

Individual Placement & Support (IPS) for Veterans

Presented by: Matt Christensen

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Announcer: Thank you for visiting the Illinois Supported Employment Transformation Initiative web site. The following recording is part of our IPS Training & Education Online Library. Visit our web site to obtain free information and resources to promote employment in the behavioral health field.

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Welcome to this webinar on Individual Placement & Support, also known as “IPS” employment services for veterans, brought to you by the Illinois Employment Transformation Initiative. I want to point out that there is no specific IPS scale for veterans, and that veterans receive IPS services as they are outlined in the current 2008 IPS 25 point scale. The purpose of this presentation is to review what makes veterans a unique population. If you would like to learn more about IPS, please review some of the other great webinars and materials hosted on this site. My name is Matt Christensen, and I am an IPS Trainer with the Illinois Division of Mental Health. I created this training with help from Eric Eleazer, a mental health professional who served in the United States Air Force, Nick Turner, a licensed therapist who specializes in trauma-informed care and veterans services, and Veronica Trimble, also with the Illinois Division of Mental Health, and who served in the US Marine Corps.

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This presentation will focus on how some veterans may engage in IPS services. As mentioned a moment ago, while the IPS model is applied to veteran populations receiving mental health services in the same way as it may be applied to civilian populations experiencing mental illnesses, there may be some cultural differences. These differences will be discussed. There are also differences in the way some vets approach work, and some of these differences may in fact be advantages. Here are some highlights of what we will cover: the behavioral health needs of veterans, an understanding of veterans’ culture and experiences, the assets and challenges that veterans bring to the workplace, and how to help veterans in IPS.

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What do we know about veterans? There are currently 18.2 million veterans in the United States. Approximately 2.5 million have served our country, post 9/11. 60% of these veterans are under the age of 34. There are currently 727,000 veterans in Illinois. In July 2019, the national veteran unemployment rate was 3.4%. The rate for non-veteran unemployment was 3.6%.

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The behavioral health needs of veterans. The typical age of onset of mental illnesses corresponds to the typical age of enlistment. Onset of most mental illnesses occurs in late childhood or young adulthood. Many of the vets that I have known, including the ones that I provided services to, report that they felt ashamed to have developed symptoms while enlisted, and felt “weak.” After being educated on how this age of onset holds true for non-military people as well, and is not a character issue, they often felt less ashamed. 20% of the veterans who served in Iraq or Afghanistan report episodes of major depression or post-traumatic stress disorder (PTSD). It is

unclear as to whether this is due to these conflicts, or because more attention is being devoted to PTSD, and stigma has lessened in more recent times.

19.5 % of veterans with these mental health issues have also experienced a traumatic brain injury (TBI). Note that this can lead to other issues that are often confused for psychiatric symptoms. The suicide rate among veterans is twice the rate of the general population. The veteran rate is 30 per 100,000 annually, compared to the civilian rate of 14 per 100,000 annually. 1 in 15 veterans lives with a substance abuse disorder, and opiate misuse is on the rise, due in part to chronic pain from war injuries, along with the increase in availability and potency of opiates and opioids.

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Living with PTSD. Many veterans experience post-traumatic stress disorder (PTSD) that affects their day-to-day living. This means that the condition makes it difficult to complete many necessary tasks like shopping, driving, and socializing. The VA reports that up to one-third of people who served in combat have PTSD. PTSD can result in disorganized thinking, avoidance behaviors, fear of crowds or chaos, engaging in safety-compromising situations, fear of loud noises, paranoia, lack of trust, poor concentration, hypervigilance, and agitation.

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The context for PTSD varies. Not everyone who sees combat is traumatized, and not everyone who has been traumatized has seen combat. Some examples of non-combat related trauma include accidents, observing accidents that are sometimes fatal, or sexual trauma. Even non-combat tasks can be very dangerous. For example, a live ammunition exercise may lead to a fatality. Some veterans experience trauma during training or boot camp as well. This can be the result of numerous factors, not all of them directly related to the military. For some, the stress of finding that they are not a good fit for the military, when they have depended on the military to escape poverty, can be traumatizing.

