

# MISSION Diversion & Recovery for Traumatized Veterans (MISSION DIRECT VET): Early Findings and Lessons Learned

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## What is MISSION DIRECT VET?

MISSION DIRECT VET is a SAMHSA- funded, court based diversion program targeting veterans in Massachusetts with trauma-related mental health and substance use problems.

- MISSION-DIRECT VET seeks to:
  \* Reduce criminal justice involvement
  - \* Treat mental health, substance abuse and other trauma related symptoms
  - \* Use a systematic wrap-around model
  - \* Provide care coordination, peer support and trauma informed services
  - \* Develop interagency partnerships to serve veterans with co-occurring disorders

### Background

 The MISSION (Maintaining Independence and Sobriety through Systems Integration, Outreach, and Networking) model has successfully reduced chronic homelessness in veterans through:

- \*peer support
- \*case management
- \*integrated mental health and substance abuse treatment

This model was adapted for criminal justice involved veterans.

Program Pilot site: Worcester District Court

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# **Baseline Participant Data - Pilot Site - First Year**

| Recruitment Numbers as of September 10, 2010 |    |  |
|--|----|--|
| mberScreened                                 | 27 |  |
| mber Screened as Eligible                    | 25 |  |
| mber Diverted to MISSION (by Judge)          | 16 |  |
| mber Currently Receiving Services            | 14 |  |
| mber Currently Enrolled in Evaluation        | 14 |  |

| <b>Military Histories</b>       |   |  |  |
|---------------------------------|---|--|--|
| onorable<br>scharges            | 11  |  |  |
| rvice era<br>ot exclusive):     | 10: Persian Gulf era; 8: Iraq/Afghanistan era; 5: post -<br>Vietnam; 1: Vietnam |  |  |
| litary branch<br>ot exclusive): | 8: Army;1: Navy;1: Airforce; 5: Marines;1: National guard                       |  |  |
| ployments                       | Range: 1-7; 7 were deployed for more than one tour of duty                      |  |  |
| tive Combat                     | 10  |  |  |

| Prior Criminal Justice Involvement          |  |  |  |  |
|---|--|--|--|--|
| 1   | Range:1-4 times in jail                            |  |  |  |
| ge of 1 <sup>st</sup> arrest                | Range:10-51 years old, 52%<br>before the age of 18 |  |  |  |
| obation                                     | 12   |  |  |  |
| ior convictions; $\geq$ 2 prior convictions | 8;6  |  |  |  |
| estraining Order                            | 9  |  |  |  |

| ClientDemographics |  |  |  |
|--------------------|--|--|--|
| Age Range          | 24-61  |  |  |
| Education          | $10: \leq high school degree; 3: B.A.$                       |  |  |
| Employment         | 6: employed full or part time                                |  |  |
| Finances           | 3: federal disability; 8: veterans benefits; 2: unemployment |  |  |
| Living Situation   | 9: live in own home/apartment                                |  |  |

| Mental Health Treatment and Symptoms  |      |
|---|------|
| Prior outpatient treatment  | 11   |
| Prior inpatient treatment   | 8    |
| Witnessed another seriously injured or killed;<br>same, before the age of 18            | 12;9 |
| Engaged in physical violence with someone they did not know; same, before the age of 18 | 11;6 |
| First encounter mental health services before the age of 18                             | 3    |
| First encounter mental health services before the age of 18                             | 3    |

| Substance Abuse Treatment and Symptoms                   |      |
|--|------|
| In the last month, used alcohol/drugs 2 or more days     | 11/6 |
| Prior inpatient treatment                                |      |
| Prior outpatient substance abuse treatment               | 4    |
| Prior inpatient substance use treatment                  | 9    |
| Average age at 1 <sup>st</sup> substance abuse treatment | 23   |

### Lessons Learned

Clients are both service and crisis intensive.

 Clients; high service need raises issues regarding treatment team caseload capacity.

Critical events include: re-arrests, probation violations, hospitalization and suicide threats.
 Referrals ebb and flow; still looking for patterns and reasons why.

Efforts to optimize referrals have included training criminal justice personnel, having treatment team presence in court, increasing program visibility, addressing incentives/disincentives with prospective participants, and networking with other veteran outreach programs

#### Next Steps

 Expansion to Lawrence District Court: November, 2010

 Options for program expansion include alternative diversion intercept points and further interagency partnering.



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