



American Foundation
for Suicide Prevention

Online Screening Tools for Identifying and Engaging At-Risk Veterans



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Mental Health Screening in the Military

- Since 1996, US military has used routine mental health (MH) screening of personnel before and after operational deployments
- Aim: to identify those who are at-risk of MH problems during deployment, esp. to combat zones, and those with problems on their return home
- MH screening is included in the post-deployment health assessment mandated for returning OEF/OIF troops
- BUT – research suggests limited utility of these routine screenings (Hoge et al., *JAMA*, 2006; 295(9); 1023-32; Rona et al., *JAMA*, 2005; 293(10); 1257-60)



Challenges of Pre-Deployment Screening

- Screening questions provide widely varying overestimates or underestimates of MH disorders, depending on:
 - Cut-off scores/responses for “psychological vulnerability”
 - Motivations and perceived stakes of those being screened
 - Motivations and needs of the military
- Treatment options for identified problems may be limited by circumstances surrounding deployment
- Search for psychological problems may have unintended outcomes for troops
- Pre-deployment MH status is not strongly predictive of PTSD and many other deployment-related MH problems



Challenges of Post-Deployment Screening

- Responses to screening questions are strongly affected by:
 - Circumstances regarding home leaves
 - Degree of confidence in mental health service system
 - Perception of how information will be used
- Those who screen positive for MH problems may resist treatment for same reasons, limiting value of the screening
- Post-deployment screening underscores the inherent tensions between the military's responsibilities to individual troops – and responsibility to the service organization (Dao & Frosch, Military confidentiality rules raises counseling questions. *NY Times*, 12/7/2009)



Recent Impetus for Increased Screening

- Increased suicides among OEF/OIF troops and veterans
 - 31% increase in Army suicides between 2006 (N=102) and 2008 (140); continuing increases in 2009
 - 144 suicides among 500,000 OEF/OIF veterans who left the military from 2002-2005 (29 suicides per 100,000 vets)
 - Exceeds the suicide rate for all US men aged 20-49 (22 per 100,000)
- Recognition that:
 - Few who died by suicide had sought or received treatment
 - Screening of veterans needs to occur after re-entry
 - Anonymity is needed to ensure truthfulness of responses to screening questions



Military Pathways™

- In 2006, DoD funded a non-profit organization, Screening for Mental Health, to launch a screening program for service personnel in all military branches, including National Guard and Reserve; includes family members and veterans

- Goals:
 - Reduce stigma
 - Raise awareness about mental health
 - Provide free, anonymous MH assessments - online, phone and in person at special events in military installations
 - Refer those in need to treatment services provided through DoD (Tricare) and the VA



Assessment

- Separately assesses symptoms of:
 - Depression
 - Bipolar disorder
 - Generalized anxiety disorder
 - PTSD
 - Alcohol use disorder
- Respondent can choose which module(s) to complete
- Respondent also provides information on branch of service, rank, deployments, family MH history, own treatment history and current location (overseas country or U.S. state)



Feedback

Respondent receives instant computerized feedback:

"Your screening results are consistent with symptoms of clinical depression... In order to determine a specific diagnosis and appropriate treatment, it is recommended that you see a clinician or mental health professional for a complete evaluation.

Your answers also show that you might be at risk for harming yourself. You are strongly recommended to see a clinician or mental health professional immediately for a complete evaluation. If you have thoughts of harming yourself or others, dial 911 or go immediately to the nearest hospital Emergency Room for an evaluation. This screening is not a substitute for a complete clinical evaluation."



Referral for Assistance

“There are many options for assistance. If your screening results suggested the need for further evaluation:

- Visit a primary or mental health care provider directly.
- Contact the TRICARE Service Center in your region: **Tricare South** or 1-800-700-8646, or **Tricare for Guard/Reserve**
- Resources by branch: **Army One Source** or **Battlemind**
- For veterans or non-mental health assistance: **Services Directory (non-mental health)**
- Online and telephone support: **Military OneSource** or call 1-800-342-9647, **After Deployment**, **Real Warriors** or call 866-966-1020, Available 24/7”



Results??

