



President's Message

Dear Colleagues,

In the next five years, over one million Service Members are projected to leave the military. In addition, our Veterans conservatively comprise greater than 13% of our nation's workforce. While the VA cares for more than 8 million Veterans, almost half of them (and many of their family members) will seek care in community settings outside of the military and VA systems. As psychiatric-mental health nurses, we care for our

Service Members, Veterans, and their families in every professional setting and we know the importance of ensuring that this population receives treatment for not only the visible wounds of war, but also those that are invisible – wounds such as depression, substance use, PTSD, and traumatic brain injury (TBI).

In March of 2012, APNA pledged our support to "Joining Forces", First Lady Michelle Obama's comprehensive national campaign. Along with our nursing colleagues, we pledged to improve the quality of care provided to our military Service Members, Veterans, and families in order to ensure that they receive the support and treatment they need as they reconnect with their communities, particularly when it comes to employment, education, and wellness.

Since joining this effort, APNA has been working to make available education and resources that empower psychiatric-mental health nurses and nurses everywhere to provide the best possible care for this population. Here is a just a sample of what APNA has been up to:

We continue to expand our continuing education offerings – at the APNA 27th Annual Conference this past October we had ten sessions covering pertinent topics such as Traumatic Brain Injury, PTSD and nursing interventions, the impact of deployment on active duty women, practice infrastructure for non-military professionals caring for military connected individuals, and more. Our Education Department is working hard to get these sessions online in the APNA eLearning Center, adding to the nine sessions on military mental health related topics already available.

APNA is lucky to have the participation of members who are active duty, in the reserves, or retired from the services in several of our initiatives. The recently formed Task Force on Military Mental Health is composed of psychiatric-mental health nurses who represent all branches of the military. We also have VA nurses' valuable input in the Education Council's development of suicide competencies for inpatient RNs, the new Recovery to Practice facilitator training - *Acute Care Psychiatric-Mental Health Nurses: Preparing for Recovery Oriented Practice*, and more.

In addition, we continue to expand our comprehensive section of Military and PTSD resources on our website. In this newsletter you'll find more information and learn about several featured resources from this section. Visit www.apna.org/military to explore the all of the great information and tools available.

To all of you providing care to our Service Members, Veterans, and their families, thank you for the important work that you do. It is an honor to have you as colleagues.

Patricia D. Cunningham

Patricia D. Cunningham, DNSc, APRN, BC
President

BY THE NUMBERS

Military Mental Health

312,000

Number of U.S. Veterans between ages 21 and 39 who experienced at least one major depressive episode in the past year, according to 2004-2007 data.⁴

36.9 & 50.2

Percentage of OEF and OIF veterans in the VA healthcare system who have received a mental disorder diagnosis.⁴

244,217

US Service Members who sustained a traumatic brain injury from 2000 through the first quarter of 2012.³

23 Percentage of female Veterans using VA health care who reported sexual assault when in the military.¹

11

Free mobile apps available from the National Center for Telehealth and Technology to help providers, Service Members, and Veterans manage stress, PTSD, and TBI.⁵

11-20

Percentage of Veterans of the Iraq and Afghanistan wars whom experts believe experience PTSD.¹

4

Clusters of symptoms of PTSD as defined in the DSM-5: intrusion, avoidance, negative alterations in cognitions and mood, and alterations in arousal and reactivity.²

11 Percentage of OEF and OIF veterans who, according to one study, have been diagnosed with a substance use disorder (SUD).⁴

APNA Members and Education

653

Orders of sessions related to military mental health in the APNA eLearning Center

99

Members who are on active duty in the military

71

Members who list military as a work setting.

19

CE sessions covering issues related to military mental health available online in the APNA eLearning Center

58

Members who list military mental health as an Expert Knowledge Area

10 Sessions related to military mental health presented at the APNA 27th Annual Conference

Military Mental Health: Know Your Resources

This section of the APNA Resource Center, <http://www.apna.org/military>, serves as a portal to a wide variety of information on posttraumatic stress disorder (PTSD), traumatic brain injury (TBI) and working with the military population.

General Resources

Find guides, tips and other resources for civilian mental health professionals and military consumers on working with persons in the military, navigating the VA's mental health system, finding support when transferring to a new location, and treating Servicemembers returning from deployment.

