A Coalition Dedicated to Strengthening an Accessible, Seamless System of Support for Service Members, Veterans, Families, and Survivors in North Dakota
TABLE OF CONTENTS

DEMOGRAPHICS 1

EMPLOYMENT 3

HOUSING 4

BEHAVIORAL HEALTH 5
[mental health, substance abuse, suicide, traumatic brain injury,
ND Department of Corrections and Rehabilitation]

RESOURCE DIRECTORY 11

SOURCES 13

ABOUT ND Cares 14
“Suicides challenge military services”

“Veterans Officers Ask for Medical Services”

“Serving the military men and women after the fact”

“US Officials Launch New Strategy to Prevent Suicide”
“North Dakota National Guard soldier believed to have died by suicide during weekend training”

“New VA clinic in Williston helps to provide needs of area veterans”

Williston Herald

“Guard working to prevent suicides”

“Soldier’s Suicide Impetus for Effort”

“Event Helps Homeless and In-Need Veterans”
**Gender**

- **Female**: 8.9%
- **Male**: 91.1%

**Deployment**

**Deployed since 9/11**

[as of May 2012]

A total of **10,095 North Dakotans** have been deployed since 9/11.

- **Active Duty**: 6,763
- **Guard**: 2,958
- **Reserve**: 374

---

**Veteran Population by County**

- **56,770 Veterans in North Dakota**
- **11% of the population**

U.S. Census Bureau 2012 American Community Survey 1-Year Estimates

Department of Veterans Affairs, Office of the Actuary, Veteran Population Projection Model (VetPop), 2011 as of 9/30/2013
Number of ND dependents by age¹

- Age 0 - 5 = 3,251
- Age 6 - 19 = 6,495
- Age 20 - 29 = 4,285
- Age 30 - 65 = 6,129
- Age > 65 = 27

Military family life is characterized by unique demands.

- Separation
- Risk of injury or death of the service member
- Long work hours and shift work
- Frequent relocation
- Unique organizational culture and norms
- Family separations due to military deployments

Nationally, approximately 142,000 members of the U.S. Armed Forces (Active, Guard, and Reserve) are single parents of minor children.

¹U.S. Department of Defense, Department of Manpower Data Center. (Dependent Data as of August 2012) (Deployment Data as of May 2012)
Unemployment Rate of Veterans
18 Years and Over

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>United States</td>
<td>6.6%</td>
</tr>
<tr>
<td>North Dakota</td>
<td>3.2%</td>
</tr>
</tbody>
</table>

Unemployed Veterans in the US in 2013, by Age Category
(n=722,000)

- Ages 18-24: 5%
- Ages 25-44: 35%
- Ages 45+: 60%

Bureau of Labor Statistics

While most veterans transition back to civilian life successfully, many still struggle. Securing steady employment in a rewarding, lucrative and long-term career is an enormous part of a successful transition.

National Unemployment by Period of Service

Compared with other homeless adults, homeless Veterans are more likely to ...

- Have higher levels of education, military skills, and employment experience that may be transferable
- Have a mental illness, substance abuse and/or health problem such as HIV/AIDS, cancer, or hypertension
- Be living unsheltered and experience long-term homelessness
For the purposes of VA health benefits and services, a person who served in the active military service and who was discharged or released under conditions other than dishonorable is a Veteran.

For the purposes of VA health benefits and services, a person who served in the active military service and who was discharged or released under conditions other than dishonorable is a Veteran.

Nationally, about half of returning service members who need treatment for mental health conditions seek it, and slightly more than half who receive treatment receive adequate care.¹

¹ http://www.rand.org/content/dam/rand/pubs/research_briefs/2008/RAND_RB9336.pdf
Number of Veterans or Those Served in the Military Who Received Services from the Human Service Centers in North Dakota

On average, approximately 800 Veterans are served per year in the ND Human Service Centers.

National Primary Substance of Abuse in Treatment Admissions, Aged 21 to 39 [NATIONAL NSDUH, 2010]

<table>
<thead>
<tr>
<th>Substance</th>
<th>Nonveterans</th>
<th>Veterans</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td>34.4%</td>
<td>50.7%</td>
</tr>
<tr>
<td>Heroin</td>
<td>12.0%</td>
<td>12.2%</td>
</tr>
<tr>
<td>Other Opiates</td>
<td>16.8%</td>
<td>9.0%</td>
</tr>
<tr>
<td>Marijuana</td>
<td>17.6%</td>
<td>12.2%</td>
</tr>
<tr>
<td>Meth</td>
<td>7.6%</td>
<td>6.2%</td>
</tr>
<tr>
<td>Cocaine/Crack</td>
<td>7.2%</td>
<td>6.3%</td>
</tr>
</tbody>
</table>
Nationally, mental and substance use disorders caused more hospitalizations among U.S. troops in 2009 than any other cause. An estimated 1 in 4 (25-30%) of U.S. veterans of the wars in Iraq and Afghanistan have reported symptoms of a mental disorder or cognitive condition (post-traumatic stress disorder, major depression, traumatic brain injury, etc.).

