



INCREASING AWARENESS OF VETERANS' HEALTH ISSUES BY ASKING ABOUT MILITARY SERVICE



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Military Culture

- Rank: What does it mean?**
 - Enlisted (ie. Private, Specialist, Sergeant, Master Sergeant)
 - Officer (ie. 2nd Lieutenant, Captain, Major, Colonel, General)
- Fraternization:** Interactions between Officers and Enlisted Personnel
- Confidentiality:** Limited in many healthcare situations

BATTLEMIND: Re-Integration and How to Adapt Post-Deployment

While Deployed...

- Buddies
- Accountability
- Targeted Aggression
- Tactile Awareness
- Lethally Armed
- Emotional Control
- Mission Operational Security
- Individual Responsibility
- Non-Defensive (Combat) Driving
- Discipline & Ordering

At Home...

- vs Withdrawal
- vs Controlling
- vs Inappropriate Aggression
- vs Hypervigilance
- vs "Locked and Loaded" at Home
- vs Anger/Detachment
- vs Secretiveness
- vs Guilt
- vs Aggressive Driving
- vs Conflict

Medical Issues

Mental Health:

Traumatic Brain Injury (TBI): 24,559 TBI in OEF/OIF (2007-09)
Significant relationship with PTSD, Depression, and Suicide Risk

Post-Traumatic Stress Disorder (PTSD):

Vietnam: 30%, Gulf War: 10%, OEF: 6-11%, OIF: 20%

50% increased risk in Reserve vs. Active-Duty – lack of established support system

Suicide: 2, 293 Active duty suicides since January 2001 (298 while deployed)

Exposures:

- Vietnam: Agent Orange (Herbicide)
- Gulf War: Gulf War Syndrome (Pesticides, Vaccines, & Chemicals)
- OEF/OIF/OND: Burn Pit Exposure (Carcinogens, Waste & Chemicals)



Military Sexual Trauma (MST): 25% of female and 1% of male veterans report MST

Substance Abuse: Chronic pain and emotional trauma, higher rate of prescription drug abuse in military vs. civilian, higher rates of alcohol and cigarette use in military vs. civilian

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What can you do as a student?

Helpful advice:

- Ways to identify veterans: tattoos, bracelets/jewelry, clothing
- Number one resource to know: Mass Vets Advisor
- Do not stereotype:** Not all patients with a military connection have the same experiences and medical issues.



Follow-up questions to ask after identifying a veteran:

- Where did you serve?
- Are you currently using the VA or other veteran resources?
- Are you currently dealing with any issues related to your service?
- Would you like more information on resources available for veterans?

Follow-up questions to ask after identifying a family member or friend of a veteran:

- Where did he/she serve? Is he/she currently active or deployed?
- What is your support system?
- Has this situation caused you any stress, depression or anxiety?
- Are you aware of the resources available to you?

