

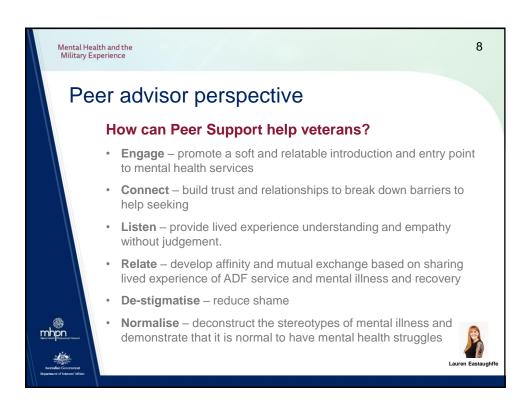
Mental Health and the Military Experience

Through a facilitated panel discussion, about Brad, at the completion of the webinar participants will:

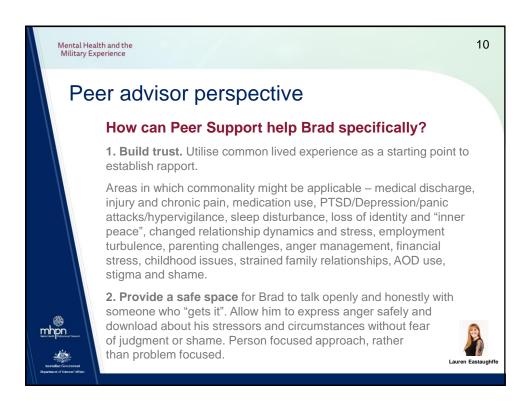
• better recognise the clinical comorbidities and systemic issues (therapist, client, modality, service, compensation, psychosocial) that can complicate successful treatment for veterans with PTSD

• be better equipped to know what to do when evidence-based PTSD treatments do not ameliorate mental health symptoms in veterans

• have increased confidence in identifying and supporting veterans who do not respond to evidence-based PTSD treatments.



9 Mental Health and the Military Experience Peer advisor perspective **How can Peer Support help veterans? (cont.)** • Model – discuss and role model recovery mindset, practices and outcomes; including holistic health and wellness activities (exercise, healthy eating, good sleep hygiene, positive relationships) **Equip** – share tools for managing recovery and dealing with the non-linear nature of recovery Discover – identify personal strengths and develop a new sense of purpose Empower – inspire self advocacy and self directed change and recovery Link - facilitate referral to internal and external clinical, social and wellbeing services **Support** – provide an ongoing safe space and connection as required



11 Mental Health and the Military Experience Peer advisor perspective How can Peer Support help Brad specifically? (cont.) 3. Share relevant aspects of lived experience in an empathetic manner, and with a focus on de-stigmatisation, normalisation and self compassion. Allow Brad to determine which areas he feels most comfortable talking about. 4. Discuss the practicalities of living with mental illness and achieving meaningful recovery; with a focus on role modelling and finding hope, peace, purpose and pride in a new and different life. 5. Assist Brad to identify his strengths and find new ways to capture the "inner peace" he says he felt whilst serving. Focus on the areas he has identified – adrenalin rush, team spirit, sense of purpose, containment. Discuss alternative ways to achieve these things as a civilian and within current limitations. Recommend resources and services and provide ongoing connection and support as required.



Mental Health and the Military Experience

General Practitioner perspective
Ongoing GP Management

Regular reviews with adequate time to discuss management issues

Ensure that Brad's DVA entitlements are maximised

Encourage regular communication between all members of the treatment team

Consider case conferences to enable a collegial approach to treatment

Brad needs to be central in the management decision-making

Encourage social engagement



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Keys points from clinical presentation

Chronicity seems to be the key to Brad's presentation

Common for depression/helplessness to become dominant

Reflected in complaining he could not 'strike a blow'

He may have poor optimism for ever getting better

Characterised by lack of positive affect and positive events which can reinforce his sense of helplessness



