



Track Session Workshops – October 21-22, 2013

Monday - Workshop Session 1 - 10/21/2013 10:15AM to 11:30AM

Behavioral Health Clinicians/Treatment Providers

Intro to Cognitive Processing Therapy for Veterans

Patricia Resick, Director of the Women's Health Sciences Division of the National Center for PTSD at the Veterans Affairs (VA) Boston Healthcare System

Although Cognitive Processing Therapy (CPT) is being implemented throughout the VA and DoD, it is important to conduct clinical trials to determine how well CPT works and for what symptoms and populations. This talk will review the current state of the literature and will provide information about studies that are currently underway.

Cultural Competence

Cultural Competence: The Key to Meeting the Mental Health Needs of Latino Veterans

Pierluigi Mancini, PhD, CEO, CETPA, Inc.

There are more than 1.2 million Hispanic veterans and the Department of Veterans Affairs reports that 39 percent of Hispanic veterans suffer from post-traumatic stress disorder—a condition they will have to cope with for the rest of their lives. With more and more Latinos serving in the military, it is important that we understand the circumstances confronting this population so we can better support every veteran. This session will explain the reasons behind the recent rise of Latinos serving in the military and at the unique social and cultural barriers they face in receiving post-traumatic stress disorder treatment that is often a result of their service.

Gender, Trauma & the Military

Karen Kelly, Director, Circle of Recovery

In many military settings, service members have reported experiencing a range of unwanted sexual behaviors that they may find distressing. These experiences can happen to both women and men. "Military sexual trauma" or MST as the term is used refers to experiences of sexual assault or repeated, threatening acts of sexual harassment. This presentation is designed to increase cultural awareness of providers, family members and others who are either seeing clients or who are survivors of sexual trauma. Through information dissemination learning will be enhanced by exploring how to better serve survivors of sexually traumatic situations.

Families, Veterans and Peers

How to Establish a Veterans Information and Referral Office (VIRO) in Your Community

Ronald Hackney, Transition Patient Advocate, Atlanta VA Medical Center

The mission of the Veterans Information and Referral Office (VIRO) is to provide veterans benefits information and resource referral within the community where the veteran resides. The VIRO utilizes community volunteers who want to serve those who have served from their local community. The volunteers working at these locations are trained to: Identify veterans who are having a difficult time transitioning from military to civilian life; refer those who have continued questions about benefits to appropriate resources; and converse with those who may just need to talk with a fellow veteran. The veteran will be connected to the appropriate benefits, services, and entitlements subject matter expert in the most streamlined manner possible. A VIRO Office allows for “first line” assistance for veterans within their respective county or city. This training session will cover: Roles and Responsibilities of VIRO Host Site; Establishing a Host Site POC; Volunteer Staffing; VIRO Procedures; and lastly, VIRO Coordinator and VIRO POC working together.

Resiliency through Meditation: New Optimism for Wellness & Sustainability for Veterans, Military Personnel, & Their Families

Tracy Dyson, CEO, Tracy Quantum Consulting

This cutting-edge training program will address practical ways to manage PTSD, TBI and combat stress through the scientific nature of mindfulness meditation. You will be introduced to a variety of meditation modalities, beginning with a resilient mind and gradually progressing to the more advanced resiliency exercise meditation to address PTSD symptoms.

Jail Diversion Trauma Recovery Program Toolkit

Jail Diversion Treatment Program Providers’ Panel Discussion

Melanie Dallas, COO, Highland Rivers CSB (Pickens, Gilmer, and Fannin Counties)

Sean Fucci, JDTR, Charlotte, NC

Amanda Tillman, Clinical Director, Gateway Behavioral Health CSB (Savannah)

Bedford “Chip” Forte’, Program Coordinator, DeKalb County Diversion Treatment Court

Assisting an Individual with a Criminal Record to Obtain Employment

Debbie Walker-Lass, President, WORKTEC

This session will explore how to assist an individual with one or more mental health issues with finding employment regardless of a criminal record history. Topics will include criminal records discussion; how to ascertain if a CR records check is accurate, and what steps to take if it is not; how to be honest on an application while also disclosing skills gained in custody or during rehabilitation; and an introduction to supported - employment principles. This session will also address targeted strategies as a means of community reintegration. Tax credits for employers will also be discussed briefly.

