Register for our email updates: ncgwg.org

Join us by live stream at www.facebook.com/govinst

To watch captioning during this meeting, go to: https://carolinascaptioning.1capapp.com/event/gwg

Meeting agenda and minutes: ncgwg.org/minutes-and-group-updates
SOCIAL DETERMINANTS OF VETERAN SUICIDE

5 Part Series - Panel Discussion
THURSDAY, NOVEMBER 18, 2021
2:00 - 3:30PM
Part III: MH/BH/EH After Effects

Moderator - Dr. Harold Kudler
Assoc. Consulting Prof.,
Duke Department of Psychiatry
and Behavioral Science

Martin D. Woodard
Program Director
Veterans Life Center

Lisa Peterson
Clinical Director
Stop Soldier Suicide

Kevin Smythe
Clinical Psychologist

PANELISTS

This meeting begins at 2pm each month.
Join the conversation on Zoom or watch LIVE on the Governor’s Institute
Facebook page.

Upcoming Events:
Part IV: Resulting Instabilities
December 16, 2021

Part V: Restoration of Self Worth
January 27, 2022

MISS A SESSION?

WATCH PART 1  WATCH PART 2

CLICK HERE TO JOIN VIA ZOOM

Funded by Substance Abuse and Mental Health Services Administration (SAMHSA), North Carolina Department of Health and Human Services, Division of Mental Health, Developmental Disabilities, and Substance Abuse Services, and the Governor’s Institute
NC GWG/ Governors Challenge to Prevent Veteran Suicide Symposium Series, Part III: How Trauma affects Mental, Emotional and Behavioral Health outcomes

Trauma

ACES  Physical
PTSD   MST
TBI    Moral Injury

Mental Health
Emotional Health
Behavioral Health
Social Determinants of Veteran Suicide Series
Part III of V: The Role of Trauma

Moderator:
Dr. Harold Kudler, Assoc. Consulting Prof., Duke Dept. of Psychiatry and Behavioral Science

Panelists:
Martin Woodard, MS, LCAS, CPC, Veterans Life Center
Lisa Petersen, MS, CRC, LCMHC, CLC, Stop Soldier Suicide
Kevin Smythe, PsyD, US Department of Defense
A Perspective From The Inside – The Veterans Life Center
What We Are Observing

• Upon Arrival
  • Emotional
  • Physical
  • Family Discord
  • SUD
Traumas & Self-Medication

- Prior to Enlistment
- Service Completed
- Successes & Achievements
- Adjustment Challenges
- Results Vary
Our Response (Purpose-Identity-Training)

Purpose:
- Stabilization
- Individualized Veterans Reintegration Plan (IVRP)

Identity:
- “Who Do You Want to Become”? 
- Resilience & Gratitude

Training:
- Health Management
- Occupation
- Social Supports/Connectedness
SOCIAL DETERMINANTS OF VETERAN SUICIDE

Lisa Petersen MS CRC LCMHC CLC CMBM IHP
We operate under the impression that everyone has experienced some form of trauma.

However, not everyone will understand the impact of their trauma on their current circumstance.

Some trauma is clear and obvious, while other trauma has laid dormant and unnoticed. In order to fully embrace our goal of wellness for our clients, we hold their lived experience with great care, sensitivity, and appreciation for our role in their journey.
Think outside of TAU. Break through the initial learnings and one-size-fits all, or band-aid approach to addressing the mental health needs of our nation's service members.

We should refuse to look at our clients through a one-dimensional lens. Don’t allow your full focus to live in the diagnoses. We cannot say that we have helped a client on their wellness journey without recognizing the entirety of our client’s experience.

This means that their biological vulnerabilities, psychological challenges, and social experiences are all weighted equally. We must always use the words we want others to use when speaking about the client. We want to be spoken change - we walk the walk until others can.
Positive Psychology

- To appropriately use positive psychology, clinicians should display the ability to see beyond the presenting situation. This means recognizing the contributing factors to how a client is presenting, reframing a situation to acknowledge the positive/realistic side, and to remain unswayed by the client's current presentation. Many times, we must see and believe in the potential for a positive outcome long before our clients can see it.
Common Veteran Social Determinants

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACES</td>
<td>Trauma pre-service (How many coats)</td>
</tr>
<tr>
<td>Trauma during Service</td>
<td>(Exposure, MST, TBI, combat)</td>
</tr>
<tr>
<td>Poor Transition</td>
<td>(Status and return, unable to complete previous or planned skills)</td>
</tr>
<tr>
<td>Culture Loss</td>
<td>(Relationships and loneliness)</td>
</tr>
<tr>
<td>Environmental Challenges</td>
<td>(Abuse/violence homelessness, legal, financial issues, etc.)</td>
</tr>
<tr>
<td>What’s next</td>
<td>(Connecting the dots, and triaging care such as TIC and filling the gaps)</td>
</tr>
</tbody>
</table>
TRIAGING THE ROOT VULNERABILITY
References


- https://link.springer.com/chapter/10.1007/978-1-4419-1526-9_15

Social Determinants of Veteran Suicide Series
Part III of V: The Role of Trauma

PANELIST DISCUSSION
WITH Q&A
Next Meeting:

December 16, 2021
Social Determinants of Veteran Suicide Series, Pt. IV of V
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Meeting agenda and minutes: ncgwg.org/minutes-and-group-updates