

MISSION ALLIANCE

In this Issue: PTSD and Social Isolation

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OUR FIRST SIX MONTHS

Welcome to the Mission Alliance ezine April edition! I would like to take the opportunity to thank the project team, Veteran Leaders, Collaborative Academic Research Members (CARM), consultants, and community organizations for the outstanding work that has been accomplished since the beginning of the program. A special thanks goes out to Wendi Niad for managing the project and deliverables.

How did we get here? In November 2021, Mission Alliance received a Patient Centered Outcomes Research Institute (PCORI) Engagement Award to build capacity for patient-centered outcomes research (PCOR) and comparative effectiveness research (CER) regarding topics related to COVID-19 for Veterans with posttraumatic stress disorder (PTSD). From previous PCORI project participant suggestions, we created Mission Alliance teams in four regions of the United States: Midwest, Northeast, Southeast, and West. Dr. Krause-Parello (Project Co-Lead) and I recruited the majority of the team members prior to our November start date. Today, we have a full team with 13 people across five universities and three community organizations. Our goal is to work together to engage Veterans and key community stakeholders in dialogue regarding COVID-19's impact on social isolation, loneliness, mental health, and wellbeing.

Since its inception, Mission Alliance team members have worked diligently to complete training, create field note templates and evaluation tools, and hold two virtual regional meetings with an emphasis on social isolation. We receive expert guidance from Lyndon Villone, Marine Corps Veteran and founder and director of Heel the Heroes, and Dr. Alan Peterson, LT Col US Air Force (retired), affiliated with the University of Texas Health Science Center at San Antonio and the Director of the South Texas Research Organizational Network Guiding Studies on Trauma and Resilience Consortium (STRONG STAR). Mission Alliance receives community support from Canines Providing Assistance to Wounded Warriors (C-P.A.W.W.) and the PTSD Foundation of America.

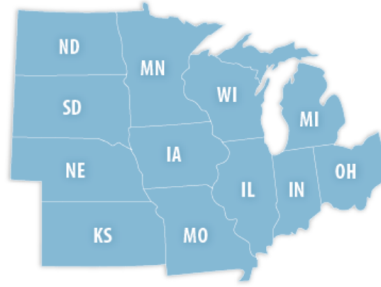
Meetings have been fruitful, and the regions have reached 42 Veterans and key community stakeholders. Our stellar Mission Alliance team members have contributed a synopsis of their meetings in this edition.

One of the biggest lessons I have learned from the project thus far is the importance of championing a collective mission, ensuring everyone's voice is heard, and being able to adapt and change when needed. As the year moves on, the Mission Alliance team looks forward to engaging many more Veterans and stakeholders to meet project goals. Onward and upward!

MIDWEST REGION HIGHLIGHTS



By Dr. Viann Nguyen-Feng



Lead Veteran Randall Jones

The Midwest Mission Alliance Team held its first meetings in February 2022. These initial meetings focused on the topic of COVID-19 and social isolation. The 12 attendees included Veterans, Veteran service providers, and Veteran family members (e.g., partner, sibling). With our group size, almost all participants shared their perspectives at least once beyond their background introductions. Each meeting went to the hour with space for more shared words and laughs had time been permitted.

A core theme related to the feelings of frustration, disappointment, discomfort, “starting from scratch,” and being “screened and tossed around” with the Veterans Affairs (VA) System. Of note, Veterans appeared to have a strong appreciation of and desire to receive more alternative medicine approaches that were “not necessarily in the Western medicine mindset.” With that, participants shared healthy living advice—from food to psychedelics; they gave a dual meaning to the word “mushrooms”. Some of the nutritional fungi discussed were Lion’s Mane, shiitake, and mataki. Veterans also recommended coffee and chicory root. The groups discussed holistic care including acupuncture, meditation, and dietary considerations, with particular time spent on plant-based eating.

Further, themes around “very imperfect” technological communication methods and posttraumatic stress disorder symptoms were discussed. Veteran service providers elaborated on issues with increased screen time leading to triggers and providing more barriers, especially for those with traumatic brain injuries. The groups also noticed how more time on social media led to “sound chambers of ideology,” in which “lines were drawn.” Moreover, some individuals described feeling “less tolerable” and more “on edge.”

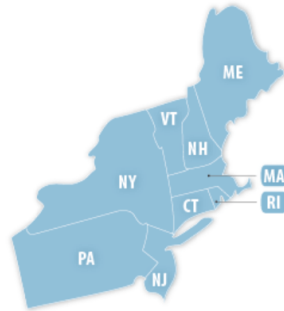
Nonetheless, there were memorable quotes that speak to social isolation and to the heart of social connectedness. Some felt gratitude was expressed easily. For instance, there were sentiments of feeling “lucky” when simply seeing someone in person, so a “highlight” of the week could be seeing the housecleaner. The groups noted a variety of shifts in levels of isolation over the course of the pandemic. For instance, some participants were already used to social isolation, so COVID had not affected their isolation levels “at all.”