Featured Resource: inTransition Program

The Department of Defense's program is designed to ensure that Service Members in mental health treatment who have an upcoming transition such as deployment or relocation have the resources to maintain treatment gains, connect with an ongoing providers and achieve positive outcomes. <http://www.health.mil/InTransition>

PTSD Resources

These resources, from various organizations, include fact sheets, reports, clinical guidelines and more on topics such as therapies and pharmacological approaches for treating

PTSD, current PTSD research, and military guidelines and policies regarding PTSD.

Featured Resource: PTSD 101

This series, from the Department of Veteran's Affairs National Center for PTSD, provides free in-depth trainings covering PTSD assessment and effective treatment. Continuing education credits courses are available. http://www.ptsd.va.gov/professional/continuing_ed

Traumatic Brain Injury Resources

This section contains resources from the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury and others on topics such as treating persons with lingering symptoms of mild TBI, patient education, cognitive rehabilitation, and associated long-term health effects.

Featured Resource: Mild Traumatic Brain Injury Pocket Guide and Mobile App

Guides health care professionals on treating and managing Service Members and Veterans with mTBI. Includes recommendations for cognitive rehabilitation, educational materials, and symptom scales. <http://www.dcoe.mil/TraumaticBrainInjury>

New Announcing APNA's New Presidential Task Force on Military Mental Health

Helping to meet the mental health needs of Service Members and Veterans is a top priority for the mental health community. APNA President Pat Cunningham has therefore convened a Presidential Task Force on Military Mental Health charged with developing a white paper to inform APNA and the mental health community on actions that APNA believes appropriate to create an evidence based approach to military mental health. Commander Sean Convoy, USN, Retired will chair the task force, with Commander Jean Fisak as Vice Chair.

"I believe that there are many across APNA's ranks that want to actively support military mental health," says Convoy. "The problem is, they don't necessarily know how or what to do. I think that the APNA White Paper can provide that necessary structure." Psychiatric-mental health nurses representing all branches of the military have been invited to join the task force and, in recognition of their service to our country and to our community, their memberships have been extended through 2014.

The Task Force already has a draft of the white paper, which it will work to review and revise over the next couple of months before presenting it to the APNA Board of Directors for approval. "My hope is that we will swiftly work with our service specific stakeholders to flesh out the content and ensure we are accurately conceptualizing the issue and subsequent coordinated path forward," says Commander Convoy, of the work ahead. The paper, ultimately, will build off of First Lady Michelle Obama's Joining Forces Initiative and aim to provide clear recommendations as to how APNA and psychiatric-mental health nurses can work on multiple levels to promote compassionate and evidence-based mental health care for our Veterans and Service Members.

Pearl of Recovery

By Connie Noll MA, BSN, RN-BC
Brought to you by the APNA Recovery Council



Self Awareness Reflections

Mirror, mirror, to be fair;
Am I ready for who's out there?
Genuine, authentic, fully present,
sincere
Can I coach them through their fear?
Am I ready to engage, connect,
and empathize?
Can I really imagine life through
their eyes?
Can I get past my own feelings,
distractions, and noise?
Do I truly have something to give,
unassuming, and with poise?
Will I preach, coerce, lecture, or rule?
Or let self empowerment be their tool?

The American Psychiatric Nurses Association is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

Upcoming Educational Opportunities

Find announcements about upcoming educational opportunities on military mental health, post-traumatic stress disorder, and traumatic brain injury from a variety of sources.

Featured Resource: Monthly Training Webinars

These free monthly webinars, from the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury, provide information on a variety of topics related to psychological health and traumatic brain injury. Many provide continuing education.

http://www.dcoe.mil/Training/Monthly_Webinars

Military Mental Health & Resiliency Discussion Group

Join the Military Mental Health & Resiliency Community on Member Bridge to discuss this important topic and swap info with your APNA colleagues. Share resources, ask questions, and weigh in on issues important to military mental health. To join this community, visit <http://community.apna.org> and enter "Military Mental Health and Resiliency" into the search box.

APNA Continuing Education: Military Mental Health

Presentations from past APNA Conferences in webinar and podcast format are available in the APNA eLearning Center. APNA members can use their bonus points to access the content at little to no cost.

Featured Resource: EMDR for Posttraumatic Stress Disorder: An Update on Research and Practice

Originally presented at the APNA 27th Annual Conference, this podcast covers EMDR as an evidenced-based treatment for PTSD, EMDR protocol, initial research findings in psychiatric conditions, and the advantages and obstacles of including basic EMDR training in graduate psychiatric nursing education.

