



Veteran Collaborative Research & Clinical
Innovation: A Joint Mission for Community,
Clinicians and Scholars

*University of Wisconsin –
Milwaukee*

*Presented by the Dryhootch Partnership for
Veteran Health*

*Friday, September 29, 2017
0830 – 1600 hours*

*“Helping Veterans and their families
who survived the war;*



thrive in the peace.”

Table of Contents

Sponsors & Core Partners	p. 3
Schedule of Events - Plan Your Day	p. 4
Information about Health & Wellness Expo	p. 5
Detailed Description of Events	pp. 7-9
Biographies	pp. 10-16
Breakout Session Abstracts	p. 17-19
Poster Presentation Abstracts	pp. 20-26
Planning Committee	pp. 27

Sponsors & Core Partners



UW-Milwaukee Rho Chapter

Pi Theta Epsilon is a national honor society for occupational therapy students and alumni. Its mission is to promote research and scholarship. The UW-Milwaukee Rho Chapter sponsored this event in support of use of this space at the UWM Union.



Plan Your Day

8:30-8:50 AM	<i>Registration / Networking / Light Breakfast</i>	<i>Ballroom Lobby</i>
8:50-9:00 AM	<i>Welcome and Overview of Conference Day</i> Ginny Stoffel, PhD, OT, FAOTA, University of Wisconsin-Milwaukee Zeno Franco, PhD, Medical College of Wisconsin & Dryhootch Partnership for Veteran Health Leslie Ruffalo, PhD, Medical College of Wisconsin & Dryhootch Partnership for Veteran Health Bob Curry, President, Dryhootch of America Jayne Holland, Director, UWM Military and Veterans Resource Center (MAVRC)	<i>Ballroom East</i>
9:00-9:45 AM	<i>Keynote Speaker</i> “A Human-Centered Vision for Technology in Support of Veterans and Military Families” Bryan Semaan, PhD, State University of New York, School of Information Sciences & Institute for Veterans and Military Families	<i>Ballroom East</i>
9:45-10:00 AM	<i>Break / Networking</i>	
10:00-10:45 AM	<i>Immersive Veteran Experience Session</i>	<i>Ballroom East</i>
10:45-11:00 AM	<i>Break / Networking</i>	
11:00-11:45 AM	<i>Lived Experience of Student Veterans - Best Practices & Perspectives from Higher Education</i>	<i>Ballroom West</i>
11:45-12:00 PM	<i>Panel Q&A / Open Discussion</i>	
12:00-12:30 PM	<i>Lunch / Networking</i>	<i>Ballroom East</i>
12:30-1:30 PM	<i>Extended Poster Session with Dessert & Coffee</i>	<i>Ballroom Lobby</i>
1:30-3:00 PM	<i>Collaborative Breakout Sessions</i>	
Room	<i>(concurrent, please select one:)</i>	
<i>Art Gallery</i>	Session 1: <i>Using Photovoice, Educational Comics and Storytelling to Illuminate Veteran Lived Experience in Research</i>	
<i>Ballroom West</i>	Session 2: <i>Veteran Engagement Five Ways: Insights and Lessons Learned from Engaging Veterans at Five VA Research Centers</i>	
<i>Room 191</i>	Session 3: <i>Female Veterans, Children & Family of Veterans and Active Duty Military</i>	
3:00-3:15 PM	<i>Break / Networking</i>	
3:15-3:30 PM	<i>Summary of Day - Jeff Whittle, MD, MPH</i>	<i>Ballroom East</i>
3:30-4:00 PM	<i>Response to Dr. Whittle’s Summary from Participants</i>	
<u>Concurrent Activities:</u>		
<i>Wisconsin Veterans Chamber of Commerce – Health & Wellness Expo – Saul Newton</i>	<i>Fireside Lounge/Lobby</i>	
<i>Art Gallery Activities & Exhibits – Katinka Hooyer, PhD</i>		

Fireside Lounge and Ballroom Lobby



WISCONSIN WARRIOR SUMMIT
HEALTH & WELLNESS EXPO
SEPT. 29, 2017 • UNIVERSITY OF WISCONSIN-MILWAUKEE

PRESENTED BY:


WISCONSIN
**VETERANS CHAMBER
OF COMMERCE**

Heartland 
Home Health Care & Hospice


oasis
SENIOR ADVISORS.

A Message from the Program Committee:

Collaborative approaches to research with US military veterans, active duty soldiers, and their families are increasingly recognized as a crucial next step in designing social systems and clinical care approaches that meet their needs. Many methods and approaches can be applied to assist with developing innovative strategies for care and scholarship that are not only rigorous, but relevant to these communities. Such veteran/clinical/scholar collaborative efforts will require deeper conversation, and likely deeper relationships between these stakeholder groups than has occurred in the past. It is our hope that this conference serves to encourage an emerging field of endeavor, by bringing together these stakeholders in a day-long conversation. In some cases, we have merged local and national groups together around specific topic areas to encourage further dialogue and exchange. We welcome you to Wisconsin Warrior Summit 2017.

Keynote Speaker

**9:00-9:45 AM
Ballroom East**



TITLE: “A Human-Centered Vision for Technology in Support of Veterans and Military Families”

Bryan Semaan, PhD, *Assistant Professor, State University of New York School of Information Sciences & Institute for Veterans and Military Families*

Session Description: Dr. Semaan, a leader in the field of what is called "human/computer interaction" will offer a vision for innovation around Veteran healthcare that leverages technology in new ways. These systems may include more effective use of Smartphone applications that can assist Veterans with self-care when reintegrating into civilian life, better integration of computer supported healthcare for VAs and other large hospitals working on population level care of Veterans, to cutting edge work on the use of wearable sensors to assist Veterans and their families better understand when a behavioral health crisis is emerging. The goal is to integrate computer assisted systems in to routine care for Veterans in ways that are respectful, practical, and helpful in returning to or maintaining normality.

Immersive Veteran Experience Session

**10:00-10:45 AM
Ballroom East**

Session Leader: **Mike McBride, MD, MS**, *Milwaukee VA Healthcare System*

Session Facilitator: **Leslie Ruffalo, PhD**, *Medical College of Wisconsin & Dryhooch Partnership for Veteran Health*

Veteran Facilitator: **CPT Michelle Lynn Fredach**, *AN RN BSN CEN*

Session Description: Dr. McBride will describe military training, illustrate key features of military culture, and elicit conversation from Veterans on their views regarding important military cultural features.

**Best Practices with Student Veterans
Perspectives from Higher Ed**

**11:00-11:45 AM
Ballroom West**

Heidi Plach, MS, OTR, *panel co-facilitator*

Zeno Franco, PhD, *panel co-facilitator*

Josh Sheeran, *Veteran & student*

Nathan Jon Derge, *Veteran & student*

Samuel Rodgers, *Veteran & student*

Ruben A. Burgos *Faculty Perspective*

Jayne Holland, Director, *UWM Military and Veterans Resource Center (MAVRC)*

Rae Anne Frey, MS, *Veteran, University of Wisconsin-Milwaukee, Clement J. Zablocki VAMC*

Session Description: Facilitators will lead a panel discussion to highlight faculty, student, and campus resource perspectives in higher education.