For others, circles went from being large to being “null” to feeling “alone in life,” as though COVID was “closing them down” despite the knowledge that other people and supports were still there. Veterans and stakeholders expressed different views on isolation. One felt that time in isolation and quarantine for ten days was “beautiful” given the hecticness of all else occurring. Many did not feel employee resource groups or other community resources were too helpful, but they truly appreciated the connection fostered by being around “those who have chewed the same dirt”. That is, having another Veteran around would create an “extended kinship.”

NORTHEAST REGION HIGHLIGHTS



By Dr. Patrick Walsh



Lead Veteran Ralph Presciutti

The Mission Alliance Northeast team is grateful to be a part of this project to engage veterans and stakeholders on important and very timely issues around PTSD and COVID-19, as well as veteran involvement in cost-effectiveness and patient-centered outcomes research. The team is led by Ralph, a U.S. Army veteran and active member of the veteran community, and Patrick, a health services researcher. We kicked off our Mission Alliance agenda in late March, holding our first focus group by video conference. Veteran and stakeholder attendees included veterans from the Gulf War and Post 9/11 and a founder of a veteran support organization. The meeting focused on social isolation. Each focus group member participated in the discussion, with reflective prompts and questions from the Lead Veteran.

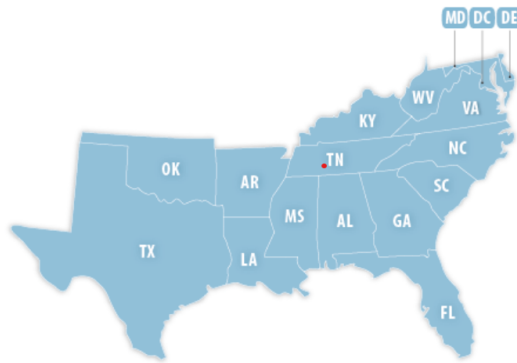
In confronting the topic of social isolation and its intersection with PTSD and COVID-19, two main themes emerged: hardship and resilience. The attendees spoke about the loss of things during this pandemic that could not be replaced- like Honor Flights, in-person contact with family and friends, and the unplanned social connections at the gym and when 'dropping in' on veteran support events. Discussion included the consequences of not being able to complete physical therapies or in-person school. Social isolation has exacerbated already difficult challenges in relationships, work, education, and health care. The attendees also talked about things that could be adjusted and reconditioned - telehealth appointments instead of in-person, virtual support events with flexible ways to participate and contribute, and reconnecting through social media. At the focus group the participants also talked about what they gained. Deeper and more valued relationships with those close to them. Learning to paint virtually. Expertise and experience with Zoom.

Overall, the first focus group had participants offering valuable insights and concerns on the topic- mixing opinions, personal histories and anecdotal stories. The Northeast team believes we have had a good start toward helping the Mission Alliance project reach its goals.

SOUTH REGION HIGHLIGHTS



By Dr. Nicholas Giordiano



Lead Veteran John Paul Nolan, Jr.

The Mission Alliance South team continues to expeditiously execute the proposed aims of this project despite challenges presented by the ongoing COVID-19 pandemic. The Mission Alliance South team is co-led by JP, a veteran, and Nick, a nurse scientist. Using a digital video conferencing platform to maximize attendance across the Southeastern United States while maintaining social distancing, we have hosted multiple focus groups with veterans to discuss cost-effectiveness research and patient-centered outcomes research as it relates to COVID-19 and veteran health specific to PTSD.

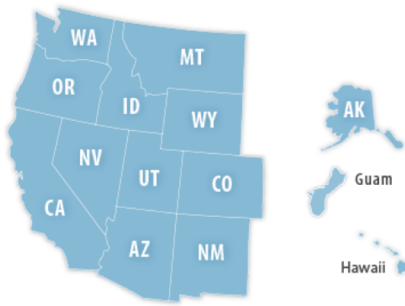
At each session we met with over half a dozen veterans and stakeholders to discuss their lived experiences during the pandemic. Veterans from multiple conflict eras, living across the Southeastern United States joined our monthly discussion. Conversations were both frank and optimistic in nature. Participants outlined concerns with keeping up with social engagements and communities they were part of prior to the pandemic as these social activities either ceased or they shifted to online venues. However, attendees highlighted that the pandemic has provided more remote opportunities to engage with their families and those they cohabitate with while simultaneously providing unprecedented access to care via telehealth.

