



## Military and Veteran Behavioral Health Post-Master's Certificate Program



Presented by the Center for Deployment Psychology, Uniformed Services University of the Health Sciences,\* and The Henry M. Jackson Foundation for the Advancement of Military Medicine, Inc.



### Program Overview

While more than 1.6 million American troops have deployed to Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF), more servicemen and women are surviving than ever before because of better body armor and helmets, as well as improved battlefield medicine.

However, transitioning home from these conflicts can be a grueling fight for some of our men and women in uniform, including National Guard and Reserve members. It is not uncommon for these individuals to face numerous readjustment challenges, including behavioral health problems like posttraumatic stress disorder (PTSD), depression or traumatic brain injury (TBI). Family members, too, are affected as they work to reconnect with their warriors, some of whom have deployed two or three times or more.

We have learned from past wars that immediately identifying and tackling combat stress injuries is vital for overcoming them. So local communities across the country are charged with doing more today to reach out and shore up our newest generation of warfighters and their families.

Against this backdrop, the Center for Deployment Psychology has established the Military and Veteran Behavioral Health Post-Master's Certificate Program to teach best clinical practices to mental health professionals who are addressing the behavioral health needs of military personnel, veterans and their families. This intensive program covers key topics identified by behavioral health experts in the field, such as military culture, combat trauma, suicidal risk, and blast-related TBI. Completing the full certificate program is strongly recommended for health-care professionals who wish to obtain the comprehensive skills and knowledge needed to care for our troops.

### **Prerequisite for the Certificate Program**

- Civilian mental health professionals with at least a master's degree who are actively treating, or plan to treat, the military / veteran population.
- The course material is not designed for, and may not be appropriate for, non-professionals and those who are not working with the military / veteran population.
- Active Duty MH professionals interested in enrolling in this program should contact the Center for Deployment Psychology by calling Linda Grill at (301) 295-1590 to inquire about other trainings developed specifically for them.

### **Program Format and Benefits**

- 40 CE credits of approved workshops
- Completion in six to 12 months
- Includes seven core workshops and no electives
- Certificate in Military and Veteran Behavioral Health upon completion

### **Required Workshops**

1. Military Culture, Terminology, and the Deployment Cycle
2. Etiology and Assessment of PTSD and Comorbid Problems
3. Assessment and Treatment of Sleep Disturbance Associated with Deployment
4. Traumatic Brain Injury Sustained in Combat
5. Assessment and Treatment of Deployment-Related Depression
6. Identification, Prevention, and Treatment of Suicidal Behavior
7. Evidence-Based Treatment of PTSD: Prolonged Exposure Therapy

Workshops 1 through 6 may be taken individually without enrolling in the Certificate Program. For non-Certificate participants, Workshop 1 is strongly recommended as a pre-requisite for Workshops 2 through 6. As an alternative to Workshop 1, non-Certificate participants may take a web-based Military Cultural Competence course through the Center for Deployment Psychology (see On-Line Training Program at [www.deploymentpsych.org](http://www.deploymentpsych.org) under). Certificate participants cannot substitute Workshop 1 with this web-based course. Workshop 7 is only open to Certificate participants.

### **Results**

After completing the Military and Veteran Behavioral Health Certificate Program, participants will:

- Better understand military terminology and the military culture.
- Be more knowledgeable about how the deployment cycle affects service members and their families and ways to build resilience.
- Better understand how sleep problems can be assessed and treated, particularly within the context of wartime operations.
- Be more skillful in preventing, identifying, and treating suicidal behavior and depression in service members using cognitive behavioral techniques.
- Better understand how PTSD and related problems develop, particularly within the context of wartime operations.
- Be trained in the skills and protocol associated with Prolonged Exposure Therapy (PE), an evidence-based treatment for PTSD.
- Be more aware of symptoms of blast-related TBI, as well as guidelines and resources for assisting service members with mild TBI and their families.

### **Further Information**

For more information about the Military and Veteran Behavioral Health Certificate Program or individual workshops, contact Matthew Summerford at 610-499-1209 or [mesummerford@widener.edu](mailto:mesummerford@widener.edu). Registration will be available online soon at [www.postgraduatecenter.org](http://www.postgraduatecenter.org).

\*\*The Uniformed Services University of the Health Sciences, 4301 Jones Bridge Rd., Bethesda, MD 20814-4799 is the awarding and administering office for award # HU0001-06-1-0003. This project is sponsored by the Uniformed Services University of the Health Sciences (USUHS); however, the information or content and conclusions do not necessarily represent the official position or policy of, nor should any official endorsement be inferred on the part of, USUHS, the Department of Defense, or the U.S. Government."

