

ENDURE

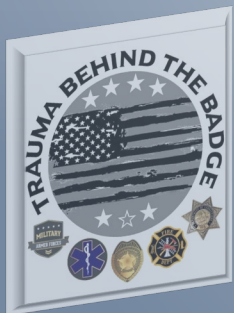
VETERANS AND
FIRST RESPONDERS
PROGRAM



LAKEVIEW
HEALTH
Addiction Treatment and Recovery

UNDERSTANDING THE UNIQUE WELLNESS CHALLENGES: MILITARY VETERANS & LAW ENFORCEMENT

Understanding the Crisis...Helping Our People.



Sgt. Christopher J.A. Scallon, MSPsy, CCISM (Ret.)



WHY ARE WE HERE???

To provide the best possible response
to someone in crisis!

DISCLAIMER

We will be discussing very real and emotional topics that may cause some distress.


HOW ARE WE UNIQUE?

Branch of Service
Theater of Combat/Service
Duration of Combat
Length of Service
Team Loyalty
Purpose
Ethos
“They Before I”

An Understanding of the Inevitability of Harm or Death

WHAT IS A TRAUMA?

- Event That Involves Death or Threatened Death or Serious Injury
 - Feelings of Fear, Horror, Helplessness
 - Resiliency Is Most Common Outcome
 - How Many Traumas Have You Seen?

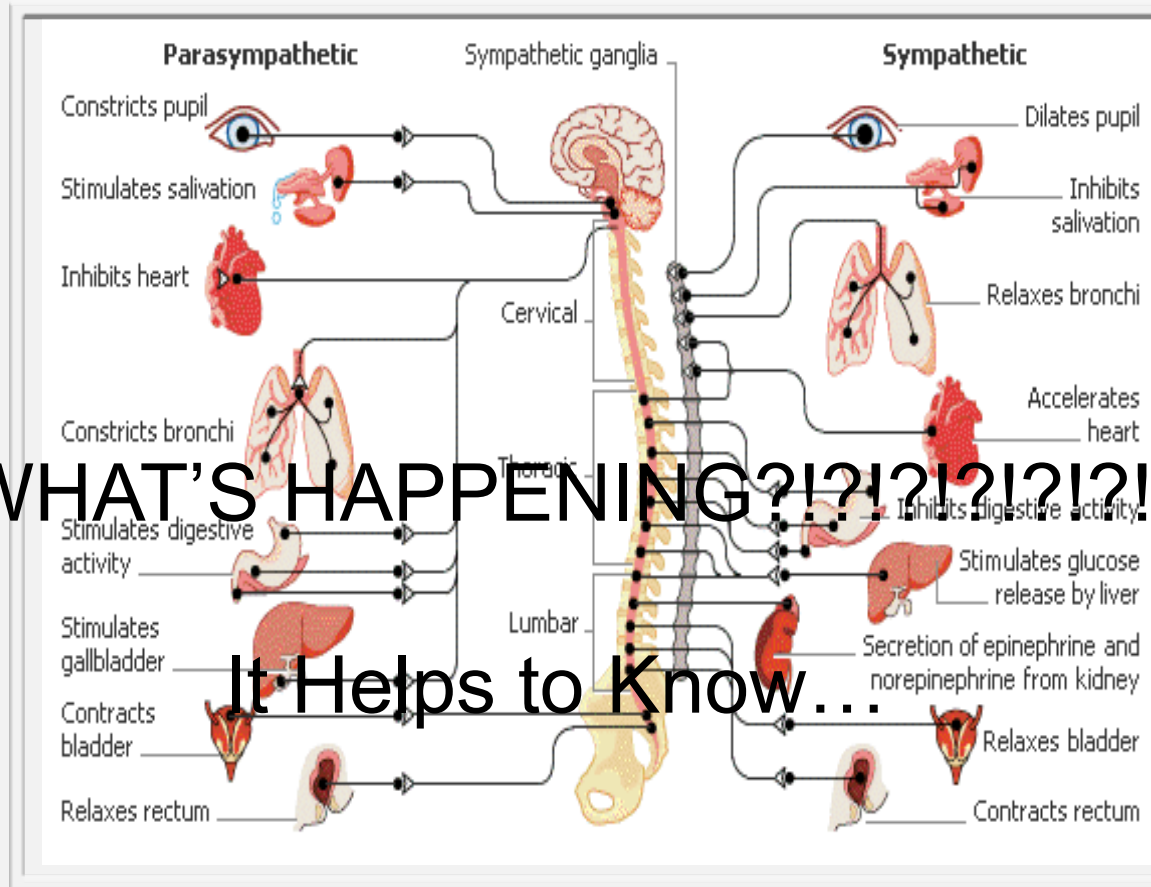


Trauma is an emotional
and chemical injury to
your brain.

