

# PSYCHOLOGICAL HEALTH OUTREACH PROGRAM (PHOP)

*published in The Continental Marines Almanac 2012*

## RESOURCES

# Psychological Health Outreach Program

Photo Illustration by Cpl Fenton Reese

### MISSION

To ensure that Marine Forces Reserve service members have full access to appropriate psychological health care services, to increase resilience and to facilitate recovery, which is essential to maintaining a ready military force.

### PHOP ACTIVITIES

- Behavioral healthcare screenings
- Determine any psychological health issues that may require services or intervention.
- Provide outreach telephone calls to all identified Reserve Marines returning from deployment within the past six months.
- Assist referred Reserve Marines with the Line of Duty determination process.
- Maintain 24/7 phone/email on-call service to respond to inquiries and referrals.

## GOALS OF THE PSYCHOLOGICAL HEALTH OUTREACH PROGRAM

- To maintain psychological health, enhance resilience and facilitate the recovery of Marine Forces Reserve service members and their families that is essential to maintaining a ready and fully capable force.
- To facilitate a "culture of support for psychological health" where Reservists and leaders understand that psychological health is essential to overall health and performance.
- To perform early and non-stigmatizing behavioral health care screenings and referrals to the appropriate psychological health care.
- To ensure Marine Forces Reserve service members and their families are psychologically prepared to carry out their missions.
- To ensure sufficient and appropriate resources are allocated to sustain prevention education, early behavioral health care screenings and referral to appropriate systems of care.
- To assist and empower Marine Forces Reserve leaders in advocating, referring, monitoring, and caring for Marine Forces Reserve service members.

### Marine Forces Reserve PHOP Team Regions and Locations

#### **NORTHEAST REGION**

(Devens, Mass.)

Conn., Del., Maine, Mass.,  
N.H., N.J., N.Y., Pa., R.I. and  
Vt.

978-796-2306

978-796-3633

#### **NORTHWEST REGION**

(Fort Lewis, Wash.)

Alaska, Colo., Idaho, Kan.,  
Minn., Mont., Nev., Neb.,  
N.D., Ore., S.D., Utah,  
Wash., and Wyo.

253-477-2611

253-477-2614

#### **ATLANTIC REGION**

(Marietta, Ga.)

District of Columbia, Fla.,  
Ga., Md., N.C., Puerto Rico,  
S.C., Va., and W.Va.

678-655-7177

678-655-7179

#### **MIDWEST REGION**

(Kansas City, Mo.)

Iowa, Ill., Ind., Mich., Mo.,  
Ohio, and Wis.

816-843-3675

816-843-3119

#### **SOUTH REGION**

(New Orleans, La.)

Ala., Ark., Ky., La., Miss.,  
Okla., Tenn., and Texas

504-697-8716

504-697-8720

#### **SOUTHWEST REGION**

(San Bruno, Calif.)

Ariz., Calif., Hawaii, N.M.

650-244-9806, ext. 1007

650-244-9806, ext. 1503

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# RESERVE PSYCHOLOGICAL HEALTH OUTREACH PROGRAM (PHOP)

*published in Navy Medicine Owners' and Operators' Manual 2012*

The U.S. Navy and Marine Corps Reserve communities face increasing difficulties with stress and Psychological Health (PH) and Traumatic Brain Injury (TBI)-related issues as a result of serving in combat areas over the past 10 years. In addition to having the same problems that active duty service members can experience upon returning from deployments, reservists encounter challenges that are exclusive to the Reserves which can cause increased stress in their lives and exacerbate deployment related injuries resulting in PH issues and TBI. Civilian employers and family members may not understand nor be able to identify with the deployment experiences that a Reservist had. Therefore, that initial relief of being home can be mitigated over the subsequent weeks and months. Navy Reservists, and some Marine Corps Reservists, also bear the burden of being deployed on an individual augmentation basis, away from their reserve units. So even after they return to their drilling unit, they don't see their battle buddies and their unit leaders only see them infrequently which can increase the possibility that PH issues can go unnoticed. Reservists are also provided time off following deployment, which increases the length of time commands are able to get "eyes on" them even longer. Reservists also face access to care challenges, since their eligibility and access to military or VA health care is dependent on a number of factors such as the length of time since redeployment, a timely completion of Line of Duty (LOD) determinations, finances, and even where they live – which is often hours from where they drill. The processes involved in providing a Reservist proper care to resolve PH issues can also be cumbersome and lengthy in terms of administrative procedures required, even prior to beginning care. So at any point in the process, from initial identification of a PH issue to its resolution, the opportunity to provide a Reservist with needed services is diminished or can be missed.