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## Faculty Biographies

**William Brim, PsyD**, known as Dr. William "Bill" Brim, is Deputy Director of the Center for Deployment Psychology at Uniformed Services University of the Health Sciences in Bethesda, MD. He is a decorated 10-year veteran of the United States Air Force. Dr. Brim received a BS in Clinical Psychology from the University of Tennessee, Knoxville and a Doctorate in Clinical Psychology from Nova Southeastern University in Ft. Lauderdale, Florida. He completed his residency and a post doctoral fellowship in Clinical Health Psychology at Wilford Hall USAF Medical Center in San Antonio, Texas. Dr. Brim was stationed in South Carolina, Mississippi and in the United Kingdom. He worked with deployed members in support of OIF/OEF and MEDFLAG exercises in Africa. Prior to becoming Deputy Director, he was providing supervision and training for psychology interns and professional staff at the Malcolm Grow USAF Medical Center at Andrews Air Force Base, MD as the Deployment Behavioral Health Psychologist for the Center for Deployment Psychology. The focus of Dr Brim's clinical work, supervision and training is on deployment and redeployment related mental health issues, specifically assessment and treatment of combat-related PTSD. Additionally, Dr Brim focuses on health psychology clinical practice and supervision, the integration of mental health services in primary care and forensic psychology expert consultation and witness services.

**Beth Davis, PhD**, is a licensed clinical psychologist with specialty training in neuropsychology, health psychology, and biofeedback. She has worked as a mental health provider in a military setting for approximately 10 years in various installations both CONUS and OCONUS. She currently works for the Center for Deployment Psychology as the Deployment Behavioral Health Psychologist at Andrews AFB, MD. Dr. Davis completed her PhD in clinical psychology at the California School of Professional Psychology in 1999 and BA at Ohio State University in 1989. She finished postdoctoral training at a full-time internship in clinical neuropsychology at McLean Hospital Harvard Medical School in 2002.

**Paula Domenici, PhD**, is a licensed counseling psychologist working as the Head of the Division of Training Programs at the Center for Deployment Psychology at Uniformed Services University of the Health Sciences in Bethesda, MD. In this capacity, she oversees the 2-week training course and develops and presents workshops for specific military and civilian audiences on psychology-related topics across the country. From 2006 to 2007, she worked as the Deployment Behavioral Health Psychologist for the CDP at the National Naval Medical Center, where she saw Marines in both the outpatient behavioral health clinic and inpatient casualty care unit. She performed psychological evaluations and provided individual and group treatment for PTSD and other post-deployment concerns. She also led a family group for parents and spouses of wounded warriors. Prior to joining the staff of the CDP, she was an APA Congressional Fellow at the Office of Senator Hillary Clinton, where she covered mental health, aging, and deployment-related veterans' issues in the legislative arena. She also has worked as a staff psychologist and postdoctoral fellow at the San Francisco VA Medical Center, providing individual and group therapy to OIF/OEF, Vietnam, and WWII veterans. Before graduating from the doctoral program at the University of Maryland, College Park in 2002, she received an MA in Development Psychology from Teachers College, Columbia University in NYC and BA in English & American Literature from Brown University in Providence, RI. Dr. Domenici is a co-author of the book, *Courage after Fire: Coping Strategies for Troops Returning from Iraq and Afghanistan and Their Families*.

**David Riggs, PhD**, is the Executive Director for Center for Deployment Psychology at Uniformed Services University of the Health Sciences in Bethesda, MD. He earned his BA at the University of Kansas and his PhD at the State University of New York at Stony Brook. Prior to joining the Center for Deployment Psychology, Dr. Riggs held clinical research positions at the Center for the Treatment and Study of Anxiety and the National Center for PTSD at the Boston VA Medical Center. As a clinical and research psychologist, much of his work has focused on trauma, violence and PTSD. Dr. Riggs has published over 60 articles and book chapters and presented over 100 papers and workshops at professional conferences. He served as a member of the PTSD Treatment Guidelines Committee and the Dissemination Task Force for the International Society for Traumatic Stress Studies and currently serves on the APA Presidential Task Force on Military Deployment Services for Youth, Families and Service Members. He has trained numerous student and mental health professionals from the United States and other countries in techniques for treating PTSD, OCD and other anxiety disorders. Recently he co-led a series of workshops to train military behavioral health professionals who are preparing to deploy to treat PTSD and other trauma-related distress.

**Augusto Ruiz, PsyD**, is a clinical psychologist serving as the Deployment Behavioral Health Psychologist for the Center for Deployment Psychology at the National Naval Medical Center in Bethesda, MD. Dr. Ruiz served 5 years active duty as a Navy psychologist. He received his doctorate in clinical psychology from Nova Southeastern University in Ft Lauderdale, Florida and completed his residency at the National Naval Medical Center in Bethesda, MD. Dr. Ruiz was stationed at the Hospital Point Clinic at the United States Naval Academy and on the USS CARL VINSON. He has worked with deployed members in support of OIF/OEF and been on deployment in the Persian Gulf. Dr. Ruiz recently left his position as a supervisor at the Montgomery County Crisis Center to return to Navy Medicine. The focus of Dr. Ruiz's work, supervision, and training is on deployment-related mental health issues, crisis intervention, suicide assessment and suicide prevention. Additionally, Dr. Ruiz focuses on cross cultural psychology and the treatment of diverse populations. He has offered several seminars to sailors, mental health professionals, and county police on cross cultural issues, PTSD, and suicide prevention.

