

# Veterans and Addictions: Homelessness and Post-Traumatic Stress Disorder

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SHELIA CUNDIFF, LCSW, CADDC

# Veterans



# Agenda

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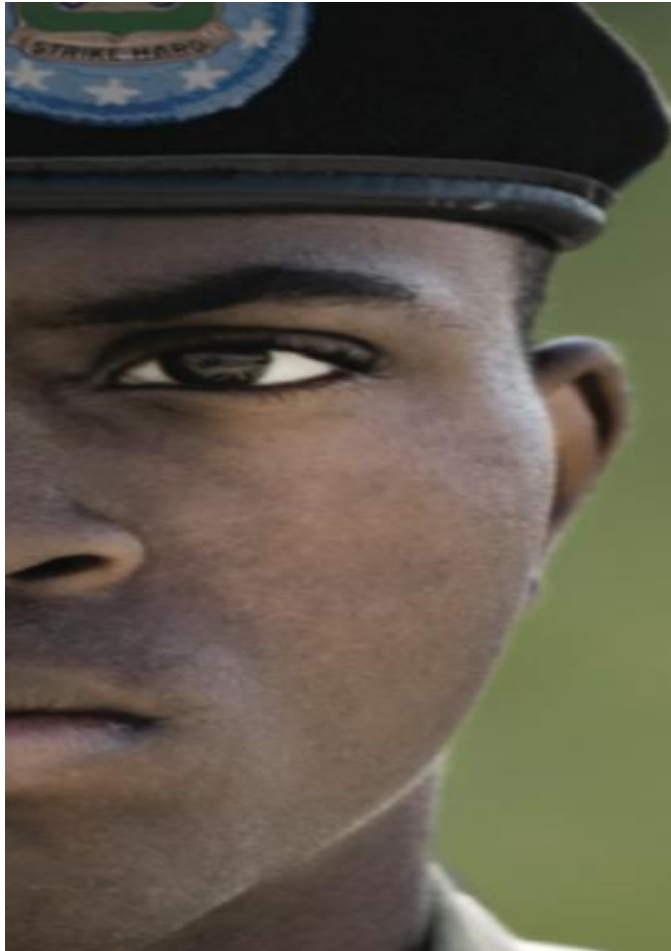
- ❑ Stigma surrounding addiction treatment for veterans.
- ❑ Causes of Homelessness among veterans.
- ❑ Post-Traumatic Stress Disorder/Mental Health Disorders
- ❑ Case Management
- ❑ Self-Care

# Veterans

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- What would you like to discuss?
- Briefly tell your interest in working with veterans.

# Veterans



## **THE SOLDIER'S CREED**

**I am an American Soldier.**

**I am a Warrior and a member of a team.**

**I serve the people of the United States and live the Army Values.**

**I will always place the mission first.**

**I will never accept defeat.**

**I will never quit.**

**I will never leave a fallen comrade.**

**I am disciplined, physically and mentally tough, trained and proficient in my Warrior tasks and drills.**

**I always maintain my arms, my equipment and myself.**

**I am an expert and I am professional.**

**I stand ready to deploy, engage, and destroy the enemies of the United States of America in close combat.**

**I am a guardian of freedom and the American way of life.**

**I am an American Soldier.**

# Veterans

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- Definition of veteran:
- Under Federal Law a veteran is person, who served honorably on active duty in the Armed Forces of the United States.
- Is it true? Do you believe it? Are there others?
- Are you a veteran?
- Have you served in the Military?
- Some persons do not consider themselves a veteran because they didn't serve in wartime or in a war zone.

# Veterans

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# Military Acronyms

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- OIF- Operation Iraqi Freedom
- OEF-Operation Enduring Freedom
- OND- Operation New Dawn
- Operation Desert Shield/Operation Desert Storm
- AWOL- Absent Without Leave
- MOS-Military Occupational Specialty
- FOB-Forward Operating Base
- IED-Improvised explosive device



# Veterans and Addictions

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- ❑ SAMSHA Reports;
- ❑ 23.4 million veterans in the United States
- ❑ Between 2004-2006 7.1% of U.S. Veterans met criteria for Substance Use Disorder.
- ❑ Departments of Housing and Urban Development(HUD) and Veterans Affairs(VA) report;
- ❑ Nearly 76,000 veterans were homeless on any night in 2009.
- ❑ Approximately 136,000 veterans spent at least one night in a shelter in 2009.
- ❑ Treatment Episode Data Set (TEDS) report;
- ❑ 21% of veterans in substance abuse treatment were homeless.
- ❑ 70% of homeless veterans experienced a substance use disorder.