Sustainability: The Next Big Thing Begins Now

Jac A. Charlier, Director, Center for Health & Justice, Treatment Alternatives for Safe Communities, Inc. (TASC)

This interactive workshop will present both conceptual and practical program sustainability. Specific to the groundwork already done in Georgia, participants will also discuss Sustainability 2.0, which refers to the sustainability concepts designed for the time period after the initial grant funding has expired. Sustainability 2.0 encourages innovation in thinking about next steps to keep the vision of the program going forward. Participants will be asked about their programs, and likewise will be able to share and inquire about their ideas.

Law Enforcement/Community Corrections

PTSD and Violence Risk Assessment for Law Enforcement

James McDonagh, Ralph H. Johnson VA Medical Center, Charleston, SC

This presentation addresses the physiological and behavioral relationship between Post-traumatic Stress Disorder (PTSD) and violence. The presentation begins with a review of PTSD from a behavioral and medical/clinical perspective, and then addresses co-occurring conditions. The second section of the presentation compares and contrasts violence secondary to PTSD versus other forms of violence – both impulsive/affect-driven and predatory forms of violence. The presentation then focuses on de-escalation techniques unique to the pathways of violence secondary to PTSD. Violence risk associated with other chronic and/or severe forms of mental illness is also discussed, along with commentary regarding the assessment of imminent violence risk and the nature of academic-derived violence risk assessments in general.

Public Safety De-escalation Tactics for Military Veterans in Crisis (PSDTMVC) [To be repeated in Session 2]

William Micklus, Lead Trainer, Upper Midwest Community Policing Institute

The PSDTMVC program is designed to enhance the skills and capabilities of law enforcement officers and relevant public safety personnel when encountering critical incidents involving veterans in crisis. Specifically, the scope of this program is to measurably increase the skills and abilities of participants in addressing veterans in crisis by providing them with proven verbal de-escalation tactics and specific information regarding resources available to veterans to cope with the challenges of reintegration into civilian society.

Monday - Workshop Session 2 - 10/21/2013 1:30PM to 2:45PM

Behavioral Health Clinicians/Treatment Providers

Eating Disorders, Trauma, and the Military

Susan Rawls, MS, LPC

The connection between trauma and the development of eating disorders has been documented for decades, but prevalence rates of eating disorders among military personnel has largely been ignored until recently. As many as 10 million women and 1 million men in the U.S. battle anorexia or bulimia. Mounting evidence suggests that eating disorders are higher among service members than among civilians. Research suggests that women in the military are 4 percent more likely to develop an eating disorder than women in the general population. Additional study outcomes have found eating disorders to be as high as 33 percent within the armed forces. It is easy to understand that the military culture of strict discipline and perfection could contribute to eating disorder behavior, but what are the specific contributing factors within the military? Is it the physical fitness rigor? Is it Post-Traumatic Stress Disorder (PTSD) resulting from combat or another type of trauma? This presentation will explore the research data, causative factors, and implications for treatment as well as how to help a family member or friend suffering with an eating disorder.

“Honey, I’m Home!” - Family Dynamics Post-deployment

Anna Jones, Military Family Life Consultant, Georgia National Guard

Deitra Taylor, Clinical Counselor, Georgia National Guard Psychological Health Program

This presentation will discuss the challenges service members and families may face when returning home from a deployment. These challenges have varied effects on service members, spouses, children and other family members. We will discuss coping techniques for everyone. We will also explain why it is common for service members to experience challenges and provide suggestions for avoiding potential harm as a result of post-combat risk-taking behavior. This presentation will also cover the process and challenges of reintegration for the single service member and offers tools and coping strategies for a successful journey. Finally, we will discuss what to do if you recognize these behaviors in a service member and resources that are available for support.