**Priscilla Schulz, LCSW**, is a Senior PTSD Treatment Trainer at the Center for Deployment Psychology at Uniformed Services University of the Health Sciences in Bethesda, MD. She received her Masters degree from the Brown School of Social Work at Washington University in St. Louis. Prior to joining the staff of the CDP, Ms. Schulz was a trainer and consultant on the use of Cognitive Processing Therapy for PTSD for the National Center for PTSD, Boston VA Health System. At the same time Ms. Schulz was clinical faculty at the Center for Trauma Recovery, University of Missouri – St. Louis. There she provided clinical services to trauma survivors, and administered several grants and programs that served special populations, specifically war refugees and survivors of homicide. The focus of Ms. Schulz' clinical work, supervision, and training is on reactions to and effective treatments for traumatic stress, and on understanding and overcoming barriers to serving underserved or disadvantaged populations of trauma survivors. Towards this end, Ms. Schulz has worked extensively cross-culturally, and has been successful applying empirically supported therapies for PTSD with limited-English-proficient patients, and in less-than-ideal clinical practice settings.

# Workshop Descriptions

## **Workshop I – Military Culture, Terminology, and the Deployment Cycle**

This workshop will provide an overview of the US military, reviewing basics about its structure and mission, common terminology used in and out of theater, and the demographics of military personnel and their families. It will shed light on the unique experiences of military personnel and their families through use of videotapes and a review of research studies. This workshop will help elucidate aspects of the military culture and its ethos that may impact seeking help for behavioral health problems. There will be a discussion on psychosocial consequences of different stages of the deployment cycle on service members and their families and ways to help them manage these challenges.

## **Workshop II – Etiology and Assessment of PTSD and Comorbid Problems**

This workshop will review common reactions to trauma and risk factors that may contribute to the development of PTSD in the general population and military population. Research findings on the rates of traumatic exposure and PTSD and the typical course of PTSD without intervention will be discussed, as well as what we know about traumatic experiences faced by military personnel and their combat stress reactions. This workshop will also focus on problems that commonly coexist with PTSD, which service members may first present to clinicians, including substance use disorders, relationship issues, and medical concerns. Assessment tools for identifying PTSD in the military population will be covered in addition to the strengths and weaknesses of using these instruments.

## **Workshop III – Assessment and Treatment of Sleep Disturbance Associated with Deployment**

This workshop will cover the rates and types of sleep problems identified in the military population, highlighting current research findings on this topic. The epidemiology, diagnosis, and conceptualization of insomnia and its psychological, behavioral and health implications will be reviewed. Clinical strategies and interventions for assessing, treating, and managing non-deployment and deployment-related sleep problems, including insomnia, will be provided. The emphasis will be on common sleep disturbances that emerge in theater and educational, cognitive, and behavioral components of treatment during and after deployment.

## **Workshop IV - Traumatic Brain Injury Sustained in Combat**

This workshop gives an overview of mechanisms associated with blast-related traumatic brain injury (TBI) and the signs, symptoms, levels of severity, and rates of TBI in the military population. Recommendations for managing mild TBI will be covered plus an overview of neuropsychological screenings and tests used in and out of theater to assess for TBI. This workshop will review overlap between TBI and PTSD, care coordination strategies, and resources and services for military personnel who have sustained a TBI and their families.

## **Workshop V – Assessment and Treatment of Deployment-Related Depression**

This workshop will provide an overview of factors associated with depression in military personnel and review the prevalence of depression and its significance in the military population. Related research findings will be highlighted. Also, this workshop will cover strategies and tools to assess for depression and empirically-validated treatments and adjunct techniques to address it in the military population. Case examples will be discussed to exemplify key points about conceptualizing and implementing treatment for depression in service members.

## **Workshop VI – Identification, Prevention, and Treatment of Suicidal Behavior**

Rates of suicide in the general population and military population will be reviewed in this workshop, followed by pathways leading to suicidal behavior and military risk and protective factors. Stages and levels of suicide prevention will be covered, including military initiatives. Additionally, this workshop will focus on clinical strategies for assessing and managing suicidal behavior, referencing a structured cognitive therapy protocol used by Brown et al., 2005 that has research support.

## **Workshop VII – Evidence-Based Treatment of PTSD: Prolonged Exposure Therapy**

This intensive workshop will provide training on how to conduct Prolonged Exposure Therapy (PE) to treat PTSD, which is an evidence-based approach described in the manual, *Prolonged Exposure Therapy for PTSD – Therapist Guide*, by Foa et al., 2007. This 2-day training will cover the theoretical underpinnings and research behind PE and review the main clinical techniques used in this structured protocol. Step-by-step instructions for conducting PE therapy sessions, along with strategies for working with over and under engaged patients and other difficult cases, will be shared. Videotaped examples of PE cases will be used to demonstrate therapist skills. Note: students will be expected to do role-plays to practice PE techniques.