



Defense Centers of Excellence  
for Psychological Health and Traumatic Brain Injury  
**2016 ANNUAL REPORT**



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## MISSION

The mission of the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE) is to improve the lives of our nation's service members, veterans and their families by advancing excellence in psychological health and traumatic brain injury prevention and care.

## VISION

To be the leader of profound improvements in psychological health and traumatic brain injury prevention and care.

## VALUE

DCoE is uniquely positioned to collaborate across the Department of Defense, Department of Veterans Affairs (VA), and other agencies to provide leadership and expertise, drive policy, and achieve improvements in outcomes. Specifically, DCoE provides value to stakeholders by embodying the following tenets of the DCoE Value Proposition:

**Quality:** Identifies, prioritizes and translates evidence-based practices and research into clinical standards, thereby improving quality and increasing efficiency in health care delivery across the continuum of care.

**Treatment and Outcomes:** Develops Military Health System psychological health and traumatic brain injury (TBI) metrics, pathways of care, clinical tools, and other products that benefit providers, service members, veterans and families to improve understanding and treatment.

**Research and Evaluation:** Provides Military Health System leaders with focused analyses, research and program evaluations to achieve the greatest return on investment. DCoE is responsible for creating, evaluating and integrating psychological health and traumatic brain injury practices and policies across the services.

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# DIRECTOR'S LETTER

Dear Stakeholders,

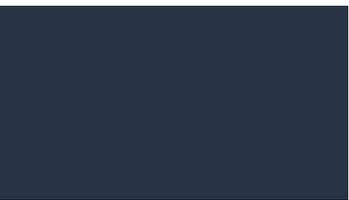
I am proud to present the 2016 Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE) Annual Report. Now in its tenth year, DCoE identifies gaps in clinical practice and prioritizes needs in psychological health and TBI research. Our knowledge translation efforts focus on development of a systematic approach to translate research into programs, provider education products, clinical tools, and policies that improve health care across the Military Health System (MHS).

The year 2016 was a pivotal one as we made the transition to the Defense Health Agency (DHA) from the U.S. Army Medical Research and Materiel Command, facilitating our ability to collaborate with the services as we became part of a combat support agency. Among DCoE milestones and achievements last year:

**New missions:** In 2016, DCoE assumed policy execution and program responsibility for the DHA's equities in three new health care missions: substance use disorder, combat and operational stress control, and suicide prevention. In assumption of these equities, DCoE serves as the Defense Department subject matter expert for all substance use disorder and non-substance related addictive disorders, is responsible for integrating and coordinating combat and operational stress control policy across the MHS, and is the DHA representative to the Defense Suicide Prevention Office.

**Opioid Prescriber Safety Training:** DCoE is leading the Defense Department response and implementation of training requirements established in the Presidential Memorandum on "Addressing Prescription Drug Abuse and Heroin Use."

**Emphasis on faster "bench-to-bedside":** DCoE supports DHA in developing a system to reduce the time it takes for research innovations to make their way into clinical practice in the MHS. Last year, DCoE completed a standardized knowledge translation process to serve as a foundation for this knowledge transfer using rigorous, scientific best practices across the field of knowledge translation. Each step of the standardized process can be tailored to incorporate the current processes MHS organizations are using to translate research to practice. Our Departments of Defense and Veterans Affairs Practice-Based Implementation Network also supports the services to more rapidly translate



research into clinical practice across the enterprise. DCoE also is developing processes to facilitate strategic planning, development, and execution of psychological health and TBI research initiatives through coordination with extramural stakeholders.

**Increased support for transitioning service members:** All service members receiving mental health care who move from the Defense Department to the Department of Veterans Affairs health care system are now automatically enrolled in inTransition, a DCoE program that supports service members by providing global, specialized, telephonic transition coaching to facilitate the connection to a new provider.

**Advances in TBI treatment:** DVBIC released a clinical recommendation, “Management of Headache Associated with Concussion/Mild TBI,” which provided state-of-the-science information to support the diagnosis, evaluation and treatment of post-traumatic headache, and published results of the “Study of Cognitive Rehabilitation Effectiveness (SCORE) for Mild TBI” in the Journal of Head Trauma Rehabilitation.

In reviewing this year’s report, I’m particularly pleased by how we are helping the MHS address some of its most significant challenges.

In 2017, we will continue to expand on our work. We are developing the processes and skills to identify evidence-based treatments and approaches by using rigorous and well-established methods to evaluate the state of the science on relevant treatments. The goal of these efforts is to promote evidence-based clinical policies, facilitate the implementation of effective treatments to improve the care of service members, and continue to identify gaps in clinical knowledge to promote future research investments.

I invite you to read the entire 2016 DCoE Annual Report for a complete picture of the overall progress that has been made in our understanding of psychological health and TBI conditions.

Navy Captain Mike Colston, M.D.  
DCoE Director

# AWARDS

**DCoE** Department of the Army Superior Unit Award: DCoE and centers  
League of American Communications Professionals Gold Award: 2015 Annual Report

**Real Warriors Campaign** Videographer Award Honorable Mention: Mobile App Public Service Announcement September 2015  
Videographer Award of Distinction: 1st Sgt. Simon Sandoval video profile  
Digital Health Award Bronze Award: Real Warriors Mobile App  
Digital Health Award Merit Award: Real Warriors Facebook Community  
Digital Health Award Bronze Award: Mobile App Public Service Announcement  
Hermes Creative Awards Platinum Award: Mobile App  
IAC Web Marketing Award: Best Military Website: [realstrength.realwarriors.net](http://realstrength.realwarriors.net)  
International Association of Business Communicators (IABC) Silver Quill Award: "5 Questions to Ask Your Health Care Provider" trifold  
MarCom Gold Award in Integrated Marketing: "I Can, I Will" mini-campaign

**National Center for Telehealth and Technology** Silver W3 Award, Mobile Apps/Sites for Health and Wellness: Breathe2Relax

# KEY DCoE EVENTS

- February 1992** Defense and Veterans Head Injury Program established; later renamed Defense and Veterans Brain Injury Center
- June 1994** Gulf War Health Center established; later renamed Deployment Health Clinical Center
- November 2007** Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury established
- January 2008** National Center for Telehealth and Technology established
- June 2008** Groundbreaking ceremony for National Intrepid Center of Excellence
- June 2010** Defense Department releases “Policy Guidance for Management of Concussion/ Mild Traumatic Brain Injury in the Deployed Setting”
- September 2012** DCoE and centers receive Defense Department Joint Meritorious Unit Award
- January 2013** Defense Department Directive designates DCoE a Defense Executive Agency under U.S. Army
- September 2014** Defense and Veterans Brain Injury Center designated Military Health System TBI Pathway of Care manager for clinical, research, education and training activities
- October 2016** DCoE and centers receive Department of the Army Superior Unit Award
- February 2016** DCoE moves to Defense Health Agency

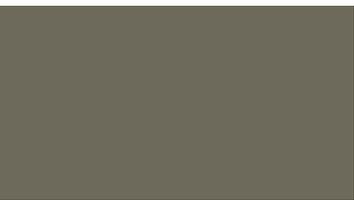
# DCoE HISTORY

As a result of recent conflicts, scientific advancements, and public awareness, the Defense Department has dedicated more resources than ever before in U.S. history to psychological health and traumatic brain injury (TBI) issues. Since 2000, physicians have diagnosed more than 170,000 service members with PTSD, and more than 350,000 have sustained a TBI. These injuries and the people dedicated to recovery ignited significant research and advancement of clinical care and prevention strategies.

Congress called for the establishment of DCoE in 2007 as the lead Defense Department agency responsible for the advancement of psychological health and TBI prevention and care in the MHS. The DoD/VA Wounded, Ill, and Injured Senior Oversight Committee, chaired by the deputy secretary of Defense and deputy secretary of Veterans Affairs, officially established DCoE in a memorandum dated Aug. 31, 2007. DCoE was charged with evaluating, integrating and promoting psychological health and TBI practices and policies across the services.

From the start, DCoE brought together existing centers with expertise in psychological health and TBI to form a collaborative and integrated framework. The original network of centers included the Center for Deployment Psychology, Center for the Study of Traumatic Stress, Defense and Veterans Brain Injury Center (DVBIC), and Deployment Health Clinical Center (DHCC). In addition to the existing centers, DCoE was involved in the creation of two new centers: National Intrepid Center of Excellence and National Center for Telehealth and Technology (T2).

T2 was created to develop, research, evaluate, standardize and deploy new and existing technologies to improve the lives of our nation's service members, veterans and families. The National Intrepid Center of Excellence, now part of the Walter Reed National Military Medical Center, was established to serve as the institute for complex, comorbid TBI and psychological health conditions within the MHS.



As the structure and capabilities of DCoE continued to evolve, so did its place within the MHS. On Jan. 23, 2009, under the authority of the deputy secretary of Defense, the undersecretary of Defense for Personnel and Readiness directed the establishment of DCoE as an operating entity in the TRICARE Management Activity.

The MHS Center of Excellence Oversight Board was established in April 2011, to provide policy guidance and oversight of all MHS centers of excellence, including DCoE.

Per the direction of the board, DCoE moved to the U.S. Army Medical Research and Materiel Command on Jan. 2, 2013. A Department of Defense Directive established the Secretary of the Army as the defense executive agency for DCoE and transferred control and organizational support for DCoE to the Secretary of the Army. The transfer included the three centers under DCoE headquarters: DVBIC, DHCC and T2.

On July 9, 2014, the deputy secretary of Defense approved the realignment of medical executive agent organizations to the Defense Health Agency. DCoE made the transition to the DHA on Feb. 12, 2016.

# DCoE CENTERS



## Defense and Veterans Brain Injury Center

Founded in 1992 as the Defense and Veterans Head Injury Program in response to the first Persian Gulf War, DVBIC is now the TBI operational component of DCoE. DVBIC's mission is to serve active-duty military, their beneficiaries and veterans with TBIs through state-of-the-science clinical care, innovative clinical research initiatives and educational programs, and support for force health protection services.

Twenty-five years later, DVBIC supports a network of 18 centers, operating out of 13 military treatment facilities and five VA polytrauma centers. Specific activities vary at each site. They include conducting research; helping service members, veterans and their families locate services; providing education in military and civilian settings; providing direct care to service members; and assessing TBI injury data.

The Defense Department has further solidified DVBIC's role by naming it the office of responsibility for these tasks:

- Manage the MHS TBI Pathway of Care to integrate TBI care capabilities
- Create and maintain a TBI surveillance database to describe the scope of the TBI issue
- Chair the chartered Neurocognitive Assessment Implementation Working Group
- Design and execute a 15-year longitudinal study of the effects of TBI in Operations Enduring and Iraqi Freedom for service members and their families
- Design and complete an independent head-to-head study to evaluate the reliability and validity of computerized neurocognitive tests
- Design and complete a study on the effectiveness of cognitive rehabilitation for mild TBI

## Deployment Health Clinical Center

DHCC was founded in 1994 at the Walter Reed Army Medical Center as the Gulf War Health Center. It was re-established with its current name in 1999 as one of three Defense Department centers of excellence for deployment health. For more than 17 years, DHCC provided direct specialty care and expert referral care for service members with complex deployment-related health concerns and consultation services for clinicians.

In 2008, DHCC became a DCoE center, and in 2012 it became the psychological health operational center for the organization. The mission of DHCC is to improve the lives of our nation's service members, veterans and families by advancing excellence in psychological health care and prevention of psychological health disorders.

DHCC's work is structured around five major focus areas:

- Develop and implement evidence-based treatments and clinical support tools to improve psychological health specialty care
- Promote a culture of support for psychological health by improving psychological health literacy, developing patient empowerment tools, encouraging help-seeking behavior and reducing barriers to care
- Conduct an integrated portfolio of psychological health research to improve the system of care, including identifying gaps and prioritizing needs, with a goal of translating research into clinical practice and improving patient outcomes
- Integrate behavioral health into primary care to improve early identification and treatment of psychological health concerns
- Provide program monitoring and evaluation services, and develop metrics and measures to inform performance, outcomes and health care utilization



## National Center for Telehealth and Technology

Established in 2008, T2 leads the innovation of health technology solutions to deliver tested, valued solutions that improve the lives of our nation's service members, veterans and their families. T2 leverages behavioral science and technology to optimize health care in the Defense Department.

The advanced health technology solutions of T2 are user-friendly, valued by our service members and cost-effective. These qualities align with the MHS goals to ensure readiness and population health, improve experience of care, and responsibly manage the total cost of health care. T2 also supports the Defense Department goals of increasing access to care, establishing best practices and quality standards for health technology and telehealth, and reducing both military suicide rates and the prevalence of stigma associated with seeking psychological health services.

T2 produces web- and mobile-based psychological health care resources and tools that support individuals whenever and wherever they need help. These resources are based on clinical evidence and developed in collaboration with other DCoE centers, the services, VA, academia and other government agencies. T2 develops its products with multidisciplinary teams of psychologists, software engineers and product managers.



# DCoE ACCOMPLISHMENTS

## CLINICAL ACTIVITIES

### “Big Data” Health Services Research

DCoE is developing the capability to access and maintain large health services surveillance datasets. The purpose is to conduct sophisticated health services and psychological health analytic modeling that can inform the scientific field and provide leadership with actionable recommendations to improve care within the MHS.

### Clinical Practice Guidelines and Tools

DCoE provides expert guidance and leadership to the VA/DoD Evidence-Based Practice Guideline Work Group, which develops clinical practice guidelines for psychological health and TBI treatment. Specifically, DHCC provided expertise to the revision of the clinical practice guideline for PTSD. DHCC and DVBIC produce clinical support tools to translate clinical practice guidelines so that providers, patients and their families can more easily understand the guidelines, including these tools in 2016:

#### Clinical Recommendations for TBI Headaches

DVBIC released a clinical recommendation, “Management of Headache Associated with Concussion/Mild TBI,” which provided state-of-the-science information to support the diagnosis, evaluation and treatment of post-traumatic headache.

#### Major Depressive Disorder

In partnership with the VA and the U.S. Army Medical Command, DHCC developed two clinical support tools: “Depression: Facts for Families,” and “Understanding Depression: A Resource for Patients.”

#### Substance Use Disorder

In partnership with the VA and the U.S. Army Medical Command, DHCC developed three clinical support tools to promote provider and line leader compliance with the “VA/DoD Clinical Practice Guideline for Management of Substance Use Disorders” and to inform military families about substance use disorder treatment. The tools are: “Medications for the Treatment of Alcohol Disorders,” “Substance Use Disorder Affects Families,” and “Substance Use Disorder: What Line Leaders Need to Know.”

## Combat and Operational Stress Control (COSC)

In September 2016, at the direction of DHA, DHCC assumed oversight of the COSC Working Group to ensure that service psychological health consultants meet to coordinate, develop and oversee implementation of COSC programs. DHCC facilitated the COSC Working Group kick-off meeting.

## Continuity of Mental Health Care

The Institute of Medicine report on Operations Enduring Freedom and Iraqi Freedom noted that service members transitioning from the Defense Department to the VA health care system encounter difficulties stemming from the complexity of both systems. The inTransition program supports service members who make a transition while receiving mental health care by providing global, specialized, telephonic transition coaching to facilitate the connection to a new provider. A 2014 Presidential Executive Action directed the Defense Department to automatically enroll all service members who received mental health treatment within 12 months of separation. DCoE is in the process of coordinating a DHA procedural instruction.

## Defense Department Health Care Provider Response Resource for Management of Patients Disclosing Sexual Assault/Sexual Harassment

In coordination with Defense Department Psychological Health Council Sexual Assault Advisory Group, Health Affairs Women's Issues Work Group, DoD Sexual Assault Prevention and Response Office, DoD Family Advocacy Program and the Services, DHCC refined and released a resource to enhance quality of care provided to patients who disclose sexual assault or harassment to health care personnel. "DoD Health Care Provider Response Resource for Management of Patients Disclosing Sexual Assault/Sexual Harassment" includes resources for health care providers, print resources to complete safety assessment and planning with patients, and handouts for patients on the health care process and available resources for victims of sexual assault. The resource package contained:

- Algorithms for Response Procedures
- Environment of Care Quick Reference Charts
- Sexual Assault: What to Expect Next
- Sexual Assault Health Care Support for Patients
- DoD Sexual Assault/Sexual Harassment Safety Assessment Worksheet: Health Care Provider Version
- Defense Department Sexual Assault/Sexual Harassment Safety Plan
- Defense Department Brief Sexual Assault/Sexual Harassment Safety Plan

## Expansion of Psychological Health Mission

On September 2, 2016, DCoE received a memorandum directing it to assume responsibility for DHA equities in the policy execution and programs for substance use disorder, combat and operational stress control, and suicide prevention.