Collaborative Break-Out Sessions

1:30-3:00 PM

All participants should select ONE of the following breakout sessions to attend:

Breakout 1:

Art Gallery

From Participation to Advocacy and Action: Using Photovoice, Educational Comics, Storytelling, and Life Writing to Reflect and Elicit Veteran Lived Experiences

- **Kara Zamora, MA**, *San Francisco VA Healthcare System*
- **Raymond Facundo, MSW, US Army Veteran (OIF)**, *Southeast Louisiana VA Healthcare System*
- **Caitlin Dobson, MSOT student**, *University of Wisconsin-Milwaukee*
- **Ginny Stoffel, PhD, OT, FAOTA**, *University of Wisconsin-Milwaukee*
- **Katinka Hooyer, PhD**, *local facilitator, Medical College of Wisconsin*

Session Description:

This session will discuss how graphic stories, photovoice, storytelling, life writing and other art forms can help to address health problems and empower Veterans and their supports to improve their health by enhancing active participation in healthcare

Breakout 2:

Ballroom West

Veteran Engagement Four Ways: Insights and Lessons Learned from Engaging Veterans at Five VA Research Centers

- **Kenda Stewart, PhD**, *Iowa City VA Healthcare System & collaborators*
- **Lindsey Ann Martin, PhD**, *Medical Anthropologist, Michael E. DeBakey VA Medical Center, Houston, TX*
- **Kathryn LaChappelle, MPH**, *Connecticut Healthcare System, West Haven, CT*
- **Leah Wendleton, MPH, MSW**, *VA Eastern Colorado Healthcare System, Denver, CO*
- **Karen Berte, PhD**, *Clinical Psychologist, Milwaukee VA Medical Center (retired)*
- **Bob Curry, President**, *Dryhooch of America, Milwaukee, WI*
- **Zeno Franco, PhD**, *local facilitator, Medical College of Wisconsin*

Session Description:

In 2015 VA HSR&D prioritized engagement of Veterans in research and created the Veteran Engagement Workgroup tasked with disseminating recommendations and examples for developing Veteran Engagement Groups (VEGs). This symposium offers insights and lessons learned from four geographically dispersed VA research centers located in Denver, Iowa City, Houston, and West Haven. Drawing on Veteran testimonials and panel liaisons' experiences at each of the four sites, this panel will discuss ongoing development of bidirectional relationships between researchers and VEGs.

Breakout 3:

Room 191

Female Veterans, Children & Family of Veterans and Active Duty Military

- **Cindy Brosig, MSN, RN**, *USAF Nurse Corps Veteran*
- **Kiersten Downs, PhD**, *Health Science Research Specialist, Center of Innovation on Disability and Rehabilitation Research, Tampa VA Medical Center, Tampa, Florida*
- **Leslie Ruffalo, PhD**, *local facilitator, Medical College of Wisconsin*

Session Description:

Wisconsin is home to over 9,000 National Guard and Reserve Service Members, 400 Active Duty members, and over 380,000 U.S. Veterans, approximately totaling 1 to 1.4 children per U.S. Service Member. A four-part nursing research utilization project outlines the current health status of military children and the role of school nurses in identifying health risks, proposed solutions in identifying military children at risk in the school setting, plans to implement programs, and evaluating a proposed program. Currently, military children are at a 50% increased risk of suicide as compared to non-military children, have been experiencing an increase in mental health issues, and are at an increased risk of child abuse due in part to the increase in deployments of the military family member and the effects of the deployment on the military family member.

Summary of the Day & Open Discussion

Jeff Whittle, MD, MPH, *Milwaukee (Zablocki) VA Medical Center*

3:15-4:00 PM

Ballroom East

BIOGRAPHIES (alphabetical order):

Karen Berte, PhD a graduate of DePaul University, served Veterans at Milwaukee VA Medical Center as a clinical psychologist and manager. A faculty member at the Medical College of WI, her focus is promoting awareness of the needs of Veterans in community health care settings. She is a member of the Veterans Health Coalition (VHC) executive committee and continues in community private practice.



Cindy Brosig, MSN, RN, is a Veteran of the U.S. Air Force Nurse Corps, serving from 1995-2003. She earned her B.S. in Nursing from UW-Milwaukee and using her G.I. Bill, she completed a Masters in Nursing with an emphasis in Animal-Assisted Therapy from the University of Phoenix. She is founder of a nurse-led Animal-Assisted Therapy practice called "Operation: H.E.E.L." (Heal & Empower Every Life) that offers social, emotional, and physical support to military children. She received the WDVA "Wisconsin Woman Veteran of the Year Award" in 2016 and was awarded the State of Wisconsin Certificate of Commendation by Representative Gary Hebl for her continued service to U.S. Veterans, U.S. service members, and military family members. She is married to an active WI Army National Guardsman and raising two resilient military children, sharing a home with two rescued canines and two rescued cats.

Ruben A. Burgos, Except for two years when he was in the Navy, Ruben has been a lifelong resident of Milwaukee. He attended MATC and UWM and graduated with a BA in Political Science in 1986. Upon graduation from UWM, he joined the Navy serving on active duty and as a reservist. He became an Intelligence Officer and was Honorably Discharged in 1996. He has worked for the Milwaukee Police Department since 1979. In 1992, he was promoted to Detective and has worked in the Property Crimes, Violent Crimes, Robbery Squad, Narcotics Division, Gang Squad, Homicide Squad, Bomb Squad, Crisis Negotiations Unit and Special Operations Division. In 2007, he was promoted to Lieutenant of Detectives; he has commanded the Bomb Squad and the Intelligence Units, and retired from the Police Department in 2013.

In 2001, he earned a master's degree BS in Organization and Leadership from Springfield College and in 2013 was hired as a Senior Lecturer of Criminal Justice for the University of WI – Milwaukee, and he teaches part time at MATC and Marian University. He is the current President of the Board of Directors of the WI Hispanic Scholarship Foundation and the immediate past president of the National Latino Peace Officers Association – Milwaukee County Chapter. Ruben has been married for 30 years and has 4 children. His oldest son is currently serving in the Navy as a corpsman and his second daughter is serving in the Marine Corp as a Cryptologist. His youngest son will graduate at UWM in May of 2017 and is in the process of joining the Marine Corp as an officer.

Robert Curry is president and founder of Dryhooch of America. He served in the U.S. Army from 1969 to 1972 co-piloting over 250 combat missions in Vietnam and Laos. In 2005, Robert was diagnosed as 100% permanently disabled with Post Traumatic Stress Disorder (PTSD) as a result of these experiences. He founded Dryhooch in 2008 as a means to help the younger generation of Iraq and Afghanistan Veterans combat PTSD and drug/alcohol addiction.

Nathan Derge, Pat Tillman Recipient, was born and raised in Southeastern Wisconsin and graduated high school from Lomira High. Following graduation, he enlisted in the United States Marine Corps and departed for the Marine Corps Recruit Depot in San Diego, California in August 2010. Nathan was assigned to 2nd Battalion 4th Marines Echo Company as an 0331 Machine Gunner. Throughout his four years of active duty service Nathan deployed to Helmand Province, Afghanistan for Operation Enduring Freedom in 2011 and deployed with the 31st Marine Expeditionary Unit in the Pacific Region in 2013. During his service, Nathan was awarded numerous merits including, a combat action ribbon, noncommissioned officer, and a good conduct medal. Nathan was Honorably Discharged from the Marine Corps in August 2014 and followed his desire for a higher education at the University of Wisconsin Milwaukee where he currently studies Political Science Law Studies. During his time as a student at the University of Wisconsin-Milwaukee, he has been very active in the local community by volunteering at local Milwaukee Public Schools and has held various student leadership positions. Among his notable achievements include being selected as a Pat Tillman Scholar for the class of 2016, participating in a United Nations Summer Seminar in New York City for the summer of 2016, and recently finishing a semester at the Universidad Pablo de Olavide in Sevilla, Spain. Nathan currently interns with the Wisconsin Department of Justice Division of Criminal Investigation and has held an internship with the High Intensity Drug Trafficking Area. Nathan plans on studying law at the University of Wisconsin Law School in Fall 2018 and wishes to pursue a path in criminal law.