# Veterans and Addictions

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SAMHSA, The CBHSQ Report May 7, 2015

2013 National Survey on Drug Abuse and Health reported,

- ❑ 1.5 million veterans age 17 or older had a substance use disorder in the past year, 1 in 15 veterans.
- ❑ National average is 1 in 11 in the same age group.
- ❑ The rate of substance use disorders among veterans ranged from 3.7% pre-Vietnam-era to 12.7% among those who served since September 2001.

# Veterans and Addictions

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- ❑ Active Duty Military have a zero tolerance for illicit drug use.
- ❑ 99% of the time illicit drug use will result in a dishonorable or other than honorable discharge.
- ❑ Driving Under the Influence of alcohol will most likely result in a other than honorable, dishonorable. In rare occasions it may be a general under honorable discharge.
- ❑ Service men and women who have served their country in peacetime and war are being discharged for substance use disorders. Some without benefits.
- ❑ The United States was actively involved in a war from 2000-2014.
- ❑ Some members of the military were deployed to a war zone 2-5 times within those 14 years.

# Veterans

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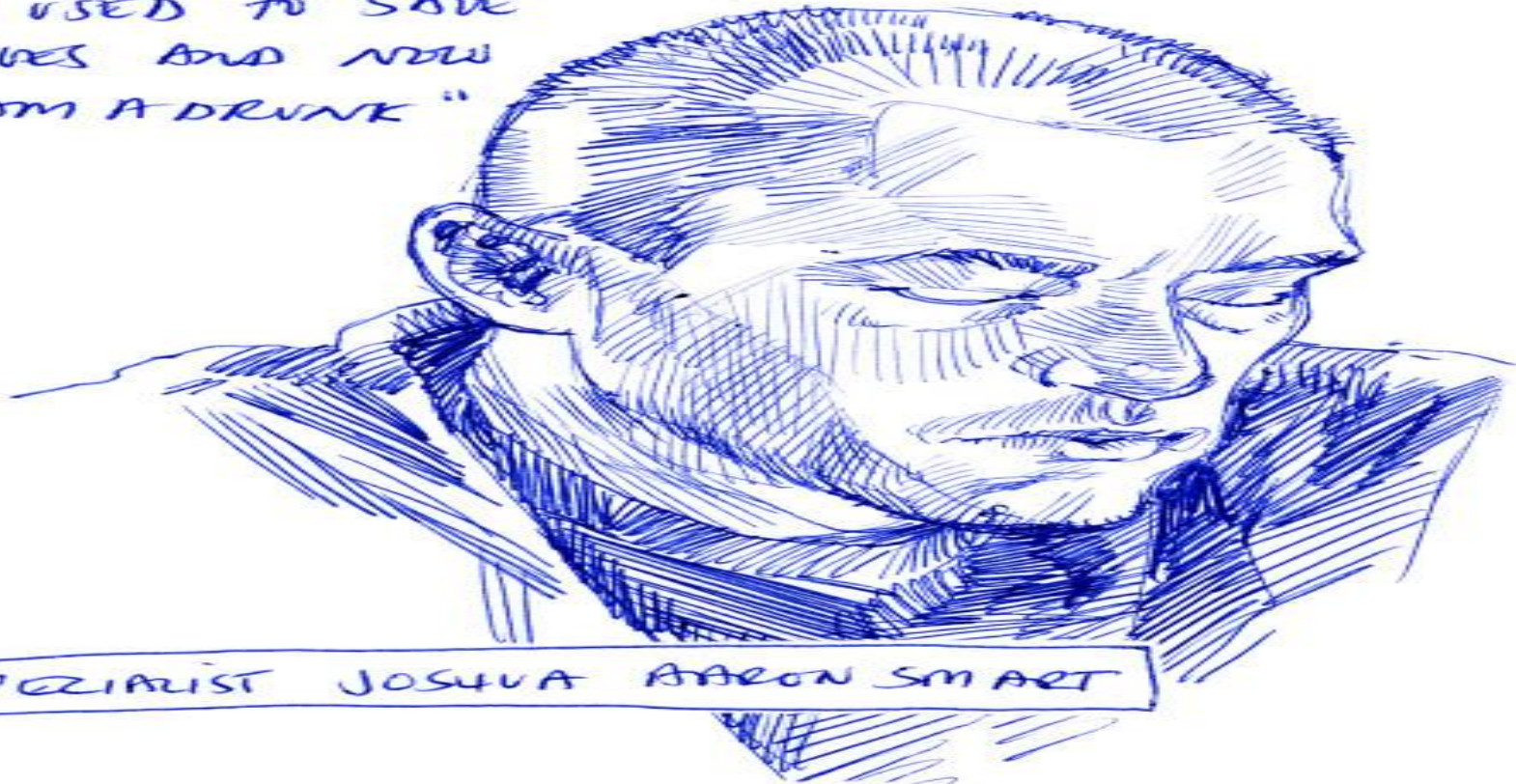
One VA Healthcare Users Study showed:

- ❑ More than 11 percent of OEF and OIF veterans have been diagnosed with a substance use disorder.
- ❑ Almost 22 percent of OEF and OIF veterans have Post-traumatic stress disorder and a substance use disorder.