## International Initiative for Mental Health Leadership

Sponsored by the Substance Abuse and Mental Health Services Administration, this initiative provides an international infrastructure to share innovative methods to deliver mental health services across countries and agencies, and encourages the development of organizational and leadership best practices. DCoE partnered with the Substance Abuse and Mental Health Services Administration to establish the Military Issues Work Group in 2011 to focus on challenges and service delivery mechanisms unique to mental health systems of care for military members and their families. The work group is a collaborative effort of scientists from Australia, England, Canada, New Zealand, Ireland, Scotland, Sweden and the United States. The work group selected as a common challenge the topic of how to provide support for the mental health needs of service members and their families who live in rural and remote areas. DCoE hosted three work group meetings in Silver Spring, Maryland, in 2016.

## Joint Incentive Fund 26 Project for Practice-Based Implementation Network Pilot

DHCC served as Defense Department lead from 2011 to 2014 for the Integrated Mental Health Strategy (IMHS) Strategic Action #26, which was initiated to more rapidly translate research into practice in both the Defense Department and the VA. The task group created a Practice-Based Implementation (PBI) Network pilot as a Joint Incentive Fund initiative between the Defense Department and VA from 2013 to 2015. The PBI Network consisted of 13 clinics and a web-based infrastructure. The PBI Network helped clinicians and managers to identify and overcome barriers to translating research into clinical practice; improve dissemination, implementation and evaluation of evidence-based treatments; and facilitate effective clinical practice changes across the enterprise and between departments. The PBI Network pilot concluded in 2015. In March 2016, the Defense Department Mental Health Work Group endorsed the recommendation for DHCC to retain operational responsibility and sustain the PBI Network across the Defense Department. VA committed to sustain the PBI Network via the National Center for PTSD. Per the approved process for sustainment, the PBI Network developed a revised “Provider Needs Assessment” in 2016 to identify gaps in mental health research, programs and policies via input from clinicians. The data from the assessment will be incorporated into the PBI Network Practice Change Prioritization Work Group to identify pilots for enterprise translation in subsequent years.

## Program Evaluation and Improvement

DCoE leads the first comprehensive, enterprise-wide analysis of the effectiveness of psychological health and TBI programs. The initiative is valuable to the Defense Department because it enables continuous improvement, helps achieve better service quality and outcomes, and provides information to improve fiscal accountability. By routinely assessing program quality and performance, the Defense Department promotes a culture of effectiveness that better addresses the needs of service members and their families. DCoE conducted 61 program evaluations using a standardized protocol and 36 education, training and consultation events. Program points of contact reported 100 percent satisfaction with site visit activities on feedback forms.

## Psychological Health Clinical Surveillance and Medical Intelligence

During 2016 DHCC significantly expanded its psychological health surveillance and intelligence capabilities through deployment of new staff, equipment and software. DHCC also gained access to new data repositories. As a result, metrics were developed, established and used to report on the prevalence of certain conditions and psychological health care utilization for general and specific mental health conditions. Additionally, DHCC undertook a medical intelligence inquiry to determine the rate of medication-assisted therapies for alcohol use disorders. A second medical intelligence inquiry was made to test modifications to a standard Healthcare Effectiveness Data and Information Set metric related to inpatient mental health discharges and outpatient follow-up care. DHCC efficiently conducted these analyses using in-house experts.

## Psychological Health Program Modeling and Assessment

DCoE continued to focus on providing high-quality monitoring and evaluation support to internal psychological health projects. DHCC helped monitor efforts related to practice fidelity of internal behavioral health consultants as part of the Primary Care Behavioral Health program. DHCC supported program evaluation and reporting for three Joint Incentive Fund projects, as well as a variety of smaller scale initiatives. DHCC deployed its Concept Approval and Project Review process, which ensures that internal project management best practices are incorporated into all DHCC projects and that evaluation considerations are addressed at every phase of the project design and implementation process.

## Screening Based Implementation Referral to Treatment (SBIRT) Pilot

This pilot program was a Defense Department PBI Network research translation initiative. The pilot was designed to ensure that effective psychological health evidence-based practices for alcohol misuse intervention get implemented in primary care settings. The PBI Network developed an implementation guide, a suite of SBIRT tools, and evaluation and monitoring plans to help MHS deliver high-quality alcohol screening and intervention. This includes administration of the Alcohol Use Disorders Identification Test—Consumption (AUDIT-C).

Between 2014 and 2016, three military treatment facilities piloted the SBIRT process. The sites included a joint clinic, an Army clinic, and an Air Force clinic. DHCC completed the SBIRT pilot in September 2016. Results indicated that the SBIRT model is feasible for Defense Department implementation. Findings also included the following recommendations to improve implementation:

- Conduct ongoing training on the process for new personnel
- Communicate frequently with site champions
- Plan for replacing staff to maintain continuity of the process
- Speed up the process supporting handoff between the primary care manager team and the alcohol use disorder treatment providers

## Substance Use Disorder Mission

Effective Sept. 2, 2016, DCoE began serving as the Defense Department substance use disorder and non-substance-related addictive subject matter expert. In this capacity, DCoE is responsible for interagency initiatives such as reports to Congress, responses to congressional inquiries, and tasks associated with the Interagency Coordinating Committee on the Prevention of Underage Drinking. DHCC is a member of the Health Executive Committee's Psychological Health Work Group and is co-chair and support to the Addictive Substance Misuse Advisory Committee, providing coordination, monitoring, implementation, and reporting on department-wide training on opioid prescription, substance use disorder treatment, medication-assisted treatment, and "Do No Harm" content. DHCC also provides information analysis and integration, program coordination, and problem-solving capacity to identify substance use and substance use disorder policies and to continue implementation of the Defense Department's Comprehensive Plan on Prevention, Diagnosis, and Treatment of Substance Use Disorder and Disposition of Substance Use Offenders in the Armed Forces.

## Suicide Prevention Programs and Policy

In September 2016, DHCC became the DHA liaison and representative for suicide prevention to the Defense Suicide Prevention Office. DHCC also serves as a primary representative for DHA to the Suicide Prevention and Risk Reduction Council. In this role, DHCC serves as the subject matter expert responsible for staff work on health care-related aspects of the department's suicide prevention policy and mission with Health Affairs/DHA leadership, the military services, and through the MHS governance process to optimize MHS mental health care.

DCoE supports Defense Department suicide-prevention efforts by continually enhancing the utility and quality of the DoD Suicide Event Report (DoDSER) Program. T2 manages the web application used by the services and writes a comprehensive annual report, which provides an inviolate and defensible analysis of yearly suicide data, absent editorial content or program commentary.

## TBI Advisory Committee

DVBIC served as a non-voting chair on the TBI Advisory Committee with the services and other stakeholders working on the TBI Pathway of Care, which maximizes warfighter and beneficiary outcomes, advances high clinical standards and decreases variances through continuous performance improvement.

## TBI Care Coordination/TBI Recovery Support Program

This program helped service members and veterans access TBI clinical care, supportive services, and information throughout the continuum of care. The program provided unique, long-term follow-up during all phases of care — including rehabilitation and reintegration — with service members and veterans who sustained a TBI. The program also provided ongoing services to caregivers and families. Recovery support specialists used a web-based data repository, the Wounded, Ill and Injured Registry, to measure and document recovery progress.

## TBI Clinical Care Support

Through a network of 15 military treatment facilities and five VA sites, DVBIC augmented staffing and informed best practices for care provision in the treatment of service members and veterans with mild, moderate, or severe TBI, from the moment of injury to return to duty or reintegration into the community. In 2016, DVBIC added TBI network sites at Fort Gordon, Georgia; Fort Drum, New York; and at the South Texas Veterans Health Care System in San Antonio. These sites help DVBIC spread the word among the military

community about the latest in TBI research and treatment. The additions put DVBIC at all five VA Polytrauma Rehabilitation Centers as well as high volume military treatment facilities.

## TBI Clinical Recommendations

DCoE evaluates TBI best practices and current state of the science, and provides clinical recommendations to the MHS. Since 2006, DVBIC has developed 13 clinical recommendations covering:

- Military Acute Concussion Evaluation
- Concussion management algorithms
- Cognitive rehabilitation
- Driving following TBI
- In-theater neurocognitive assessment tool testing
- Management of dizziness, visual dysfunction, and sleep disturbances
- Neuroimaging
- Progressive return to activity (for primary care managers and rehabilitation providers)

In February 2016, DVBIC released the most recent clinical recommendation, “Management of Headache Associated with Concussion/Mild TBI,” which provides state-of-the-science information to support the diagnosis, evaluation and treatment of post-traumatic headache.

## TBI Outcomes and Assessment

DVBIC worked with the services to identify patient-reported outcome measures that will support the clinical health outcome assessment of TBI clinical programs. In addition, DVBIC supported the evaluation of the Military Vestibular Assessment and Rehabilitation course, which was a partnership with the Hearing Center of Excellence.

## TBI Surveillance

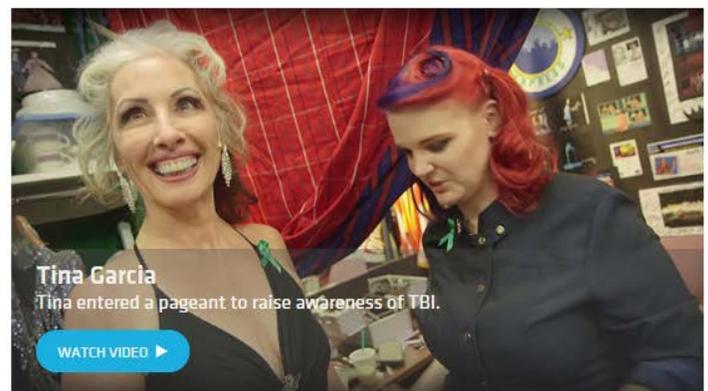
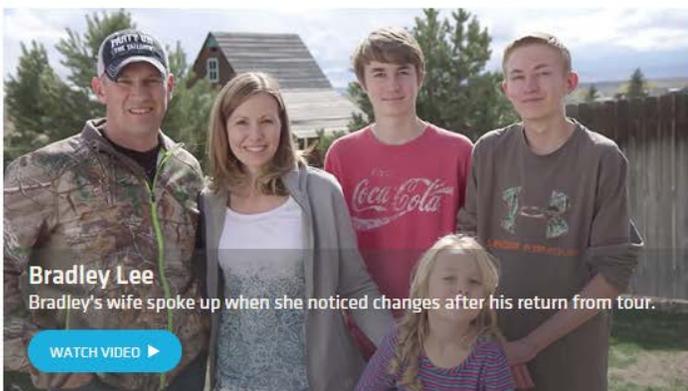
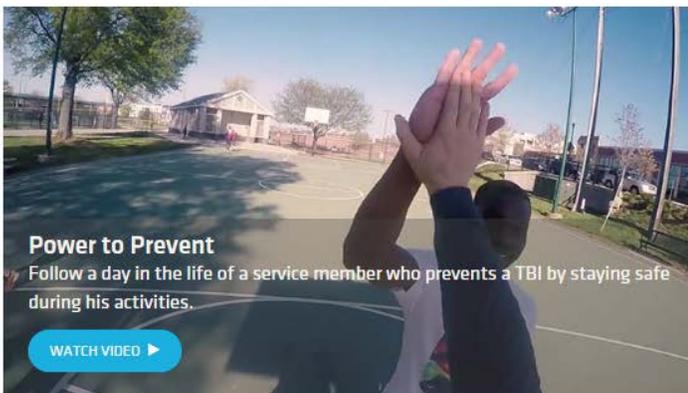
DVBIC serves as the Defense Department office responsible for tracking TBI data in the military, and works with Defense Department leaders to identify outcome measures appropriate for outcome assessment across the continuum of care. DVBIC tracked medical diagnoses of TBIs that occurred anywhere U.S. forces were located; posted quarterly worldwide numbers for TBI on its website; and provided updated TBI-relevant data regarding severity and location of injury and type of care (purchased versus direct, inpatient versus outpatient). This service helped to describe trends in TBI care that can inform resource-management decisions across the MHS.

# EDUCATION

## A Head for the Future

This public awareness initiative leverages social media to help service members, their families and veterans become aware of the signs and symptoms of TBI; encourages them to seek medical attention when needed; and fosters safety precautions to prevent TBIs. The campaign uses the DVBIC website as a primary communication channel. In 2016, A Head for the Future:

- Produced six new “TBI Champion” video segments
- Achieved more than 46,000 TBI Champion video views
- Reached more than one million (1,038,895) unique individuals on Facebook, with total daily impressions over 2.3 million
- Gained more 1,800 followers and more than 2.4 million total impressions on Twitter
- Distributed 19,118 materials, including postcards, tip sheets and posters
- Secured 41 news stories via the satellite media tour and distribution of news releases and pitches



## Behavioral Health Technology Community of Practice Training

T2 offered eight community of practice meetings to provide training to 369 military providers on the core competencies for integration of technology solutions in clinical care.

## Brain Injury Awareness Month Activities

The DVBIC network conducted 481 education, outreach and training events related to TBI in March 2016, reaching a total audience of more than 99,303 stakeholders (a 58 percent increase from last year). DVBIC conducted a satellite media tour, consisting of 14 television interviews and 10 radio interviews, which resulted in more than 338,000 television interview impressions and more than 5.3 million radio interview impressions. DVBIC staff participated in Brain Injury Awareness Day on Capitol Hill on March 16. DVBIC's A Head for the Future initiative launched its first hashtag campaign, #ThinkAhead, for Brain Injury Awareness Month and had the second largest voice within all brain injury discussions on social media during March. Twenty-six percent of mentions came from verified military or federal social media accounts and influencers, and conversation surrounding the #ThinkAhead campaign was 95 percent positive.



## Chaplains Working Group

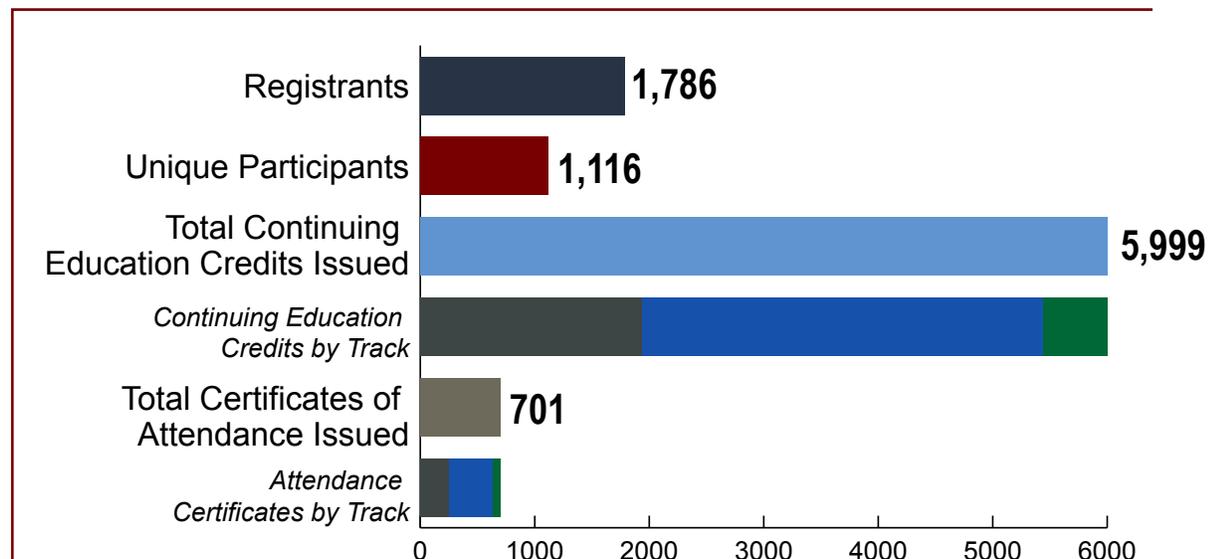
This program provided Defense Department and VA chaplains information and resources regarding psychological health and TBI with a spiritual focus. Participants discussed needs, concerns, and suggestions for counseling our nation's service members and veterans. DHCC conducted six webinars to train 446 participants.

