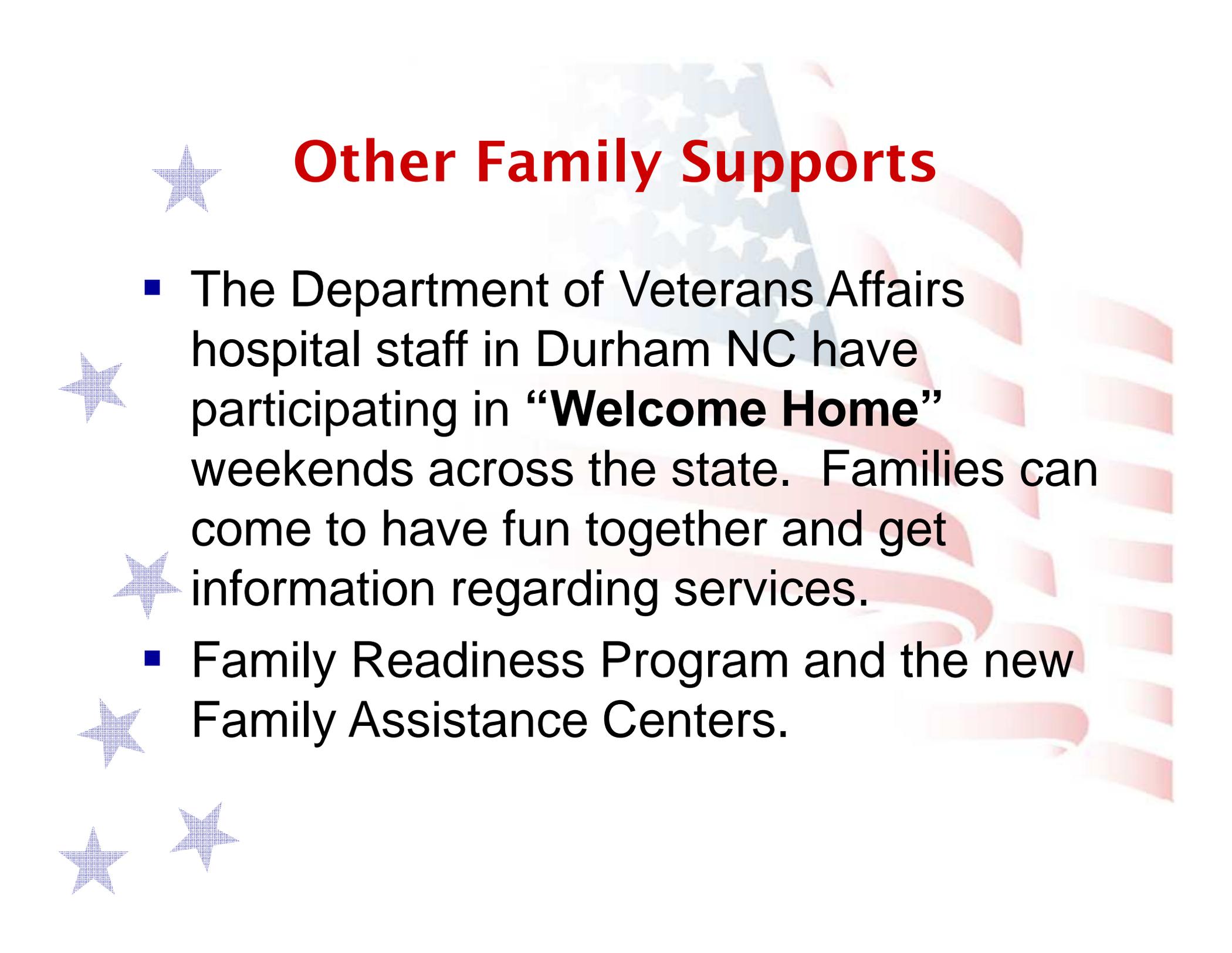
★ Living in the New Normal

- ★ ■ **Living in the New Normal** is a program of the Military Child Education Coalition a non-profit focused on ensuring quality educational opportunities for all military children affected by mobility, family separation and transition.
 - ★ ■ LINN Institutes bring together military parents, educators and other child advocates for two days to develop supports for children during times of uncertainty, trauma and grief. NC has hosted the first statewide engagement.
- 



Sesame Street

- Gary Knell, CEO of the Sesame Street Workshop has led efforts to provide material for children and families facing deployment.
- Mrs. Ingram and Dr. Harold Kudler with Steve Koza (Walter Reed), have worked together to develop and distribute a series of DVDs dealing with fears, visible and invisible wounds and a new one on bereavement.