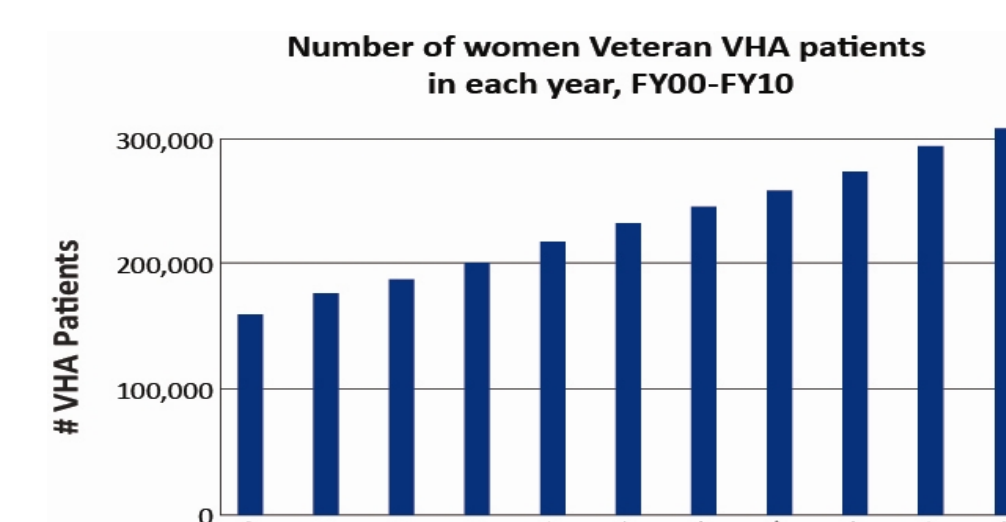
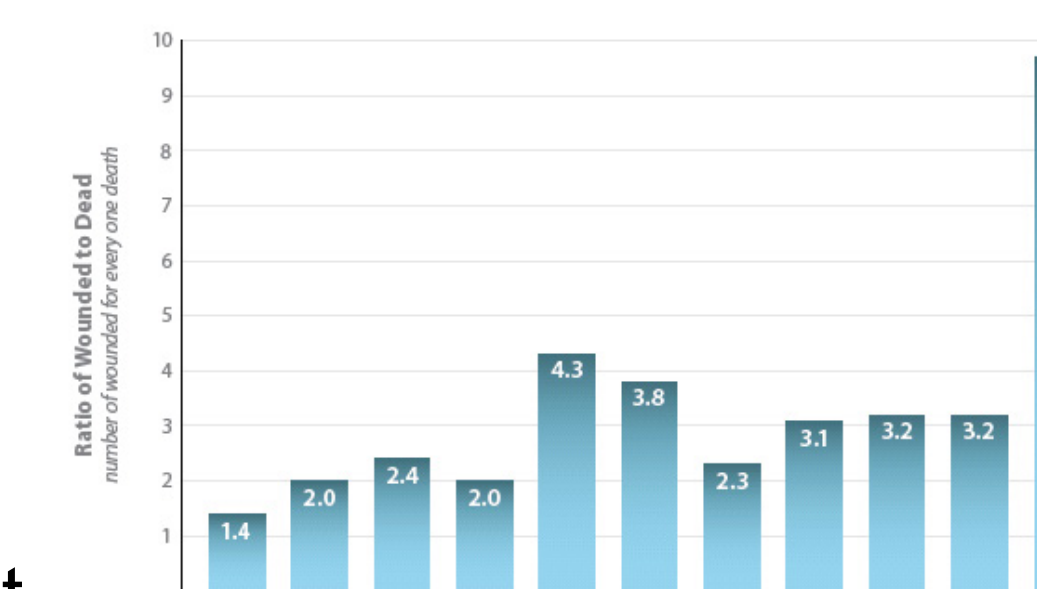
Ask the question:
Have you or someone close to you served in the U.S. military?

Current progress

- Utilization of VA services:** Among all 1,939,959 separated OEF/OIF/OND Veterans, 1,189,709 (~61%) have obtained VA health care since FY 2002. Increased rates due to increased VA access and extended enrollment deadlines.

- Increased number of wounded veterans returning from war:** increased focus on traumatic injuries and mental health issues:

- Decreased barriers to PTSD treatments:** programs such as mandatory recovery orientation, telemedical PTSD counseling, and PTSD mobile apps have expanded access.
- Expansion of Brain Injury Centers** to 16 centers operating out of 11 military treatment facilities and 5 VA polytrauma hospitals.



- Health Care for Women:** The number of women using the VA has increased in recent years. This has pushed the VA to provide more services for women including extended stays for newborns and increased obstetric and gynecological services.

Source: Women's Health Evaluation Initiative (WHEI) and the Women Veterans Health Strategic Health Care Group; SourceBook: Women Veterans in the Veterans Health Administration V1: Sociodemographic Characteristics and Use of VHA Care, 2011.