Definition of Post Traumatic Stress Disorder (Mayo Clinic): mental health condition that’s triggered by a terrifying event — either experiencing it or witnessing it. Symptoms may include flashbacks, nightmares and severe anxiety, as well as uncontrollable thoughts about the event.

Nationally, approximately 19% of service members returning from Iraq or Afghanistan have posttraumatic stress disorder (PTSD) or depression.

Since the Global War on Terrorism began, more North Dakota National Guard members have died by SUICIDE than in COMBAT.

Percentage of Suicides Committed by Veterans in North Dakota

<table>
<thead>
<tr>
<th>Year</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>%</td>
<td>29.0</td>
<td>16.3</td>
<td>15.7</td>
<td>23.3</td>
<td>21.9</td>
<td>16.8</td>
<td>15.9</td>
</tr>
</tbody>
</table>

Many Factors Influence an Individual’s Likelihood To Develop a Behavioral Health Problem.²

The RISK FACTORS below are associated with a HIGHER likelihood of suicide and the PROTECTIVE FACTORS are associated with a LOWER likelihood of suicide.

### RISK Factors
- Some major physical illnesses, mental disorders, and substance use disorders
- Barriers to accessing health care
- Stigma associated with help-seeking behavior
- Easy access to lethal means (e.g., firearms or poison)
- Lack of social support and sense of isolation
- Cultural/religious beliefs that accept suicide

### PROTECTIVE Factors
- Effective clinical care for physical illnesses, mental disorders and substance use disorders
- Easy access to a variety of clinical interventions
- Support for help-seeking behavior
- Restricted access to lethal means (e.g., firearms or poison)
- Strong connections to family and community support
- Cultural/religious beliefs that discourage suicide

Traumatic Brain Injury (TBI) has become known as a “signature wound” of Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF), because the incidence of TBI is higher in these conflicts than it has been in previous conflicts.¹

About 1 in 5 service members, nationally, returning from Iraq or Afghanistan report experiencing a traumatic brain injury (TBI) during deployment².

From 2002-2010, 219 North Dakota OEF/OIF Veterans were diagnosed with TBI-related conditions at a VA facility.²

Nationally, three-quarters of VA patients with a TBI diagnosis also had a diagnosis of PTSD.³

³ Congressional Budget Office. (Feb 2012). The Veterans Health Administration’s Treatment of PTSD and Traumatic Brain Injury among Recent Combat Veterans.
1 in 10 (10.6%) male inmates in North Dakota has some history of military service. (1% of female inmates have some history of military service)

63 of the 141 male inmates have an honorable, medical, training, administrative, or general discharge status.

ND Veteran Inmates ➔

50.4% have an SUBSTANCE USE DISORDER diagnosis
14.2% have a serious MENTAL ILLNESS diagnosis

Military Branches Represented among Male Inmates

- Army 37%
- National Guard 25%
- Marines 15%
- Navy 15%
- Air Force 8%
- Coast Guard 0.7%
RESOURCES

National

www.warriorgateway.org

www.militaryonesource.mil

www.va.gov
Please note that definitions may be different based on the source of the data or information. For more information on this or other methodology questions, visit the selected websites below.

*US Department of Veterans Affairs*: National Center for Veterans Analysis and Statistics—www.va.gov/vetdata

United States Census Bureau: American Community Survey—www.census.gov/acs


Substance Abuse and Mental Health Services Administration: National Survey on Drug Use and Health—www.samhsa.gov/data/NSDUH.aspx
Strengthening an Accessible, Seamless Network of Support for Service Members, Veterans, Families, and Survivors

MISSION

ABOUT US
Coalition members share a common interest in strengthening a seamless, accessible network of support across the state. The coalition is not a service provider, but represents a broad spectrum of programs and providers whose work touches the lives of service members, veterans, families and survivors.

PRIORITIES

Behavioral Health is the focus of ND Cares, as these problems are far-reaching and exact an enormous toll on individuals, their families, communities, and the broader society.

ND Cares Goals:
* Conduct a comprehensive assessment of needs
* Integrate existing programs and resources to strengthen an effective and efficient system
* Develop a leader network to support collaborative efforts

ND Cares comprises a growing team of more than 40 military and civilian professionals throughout North Dakota.
For additional copies, contact:

North Dakota Department of Human Services
Division of Mental Health and Substance Abuse Services
Prevention Resource & Media Center (PRMC)
1237 West Divide Avenue, Suite 1D
Bismarck, ND  58501

Phone: 701-328-8919
Email: ndprmc@nd.gov
www.nd.gov/dhs/prevention