



OHIO NATIONAL GUARD STUDY

Ohio Army National Guard Mental Health Initiative

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Coordinating Principal Investigator

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Scientific Principal Investigator



University Hospitals
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TOLEDO
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Fort Detrick Meeting Attendees

- **COL Terry Rauch, PhD**
 - Director, Defense Medical Research and Development Program
- **Kelley Ann Brix, MD, MPH**
 - Deputy Director, Defense Medical Research and Development Program
- **CAPT Douglas Forcino, PhD**
 - Director, MOMRP
- **LTC Dennis McGurk, PhD**
 - Deputy Director, MOMRP
- **Ronald Hoover, PhD**
 - Psychological Health Deputy Portfolio Manager for PTSD
- **Katherine Nassauer, PhD**
 - Senior Scientist Psychological Health and Resilience, MOMRP
- **Joseph Calabrese, MD**
 - Coordinating Center Principal Investigator
- **Sandro Galea, MD, DrPH**
 - Scientific Principal Investigator
- **COL Julie Blike**
 - Deputy Commander Army Guard and Director, State Family Readiness and Warrior Support Programs
- **Richard McCormick, PhD**
 - Scientific Advisory Board Member

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Relevance of Fort Detrick meeting with Defense Health Program Leadership

- ONG's presence of strategic importance because it communicated that the ONG was committed to conducting research of national relevance to the NGB, not just Ohio.
- Through this project we have worked together to create is a clinical epidemiology platform capable of supporting broadly generalizable health services research of national relevance to the NGB.
- Ohio's commitment to identifying secondary projects of immediate relevance complements ongoing basic and pre-clinical MOMRP-funded research, without which the price tag of the Ohio platform would be unjustifiable.

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Feedback from Defense Health Program Leadership

- Ohio project remains a priority for MOMRP, now led by CAPT Doug Forcino, PhD, which resides within the DHP led by COL Terry Rauch, PhD.
- Although Wave 5 and the alcohol project have been funded, 'sequestration' remains a potential obstacle to the funding of waves 6 through 10.
- **DHP Director Special Requests to us:**
 - Assist DHP by promoting pragmatic contributions associated with the Ohio project to the US Congress.
 - Meeting with Congresswomen Nancy Pelosi (Speaker House) and Marcy Kaptur (House Appropriations) planned.

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Current OHARNG Value Added Project Spin Offs



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Spin Off Project #5 grant under preparation

Sexual Assault Has Become the #1 Priority for the Secretary of Army as of October 15, 2013

- 'Unit support' (Section F DRRI) was identified as being protective against the development of sexual harassment and assault.
- A pre-proposal to be submitted shortly that will propose an assault/harassment prevention strategy (BAA FY14).

Walsh et al. Unit Support Protects Against Sexual Harassment and Assault. Submitted to AJPH. Sample=those deployed from Waves 1 & 2; n=1674

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Update on Ancillary Projects

- Intervention for Alcohol Misuse: Submitted in 2013 and funded for start-up in 2014.
- Sexual Harassment and Assault submission in 2014 starting in 2015 if funded.
- Need to Begin Discussion of the 2016 project, which would have to be submitted late 2014/early 2015.

– WHAT FOCUS WOULD BE TIMELY IN 2016?

Back up slides

Funded Translational Project #4

Rationale for Alcohol Prevention Study Fred Flow, PhD and Joseph Calabrese, MD

- In 2006, alcohol misuse cost the DoD \$1.2b, 62% due to reduced readiness & misconduct charges.⁽¹⁾
- In 2012, we published data ⁽²⁾ suggesting deployment was linked to alcohol use.
- 12% of soldiers who did not report an alcohol use disorder prior to deployment were now reporting one for the first time that occurred during deployment or post deployment, and this was accompanied by a 3-fold increase in suicidal ideation independent of depression.⁽³⁾
- After hearing this, Guard requested we develop an alcohol intervention for NG soldiers capable of being administered easily, inexpensively, confidentially, and internationally.

1. Harwood H et al. *Military Medicine*. Jul 2009;174(7):728-736. 2. Marshall B et al. *Drug and Alcohol Dependence*. 2012;124(3):193-199 (OHARNG). 3. Cohen G, et al. *Drug and Alcohol Dependence*. Under review (OHARNG).

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Specific Objectives-Alcohol Intervention

Objective #1

- Create a web-based & a text-based brief intervention based upon the Screening, Brief Intervention, Referral to Treatment (SBIRT) Model customized specifically for at risk drinking in NG culture.

Objective #2

- Randomize 'at risk' drinking soldiers to an online Tailored Web-based Intervention followed by twice Weekly Text Messages vs. required 2-hour annual NG alcohol module.

Objective #3

- Test whether the intervention vs. Enhanced Usual Care significantly decreased 'at-risk' drinking for NG members over 12-month follow up.

Modeled after Suffoletto Emergency Room Young Adult Study at Univ. Michigan. 2012.

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