## 2016 DCoE Summit “State of the Science: Advances, Current Diagnostics and Treatments of Psychological Health and Traumatic Brain Injury in Military Health Care”

DCoE hosted a two-and-a-half-day summit for psychological health and TBI education that brought together more than 1,116 Defense Department and VA health care providers. DCoE offered a limited in-person option for participation as well as a virtual component through Adobe Connect to allow individuals from locations around the world to participate.

- Registration and attendance: 1,786 registrants and more than 1,116 unique participants
- Total continuing education credits issued: 5,999 (1,938 credits were for the psychological health track; 3,499 credits for TBI track; 562 credits for global evaluation)
- Total certificates of attendance issued: 701 (247 credits for psychological health track; 387 credits for TBI track; 67 credits for global evaluation)

### 2016 DCoE Summit: By the Numbers

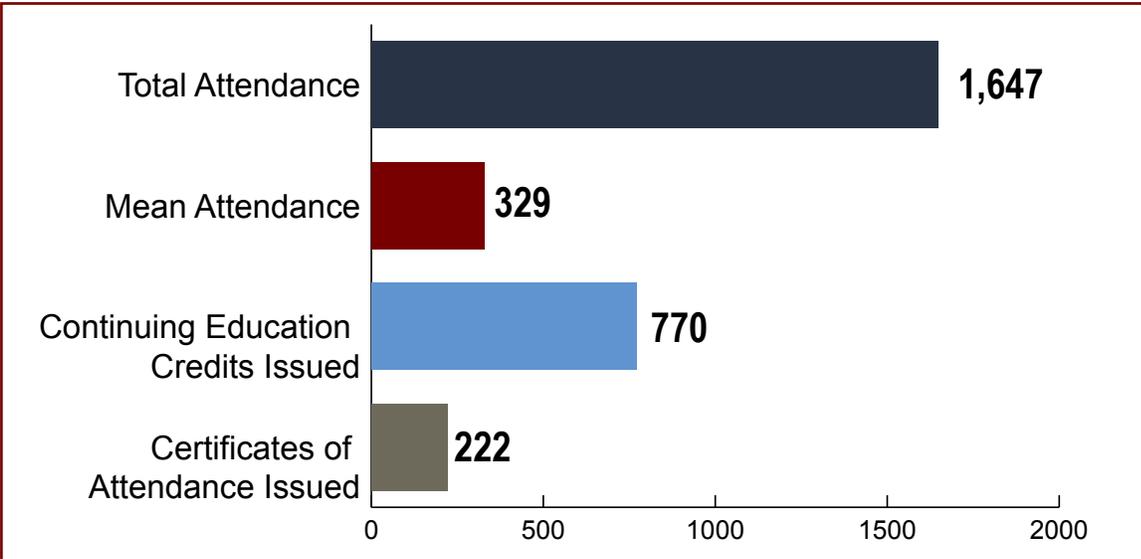


# Defense Suicide Prevention Office (DSPO)/VA Webinar Series

DSPO and the VA began collaborating with DCoE on their webinar series in February 2016. The purpose of the DSPO webinars is to review the rationale and evidence to support a public health, community-focused approach to suicide prevention; demonstrate the importance of using a prevention science framework to guide and implement suicide prevention efforts; and to describe how a population-wide suicide prevention strategy can leverage an entire community to prevent suicide. DCoE conducted four webinars and one enduring event for DSPO and VA.

- Total webinar attendance: 1,647
- Mean webinar attendance: 329
- Total continuing education credits issued: 770
- Total certificates of attendance issued: 222

## *DSPO/VA Webinar Series: By the Numbers*



## Early Intervention Training PowerPoint Slides

DHCC developed master training slides for nonmedical providers in the Defense Department on select psychological health topics. The content was derived from a current review of the literature on topics related to early intervention and prevention of mental illness, and of relevance to suicide prevention strategies. These scientific efforts support the identification and dissemination of evidence-informed prevention strategies.

## Health Care Provider Training on Sexual Assault Response

DHCC developed training for all health care providers about compassionate, gender-responsive, evidence-based care for patients who disclose sexual assault. This training course will pilot at Madigan Army Medical Center in 2017.

## History Program

The DCoE history program maintains the institutional memory and legacy of DCoE. The program supports the agency with historical research, reference, education and outreach services. The historian is responsible for collecting, archiving and preserving the history of DCoE, and provides resources to include historical knowledge, oral history, teaching, documents, publications and special projects.

In 2016, the DCoE historian produced three external conference presentations, two internal presentations, an article and a book chapter. Topics covered include:

- Government-sponsored longitudinal traumatic brain injury studies following the Korean War
- 20th century military investigations into service member suicide and the creation of the Department of Defense's Suicide Event Report
- Collaborative approaches to mental health and TBI between the Defense Department and VA post-Vietnam
- Changes in Defense Department psychological health policies following Vietnam
- Several studies on the agency's historical precursors and their influence in current DCoE and component centers' policies, programs, mission, vision and goals

## **Implementation Science Brown Bag Series**

DHCC offered six informal brown bag sessions to DCoE staff last year to foster learning, provide information and facilitate discussion on a variety of topics related to implementation science. Outside experts presented implementation science journal articles either virtually or in-person during the lunch hour.

## **Joint Incentive Fund (JIF) 1 Project “Improving Patient-Centered Care via Integration of Chaplains with Mental Health Care”**

This DHCC project trained Defense Department and VA chaplains and mental health providers in systematic integration of care, created best practices for 22 chaplains and mental health providers, and improved assessment and charting of spiritual distress and growth. Seven Defense Department and seven VA teams, consisting of at least one chaplain and one mental health provider, participated in learning collaboratives. The original project, funded from 2013 to 2015, was extended for 2016. Defense Department and VA chaplains registered for the extended training event. Eighteen Defense Department chaplains attended a year-long intensive training, including three two-and-a-half-day face-to-face sessions.

## **Joint Incentive Fund (JIF) 7 Project “Problem Solving Training for Behavioral Health Clinicians”**

DHCC trained 241 providers in behavioral health specialty clinics and primary care settings across the Defense Department and VA. Program goals were to facilitate access to mental health-related services, train staff to provide high-quality evidence-based care, support long-term dissemination and implementation of problem-solving training, promote consistent standards of care, help service members and veterans understand and change emotional stress responses, minimize effects of distress, and improve patient quality of life. Potential follow-on initiatives include training chaplains and behavioral health technicians.

## Journal Club

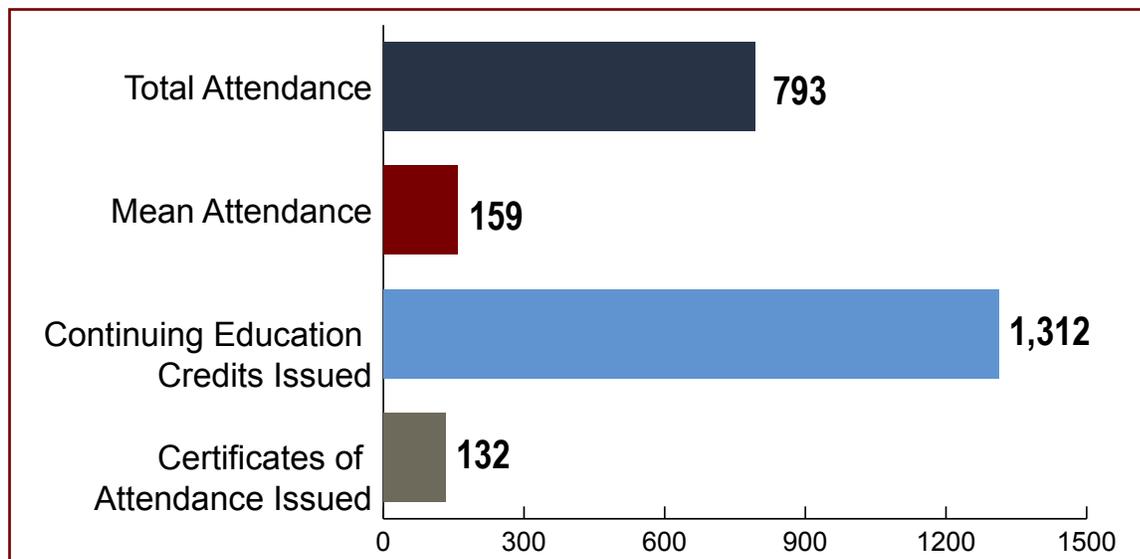
DHCC offered six Journal Club events to the DCoE staff to discuss recent psychological health research publications, and to facilitate discussion on a variety of topics related to psychological health. Journal article authors presented their publications and discussed findings and theories with attendees.

## Military Health System Speaker Series

DCoE began collaborating with the MHS to conduct its Speaker Series beginning in January 2016. The series aimed to drive performance by sharing knowledge and best practices across the MHS. Attendees were able to apply the information learned during the speaker series to the work they do for the MHS in support of newly established DHA objectives. DCoE conducted three live events and three enduring events.

- Total webinar attendance: 793
- Mean webinar attendance: 159
- Total continuing education credits issued: 1,312
- Total certificates of attendance issued: 132

### *MHS Speaker Series: By the Numbers*



## Office of the Assistant Secretary of Defense for Manpower and Reserve Affairs (M&RA) Brown Bag Series

DCoE began collaborating with M&RA to support its Brown Bag series in March 2016. The purpose of the events was to offer general interest training and educational opportunities that enhance the professionalism and career development lifecycle of military and civilian personnel within the M&RA portfolio. DCoE conducted four events attended by 474 people.

## Primary Care Behavioral Health (PCBH) Education and Training

DHCC supports the tri-service PCBH program, creating and delivering training and other implementation support for PCBH staff in multiple venues. During 2016, DHCC trained 166 PCBH staff who were new to their roles in the Defense Department. DHCC also collaboratively developed and implemented recommendations for changes to PCBH electronic health record documentation practices.

## Real Warriors Campaign

The Real Warriors Campaign is a multimedia public health awareness initiative designed to reduce barriers to care, encourage service members, veterans and military families to seek care for psychological health concerns, and promote psychological health. Under direction of DHCC, the campaign strives to increase health literacy, educate and reduce misperceptions about psychological health conditions and care, foster a culture of support for psychological health, improve support systems, and empower behavioral changes. The following metrics reflect the campaign's continued and expanding outreach:

- Increased social media interactions and mentions by more than 508 percent with online audiences engaging with the campaign an average of 3,190 times every day
- Reached more than 2.7 million unique individuals on Facebook, Twitter, YouTube and Scribd
- Achieved more than 2,300 downloads of the Real Warriors mobile application
- Fulfilled 285 orders for more than 197,000 materials for various organizations including the 345th Combat Support Hospital, the Naval Hospital Deployment Health Center and the Pennsylvania Army National Guard

- Interacted with more than 2,000 individuals and distributed more than 9,500 materials at 17 events nationwide
- Earned 61 media clips garnering more than 123 million media impressions and proactive media outreach efforts reached a potential audience of more than 130 million across 16,953 outlets

# REAL WARRIORS ★ REAL BATTLES

# REAL STRENGTH

Home | About Us | Partners | Resources | Videos | Get Involved | Press Room | The Wall

SEARCH :  GO

Invisible wounds – you don't have to go it alone

ACTIVE DUTY ★ NATIONAL GUARD & RESERVE ★ VETERANS ★ FAMILIES ★ HEALTH PROFESSIONALS

FEATURED VIDEOS



**Real Warriors and Psychological Health**

Warriors train their bodies to build physical strength and resilience. To be at peak performance, though, it is equally important to use available tools and resources...

Reaching out makes a  
REAL DIFFERENCE

SHARE  
YOUR STORY

FEATURED CONTENT

- ▶ [Dealing with Depression: Symptoms and Treatment](#)
- ▶ [Maintain Family Strength When Both Parents Deploy](#)
- ▶ [The Role of Family and Loved Ones in Substance Misuse](#)

>> [Read More](#)

DCoE OUTREACH CENTER

For information and resources  
866-966-1020

MILITARY CRISIS LINE

For crisis intervention  
800-273-8255, press 1



FIND CARE

SEEK HELP

LIVE CHAT

- ▶ GET EMAIL UPDATES
- ▶ LINK TO US
- ▶ PODCASTS

CAMPAIGN MATERIALS



DOWNLOAD OR ORDER ONLINE

MESSAGE BOARDS



REAL WARRIORS APP

Available on
Get it on

realstrength.realwarriors.net

ABOUT US	Popular Topics	IN THE NEWS
<p>The Real Warriors Campaign is an initiative launched by the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE) to promote the processes of building resilience, facilitating recovery and supporting reintegration of returning service members, veterans and their families.</p> <p style="font-size: x-small;">&gt;&gt; <a href="#">Read More</a></p>	<p><a href="#">reintegration resources</a> <a href="#">relationships coping with stress</a> <a href="#">combat stress</a> <a href="#">resilience deployment medical/health preparing for deployment</a> <a href="#">total force fitness veterans benefits military transition</a> <a href="#">suicide prevention resources for leadership</a> <a href="#">substance abuse</a> <a href="#">chaplain parenting depression</a> <a href="#">psychological health</a> <a href="#">technology ptsd get involved employment</a> <a href="#">thanking service members</a></p> <p style="font-weight: bold; font-size: small;">Active Duty National Guard &amp; Reserve Veterans Families Health Professionals Real Warriors Campaign</p>	<p><a href="#">Pedaling with purpose: veterans bike Peninsula on awareness tour</a>, WY Daily, 6/5/2017</p> <p><a href="#">Myrtle Beach Aquarium offers a form of therapy for vets battling PTSD</a>, The Post and Courier, 6/5/2017</p> <p style="text-align: center; font-size: x-small;">&gt;&gt; <a href="#">Read More</a></p>

## TBI Grand Rounds Series

In collaboration with VA, DVBIC began the TBI Grand Rounds quarterly series in September 2014 to support health care providers with education, clinical training, and research related to novel techniques and best clinical practices in the treatment of patients with TBI. The program provided training to support an integrated approach to TBI patient care for service members and veterans. In 2016, DVBIC conducted four events and trained 314 providers.

## TBI Regional Education Coordinator Program

The DVBIC network uses a regional approach to education by providing each military treatment facility and VA facility in the system of care with state-of-the-science educational products and outreach efforts through the work of regional education coordinators. Coordinators provided TBI educational outreach to more than 275,000 providers, service members, family members and veterans. Additionally, 166 in-person training briefings were conducted to 14,120 service members and military and civilian health care providers.