Cultural Competence

PTSD & Aging Veterans

Amy Stevens, EdD, LPC, Arcadian Resources

This workshop explores the experience of veterans who appear to be growing old before their time. A growing body of evidence indicates that cancer, heart disease, diabetes and Alzheimer's Syndrome are diagnosed in military personnel at a much higher and earlier rate than the general civilian population. Research studies on Aging Syndrome due to combat and military stress, Late Onset Stress Symptomology (LOSS), the Normative Aging Study and Updates on Older Vets are discussed.

Why Cultural Competence Must Inform Trauma

Pierluigi Mancini, PhD, CEO, CETPA, Inc.

Research suggests that although there is a universal biological response to trauma, cultural factors can influence the biopsychosocial experience of trauma and subsequent traumatic stress reactions. Ethnocultural factors play an important role in an individual's vulnerability to, and experience and expression of traumatic stress, as well as one's response to trauma treatment. Culturally-appropriate trauma-informed care requires attention to be paid to the client's values and beliefs about health and illness. Behavioral health treatment providers must understand the dynamics and impact of trauma on people's lives. Attention must also be paid to cultural variations in the client's experience of and response to trauma. This session will address how to recognize cultural variations in the subjective perception of trauma and traumatic stress responses.

Families, Veterans and Peers

Daddy's Home: Helping Parents Explain the Invisible Wounds of War, Including PTSD, to Their Small Children

Carolina Nadel, MD, Carolina Nadel Illustrations

The presentation will cover "Daddy's Home", a picture book that helps parents begin to talk about the invisible wounds of war, including post-traumatic stress disorder (PTSD), to small children. Parents returning home from active military service may have trouble reintegrating into civilian life and this book depicts these difficulties from a child's point of view. The talk will discuss the author's motivation for creating the book, how she chose to represent PTSD in a children's book, why this topic is important and the major message a family living with PTSD should take away.

There is Hope in this Crisis: Mental Health 101

Katherine L. Davis, MEd, MTS, LPC, Program Coordinator III, Carl Vinson Institute of Government

When we are in the midst of a crisis, it is difficult to believe that anything positive can come from the upset, confusion and fear we are experiencing. It can be helpful, when emotions are more stable, for families to consider managing crisis as a component of the hope-filled process of recovery. This interactive session, designed for families, veterans and peers, will provide a basic understanding of mental health/illness, including the impact of trauma and substance abuse. We will discuss basic approaches for managing a crisis while engaging in recovery – which is based in hope.

What Can Communities Do to Support Military Families?

Qwynn Galloway Salazar, Clinical Care Consultant, Trauma and Anxiety Recovery Program, Emory University School of Medicine

In this session we will discuss the needs and challenges of military families, and the impact the return from deployment can have on these special families and the communities in which they live. The goal of the session is to encourage community stakeholders to support military families. This session will prepare the audience to: Become aware of the needs and challenges of military families in their communities; meet the needs of military families in practical and appropriate ways; equip stakeholders with strategies for taking action; and, assist stakeholders in developing community action teams.

Jail Diversion Trauma Recovery Program Toolkit

Best Practices - The Who, What, When, Where, Why, and How of Establishing a Veterans Treatment Court

The first Veterans Treatment Court was founded by the Honorable Robert Russell in Buffalo, New York in January, 2008 after he noticed an increase in the number of veterans appearing on his Drug Court and Mental Health Court dockets facing charges stemming from substance abuse and/or mental health disorders. In just five years, there are over 120 Veterans Treatment Courts across the nation serving thousands of veterans. This session will cover topics such as the veteran target population, how to establish a Veterans Treatment Court, the components of these programs and how entities from the local, state and federal level are coming together to assist justice-involved veterans.

Current State of the Jail Diversion Trauma Recovery in Georgia - Presentation of Evaluation Results

Theresa Wright, Public Service Associate, Governmental Services and Research, Carl Vinson Institute of Government

Brian Simmons, Graduate Research Assistant, Carl Vinson Institute of Government

This presentation will provide a brief history of the Georgia JDTR program and outcome results, highlighting consumer successes and improvements. Outcome results from national JDTR programs will also be discussed. Program evaluation challenges and successes will be shared, with practical suggestions and guidelines for conducting program evaluations with similar client populations.

