

Great Expectations

A model comprehensive readjustment and Re-Entry Program for
Veterans



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A product of the National Association of Concerned Veterans
(NACV)

Common Veteran Dilemmas

- Approximately 20% of America's veterans struggle to readjust to typical civilian life.
- This may include about 20,000 vets within the DMV area alone.
- These veterans make up the ranks of the homeless, unemployed, incarcerated & ex offender, mentally ill, substance abuser, and otherwise disenfranchised veterans.

- Considering all these things, more veterans refer back to old or pick up new bad habits, misuse their military tactics, or become suicidal.



Needs and Rational



- “Those that do not learn from history are destined to repeat it”.
- The challenges facing our returning military and veteran personnel may be the greatest we have faced in forty years. If we look at the rate of suicides and violent acts by military and prior service personnel, it may be the highest to date.
- Properly transitioning from the military back to civilian life is: not easy, unnatural, and definitely not guaranteed.

Needs and Rational (cont'd)



- One size does not fit all and existing readiness programs for personnel leaving the military are not always effective
- When given the option of going through a debriefing and transition program or returning to one's family, it is almost always "let me go home".
- Often the issues do not surface and manifest themselves until months later.
- Often the veteran, their friends and family have no clue of what they are experiencing because the symptoms may be new and/or difficult to recognize.

Background



GREAT EXPECTATIONS



Issues



- In order for change to take place successfully there are a number of necessary conditions and methods. There are other components that can facilitate that process and enhance the rate of successful transition and re entry.
- Those conditions may include readiness, desire to change, support systems and resources, education, skill levels and aptitude. Regardless of the individual, transition from the military back into civilian life is a process requiring time. It is easier for some than others.

Goals & Objectives



- To introduce and train professional practitioners how to design and implement a comprehensive readjustment, transition and re-entry program model for military and veteran personnel nation wide while collaborating with the public and private sectors using educational institutions as the lead vehicle. (DVA, community & private)
- To Provide comprehensive training/readjustment services through a modular “applied self help” format.
- To Conduct overall needs assessment & case management (using TOUCH prototype) to educate, train and program participants. (program in a selected good way)

Outcomes

- Successful re-entry by targeted vets demonstrated through acquired coping and readjustment skills.
- Independence in the areas of housing, employment, life skills, socialization, relationships, sobriety, health and nutrition, economic self sufficiency, quality of life, spirituality.
- Vets will also receive long-term tracking, monitoring, and follow up.



Methodology



- Participants may enter the GE model through one of many access channels which include:
 - a TAPS program prior to return back to their in state unit;
 - a program by way of their stateside unit, a medical holding company, their guard or reserve unit, education or training institution, their VSO, community or church;
 - a VAMC or DVA program, the Wounded Warriors program, a grant and per diem program, SSVF, etc.
 - a faith/community based organization or VSO post or other provider;
 - a post secondary institution (NAVPA member eligible) preferrably SOC institution, trade, tech or vocational institution

Model



- I . The model begins with an outreach, referral, intake, assessment and orientation component.
- II. Based on the assessment the participant is assigned a case manager, and the “expectations” component process begins. The expectations for all the stake holders is presented, shared, formalized and agreed to.
- III. Register for program modules & assign case mgr.

Model (cont'd)



- **Level I:** is mostly classroom knowledge, facts, information, comprehensive, understanding in each of the chosen areas: housing, education, training, career, sobriety, health and mental health, employment, economic stability, vocation and career, relationships and socialization, spirituality, belief systems, ethics and values.
- **Level II:** is the veterans design and development component which also includes presentation and sale of individual plans, ie housing, employment, health and mental health, sobriety, socialization and relationships, spirituality, etc.
- **Level III:** module is the simulation and gaming component.

Model cont'd



- **Level IV:** execution of the plan in each area
- **Level V:** stabilization, evaluation, actualization

Training Methods



- Participants will be trained through a series of self-help modules that include:
 - Simulations and applied evidenced-based practices
 - Highly structured case management
 - “TOUCH” behavior modification techniques
 - Resource and mentoring teams
 - Values clarification and internalization
 - Long-term follow up/EAP

How It Works (one scenario)



- Participants are enrolled in GE Applied Re entry 101 which is a three credit course that meets 3 hours a week up to 15 hours per week. If the participant is a full time student, he or she may take the re entry class for three hours; if the vet is willing and able he or she can enroll in a 8-12-16 weeks clock hour program at any of the approved sites and go through the 30 hour per week modules which are a combination of concentrated training sessions as well as self paced and individualized learning modules along with the case mgr, the mentors team, the TOUCH program, applied experiences and the execution modules.

