

FGI November Webinar Transcript Serving Those Who Served – Mike Hooper November 2, 2023

[00:00:00] **Michelle Day:** Good afternoon, everyone, and welcome to the Fletcher Group Rural Center of Excellence's webinar series. Today's session is scheduled to run from 2 p. m. to 3 p. m. Eastern Standard Time. My name is Michelle Day, and I'm your moderator for the session, along with Janice Fulkerson and Erica Walker. A couple of brief housekeeping items, and then we'll begin.

You entered today's session on mute, and your video was off and will remain so for the entirety of the webinar. Your chat feature is located at the bottom right of your screen. Use the drop down feature to communicate with either the panelists only or panelists and attendees. Please direct all questions regarding the webinar content to the Q&A section.

Be advised that this meeting is being recorded and will be available to you on our website once it has been transcribed. You can access our website at www.fletchergroup.org. Also, at the conclusion of today's session, [00:01:00] there will be a short survey regarding the webinar content. Your participation in that survey is greatly appreciated and will only take a few moments to complete.

Today's presenter is Mike Hooper, Addiction Counselor with Moorhead City Treatment Center. Mike is an Army Veteran, Certified Peer Recovery Specialist, and Certified Alcohol and Drug Counselor. Michael's struggles with substance use disorder and mental health issues wreaked havoc in his life for over 20 years. He endured numerous failed career attempts, broken relationships, damaged family connections, and incarceration before realizing that he truly desired change, but had no idea how to achieve it. Traditional methods of treatment were ineffective for many years and was not able to change his life until he discovered SMART Recovery.

After becoming a volunteer facilitator and running meetings of his own, Michael was approached by SMART's leadership to become the nonprofit's National Outreach Director. In [00:02:00] addition to helping establish numerous connections for the program throughout the country, Michael co founded SMART's first online Veteran and First Responder Community and Support Network. He also organized the program's first international webinar for Veterans and First Responders in recovery. Michael has spoken on national radio broadcasts for the Media One Group, as well as appeared on Spectrum News for his work building connections within the LGBTQIA and BIPOC communities in Cleveland, Ohio.

His appearances at higher education institutions have helped students and alumni understand that there are many pathways to recovery. Through many interactions with the public and media, Michael began to formulate new approaches using CBT based practices to better fit the needs of individual cultural demographics and social groups. Michael's open and whole person approach to recovery has helped others focus on the needs of the individual [00:03:00] and their personal blueprint for change, thereby helping create a recovery model tailored to what the individual needs to succeed. Michael resides in eastern North Carolina with his wife and children and continues to be a public advocate and change ally for the recovery community. Michael, the floor is yours.

[00:03:26] **Mike Hooper:** That was a wonderful introduction. Thank you, Michelle, and thank you for the Fletcher Group for having me on today. I want to thank everybody that's in attendance, uh, for coming today for this, uh, webinar. It is a subject that is near and dear to my heart, um, one that I would be glad to speak on, uh, it is concerning. The veteran population of our esteemed country. And we're talking about serving those who have served, uh, enhancing holistic care for us veterans. Um, as Michelle mentioned in the bio, [00:04:00] I did serve in the military for six years, uh, with two deployments during Operation Enduring Freedom. And, um, I look back at my career in the military with extreme mixed feelings. Uh, not because of the service. I am humbled and honored to have been able to serve my country and to have done so honorably. Um, especially when I know many that could not. And, uh, I'm also grateful. That my addiction and mental health issues did not completely cripple my career, which they easily could have.

One of the few reasons why I stayed on my feet and was able to receive an honorable discharge, even awarded some medals of service. Because of the support group around me, um, and if it wasn't for family and close, um, battle buddies that kept me on my feet and kept me moving, I would have never made it that far. And I'm very, very aware [00:05:00] of how many of our brothers and sisters don't have that kind of support. So that is why this topic is so vital. And so important for those that are in attendance today to not only reach you, the audience, but to those that, you know, obviously, we're not a lot of people in here. So it's a, it's a tight group of individuals participating today, but that does not mean that the message has to stay here. We can take what we learned today, take the inspiration that hopefully you will find from some of the topics that we'll cover and spread that knowledge. And hopefully what you tell others or those that you share this recording to would be inspired and maybe start something that can help truly save or and change lives.

And that's always my objective when when having the opportunity to speak in a public forum. So I want to thank the Fletcher Group, especially Michelle and Erica for the years that I've known them. They are [00:06:00] absolute champions of their field. And I am very, very happy to once again, be able to speak in this forum. So let's, um. Let's dive right in. I'm a very, um, casual and, uh, um, direct speaker. So, uh, please forgive me if my North Jersey comes out a little bit in this presentation, but, um, not only is this an important topic for me, it's a passionate one. So it's going to be, um, absolutely unfiltered when it comes to, uh, what I, what I feel about this, this subject matter.

And, um, I, I'm glad that you're with me on this journey. I really am. And I hope you enjoy, uh, and what we have to talk about. Some of these topics will be a little difficult. I will give a little disclaimer right off the bat. If you have, um, if there are those in the audience today that are suffering from substance abuse, um, or suffering from a mental health disorder or suffered trauma, there may be some triggering [00:07:00] aspects in this presentation. I do want to forewarn you because I don't want anyone uncomfortable. If you have to walk away, by all means, do so, but these are topics that need to be spoken about. They absolutely do. And as uncomfortable as they are to, to, to say, there may be some in the audience that absolutely need to hear them because they might not know.