Law Enforcement/Community Corrections

Operation SAVE - Suicide Prevention Training for Law Enforcement, Community Corrections Professionals

Mark De Santis, Ralph H. Johnson VA Medical Center, Charleston, SC

Suicide Management for Law Enforcement is designed to provide law enforcement officials with tools to assist L in the field when dealing with individuals that present with suicidal ideation. This presentation will help law enforcement officials understand the nature of suicide and properly assess an individual even if they initially may deny suicidal ideation. This presentation will review statistics regarding suicide in various populations, expose popular myths associated with suicide, review risk factors, symptoms, psychosocial stressors and protective factors linked to suicide. The presentation will also summarize information regarding the national prevention efforts by Veteran Affairs and discuss the use of safety planning. In conclusion, the session will provide an overview for how to respond to a suicide attempt.

Public Safety De-escalation Tactics for Military Veterans in Crisis (PSDTMVC) [Also presented in Session 1]

William Micklus, Lead Trainer, Upper Midwest Community Policing Institute

The PSDTMVC program is designed to enhance the skills and capabilities of law enforcement officers and relevant public safety personnel when encountering critical incidents involving veterans in crisis. Specifically, the scope of this program is to measurably increase the skills and abilities of participants in addressing veterans in crisis by providing them with proven verbal de-escalation tactics and specific information regarding resources available to veterans to cope with the challenges of reintegration into civilian society.

Monday - Workshop Session 3 - 10/21/2013 3:00PM to 4:30PM

Behavioral Health Clinicians/Treatment Providers

Cognitive Behavioral Therapy & Virtual Reality Applications in the Treatment of PTSD for Wounded Warriors

Josh S. Spitalnick, PhD, Director of Research, Virtually Better, Inc.

Technology-augmented interventions address many of the barriers to effective treatment, including availability, accessibility, and efficacy. Given recent advances in the availability and affordability of smart/mobile devices and tablet technologies, it is our belief that a paradigm shift in the delivery of evidence-based treatments is imminent for cognitive and behavioral health conditions. This presentation will highlight research and clinical projects that develop, evaluate, and disseminate technology-enhanced clinical tools, including those designed to

address the needs of Wounded Warriors and their family members. Session participants will witness or interact firsthand with such technologies during the presentation. A summary of the benefits and challenges associated with incorporating enabling technologies into research and clinical practice will also be presented.

Empowerment through Reintegration: Understanding Trauma as it Relates to Nurturing Self-Motivation, Hope, and Relationship-Building in Returning Service Members

Pamela Larde, PhD, Assistant Professor of Research and Education, Mercer University

The purpose of this session is to highlight the existence and benefits of a rarely explored concept known as post-traumatic growth. Much is discussed about post-traumatic stress disorder (PTSD), but very little attention is given to the opposite – the possibility of taking the road to growth after experiencing trauma. This session's goal is to provide caregivers and other professionals with information needed to begin the healing process in themselves, the service member, and other members of the supportive community. As a means of preparing family members, caregivers and other professionals for the return of a service member, four theories will be introduced and translated into practical strategies that can be employed before and during the service members' reintegration process – all with the intent to facilitate post-traumatic growth in returning service members.

Traumatic Brain Injury: Key Information for Behavioral Healthcare Providers & the Military and Civilian Communities

Maj. Michael -Renee Godfrey, 413th ASTS OIC, Behavioral Health OIC, Self-Inspection

The goal of this workshop is to provide an introduction to Traumatic Brain Injury (TBI), including mechanisms of TBI as well as signs, symptoms, severity levels, and rates of TBI in military populations. Recommendations for assessing, managing, and treating TBI will be reviewed. Care coordination strategies, resources, and services available to patients with TBI and their families will be reviewed. This workshop is intended for anyone interested in gaining competency in working with military members who have sustained a TBI, including but not limited to mental health providers, nurses, doctors, law enforcement, community advocates, and family members.