- Because screening is anonymous, no tracking of how many of those screened – or who – actually seeks help
- Questions: Is the feedback likely to motivate a wary or resistant soldier or veteran to seek help?

How easy is it for a person in need to pursue the recommended referrals?
- Voluntary evaluation of the screening system is underway
 - Independent evaluator (University of NH)
 - Immediate brief online survey
 - Voluntary follow-up online survey several weeks later



Potential Barriers to Effectiveness

Studies have documented strong barriers to treatment among active duty personnel and veterans

- Negative attitudes about MH treatment, often rooted in cultural/family values regarding privacy
- Perception of help-seeking as sign of weakness or incompetence
- Belief that one should be able to take care of own problems
- Concerns about confidentiality & impact on career or advancement
- Fear of being stigmatized by superiors or peers
- Too busy or overwhelmed to take necessary steps



Related Research Findings

Research on screening among university students found:

Post-screening online feedback encouraging persons in need to seek treatment is not effective without also providing an individualized, anonymous mechanism through which barriers to treatment can be discussed and resolved

Haas et al. (2008) An interactive web-based method of outreach to college students at risk for suicide, *Journal of American College Health*, 57: 15-22.



AFSP's Interactive Screening Program (ISP)

- ISP is an anonymous, web-based, interactive method of outreach to persons with mental health problems that put them at risk for suicide
- ISP connects at-risk individuals to an actual counselor who provides individualized online support for getting help
- Core aim: addressing and resolving treatment barriers and resistances
- ISP was pilot-tested with undergraduates at two universities (2002-2005) and in additional studies with graduate students, medical students and faculty (2006-2009)
- Since Fall 2009, ISP is available to any college or university (7-8 start-ups per semester)



ISP Applications for Veterans

1. ISP for Student Veterans

Program being piloted at State University of New York at Albany
beginning in 2009-10

2. Community Outreach to Veterans



Student Veterans

- During Fall 2009, an est. 82,000 veterans are enrolled in colleges or universities under the Post-9/11 Veterans Educational Assistance Act of 2008 (effective September 2009)
- Expanded benefits include:
 - Tuition at the level of the highest cost state college/university
 - Required fees
 - Book stipend
 - Housing allowance
- With veterans receiving benefits through the pre-2008 (Montgomery) GI Bill, and those who haven't submitted claims for educational benefits, number of student veterans is well over 100,000 and certain to increase rapidly in 2010



How the ISP Works

- Targeted students are invited to participate via email from a college official (at SUNY Albany, veterans are primary target group)
- Provides link to a secure, customized website
- Welcome page explains program procedures
- Students sign up with User ID and password
- Complete an online *Stress & Depression Questionnaire*
- Provide an email address (encrypted & used to notify student when counselor's response is ready)



Welcome Page

Creighton Screening - Mozilla Firefox

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http://afsp.perficient.com/welcome.cfm

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Creighton UNIVERSITY

Welcome | Sign Up

User Login

Returning user?
Login below

New User? [Sign Up](#)

User ID

Password

Login

[Forget your password?](#)

Welcome!

Thank you for taking this opportunity to be involved in your personal wellness. *Your participation is completely voluntary and confidential.* By participating you will be able to find out more about how depression and stress may be affecting you.

First you will fill out a brief questionnaire called the Stress and Depression Questionnaire. It takes about 10 minutes. Second an experienced counselor will review it and leave a personal response on this website for you, offering options for follow-up if it's felt that could be helpful. Third you decide what's next, to discuss things anonymously on line, to perhaps meet with the counselor, or to do nothing further at this time. It's all up to you.

To Begin:

First you will need to choose a User ID and a password to log into the website and fill out the questionnaire. Your ID and password must each be eight characters, using both letters and numbers. Take note of the ID and password so you can get back into this website to get your response.

Hopeful Connections

Counseling Services
Center for Health and Counseling
Harper Center 1034
402-280-2735

At the end of the questionnaire you will be asked to provide your email address. This allows the computer system to notify you when the counselor has reviewed your questionnaire and posted a response for you. Your email address will not be revealed to anyone, even the counselor. Giving your email address is optional. You can log into this website to get your response even

Done

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Stress & Depression Questionnaire



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http://afsp.perficient.com/q_main.cfm

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User ID: pearson28

 **Creighton**
UNIVERSITY

Welcome | Sign Up | [Questionnaire](#) | Response to Questionnaire

Stress & Depression Questionnaire

Please answer every question to the best of your ability.