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Engaging in mental health services. As is true for many people, engaging in mental health services can present challenges for veterans. While we may assume that this may be related to the “macho” reputation the military has, it may have more to do with the expectation of performance, reliability, and discipline the military sets on soldiers. It can be hard for any of us to determine whether we need to “muscle through” a mental state, or seek professional help to address it. Given that soldiers are trained to maintain focus and performance in high-stress situations, it can be especially hard for a soldier to know when help is needed. And maybe as a result, only one-third of veterans who need mental health services seek them. Additionally, the symptoms of PTSD, such as avoidance and lack of trust, can make it difficult for veterans to seek help.

And, over 48,000 veterans are homeless or at risk of homelessness, which can impede access to treatment. 84% of veterans say that few non-civilians understand the challenges they and their families are facing, which also can inhibit help-seeking. But, as we know, education on veterans and the issues they face can greatly improve our understanding of what veterans experience, and the more we understand others, the better equipped we are to help them.

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Just like in many cultures around the world, the military culture influences a veterans' mental health treatment seeking. Emotion can be viewed as a weakness, preventing many from seeking help. Shifting gears from mental toughness while serving, to admitting emotional distress afterwards, is challenging for many. But attitudes are changing, with major strides in veteran outreach and the expansion of funding and services for veterans. Civilian mental health providers are making treatment, including physical spaces, more welcoming to veterans. And even within the military, there are highly qualified mental health positions on staff. Several veterans that I have worked with report that, to their surprise, mental health workers and treatment in the military were some of the best that they had experienced. Veterans can now receive help from professionals who have also served. Just like many other peer-based services, this can be very useful for building trust in a clinical relationship.

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Overview of veterans' culture and experiences. I try to be as transparent as possible with people when I talk about misconceptions I have had about populations that I have worked with. So, before I had time to work with, and socialize with more veterans, I felt that I had little in common with them. But then I learned that there were just differences in vet culture, and not necessarily with the veterans themselves. The more I learned about the culture, and how that may have shaped some behaviors, the more I was able to put myself in their shoes and understand them as people.

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Veterans feel a sense of belonging that can be hard for many of us to relate to. The expectation is to work as a unit, and be prepared for life and death situations that many civilians would not encounter. They feel a sense of purpose and mission that is profound. There is an expectation of competence in your role, and the stakes are often literally life or death. For many, the military is their family. Even when there is a healthy relationship with one's family of origin, this feeling of reliance on fellow soldiers as family can be reinforced by separation from the soldier's families of origin for extended periods of time. And, some soldiers' families of origin may hold some resentment. They may feel that the soldier has abandoned them. And some members of a veteran's family may not approve of the military in general.

Combat and non-combat veterans have different experiences. This can create confusion about what service has meant to a particular person among both the public and other veterans, as well how a veteran may perceive their own worth as a soldier. This can be different from vet to vet. Some non-combat vets feel totally accepted by their combat peers, while others may feel less than their combat peers.

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Understanding the complexity of service. Many veterans have complicated feelings about their experiences in the military. An example of this is how a veteran can be anti-war and pro-military at the same time. Many of us can see this demonstrated in mainstream culture in depictions of the Vietnam War. We should let veterans guide a conversation to avoid conveying criticism of their service. Transitioning from military service to civilian life can be both exciting and challenging. Veterans are living in a very structured world with a different routine than civilian life. Leaving

that world can be jarring. Everyone's transition timeline is different. Some people transition to civilian life quickly, while others take longer to adjust. And, besides the emotional impact, many veterans are coping with physical injuries or chronic illnesses that make living a civilian life even more challenging.

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Understanding the impact of moral injury. Many veterans are managing the effects of "moral injury." Moral injury occurs when people feel they have violated their conscience or beliefs when they participate in, witness, or fail to prevent an act that conflicts with their values or personal principles. Taking a life is the most obvious example of how someone may commit an act that is in conflict with their morality. Another is giving or following orders that might be viewed as immoral or inhumane. Symptoms of moral injury and PTSD are similar, but each is a unique construct. PTSD is a diagnosable disorder, while moral injury is "a dimensional problem," with no agreed-upon threshold for its presence. For more education on the subject, one should research PTSD, as moral injury is often discussed in the same trainings.