Cultural Competence

The Spiritual Impact of War

Chaplain Jeffrey Voyles, Director/Clinical Supervisor, U.S. Army Family Life Chaplain Training Program

Understanding Military Culture

Capt. Kevin Wilson, State Resiliency Coordinator, Georgia Army Guard

The focus of this workshop will be on exploring aspects of military culture that are unique challenges to, "citizen soldiers." Participants will be introduced to the dynamics and demands of military culture, deployment cycles, and how these impact the lives of the Army National Guard service members, their families and the surrounding community. Because our service members live in two worlds, that of military and civilian, and depend on their communities to provide behavioral health services, it is imperative that these communities be equipped to be more understanding, sensitive and responsive to meeting the needs of this population.

Families, Veterans and Peers

Resiliency and Spiritual Fitness: Enhancement of Readiness, Performance, and Reintegration Skills for Military Personnel and Their Families

Chaplain Ralph DeVaul

Jail Diversion Trauma Recovery Program Toolkit

Judge-to-Judge Panel & Roundtable Discussion

Judge Brenda Weaver (Chief Judge, Appalachian Judicial Circuit) – Facilitator

Judge Berryl Anderson (Chief Magistrate, DeKalb County Magistrate Court)

Judge Penny Haas Freesemann (Chatham County Superior Court/Veterans Court)

Navigating the VA System & Other Community Resources for Veterans

Arlena Freeman, Case Manager, JDTR Expansion Site, Highland Rivers CSB - Facilitator

Antoinette Joiner, Case Manager, JDTR Pilot Site, Gateway Behavioral Health - Facilitator

Patricia Bradford, VISN-7 Network Homeless Coordinator, Department of Veterans Affairs

Troy Brandon, VA Compensation Specialist

Ron Hackney, Transition Patient Advocate, Atlanta VA Medical Center

Jenifer Turner-Reid, VISN-7 Deputy Network Homeless Coordinator, Department of Veterans Affairs

Fawn Alexander, NE Georgia Homeless Veterans Shelter

Law Enforcement/Community Corrections

Law Enforcement Tools for Supporting Veterans in Transition

Sgt. Tanya Schmell Zaglauer, Senior Police Officer, West Des Moines Police Department Community Education/Outreach

One of the best tools that we can use when dealing with veterans is having a perspective of the stressors in their life, as well as knowing the resources that are provided to veterans. This session will equip law enforcement and other first responders with awareness of and de-escalation tactics for encountering crisis situations resulting from veteran transition. The presentation will identify wartime stressors that active, reserve and guard personnel experience, and stress-related disorders that are occurring among veterans today. We will discuss the stigma that can be associated with psychological health problems and identify the factors that discourage soldiers from seeking health services. The presentation will address the most serious problems that veterans today are experiencing after their return home, as well as identify local, state, federal and private support resources available to veterans.

Mental Health First Aid (MHFA)

Ellyn Jaeger, Director of Public Policy & Advocacy Mental Health America Georgia

MHFA is evidence based training program that has been proven successful both within the United States and internationally. The overall goal of MHFA is to improve the mental health knowledge and skills of the public in responding to early stage mental illness and mental health crises. Additional advantages to this program are that it de-stigmatizes mental illness while also improving the mental health of those who are trained.

Tuesday - Workshop Session 4 - 10/22/2013 10:00AM to 11:15AM

Behavioral Health Clinicians/Treatment Providers

Transactional Analysis Therapy with Military Couples

David J. Carter, Professor, University of Nebraska-Omaha

The exact cause of Post-Traumatic Stress Disorder (PTSD) is unclear, but psychological, physical, and social factors are involved. PTSD changes the body's response to stress, affecting the stress hormones and chemicals that carry information between the nerves (neurotransmitters). Having been exposed to trauma in the past may also increase the risk of PTSD. Transactional Analysis (TA) is used to analyze the structure of problems, including separating the past from the present. The philosophical assumptions of TA can be summed up in three statements: 1) Everyone has worth, value and dignity, 2) Everyone has the capacity to think, and 3) People

decide their own destiny, and these decisions can be changed. This interactive presentation will take the participants step-by-step through the successive stages of the therapeutic process when working with military couples, illustrated by an actual case study that traces the couple's progress from first contact through the implementation of the planned treatment sequence.