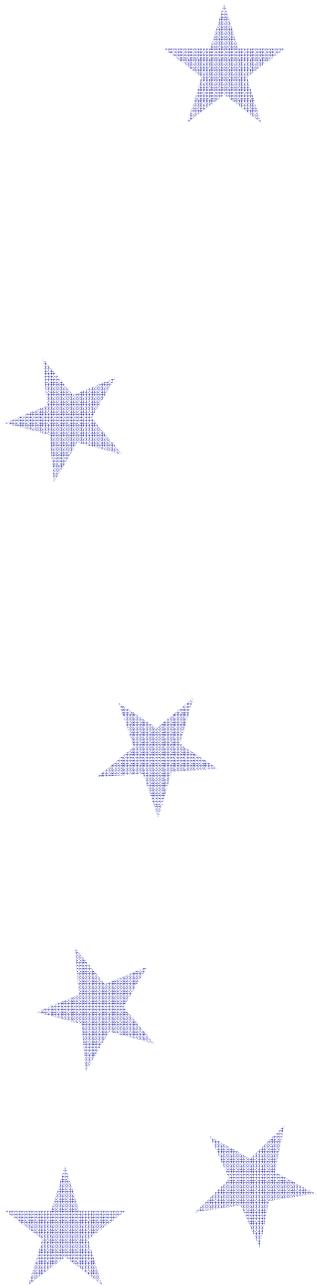


★ Other Family Supports

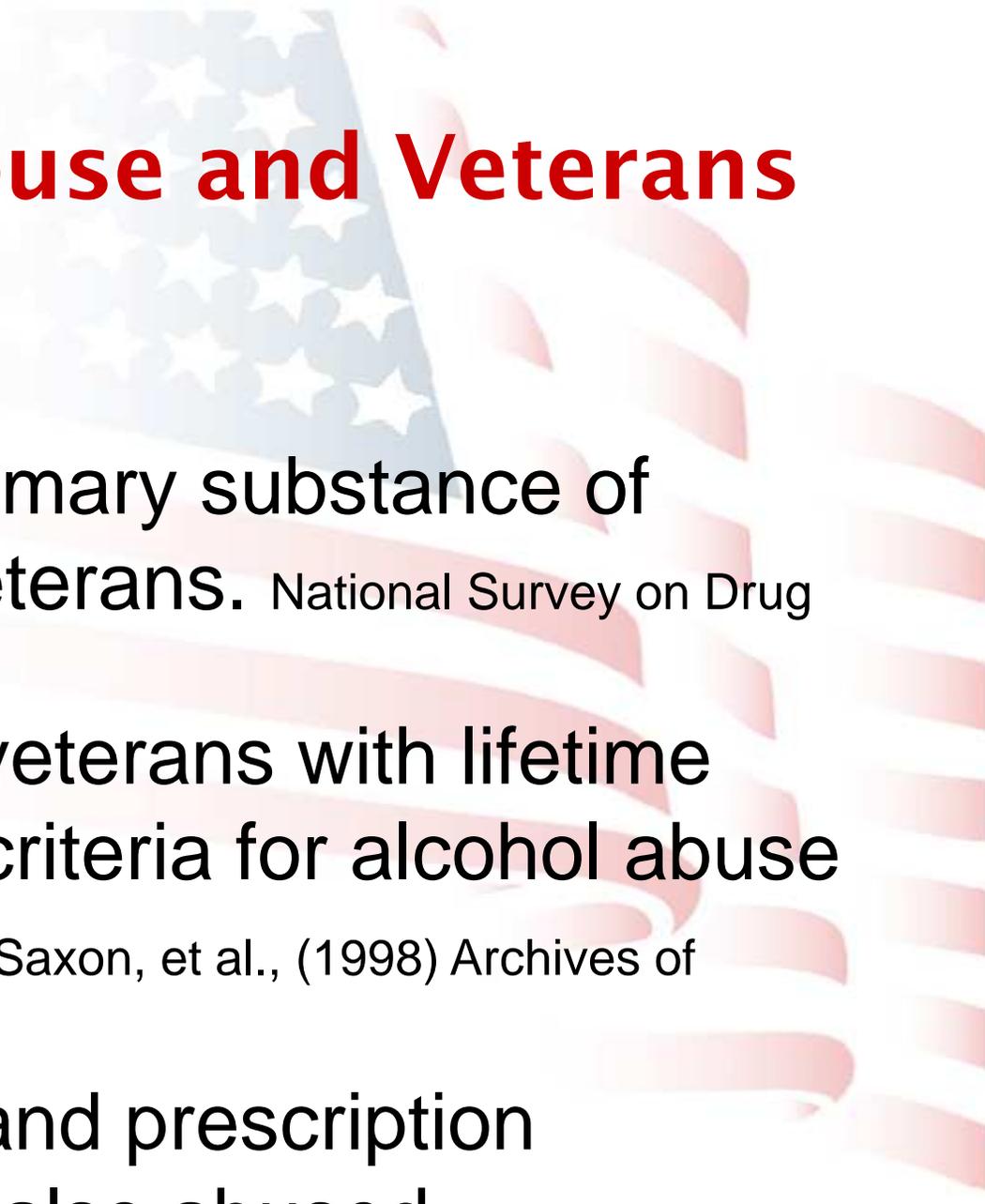
- ★ ■ The Department of Veterans Affairs hospital staff in Durham NC have participating in “**Welcome Home**” weekends across the state. Families can come to have fun together and get information regarding services.
 - ★ ■ Family Readiness Program and the new Family Assistance Centers.
- 

A large, stylized graphic of the American flag, featuring a blue field with white stars and red and white stripes, positioned in the upper right quadrant of the slide.