Caitlin Dobson is a graduate student in the Master of Science in Occupational Therapy program at UW-Milwaukee. Her Master's thesis focuses on social participation among student Veterans transitioning into higher education.

Kiersten Downs, PhD served for over 8 years in the Air Force and New York Air National Guard where she was deployed three times over seas during Operation Iraqi Freedom and Operation Enduring Freedom. Kiersten completed her doctoral training in the Department of Applied Anthropology at the University of South Florida in Tampa. Her dissertation research was a mixed methods study with women Veterans where she focused on their experiences transitioning from military service. Her past work experience includes four years as a congressional staffer, and over five years of experience working in project management, data collection, and research analysis on military Veteran centered projects dealing with Veteran transition and reintegration, suicide prevention, military sexual trauma, and employment needs. She is currently working as an Applied Anthropologist and Qualitative Researcher with the Center of Innovation on Disability and Rehabilitation Research (CINDRR) at the James A. Haley VA in Tampa, Florida. She was selected as the 2013 national Student Veteran of the Year for Student Veterans of America for her advocacy and fundraising efforts on behalf of the organization and serves on the national Board of Directors for SVA.



Raymond Facundo, MSW, transitioned from sergeant to student after serving six years and two deployments with the US Army in 2009. After completing his MSW, he developed and directed the Veterans Resource Center at Portland State University in Oregon. Ray was also a participant in VA's "From War to Home" study, which led him to his new career in community engaged participatory research at the Dept. of Veteran Affairs in New Orleans, LA. He co-hosts a talk radio program called End All Wars on WHIV 102.3FM, and is an active member of the Warrior Writers and Combat Paper work group.



Zeno Franco, PhD is an assistant professor in the Department of Family & Community Medicine at the Medical College of Wisconsin. Dr. Franco's research focuses primarily on improving strategies for community-based participatory research (CBPR) with US military Veterans. Dr. Franco has developed a research partnership with Dryhootch over the last 7 years, serving as the PI for a large Healthier Wisconsin Partnership grant collaboratively developed with Dryhootch to better serve younger Veterans returning from Iraq and Afghanistan. He has authored multiple journal articles and book chapters on CBPR approaches designed to better integrate Veteran serving non-profits and healthcare systems.

CPT Michelle Lynn Fredach AN RN BSN CEN, Officer IN Charge Milwaukee Health Care Recruiting

Rae Anne Frey, Pat Tillman Recipient, MS, is an OIF Veteran and Counseling Psychology doctoral candidate completing her psychology internship at the Clement J. Zablocki VA Medical Center with an emphasis on trauma psychology. She served in the Wisconsin Army National Guard (132d) from 2001-2010 and was deployed in Iraq from 2009-2010. She was honorably discharged as a SSG (E-6) in order to pursue her PhD in Counseling Psychology at UWM.

Marylou Guihan, PhD, is a Research Health Scientist at the Center of Innovation for Complex Chronic Conditions (CINCCCH) at the Hines VA. My academic appointment is in the Department of Physical Medicine and Rehabilitation at Northwestern University. My research focuses on getting patients to adopt healthy behaviors and getting research evidence into clinical practice.

Jayne Holland MS, is the Interim Director of MAVRC. She creates and coordinates campus programming, events, support services and community outreach for 1,500 military and Veteran students. She serves on the UWM Veterans Advisory Council to the Chancellor, the Chancellor's Advisory Committee on Mental Health, the Chancellor's Advisory Committee for LGBT+ Advocacy, and the UWM Veteran Services Group. She is the lead for MAVRC's Community Partners Advisory Board, and the UWM Veterans Alumni Group. She is the Chair for planning committees to present the 4th Annual Military & Veterans Ball-Milwaukee, the Project 22 Suicide Awareness & Prevention events, the Armed Forces Challenge, the VA Mental Health Summit, and is on several UWM campus and Milwaukee area Veteran planning committees, including the Save the Soldiers Home Campaign Committee. Jayne is on the board for the Southeast Wisconsin Veterans and Families Alliance, as well as the Executive Board for the Veterans Health Coalition.



Katinka Hooyer, PhD is a medical anthropologist and postdoctoral research fellow in Family and Community Medicine at the Medical College of Wisconsin. She works with Veterans, studying their experiences of service, war work and post-traumatic stress in order to identify possible paths for easing personal and social suffering. Her research focuses on alternative and integrative healing, including public art, nature-based and animal-assisted therapy to heal the moral wounds of war.

Kathryn LaChappelle, MPH, is a project coordinator for multiple clinical trials focusing on increasing access to non-pharmacological interventions for chronic pain, run by the Pain Research, Informatics, Multimorbidities, and Education (PRIME) Center, at the VA Connecticut Healthcare System, in West Haven, CT. This role includes developing resources, interviewing participants, overseeing recruitment process, data management and data analysis. She also serves as the Center's outreach coordinator, which includes creating strategic partnerships with various groups within and outside of VACHS to increase Veteran engagement in the research process. Ms. LaChappelle serves as the liaison to the Veteran Engagement Group within the PRIME Center.

Lindsey Ann Martin, PhD, is a medical anthropologist and qualitative methodologist in the Methodology & Statistics Core at the Center for Innovations in Quality, Effectiveness, and Safety (IQuEST), at the Michael E. DeBakey VA Medical Center in Houston, Texas. Dr. Martin is a co-Investigator on several research studies and quality improvement projects that employ qualitative methods to evaluate and assess the effectiveness and implementation of programs and services, and holds appointments as Assistant Professor in the Department of Medicine, Section of Health Services Research, at Baylor College of Medicine, and Affiliate Investigator for the South Central Mental Illness Research, Education and Clinical Center (SC MIRECC). Dr. Martin serves as the Faculty Advisor for the IQuEST Veteran Community Engagement Committee where she facilitates the development of bi-directional research partnerships between IQuEST investigators and Veteran stakeholders.

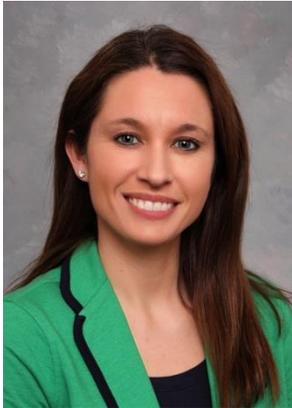


Michael McBride, MD, MS, is Child and Adolescent Psychiatrist who joined the army at age 40 and deployed overseas 4 times, twice to Iraq to work in combat stress clinics. At the age of 50 he joined the navy and deployed to Afghanistan as a psychiatrist in the Role 3 Combat Trauma Hospital in Kandahar. He now is back with the army assigned to the 467th Combat Stress Control Unit based in Madison, Wisconsin and is employed full-time as a staff psychiatrist and Local Recovery Coordinator at the Clement J. Zablocki VA Medical Center.