To address this gap in care and create a PH "safety net" for Reservists and their families who are at risk for not having stress injuries identified and treated in an expeditious manner, and to improve the overall PH of reservists and their families, in 2008 BUMED developed the Psychological Health Outreach Program or PHOP to serve both the Marine Corps Reserve and the Navy Reserve. The program now includes 55 licensed mental health providers dispersed throughout the country. For the Navy Reserve, three to six member PHOP teams are embedded at each of the five Regional Reserve Component Commands (RCC) to cover all of the Naval

Operational Support Centers (NOSC) within each region. For the Marine Forces Reserve, four to six member PHOP teams are located at six Home Training Centers (HTCs) that were identified as central geographically to cover all of the Marine Reserve units within each region.

Each team has two Outreach Coordinators who:

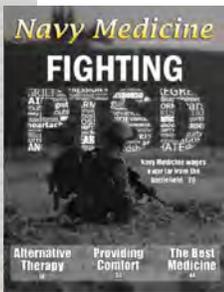
- Clinically assess Reservists who are referred by NOSC or HTC Medical Department Representatives (MDRs), after the Post-Deployment Health Assessment Reassessment (PDHA/PDHRA) Screening, by other NOSC/HTC or RCC staff, their families and friends, or by self-referral.
- Provide outreach telephone calls to all demobilizing Reservists who have been identified as having returned from deployment in the last six months to screen and offer support.
- Assist Reservists with LOD determination processing if the reason for referral is suspected to be service connected.
- Conduct follow up communication with Reservists who have been referred for services.

All of the members of each PHOP Team:

- Provide PH outreach and educational training and support to MDRs at each NOSC and HTC.
- Provide outreach services to larger reserve populations identified as being at risk for PH issues.
- Find and build relationships with appropriate PH resources in each community where Reservists live and drill in order to have: awareness of what is available and be able to refer with a "warm handoff" all reservists and family members who can benefit from the resources and support services.
- Resource a 24/7 information line for unit leaders or reservists and their families to obtain information regarding local resources for all areas of their quality of life which can negatively or positively impact their PH (e.g. employment, finances, PH care, family support, child care, etc.).



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# A Guiding Hand

PHOP Offers Assistance to Returning Reservists

By Paul Dillard

U.S. Navy Bureau of Medicine and Surgery Public Affairs  
published in Navy Medicine, Fall 2011

An intoxicated Marine sits in his dark bedroom -- hand trembling as it wraps tight around a pistol. The weapon is facing inward at the man's heart -- an empty spot since returning from Iraq a year earlier. He pulls the trigger hoping for release from his inner-turmoil. Shaking badly, he misfires and the bullet plunges into his shoulder.

The Marine survives his wounds -- both physical and mental -- through support from friends, family and the Navy and Marine Corps Reserve Psychological Health Outreach Program.

This Marine is one of many Reserve service members who must face immense culture changes and the challenges of reintegrating into civilian life after returning home from deployment.

In fact, many Reservists live in remote geographical areas that render finding support or counseling services for themselves or their loved ones difficult. Due to this, it's easy to understand why some Reservists may feel as though they are part of an overlooked population.

"The initial relief of being home and being with loved ones can give way in a few weeks or months to feelings of isolation, which can exacerbate any psychological health issues stemming from the stress of being mobilized," said Paul A. Finch, director of psychological health Reserve programs for the Navy Bureau of Medicine and Surgery (BUMED).

According to Finch, Reservists also face access to care challenges, since their eligibility and access to military or Veteran Affairs health care is dependent on a number of factors.

This is where the BUMED Navy and Marine Corps Reserve Psychological Health Outreach Program (PHOP) comes in.

"The PHOP teams work every day to ensure Reserve Sailors and Marines get the same quality of care with regards to their mental health as an active duty service member because their sacrifices are just as great," said Shelly S. McDowell, the PHOP project manager.

PHOP was initially developed in 2008 to fill a gap in services identified for the Reserves by BUMED leadership. It was piloted first in the Naval Reserves (NR) and then expanded to include the Marine Forces Reserve (MFR) in fiscal year 2010. The program is designed to ensure that Reservists have full access to appropriate psychological health care services, to facilitate recovery from any stress injuries, and to increase resiliency among deploying Reservists. "PHOP is primarily marketed as a safety net for psychological health," said McDowell. "But to really understand what we do, you have to think outside the traditional psychological support box. If there is anything that can impact a Reservist or their family, either positively or negatively, or anything that can support or detract from their readiness, PHOP can assist them."