# Veterans and Addictions

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"I USED TO SAVE  
LIVES AND NOW  
I AM A DRUNK"



SPECIALIST JOSHUA ABRAHAM SMART

Richard Johnson/The Washington Post/Getty Images

# Veterans and Addictions

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- ❑ Screening Instruments that can be used to determine if a person has a substance use disorder.
  - CAGE- Empirically supported and shown to accurately predict 70%-80% of soldiers with a substance use disorder.
  - C-Have people ever felt that you should **CUT** down on your drinking?
  - A-Have people ever **ANNOYED** you by criticizing your drinking?
  - G-Have you ever felt bad or **GUILTY** about your drinking?
  - E-Have you ever had a drink first thing in the morning to steady your nerves or get rid of a hangover (i.e., as an **EYE-OPENER**)?

# Veterans and Addictions

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## ❑ Substance Use Disorder DSM-5

- ❑ A problematic pattern of substance use leading to clinically significant impairment or distress, as manifested by at least two of the following, occurring within a twelve month period:
  - Substance is often taken in larger amounts or over a longer period than was intended.
  - There is a persistent desire or unsuccessful efforts to cut down or control use.
  - A great deal of time is spent in activities necessary to obtain the substance, use the substance, or recover from its effects.
  - Craving, or strong desire or urge to use the substance.
  - Recurrent substance use resulting in a failure to fulfill major role obligations at work, school, or home.

# Veterans and Addictions

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- Continued substance use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the substance.
- Important social, occupational, or recreational activities are given up or reduced because of the substance use.
- Recurrent substance use in situations which are physically hazardous.
- Substance use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by the substance.



# Veterans and Addictions

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☐ Tolerance, as defined by either of the following:

- A need for markedly increased amounts of alcohol to achieve the intoxication or desired effect.
- A markedly diminished effect with continued use of the same amount of alcohol.

☐ Withdrawal, as manifested by either of the following:

- The characteristic withdrawal syndrome for the substance (refer to Criteria A and B of the criteria set for the substance withdrawal). All are listed after the substance in DSM 5.
- The substance or a closely related substance is taken to relieve or avoid withdrawal symptoms.

# Veterans

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- Barriers to Substance Use Treatment;
- Homelessness.
- Distrust of the VA and government.
- Veterans with Comorbid Disorders.
- Persons who served in the Military and were discharged under other than honorable conditions, this includes veterans of war.
- A sign of weakness. What will other people think of me?
- I will lose my VA benefits.
- Nobody understands someone like me.
- Your thoughts?

# Veterans and Addictions

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- Outpatient Treatment Approaches;
- Seeking Safety
- Seeking Strength. Designed for military and veterans.
- Motivational Interviewing
- Stages of Change
- Acceptance and Commitment Therapy
- Prolonged Exposure Therapy

# Veterans and Addictions

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- Treatment Options
- Safe Medical Detoxification, if needed. Detox is not treatment.
- Residential treatment in an inpatient setting for Dual Diagnosis or Substance Use Disorders.
- Intensive Outpatient Treatment.
- Dual Diagnosis Outpatient Treatment.
- Aftercare Program.
- Halfway House/Transitional Living House.

# Veterans and Homelessness



# Veterans and Homelessness

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- ❑ Causes of Veteran homelessness:
- ❑ Difficult culture transition from military to civilian life.
- ❑ Lack of social support.
- ❑ Lack of self-advocacy skills.
- ❑ Domestic Violence among women.
- ❑ Physical, sexual, and emotional trauma.
- ❑ Substance Use Disorders.
- ❑ Mental Health Disorders.
- ❑ Traumatic Brain Injuries.

# Veterans and Homelessness

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What some veterans in Louisville say about being homeless;

- Fear of living indoors.
- Fear of people.
- Lack of trust for people and institutions.
- I can't get help me because of my discharge status.