## TBI Caregiver Support

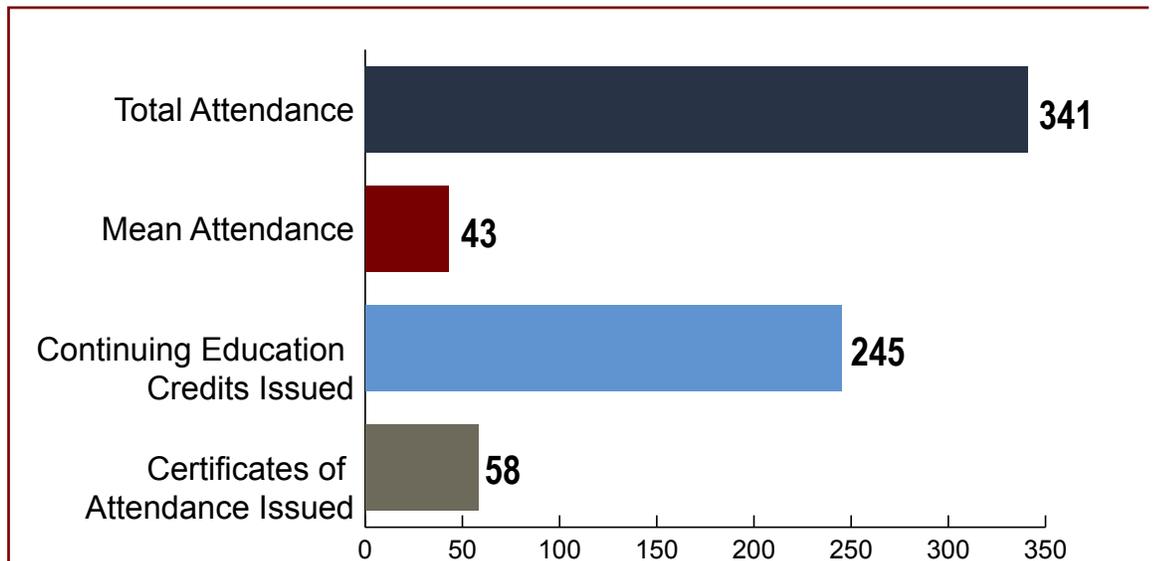
To support military and veteran caregivers and help drive their recognition, appreciation and empowerment, DVBIC partnered with the Elizabeth Dole Foundation. This partnership advanced DVBIC's "A Head for the Future" public awareness initiative, as well as the production of a series of caregiver podcasts that DVBIC will produce and release in 2017. The director of DVBIC, Army Col. (Dr.) Geoffrey Grammer also spoke at an Elizabeth Dole Foundation Hidden Heroes Campaign event about the future needs of military caregivers. In addition, DVBIC's congressionally mandated research on long-term TBI outcomes is generating an extensive amount of information about caregiver needs and challenges.

## Technology Education and Training for Providers

T2 began its workshop series in April 2015 as part of its enhanced training and education program. The series provides a unique educational opportunity as the only comprehensive training curriculum for integrating technology into clinical practice. The workshop contributes to the dissemination of T2 products and the transfer of knowledge into clinical practice for MHS. T2 conducted six workshops in 2016.

- Total workshop attendance: 341
- Mean workshop attendance: 43
- Total continuing education credits issued: 245
- Total certificates of attendance issued: 58

### *T2 Workshops: By the Numbers*



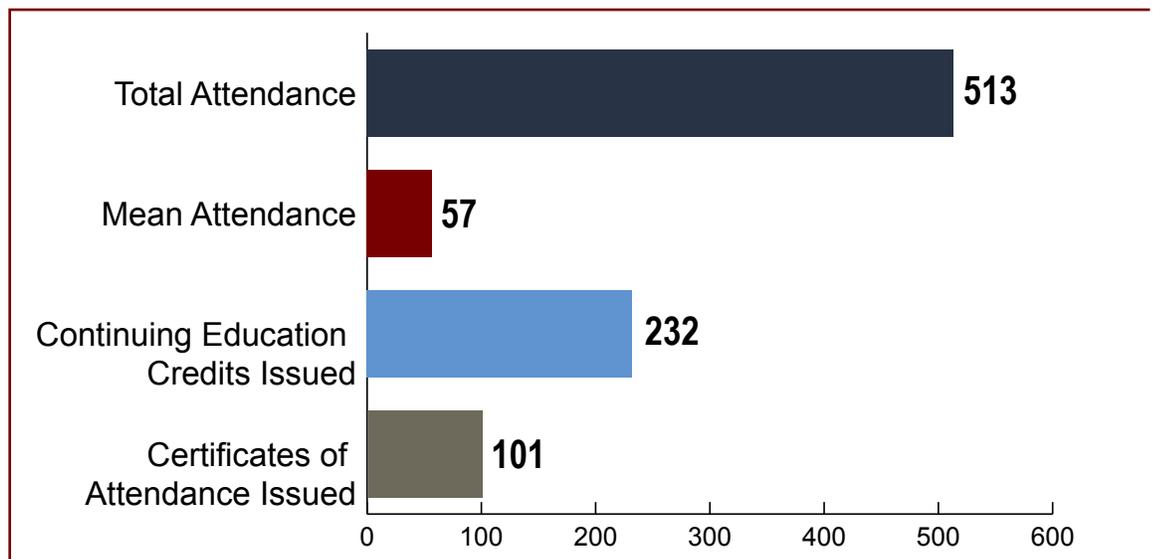
# WEBINARS

## Program Evaluation and Improvement Webinar Series

DCoE offered nine webinars to improve awareness and understanding of the program evaluation process, the reasons evaluation is necessary, and the DCoE program evaluation methodology.

- Total webinar attendance: 513
- Mean attendance: 57
- Continuing education credits issued: 232
- Certificates of attendance issued: 101

*Program  
Evaluation and  
Improvement  
Webinars: By the  
Numbers*

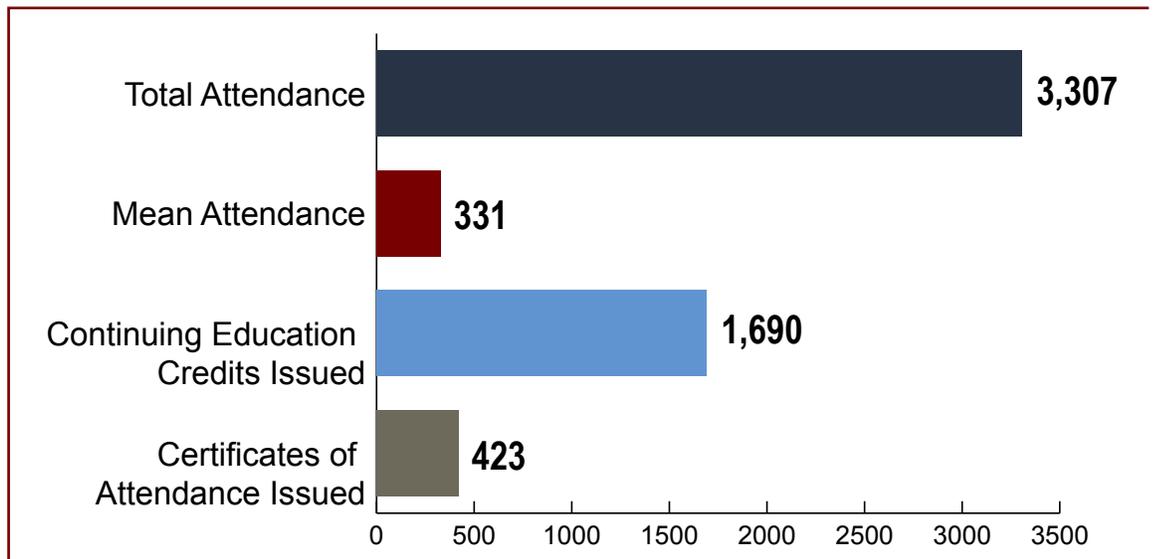


## Psychological Health Webinar Series

DHCC offered 10 webinars to provide information and to facilitate discussion on a variety of topics related to psychological health. The target audience was health care providers.

- Total webinar attendance: 3,307
- Mean webinar attendance: 331
- Continuing education credits issued: 1,690
- Certificates of attendance issued: 423

### *Psychological Health Webinars: By the Numbers*

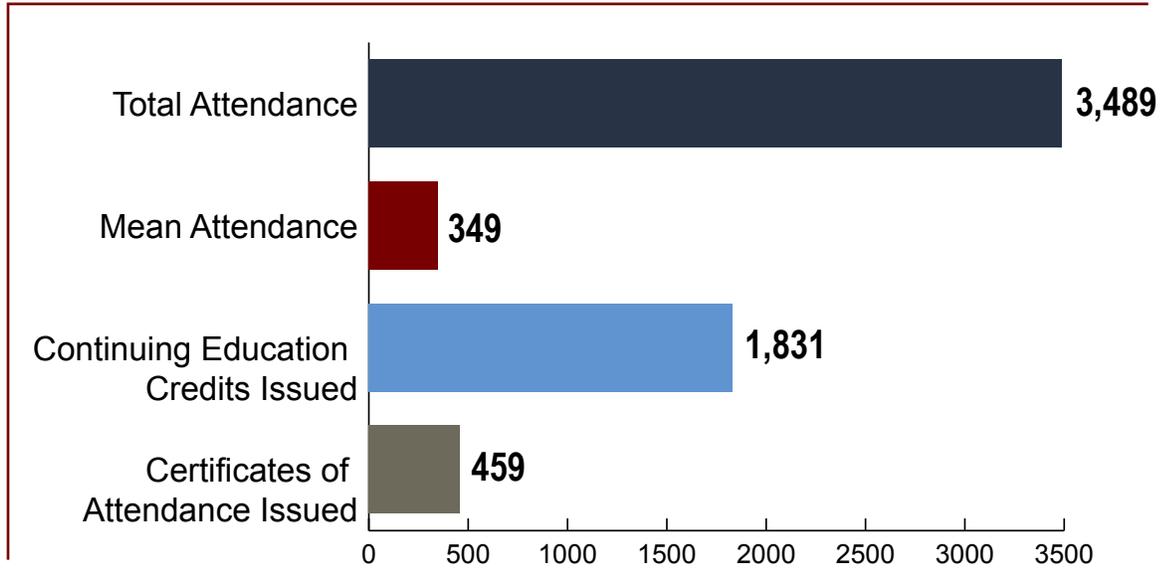


## TBI Webinar Series

DVBIC conducted 10 webinars targeted to health care providers to provide information and facilitate discussions on a variety of topics related to traumatic brain injury.

- Total webinar attendance: 3,489
- Mean webinar attendance: 349
- Continuing education credits awarded: 1,831
- Certificates of attendance issued: 459

### *TBI Webinars: By the Numbers*



# RESEARCH

DCoE conducts military health services research on a wide range of topics, including treatment for PTSD and depression, primary care PTSD screening, collaborative care/primary care-based treatments for mental health disorders, telehealth treatment for mental health disorders, and screening and brief intervention for alcohol abuse. This research is conducted by our psychological health operational center, DHCC.

DCoE gathers data and conducts research to evaluate technology solutions and examine the use of technology in the military population to inform best practices and policy decisions. This research is conducted by T2. T2 also conducts studies to determine the effectiveness of telehealth behavioral care and mobile applications.

The DVBIC network includes a research infrastructure to support the execution of military-relevant TBI research projects including congressionally-mandated studies. At present there are 66 active research protocols which span every chevron of the operational spectrum as identified in the National Research Action Plan ranging from “foundational science” to “services research.”

DCoE held a research-in-progress review to highlight center research portfolios and discuss research portfolio financial management. The organization finalized the Research Work Group Charter, which is a venue for establishing the processes, program efficiencies and structure to manage and facilitate research across DCoE centers.

A full list of DCoE research is in [Appendix A](#). Highlights of some research activities are listed here.

## Comprehensive Defense Department Database for Psychological Health and TBI Research Portfolio

There is no single database encompassing all Defense Department psychological health and TBI research. DCoE fosters future integration of Defense Department research portfolios and transparency of those portfolios across the Defense Department, VA and the National Institutes of Health. DCoE funded a Federally Funded Research and Development Center (FFRDC) to conduct a systematic review of major psychological health and TBI research funded by the military (2007 through 2014). DCoE requested the FFRDC to:

- continue its systematic review
- review best practices related to the development of a centralized and comprehensive financial management system to provide regular

and validated visibility across all research studies, and support financial resource evaluation for research portfolio management and investment decisions

- propose candidates to implement a knowledge translation solution

## DoD-VA PH and TBI Health Registry

DCoE planned, coordinated, and facilitated the DoD-VA PH and TBI Health Registry stakeholders' sub-work groups and collaborated and shared foundational documents with key stakeholders such as the TBI Advisory Council and subject matter experts from the services. DCoE completed the following foundational documents for the registry:

- problem statement to initiate the functional requirements process via MHS Governance
- concept of operations
- business use case
- high-level functional requirements document
- data model to explain the concepts and inter-relationships of those concepts in the registry
- health registry environmental scan white paper

## Evidence Synthesis and Dissemination Capability

DCoE subject matter experts developed the expertise to produce scientifically sound evidence synthesis briefs that describe the state of the science on psychological health care topics relevant to MHS clinicians, policymakers, health care managers and patients. The purpose of these products was to:

- Promote evidence-based clinical practices and policies
- Facilitate the implementation of effective treatments and methods of care
- Identify gaps in clinical knowledge to inform future research directions

DHCC will publish five evidence briefs in early 2017 at the request of stakeholders on the topics of: Acamprosate for Alcohol Use Disorder, Ayahuasca for Posttraumatic Stress Disorder, Brief Alcohol Interventions for Unhealthy Alcohol Use, Cognitive Processing Therapy for Posttraumatic Stress Disorder, and Prolonged Exposure Therapy for Posttraumatic Stress Disorder.

## Health Economics

DCoE estimated predictors of successful research for TBI publications across four federal agencies using multiple linear regression analysis.

## **Recovery Support Program: A Snapshot into Effectiveness**

DCoE conducted a descriptive statistical analysis and predictive modeling to evaluate the effectiveness of recovery support specialists in promoting return to military service or community re-integration.

## **Measuring the Return on Investment from DCoE Research Portfolio Management: A Performance Metrics Approach**

DCoE used a performance metrics approach to quantify the return on investment from the DCoE Research Portfolio Management program. DCoE created the Research Portfolio Management Metric Conceptual Model and Statistical Framework through which DCoE can monitor research performance. The model also allows DCoE to statistically summarize metrics used by other federal agencies that might be appropriate for the DCoE portfolio.

## **Effect of Telephone Follow-Up on Outcome for Service Members with Mild TBI or PTSD**

This large-scale clinical trial evaluated the efficacy of telephone-delivered problem-solving treatment on psychological and physical symptoms in 356 active-duty soldiers with medically confirmed mild TBI sustained during deployment to Iraq and Afghanistan within the previous 24 months. The treatment consisted of 12 biweekly telephone calls from a counselor for subject-selected problems. Results showed that after six months, the treatment group had significantly improved on measures of psychological distress, sleep, depression, PTSD, and physical functioning, but not on post-concussion symptoms.

## **Effectiveness of a Virtual Hope Box Smartphone App in Enhancing Veterans' Coping with Suicidal Ideation: A Randomized Clinical Trial**

This clinical trial assessed the utility of the Virtual Hope Box (VHB) smartphone app to supplement care for veterans in treatment who had been diagnosed at high risk for suicidal ideation. Results showed that the app significantly improved coping with unpleasant thoughts and emotions. Patients reported that the VHB was easy to use, helpful and beneficial in dealing with stress and emotional difficulties, likely to be used after the study ended, and would be recommended to others.

## Federally Funded Research and Development Center Studies

DHCC oversaw numerous Federally Funded Research and Development Center studies on topics including mental health needs of rural and remote service members and their families; mental health needs of minorities; a quality framework for psychological health care and fidelity to evidence-based practices; complementary and alternative medicine psychological health practices; evaluating Defense Department and VA mental health campaigns and developing an item bank to measure barriers to care and stigma in the military.

## Improved Understanding of Mental and Psychological Needs in Veterans and Service Members with Chronic TBI (I-MAP)

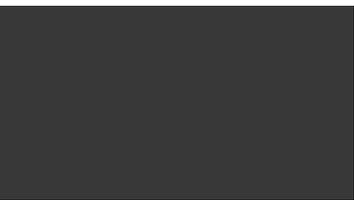
DVBIC collaborated with the Tampa VA to develop this study to complement existing 15-year studies to fully address a congressional mandate. This study evaluates needs and use of support services by people who have sustained a TBI.

## In-Home Tele-behavioral Health Care Utilizing Behavioral Activation for Depression

This randomized controlled clinical trial demonstrated that gold-standard psychotherapy for depression can be effectively delivered to the homes of active-duty service members and veterans via videoconferencing technology. Results showed that in some cases in-person care may be slightly advantageous; however, for those who are unable or unwilling to seek treatment in person, in-home telehealth offers an additional avenue for seeking and receiving care.