Trauma, Addictive Disease and Other Co-Occurring Disorders

Vonshurii Wrighten, GA Dept. of Behavioral Health Office of Addictive Diseases

The purpose of this presentation is to address the increase in substance use disorder and substance misuse during the times of war. During this session we will examine the roots causes of this phenomenon, and the military and civilian responses to the disorder. In addition we will examine how the culture in the military contributes to the onset of substance use disorders.

Cultural Competence

Military Sexual Trauma: Dispelling the Myths and Connecting Community Resources for Proper Veteran Advocacy

BriGette McCoy, Founder/CEO, Women Veteran Social Justice Social Media and Online Peer Support Program

This workshop will illuminate imminent challenges, which MST victims face within the UCMJ and how those translate to further legal challenges when exiting the military. Connecting veteran programs and community supports through innovative processes will be highlighted.

Families, Veterans and Peers

In Our Own Voice: Trauma

Alisa Porter, Decatur/DeKalb Chapter, NAMI Georgia

In Our Own Voice presentations enrich the audiences' understanding of how the over 58 million Americans contending with mental illness cope while also reclaiming rich and meaningful lives. It is presented by two persons with mental illness. The topics include Dark Days, Acceptance, Treatment, Coping and Successes, Hopes and Dreams.

Special Concerns of Military Spouses

Lisa Brown, Ascend Counseling

This conversation will cover the often "unspoken" concerns that military spouses carry for themselves, their service-member spouse and their children. The unique stressors that impact military families will be highlighted including the deployment cycle, PTSD and relocations. In addition, other family risk factors will be touched on in the context of military life. Identifying the needs of military spouses and ways to promote healthy resilience for self, marriage and family is this session's objective.

Transitioning from Combat to the Civilian World: Reintegrating Warfighters into their Next Mission

Adam Anicich, Acting Director, Congressional Liaison Service, US Dept. of Veteran's Affairs

This realistic look at America's Warfighters who transition out of combat environments into the civilian world will explore the challenges that veterans face – including social stigmas, employment challenges, interpersonal obstacles, and overcoming acquired injuries. We will examine both the structural and societal architecture that assists and limits veterans returning home, as well as discuss some of the major factors that continue to impact reintegration. This presentation will seek to stimulate thought and encourage action on some of the most influential subjects of this generation of veterans – employment, mental health care, and access to benefits. We will briefly highlight some of the community and corporate programs that have shown promise in helping Veterans reintegrate, and take an honest look at some of the things that aren't working. At the conclusion, there will be an open discussion on some of the best practices we have seen work across the country, as well as how we can best implement those successes in our own neighborhoods.

Jail Diversion Trauma Recovery Program Toolkit

Coming Home: Developing Faith-Based Initiatives for Meeting the Needs of Veterans

Timothy Johnson, PhD, CEO, Leadership 101 Training & Consulting Services, LLC

Panel Discussion: Integrating Peer Specialists/Support/Services into Your Program

Tom Houchins, Brain Injury Association of GA Peer Visitor for Veterans Program

Bob Poston, Vice Chair, JDTR State Advisory Council

Charles Willis, Director, Self-Directed Recovery Program, GA Mental Health Consumer Network

Jean Dervan, Director, NAMI Georgia

Law Enforcement/Community Corrections

How Being Trauma Informed Improves Criminal Justice Responses-(Repeats in Session 5)

Everett Tolbert, S/T, MA, JDTR Pilot Site Program Director/Gateway Behavioral Health

Over 1.6 million Americans have now served in Iraq or Afghanistan. Various studies estimate prevalence of Post Traumatic Stress Disorder from 16 to 25% for returning veterans. In addition, service members from previous service eras are involved in the criminal justice system. Criminal Justice professionals across the country encounter veterans daily in the course of their duties. Most have not been trained to identify manifestations of trauma and Post Traumatic Stress Disorder. Criminal Justice system responses can reduce re-traumatization or exacerbate pre-existing trauma. This presentation will: Provide an overview of the mental health needs of returning veterans and discuss current prevalence of justice involvement of veterans; describe manifestations of combat stress and PTSD that may be observed by criminal justice professionals; report prevalence data of PTSD among justice involved veterans; describe how PTSD can lead to police contact and or criminal behavior; describe the importance of peer support in veteran criminal justice responses.