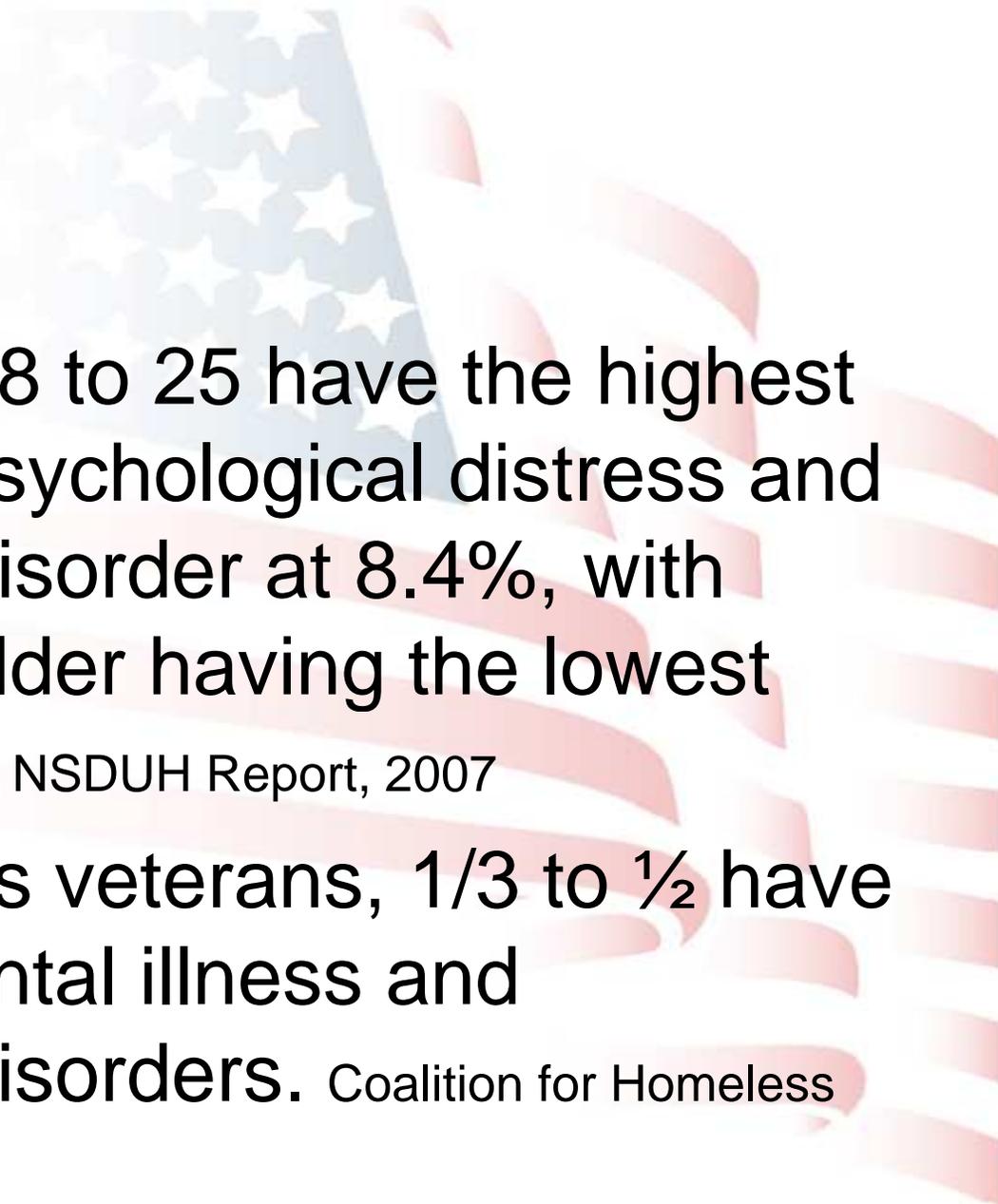
SUBSTANCE ABUSE AND VETERANS



Substance abuse and Veterans



- Alcohol is the primary substance of abuse among veterans. National Survey on Drug Use and Health, 2005
- 65% of combat veterans with lifetime PTSD also met criteria for alcohol abuse or dependence. Saxon, et al., (1998) Archives of General Psychiatry
- Heroin cocaine and prescription medications are also abused.