This means that outreach team members help Reserve Sailors and Marines, as well as their families with problems in ways that go beyond the usual perception of mental health treatment, often tackling concrete issues that need to be alleviated before the traditional psychological or mental health treatment efforts can even begin. Embedded with NR or MFR units regionally, all of the five to six members in each PHOP team are licensed mental health providers. They are also experts in finding and connecting with military and local resources that effectively support Reservists.



“I recall a time when a service member came back from deployment and discovered that his employer was no longer in business,” said Linda Green-Baskett, a member of the PHOP team in the Northwest Navy Reserve Component Command (RCC) in Everett, Wash. “We explored what type of work he enjoys, what skills he felt were his strongest and what he could imagine doing for his life’s work moving forward.

We were able to connect him to specific resources for employment and education and he made the decision to return to college in order to complete his education.”

According to Green-Baskett, this is but one example of PHOP helping to determine the needs of a client and then putting them in touch with a broad range of resources to meet those needs. They can and have helped service members locate resources closer to home to reduce travel time. They can help service members look for jobs, continue their education or deal with marital problems.

The help and resources PHOP teams offer are not restricted to service members; they frequently deal with family members as well. They can offer services such as finding resources for new parent support, emergency food, employment, engaging family members in coping with deployment and much more.

“Our program is a resource for everything that can have a stressful impact on a service member’s life including help finding employment, health care, transportation, education, even home repairs,” said Green-Baskett. “We want every service member to know that the PHOP program provides support and referrals for everything that impacts a service member or family member’s well being and is not limited to dealing with just the mental health issues that accompany life’s changes.”

At full capacity the PHOP program has 55 staff members and consists of 11 teams assigned throughout the United States. Teams are embedded at each of the five Navy RCCs and at six geographically-centered MFR home training centers.



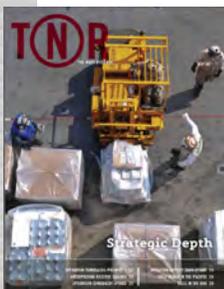
**Paul A. Finch is the director of psychological health Reserve programs for the Navy Bureau of Medicine and Surgery.**

According to Finch, during fiscal year 2010 the PHOP teams conducted mental health screenings for more than 1,500 reservists, made outreach calls to over 5,000 demobilized reservists, followed up on more than 3,601 referrals from Reserve commands, family members and others, and conducted approximately 400 site visits to Reserve units throughout the country, providing psychological health training to more than 38,000 Reservists and staff members. They also made approximately 40,000 other contacts—successful follow-ups with current clients and collateral contacts with commands, all while serving as facilitators for all of the Yellow Ribbon Returning Warrior Workshops.

“Many times folks can be misled by the name Psychological Health Outreach Program and believe that all we might offer is referrals for counseling,” said Green-Baskett. “Yes, we can certainly provide referrals and client management for mental health and counseling needs, but we also do so much more.”

For further information on the PHOP program or for contact information visit <http://www.navyreserve.navy.mil/pages/phop.aspx>





# Navy Reserve cares about your Psychological Health

*published in The Navy Reservist, May 2011*

There is an important resource available to Reserve component (RC) service members and their families. The Navy Reserve Psychological Health Outreach Program (PHOP) provides an important psychological health “safety net” for RC service members and their family members at risk for deployment related stress injuries.

The program:

- Assists RC service members and their families with maintaining their psychological health and enhancing their resilience so that they are prepared for deployment.
- Facilitates the recovery of RC service members and their families who may be experiencing stress related injuries. They provide early and non-stigmatizing behavioral health care screenings and make referrals to psychological health care professionals.
- Facilitates a culture of support for psychological health where RC service members and leaders understand psychological health is essential to overall health and performance.
- Provides education on stress control and suicide prevention.
- Assists and empowers Reserve leaders in advocating, referring, monitoring, and caring for Reserve service members.

Psychological Health Outreach teams, staffed by three to six licensed social workers are located at each Reserve component command. The outreach coordinators:

- Provide behavioral healthcare screenings and outreach to RC service members.
- Facilitate access to psychological health support resources for RC Sailors and family members. Provide crisis response and mental health care referral, coordination and follow-up with Navy Operational Support Centers (NOSC), Marine

Corps Reserve Home Training Centers, military treatment facilities, the veteran’s administration and civilian providers.

- Maintain an after-hour telephone and email watch so that they can be there 24/7 for RC Sailors and their families.
- Respond to urgent command requests to deal with high-risk cases including suicide or homicide related behavior. The outreach team members are essentially circuit riders, making periodic visits to the NOSC in their regions to provide:
- Visits to NOSC’s to support postdeployment and family readiness events and meet one on one with RC service members and their families.