## Knowledge Translation

DCoE developed a high-level, flexible, and adaptable knowledge translation model to speed the transformation of innovations into practice in MHS. The Knowledge Translation Steering Committee Charter was signed by the DCoE director and the Knowledge Translation Office was formed January 2016. Among the committee's key activities: assigned knowledge translation organizational roles and responsibilities within DCoE; began a beta test of the DCoE Knowledge Translation Model using Virtual Hope Box in April 2016; promoted the adoption of clinical practices recommended in its existing products and helped create a product question feedback bank to gain real-time insight into how its products impact military health care; maintained a product lifecycle management process and product lifecycle knowledge management system to manage all



products and influence knowledge translation solution oversight; participated in DHA Research and Development Knowledge Translation Action Group work groups to support development of knowledge translation capabilities across the MHS and share materials developed based on evidence-based knowledge translation practices.

## **Stepped Enhancement of PTSD Services Using Primary Care (STEPS UP)**

This trial tested collaborative care against standard primary care for service members with PTSD and depression. The effectiveness of the STEPS UP package was compared to optimized usual care at six Army posts over four time points. DHCC completed study recruitment, data collection and main analyses. Findings suggested that central assistance for collaborative telecare, including stepped psychosocial and pharmacologic management, improves outcomes of PTSD and depression among military personnel and may offer an effective model of care for other PTSD populations. DHCC published a manuscript with full study findings in the “Journal of the American Medical Association” in 2016.

## **Study of Cognitive Rehabilitation Effectiveness (SCORE) for Mild TBI**

The findings from this study were published in September 2016 in the “Journal of Head Trauma Rehabilitation.” The study authors concluded that both therapist-directed cognitive rehabilitation and integrated cognitive rehabilitation with cognitive behavioral therapy reduced functional cognitive complaints in service members following mild TBI beyond psychoeducation and medical management alone.

## **Suicide Prevention**

Through the Department of Defense Suicide Event Report (DoDSER) System, T2 leads the collection, analysis and reporting on key risk factor data related to the occurrence of suicide and suicide-related behavior across the Defense Department. The DoDSER Annual Report for 2014 was approved for public release on Jan. 18, 2016. The DoDSER Annual Report for 2015 also is in the final stages of approval for public release. DCoE has a proven track record of high-visibility epidemiological and clinical research and surveillance related to suicide behavior and suicide prevention.

## TBI Epidemiology/Etiology

DVBIC has 26 studies that seek to understand the physiological and behavioral effects of TBI, to identify the nature and frequency of chronic effects, and to understand the interplay between TBI and other comorbid disorders. DVBIC researchers are using administrative databases, developing longitudinal databases, investigating training-associated blasts, and using blood-banking and surveillance databases to conduct research, study headache disorders, and assess smell and taste dysfunction. The study “Exploring the Natural History of Traumatic Brain Injury within a Military Cohort” was developed as a result of Section 720, H.R. 5122 of the FY 2007 NDAA, which requires a longitudinal study on TBIs sustained by Operation Enduring Freedom and Operation Iraqi Freedom service members. A component of the 15-year longitudinal study, “Health-related Quality of Life in Caregivers of Service Members with Military Related TBI,” uses focus groups, cognitive interviews, and field testing to assess the mental and physical health of caregivers. The study developed a validated TBI quality-of-life care scale to measure well-being and health care needs. DVBIC supports the “Chronic Effects of Neurotrauma Consortium” study at three network sites to promote issues related to anatomic, molecular, and physiological mechanisms of chronic brain injury and potential neurodegeneration.

## TBI Follow-up Care

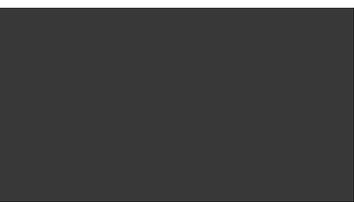
DVBIC has four protocols focused on follow-up care, addressing long-term TBI outcomes, care coordination, use of smart home technology and long-term rehabilitation measures.

## TBI Foundational Science

DVBIC has four studies that seek to characterize the pathobiology of TBI and comorbidities.

## TBI Prevention and Screening

Among the 12 studies in this category, the DVBIC “Head to Head” study was developed as a result of the Title VII health care provisions of the 2011 National Defense Authorization Act (NDAA) requirements. This research compares the psychometric properties of brief computerized neurocognitive assessment tools through test-retest reliability and validity studies. The results of the test-retest study were published in the “Journal of Clinical and Experimental Neuropsychology” in June of 2016. The results of the validity study were part of a final report to Congress in February 2015, satisfying 2008 and 2011 NDAA language concerning neurocognitive assessment tools. DVBIC researchers



presented three abstracts at the Military Health System Research Symposium in August 2016 and completed two abstracts for presentation at the National Academy of Neuropsychologists Conference in October 2016.

## **TBI Services Research**

DVBIC has an ongoing TBI model systems study at five VA polytrauma centers. This study generated 11 peer-reviewed journal article publications, most recently in the “Journal of Physical Medicine and Rehabilitation” in May 2016.

## **TBI Treatment**

DVBIC has 19 protocols that use a wide range of treatment modalities. Ongoing research includes studies on low-cost telephonic interventions, social competence, pain assessment, neural plasticity, advanced imaging techniques, biofeedback and transcranial direct current stimulation. Other areas include cognitive rehabilitation, metronome technology remediation, neurofeedback and computer-based cognitive rehabilitation. The “Imaging Support of Study of Cognitive Rehabilitation Effectiveness in Mild TBI (iSCORE)” study complements the SCORE trial. DVBIC had three poster presentations accepted for the National Academy of Neuropsychologists Conference in October 2016.

# LEADERSHIP AND COLLABORATION

DCoE recognizes that advances cannot happen without the help and knowledge of others. To get the best care possible for service members, veterans and their families, DCoE partners with military, government and academic organizations to identify gaps, eliminate redundancies, and prioritize needs in psychological health and TBI research and care. DCoE also plays an active role in Defense Department working groups for psychological health and TBI. Selected leadership and collaborative activities are highlighted below. A full list of partners is in [Appendix C](#).

Dr. Larry Pruitt and Dr. Robert Ciulla were appointed to the Military Suicide Research Consortium (MSRC) Dissemination and Implementation working group/readiness committee with partners from DHCC, DSPO, MSRC and academia. Dr. Nancy Skopp was invited to serve as a voting member of Madigan Army Medical Center IRB. Dr. Nigel Bush was invited to serve on the DoD-VA Suicide Data Repository Board of Governance.

## Working Groups

DCoE achieves success through participating in a variety of interdisciplinary working groups to improve psychological health and TBI care. Examples include: Psychological Health Quad Service Working Group, TBI Quad Service Working Group, DoD/VA Telehealth Work Group, and Health Executive Council/Joint Executive Council on TBI Working Group.

## Congressional Testimony

DCoE provided written testimony for the U.S. Senate Subcommittee on Personnel: “Current State of Research, Diagnosis, and Treatment for Post-Traumatic Stress Disorder and Traumatic Brain Injury.” The DCoE director testified before Congress in April 2016 along with National Intrepid Center of Excellence director and a representative from the Boston Veterans Affairs Office.

## Reports to Congress

DCoE contributed to three reports to Congress in 2016, described below.

**Final Report on Section 723 of the National Defense Authorization Act for Fiscal Year 2010:** Clinical Trial on Cognitive Rehabilitation Therapy for Members and Former Members of the Armed Forces.

**Interim Report on Section 728 of the Carl Levin and Howard P. “Buck” McKeon National Defense Authorization Act for Fiscal Year 2015:** Report on Improvements in the Identification and Treatment of Mental Health Conditions and TBI among Members of the Armed Forces.

**Senate Armed Service Committee Report 114-255 for FY 2017, Page 205:** Report on Provision of Behavioral Health and Suicide Prevention Resources to Reserve Component Members.

## Contributions to Defense Department and Interagency Reports

**Defense Department Blast Injury Research Program, FY16 Report to the Executive Agent, “Prevention, Mitigation and Treatment of Blast Injuries”:** DCoE will be featured in a chapter. DVBIC developed content emphasizing its research on blast-related TBI. The report will be released in FY17.

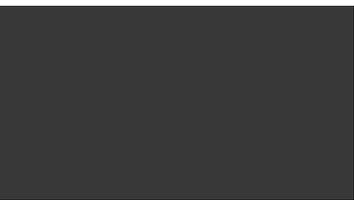
**Calendar Year 2014 Annual Report for Department of Defense Suicide Event Report (DoDSER):** DCoE made this report available to the public on Feb. 5, 2016, with a signed cover letter from the Office of the Under Secretary of Defense for Personnel and Readiness. The Principal Deputy Assistant Secretary of Defense for Health Affairs arranged for the report to be co-briefed to Under Secretary of Defense for Personnel and Readiness by the DCoE director and the Defense Suicide Prevention Office director. The 2015 report is being coordinated for public release.

**Executive Action Progress Report (EAPR):** DCoE reported on the progress of these objectives on a quarterly basis to DHA, which presents the findings to the White House.

**InTransition Program Information Paper:** DCoE completed this report in support of a request from the Assistant Secretary of Defense for Health Affairs.

**Neurocognitive Assessment Tool Report:** DCoE delivered quarterly reports for the Office of the Assistant Secretary of Defense for Health Affairs.

**Traumatic Brain Injury Surveillance Report:** DCoE delivered quarterly reports for the Office of the Assistant Secretary of Defense for Health Affairs.



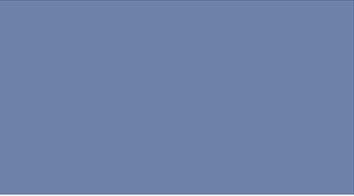
**VA/DoD FY16-18 Joint Strategic Plan of the Joint Executive Committee's Health Executive Committee:** DCoE delivered a report on “Improving Understanding of Medical and Psychological Needs in Veterans and Service members with Chronic TBI (I-MAP)” study in September 2016.

**VA/DoD Joint Executive Committee Annual Report:** As part of the Psychological Health and TBI Sub Working Groups in the JEC's Health Executive Committee, DCoE provided input on web-based self-help, research translation, Real Warriors Campaign, inTransition program, telehealth and TBI.

# LOOKING FORWARD

As DCoE moves into 2017 and beyond, we will maintain our momentum as we advance psychological health and TBI prevention and care by:

- **Advancing and standardizing traumatic brain injury care.** DCoE will move the science in the DVBIC research portfolio by focusing on TBI research gaps in MHS. This will include diagnosis, treatment and prognostic indicators following a TBI, in collaboration with U.S. Army Medical Research and Materiel Command, National Intrepid Center of Excellence, and Uniformed Services University of the Health Sciences and key stakeholders. DVBIC will align its resources with high volume TBI encounter sites, including all Intrepid Spirit sites, thereby equilibrating DVBIC sites with locations that have the highest volume of TBI patients. DCoE will advance and standardize TBI care throughout MHS by defining and disseminating proven practices and by managing the TBI Pathway of Care through the TBI Advisory Committee in collaboration with the services and key stakeholders.
- **Hosting a TBI Consensus Conference and presenting findings at the MHS Research Symposium.**
- **Hosting the third annual DCoE Summit.** The 2017 Summit, “Advances in State of the Science and Best Practices,” is scheduled for September 19-21. It is an online virtual event. Health care professionals, researchers and academicians from around the world will interact live via a web conferencing platform.
- **Developing a guided navigation system for the After Deployment website.** A guided navigation system will query users about their interests and then direct them to the appropriate information.
- **Building a web-friendly mobile application.** To help achieve healthy goals such as weight loss, smoking cessation and medication management using the transtheoretical model of behavior change, which focuses on increasing the motivation to change.
- **Testing the effectiveness of mobile health technology to preserve behavioral health care for service members on deployment.** Because a large stationary setup is no longer necessary to receive telehealth services, secure streaming video can be used to connect patients and providers via smartphones or tablets.

- 
- **Completing a beta test of the knowledge translation model and evaluating the results.**
  - **Analyzing feedback on our education and training programs in order to improve them and expand their reach.**
  - **Refreshing DCoE history and heritage information.** This will include the creation of an internal history and heritage display with an attached and digitally interactive history module, and revision of the history portion of the DCoE website and its component centers' websites.

# APPENDIX A. Research

## Defense and Veterans Brain Injury Center

Identifying U.S. Military Service Members with Multiple Medically Diagnosed TBIs Using Administrative Databases

Exploring the Natural History of Traumatic Brain Injury within a Military Cohort — A Longitudinal Database and Blood Banking Study: Comprehensive Pathway

Exploring the Natural History of Traumatic Brain Injury within a Military Cohort — A Longitudinal Database and Blood Banking Study: Brief Pathway

Data Analysis for Defense and Veterans Head Injury Program (DVHIP) Protocol IV Combat Training Traumatic Brain Injury: A Surveillance Study in Paratroopers

A Psychometric Comparison of Brief Computerized Neuropsychological Assessment Batteries: Test-Retest Reliability “Head to Head”

A Psychometric Comparison of Brief Computerized Neuropsychological Assessment Batteries: Validity

The Effect of Telephone Follow-up on Outcome for Service Members with Mild TBI: Concussion Treatment after Combat Trauma (CONTACT)

Assessment of Training Needs of Primary Care Physicians for Mild Traumatic Brain Injury in the Military Health System

Structured Telephonic Testing 5 to 15 Years after TBI

Deployment Related Mild Traumatic Brain Injury (mTBI): Incidence, Natural History, and Predictors of Recovery in Soldiers Returning from OIF/OEF (Warrior STRONG)

Post-deployment Traumatic Brain Injury and/or Post-traumatic Stress Disorder: A Qualitative Study (Sub-study under protocol titled: “Deployment Related Mild Traumatic Brain Injury (mTBI): Incidence, Natural History, and Predictors of Recovery in Soldier)

Feasibility Study of A Novel Neurofeedback Technology for Persistent Post-Concussive Symptoms in Soldiers

Epidemiology of Headache Disorders in a Military Cohort with and without TBI

Post-traumatic Headache in Soldiers: A Retrospective Record Review of Patients Presenting to the TBI Center for Evaluation and Treatment of Headache

Pain Drawings, Headache Diagnosis and Mild TBI in Soldiers: A Retrospective Case Series

A Prevalence Study of Chronic Problems and Sequelae after TBI in the Military and Veteran Populations

San Antonio DVBIC Prospective Traumatic Brain Injury Clinical Tracking Repository (formerly DVBIC Tracking Protocol)

The Defense and Veterans Brain Injury Center TBI Clinical Patient Registry

Investigating the Neurologic Effects of Training Associated Blast (I-TAB)

VA Polytrauma Rehabilitation Center Traumatic Brain Injury Model Systems

Longitudinal, Multi-domain Assessment of Neurodegeneration in Veterans

Long-term Outcomes from TBI “Core Protocol”

Defense and Veterans Brain Injury Center: Prospective Traumatic Brain Injury Protocol (Clinical Tracking Form)

Prospective TBI Clinical Tracking Study (Clinical Tracking Form)

Characterization and Care Coordination of Polytrauma Patients

Olfactory and Taste Dysfunction Among US Military Personnel Deployed to Iraq and Afghanistan: A Feasibility Study

Extending Smart Home Technology for Cognitively Impaired Veterans to Delay Institutionalization (Part II)

An fMRI Study of TBI Associated with Blast Injury-III

BRAVE Trial: Broad-spectrum Cognitive Remediation Available to Veterans – Effects of a Brain Plasticity-based Program in Mild Traumatic Brain Injury



Biofeedback Treatment of mTBI Pathology Utilizing an Optimized Training Environment

Enhancing Cognitive Control Using Transcranial Direct Current Stimulation

Assessing Pain in Persons with Polytrauma and Differing Cognitive Levels: Intensity Scale Utility & Reliability

Retrospective Analysis of Brain Morphometry in Mild Traumatic Brain Injury (mTBI): A Pilot Study

Study of Cognitive Rehabilitation Effectiveness in Mild Traumatic Brain Injury (SCORE!)

Imaging Support of Study of Cognitive Rehabilitation Effectiveness in Mild Traumatic Brain Injury (iSCORE)

A Randomized, Controlled, Trial of Interactive Metronome Technology for Remediation of Cognitive Difficulties Following Blast-Related Traumatic Brain Injury

Expanding Our Understanding of Computer Based Cognitive Rehabilitation in the Military Population — a Longitudinal Brain Fitness Center Database

Health Related Quality of Life in Caregivers of Service Members with Military Related Traumatic Brain Injury: TBI-Care QOL Development

Spatial Navigation after Combat Exposure: A Pilot Study

Neurocognitive Assessment of Blast Exposure Sequelae in Training (NC-BEST)

Women and Traumatic Brain Injury: Retrospective Cohort Analysis

Chronic Effects of Neurotrauma Consortium (CENC) Observational Study on Late Neurologic Effects of OEF/OIF/OND Combat: Data Repository.