Heidi Plach MS, OTR, is a Clinical Associate Professor, Dept. of Occupational Science & Technology at University of Wisconsin-Milwaukee and Co-Chair of the UWM Veterans Advisory Council to the Chancellor (VACC). Heidi has published a study on the Occupational Needs of Young Veterans in the

American Journal of Occupational Therapy. Her work made the local news and has contributed to future studies related to Veterans in the field of Occupational Therapy.

Samuel Rogers, MAVRC Employee, is from Wauwatosa and is a junior majoring in Political Science – Law Studies. He is the Veterans Advocacy Senator on the Student Association. He is a Veteran of the Afghanistan war and spent eight years in the United States Army, and one year in the federal civil service. He is focused on projects that improve the effective transition/reintegration of separating service Veterans into college life. He works on the MAVRC Special Projects Team which includes state legislative Veteran advocacy and future capital initiatives.



Leslie Ruffalo, PhD completed her doctoral degree in Adult Education with a focus in Public Health from the School of Education at the University of Wisconsin-Milwaukee. She received her Master's degree from the University of Wisconsin-Milwaukee and her undergraduate degree from the University of Wisconsin-Madison. Dr. Ruffalo's research interests have focused on using community-engagement in research (CEnR) methods to promote health in under-resourced communities in Wisconsin. In partnership with community agencies/organizations, she has worked with Veteran populations on chronic disease, rural communities on worksite wellness and binge drinking, schools on health interventions, and agencies of food security. As an educator, she serves as the Course Director of two courses (Promoting Health in Underserved Communities and Community Medicine). Dr. Ruffalo also serves as a research advisor to medical students.

Bryan Semaan, PhD, is an Assistant Professor in the School of Information Studies at Syracuse University, where he serves as a co-director of the Behavior-Information-Technology-Society (BITS) Lab. He is also a Research Associate with the Institute for Veteran and Military Families (IVMF) and a Research Associate with the Department of Veteran Affairs (VA). He is interested in the general areas of computer supported cooperative work (CSCW), human-computer interaction (HCI), and social computing/social media.

Bryan's research lies broadly at the intersection of the computer sciences and the social sciences. Fundamentally, he studies how people both appropriate, and are shaped by, technology in their daily lives. In other words, on a broad level, he is interested in understanding the ways in which technology is changing society, and the social and cultural practices surrounding technology use and design.

More specifically, his research investigates Technology for the social good. That is, his research agenda is centered around examining the role of technology in challenging contexts, where he operationalizes challenging contexts as working with vulnerable, underserved, and marginalized populations (i.e. Veterans), or choosing domains of our social life (i.e. civic participation), through which ICTs can serve as a social good by enhancing the lives of citizens and effecting societal impact. To accomplish this goal his research integrates qualitative, quantitative and computational analysis to understand the activities of populations immersed in these challenging contexts, and he employs participatory design and design science approaches to further uncover complex social processes and effects, and to identify and pursue impactful design opportunities that empower and/or improve the lives of citizens.

Josh Sheeran, has served in the United States Army for five and a half years. He was deployed to Afghanistan from July 2008 – July 2009. He was awarded the Bronze Star with Valor Device, and the Combat Infantry Badge.



Kenda Stewart, PhD – Kenda Stewart is a cultural anthropologist and contributes qualitative methodological and analytical expertise to a variety of research and quality improvement projects for Comprehensive Access and Delivery Research and Evaluation Center (CADRE), the Veterans Rural Health Resource Center-Central Region, and the VISN 23 PACT Demonstration Lab, which are located at the Iowa City VA. In addition to work in research, Dr. Stewart implemented and leads CADRE's Veteran Engagement Panel, which brings together local Veterans and Investigators to discuss current and future research in CADRE. Her work on Veteran engagement extends to cross-center collaborations and participation in the HSR&D National Veteran Engagement Workgroup.



Ginny Stoffel, PhD is an Associate Professor, Dept. of Occupational Science & Technology at University of Wisconsin-Milwaukee and member of the UWM Veterans Advisory Council to the Chancellor (VACC). Ginny has carried out several studies with student Veterans as they transition from military life to civilian student life using Photovoice, a participatory action research method.

Leah Wendleton, MPH, MSW, serves as the Education Program Coordinator for the Rocky Mountain Mental Illness, Research, Education, and Clinical Center for Suicide Prevention. In this role she works on development and evaluation of dissemination and implementation Education Program Projects and has provided expertise to projects such as Firearm Safety Messaging for Suicide Prevention, Suicide Prevention Cyber Seminar Series, Talking to Children about Suicide Attempts in the Family, and Rural Community-Based Suicide Prevention for Veterans. In her role she co-founded the Denver COIN/MIRECC Veteran Research Engagement Board and serves as a liaison to the board. All of her VA work has benefited from her experience in Stakeholder Engagement, Community Based Research, and the Evaluation of complex programs. Prior to her work with the MIRECC she was a Research Patient Coordinator at Washington University in St. Louis working in Geriatric Psychiatry while doing this work she obtained my Masters in Public Health and in Social Work.



Jeff Whittle, MD, MPH, is a Staff Physician at the Clement J. Zablocki VA Medical Center and Professor of Medicine in the Division of General Internal Medicine. Dr. Whittle's research has focused on access to care issues and quality of care. He is a national authority on the reasons for racial differences in cardiovascular procedure use. He has used a variety of methods, including analysis of Medicare and VA administrative data, studies of clinically defined cohorts, surveys, and chart reviews. His work has been funded by the Veterans Administration, National Institutes of Health, Agency for Healthcare Research and Quality, Health Services Resource Administration and American Heart Association.

Since joining PCOR, Dr. Whittle has developed an innovative community academic partnership with Veteran community organizations including Vietnam Veterans of America, American Legion, Veterans of Foreign Wars and National Association of Black Veterans. This extends his work on access and quality to community-based effort to improve the quality of hypertension care for older individuals by empowering them to take an active role in their own health care. He is currently studying the effectiveness of this approach in a large randomized trial funded by the Department of Veterans Affairs Health Services Research and Development Service.



Kara Zamora, MA, received her BA in Anthropology from the University of Illinois at Chicago (UIC) and her MA in Applied Anthropology from California State University East Bay (CSUEB). In 2013 she began working as a Research Assistant at the University of California San Francisco (UCSF) in the Department of Anthropology, History and Social Medicine (DAHSM) and remained there until she came to the San Francisco VA in 2015. In her current role as a Qualitative Researcher at VA she works across regional and national mixed-methods research and quality improvement (QI) projects that focus on rural access to mental health care, integrative chronic pain management, and patient and provider education efforts.

Breakout Session Abstracts

1:30-3:00pm

Breakout 1 (Location - Art Gallery): Using Photovoice, Educational Comics and Storytelling to Illuminate Veteran Lived Experience in Research

Kara Zamora, PhD. Multi-VA project - SF VA, Center to Improve Veteran Involvement in Care (CIVIC), Portland VA

Title: "Graphic Medicine in the VA: Access Points Between Patients, Providers, the Institution and the Community.