<http://elearning.apna.org/session.php?id=12316>

Member Profile: Commander Jean Fisak, PMHCNS-BC



CDR Jean Fisak, PMHCHS-BC

The Bronze Star Medal is awarded to a Service Member who, during military service, has distinguished him or herself by "heroic or meritorious achievement or service." It is one of the highest honors that an individual member of the military can receive. Commander Jean Fisak, a psychiatric-mental health nurse in the Navy Nurse Corps, was recently recognized with this prestigious award for her work and leadership on a Mobile Care Team. The team collected and analyzed

data from deployed units in order to provide Navy leadership with information on the unique psychological stressors of deployed Sailors.

Over the course of seven months, from December 2012 through August of 2013, CDR. Fisak served as Officer in Charge of Mobile Care Team 7. She led this three member unit throughout all of the accessible areas Afghanistan (50 investigative missions in 24 regions), surveying more than 1,000 deployed Sailors on matters related to behavioral health. The unit collected information from five previously un-assessed units, giving voice to Sailors who had previously gone unheard. The surveys had a 66% feedback rate and provided invaluable data on the psychological challenges that this population faces on a daily basis. Quick analysis of the data on-site allowed for Fisak's team to provide tangible recommendations to unit leaders then and there.

While gathering information on the Sailors' mental wellbeing and concerns, the team had the unique experience of witnessing firsthand the daily experiences of this group. This insight led to recommendations which have since been incorporated into the Navy community. Her Bronze Star citation at one point reads: "She passionately advocated the needs and welfare of Navy personnel, leading to a number of critical improvements to Navy Individual Augmentee policy, guidance, logistics, and training."

In a press release announcing the award of the Bronze Star to Fisak, Rear Admiral Rebecca McCormick-Boyle, Chief of Staff, U.S. Navy Bureau of Medicine and Surgery, and Director, Navy Nurse Corps says, "Cmdr. Fisak's leadership of MCT 7 helped provide unprecedented visibility into mental healthcare for Sailors deployed in combat theatre. Her efforts have helped set the groundwork for effective deployment mental health practices and significantly improved force readiness." Undoubtedly, her work has had far-reaching ramifications when it comes to improving the care and support provided to deployed Sailors.

Commander Fisak's previous awards include: Afghanistan Campaign Medal, the NATO Medal, the NC-COSC Epictetus Leadership Award, the Navy-Marine Corps Commendation Medal (three awards), the Navy-Marine Corps Achievement Medal (two awards) and the San Diego Advance Practice Psychiatric Nurse of the Year 2005-2006.





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Special Issue of
APNA News:
**Military Mental
Health**



Building Connections: Psychiatric-Mental Health Nursing Perspectives

Submit an abstract to be considered for presentation at the APNA 28th Annual Conference:

Share your unique perspective, grow professionally, create connections with colleagues, and advance mental health care!

Abstract Submission Deadline: March 4, 2014

The APNA Scholarly Review Committee invites you to submit an abstract to be considered for presentation at the APNA 28th Annual Conference. The committee is seeking abstracts covering any and all areas of psychiatric-mental health nursing research, education, administration and practice. Abstracts may be submitted for one or more the following presentation formats: a 2-hour pre-conference, 45-minute concurrent session, 20-minute mini-concurrent session, or poster presentation. Abstract submissions will undergo a peer review by members of the APNA Scholarly Review Committee. Regardless of acceptance status, email notifications will be sent by 5:00 pm Eastern Time on Monday, April 15, 2014.

To learn more and submit, visit www.apna.org/AnnualConference

FOOTNOTES FROM PAGE 1 "BY THE NUMBERS"

- 1.National Center for PTSD, Department of Veterans Affairs. (2007). How Common is PTSD? Retrieved from <http://www.ptsd.va.gov/public/PTSD-overview/basics/how-common-is-ptsd.asp>
- 2.National Center for PTSD, Department of Veterans Affairs (2012). DSM-5 Diagnostic Criteria for PTSD Released. Retrieved from http://www.ptsd.va.gov/professional/PTSD-overview/diagnostic_criteria_dsm-5.asp
- 3.Defense Veterans Brain Injury Center, 2012, DoD worldwide numbers for TBI worldwide totals. Retrieved from: <http://www.dvbic.org/sites/default/files/uploads/dod-tbi-2000-2012.pdf>
- 4.Substance Abuse and Mental Health Services Administration. (2012). Behavioral Health Issues Among Afghanistan and Iraq U.S. War Veterans. In Brief, Volume 7, Issue 1.
- 5.<http://www.t2.health.mil/news/new-mobile-app-helps-troops-self-manage-behavior-stress>