Assessments of the Pupillary Light Reflex (PLR) and Eye Movements for Early Identification of Warfighters with Acute Mild TBI/Concussion

Evaluation of the DVBIC Progressive Return to Activity Clinical Recommendation Tool (PRA)

Improved Understanding of Medical and Psychological Needs (I-MAP) in Veterans and Service Members with Chronic TBI

Novel Approaches to the Analysis of Clinic and MRI Data in Marines with a History of Possible Mild TBI

Long-term Follow-up of SCORE/iSCORE

Discovery and Validation of Peripheral Biomarkers of Traumatic Brain Injury

An Outcome Evaluation of Alpha Stimulation Therapy on Active-duty Service Members with a Concussion History; Camp Lejeune

Retinal Imaging with Adaptive Optics for Early Diagnosis of Traumatic Brain Injury

Validation of the Mild Brain Injury Atypical Symptoms (mBIAS) Scale

Integrated Eye Tracking and Neural Monitoring for Enhanced Assessment of TBI

Evaluation of Neurocognitive Driving Rehabilitation in Virtual Environments (NeuroDRIVE) as an Adjunctive Intervention for Traumatic Brain Injury

Deep Transcranial Magnetic Stimulation for the Treatment of Alcohol Use Disorder in Mild Traumatic Brain Injury (dTMS)

Deep Transcranial Magnetic Stimulation for the Treatment of Medication-Refractory Depression in Mild Traumatic Brain Injury (dTMS)

Automated Comprehensive Evaluation of Mild Traumatic Brain Injury Visual Dysfunction

Targeted Alteration in Omega-3 and Omega-6 Fatty Acids for Post-traumatic Headache

Evaluation of the DVBIC Clinical Recommendation for Management of Headache Following Concussion

A Pilot Study of Epigenetics in Mild Traumatic Brain Injury

An Epidemiologic Study of Mild Traumatic Brain Injury (mTBI) and Other Neurological Conditions. (MCNCoE )

Rehabilitation of Visual Attention Following Mild TBI

Evaluation of Premorbid Neuropsychological Function as Correlated to Army GT Scores

Evaluation of Landstuhl Regional Medical Center's TBI Screening Database

Observational Safety and Efficacy Study Comparing a Non-Equipment Based Exercise Protocol to an Equipment Based Exercise Protocol

Evaluating the Suitability of Normative Data for Computerized Neurocognitive Assessment Tools: a Comparison of Computer Platforms

Repetitive Transcranial Magnetic Stimulation to Improve Cognitive Function in TBI

Effectiveness of Mindfulness-based Group Therapy (MGBT) Integrative Restoration (iRest) for Active Duty Personnel with Mild Traumatic Brain Injury in Outpatient Clinic.

## National Center for Telehealth & Technology

Reliability and Initial Validation of the INTRuST Structured Assessment for Evaluation of TBI (SAFE-TBI)

A Randomized Controlled Trial of In-Home Tele-behavioral Health Care Utilizing Behavioral Activation for Depression

Assessing Mental Health Treatment Stigma in the Military

Caring Letters for Military Suicide Prevention: A Randomized Controlled Trial

Characteristics of Suicides among Current and Former Military Personnel: Findings from the National Violent Death Reporting System and Department of Defense Suicide Event Reports

Department of Defense Suicide Event Report (DoDSER) Data Analysis

Effectiveness of a Virtual Hope Box Smartphone App in Enhancing Veterans' Coping with Suicidal Ideation: A Randomized Clinical Trial

Increasing the Clinical Fidelity of Stages of Change and Decisional Balance: Self-Generated Problematic Behaviors and Pros Verses Cons

National Center for Telehealth and Technology (T2) Technology Enhancement Center (TEC) Usability Standard Operating Procedures

Positive and Negative Aspects of Facebook Usage by Service Members During Deployment and Associations with Social Support

The Association Between Suicide and OIF/OEF Deployment History

The Effect of Telephone Follow-Up on Outcome for Service Members with Mild TBI/PTSD

Prototype Generic Behavior Change Coach Application for Weight Loss, Smoking Cessation, and Medication Management, Using Transtheoretical Change Model

mHealth Convergence Feasibility Study: Integration of mCare/MHCE-R and the T2 Mood Tracker Mobile Application

Guided Navigation (GN) for Behavioral Health

Telehealth 2.0: Preserving Continuity of Behavioral Health Clinical Care to Patients Using Mobile Devices

## Deployment Health Clinical Center

Creation of Interpretable Summary Measures in Displaying Results from Mixed-effects Logic Models

Electronic and Web-based Delivery of PTSD Treatments

Health Care Utilization among Service Members Who Report Sexual Assault

IRB and Research Regulatory Delays Within the Military Health System: Do They Really Matter? And if so, Why and for Whom?

Mental Health Utilization Patterns During a Stepped, Collaborative Care Effectiveness Trial for PTSD and Depression in the Military Health System

## Deployment Health Clinical Center/FFRDC

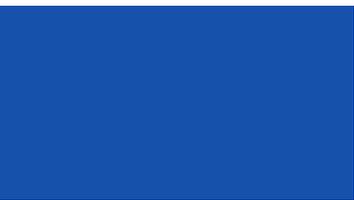
Access to Evidence-Based Psychological Health and Traumatic Brain Injury Assessment and Rehabilitation Services for Rural MHS Beneficiaries

Assessment of Mental Health Campaigns: Evaluating the Impact of Efforts to Reduce Negative Perceptions about Mental Health Condition and Treatment and Increase Awareness of Resources

Assessment of the Impact of Fidelity to Clinical Practice Guidelines on Treatment Outcomes for PTSD and Major Depressive Disorder in the MHS

Evaluation of Efficacy and Comparative Effectiveness of Integrative Medicine for PH and TBI

Evaluation of Behavioral Health in the Patient Centered Medical Home Initiative



Extant, Efficacy and Effectiveness of Integrative Medicine Approaches to the Prevention and Treatment of Psychological Health Conditions and TBI in the DoD

Family Resilience in the Military

Framework for Quality Assessments of Department of Defense TBI and Psychological Health Systems of Care

Longitudinal Assessment of Family Readiness (Deployment Life Study)

Mental Health Stigma in the Military

Psychological Health Treatment Needs and Outcomes of Minority Service Member Groups in DoD

Service Member Experiences with Mental Health Care for Depression and PTSD

Systematic Reviews of Psychological Health Research to Address Gaps in Practice

The Deployment Life Study: Longitudinal Analysis of Military Families Across the Deployment Cycle

Transformative Analysis of Research and Programs to Improve DoD Psychological Health and TBI Services

## **Deployment Health Clinical Center/FFRDC Published Reports**

The Deployment Life Study: Longitudinal Analysis of Military Families Across the Deployment Cycle

Mindfulness Meditation for Chronic Pain: A Systematic Review

Meditation for Posttraumatic Stress Disorder: A Systematic Review

Quality of Care for PTSD and Depression in the Military Health System: Phase I Report

# APPENDIX B. Publications

## Defense and Veterans Brain Injury Center

Allan, A.C., Edmed, S.L., Sullivan, K.A., Karlsson, L.J., Lange, R.T., & Smith, S.S. (2016). Actigraphically Measured Sleep-Wake Behavior After Mild Traumatic Brain Injury: A Case-Control Study. *J Head Trauma Rehabil.*

Armistead-Jehle, P., Cooper, D.B., & Vanderploeg, R.D. (2016). The role of performance validity tests in the assessment of cognitive functioning after military concussion: A replication and extension. *Appl Neuropsychol Adult.* 23(4):264-273.

Bailie, J.M., Kennedy, J.E., French, L.M., Marshall, K., Prokhorenko, O., Asmussen, S., ... Lange, R.T. (2016). Profile Analysis of the Neurobehavioral and Psychiatric Symptoms Following Combat-Related Mild Traumatic Brain Injury: Identification of Subtypes. *J Head Trauma Rehabil.* 31(1):2-12.

Belanger, H.G., Lange, R.T., Bailie, J., Iverson, G.L., Arrieux, J.P., Ivins, B.J., & Cole, W.R. (2016). Interpreting change on the neurobehavioral symptom inventory and the PTSD checklist in military personnel. *Clin Neuropsychol.* 1-11.

Belanger, H.G., Vanderploeg, R.D., & McAllister, T. (2016). Subconcussive Blows to the Head: A Formative Review of Short-term Clinical Outcomes. *J Head Trauma Rehabil.* 31(3):159-166.

Belanger, H.G., Vanderploeg, R.D., & Sayer, N. (2016). Screening for Remote History of Mild Traumatic Brain Injury in VHA: A Critical Literature Review. *J Head Trauma Rehabil.* 31(3):204-214.

Bell, K., Fann, J.R., Brockway, J.A., Cole, W.R., Bush, N.E., Dikmen, S., ... Temkin, N. (2016). Telephone Problem Solving for Service Members with Mild Traumatic Brain Injury: A Randomized Clinical Trial. *J Neurotrauma.*

Bjork, J.M., Burroughs, T.K., Franke, L.M., Pickett, T.C., Johns, S.E., Moeller, F.G., & Walker, W.C. (2016). Laboratory impulsivity and depression in blast-exposed military personnel with post-concussion syndrome. *Psychiatry Res.* 246:321-325.

Brickell, T.A., Lippa, S.M., French, L.M., Kennedy, J.E., Bailie, J.M., & Lange, R.T. (2016). Female Service Members and Symptom Reporting after Combat and Non-Combat-Related Mild Traumatic Brain Injury. *J Neurotrauma.*

Carlozzi, N.E., Brickell, T.A., French, L.M., Sander, A., Kratz, A.L., Tulskey, D.S., ... Lange, R.T. (2016). Caring for our wounded warriors: A qualitative examination of health-related quality of life in caregivers of individuals with military-related traumatic brain injury. *J Rehabil Res Dev.* 53(6):669-680.

Cole, W.R., Arrieux, J.P., Dennison, E.M., & Ivins, B.J. (2016). The impact of administration order in studies of computerized neurocognitive assessment tools (NCATs). *J Clin Exp* 1-11.

- Cooper, D.B., Bowles, A.O., Kennedy, J.E., Curtiss, G., French, L.M., Tate, D.F., & Vanderploeg, R.D. (2016). Cognitive Rehabilitation for Military Service Members With Mild Traumatic Brain Injury: A Randomized Clinical Trial. *J Head Trauma Rehabil.*
- Dretsch, M.N., Silverberg, N., Gardner, A.J., Panenka, W.J., Emmerich, T., Crynen, G., ... Iverson, G.L. (2016). Genetics and Other Risk Factors for Past Concussions in Active-Duty Soldiers. *J Neurotrauma.*
- Dretsch, M.N., Williams, K., Staver, T., Grammer, G., Bleiberg, J., DeGraba, T., & Lange, R.T. (2016). Evaluating the clinical utility of the Validity-10 for detecting amplified symptom reporting for patients with mild traumatic brain injury and comorbid psychological health conditions. *Appl Neuropsychol Adult.* 1-5.
- Finkel, A.G., Yerry, J.A., Klaric, J.S., Ivins, B.J., Scher, A., & Choi, Y.S. (2016). Headache in military service members with a history of mild traumatic brain injury: A cohort study of diagnosis and classification. *Cephalalgia.*
- Franke, L.M., Walker, W.C., Hoke, K.W., & Wares, J.R. (2016). Distinction in EEG slow oscillations between chronic mild traumatic brain injury and PTSD. *Int J Psychophysiol.* 106:21-29.
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- Holcomb, E.M., Schwartz, D.J., McCarthy, M., Thomas, B., Barnett, S.D., & Nakase-Richardson, R. (2016). Incidence, Characterization, and Predictors of Sleep Apnea in Consecutive Brain Injury Rehabilitation Admissions. *J Head Trauma Rehabil.* 31(2):82-100.
- Holcomb, E.M., Towns, S., Kamper, J.E., Barnett, S.D., Sherer, M., Evans, C., & Nakase-Richardson, R. (2016). The Relationship Between Sleep-Wake Cycle Disturbance and Trajectory of Cognitive Recovery During Acute Traumatic Brain Injury. *J Head Trauma Rehabil.* 31(2):108-116.
- Jonas, W.B., Bellanti, D.M., Paat, C.F., Boyd, C.C., Duncan, A., Price, A., ... Chae, H. (2016). A Randomized Exploratory Study to Evaluate Two Acupuncture Methods for the Treatment of Headaches Associated with Traumatic Brain Injury. *Med Acupunct.* 28(3):113-130.
- Kamper, J.E., Garofano, J., Schwartz, D.J., Silva, M.A., Zeitzer, J., Modarres, M., ... Nakase-Richardson, R. (2016). Concordance of Actigraphy With Polysomnography in Traumatic Brain Injury Neurorehabilitation Admissions. *J Head Trauma Rehabil.* 31(2):117-125.
- Lange, R.T., Brickell, T.A., Bailie, J.M., Tulskey, D.S., & French, L.M. (2016). Clinical Utility and Psychometric Properties of the Traumatic Brain Injury Quality of Life Scale (TBIQOL) in US Military Service Members. *J Head Trauma Rehabil.* 31(1):62-78.
- Lippa, S.M., Axelrod, B.N., & Lange, R.T. (2016). The Mild Brain Injury Atypical Symptoms (mBIAS) scale in a mixed clinical sample. *J Clin Exp Neuropsychol.* 38(7):721-729.

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Toyinbo, P.A., Vanderploeg, R.D., Donnell, A.J., Mutolo, S.A., Cook, K.F., Kisala, P.A., & Tulskey, D.S. (2016). Development and Initial Validation of Military Deployment-Related TBI Quality-of-Life Item Banks. *J Head Trauma Rehabil*. 31(1):52-61.

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Dobmeyer, A. C., Hunter, C. L., Corso, M. L., Nielsen, M. K., Corso, K. A., Polizzi, N. C., & Earles, J. E. (2016). Primary Care Behavioral Health Provider Training: Systematic Development and Implementation in a Large Medical System. *Journal of Clinical Psychology in Medical Settings*, 23(3), 207-224.