# Veterans

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# Veterans and Post-Traumatic Stress Disorder

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- ❑ SAMHSA-Post-Traumatic Stress Disorder(PTSD)
- ❑ PTSD is characterized as the development of debilitating symptoms following exposure to a traumatic or dangerous event.
- ❑ PTSD can be the result of war, car accidents, sexual trauma, physical trauma, emotional trauma, natural disasters.

# Veterans and PTSD

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## Common Reactions

- Recurrent thoughts of the event.
- Flashbacks and/or nightmares/bad dreams.
- Emotional numbness (Don't feel anything); reduced interest or involvement in work or outside activities (Not caring about anything, loss of interest in things once enjoyed).
- Intense guilt or worry/anxiety.
- Angry outbursts and irritability
- Feeling "on edge", hyperarousal/hyper-alertness.
- Avoidance of thoughts/situations that remind person of the trauma.
- Depression.

# Veterans and PTSD

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- PTSD's possible negative impact on the person
  - Relationship problems.
  - Diminished self of wellbeing. Isolation.
  - Alcohol and substance use/abuse.
  - High risk behavior.
  - Misconduct. Legal problems.
  - Employment problems.
  - Functional Impairment.
  - Homelessness

# Veterans and PTSD

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- ❑ Veterans with PTSD and Concussion/Traumatic Brain Injury.
- ❑ The same event that caused the TBI/concussion can also produce the trauma for PTSD reactions.
  - Depression/anxiety.
  - Insomnia.
  - Irritability/anger.
  - Trouble concentrating.
  - Fatigue,
  - Hyperarousal.
  - Avoidance.

# Veterans and PTSD

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- PTSD is a risk factor for substance use disorders.
- Use of alcohol and/or drugs may reduce the anxiety component of PTSD and thus be reinforced.
- Withdrawal from substances may exacerbate PTSD symptoms.
- Prolonged exposure as a treatment for PTSD does not increase the craving for substance use.
- Persons prefer that both be treated at the same time.

# Veterans and Mental Health Disorders

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- Co-Occurring Disorders
- Mental Health Disorders
  - Depression
  - Anxiety
  - Suicidal ideation

# Veterans and Mental Health Disorders

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## □ Barriers to seeking mental health treatment

- Lack of trust for mental health professionals
- It will work itself out
- Getting mental health treatment is a last resort
- I don't believe I have a problem.
- Military culture vs mental health culture- resistance to engage with mental health professionals is counter to Warrior identity.
- Mentally tough
- Self-reliance

# Female Veterans

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# Veterans and Mental Health Disorders

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## ☐ Suicide

- According to Stars and Stripes, Military Newspaper, from 2009-2011;
- About 22 veterans commit suicide daily. A suicide every 65 minutes.
- Male veterans under 30 saw a 44% increase in suicide.
- Older veterans saw a slight decrease.
- Female veterans saw an 11% increase.
- Female veterans commit suicide nearly 6 times the rate of other women.

# Veterans and Mental Health Disorders

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<http://maketheconnection.net/conditions/ptsd>

# Veterans

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# Veterans and Case Management

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- What is case management?
- Is case management important for veterans?
- Who are case managers?

# Veterans and Case Management

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What types of case management do veterans need and will be of benefit?

# Case Management

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- Housing options
- Phone options
- VA Disability
- SSI/SSDI Disability
- Food Stamps
- Dental/Glasses/Hearing Aids
- DD 214
- Birth Certificate
- Social Security Card

# Case Management

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- ID
- Clothing
- Furniture
- Bus passes
- Transportation

# Case Management

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# Self-Care and Trauma

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- ❑ Secondary Trauma is commonly referred to as the stress resulting from helping or wanting to help a traumatized or suffering person.
  
- ❑ Vicarious Trauma describes the cumulative transformative effect of working with persons who have survived traumatic events.

# Self-Care

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□ Who is at risk for secondary trauma?

- Psychotherapists
- Counselors
- Case Managers
- Nurses
- Physicians
- Social workers
- Veterans
- Mental Health Counselors

# Self-Care

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## ☐ Symptoms of secondary trauma

- Intrusive thoughts
- Chronic fatigue
- Sadness
- Anger
- Poor concentration
- Second guessing
- Detachment
- Emotional exhaustion

# Self-care

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## □ Symptoms of secondary Trauma

- Fearfulness
- Shame
- Physical Illness
- Absenteeism

# Self- care

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- Ways to care for you.
  - Discuss your feelings in supervision.
  - Leave work at work.
  - Join a support group.
  - Talk to a therapist.
  - Do things you enjoy when not at work.
  - Change client population.

# Self-care

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- The work we do can be both rewarding and detrimental to us.
- Let's talk about it.

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Questions?

Thank you!

# Reference

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