Co-authors: Sarah Ono, PhD, Tyler Thompson, an illustrator

Abstract:

Many Veterans volunteer to participate in VA research to help improve care for their fellow Veterans. A key aspect of all research is dissemination of findings. However, few traditional research products are made to be patient-facing and accessible to diverse patient populations, and few research participants ever engage with the academic products they contribute to. In recent years, a sub-genre of graphic stories that highlight illness narratives have emerged. Limited health literacy can contribute to barriers to accessing health information and care services, and comics are an accessible way to address these problems and attract new audiences.

This presentation outlines how qualitative findings from two studies were used by a San Francisco-based team to create patient-facing educational comics for VA. The comic "Managing Your Pain" was developed for the Integrated Pain Team Clinic at the San Francisco VA based on findings from a Quality Improvement study targeted at evaluating the clinic's implementation across urban and rural clinics. And the comic "Vets Helping Vets" was developed in partnership with the Portland VA's Center to Improve Veteran Involvement in Care (CIVIC) based on findings from a VA Health Services Research and Development (HSR&D) study focused on addressing access issues for rural Veterans seeking mental health care.

These collaborative, non-traditional products can serve as a template for creating patient-facing products that offer access points between patients, providers, and institutional and community stakeholders. These findings also highlight the important role that qualitative analysis can have in identifying and addressing gaps in clinical resources and services

Raymond Facundo, MSW, South Central MIRECC, VA SE Louisiana.

Title: "Using Photovoice to Elicit Perspectives of Veterans with TBI and their Care Partners on Challenges to Community Reintegration and Sources of Support."

Co-authors: Sarah Ono, PhD, Center to Improve Veteran Involvement in Care (CIVIC), VA Portland Health Care System; Development of Family Medicine, Oregon Health & Science University, Portland, OR. Mary Frances Ritchie, MPH, Center to Improve Veteran Involvement in Care (CIVIC), VA Portland Health Care System, Portland, OR. Ivy Terrell, MPH, South Central MIRECC, Southeast Louisiana Veterans Health Care System, New Orleans, LA. John

Marmion, MPH, South Central MIRECC, Southeast Louisiana Veterans Health Care System, New Orleans, LA. Elizabeth Damron, BA, South Central MIRECC, Southeast Louisiana Veterans Health Care System, New Orleans, LA. Gala True, PhD, South Central MIRECC, Southeast Louisiana Veterans Health Care System, Tulane University School of Medicine, New Orleans, LA.

Abstract:

Little is known about the lived experiences of Veterans with TBI and their caregivers regarding impact on family, community interactions, treatment preferences, goals for recovery, and challenges to reintegration. Given barriers faced by many Veterans with TBI and demands on family and friends who support them "care partners", patient and community focused research is essential for identifying unmet needs. A participatory action research method called Photovoice engaged Veterans and their care partners in documenting the experience of TBI. The study was conducted at two VA Medical Centers (New Orleans, Louisiana; Portland, Oregon). OEF/OIF/OND Veterans with a TBI were recruited through VA and community settings; most Veterans participated with a person they identified as their care partner. Participants (n=60+) were given cameras and asked to contribute photos and personal narratives to communicate their perspectives on living with TBI. Methods included individual and dyadic photo-elicitation interviews with Veterans and care partners and small group discussions. Veterans' and care partners' photo-narratives highlighted important themes including barriers to receiving a TBI diagnosis; challenges accessing VA care and TBI-related services; unmet needs; changes in relationships/roles; and strategies for coping with TBI-related problems. Visual research methods allowed participants to reflect on their experiences and feelings, and created opportunities for sharing their stories through images. Participants' photo-narratives provide powerful insights into a range of experiences related to TBI. Participants stories can educate healthcare providers, administrators, and community stakeholders to inform best practices for person-centered care and suggest new interventions for Veterans and their families.

Breakout 2 (Location - Ballroom West): Veteran Engagement Five Ways: Insights and Lessons Learned from Engaging Veterans at Five VA Research Centers

Kenda Stewart, PhD, Center for Comprehensive Access & Delivery Research and Evaluation (CADRE) VA Iowa City.

Title: "Veteran Engagement Four Ways: Insights and Lessons Learned from Engaging Veterans at Four VA Research Centers.

Co-authors: Lindsey Martin, PhD, Center for Innovations in Quality, Effectiveness and Safety, VA Houston, TX, Kathryn LaChappelle, Pain Research, Informatics, Multimorbidities, and Education Center (PRIME), VA Connecticut.

Abstract:

The Department of Veterans Affairs has a robust funding mechanism in the areas of health services (HSR&D), biomedical laboratory, clinical studies, and rehabilitation research and

development. In 2015 VA HSR&D prioritized engagement of Veterans in research and created the Veteran Engagement Workgroup tasked with disseminating recommendations and examples for developing Veteran Engagement Groups (VEGs). This symposium offers insights and lessons learned from four geographically dispersed VA research centers located in Denver, Iowa City, Houston, and West Haven. Drawing on Veteran testimonials and panel liaisons' experiences at each of the four sites, this panel will discuss ongoing development of bidirectional relationships between researchers and VEGs. Veteran-engaged research builds partnerships both within and apart from existing stakeholder groups. Panelists will discuss how local context influences the initiation, growth, and maintenance of Veteran-engaged research partnerships at multiple levels in VA as they have occurred through center-level VEGs: 1) at the local level between Veterans and researchers; 2) between Veteran groups spanning military branch and service era; 3) and nationally between VA research centers involved in Veteran engagement.

The development of center-level VEGs creates opportunities for Investigators to involve Veterans in all stages of the research process, and helps ensure that VA research meets the needs and preferences of the Veterans it serves. At this early stage, it remains to be seen whether including Veterans in research at the Center-level will result in larger paradigm shifts in health services research.

Breakout 3 (Location - Room 191): Female Veterans, Children & Family of Veterans and Active Duty Military

Cindy Brosig, MSN RN, USAF Nurse Corps Veteran

Kiersten Downs, PhD, Health Science Research Specialist, Center of Innovation on Disability and Rehabilitation Research, Tampa VA Medical Center, Tampa, Florida

Abstract:

Wisconsin is home to over 9,000 National Guard and Reserve Service Members, 400 Active Duty members, and over 380,000 U.S. Veterans, approximately totaling 1 to 1.4 children per U.S. Service Member. A four-part nursing research utilization project outlines the current health status of military children and the role of school nurses in identifying health risks, proposed solutions in identifying military children at risk in the school setting, plans to implement programs, and evaluating a proposed program. Currently, military children are at a 50% increased risk of suicide as compared to non-military children, have been experiencing an increase in mental health issues, and are at an increased risk of child abuse due in part to the increase in deployments of the military family member and the effects of the deployment on the military family member. The health and wellness of our nation's military children directly reflects the health and wellness of our nation's U.S. Military Veterans and U.S Military Service Members.