**El-Brenda Wiley, a psychological health outreach program counselor, advises Reserve Ens. Chris Love, assigned to Cargo Handling Battalion (CHB) 4, and his wife during a pre-deployment family readiness conference. The Psychological Health Outreach Program is geared toward providing mental health care to service members who have served in support of Operation Iraqi Freedom and Operation Enduring Freedom. Photo by Mass Communication Specialist 2nd Class Maddelin Angebrand.**

- Provide educational presentations on operational stress control (OSC) and suicide prevention.
- Provide onsite psychological support to Reservists and families following local disasters.
- Make outreach phone calls to returning RC service members to assist them with the reintegration process.

The outreach teams also facilitate at their Regions' Returning Warrior Workshops and lead breakout sessions. Some psychological health concerns the outreach teams are seeing on a daily basis are:

- Combat operational stress (including symptoms of anxiety and depression)
- Post traumatic stress
- Mild traumatic brain injury
- Reintegration stress
- Relationship, employment and financial stress

Referrals to the outreach coordinators can come from a number of different sources:

- Self referral
- NOSC and Reserve unit leadership
- Completion of the post deployment health reassessment
- Family members
- Other service members

The outreach coordinators provide referrals to a number of sources for psychological concerns. Referrals are made to the nearest VA medical or service center, to a TRICARE Reserve Select provider if enrolled, to Military OneSource or a local community resource. If the concern is found to be caused while the member was on active duty, referrals will be made to a military health care provider through the line of duty process.

As of August 2010, the Psychological Health Outreach staff have provided outreach phone calls to more than 1,920 returning RC service members; clinically assessed or referred an additional 2,578 RC members to appropriate sources of mental health care; conducted 299 visits to NOSCs; and provided OSC and suicide prevention briefs to 30,500 Reserve Sailors. All reported suicide attempts are now referred to the outreach coordinators for assessment, referral and follow up.

**“Thank You for your help. I faxed my home mod papers to a coordinator and he said he would follow up on it. Today legal papers arrived from my mortgage company. My mod was approved my payment dropped almost \$ 600 a month, my wife and I are so excited! Things are finally falling into place.”**

**“I want to thank you for all of the help you gave me over the phone when my marriage was in trouble. You made a big difference and helped us get “back on track.”**



# PSYCHOLOGICAL HEALTH OUTREACH PROGRAM (PHOP)

*published in The Continental Marines Almanac 2011*

Photo by Lance Cpl. Nana Dannsaappiah



## PSYCHOLOGICAL HEALTH OUTREACH PROGRAM

The purpose of the PHOP is to provide early identification and clinical assessment of Marine Reservists returning from deployment who are at risk of not having their stress injuries identified and treated in an expeditious manner. One of the goals of the PHOP is to facilitate a "culture of support for psychological health" where Reserve members and leaders understand that psychological health is essential to overall health and performance. Another goal of the program is to improve the overall psychological health of USMC Reservists and their families, and to identify long-term strategies to improve psychological health support services for them.

Marines that are referred to the program can be screened for behavioral health issues, medically referred, and provided a road to recovery. Outreach members will follow each referred Reservist through to the resolution of that member's case, whether it is return to Active Reserve status, or resolution through the Disability Evaluation System. Referrals can be made by anyone, such as the Reservist, unit commanders, family members, or service members. Referrals can be made to any of the PHOP sites listed below either in person or by phone. PHOP provides assistance to Reservists through:

- Behavioral Healthcare Screenings.
- Assisting members and families in identifying psychological health issues that may require services or intervention.
- Providing resources to assist with issues.
- Providing outreach telephone calls to all identified Marine Forces Reservists returning from deployment within the past six months.
- Assisting referred Marine Forces Reservists with the Line of duty determination process.
- Maintaining 24/7 phone/e-mail on-call service to respond to inquiries and referrals.

There are six regions throughout the U.S., and any region can refer to the nearest center where the caller lives. Each regional site is staffed by Licensed Social Workers and these Licensed Social Workers provide services within their respective regions to all 50 states plus Puerto Rico and Washington, D.C.

REGION	LOCATIONS	PHONE NUMBERS
Atlantic	HQ Co. (-), H&S BN, 4th MLG (Marietta, GA)	678-655-7177 / 678-655-7179
Mid West	24th Marine Regiment (Kansas City, MO)	816-843-3675 / 816-843-3119
North East	25th Marine Regiment (Devens, MA)	978-796-2306 / 978-796-3633
North West	4th LSB, H&S Co. (-) (Ft. Lewis, WA)	253-477-2611 / 253-477-2614
South	HQ, MARFORRES (New Orleans, LA)	504-697-8716 / 504-697-8720
South West	23rd Marine Regiment (San Bruno, CA)	650-244-9806, ext. 1007 / ext. 1503