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What helps in recovery from PTSD and moral injury? As veterans seek civilian employment, they may need help with their recovery like anyone else. This may include lifestyle changes like healthy eating, physical activity, working or volunteering, avoiding alcohol and substances, and spending time with others. Mindfulness exercises can help. Being aware of, and focusing on the present, instead of dwelling on the past or fearing the future. Practicing optimism and finding things that create joy and a sense of peace or happiness every day. Peer support and connecting with others who are experiencing similar challenges. Support animals can be helpful. Adopting a pet to reduce stress and loneliness. And professional help like engaging in mental health services. This can be especially helpful in learning to cope with PTSD and flashbacks.

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I will show this contact information again at the end, but I'd just like to flash this up here for a minute to emphasize that these services and supports are available, and that no one should be ashamed to use them.

How to connect with a responder: <https://www.veteranscrisisline.net/>

Call 1-800-273-8255 and Press 1.

Text 838255.

Support for deaf and hard of hearing 1-800-799-4889.

This free support is confidential and available every day, 24/7. It serves all veterans, all service members, National Guard and Reserve, their family members, and friends.

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Employment and workplace culture. We'll now discuss work.

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Veterans' employment strengths. Typically, veterans are highly motivated to obtain employment. Their sense of duty and purpose is often still intact when they leave service. They often crave the structure, meaning, and purpose that employment provides, and they can respond well to IPS services, because IPS is a structured and purposeful practice. Studies show that veterans, as employees, are more productive and have higher retention rates than their civilian counterparts. Veterans are used to being team players who have worked in diverse environments, and they work well under pressure and have a strong work ethic to get the job done.

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Veterans tend to be a highly skilled workforce. While in the military, service members undergo rigorous training programs to become experts in a wide range of skills and concepts that are transferrable to the civilian workplace. By default, most service members receive significant ethics and leadership training that promotes "soft skills" that employers seek. An example of a soft skill that is used in the civilian job market is respecting authority and general courtesy, an obvious selling point if one is providing customer service or working with the public. Soldiers receive rigorous and purposefully high-stress training, because in the military, stress is expected and managed. Many vets have had technical military occupational specialty training. For example, many veterans have worked with cutting-edge computer and medical systems that civilians have yet to encounter. Vets often attend professional military education courses and academies. Many inventions and systems are developed for, and by, the military, and many veterans are authorities on how to use these tools.

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Challenges when transitioning to a civilian workforce. Many veterans have worked exclusively, or mostly, in the military. Therefore, transitioning to civilian work can be challenging. Veterans often feel alienated in civilian workplaces. Again, they are a unique population that is often in the minority. Military life is regimented, while civilian life can be quite unstructured. Many vets report being "antsy" when there is downtime. They may also feel overwhelmed by tasks that are not clear. Unclear chains of command can be disconcerting. Following the chain of command is a requirement in service. When a hierarchy is not clearly defined, it can be hard for a vet to adapt. Compared to military operations, civilian work can seem meaningless or hollow, disorganized, and not structured for team work. Indeed, by comparison, the stakes in many civilian jobs are lower than military missions. Veterans may have an easy time finding employment, but then struggle to maintain their jobs. This is a common report from many vets and IPS staff working with vets. There are many reasons for why this may be present as an issue. As was just detailed, there are many issues that may contribute to why a vet may have a hard time staying employed, and one of them may be a lack of meaningful engagement with mental health services. This is why it is so important for us to understand vets and build rapport.

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Here are some examples of how the military-civilian cultural gap may impact employment. In the military, the workplace hierarchy is known and displayed on uniforms. In civilian culture, introductions are needed to know who is in charge of what. In the military, processes and procedures are codified and explicit. In civilian culture, basic rules may need to be explained, for example, arrival and leave times, or when to take your break. Or, they need to know when it's ok

to speak up or offer opinions. In the military, support is a cultural expectation. There are battle buddies, and an “I’ve got your back” dynamic. In civilian culture, employees often need to figure things out on their own and coworkers may not be as reliable or dedicated as a vet feels they should be.

In the military, there is a strong sense of family, community, and brotherhood and sisterhood. In civilian culture the workplace can be a disjointed and disconnected community. In the military, direction is straightforward communication. In civilian culture, colleagues may “beat around the bush.” An example of this may be a brainstorming session.

