The Department of Defense (DoD) engages in global health efforts with the goal of better supporting the global stability and security via building and supporting the health system capabilities and capacity of partner nations (PNs).

Despite examples of great success, lack of standardization in executing DoD global health engagement (GHE) operations, activities, and actions across DoD results in fragmented programs that may not fully develop health capacity or increase the capabilities of our PNs. Lack of standardization also makes it difficult for DoD and PNs to track progress toward meeting targeted objectives over time. Thus, a standardized GHE approach is essential to help meet the targeted objective over time.

Since 2011, the Psychological Health Center of Excellence (PHCoE), as the DoD sponsor of the International Initiative for Mental Health Leadership Military-Civilian Work Group, has worked to share operational, accessible practices for the delivery of mental health and addiction services across the globe for Service members and beneficiaries.

In 2017, PHCoE was invited to join the U.S. Army Regional Health Command-Pacific (RHC-P) GHE Team to develop a functional area playbook, titled "Behavioral Health (BH) Risk Prevention, Assessment, and Mitigation, Subject Matter Expert Exchange (SMEE)". As part of their 5-year global health engagement strategies, the purpose of this program is to exchange information and ideas with the participants in order to build U.S. and PN capacity to mitigate psychological health risks. The BH program is based on a 3-year period of engagement with each PN:

**Background**

**Methods**

PHCoE has developed standardized curriculum and assessment scorecard, and has created courses to bridge existing gaps in PN knowledge where they are identified. Course content remains flexible to meet PN requests and needs identified during pre-visit conference. The content of the three behavioral health SMEE building blocks:

1. Leverage existing PHCoE, Army, Air Force, Navy, Marine Corps, National Center for Posttraumatic Stress Disorder, and Center for Deployment Health Psychology training materials while incorporating current science
2. List various courses and modules to include didactic, scenario-based practice exercises, facilitated discussions and applications, and other available resources for the host nations

The SMEE team applies assessment, monitoring, and evaluation methods to evaluate the effectiveness of the program (pre- and post-exchange of knowledge assessments as well as at least one follow-up assessment of knowledge) and the impact of the BH GHE in support of PN capacity-building.

**Results**

In April 2018, the U.S. Army RHC-P GHE Team, Pacific Air Force Command, and PHCoE, along with the Uniformed Services University of the Health Science Center of GHE, applied the BH functional area playbook in the four-day SMEE engagement in Kathmandu, Nepal. A team of six US SMEs and 23 Nepal SME delegates participated in this inaugural engagement. Clinical and operational experiences were exchanged to include topics on:

- Psychological first aid
- Suicide prevention
- Integration of mobile applications in behavioral health care
- Alcohol and substance use problems
- Child and adolescent psychiatry
- Stigma and barriers to care
- Nepalese United Nations missions.

Assessment was completed pre- and post-exchange to evaluate the effect of health engagement on US military personnel’s readiness and benefit and Nepalese’ medical knowledge relating to BH, and the results indicated improvement of clinical and non-clinical skills that helps to increase force health protection and enhance military readiness.

**Conclusions**

Using a standardized approach will allow the GHE team to objectively measure effectiveness of targeted objectives overtime and to fill a gap in global behavioral health engagement. Additionally, the SMEE helps to strengthen behavioral health capability and professional relationships between the U.S and PNs, and enhance personnel readiness for both U.S and PNs.

**Next Steps for Engagement with Nepal**

- Continue to assess capability and capability following 2018 BH SMEE engagement and prepare for 2019 BH SMEE
- Continue to work with Nepalese Army to develop policies and programs to reduce stigma and barriers to BH care
- Develop standardized training programs for leaders, general medical officers, nurses, and health medical assistants
- Share US alcohol and substance assessment and treatment programs
- Leverage technology for tele-behavioral health
- Share US combat and operational stress control programs and activities
- Invite Nepalese counterparts to participate in the International Initiative for Mental Health Leadership

**References**