Poster Presentations

**3:15-4:00 PM
Ballroom Lobby**

Poster #1

Title: Blogging as Recovery: The Use of Blogs by Survivors of Military Sexual Trauma

Presenter: Brian Dobreski, Syracuse University

Additional Contributors: Lauren Britton, Sarah Bratt, Ginger Peterman, Kelly Bova, Kirti Sharma, Bryan Semaan, all of Syracuse University

Abstract:

Military sexual trauma (MST) is a significant concern in the United States military, and serves as a form of life disruption posing distinct challenges to survivors in seeking traditional means of support. While research has shown blogs to be effective, non-formal tools for working through crises and seeking support, little work has focused on MST survivors and their use of blogs. In this study, we utilized Herman's stages of recovery in a qualitative analysis of 659 posts from 5 blogs written by MST survivors in order to understand what they utilized their blogging to accomplish. Herman's model conceptualizes recovery as taking place across three stages: establishing safety, reconstructing personal stories, and restoring connections with others. Results of our analysis show a general fit with this framework. In particular, MST survivors blogged as a means of reconstructing their personal narratives and identities, as well as reaching out and reconnecting with others. In contrast, recovery work focused on establishing safety was relatively underrepresented. Overall, findings suggest blogs to be a useful tool for supporting later stage recovery work for MST survivors. Further work is warranted to understand how and why these individuals engage in blogging, and how earlier stage recovery work could be better supported by online spaces.

Poster #2

Title: Transition Resilience among Military Veterans

Presenter: Brian Dosono

Additional Contributors: Jiyoung Lee, Lauren Britton, Brian Dobreski, Sarah Bratt, Ginger Peterman, Kelly Bova, Kirti Sharma, Bryan Semaan

Abstract:

This research focuses on the Information and Communication Technology (ICT) enabled practices that people develop in response to crises that emerge while in transition—a phenomenon we call “transition resilience.” In our study of transition resilience, we investigate the complex interplay of people and ICTs during disruptive events. In particular, we seek to understand how people use ICTs to overcome invisible crises, e.g. PTSD. To develop this understanding, we explore the transition experiences of United States Veterans reintegrating into civil society as their experience often involves multiple transitions at once.

In collaboration with the Institute for Veteran and Military Families and the Department of Veteran Affairs, we have conducted 20 open-ended pilot interviews. Our sample comprises of 13 males and 7 females Veterans who had served in the Army, Navy, Air Force, and Marines. We find for all of our informants, their use of ICTs, such as Facebook, blogs, and online games, changed as part of their transitions. For example, informants developed their own ICTs, or created new online communities within existing platforms in support of other Veterans, which enabled Veterans to develop resilience while in transition. Our work aims to advancing design principles in support of human-computer interaction approaches to supporting transition and increasing the resiliency of people suffering from invisible crises.

Poster #3**Title:** Barriers Veteran Families Face to Receive Community Based Support**Presenter:** Chelsea Kiehl, MCW Medical Student**Additional Contributors:** Dr. Zeno Franco, Assistant Professor Family & Community Medicine, Dr. Michael McBride, VA Psychiatrist and Psychiatry Clerkship Director, Dr. Katinka Hooyer, Research Fellow Primary Care Research Department of Family and Community Medicine**Abstract:**

Since the start of Operation Enduring Freedom in Afghanistan and Operation Iraqi Freedom over 2 million children have been affected by the deployment of a parent. 30,000 of these youth cope with the loss or injury of a parent as well as the struggle of living in a single family household during deployment. Our military families need community based organizations (CBOs) that provide resources during the deployment and reintegration process, as well as after the family leaves the military. The goal of this study is examine the resources available to Wisconsin Veteran families, better understand how they are utilizing CBOs, and identify barriers that reduce resource use. We are also analyzing information on family characteristics, relationship dynamics and caretaker well-being. A survey was administered asking Veteran families about their relationship with the Veteran, their parenting situation, access and utilization of CBOs, personal well-being, and open ended questions for specific services they want for themselves or their children. The survey link was given to every county Veteran Service officer and assistant, 90, who then distributed it to families. With 28 completed surveys we have seen about half of the respondents are significant others, mostly females. Trends in the data also show that over 60% of the respondents have not received resources from CBOs for themselves and 90% have not received resources for their children. The biggest barriers for receiving services are distance, time, and the lack of knowledge of these resources.

Poster #4**Title:** Military Trauma Prevalence within an Urban Primary Care Clinic**Presenter:** Courtney Barry, PsyD, Medical College of Wisconsin**Additional Contributors:** Kevin Hamberger, PhD, Zeno Franco, PhD, Medical College of Wisconsin**Abstract:**

Introduction: Trauma is commonplace in primary care clinics, with prevalence rates approaching 20% of patients, and even higher in minority and under-served communities. The prevalence of PTSD among Veterans is 24.5% in primary care settings. Trauma and PTSD is correlated with poor mental and physical health, including obesity, depression, anxiety, PTSD, and decreased compliance with treatment regimens.

Methods: A 27 item cross-sectional survey was distributed to 199 English-speaking adult patients at the urban primary care clinic. The survey was adapted from the Adverse Childhood Event study and other validated trauma assessment instruments. Respondents indicated if they experienced 12 different trauma types either in childhood or adulthood: emotional abuse, physical abuse, sexual abuse, neglect, intimate partner violence, household challenges, exposure to violence, unintentional traumatic events, and military trauma. Descriptive statistics were analyzed.

Results: Analyses demonstrate a prevalence of 95.5% of trauma within the primary care clinic. The prevalence of military trauma is 33.7% of the 199 patients screened. Health outcomes are currently being analyzed.

Conclusion: Traumatic experiences are prevalent among patients at this primary care clinic. The rate of trauma among Veterans is higher than the national average within this clinic. This demonstrates the need for primary care physicians to be screening individuals for military trauma and connecting them with appropriate services. This also illustrates the need for primary care physician training for trauma-informed care, in order to reduce re-traumatization and provide supportive care.

Poster #5

Title: Feasibility of a manualized life skills intervention for military and student Veterans: Boots for Life healthy relationship module

Presenter: Sarah Dillett

Additional Contributors: Rachel Ferguson, Devin Mahoney, Kristen Paxson researcher/scholar, MSOT student

Abstract:

As of 2014, over one million military Veterans used GI benefits to attend higher education (“Veterans and College”, 2014). The demographic makeup of Veterans differs from the makeup of the typical student population. Per the VA website, only 15% of Veterans are the same age as traditional students, the majority between ages 24-40. Forty-seven percent have children and 47.3% are married (Department of Veterans Affairs, 2013). These differences in age and life experiences can often cause students to isolate themselves (Gregg, Kitzman, & Shordike, 2016). This isolation negatively affects the university experience for student Veterans. Veterans with social support from both friends and family had a more positive college experience (Elliott, 2015). Because social support is important for academic success, it is critical for Veterans to develop strategies that will allow them to overcome these differences and develop meaningful relationships. *Boots for Life* is a manualized life skills intervention intended to help military and Veteran students develop life skills, with an emphasis on social relationships, needed to transition from active duty to civilian student life. This intervention is an ongoing project under development by occupational therapy students and faculty at the University of Wisconsin - Milwaukee beginning in 2013.

Poster #6

Title: Detecting Precursors to Angry Outbursts in the Veteran Population

Presenter: Danielle Olsen, Medical College of Wisconsin,

Additional Contributors: Katinka Hooyer, PhD, MS, Medical College of Wisconsin, Zeno Franco, PhD, Medical College of Wisconsin, Sheikh Iqbal Ahamed, PhD, Marquette University, Tanvir Roushan, Marquette University, Kowser Patwary, Marquette University, Nadiyah Johnson, Marquette University, Tanvir Roushan, Marquette University

Abstract:

Intro: Veterans with PTSD are at an increased risk for engaging in high-risk behaviors including impulsivity and aggression. Angry outbursts associated with PTSD significantly impact the daily functioning and health outcomes of a subset of Veterans. Our community-academic partnership is researching the psychological and social contexts of anger in Veterans to better understand the emotional and physiological precursors to angry outbursts. This project involves a multi-disciplinary team from the Medical College of Wisconsin, Marquette University, and Dryhootch.

