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**STATEMENT OF COMBINED ARMS BEFORE THE
VETERANS' AFFAIRS' COMMITTEE
U.S. SENATE
LEADING THE WAY TO COMPREHENSIVE
MENTAL HEALTH CARE AND SUICIDE
PREVENTION FOR VETERANS**

September 9, 2020

Chairman Moran, Ranking Member Tester, distinguished members of the Committee: Thank you for this opportunity to discuss the important topic on how communities leverage networks and systems to proactively improve access to quality mental health care and achieve greater outcomes to include the prevention of veteran suicide.

After serving in the government and veteran nonprofit space for over 20 years, and now as the CEO of Combined Arms, I am excited to report that in Texas, community collaboration with the VA has never been stronger. It's stronger because of the work of our local VHA and VBA leadership to understand the value that our 89 member agencies composed of state and local government agencies and vetted nonprofit organizations can serve as agile and effective force multipliers for VA programming and customer service statewide.

The Combined Arms Model

Dr. Richard Stone, Veterans Health Administration Executive in Charge recently stated *"We need to reconnect the veteran to the community around them."* By curating a coordinated service and backbone organization model, Combined Arms has always focused on the principles of **prevention**. We know that if we can ensure that services are accessed and delivered to



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veteran clients faster and more effectively while at the same time holding the agencies (our Member Organizations) accountable for that speed and efficiency of service, we will collectively be able to **prevent** unemployment and underemployment, substance abuse, family challenges, homelessness, criminal behavior, and most importantly suicide.

Combined Arms is a dynamic, ever-evolving collaborative impact organization that is using an innovative approach of technology and service delivery to disrupt the veteran transition landscape in Texas, the second largest and fastest growing population of veterans in the US. By providing a holistic online assessment that efficiently connects veterans to member organizations, Combined Arms is accelerating veteran transition in order to deliver maximum impact in Texas. Combined Arms operates its collaborative system through four major pillars:

1. Combined Arms serves as the Community Veteran Engagement Board (CVEB) for the Greater Houston and Gulf Coast Regions which represents 60 government and nonprofit organizations serving over 300,000 veterans and their families across 44 counties. We are connected to the other CVEBs throughout the state and region and consistently share best practices on how community-based nonprofits and state government agencies can proactively work with VA to more effectively engage veterans and ensure they seek care.
2. Combined Arms created a Salesforce-based integrated technology platform that ensures thousands of military veteran families coming to or living in Texas have access to 450+ customized resources provided by our 89 vetted member organizations. Combined Arms has flipped the accountability from the veteran to the service organizations through their unique data driven methodology.



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3. Combined Arms runs a co-working space for 89 government and nonprofit agencies that is centrally-located and creates intentional collaborative collisions for those professionals that serve military veteran families. The Combined Arms Center is also a single point of entry from transitioning service members, veterans, and their families.
 4. Combined Arms has developed an innovative marketing campaign that reaches further upstream to attract more military veteran families still on active duty or looking for their next opportunity in Texas. Combined Arms is serving the community by attracting more military talent to Texas as a means of economic development for our state.
 5. Combined Arms is recruiting, training, and deploying community leaders who have successfully made the difficult transition from military to civilian life to engage those veteran families still making the transition at the neighborhood level using our mobile app to connect them to the 450+ critically needed resources. This model not only positively activates hundreds of successful veterans to volunteer and make a social impact on our community but also ensures more veterans in transition have direct access to the resources provided by our member organizations.

These five pillars have effectively connected over 50,000 unique veteran clients to the 100,000+ resources provided by the 89 member organizations in the past ten years. It is self-driven by the veteran and custom-fit for their needs based on how they answer the assessment. Little effort is required on behalf of clients who may not yet be in crisis mode, unable to access other services, or unaware of services that exist. If a client reports a score less than 13 (out of a possible 25) from the World Health Organization wellbeing index or "WHO 5", then an alert is sent to the intake team for additional follow up on mental health. Every time a client returns to our system 15 days apart, the



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system automatically asks for an update on the WHO 5 and tracks the data so we can see trends of their responses. Similarly, if clients report being homeless or living in a shelter, then an alert is sent to the Intake Team for additional follow up and assessment to ensure the client is properly referred to vetted housing programs. The Intake Team provides ongoing follow up with veterans reporting they are homeless until permanent housing has been confirmed. The Combined Arms Intake Team is trained on STRONG STAR's [Crisis Response Plan](#) if they engage with clients demonstrating suicidal ideation.

The Combined Arms system actively prevents client re-traumatization, as pertinent information can be shared between the Combined Arms system and the member organization delivering services. Clients are not asked the same questions multiple times, thus reducing frustration and increasing speed and efficiency of service delivery. The standard procedure is that Combined Arms member organizations follow up with the referred client within 96 hours per the contract agreed upon, however the average response time across all 89 agencies is under 30 hours. All of the aforementioned components act as “prevention nudges” - minor yet impactful structural supports that keep clients engaged in care and community which are both preventative measures and facilitators of veteran health. Case progression is monitored by Combined Arms regularly to ensure that no clients are slipping through the cracks. Because of this experience, we firmly believe that suicide prevention lies in the ability to provide direct access to social services to the veteran as far upstream in their transition process as possible. If we can prevent unemployment and underemployment, substance abuse, family challenges, homelessness, and criminal behavior by accelerating veteran access to critically needed



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resources in a faster, more efficient way then we will prevent veteran suicides.