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# APPENDIX C. Partnerships

ORGANIZATION	TOPIC	OUTCOMES
Adaptive Adventures	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
AfterDeployment	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Air Force, Army, Navy and National Capital Region Primary Care Behavioral Health Services	Behavioral Health Services	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Improved readiness</li> </ul>
Air Force, Army, Navy Chiefs of Chaplains Offices/Chaplains	JIF 1, Psychological Health	<ul style="list-style-type: none"> <li>▪ Fortify relationship with services</li> </ul>
Air Force, Army, Navy Service Academies, Army Center for Leadership, National Defense University, USUHS	Unit Fitness, Psychological Health	<ul style="list-style-type: none"> <li>▪ Improved readiness</li> </ul>
Air Force Reserve Command Psychological Health Advocacy Program	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Air Force Wounded Warrior Program	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Alliant International University Continuing Education	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Always a Soldier	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
American Academy of Psychological Health Physician Assistants	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
American Association of Suicidology	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
American Foundation for Suicide Prevention National Capital Area Chapter	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
American Music Therapy Association	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
American Psychological Association	Psychological Health, Real Warriors	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Improved readiness</li> </ul>
American Psychological Association, Division 19 – Society for Military Psychology	Mobile Health, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
American Red Cross	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
American Telemedicine Association	Telehealth	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
America's Heroes at Work	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
AMSUS (Association of Military Surgeons of the United States)	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Anxiety and Depression Association of America	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Armed Forces Health Surveillance Center	TBI, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Optimize DHA operations</li> </ul>
Armed Forces Foundation	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Armed Forces Medical Examiners Office	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Improved readiness</li> <li>▪ Fortify relationship with services</li> </ul>
Armed Services YMCA	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Army Installation Management Command	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Army Operations, Readiness and Mobilization (HQDA G-3/5/8)	Thriving Under Stress: Using the Power of Mindfulness to Be Fully Present and Resilient	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Army, Navy and Air Force Telehealth Offices	Telehealth	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
Army, Navy, Air Force and Marine Corps Suicide Prevention Programs	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Improved readiness</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Army Post-Deployment Health Reassessment	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Army Wife Network	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Army Wounded Warrior Program	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Association of the U.S. Army Family Readiness Directorate	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Aurora Foundation	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Bayne-Jones Army Community Hospital, Fort Polk, Louisiana	PTSD	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Birdies for the Brave	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Blue Star Families	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Blue Star Mothers of America, Inc.	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Bob Woodruff Foundation	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Boston University School of Medicine	Deployment-related PTSD and Mild TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Brain Injury Association of America	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Brain Trauma Foundation	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
BrainLine	Real Warriors, AfterDeployment, TBI	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
BrainLine Military	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Brandeis University Heller School for Social Policy	Gender Differences in PTSD Symptoms and Treatment Approaches	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
BraveHeart: Welcome Back Veterans Southeast Initiative	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Brooke Army Medical Center, Joint Base San Antonio, Texas	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
California Department of Veterans Affairs	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Campaign to Change Direction	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Camp LeJeune Marine Corps Base (Naval Hospital), North Carolina	Telehealth	<ul style="list-style-type: none"> <li>▪ Fortify relationship with services</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Camp Pendleton, California	TBI, Progressive Return to Activity (PRA) Following Concussion/ Mild Traumatic Brain Injury: Guidance for the Primary Care Manager	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Improved readiness</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Canadian Department of National Defense	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Cannon Air Force Base, New Mexico	Telehealth	<ul style="list-style-type: none"> <li>▪ Fortify relationship with services</li> </ul>
Carl R. Darnell Army Medical Center, Fort Hood, Texas	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
Case Western Reserve University School of Medicine Medical	Management of Headache Following Concussion/Mild TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Improved readiness</li> </ul>
CBR Youth Connect	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Cell Phones for Soldiers	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Center for BrainHealth	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Center for Deployment Psychology	Mobile Health, Psychological Health, Real Warriors	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Improved readiness</li> </ul>
Center for Neuroscience and Regenerative Medicine	TBI, Real Warriors	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Improved readiness</li> </ul>
Center for the Study of Traumatic Stress	Mobile Health, AfterDeployment, MilitaryKidsConnect, Real Warriors	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Improved readiness</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Center for Veterans Issues	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Center of Innovation on Disability and Rehabilitation Research James A. Haley VA Hospital	TBI	<ul style="list-style-type: none"> <li>▪ Lower cost</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Centers for Disease Control and Prevention	TBI, Suicide Prevention, MHSP 1-2.4	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Improved readiness</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Centers of Excellence Research Directorates, Office of the Assistant Secretary of Defense for Research & Engineering	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Challenge America	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Chaplains Religious Enrichment Development Operation (CREDO SE)	Resilience and Military Chaplains	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
Chronic Effects of Neurotrauma Consortium	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Citizen Soldier Support Program	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Citizens United for Research in Epilepsy (CURE)	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Clearinghouse for Military Family Readiness	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Clemson University	Psychological Health, AfterDeployment, Resilience in the Military	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
Coaching Into Care	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Comfort for America's Uniformed Services	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Comprehensive Soldier and Family Fitness	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Concussion Legacy Foundation	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Computer/Electronics Accommodation Program: Wounded Service Member Initiative	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Congressional Medal of Honor Society	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Connected Warriors	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Courage Beyond	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Dartmouth College	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Defense Commissary Agency	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
DoD Center of Excellence for Trauma	TBI, Registry	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
Defense Health Agency Education and Training Directorate	Mobile Health, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
Defense Health Agency Health Care Information Technology Directorate, Innovations & Advance Technology Development Division	Mobile Health, Registry	<ul style="list-style-type: none"> <li>▪ Improved readiness</li> </ul>
Defense Health Agency, Healthcare Operations Directorate	Telehealth, Psychological Health, Registry	<ul style="list-style-type: none"> <li>▪ Optimize DHA operations</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Defense Health Agency, Historian	Innovation – A Case Study: The Artificial Foot	<ul style="list-style-type: none"> <li>▪ Other</li> </ul>
Defense Health Agency Mental Health Work Group	MHSP 1-2.4, JIF 1, JIF 7, COSC	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Defense Health Agency, National Capital Region Medical Directorate	Telehealth	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Defense Health Board	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Optimize DHA operations</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Defense Health Cost Assessment and Program Evaluation Office	Telehealth	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Fortify relationship with services</li> </ul>
Defense Health Information Management System	Mobile Health	<ul style="list-style-type: none"> <li>▪ Optimize DHA operations</li> </ul>
Defense Manpower Data Center	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Fortify relationship with services</li> </ul>
Defense Suicide Prevention Office	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Improved readiness</li> <li>▪ Strengthen our role as combat support agency</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Denmark Ministry of Defense	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Improved readiness</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Department of Defense Hearing Center of Excellence	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Department of Veterans Affairs, Center for Clinical Management Research	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Improved readiness</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Department of Veterans Affairs, Post-Deployment Health Service, Epidemiology Program	Registry	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
Department of Veterans Affairs, Center of Excellence for Suicide Prevention, Canandaigua, New York	Spirituality and the Moral Injury Conundrum	<ul style="list-style-type: none"> <li>▪ better care</li> <li>▪ Better health</li> </ul>
Department of Veterans Affairs National Telemental Health Center	Telehealth	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Department of Veterans Affairs, National Center for PTSD	AfterDeployment, Psychological Health, Research, Mobile Health, Real Warriors	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Department of Veterans Affairs, Office of Mental Health	AfterDeployment, Suicide Prevention, JIF projects	<ul style="list-style-type: none"> <li>▪ Improved readiness</li> <li>▪ Strengthen our role as combat support agency</li> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
Department of Veterans Affairs, Office of Quality, Safety and Value	Evidence-based Management of Suicide Risk Behavior: A Guideline Perspective	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Department of Veterans Affairs Telehealth Services Office	Telehealth, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Fortify relationship with services</li> </ul>
Deployment Health Assessment Program	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Disabled American Veterans	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
DSTRESS Line	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
DoD Addictive Substances Misuse Advisory Committee	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
DoD Education Activity	MilitaryKidsConnect	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
DoD Family Advocacy Program	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
DoD Health Affairs Office of Women's Health, Ethics and Patient Rights	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
DoD Health Affairs Women's Health Issues Work Group	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
DoD Military Community and Family Policy	MilitaryKidsConnect	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Fortify relationship with services</li> </ul>
DoD Psychological Health Council Sexual Assault Advisory Group	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
DoD Psychological Health Council	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Optimize DHA operations</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
DoD Suicide Prevention and Risk Reduction Committee	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Fortify relationship with services</li> <li>▪ Improved readiness</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
DoD/VA Health Executive Council Telehealth Work Group	Telehealth	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
Dwight D. Eisenhower Army Medical Center	Units Needs Assessment, TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Optimize DHA operations</li> <li>▪ Strengthen our role as combat support agency</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Easter Seals Community OneSource	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Educated Canines Assisting with Disabilities (ECAD)	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Elizabeth Dole Foundation	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Employer Support of the Guard and Reserve	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Evans Army Community Hospital, Fort Carson, Colorado	TBI, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
Faith*Hope*Love*Charity, Inc.	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Family Medicine Clinic, Robins Air Force Base, 78th Medical Group	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
Federal Inter-Agency Telehealth Consortium	Telehealth	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Federal Ministry of Defense, Germany	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Federal Recovery Coordination Program	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Federal Telehealth Work Group (FEDTEL)	Telehealth	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Final Salute Inc.	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Florida State University	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
FOCUS	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Folds of Honor Foundation	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Fort Bliss Intrepid Spirit, Texas	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Fort Campbell, Kentucky	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Fred Friendly Seminars	Real Warriors	▪ Better health
Generations of Warriors Project	Real Warriors	▪ Better health
Georgetown University	AfterDeployment	▪ Better care ▪ Better health
Georgia State University, School of Social Work	Combatting Compassion Fatigue	▪ Better care ▪ Better health
GI Film Festival	Real Warriors	▪ Better health
Give An Hour	Real Warriors	▪ Better health
Gold Star Wives of America	Real Warriors	▪ Better health
Grace After Fire	Real Warriors	▪ Better health
Guard Your Health	Real Warriors	▪ Better health
Harborview Medical Center	Psychological Health, AfterDeployment	▪ Better health
Health and Medicine Division, National Academies of Sciences, Engineering, and Medicine	Psychological Health	▪ Better health
Health Resources and Services Administration	Program Evaluation	▪ Improved readiness ▪ Optimize DHA operations
Healthy Base Initiative	Mobile Health	▪ Better health
HelpforDepression.com	AfterDeployment	▪ Better health
Heroes on the Water	Real Warriors	▪ Better health
Hidden Wounds	Real Warriors	▪ Better health
Higher Ground Sun Valley	Real Warriors	▪ Better health
Home Front Hearts	Real Warriors	▪ Better health
Homes for Our Troops	Real Warriors	▪ Better health
Honor for ALL	Real Warriors	▪ Better health
Horses Healing Heroes	Real Warriors	▪ Better health

ORGANIZATION	TOPIC	OUTCOMES
Horses4Heroes	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Human Performance Resource Center	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Hunter Holmes McGuire Veterans Affairs Medical Center, Richmond, Virginia	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
ICE Client Relations, Washington Headquarters Services	Interactive Customer Evaluation (ICE) Information Session	<ul style="list-style-type: none"> <li>▪ Improved readiness</li> <li>▪ Optimize DHA operations</li> </ul>
Illinois Patriot Education Fund	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Indiana National Guard	Telehealth	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Institute for Veterans and Military Families	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
International Initiative on Mental Health Leadership	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Intrepid Spirit Concussion Recovery Center, Naval Hospital Camp Lejeune, North Carolina	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
Intrepid Spirit Fort Belvoir Community Hospital, Virginia	TBI, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Intrepid Spirit Warrior Program	Research	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Iowa State University	AfterDeployment	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Iowa University	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Iraq Star Foundation	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
James A. Haley Veterans Hospital, Tampa, Florida	TBI, Syndromes of Impaired Consciousness: Distinctions and Rehabilitation	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Improved readiness</li> </ul>
Jason's Box	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
JBS International, Inc.	Using Technology to Help Students with TBI Transition from College to Employment	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Joint Base Elmendorf-Richardson, Anchorage, Alaska	TBI, Anger Management	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
Joint Base Lewis-McChord, Washington	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Joint Base Lewis-McChord Morale Welfare and Recreation	MilitaryKidsConnect	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Joint Base Lewis-McChord Teen and Youth Center	MilitaryKidsConnect, TBI	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Joint Program Committee 5 (Military Operational Medicine Research Program)	TBI, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Joint Program Committee 6 (Combat Casualty Care Research Program)	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Joint Program Committee 8 (Clinical and Rehabilitative Medicine Research Program)	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Joint Surgeons	Telehealth	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Joshua's Mission	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
K9s For Warriors	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Kent State University, Ohio	Using Technology to Help Students with TBI Transition from College to Employment	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Lackland Air Force Base, San Antonio, Texas	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Landstuhl Regional Medical Center, Landstuhl, Germany	TBI, Suicide Prevention, Telehealth	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
Lone Star Veterans Association	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Lone Survivor Foundation	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Louis Stokes Cleveland Veterans Administration Medical Center, Cleveland, Ohio	Management of Headache Following Concussion/Mild TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Fortify relationship with services</li> <li>▪ Improved readiness</li> <li>Strengthen our role as combat support agency</li> </ul>
Luke's Wings	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
MacDill Air Force Base, Tampa, Florida	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
Madigan Army Medical Center, Joint Base Lewis-McChord, Washington	Suicide Prevention, Mobile Health, Telehealth, AfterDeployment, MilitaryKidsConnect, Research	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Maine Military & Community Network	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Malcolm Grow Medical Clinic, Joint Base Andrews, Maryland	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
Marine Corps Combat Operational Stress Control	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Marine Corps Community Services, Henderson Hall, Virginia	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
MedStar National Rehabilitation Network	Sleep and TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Mental Health America	Real Warriors	▪ Better health
Mental Health America of Colorado	Real Warriors	▪ Better health
Mental Health America of Texas	Real Warriors	▪ Better health
Mental Health Work Group	Psychological Health	▪ Fortify relationship with services
Military Child Education Coalition	MilitaryKidsConnect, Real Warriors	▪ Better health
Military Family Life Counselors	Mobile Health	▪ Better health
Military Health System Innovations Office and Working Group	Mobile Health	▪ Better care
Military Health System Office of Health Readiness Policy and Oversight	Mobile Health	▪ Better health
Military Health System Office of Health Systems Policy and Oversight	Telehealth	▪ Better health
Military Health System Telehealth Work Group	Telehealth	▪ Better health
Military Health System Speaker Series	Mobile Health	▪ Better health
Military Officers Association of America	Real Warriors	▪ Better health
Military OneSource	AfterDeployment, MilitaryKidsConnect, Psychological Health, Real Warriors	▪ Better health
Military Operational Medicine Research Program	Psychological Health	▪ Better health
Military Student Transition Counselor Program	MilitaryKidsConnect	▪ Better care
Military Suicide Research Consortium, Florida State University	Mobile Health, Suicide Prevention	▪ Better health
Military Support Programs and Networks (M-SPAN)	Real Warriors	▪ Better health
MilitaryOneClick	Real Warriors	▪ Better health
Ministry of Defense, United Kingdom	Psychological Health	▪ Better health ▪ Strengthen our role as combat support agency

ORGANIZATION	TOPIC	OUTCOMES
Minneapolis Veterans Affairs Medical Center, Minneapolis, Minnesota	TBI	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Mothers At War	AfterDeployment	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Alliance on Mental Illness (NAMI), Alabama	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Alliance on Mental Illness (NAMI) New Hampshire	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Alliance on Mental Illness (NAMI) North Carolina	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Alliance on Mental Illness (NAMI) Tennessee	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Alliance on Mental Illness	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Association of State Head Injury Administrators	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Association of State Mental Health Program Directors	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Center for Child Traumatic Stress	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Center for Veterans Studies	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Improved readiness</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
National Center for Veterans Studies at The University of Utah	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Child Trauma Stress Network	MilitaryKidsConnect	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Coalition for Homeless Veterans	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Collegiate Athletic Association	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
National Football League	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
National Football League Players Association	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Guard Bureau	Telehealth	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
National Guard Teen Advisory Board	MilitaryKidsConnect	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Institute of Mental Health	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
National Institute of Neurological Disorders and Stroke	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
National Institute on Disability, Independent Living, and Rehabilitation Research	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
National Intrepid Center of Excellence	TBI, Mobile Health, Psychological Health, Real Warriors, Registry Applications of Music Therapy, Creative Arts Therapy and Mind-Body Medicine for TBI and Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
National Military Family Association	MilitaryKidsConnect, Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Network of Depression Centers	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
National Oceanic and Atmospheric Administration	Inter-Agency Service Agreement	<ul style="list-style-type: none"> <li>▪ Improved readiness</li> <li>▪ Lower cost</li> <li>▪ Optimize DHA operations</li> </ul>
National Resource Directory	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Naval Center for Combat and Operational Stress Control	Mobile Health, Real Warriors, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Naval Medical Center San Diego, California	TBI, Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>Improved readiness</li> </ul>
Navy Alcohol and Drug Abuse Prevention Program (OPNAV 170A)	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Navy and Marine Corps Public Health Center	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Navy Bureau of Medicine	AfterDeployment, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
Navy Operational Stress Control Program	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
NCIRE-The Veterans Health Research Institute	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Neurocognitive Assessment Implementation Work Group	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
New Directions for Veterans	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
New England Center for Homeless Veterans	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
New Zealand Defense Force	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
North Carolina Governor's Working Group on Veterans, Service Members, and their Families	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
North Dakota Suicide Prevention Program	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Northwestern University	AfterDeployment	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Office of Health Services Policy and Oversight	Telehealth, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Office of the Assistant Secretary of Defense, Health Affairs	Telehealth, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Office of the Deputy Assistant Secretary of Defense for Health Readiness Policy and Oversight	Telehealth, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Improved readiness</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Office of Warrior Care Policy	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
One Mind	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Operation Climb On	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Operation College Promise	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Operation Gratitude	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Operation Homefront	Real Warriors	▪ Better health
Operation Live Well	Real Warriors	▪ Better health
Operation Never Forgotten	Real Warriors	▪ Better health
Operation Revamp	Real Warriors	▪ Better health
Operation Second Chance	Real Warriors	▪ Better health
Our Forgotten Warriors	AfterDeployment	▪ Better health
Patriot PAWS Service Dogs	Real Warriors	▪ Better health
Pawsitive Perspectives Assistance Dogs	Real Warriors	▪ Better health
Peak Military Care Network	Real Warriors	▪ Better health
Pets for Patriots, Inc.	Real Warriors	▪ Better health
Pets for Vets	Real Warriors	▪ Better health
Philadelphia VA Medical Center	Telehealth	▪ Better care ▪ Better health
Pink Concussions	Women with Traumatic Brain Injury: Gender Differences and Coping Strategies	▪ Better care ▪ Better health
Professional Association of Therapeutic Horsemanship International	Real Warriors	▪ Better health
Program for Anxiety and Trauma Stress Studies of Weill Cornell Medical College	Real Warriors	▪ Better health
Project FOCUS (Families Overcoming Under Stress)	MilitaryKidsConnect	▪ Better care ▪ Better health
Project New Hope of Massachusetts	Real Warriors	▪ Better health
Project Welcome Home Troops	Real Warriors	▪ Better health
Project: Return to Work	Real Warriors	▪ Better health
Puget Sound Enhanced Multi-Service Market	Telehealth	▪ Better health
Purdue Military Family Research Institute	Real Warriors	▪ Better health