Page 1 of 9

During the last 4 weeks, how often have you been bothered by any of the following?	Not at all	Some of the time	A lot of the time	Most or all of the time
Feeling nervous or worrying a lot	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Becoming easily annoyed or irritable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling your life is too stressful	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having arguments or fights	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling intensely anxious or having anxiety attacks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling intensely lonely	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling intensely angry	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling hopeless	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling desperate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling out of control	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Done

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- Questionnaire can be viewed in full on the test site:
<http://afsp.perficient.com>
- Shows website as students see it
- Visitors can create a User ID and password, view and complete the *Stress & Depression Questionnaire*



After Student Submits Questionnaire ...

- Computer classifies student by risk status (Tiers 1a, 1b, 2 & 3) using defined algorithm
- System sends email to ISP counselor; gives student's tier and a link to the completed questionnaire
- Counselor links to website and logs in
 - reviews the student's questionnaire
 - writes & posts a personalized response using a tier-specific template



Counselor's Response

- Gives name, position and contact information
- Expresses concern about specific issues indicated in questionnaire; emphasizes potential for relief and willingness to help
- Invites student to "dialogue" on the ISP website using User ID as only identification
- Urges Tier 1 and 2 (at-risk) students to come for in-person meeting
- System sends student an email when counselor's response is posted on the website



Next Steps

- System sends Tier 1 & 2 students reminder emails to read counselor's response and follow recommendations
 - 5, 10, 21 & 42 days after posting
- Last reminder contains a link to an "Update Questionnaire" for those who haven't yet contacted the counselor
 - Asks how student is doing
 - Elicits reason for not contacting counselor
- All postings on website (Update Questionnaire & all dialogue messages) generate an email notification to intended recipient (with link back to website)



Counselor Accesses all Functions via Clinician Login

UCSD Screening - Mozilla Firefox

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https://www.ucsdwellbeing.org/welcome.cfm?c_counselor=loginapp&student_id=4025

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[Log Out](#)
Counselor View for User: arturo79
User #: 4025

UC San Diego
MEDICAL CENTER

[Login](#) | [Questionnaire](#) | [Response to Questionnaire](#) | [Dialogue](#) | [Update](#) | [Admin](#)

Clinician Login

User ID

Password

[Forget your password?](#)

Welcome Back!

If you have completed your questionnaire, login here with the user ID and password you assigned yourself. Once logged in, click on Response to Questionnaire in the blue banner to view the counselor's personalized response to your questionnaire. This will include an assessment and recommendations for further evaluation or follow up, if indicated, as well as instructions for how you may exchange confidential messages with the counselor over this website.

New to this Site? Click here to set up an account and access the questionnaire.

Take Care of Yourself

We encourage you to establish care with a primary provider if you have not already done so. Please make the time to take care of yourself. You are important to your family, your friends, your colleagues and your patients.

[Click here to return to the UCSD Wellbeing Website for Helpful Resources](#)

Links:

[Health and Psychological Services for Medical Students](#)

[Health and Psychological Services for Residents, Fellows](#)

Done

www.ucsdwellbeing.org

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Counselor Composes & Posts Response



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https://www.ucsdwellbeing.org/assessment.cfm

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[Log Out](#)
Counselor View for User: ocsdnyc10
User #: 4192

 **UC San Diego**
MEDICAL CENTER

Login | Questionnaire | [Response to Questionnaire](#) | Dialogue | Update | Admin

[Response to Questionnaire](#)

Status: Assessment Complete Last Update: 10/14/2009 12:56 PM

Template: Tier 2 Submit Date: 10/13/2009 11:40PM
Clinician Response to Questionnaire for User ID: ocsdnyc10 Student #: 4192
Student reviewed Response to Questionnaire on 10/14/2009

Brittany Kirby, MSW
University of California, San Diego
VA Medical Center
3350 La Jolla Village Drive
Second Floor, Room #2324
San Diego, CA 92161
Tel: (858) 642-3913