Objective: To identify the lived experience of anger in high-risk Veterans to inform the design of a socio-technical intervention aimed at mitigating risky behavior.

Method: 10 semi-structured focus groups involving three Veterans were collected weekly over a 3-month period. Field-notes taken during the focus groups were used to develop a taxonomy of experiences related to anger. These categories were used to create a deductive coding scheme to fulfill the immediate needs of our technical design team. Three focus groups have been transcribed and analyzed based on this coding scheme.

Results: Preliminary analysis suggests that while expressions of anger are individualistic, there exist common emotional, physical and social experiences that inform anger. Examples of “feeling frustrated”, “twitching” prior to an outburst, and specific social situations, “Yeah crowds...it’s a problem”, are repeated concepts seen in the data.

Discussion: Initial coding shows multiple examples of anger expression within the Veteran population. Determining common anger precursors and recognizing the need for self-awareness of personal triggers will influence the development of personalized interventions to prevent angry outbursts.

Poster #7

Title: Observing the mental health condition of Veterans using PCL- 5 score of socio- technical intervention.

Presenter: Fitrat Hossain, MD

Additional Contributors: Tanvir Roushan, Dr. Zeno Franco, Dr. Sheikh Iqbal Ahamed, Dr. Katinka Hooyer

Abstract:

Estimates show 15-20% of military Veterans in US are diagnosed with posttraumatic stress disorder (PTSD). Veterans suffering from PTSD are more likely to engage in risky behaviors such as alcohol abuse, impulsivity and aggression, leading to negative health outcomes. This community-based study assessed the impact of a 12-week Veteran peer mentorship program at intake, 6-week midpoint and 12-week discharge, with a focus on PTSD symptom change using the PCL-5. 107 Veterans participated at baseline, 64 at midpoint, (40% loss) and 40 at discharge (63% loss). Systematic differences in PTSD symptoms between completers and non-completers were analyzed using Wilcoxon *rank sum test*. No significant differences were found, $W = 1273$, $p > 0.05$. Repeated measures ANOVA found a significant drop in mean PCL-5 score from baseline to discharge, $F(2, 78) = 3.559$, $p < 0.05$. For participants scoring negative for PTSD at intake ($PCL-5 < 33$), there was no significant change at discharge, $F(2, 38) = 0.194$, $p < 0.05$. However, for those who met the diagnostic cut score for PTSD ($PCL-5 > 33$), there was a significant decline in PTSD symptoms at discharge, $F(2, 38) = 5.939$, $p < 0.05$. We also tested the four PCL-5 symptom clusters: intrusive thoughts, avoidance, negative affect and arousal reactivity. Using repeated measures ANOVA and post-hoc tests, we compared these clusters at three-time points. All symptom clusters improved from baseline to discharge except avoidance. These findings suggest that this intervention is clinically effective.

Poster #8

Title: Quick Reaction Force Project

Presenter: Jose E. Lizarraga Mazaba, Cardinal Stritch University, Medical College of Wisconsin ROADS Program

Additional Contributors: Zeno Franco, Medical College of Wisconsin, Mark Flower, Dryhootch, Danielle Olsen, Abhipsa Kar, Katinka Hooyer, Tanvir Roushan, Iqbal Ahmed, Fitrat Hossain

Abstract:

Background: The Quick Reaction Force (QRF) project is an ongoing project which focuses on improving the quality of life of Veterans returning from battle. The main goals of the project are to develop a mobile application as well as to develop wearable technology in the form of an E4 bracelet

Method: Veterans fill out three large surveys every 6 weeks being Baseline, Midpoint, and Discharge which consists of sectional questionnaires. Data analysis consists of statistical tests.

Results: In order to test if Veterans PTSD symptoms declined from baseline to the 6-week midpoint, a paired t-test was used to compare PCL-5 scores at baseline and midpoint, showing a significant decline. In order to test if branch of service was associated with PTSD diagnosis, a Chi-Square test was performed, results were significant. However, a logistic regression didn't find that branch of service was associated with PTSD diagnosis. In order to test if recruiting strategies being face-to-face (paper), and electronic process resulted in different PCL-5 scores a t-test comparing the mean PCL-5 scores was performed. Results were significant those who completed surveys electronically had a greater PCL-5 score in comparison to paper.

Conclusion: The results showed peer mentorship may be having a positive effect on individuals who are part of the project, at least in the first 6 weeks of the intervention. Somewhat unexpectedly, PTSD diagnosis was not meaningfully associated with branch of service, as well as recruitment process had an effect on PCL-5 score.

Poster #9

Title: Qualitative Evaluation of an Interdisciplinary Chronic Pain Management Program for Veterans: Veteran Reported Outcomes

Presenter: Lauren Penney, South Texas Veterans Health Care System and University of Texas Health San Antonio

Additional Contributor: Elizabeth Haro, South Texas Veterans Health Care System and University of Texas Health San Antonio

Abstract:

Background: Chronic pain is a complex, multidimensional condition for which there are no easy treatment solutions. Stakeholders support the adoption of non-opioid evidence-based practices that emphasize interdisciplinary treatment and patient self-management practices. Empower Veterans Program (EVP) is a 10-week group program for Veterans with chronic pain developed at the Atlanta Veterans Administration (VA) Medical Center. EVP is based on a bio-psycho-social-spiritual model of health, and uses mindfulness and movement practices, and acceptance and commitment therapy (ACT). As part of the program evaluation and quality improvement work, we identified Veteran reported outcomes.

Method: 41 Veterans took part in semi-structured interviews between January-July 2017. Interview transcripts were analyzed using matrix analysis and cutting and sorting techniques.

Results: Veterans reported a wide range of outcomes, most of which we placed into 8 categories: participating in life, feeling empowered, accepting and adjusting, balancing and setting boundaries, using coping skills, changing lifestyle, adjusting medication use, and feeling stuck. However, there were qualitative differences between groups of outcomes individual Veterans reported, suggesting a continuum of change.

Conclusion: While many of the reported outcomes mapped onto program concepts and practices, not all did, suggesting the importance of allowing Veterans describe treatment impacts in their own words. By looking at groups of reported outcomes, we were also able to identify qualitative differences at the individual level. Our next step will be to triangulate our qualitatively collected outcomes data with the quantitative data collected using standardized measures to identify points of convergence and divergence.

Poster #10

Title: Community Conversations: Veteran Engagement through Shared Voices

Presenter: Marylou Guihan, PhD, Center for Management of Complex Chronic Conditions, Edward Hines, Jr VA, Feinberg School of Medicine, Northwestern University, Chicago, IL

Additional Contributors: Frances M. Weaver, PhD, Center for Management of Complex Chronic Conditions, Edward Hines, Jr VA, Loyola University School of Medicine, Chicago, IL

Third Author: Michael SA Richardson, MD, FACP Edward Hines, Jr VA, Spinal Cord Injury Unit, Bella Etingen, PhD, Amy Binns-Calvey, BA, Cara Ray, MA

Abstract:

Background and objectives: Engaging Veterans in research has the potential to ensure that their preferences, needs, and values are addressed. Evidence that demonstrates that patients who are more actively involved in their health care experience better health is growing. Engaging Veterans in research can make findings more patient-centered, useful, and trustworthy, and may lead to greater use and uptake of research results by the patient and broader healthcare community. Specific aims include: 1) assessing Veterans and caregivers' knowledge of and interest in engaging as collaborators in identifying research gaps/problems, potential solutions, target outcomes, and dissemination of results; 2) examining factors that contribute/ detract from Veterans' interest/ability to engage in research, and 3) engaging Veterans and caregivers in a grant review process to determine whether additional training is required to improve the review process.

