



Guidance for Organizations That Support the Behavioral Health of Post-9/11 Veterans

The U.S. Department of Defense, U.S. Department of Veterans Affairs (VA), and numerous national and local organizations have developed programs, resources, and other sources of support to help veterans and their families cope with behavioral health challenges, including those that are a direct result of military service. Veterans who have served in the era since September 11, 2001, are at particularly high risk for a range of behavioral health problems, including posttraumatic stress disorder (PTSD), depression, and substance use disorders.

Reaching these veterans and ensuring that they get the treatment they need is challenging, but even more so when they need treatment for co-occurring conditions, such as PTSD in combination with a substance use disorder. Veterans with co-occurring substance use disorders and mental health disorders often face barriers to accessing behavioral health care, and, when they do receive care, they have poorer treatment outcomes than those with single disorders.

The Wounded Warrior Project (WWP) is a nonprofit organization that supports post-9/11 veterans with a robust program to help veterans and their families identify and address their mental health needs. These types of outreach programs play an important role in helping veterans identify behavioral health concerns outside of formal care settings and connecting them with providers. WWP has partnered with the RAND Corporation to help improve access to effective treatment for post-9/11 veterans with substance use disorders—with a focus on alcohol, cannabis, and opioid use disorders—and co-occurring PTSD or depression.



A comprehensive review of approaches to treating substance use disorders and co-occurring mental health disorders, data on available treatment facilities for veterans, and interviews and visits to facilities informed the development of a framework to guide WWP and other organizations in assessing treatment approaches and facilities that might best meet the needs of the veterans who turn to them for support.

Ideally, veteran support organizations will develop relationships with facilities that meet the full spectrum of veterans' needs. The guidance is specifically intended to help these organizations support the behavioral health needs of veterans with co-occurring substance use disorders and mental health disorders. It highlights important treatment, provider, and system factors to consider when providing resources and information and making treatment referrals.

Treatment Factors to Consider

Evidence-based, integrated care for co-occurring substance use disorders and mental health disorders: Ideally, providers or facilities will target both substance use disorders and mental health disorders concurrently, using protocols tested by empirical studies. These approaches should be accompanied by regular assessments of care progress.

Veteran-specific services: To encourage initial engagement in care, facilities should offer services that meet both the needs and preferences of veterans.

Clear plan for evidence-based aftercare: Providing veterans with ongoing care and support after formal treatment ends helps improve their treatment outcomes.

Involvement of family members and caregivers: Veterans benefit from a strong support system to reinforce treatment and healthy changes.

Recreational and occupational therapy: Therapies that supplement evidence-based treatment can help veterans reclaim confidence and a sense of identity, engage in substance-free hobbies, and build new skill sets.

Provider Factors to Consider

Strong basis for treatment philosophy: The provider's stance on abstinence from substances or harm reduction should align with the veteran's needs and abilities.

Military cultural competency and dedication to serving veterans: Most veterans prefer to work with a provider who understands military and veteran culture and is committed to helping veterans.

Adequate skills and capacity and a willingness to seek additional competencies: Providers should be responsive to changes in veterans' symptoms and keep up with the latest research on treatments.

System Factors to Consider

Co-located facilities: It is easier for veterans to access the care they need if they can see all their providers in a single location.

Continual monitoring of patient progress: Empirical processes for monitoring patients' progress and care quality support treatment decisions and system-wide improvement.

Sufficient and flexible care: Facilities and providers need to be responsive to veterans' needs and able to adapt treatment plans accordingly.

Telehealth availability: Telehealth approaches are a useful way to reach veterans who might otherwise not seek care or who face barriers to receiving care.

Support for providers: Supports and trainings can help prevent burnout and reduce turnover among providers.

Ease of billing and payment: Ideally, facilities will have a clear line of communication with VA and/or TRICARE (federal military insurance) to facilitate cost approval and reimbursement.

Clearly identified treatments and transparency about capacity: Facilities' websites should indicate what treatments they offer and their capacity to meet veterans' treatment needs.

This brief describes work done in RAND Health Care and documented in *Improving Substance Use Care: Addressing Barriers to Expanding Integrated Treatment Options for Post-9/11 Veterans*, by Eric R. Pedersen, Kathryn E. Bouskill, Stephanie Brooks-Holliday, Jonathan Cantor, Sierra Smucker, Matthew L. Mizel, Lauren Skrabala, Aaron Kofner, and Terri Tanielian, RR-4354-WWP, 2020 (available at www.rand.org/t/RR4354). To view this brief online, visit www.rand.org/t/RB10133. The RAND Corporation is a research organization that develops solutions to public policy challenges to help make communities throughout the world safer and more secure, healthier and more prosperous. RAND is nonprofit, nonpartisan, and committed to the public interest. RAND's publications do not necessarily reflect the opinions of its research clients and sponsors. RAND® is a registered trademark.

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