My name is Brittany Kirby and I'm a Program Counselor here at UCSD. I have reviewed your responses to the Stress & Depression Screening Questionnaire and appreciate you taking the time to let me know how you have been feeling. You say in the questionnaire that you often feel tired or low energy, your life is too stressful, and that you have trouble with your sleep. I'm also concerned that you have been drinking more than usual and frequently feeling like you are drinking too much, as this can be a sign of emotional distress. You also mentioned that you sometimes feel

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Student-counselor messages are exchanged on Dialogue page

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https://www.ucsdwellbeing.org/notes.cfm

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User #: 4192

UC San Diego
MEDICAL CENTER

Login | Questionnaire | Response to Questionnaire | Dialogue | Update | Admin

Notes

TIER: 2
This window will remain open for a two-hour period. Please submit your message in that time frame to avoid losing what you have written.

Create New Note:

Submit New Note

Note History (Most Recent First):

Originator	Post Date	Notes
Clinician	10/28/2009	Hi, I did some research and found a therapist who specializes in trauma counseling. Her name is Kerry Barth PsyD, and her phone number is (619) 274-2853. I've heard wonderful things about her.

Done

www.ucsdwellbeing.org



Update Questionnaire

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https://www.ucsdwellbeing.org/update.cfm?user_id=4025&userID=arturo79

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Counselor View for User: arturo79
User #: 4025

UC San Diego
MEDICAL CENTER

Login | Questionnaire | Response to Questionnaire | Dialogue | **Update** | Admin

1. Since submitting the Stress and Depression Screening Questionnaire a couple of months ago, how have you been feeling?

- a. much worse
- b. somewhat worse
- c. about the same
- d. somewhat better
- e. much better

2. Since then, have you received any kind of treatment for the problems you indicated you were having?

- a. yes
- b. no

3. If you have received treatment, please indicate what kind. Check off all that apply.

- a. medication
- b. counseling/therapy
- c. other

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Data are Organized into Reports for Monitoring & Evaluation

The screenshot shows a Mozilla Firefox browser window displaying the UCSD Screening administration interface. The browser's address bar shows the URL <https://www.ucsdwellbeing.org/admin.cfm>. The page header includes a "Log Out" link and the text "Counselor View for User: ocsdnyc10" and "User #: 4192". The UC San Diego Medical Center logo is prominently displayed. A navigation bar contains links for "Login", "Questionnaire", "Response to Questionnaire", "Dialogue", "Update", and "Admin". The "Admin" section is active, showing a "Send Email" link and several report generation buttons, each with a date range starting from 9/15/2008:

- View Students Report from 9/15/2008 to
- View Students Not Submitted Report from 9/15/2008 to
- View Student Updates Report from 9/15/2008 to
- View SPSS Report from 9/15/2008 to
- View Student Incomplete Report from 9/15/2008 to
- View Students Registered Report from 9/15/2008 to
- View Outstanding Assessments

The browser's status bar at the bottom shows the URL <https://www.ucsdwellbeing.org/admin.cfm> and the website www.ucsdwellbeing.org.



Sample Report

UCSD Screening - Mozilla Firefox

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https://www.ucsdwellbeing.org/SPSSReport.cfm