Methodology: Focus groups will be conducted with 35 Veterans with spinal cord injury (SCI) at 2 VA centers. A sub-set of participants will be invited to a grant review session. Obtaining Veteran input will guide revision

of curriculum materials to facilitate the participation of Veterans and caregivers in a Veterans Engagement Group to assist in grant reviews.

Impact/Significance: Involving Veterans in research activities, such as grant reviews, has great potential. However, how best to do this is not always clear. Products of this study include training materials for Veterans to use for grant reviews, input on how to disseminate research findings to Veterans and families, and guidance on what Veterans want researchers to address.

Poster #11

Title: US Army Nurses' Influence on the Evolution of Nursing Leadership in S. Korea: Korean Nurses' Perspectives

Presenters: Myunghee Jun, RN, PhD. Anne Dressel, PhD, CFPH. Eric Kyungjin Cha, RN

Abstract:

Historically, breaking a long lasting tradition requires overcoming a big resistance. After liberation from Japan (1945) and Korean War (1953), modern nursing education and clinical practice in S. Korea have been immensely westernized by foreign missionaries, universities, and US Army nurses.

Countless innovative institutional changes, both voluntarily and forced, in professional nursing history happened in S. Korea. The country saw growth in the nursing professions, improvement of the quality, and standardization of nursing practices from 1945 through 1965. Many American authors reported that during this period, the U.S. Army Nurse Corps had continuous presence in S. Korea, working with the Korean Nurses Association, Republic of Korea Army (RKA) and other institutions to make huge contribution on advancement of S. Korean nursing profession. This American presence was one of the factors that helped Korean nurses to resist the conservative values from the old Japanese oppression and Confucianism, leading to innovation that was thought to never happen. However, there was not much focus on describing these changes from Korean nurses' perspectives. Historical reviews of the American and Korean nursing literatures, which demonstrated the voices of Korean nurses, indicated that US army nurses functioned as a role model of a pioneer in women's profession and leadership with an assertive clinical decision making. This paper discusses the influence of the U.S. Army Nurse Corps on modern nursing profession and leadership in S. Korea from 1962-1965.

Poster #12

Title: The Effects of Peer Support on Alcohol Use in Veterans

Presenter: Sam Hall, Student/Researcher;

Additional Contributors: Zeno Franco, PI/Researcher; Mark Flower, Veteran/Dryhooch

Abstract:

Excessive alcohol use is a major public health concern that causes serious medical problems and is prevalent in Veterans of the United States military. Traumatic events that Veterans may be exposed to play a role in heavy alcohol use and the development of Alcohol Use Disorders, as well as other co-morbid psychiatric conditions. The purpose of this study is to identify differences in characteristics between Veterans with high and low alcohol use, determine the impact of a peer support program on alcohol use, and assess the interaction between alcohol use and other mental health problems including Post-Traumatic Stress Disorder (PTSD). Veterans enrolled in a peer support program at Dryhooch in Milwaukee, WI completed the Alcohol Use Disorders Identification Test (AUDIT) before and after 12 weeks in the program, in addition to other measures. Veterans also reported the number of alcoholic drinks they consumed each week. Based on previous findings, we predicted that there would be a positive correlation between baseline AUDIT scores and other mental health symptoms. We also predicted that involvement in the peer support program would be related to decreased alcohol use over time and that alcohol use would moderate the effect of the peer support program on mental health symptoms, such that there would be an interaction where high alcohol users would show less improvement in symptoms than low alcohol users.

Poster #13

Title: Predict risky behavior among Veterans with PTSD by analyzing gesture patterns

Presenter: Tanvir Roushan

Additional Contributors: Nadiyah Johnson, Fitrat Hossain, MD; Dr. Zeno Franco; Dr. Katinka Hooyer; Dr. Sheikh Iqbal Ahamed

Abstract:

In recent studies the Veteran Affairs (VA) has started to define PTSD by its association to specific high-risk behaviors rather than defining PTSD based on a cluster of psychiatric symptoms. Some researchers have suggested that high risk behaviors -- extreme anger (i.e., rage or angry outbursts) is particularly problematic within the context of military PTSD.

This project presents the analysis of the gesture patterns of an individual that represents risky behavior. The process of collecting physiological data from a wearable device (E4) and analyzing the accelerometer readings are described in the poster. Our goal is to develop a predictive model that would distinctively identify twelve gesture patterns that we have classified as signs of risky behavior (example: punch, sweep, pacing etc.). The poster particularly focuses on efforts to determine patterns to identify these gestures based on the analysis from the 3-axis accelerometer data readings.

Poster #14

Title: Assessing Patterns of Smoking Cessation in a Community Based Veteran Sample

Presenter: Abhipsa Kar

Additional contributors: Zeno Franco, Katinka Hooyer, Tanvir Roushan, Iqbal Ahamed, Bob Curry, Leslie Ruffalo, Jeff Whittle

Abstract:

Veterans with Post Traumatic Stress Disorder (PTSD) struggle to quit smoking compared to similar non-veterans, resulting in disproportionate health risks. Social cognitive theory suggests behavioral change, such as smoking cessation, is facilitated through personal agency (i.e. self-efficacy) and collective agency. However, veterans with PTSD have difficulty with social reintegration, which may inhibit efforts to cease smoking. This study was designed through the Dryhooch Partnership for Veteran health to better understand how social support can modulate smoking cessation in veterans. Validated instruments including the PTSD Check List (PCL-5), Deployment Risk and Resiliency Inventory (DRRI-2), Social Adaptation Self Evaluation Scale (SASS), and Stages of Change were administered. Chi-square analyses showed significant relationships between increased social support and number of quit attempts ($\chi^2=4.61$, $p<0.05$) and stage of change ($\chi^2=9.70$, $p<0.01$). Quit attempts were also correlated with higher family functioning ($\chi^2=4.13$, $p<0.05$). Multiple regression analysis showed family functioning ($\beta=0.35$, $t(41)=2.57$, $p<0.05$) and self-efficacy ($\beta=-0.42$, $t(41)=-1.90$, $p=0.06$) predicted quit attempts. Together, these two variables explained a significant proportion of variance in quit attempts, adjusted $R^2=0.17$, $F(2,39)=5.17$, $p<0.05$. Within this sample, motivation to quit smoking was more strongly predicted by social factors, especially family functioning, compared to personal agency. While motivational interviewing is the primary modality used in primary care to target personal self-efficacy and decision making, these results suggest that community interventions can play a powerful role in improving health outcomes by providing veterans with a sense of support and collective agency when self-efficacy cannot sufficiently generate the motivation to quit.

Planning Committee

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Leslie Ruffalo, PhD, *Medical College of Wisconsin, Co-Chair*

Katinka Hooyer, PhD, *Medical College of Wisconsin, Co-Chair*

Ginny Stoffel, PhD, *U. of Wisconsin, Milwaukee – Occupational Therapy Program, Co-Chair*

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