ORGANIZATION	TOPIC	OUTCOMES
Quad Service (Army, Navy, Air Force and Marine Corps) TBI Program Directors	TBI, Psychological Health	<ul style="list-style-type: none"> <li>Fortify relationship with services</li> </ul>
Quantum Leap Farm	Real Warriors	<ul style="list-style-type: none"> <li>Better health</li> </ul>
R4 Alliance	Real Warriors	<ul style="list-style-type: none"> <li>Better health</li> </ul>
Ramstein Air Base Mental Health Clinic, Germany	Assessment and Treatment of Sleep Problems in Primary Care	<ul style="list-style-type: none"> <li>Better care</li> <li>Better health</li> <li>Other</li> </ul>
RAND Corporation	RAND stigma, health promotion, mobile health, Psychological Health	<ul style="list-style-type: none"> <li>Better health</li> <li>Strengthen our role as combat support agency</li> </ul>
Rensselaer Polytechnic Institute	Sleep	<ul style="list-style-type: none"> <li>Better care</li> <li>Better health</li> </ul>
Reserve Officers Association	Real Warriors	<ul style="list-style-type: none"> <li>Better health</li> </ul>
ReserveAid	Real Warriors	<ul style="list-style-type: none"> <li>Better health</li> </ul>
Returning Veterans Project	Real Warriors	<ul style="list-style-type: none"> <li>Better health</li> </ul>
Rosalynn Carter Institute for Caregiving	TBI	<ul style="list-style-type: none"> <li>Better care</li> </ul>
Rotary Club of Arlington	Real Warriors	<ul style="list-style-type: none"> <li>Better health</li> </ul>
RTI International	Psychological Health	<ul style="list-style-type: none"> <li>Better health</li> <li>Strengthen our role as combat support agency</li> </ul>
SAFE: Soldiers and Families Embraced	Real Warriors	<ul style="list-style-type: none"> <li>Better health</li> </ul>
Salem VA Medical Center, Salem, Virginia	PTSD and TBI	<ul style="list-style-type: none"> <li>Better care</li> <li>Better health</li> </ul>
San Antonio Military Medical Center, San Antonio, Texas	TBI	<ul style="list-style-type: none"> <li>Better care</li> <li>Better health</li> <li>Fortify relationship with services</li> </ul>
San Antonio Polytrauma Rehabilitation Center VA, Texas	TBI	<ul style="list-style-type: none"> <li>Better care</li> <li>Better health</li> </ul>
San Jose State University	Mobile Health, AfterDeployment	<ul style="list-style-type: none"> <li>Better health</li> </ul>
Saratoga WarHorse	Real Warriors	<ul style="list-style-type: none"> <li>Better health</li> </ul>
Satcher Health Leadership Institute	Real Warriors	<ul style="list-style-type: none"> <li>Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Scottish Centre for Telehealth and Telecare	MilitaryKidsConnect	▪ Better health
Seattle University School of Nursing	AfterDeployment	▪ Better care ▪ Better health
Semper Fi Fund	Real Warriors	▪ Better health
Serving Together	Real Warriors	▪ Better health
Sesame Workshop	MilitaryKidsConnect, Real Warriors	▪ Better health
Sexual Assault Prevention and Response Office	Inter-Disciplinary Professionals Psychological Health, AfterDeployment	▪ Better care ▪ Fortify relationship with services ▪ Optimize DHA operations
Sierra Club Military Families and Veterans Initiative	Real Warriors	▪ Better health
Soldiers' Angels	Real Warriors	▪ Better health
Soldier's Heart	Real Warriors	▪ Better health
South Texas Research Organizational Network Guiding Studies on Trauma and Resilience (STRONG STAR)	Mobile Health (Dream EZ)	▪ Better health
Sports Legacy Institute	Real Warriors	▪ Better health
Spring Reins of Life	Real Warriors	▪ Better health
Star Behavioral Health Providers	Real Warriors	▪ Better health
Steilacoom High School Student 2 Student® Program	MilitaryKidsConnect	▪ Better health
Step Up for Soldiers	Real Warriors	▪ Better health
Still Serving Veterans	Real Warriors	▪ Better health
Stop Soldier Suicide	Real Warriors	▪ Better health
Strong Families Strong Forces	Real Warriors	▪ Better health
Student Veterans of America	Real Warriors	▪ Better health

ORGANIZATION	TOPIC	OUTCOMES
Substance Abuse and Mental Health Services Administration	MHSP 1-2.4, Psychological Health, Mobile Health, Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Improved readiness</li> </ul>
Suicide Awareness Voices of Education	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Suicide Prevention Resource Center	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Swords to Plowshares	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Talking With Heroes	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
TBI End Points Development (TED) Government Steering Committee	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
TBI Model Systems Program	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Team Red, White & Blue	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Team River Runner - Atlanta	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Tee it up for the Troops	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
TeenCentral.net	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
The American Legion	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
The Brain Injury Recovery Network	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
The Coming Home Project	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
The Home Base Program	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
The Mission Continues	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
The National Center on Family Homelessness	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
The Soldiers Project	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
The Virginia Wounded Warrior Program	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
There & Back Again	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Tragedy Assistance Program for Survivors	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Transforming Research and Clinical Knowledge in TBI	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Trauma and Neurosurgery Program, St. Michael's Hospital, Toronto, Canada	AfterDeployment	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Trauma and Resiliency Resources	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
TRICARE Family Advocacy Program	AfterDeployment	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
TRICARE Online	AfterDeployment, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Tripler Army Medical Center	Suicide Prevention, Mobile Health	<ul style="list-style-type: none"> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
San Francisco VA Medical Center PTSD Program	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Uniformed Services University of the Health Services	Psychological Health, TBI, Mobile Health, Biopsychosocial Treatment of Hypertension, Primary Care, Obesity, Eating Behaviors, CHAMP Unit Fitness	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
United Service Organizations (USO)	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
United States First Responders Association	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
United States Special Operations Command (USSOCOM) Preservation of the Force and Family (POTFF)	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
United Through Reading	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
University of British Columbia	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
University of California, Los Angeles	Mobile Health, MilitaryKidsConnect	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
University of California, Los Angeles Medical Center, Santa Monica	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
University of California, San Diego	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
University of Colorado Depression Center	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
University of Florida, Gainesville	The Interface of Sleep and Traumatic Brain Injury	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
University of Iowa	AfterDeployment	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
University of Kansas Medical Center	AfterDeployment, Intensive Cardiorespiratory Exercise (ICE) to remediate mild TBI in active duty	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
University of Maryland	AfterDeployment, Sleep and TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
University of Miami	Thriving Under Stress: Using the Power of Mindfulness to Be Fully Present and Resilient	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
University of Michigan	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Improved readiness</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
University of Michigan Depression Center	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
University of Minnesota, Family Social Science	MilitaryKidsConnect	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
University of New Hampshire, Durham, New Hampshire	Sexual Assault Prevention	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
University of North Carolina, Matthew A. Geller Sport-Related Traumatic Brain Injury Research Center	Concussion in Winter Sports	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
University of North Dakota	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
University of North Texas	AfterDeployment	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
University of Pittsburgh Graduate School of Public Health for Student Preceptorship	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
University of South Carolina, Columbia	Program Evaluation and Outcomes	<ul style="list-style-type: none"> <li>▪ Improved readiness</li> <li>▪ Optimize DHA operations</li> </ul>
University of South Carolina, College of Social Work	Gender Differences in PTSD Symptoms and Treatment Approaches	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
University of South Florida, Department of Medicine	Syndromes of Impaired Consciousness: Distinctions and Rehabilitation	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
University of Southern California School of Social Work	MilitaryKidsConnect	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
University of Southern California, Center for Innovation and Research on Veterans & Military Families	AfterDeployment	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
University of Utah, Department of Psychology	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Improved readiness</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
University of Washington	Psychological Health, TBI, Mobile Health, Telehealth, Suicide Prevention, AfterDeployment, Diagnosis and Management of Post-traumatic Headache, Nearby Nature Experiences for Human Health and Wellness	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
University of Washington School of Social Work — Innovative Programs Research Group	Research	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
USA Cares	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
U.S. Air Force	Treating Depressive Symptoms in IBHC Primary Care	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
U.S. Air Force Medical Systems	Mobile Health	<ul style="list-style-type: none"> <li>▪ Fortify relationship with services</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
U.S. Army Aeromedical Research Laboratory	TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
U.S. Army Health Center Vicenza, Italy, Department of Orthopedics & Rehabilitation	Exercise Testing, Prescription, and Heart Rate Variability Training in Post-Concussion Disorders	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Improved readiness</li> </ul>
U.S. Army Medical Command	Psychological Health, MHSP 1-2.4, Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
U.S. Army Medical Research and Materiel Command	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
U.S. Army Medical Information Technology Center	Telehealth	<ul style="list-style-type: none"> <li>▪ Fortify relationship with services</li> </ul>
U.S. Army Medicine System for Health Council	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
U.S. Army Program Executive Office Soldier	Mobile Health	<ul style="list-style-type: none"> <li>▪ Fortify relationship with services</li> </ul>
U.S. Army Public Health Command, Behavioral and Social Health Outcomes Program	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
U.S. Army Ready & Resilient (R2)	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
U.S. Army South, Fort Sam Houston, Texas	Anger Management, ICD-10 Coding Guidance for Traumatic Brain Injury (TBI) within the Military Health System (MHS)	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Improved readiness</li> </ul>
U.S. Army Telemedicine and Advance Technology Research Center	Mobile Health, Telehealth, AfterDeployment	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
U.S. Coast Guard	TBI, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
U.S. Department of Health and Human Services	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
U.S. Department of Veterans Affairs	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
U.S. Department of Veterans Affairs OEF/OIF Outreach Teams	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
U.S. Federal Partners Committee on Women and Trauma	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
U.S. Marine Corps, Quantico	Return to Duty Following Mild Traumatic Brain Injury: Lessons Learned from Sports Concussion Management	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
U.S. Navy & Marine Corps Public Health Center	Mobile Health, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
U.S. Navy and Marine Corps Reserves Psychological Health Outreach Program	Mobile Health, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Fortify relationship with services</li> </ul>
U.S. Substance Abuse and Mental Health Services Administration	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
VA Boston Health Care System	TBI	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
VA Brookings Executive Education	Cultivating Leaders: A Strategy for Coaching and Mentoring	<ul style="list-style-type: none"> <li>▪ Improved readiness</li> </ul>
VA Connecticut Healthcare System	Telehealth, Motivational Interviewing	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Improved readiness</li> </ul>
VA Eastern Colorado Health Care System	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
VA Eastern Colorado Health Care System, Mental Illness Research, Education and Clinical Centers	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
VA Greater Los Angeles Healthcare System, Sepulveda Ambulatory Care Center	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
VA Greater Los Angeles Healthcare System, West Los Angeles Medical Center	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
VA Office of Mental Health Services	Mobile Health, Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Strengthen our role as combat support agency</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
VA Palo Alto Health Care System	Suicide Prevention, TBI, Women with Traumatic Brain Injury: Gender Differences and Coping Strategies	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
VA Portland Health Care System	Mobile Health, Suicide Prevention, AfterDeployment	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
VA Puget Sound Health Care System	Mobile Health, Telehealth, AfterDeployment	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
VA Western New York Healthcare System	Suicide Prevention	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
VA/DoD Evidence Based Work Group	Psychological Health, MHSP 1-2.4	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
VA/DoD Health Executive Council Women's Health Work Group	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Improved readiness</li> </ul>
VA/DoD Integrated Mental Health Strategic Action Work Groups	Psychological Health	<ul style="list-style-type: none"> <li>▪ Better health</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
VA/DoD Vision Center of Excellence	Eye and Vision Care Following Blast Exposure and/ or Traumatic Brain Injury (TBI): A Clinical Recommendation, TBI, Psychological Health, Registry	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Improved readiness</li> <li>▪ Optimize DHA operations</li> </ul>
Vet Centers	Psychological Health	<ul style="list-style-type: none"> <li>▪ Fortify relationship with services</li> </ul>
Veteran Artist Program	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Veterans 360	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Veterans Conservation Corps	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Veterans Health Administration	VA/DoD Clinical Practice Guideline for the Management of Concussion/ Mild Traumatic Brain Injury	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Improved readiness</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
Veteran's Heart Georgia	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Veterans Upward Bound	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Veterans Yoga Project	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
VeteransPlus	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Veterans Health Administration Rehabilitation and Prosthetic Services	Registry	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
Wake Forest University Health Sciences, Section on Infectious Diseases	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Walter Reed National Military Medical Center, Bethesda, Maryland	Psychological Health, TBI, Mobile Health, Telehealth, Using the Performance Triad	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Lower cost</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Warrior Canine Connection	Animal-Assisted Therapy, TBI	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Warrior Care Policy	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Warrior Family Community Partnership	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Warrior Resiliency Program, San Antonio, Texas	Mobile Health	<ul style="list-style-type: none"> <li>▪ Better care</li> </ul>
Warrior Salute	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Warrior Transition Command	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Warriors for Freedom Foundation	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
WarWithin	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
West Virginia University, Morgantown	Using Technology to Help Students with TBI Transition from College to Employment	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> <li>▪ Strengthen our role as combat support agency</li> </ul>

ORGANIZATION	TOPIC	OUTCOMES
White House Office of Science and Technology	Mobile Health, Research	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Wilford Hall Ambulatory Surgical Center, Joint Base San Antonio, Texas	Mobile Health, Assessment and Treatment of Sleep Problems in Primary Care	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> </ul>
Wingman Project	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Womack Army Medical Center, Fort Bragg, North Carolina	TBI, Neuropsychological Assessment Batteries, Obesity and Weight Management	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Better health</li> <li>▪ Fortify relationship with services</li> </ul>
Work First Foundation	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Working Minds	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
WWI Commission	Tracing the Roots of WWI: Our History and Our Genealogy	<ul style="list-style-type: none"> <li>▪ Other</li> </ul>
Yale University School of Medicine	Motivational Interviewing	<ul style="list-style-type: none"> <li>▪ Better care</li> <li>▪ Improved readiness</li> <li>▪ Strengthen our role as combat support agency</li> </ul>
Yellow Ribbon Registry Network	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Yellow Ribbon Reintegration Program	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
You Matter	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>
Zero To Three	Real Warriors	<ul style="list-style-type: none"> <li>▪ Better health</li> </ul>