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UC San Diego MEDICAL CENTER

Login | Questionnaire | Response to Questionnaire | Dialogue | Update | Admin

Admin

Open in Excel

SPSS

User	Username	Submit	SubmitTm	Tier	Assess	AssessTm	Review	ReviewTm	Email	Nervous	Annoyed	Stress	Fights	Anxiety	Lonely
3786	sls97123	05/06/09	1:22 PM	3	05/07/09	1:00 PM	05/07/09	1:38 PM	2	3	3	2	2	2	1
3787	landiwani77	05/06/09	1:24 PM	3	05/07/09	1:17 PM	05/07/09	1:30 PM	2	2	3	2	3	1	2
3788	student123	05/06/09	3:13 PM	3	05/07/09	1:38 PM	05/07/09	10:37 PM	2	3	2	3	2	1	2
3789	Bicycle45	05/06/09	3:29 PM	2	05/06/09	6:10 PM	05/06/09	6:17 PM	2	3	2	3	2	3	2
3790	medstudent1	05/06/09	3:56 PM	3	05/07/09	3:13 PM	05/07/09	4:34 PM	2	2	2	2	1	1	2
3791	A04789007	05/06/09	3:57 PM	3	05/07/09	5:42 PM	05/07/09	10:02 PM	2	2	1	2	1	1	1
3792	injust21	05/06/09	3:57 PM	1	05/06/09	7:20 PM	05/06/09	5:48 PM	2	4	3	3	3	3	4
3793	medstudent2	05/06/09	3:56 PM	3	05/07/09	2:43 PM	05/07/09	9:06 PM	2	2	2	2	1	1	2
3794	uc15865964	05/06/09	3:57 PM	3	05/07/09	4:02 PM	05/07/09	8:31 PM	2	2	2	2	2	1	2
3795	moonbuggy18	05/06/09	4:17 PM	3	05/08/09	11:56 AM	05/13/09	10:31 PM	2	3	3	2	2	1	2
3796	tiddelpom7	05/06/09	3:57 PM	3	05/07/09	6:13 PM	05/07/09	8:33 PM	2	2	2	2	1	1	2
3797	ch3v3r3sky	05/06/09	3:57 PM	3	05/07/09	3:38 PM	05/10/09	2:35 AM	2	2	2	2	2	1	2
3798	because789	05/06/09	3:56 PM	2	05/06/09	6:50 PM	05/07/09	2:08 AM	2	4	3	4	2	2	2
3799	nokhody12	05/06/09	3:59 PM	3	05/08/09	11:14 AM			2	2	2	2	2	2	2
3800	maximumguppy7912	05/06/09	3:57 PM	3	05/08/09	10:31 AM	05/08/09	9:39 PM	2	2	1	2	1	1	1
3801	garoth1234	05/06/09	3:57 PM	2	05/06/09	8:19 PM			2	2	2	3	2	1	2

Done

www.ucsdwellbeing.org

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Evaluation Findings

- 85-90% of questionnaire respondents show some degree of risk (Tiers 1 and 2)
- 90% of Tier 1 and 2 students were not receiving any form of treatment
- Over 90% of all respondents read the counselor's response
- 25% engage in anonymous online dialogues with counselor (1-15 exchanges)
- Dialogues center on students' reasons for not seeking treatment
- Those who dialogue are 3 times more likely to come for evaluation (38% vs. 12%) and to enter treatment (25% vs. 9%)



Problem-focused Paradigm for Suicide Prevention*

Recent research points to need for universities to change focus from dealing solely with suicidal students to reducing suicide risk among the entire student population

1. Primary prevention
2. Proactive assistance
3. Early intervention
4. Treatment of at-risk students

*Drum et al. (2009). New data on the nature of suicidal crises in college students: Shifting the paradigm. *Professional Psychology: Research and Practice*, 40: 213-222.



ISP Has Impact at Multiple Levels of Suicide Prevention

- | | |
|-------------------------------------|---|
| 1. Primary prevention | 1. Engages students in thinking about MH issues before need arises |
| 2. Proactive assistance | 2. Communicates message of connection and caring |
| 3. Early intervention | 3. Identifies early-stage problems that can be helped through modalities other than clinical services |
| 4. Treatment of at-risk individuals | 4. Supports at-risk students to get mental health treatment |



ISP Is Designated as a Best Practice

ISP is included in the
Suicide Prevention Resource Center's
Best Practice Registry for
Suicide Prevention



Expectations for Student Veterans

- Will require counselors to become familiar with unique needs and problems of student veterans
- Student veterans may find higher comfort level outside military/VA setting
- Can foster coordination of university and VA services
- Results of pilot at SUNY Albany will be carefully monitored



Community Outreach to Veterans

- As with college students, the most at-risk veterans are often the most reluctant to seek available services – proactive outreach is essential
- Model developed for outreach to student veterans has applicability for VA medical centers, Vet Centers and non-profit agencies serving veterans
- AFSP is seeking partnerships with such agencies to implement and evaluate a community-level ISP for veterans
- Customized website development, the interactive technology and staff training are supported by AFSP
- Clinical personnel provided by host agency



Contact:

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