But when the blast of war blows in our ears,
Then imitate the action of the tiger:

Stiffen the Sinews, summon up the blood.

-Shakespeare
King Henry V



"Post traumatic stress is a normal reaction to an abnormal situation"

Ok? So now what???

Cognitive

Physical

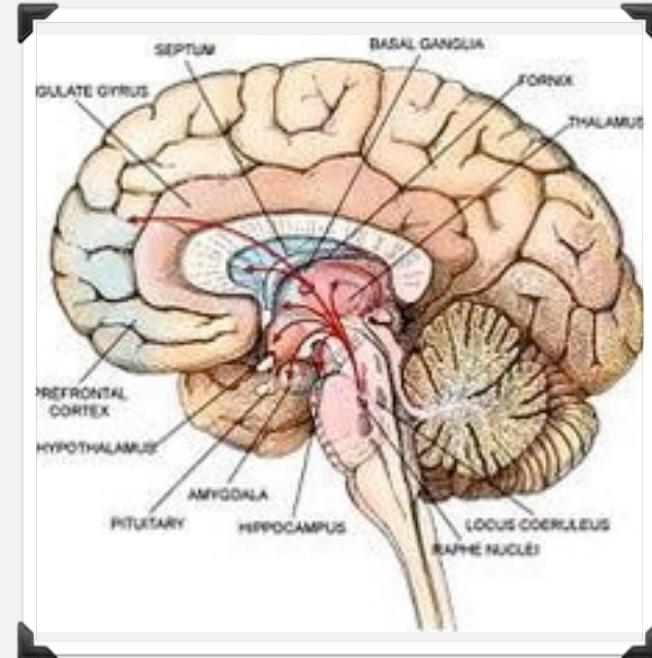
Emotional

Behavioral

* Relationships & Spiritual

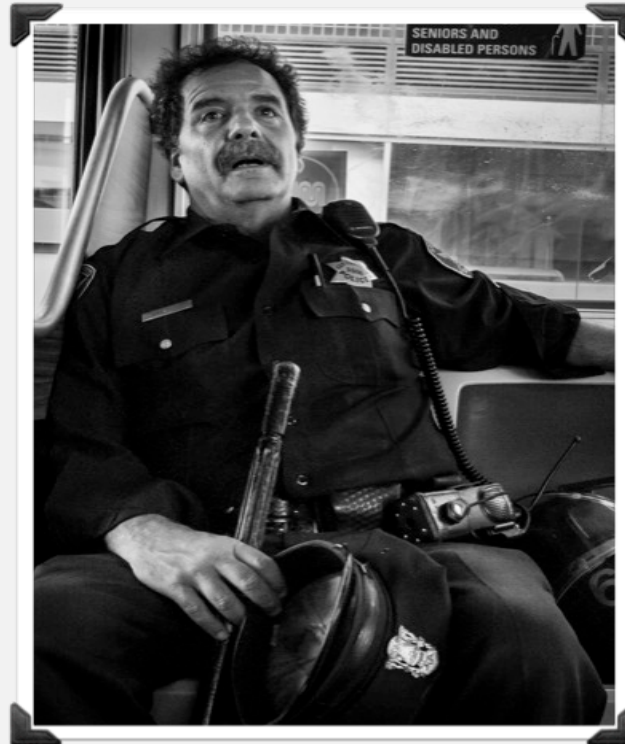
Cognitive Effects

- Extreme nightmares
- Suspiciousness
- Poor concentration
- Hypervigilance
- Poor problem-solving
- Difficulty making decisions



Physical Effects

- Dizziness
- Chest pain
- Headaches
- Exhaustion
- Elevated blood pressure



Emotional Effects

- Depression
- Guilt
- Denial
- Anxiety
- Irritability
- Suicidal thoughts
- Grief
- Sadness
- **Excitement!!!**



Behavioral Effects

- Isolation from family and friends
- Changes in communication
- Loss or increase in appetite
- Sleeping too much or too little
- Increased alcohol consumption
- Other addictive behaviors



MENTAL HEALTH ILLNESSES (WITHIN THE RANKS)

Important: individuals with mental illness do not exist in a vacuum.

