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TITLE: A randomized control trial of a community mental health intervention for military personnel

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Mental Health Program  
Boulder, CO, 80301-2204

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## Table of Contents

	Page
Introduction.....	4
Body.....	4
Key Research Accomplishments.....	6
Reportable Outcomes.....	6
Conclusion.....	6
References.....	6
Appendices.....	6

## **INTRODUCTION:**

This research study will test whether a military adaptation of the Mental Health First Aid (mMHFA) program changes knowledge about and attitudes toward mental health in the military, stigma associated with mental health issues, and accessing care and support resources for mental health problems among military personnel. There are two groups of individuals who will participate in this study: Community First Responders (CFRs) and Kansas Army National Guard (KSARNG) service members. CFRs are individuals who interact with Kansas Army National Guard service members on a routine basis. The study will include four armory communities and CFRs in the intervention group will receive training in mMHFA.

## **BODY:**

### **Phase 1: Develop military-specific MHFA training module**

**Convene Expert Panel and form Adaptation Taskforce** – An Expert Panel was convened in October 2010 to advise on the adaptation of the MHFA training module. Panelists included:

LTC Dennis McGurk  
Chief, Research Transition Office  
Walter Reed Army Institute of Research

Katharine W. Nassauer, Ph.D.  
Senior Scientist, Psychological Health and Resilience  
General Dynamics Information Technology  
United States Army Medical Research and Materiel Command (USAMRMC)  
Military Operational Medicine Research Program (MOMRP)

MAJ Robert Stinson  
Chief, Workforce Support  
Kansas Army National Guard (KSARNG)

Jay Shore, M.D. (Co-PI)  
Associate Medical Director, Colorado Physicians Health Program  
Subject Matter Expert and Psychological Health Portfolio Manager, Telemedicine and Advanced Technology Research Center (TATRC), U.S. Army Medical Research and Materiel Command (USAMRMC)

The Adaptation Taskforce was formed in November 2010. There was a change of project manager in June 2011 and additional taskforce members added at that time, which contributed to a delay in the project timeline. The Taskforce includes subject matter experts with specific knowledge of the military/veteran population, creating training curriculum, the existing Mental Health First Aid program, and the landscape of military programs that provide support, training, and assistance to service members and their families.

**Consult with expert panel** – The panel met by conference call periodically through April 2011 to inform the initial phase of the adaptation process. Additionally, members of the Expert Panel and other subject matter experts have been engaged throughout the research period to advise on the adaptation, IRB, and research protocol.

**Develop military-specific module with Adaptation Taskforce** – The adaptation of the Mental Health First Aid curriculum for use with the military/veteran population is in-process. This includes the addition of supplemental material relevant to mental health issues in the military/veteran population, the addition of military-specific videos and exercises, and providing

context for the various mental health issues when interacting with service members, veterans, and their families.

The Investigators are in regular contact with the National Council for Community Behavioral Healthcare, the organization that leads the management, operation, and dissemination of Mental Health First Aid in the United States, about the adaptation process and timeline. It is anticipated that internal reviews with the National Council will begin in November 2011, with pilot testing taking place by the National Council prior to use of the curriculum in the study.

**Solicit feedback on module from Expert Panel** – While the Expert Panel has provided input throughout the adaptation process, they will be further engaged once the adaptation goes into the review process with the National Council. All feedback will be incorporated into the revision process.

**Finalize mMHFA program** – This process will take place after the National Council and Expert Panel reviews and subsequent revisions have been completed.

**Develop survey tool and data collection procedures with input from Expert Panel** – A subject matter expert who has implemented a program similar to Mental Health First Aid in the Navy was engaged to assist with the development of a survey tool and data collection procedures for the study. Additional subject matter experts on surveys and data collection have been consulted to inform the development of these materials. These materials are in-process and will be submitted with the IRB application.

## **Phase 2: Implement mMHFA in Kansas National Guard communities**

**Identify training sites with input from Expert Panel** – Four armory communities were identified by the Kansas Army National Guard: Kansas City, Wichita, Emporia and Manhattan.

In addition to the MHFA adaptation process, the current focus is completing and submitting the IRB application. The Investigators have been working with the assigned TATRC Regulatory Compliance Specialist in advance of the IRB submission. It is anticipated that a the final application and materials will be sent for pre-review to the Specialist by early November.

The following milestones will be completed once the IRB application is approved:

- Recruit training participants with assistance from Expert Panel
- Collect pre-training data
- Organize trainings
- Conduct trainings
- Collect post-training data
- Conduct initial analyses
- Present initial data to Expert Panel
- Obtain feedback from Expert Panel
- Final data analyses
- Plan larger military clinical trial
- Write and present final report to DoD

**KEY RESEARCH ACCOMPLISHMENTS:**

- Convening of Expert Panel and subject matter experts.
- Adaptation of the Mental Health First Aid curriculum for the military and veteran population.
- Adaptation of data collection instruments to assess impact of mental health literacy program in the military setting.

**REPORTABLE OUTCOMES:**

None at this time.

**CONCLUSION:**

The adaptation process for the Mental Health First Aid curriculum implemented during the first year of this study has the potential for significant impact on the military/veteran population across the country. The National Council for Community Behavioral Healthcare manages dissemination of the MHFA curriculum throughout the United States. There are now more than 30,000 trainers throughout the country. Once the military/veteran adaptation is complete, there is the potential to roll it out via the MHFA network of trainers, potentially reaching a significant number of service members, veterans, and their families. If the research to be completed in the second year of the grant on the efficacy of the MHFA adaptation indicates a positive impact on the military population, the infrastructure is in place to implement this training on a more widespread basis.

**REFERENCES:**

None at this time.

**APPENDICES:**

None at this time.

**SUPPORTING DATA:**

None at this time.