Additionally, complex problems like social isolation, access to quality mental health care, financial strain, and overcoming the stigma of asking for help can also be prevented by the combination of Combined Arms collaboration methodology and technology platform. **Community Leaders** are veterans and family members who have made the successful transition from military to civilian life and engage veterans and families at the neighborhood level through in-person and virtual events. These Community Leaders leverage the Combined Arms Mobile App (EchoLink) to ensure those still making that difficult transition have faster, more effective access to resources in real-time. These Community Leaders ensure there is **connectedness** in the veteran and family space across Member Organizations.

Combined Arms has collected service and resource demand by category from over 25,000 unique clients since 2017. The data has produced significant alignment with the Veteran Metrics Initiative (TVMI) findings that suggested four components of well-being:

1. Social relationships (social life + volunteer engagement)
2. Health (mental + life wellness)
3. Finances (financial + veteran benefits assistance)
4. Vocation (career and employment services + workshops)

VA Collaboration

Dr. Keita Franklin, the VA's Former National Director of Suicide Prevention also recently stated *"To save lives, VA needs the support of partners across sectors. We need to ensure that multiple systems are working in a coordinated*



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way to reach veterans where they live, work, and thrive.” Based on many research studies, we know that veterans who don’t access VA health and mental health care are much more likely to attempt and complete suicide. We also know that a majority of those veteran clients who access the 450+ resources provided by the 89 Member Organizations in the Combined Arms ecosystem also do not access VA care. In order to mitigate that deficit, Combined Arms partnered with the Veterans Health Administration and Veterans Benefits Administration to ensure more veterans had direct, accountable access to VA care when accessing our platform.

15 different VA programs and clinics have been assigned to work within the Combined Arms system ranging from the Post Deployment Clinic to Womens Clinic to the Mental Health, TBI and Benefits programs and other peer support or outreach programs. The objective is for the VA to utilize the Combined Arms system to refer veteran patients to vetted government and nonprofit agencies delivering social services not provided by VA directly. Similarly, other agencies can refer veteran clients into the VBA and VHA programs. Additionally, on a monthly basis, Combined Arms, VA, and many of our state government and nonprofit partners join forces on “VetConnect Days” to make VBA and VHA programs and care more accessible to veteran clients seeking services through the Combined Arms system. These events increase client enrollment into VA programs. Finally, through the work of the Governor’s Challenge and Mayor’s Challenge task forces, the Combined Arms Transition Center is a distribution site for gun locks from the VA.

In partnership with the CDC and the University of Texas at Austin, Combined Arms is leading an innovative project to develop research questions to analyze existing client data from our Salesforce platform. This work has led us to identify standardized assessment tools to understand the value of



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connection that is provided through Combined Arms resources in reducing risk factors for suicide. Through this research, we anticipate that the rate of suicide risk will be reduced because veterans and their families are able to obtain quality services and resources that address their essential services (food, housing, financial support) and obtain mental health and other supportive services as well as support for their employment goals.

In Texas, some of the few VA hospitals in the nation that work with local organizations like Combined Arms and the County Medical Examiner to track, analyze, and report veteran suicides in the regions they serve. For example, based on the data available to these partners, the Combined Arms team and VA partners discovered that approximately 65 veterans died by suicide in Harris County (Houston) - the fourth largest veteran population in the United States - last year. Their average age is 53 with the most vulnerable populations being the youngest and oldest generation of veterans, aged 25-33 and 65+ years. This data is important for Combined Arms partners to better understand what programs and services can be deployed to actively engage more at-risk clients and effectively ensure that the number of deaths by suicide each year continues to decline.

Conclusion

Combined Arms remains in constant communication with our member organizations and the community and provides real-time reports of incidents of veterans in crisis in need of outreach including via social media, suicides, and attempted suicides. The Combined Arms Intake Team will follow up, assess needs, and connect to appropriate partners including the VA who are notified in advance of the system referral regarding the severity of the situation to ensure immediate follow up by our partners. This innovative model can better prevent suicide if our member organizations are given the



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opportunity to provide direct access to social services to veterans as far upstream in their transition process as possible. If we can prevent unemployment and underemployment, substance abuse, family challenges, homelessness, and criminal behavior by accelerating veteran access to critically needed resources in a faster, more efficient way then we will prevent more veteran suicides in the communities veterans return to.

We support S.785 because our data shows that investing in communities, networks and systems like Combined Arms not only improves access to quality mental health care, prevents veteran suicide but most importantly saves lives. Thank you again for your consideration of this written testimony and for your continued service to our military veteran community.

Very Respectfully,

A handwritten signature in black ink, appearing to read "John Boerstler".

John Boerstler
CEO, Combined Arms



29°44'49.3"N | 95°20'54.3"W