What about You? - The Link between Law Enforcement Performance and Overall Mental Health Wellness

Kevin Condon, Enhanced Community Partnership MH Clinical Contract Liaison; former Veterans Justice Outreach Specialist, Dept. of Veterans Affairs

Currently, there is much needed attention regarding the interaction between law enforcement and citizens with mental illness. In comparison, the issue of the mental health and general wellness of law enforcement personnel gets little notice. Participants will be reminded of the importance of maintaining balance in their personal lives in order to provide quality service as helping professionals, while avoiding compassion fatigue. As a retired law enforcement professional and current mental health professional, the presenter will provide personal insight into the potential outcomes law enforcement personnel may experience when balance is lost. Participants will also be educated on signs and symptoms for recognizing wellness concerns in themselves and their colleagues. In addition to identifying resources for support, appropriate action steps will be reviewed, including the recognition of personal limitations and the need to refer when appropriate.

Tuesday - Workshop Session 5 – 10/22/2013 1:00PM to 2:00PM

Behavioral Health Clinicians/Treatment Providers

Georgia Stars Behavioral Health Program

Dietra Taylor, Clinical Counselor, Georgia National Guard Psychological Health Program

People associated with the military have specialized needs, speak their own language, and have a higher need for mental health services than ever before. Behavioral health providers often express a desire to serve this population but may not know how they can best accomplish this. The two-fold goal of the Georgia Stars Behavioral Health Program (GA SBHP) is to address these concerns. First, GA SBHP intends to recruit and train interested civilian behavioral health providers regarding military culture and treatment models that focus on the needs of the military population. The second aspect of this initiative is to create a registry as a resource for service members, their families, and referring professionals to access these specially trained providers. GA SBHP

will manage the registry to insure providers are qualified to be listed in the registry by licensure and completion of designated trainings. The purpose of this presentation is to briefly describe some of the mental health needs prevalent within military culture and provide information on the GA SBHP as a resource to address those needs.

Problem Gambling & the Military

Eric Groh, LPC

How do you recognize when agency consumers and veterans have gambling problems?? If they have substance and other addictions, there is a possibility they are also struggling with a gambling problem! The goals and objectives of this presentation are to provide attendees with a screening process and other tools to assess problem and pathological gambling in settings where comprehensive evaluation may not be feasible. Eric Groh, LPC will equip attendees with the skills necessary to quickly and competently identify and refer clients for evaluation and treatment for problem gambling. The presenter will provide research information relevant to PTSD, gambling and other addictions in veteran populations and a summary of demographic information for gambling in the State of Georgia.

Cultural Competence

Best Practices for Working with Deaf Veterans

Barry Critchfield, Director, Deaf Services, DBHDD

Amy Peterson, Deaf Services, DBHDD

Daily, people who are Deaf with behavioral health needs present to our programs and services, and often their experiences with the behavioral health system unintentionally result in a repetition of former traumatic events. This presentation will provide participants with a brief glimpse into the experience of being Deaf in Georgia today, and encourage helping professionals to perceive what life may be like for their consumers who are Deaf or who may have other communication challenges. The issues of Deaf Veterans will also be addressed for those who are returning from military service with hearing loss. It will provide resources which service providers can access to support these consumers.

Children & Trauma

Terry Freeman, LPC, Freeman Counseling & Consulting

In this seminar, participants will receive an overview of developmental tasks that children and adolescents need to accomplish throughout growing up and how trauma can impact healthy development. Unique stresses and distresses that military children may experience will also be discussed. Participants will learn about the main elements of a traumatic experience and how PTSD symptoms are typically manifested in children. Finally, strategies for support and healing of traumatized military children will be addressed.