★

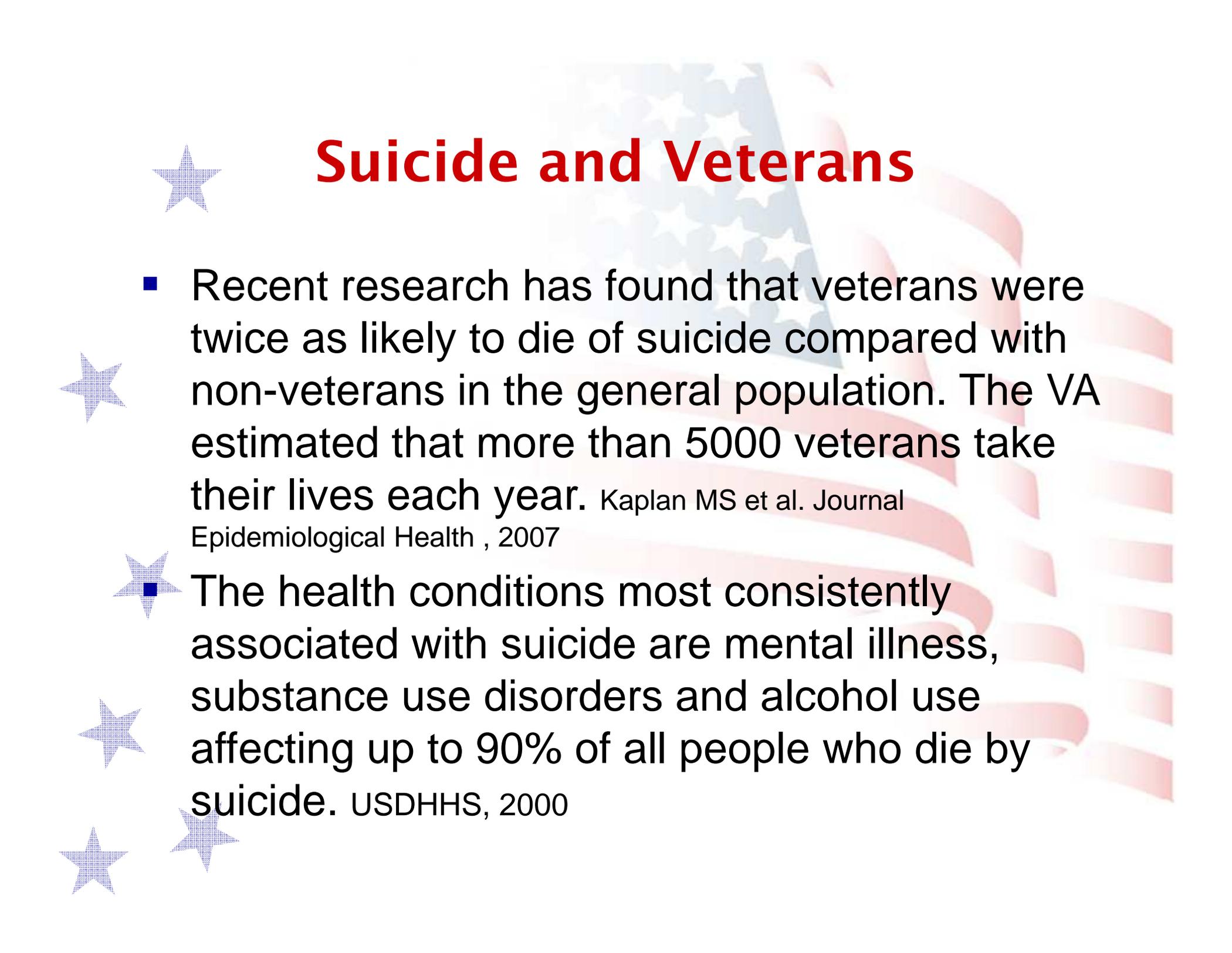
- Veterans aged 18 to 25 have the highest rate of serious psychological distress and substance use disorder at 8.4%, with veterans 55 or older having the lowest rate at 0.7%. The NSDUH Report, 2007

★

- Among homeless veterans, 1/3 to 1/2 have co-occurring mental illness and substance use disorders. Coalition for Homeless Veterans

★

★



Suicide and Veterans

- Recent research has found that veterans were twice as likely to die of suicide compared with non-veterans in the general population. The VA estimated that more than 5000 veterans take their lives each year. Kaplan MS et al. Journal Epidemiological Health , 2007
- The health conditions most consistently associated with suicide are mental illness, substance use disorders and alcohol use affecting up to 90% of all people who die by suicide. USDHHS, 2000