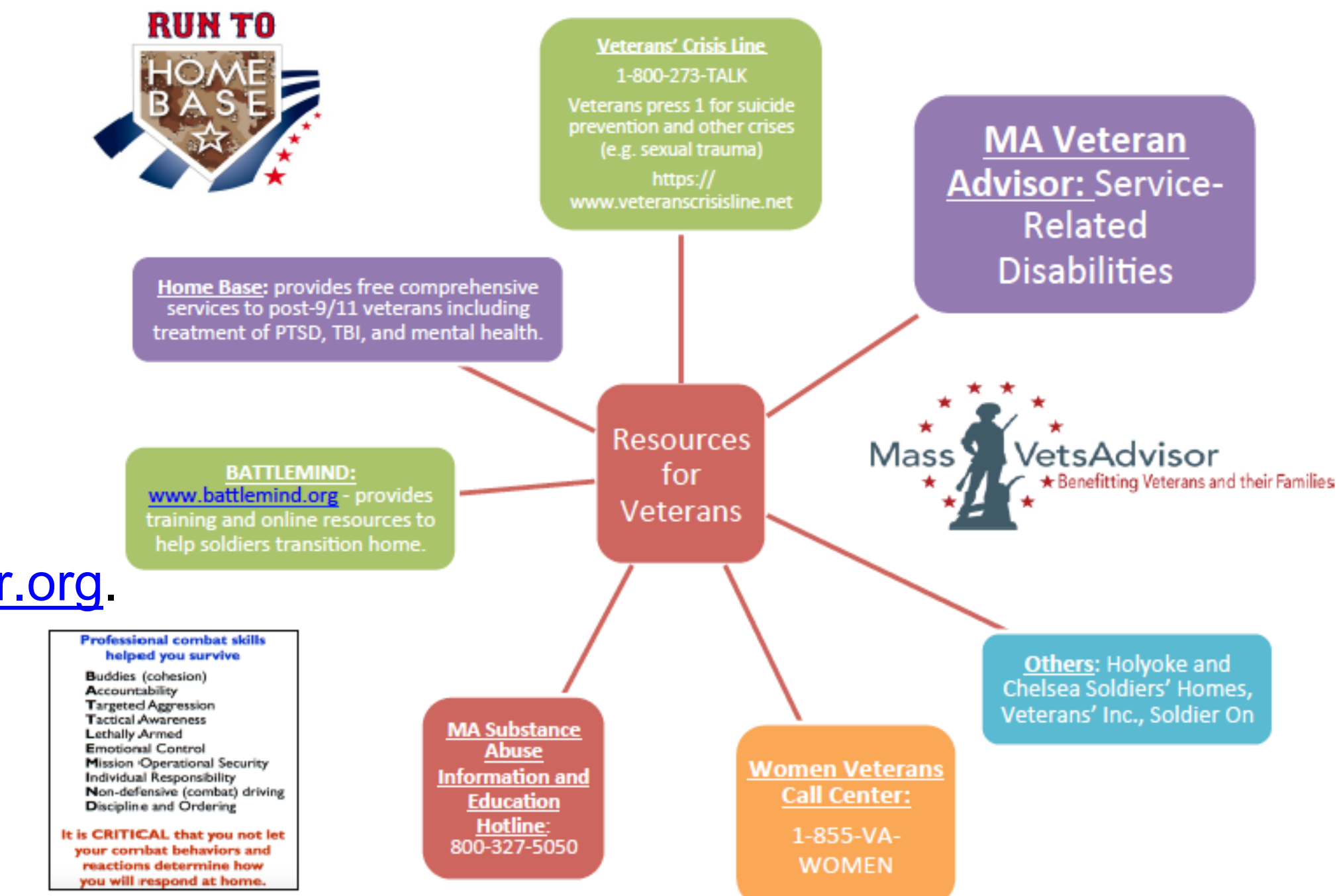
Conclusions

As students and future physicians our primary role is to help identify patients who are connected to the military. This will allow us to provide this population with the necessary resources and help improve their health care.

Resources for patients

A number of services are available for veterans, but the large number of options can be confusing to navigate. Moreover, the optimal resource for each veteran depends on age, disabilities, length of service, etc.

A good starting point is to direct the veteran to connect with their local veteran advisor via www.MassVetsAdvisor.org.



How is family affected?

- Health care providers need to be aware of how war affects the entire family.**
- When the soldier goes to war the family goes to war. Family members may have increased stress from thinking about their loved one at war, taking over extra responsibilities, or handling financial issues.

- Life continues when the soldier goes to war:

"Simple things like changing a bedspread, getting a new piece of furniture, or moving the furniture all have a big impact. It tells the soldier that life continued while they were gone. While they put their life on hold, others' lives continue."

Service project: Political Engagement and Advocacy for Veterans



On October 28, 2015, the UMass Veterans' Health Clerkship Team traveled to the MA State House to participate in a health and wellness fair. Students administered flu shots and conducted BP screenings to state legislators and employees. Students also asked state officials about veterans' health and advocated on veterans' behalf. In addition to participating on this day, students attended two meetings of the Massachusetts Legislature's Joint Commission on Veterans' Housing & Long-term Care and the Department of Veterans Services, which gave them insight into the political process behind veterans' health.