Families, Veterans and Peers

Military Youth Initiatives in Georgia

Casey Mull, Extension Military Specialist, UGA Cooperative Extension

Military youth are like eggs; find out how in this workshop. From the chalaza, the albumen and the shell to hardboiled and inedible, participants will have an easy way to remember the needs of military youth. Using eggciting techniques, participants in this workshop will: 1) hear of innovative research taking place to support military-connected youth and families; 2) learn of the programming opportunities available for military-connected youth and families; and 3) develop their own action plan for supporting the children of military youth and veterans.

Suicide and the Military: Awareness, Prevention, and Coping

Sally Vander Straeten, ACSW, Suicide Prevention Coordinator, DBHDD

According to the Surgeon General's National Strategy for Suicide Prevention (2001), a gatekeeper is someone in a position to recognize a crisis and the warning signs that someone may be contemplating suicide. Gatekeepers

include parents, friends, neighbors, teachers, ministers, doctors, nurses, office supervisors, police officers, firefighters, and many others who are strategically positioned to recognize and refer someone at risk of suicide. This QPR training will be especially focused on military family members who will learn to: 1) recognize the warning signs of suicide; 2) know how to offer hope; 3) know how to get help and save a life.

Jail Diversion Trauma Recovery Program Toolkit

Panel Discussion: Community Planning & Partnerships for Jail Diversion Trauma Recovery Programs

Melanie Dallas, COO, Highland Rivers CSB - Facilitator

Kaye Coker, MSW, LCSW, Founder, Veterans Heart Georgia

Terri Timberlake, PhD, Director, Adult Mental Health, DBHDD

Judge Rhathelia Stroud, Presiding Judge/Director, DeKalb County Diversion Treatment Court

Judge Allen Wigington, Chief Magistrate, Pickens County Magistrate Court; Chair, Appalachian Judicial Circuit JDTR Local Advisory Council

This session will run as an open forum for each panelist to discuss how to establish and run community planning and stakeholder advisory councils and resource collaboratives to support Jail Diversion Program and veteran efforts in the community. Discussion will address challenges, who and how to engage, what stakeholders do you need and how to connect all community providers around the veteran effort.

Jail Diversion Trauma Recovery in Texas: Challenges & Successes in Program Implementation & State Policy Change

Gilbert Gonzales, Director for Crisis and Jail Diversion Initiatives with the Center for Health Care Services, San Antonio Texas

This presentation will provide an overview of a successful jail diversion program delivering dedicated services to veterans and providing extended community-wide benefits in treatment effectiveness and avoided costs. Program data and failures will be evaluated within the context of "lessons learned" and most effective strategies. Additional data will be presented on developing data fields for dissemination to community stakeholders and bringing the community network together for maximum advantage. This workshop will show how CIT, crisis care, and jail diversion efforts are strengthening the public safety net and saving lives.

Law Enforcement/Community Corrections

How Being Trauma Informed Improves Criminal Justice Responses –(Repeated Session)

Everett Tolbert, S/T, MA, JDTR Pilot Site Program Director/Gateway Behavioral Health

(Please refer to program description in Session 4)

How the Department of Veterans Affairs can Assist Law Enforcement with Veterans

Kevin Condon, Enhanced Community Partnership MH Clinical Contract Liaison; former Veterans Justice Outreach Specialist, Dept. of Veterans Affairs

The Department of Veteran Affairs provides formal outreach in the prisons and jails throughout the country via Veterans Justice Outreach (VJO) Specialists and Health Care for Re-entry Veterans (HCRV) Specialists. These mental health professionals assist law enforcement personnel and judicial system partners by working collaboratively to link eligible veterans to VA treatment resources such as mental health and substance abuse services, housing, and employment. One goal of these initiatives is to avoid unnecessary criminalization of mental illness and extended incarceration among veterans by ensuring that these veterans have access to VA services and benefits when clinically indicated and appropriate. Participants will be provided with information to enable them to access information and resources in order to provide professional and appropriate services to justice-involved veterans.

(This workshop listing is subject to change.)