- Mental illnesses exist on a spectrum
 - Functional to Non-Functional
 - Co-occurring/Comorbidity
 - Substance Abuse
 - Medications
 - Too much, Not enough, misuse...etc.

WHY WE DON'T GET HELP?

stigma surgery
shoulder blotch
social patchy **skin** tear
surgical melanocyte
isolated pattern **humiliation** **shame** sickness
warning **disgrace** injury **health** pigmentation
embarrassment guilty flaw **guilt** dishonour
condition sin dermatitis **dishonor** stress business ethnicity healthcare concept
loneliness alone lesion different depression section secret unemployment feeling stomach
fault disorder secret
uncomfortable caution
problem prejudice nervous
disease melanin human stop
belly surface ashamed discrimination blemish painful
lonely
ashamed
discredited

-Exposure-

“Down these mean streets a man must go, a man who is not himself mean, who is neither tarnished nor afraid...He is the hero; he is everything...

-Raymond Chandler

I would ask, who here has not become tarnished nor afraid?

Trauma-informed care shifts the focus from:

What is
WRONG
with you?

to

“
What
HAPPENED
to you?
”

Learn more at chcs.org/traumainformed

CHCS Center for
Health Care Strategies

1ST RESPONDER & MILITARY EXPOSURES

- Childhood Abuse (Sexual/Physical)
- Terrorist Attacks
 - Assaults
- Serious Accidents
- Natural Disasters
- ***Secondary Exposure***
 - Actual Death or Threatened Death or Serious Injury
 - Most Often Not About Killing Enemy
 - Personal Loss of Unit Member Most Common Trauma
 - 1) FEELINGS ABOUT IT
 - Terror
 - Helplessness
 - Horror
 - 2) Persistent Re-Experiencing
 - 3) Avoidance/Isolation
 - 4) Keyed Up/Hyper-Aroused

HOW PEOPLE COPE/RESPOND TO CRISIS—CLUES FOR YOU

- Alcohol Consumption
- Narcotic (both prescription and non-prescription)
 - Reckless driving or other criminal activity
 - Inability to sleep / poor sleep patterns
 - Startle Easily
 - Flashbacks/Hallucinations
 - Depression/Crying

LEGAL PROBLEMS & PTSD LEO-VETERANS

- Alcohol/Drug Related Driving Offenses
- Larceny
- Speeding/Reckless Driving
- Use of Force → Excessive Force → OIS
- Domestic Violence
- Sexual Assault

NO ONE IS IMMUNE TO OPERATIONAL STRESS “BATTLE MIND”

- Improves Quickly with:
 - Rest
 - Food
 - Reassurance (P.I.E.)
 - Reintegration with the Unit
 - Most Combat and Operational Stress Reactions (COSRs) Resolve Quickly
- 50% of Those With PTSD Get Better in 3 Months (DoD Statistics)
- What to Expect in a Returning War Fighter... Battle Mind

CONFLICTING ATTRIBUTES

IN-COMBAT VS. AT HOME

DISCIPLINE & ORDERING VS CONFLICT

MISSION OPSEC VS SECRETIVENESS

TARGETED VS INAPPROPRIATE AGGRESSION

TACTICAL AWARENESS VS HYPERVIGILANCE

LETHALLY ARMED VS "LOCKED AND LOADED" AT HOME

EMOTIONAL CONTROL VS DETACHMENT

NON-DEFENSIVE DRIVING VS AGGRESSIVE DRIVING

“The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet.”

Rachel Naomi Remen, *Kitchen Table Wisdom*, 1996

HOW CAN WE HELP???

Understanding and Compassion

But wait....

We must take an honest look at ourselves before
we can truly help others...

SELF-CARE

What are the Resources?

TREATMENT INTERVENTIONS

- Types
 - In-Patient
 - IOP
 - Support Groups/Services
- Significant Benefits
 - Medications
 - Substance Abuse Treatment
 - Cognitive Therapy (Group and Individual)
 - Stress Inoculation Training
 - Exposure Therapy (PE/CPT)
 - Diet and exercise

RESOURCES

<https://vtt.ovc.ojp.gov/>

WARNING

There are a myriad of available resources.
HOWEVER, before you recommend....VET!!!!!!



Public Safety Professionals are inherently skeptical of mental health resources...suggest the wrong one and he/she may never seek help again.

It's not the load that
breaks us down, it's the way
we carry it..."

-Lena Horne/Lou Holtz

QUESTIONS?

THANK YOU,
BE SAFE
&
STAY AWARE

Contact Info:

Christopher J.A. Scallon

757-328-5672 (personal cell)