Operation



- Collaborative partnering and teaming of the program implementation consisting of NACV, DC OVA, UDC Office of Veterans Affairs, state and local agencies, Veterans Service Organizations, DVA, DOL, HHS, HUD, SBA, Education, and hopefully the Second Genesis Board, and other long term partners to include APRA, DMH, Health Education Network (HEN) as well as CRRC and VA Medical Ctr, Wounded Warriors, WRAMC Bethesda, etc. all coordinated and orchestrated by the case mgr at the facilitative local site: ie DVA Medical Center, NAVAPA member or SOC institution, community, etc. (here in DC it would hopefully be VA taking the lead with UDC and NACV and others)

Program Structure



- Lecture series, classroom training/virtual classrooms
- On line instruction/interactive web site
- Individual and small group training
- Independent Learning
- Simulation Training
- Applied experiences, OJT and implementation
- Mentoring, peer counselors, success teams
- Mental Health, health and faith based interventions

Staffing



- Executive/Project Director
- Administrative Assistants
- Assessment Specialists
- Case Managers
- Module Leads/professional trainers/instructors readjustment and re entry
- Job Developers (subject matter experts)
- Evaluator/tracking/follow up
- Subject matter professional instructors
- Case managers
- Administrative support staff
- Job developers
- Economic and business specialist
- Housing specialists
- Liaison and facilitators/mentors
- Evaluators/quality assurance specialists
- EAP, long term follow up

Budget



- \$2500-\$3500 per vet for 8-12 week education/training and comprehensive readjustment package may include a financial assistance stipend and also include three years EAP and Life skills follow up. The stipend may be 750-1,000 dollar stipend.
- Costs include a three year to life warranty and membership
- Goal per local area is to serve a minimum of 500 the first year; 2500 year two and 2500-5000 for each subsequent 3-5 year period
- Staff (1) can cover up to 100 vets per each 8-12 week period along with long term continual follow up services

Budget (cont'd)



- Staffing budget will include case managers, program director, executive/admin assistant, employment trainer, housing trainer, life skills trainer, data and eval/QA lead, and transportation; operating costs/overhead will include facilities lease, utilities, maintenance, insurance and board.

Outcomes



- **200 vets will:**
 - complete individual modules
 - design and implement individualized plans components
 - establish a Support Team and select mentors
 - successfully experience and internalize the TOUCH program
 - demonstrate evidence of stabilization and independence, ie will have housing, mental health, life skills, employment, economic stability, internalized values, etc.

Schedule



- **Week 1:**
 - **Identification, Selection, Assessment, Orientation, Modules Selection, Begin course work/program**
 - **Assignment of Case Managers & implement TOUCH component**
- **Week 2: Instructions in Plans Development**
- **Week 3: Develop Plan, Present Plan, Defend of plan – feedback and revision of Plan**
- **Week 4: Simulations & gaming and then, execution of plan components**
- **Week 5: Execution/ implementation of total Plan**
- **Week 6: Employment, housing, and stabilization**
- **Week 7: Demonstrate Self Reliance and maintenance**
- **Week 8-12: Graduation, recognition and celebration day to day implementation**

Itinerary for financing, site control & program initiation

- May 30 to July 15 solidify funding commitments, verification and vetting by Second Genesis Board, County Executive and other stake holders sign one year contract 7/1/2014



- Site preparation for participants, complete staff selection and training, set up grounds and facilities, begin participant selection
- Pay first month's rent and security
- Begin first cycle of vets 15 July

Itinerary (cont'd)



- Jul 1 pilot, Jul 1- Sept 30, 2013 project implementation
- 50 vets will complete program every eight weeks with housing, employment, financial stability, support system, life plan, insurance, EAP, values clarification, goals and dreams, re unified family, etc as appropriate

Partners/Donors



- Circle of Friends for American Veterans
- National Vietnam and Gulf War Veterans Coalition
- National Capital Veterans Coalition
- International Graduate University
- DC Office of Veterans Affairs
- VA Medical Center, Regional Office, VISN, Central Office, Vet Ctrs, Community Resource & Referral Ctr
- Faith & Community Based
- Veterans Services Organizations
- DC, local, state and federal Agencies
- Faith and Community based organizations
- Life Management Foundation
- AACJC/Private Sector, NAVPA and SAA
- Individual and private donors