

# **Adapting the SAFE Program to the Needs and Preferences of Rural CBOC Providers, Veterans and Families**



**Michelle D. Sherman, Ph.D.  
SCMIRECC Advisory Board Meeting  
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# Investigators

- Ellen Fischer, Ph.D. – Little Rock epidemiologist (co-PI)
- Ursula Bowling, Psy.D. – OKC psychologist
- Russell Smith, Ph.D. – Wichita Falls CBOC psychologist (telepsychology provider)
- Peggy Hudson, Ph.D. – OKC psychologist (formerly Lawton CBOC)

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## VA's Uniform Mental Health Services Package (2008)

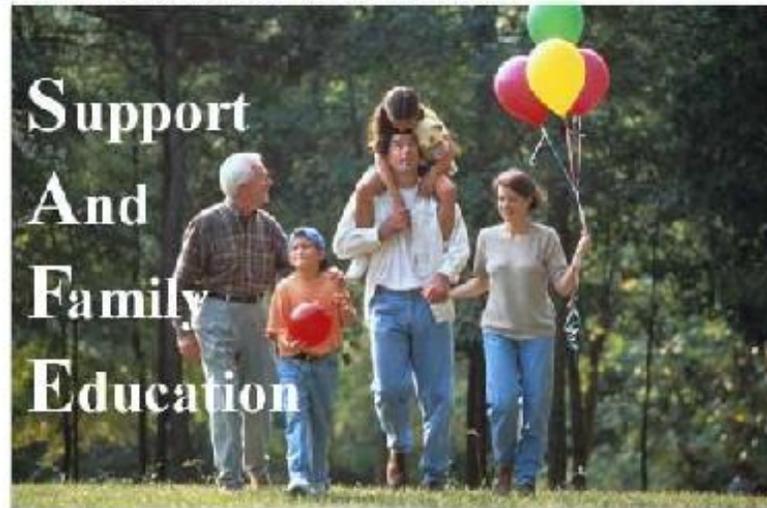
- “family consultation, family education, or family psycho-education...be provided for those who need them at all VA medical centers and very large CBOCs”

# SAFE Program

- Support And Family Education
- 18-session family education program for those who care about someone living with SMI/PTSD
- Originally funded by SCMIRECC clinical education grant (1999) and currently in its 3<sup>rd</sup> edition (2008)

- Selected as “Best Practice” by VACO and numerous trainings and ongoing consultations are provided
  - Strong interest by Local Recovery Coordinators
- As of mid-2010, approximately 50 VA medical centers are providing SAFE
- Entire curriculum is available for free download: [www.ouhsc.edu/SafeProgram](http://www.ouhsc.edu/SafeProgram)

***SAFE Program:  
Mental Health Facts for Families***



*18-session family education program  
for people who care about someone  
living with mental illness or PTSD*



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However, SAFE was developed and has primarily been provided in large, urban medical centers.



# Project Aims

- Assess organizational barriers and **mental health provider preferences** related to CBOC-based implementation of SAFE
- Elicit the perspectives of **rural veterans** living with SMI or PTSD and their **families** regarding family participation in SAFE, structural and cultural barriers to participation, and preferences regarding delivery
- Tailor SAFE and its implementation to meet rural needs

# Methods

- 5 one-hour **key informant phone interviews** with staff from 2 rural CBOCs (one small and one large)
  - 1 psychiatrist
  - 1 psychologist
  - 1 nurse
  - 2 social workers

# Interview Domains

- Knowledge/experience in providing family education
- Comfort/readiness to provide family education
- Desire for training/supervision
- Recommendations regarding how to engage families
- Perceived barriers to rural provision

- Six 90-minute **focus groups** (3 with veterans and 3 with family members) at 3 sites:
  - Large CBOC
  - Small CBOC
  - Medical Center (only for veterans who drive over 90 miles)

- 26 veterans
  - 96% male
  - Mean age of 56
  - 69% Caucasian
  - 77% self-report PTSD, 50% depression
- 23 family members
  - 96% female; 89% wives
  - Mean age of 54
  - 69% Caucasian



# Focus Group Domains

- Perceived appropriateness of family involvement
- Perceived benefits/drawbacks for veterans and family
- Preferences regarding program structure, e.g., modes of delivery, locations, logistical preferences (e.g., time of day)
- Perceived logistical barriers to family participation
- Recommendations regarding how to engage families

# Overview of Findings

- Rural veterans, families, and providers express strong interest in family services
- Desired content was not substantially different from that of urban families
- Barriers exist, but are not insurmountable

# Challenges and Suggested Solutions

- **Structural**
  - **Personnel**
  - **Space**
- **Logistics**
  - **Competing demands, transportation, time of day**
  - **Children / child care**
- **Rurality**
- **Attitudes and fears**

- Important needs include:
  - Dedicated clinician time
  - Clinic space
  - Preliminary training & ongoing consultation/support
  - Understanding of and a commitment to families living with mental illness/PTSD
  - Understanding of rural culture
  - Patience and perseverance

# Technology

- Almost all of our Veterans and families expressed strong preference for in-person services
  - Parallels findings from report by the National Alliance for Caregiving. (November 2010).  
Caregivers of veterans: Serving on the homefront.

# Products

- Implementation Toolkit Appendix on Provision in a Rural Area or VA CBOC
  - Addresses 6 key themes
  - Assists administrators and rural clinicians in anticipating barriers and brainstorming solutions to rural implementation
  - Available on SAFE Program website
- Webinar on our findings, toolkit, and available consultation