Together Strong Mid-Term Learning Activity

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Military members and veterans are at higher risk of experiencing traumatic events during service. Post-Traumatic Stress Disorder (PTSD) symptoms in veterans are estimated at 13.5-30% (Herzog et al., 2020). PTSD symptoms may go unnoticed by the veteran due to a lack of familiarity with the signs and symptoms or the stigma of seeking mental health care (Chen et al., 2021). The mid-term learning activity, Together Strong, is an interactive simulation that allows users to practice communication to support veterans and service members. Practicing with the interactive simulator provides possible questions, responses, and opportunities for immediate feedback intended to assist users in determining the best approaches to speak with veterans, help them problem-solve, and seek help when needed. The simulation exercise provides the opportunity to practice communication skills needed to assist a veteran or service member experiencing signs and symptoms of PTSD related to their military service or experience. The Together Strong simulator activity meets multiple course outcomes. It allows users to analyze the military and veteran culture, its effects on the psyche, and how the community perceives it. This simulation also allows users to assess suicidality, risk management, and prevention.

Supporting Others

We can learn to support military veterans and service members by practicing communication using the Supporting Others module of Together Strong. In this module, we experience the course outcome of analyzing the military and veteran culture, its effects on the psyche, and how the community perceives it. Nate is a Marine veteran who suffered from challenges transitioning from the military to civilian life. He struggled to transition back into civilian life and his relationships with others. In this module, Nate notices some concerning behaviors with one of the mechanics at the service shop. Nate saw the Army tattoo on Chris' arm

and realized he was a veteran that may be struggling with integrating back into society. Nate overheard other mechanics stating Chris has a "bad temper" and noticed Chris had wrecked his truck. According to the VA National Center for PTSD (2023), it is normal for someone who has experienced trauma to have upsetting memories, difficulty sleeping, and feelings of hyperarousal. When these symptoms persist for longer than four weeks, cause distress, or interrupt work or family life, the VA National Center for PTSD (2023) recommends seeking professional help. Since Nate has witnessed multiple areas of concern with Chris, he decided to try to reach out to Chris to see if he needs someone to talk to after transitioning to civilian life.

Professional Experience

As a VA RN in a DoD/VA Joint Venture facility, other VA staff members and I need to be aware of the prevalence of PTSD in veterans who use VA care. According to VA National Center for PTSD (2023), one study found that 23% of veterans had PTSD at some point compared to 7% of Veterans who do not use VA healthcare services. Although I do not provide direct patient care, I feel comfortable working with Veterans who have PTSD. Additionally, I feel as though I can guide others in their care for patients who have PTSD. This simulation has helped me to meet course outcomes to analyze the veteran and military culture and psyche more effectively. For example, I have noticed a few active-duty members I work with who often struggle to be sensitive to some aspects of mental health care in the veteran population. After reflecting upon this simulation, perhaps that is because those active-duty members I am thinking of are currently suffering from PTSD as well. According to the VA National Center for PTSD (2023), feeling numb or unable to have positive feelings toward others is a sign of PTSD.

Although I am not a veteran, I feel comfortable discussing aspects of military service with veterans and military members. As a Nursing Supervisor, I often work closely with many

veterans and active-duty members who are not even patients in our hospital. I have witnessed firsthand the distinct changes some of my friends have gone through following a recent complex and morally distressing deployment. As the VA National Center for PTSD (2023) describes, feeling and acting differently following a traumatic situation is normal. However, when these feelings persist after a few weeks or months, it could become a problem. This simulation has helped me to realize the importance of being aware of the signs and symptoms and sometimes subtle changes that may provide a clue that someone has experienced traumatic events or has PTSD. This simulation has also helped me to realize the importance of carefully choosing the correct words to say as a civilian speaking to a veteran or military member about their experience in the service because so many civilians do not know what to say to veterans and end up causing more distress as Chris described in the simulation.

Application of Simulation Experience

Recently, I met a doctor for the first time following her return from a challenging, highly publicized event she assisted with during her deployment under extremely distressing life-or-death circumstances. I had never met her before, but she was significantly on edge and irritable while working with her to facilitate a direct admission from another facility. Although this was my first interaction, this doctor is well-known throughout the hospital as very kind and easy to work with, so this behavior surprised me. Because I had other co-workers and friends who deployed with her, I knew their struggles during the deployment. I knew how difficult it was for them to hear so much about their deployment on the news and to have experienced it firsthand. As a result of my awareness of the doctors' recent return from deployment, I thought she might be suffering from psychiatric issues related to the traumatic experience. Since I had not met her before, and she already seemed very irritable with me, I did not feel comfortable speaking to her

directly about her struggles. Instead, I spoke to one of her colleagues whom I know and trust, and they were able to take over and help her. This was important because the person who may notice the behavior changes may not be the best person to try to help, such as in this case. As part of the course outcome to assess suicidality, risk management and prevention, it is important to be aware of warning signs such as a significant change in behavior. Although not everyone is comfortable talking about suicidality, anyone who understands the signs and symptoms of PTSD can use resources to get the appropriate persons to reach out and provide support. After completing this activity, I may have better communication skills to address a situation like this if it reoccurs.

Conclusions

Although I previously felt comfortable speaking with veterans with PTSD, the Together Strong simulation experience improved my confidence in finding the right words to say to a veteran experiencing psychological distress. It allowed me to learn from mistakes and how specific ways of communicating will elicit a defensive response, which I had sometimes noticed in our hospitalized veteran population when I thought I was communicating effectively. The "undo" button was good to use when I did not get the expected response because it allowed me to see how I communicate and steer the conversation positively or negatively. Overall, this simulation improves my ability to communicate with veterans and military members experiencing psychological distress.

References

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