In the military, there is a clear chain of command. In civilian culture, it is often unofficial, or a stream of influence from peers. In the military, there is routine. In civilian culture, there is often choice and personal freedom. In the military, rank equals respect. In civilian culture, trust and respect are earned. In the military, there is a well-defined career ladder and growth. In civilian culture, advancement is often murky and the career growth path is unclear. In performance reviews, one often has to sell oneself rather than rely on measurable performance. In the military, there is a super-structured, mission-first leadership. In civilian culture, structure and leadership often are seen or perceived as ambiguous.

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Now that we’ve discussed some topics related to civilian work and vets, here are some things to keep in mind as you provide IPS to vets.

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The IPS model works well for veterans, with the following special adaptations. When developing career profiles, keep in mind the impact of military service, and the veteran’s culture and experiences. Remember that many of the skills learned in the military are transferable to the civilian job market. I have never met a vet who did not have a marketable skill set. The problem that many vets have is that they take their experience for granted, and need help in identifying that everyday skills learned in the military are not necessarily everyday skills in the civilian job market.

Many veterans have strong technical experience related to sophisticated technologies. These skills can be leveraged into jobs in supply chain logistics, information technology, systems management, and many others. Many vets have manual work skills that can be adapted to trade occupations, since these occupations involve hands-on work. This can include carpentry, janitorial, landscaping, construction, and more.

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Lost in translation: job interview gaps. Employers report that veterans do a good job of explaining what they can do, but tend not to promote themselves enough. Hiring managers and recruiters often don’t know how to translate a candidate’s military experience into qualifications needed for a civilian job. When we are providing IPS to vets, part of our job will be to listen and take notes when a vet is describing specialized training and skills. We may need to do our own research to better understand what these jobs are.

In my experience, I have learned fascinating things from vets from just listening to them talk about their jobs. Since vets can sometimes under-sell themselves, this can lead to disappointing job interviews, unless the IPS Employment Specialist instructs veterans to engage in self-promotion. It's ok to brag a little about your experience. With the employment specialists' help, a vet can learn to specifically relate their military experience to the particular qualifications of the job they're applying for.

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Veteran-centered skills for Employment Specialists. As we wind down, let's review some basics that you can take away that may help in your work with a job-seeking vet. As a vocational professional, manage your personal beliefs and boundaries. We all have opinions and beliefs about many things, but the military, for many civilians, is misunderstood. Listen and learn, and if you have a negative attitude about the military, you may see this fade away. You can do this by remaining focused on the veterans' needs. Do not let your personal feelings about war, firearms, military spending, and so forth affect your work with the individual.

Approach veterans with a structure of partnership and teamwork. This is a hallmark of IPS, but veterans are often especially adept at teamwork. Teamwork also helps to build trust, which many veterans lack due to PTSD and other needs. Never ask a veteran if they have taken a life or injured someone else. This can be traumatizing for a vet to discuss and relive. Remember the concept of moral injury. We, as service providers, might think that exploring the possible trauma of taking a life is crucial in relating to a veteran, but it's not. Let the vet steer that conversation. Many veterans report disliking the phrase, "Thank you for your service," so try to avoid using that phrase and other canned comments.

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Many employers welcome the chance to support veterans. Veterans are experienced in working as a part of a team with a common goal. There are many people who have a negative view of the military, but many do not. Either way, many employers will appreciate the combination of soft skills and competency that many vets possess. So, remember that the veterans you work with have military experiences that you can include in their resumes, and use that as selling points when developing jobs with employers.

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Here are some additional veteran-focused resources with valuable information for employment specialists.

www.va.gov/vetsinworkplace

www.dol.gov/veterans/hireaveteran/pdf/Employer-Guide-to-Hire-Veterans-June-2018.pdf

<https://www.dav.org/wp-content/uploads/HiringGuide.pdf>

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And once again, here are those free, 24/7 veteran supports.

To connect with a responder, visit www.veteranscrisisline.net.

You can call at 1-800-273-8255 and Press 1, or text to 838255.

Support for deaf and hard of hearing is at 1-800-799-4889.

If you'd like to reach out to me with questions, please email me at matthew.christensen@illinois.gov.

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Announcer: Thank you for listening. You can obtain additional recordings, or download a transcript, by visiting the Illinois Supported Employment Transformation Initiative web site.