Veterans joining these Mission Alliance conversations from rural communities noted that telehealth resources seemed fragmented and connecting with clinicians was difficult at first in 2020. Others expressed frustration with the limited centralized communication on veteran community services that are available to them regionally. Attendees reflected that these discussions, supported by Mission Alliance, provided an engaging environment to discuss both challenges and successes faced during the pandemic within their personal and professional lives. The Mission Alliance South team continues to seek out veterans residing in the Southeastern United States to join our monthly discussions to meet other veterans and stakeholders to share their experiences to inform this future work.

WEST REGION HIGHLIGHTS



By Dr. Basilia Basin



Lead Veteran Aaron Siebert

We had the privilege to hear from two groups of veterans about their experience with social isolation during this COVID-19 pandemic. People shared both positive and negative experiences during the pandemic. Earlier in the pandemic, when many people stayed home more, the veterans shared experiences of enjoying fewer people out in public. The roads and freeways had less traffic, making driving less stressful. There were fewer people in the grocery stores. This was less triggering for their PTSD; they could shop during regular hours instead of late-night hours. The veterans shared their experiences with the health care system. The emergence of telehealth visits made access to care easier because they did not have to drive anywhere or sit in a crowded waiting room. There were challenges with health care too. The long waits to get appointments made it challenging to keep medications filled.

Some veterans shared that it was harder to have their families and loved ones at home so often, having less time alone for themselves when it came to their relationships. This either strengthened their relationships or was a catalyst for ending relationships. The emerging digital community opened up lines of communication via group texts and online meetings, making staying connected easier during the pandemic. Veterans shared their appreciation for connections that were not considered before the pandemic. Overall, hearing these veterans' stories has shed some light on how they experienced social isolation during the pandemic. We look forward to learning from veterans and key community stakeholders at future meetings.

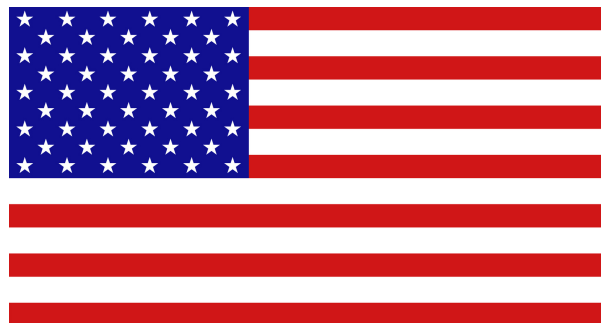
Resources for Veterans

C-P.A.W.W.: "The mission of C-P.A.W.W. is to comprehensively advance interdisciplinary research, education and practice protocols for wounded warriors and veterans through the development of evidence-based and restorative interventions, to support military-related health initiatives by building community partnerships, to investigate therapeutic interventions--particularly those involving canine assistance-- that positively influence health outcomes, and to emphasize system planning, innovative public policymaking, and thorough protocols of care development for the armed forces."

STRONG STAR Consortium Resources: "The South Texas Research Organizational Network Guiding Studies on Trauma and Resilience, or STRONG STAR, is a multidisciplinary and multi-institutional research consortium funded by U.S. Departments of Defense (DoD) and Veterans Affairs (VA) to develop and evaluate the most effective early interventions possible for the detection, prevention, diagnosis, and treatment of combat-related posttraumatic stress disorder (PTSD) and related conditions in active-duty military personnel and recently discharged veterans."

PTSDUSA.ORG: "The mission of the PTSD Foundation of America is to bring hope and healing to combat Veterans and their families suffering from the effects of combat-related PTSD."

Mission Alliance



Serving Those Who Bravely Served Us

SOCIAL ISOLATION OPEN ACCESS ARTICLES DISCUSSED AT TEAM MEETINGS

Cox, D.W., Baugh, L.M., McCloskey, K.D., & Iyar, M. Social causation or social erosion? Evaluating the association between social support and PTSD among Veterans in a transition program. *Journal of Military, Veteran, and Family Health*, 5(1), 71-79. <https://doi.org/10.3138/jmvfh.2017-0040>

Johnson, Albright, D. L., Marzolf, J. R., Bibbo, J. L., Yaglom, H. D., Crowder, S. M., Carlisle, G. K., Willard, A., Russell, C. L., Grindler, K., Osterlind, S., Wassman, M., & Harms, N. (2018). Effects of therapeutic horseback riding on post-traumatic stress disorder in military veterans. *Military Medical Research*, 5(1), 3-3. <https://doi.org/10.1186/s40779-018-0149-6>

Nichter, Hill, M. L., Na, P. J., Kline, A. C., Norman, S. B., Krystal, J. H., Southwick, S. M., & Pietrzak, R. H. (2021). Prevalence and Trends in Suicidal Behavior Among US Military Veterans During the COVID-19 Pandemic. *JAMA Psychiatry*, 78(11), 1218-1227. <https://doi.org/10.1001/jamapsychiatry.2021.233>