And that's what's important. Knowledge um, is in my mind, one of the greatest weapons we have against fear and prejudice. Uh, so this is something that's important for us to get through. So, uh, without further ado, let's go ahead. Let's, let's take this journey together and thank you again for being here. All right.

So, we'll start with some basics, right? Why are Veterans, why are veterans important to us? Right? Why do we, why do we care so much when, when, uh, the military is mentioned or, or, or honored or shown in different events, public events and, and, and parades and things of that nature that we get our chance to see our proud service people in uniform? Well, you know, [00:08:00] it's exactly what you see here uh, on the screen. Sense of pride for many of us in this, in, in our, in our nation. And not just here, mind you, in, in many other nations across the world, the military's looked upon as the embodiment of our values and they reflect the highest standards of which we, we hold ourselves to, right?

That uniform is something that's earned. We all know that, right? That's not something that is just simply given out for filling out an application. Even after you put your name on the dotted line, you still have to earn the right to wear that uniform. And even after you earned that uniform, you continue to earn the right to wear it because you are held to a different standard than other citizens in this nation. And that's why, as civilians, we look to our military and our veterans, uh, with, with that sense of pride, with that sense of inspiration, that sense of almost hero worship, as you would, um, and as it should be. As it should be, because at the core [00:09:00] of it, I do believe that the military represents the best parts of us and for what they are founded for, it is extremely important that we do honor those people that serve and that shouldn't come as a shock for anybody in the room.

Right? I don't think if we were face to face right now, there'd be anybody disagreeing with that. I probably see a lot of nodding heads. Right? And, and, and that's common. Right? When we talk about the military, that's common. There's a sense of unified, agreement, um, especially nowadays, right? It wasn't always like that in this country, but um, nowadays, definitely since, uh, 9 11, there's been a re instillment of, of pride and honor when speaking about the military, uh, which is why the topic of this webinar is so difficult, especially for me, uh, because I was one of those individuals that served right after 9 11, and, I, I [00:10:00] remember the sense of pride everywhere you went, uh, in this country for, for individuals who served, and it was, it was such an uplifting feeling, uh, and it's very hard to describe for someone who hasn't, uh, put on the uniform, but, you know, it was, it was, it was extremely humbling, but at the same time, I was very proud. I was extremely proud to be one of those people that, that had the opportunity to serve this country in such a dire time.

Um, um, um, so, it makes the subject matter a little difficult, um, because there is a major malfunction of social care for our veterans. Um, and, and that's what is the tragic part about what we're dealing with, with this, with this society. We have this sense of almost f... unworldly worship and, and, uh, idolization of our military until [00:11:00] they're not military anymore. And then they cross into that limbo world of what we call veterans, which, again, holds this sense of, of aura, uh, in our, in our society. But when you get down to it, uh, after you look through the, the, the, the film and the mist, uh, there's not a lot of substance there. And that's the tragedy that that's the, the, the real, real hard part about what's going on

with our veterans in this society. Because if you talk to any given American on the street, there's usually very, very good things to say about the veterans of the military. However, why then are we facing so much crisis when it comes to that demographic and that culture? Um, I think a lot of it comes from the ignorance of the American public of what really goes on after you take that uniform off.

And, um, [00:12:00] we're going to explore some of the major issues that the veteran population of this, of this nation are facing right now. And it's, it's something that, um, again, may be difficult for some to hear, especially if there's those in the audience that have served. And if there are, I honor you, and I hope that I honor every one of us that wear the uniform or have worn the uniform with this presentation. Uh, because I am doing this for you, I am doing this for them, and I'm doing this for the voices that cannot be heard today. So, let's explore this malfunction and, and put your seatbelts on, because it's, it's going to be a bumpy ride. Um, so, my... least favorite phrase in the American language is "thank you for your service."

Um, and I know, I know, I know what some people might be thinking right now and I, I'm not blaming the common American for misunderstanding why I say that. Um, because I don't [00:13:00] believe anyone truly has ill intentions when they utter that phrase, right? It became such a commonality, especially for the modern generation after 9 11, right? I mean, there was a movie made about it. And, but that portion of that movie does dive into some of the subject topics that we're going to go into today. And as you see on your screen, that phrase does not reflect what's happening to our veteran population here. in this country. All right, as you see on the top, over 76, 000 veterans are sleeping on the streets.

That's from a survey from VA in 2020. I am sure that that number is much higher than that. Uh, and many of these numbers, I would wager are much higher than what they are presented from the information that I was able to gather before this presentation. Um, but they still make an impact and that's why I put them up here because numbers have power just like words have power. Um, and why as you look at these, it's the [00:14:00] reason why I'm, I'm putting these up are not just to for shock value. I'm going to connect the dots with a lot of reasons why these problems intersect, right? They're not just standalones for different individuals. Many of these problems are connected. And if we fix, if we start to look at the problem as a whole value of obstacles rather than individualistic um, trials that we need to go over as an organization or as a, as a foundation or as a society, and we're wondering why we fix one thing and another falls apart.

It's like trying to plug a hole, like, plug a hole with your finger in a sinking ship, and another one bursts, and you try to put another figure somewhere else, and the problem keeps compiling, compounding, excuse me. Um, it's because a lot of these are connected. We're not, we're not addressing that, in that relative of being, uh, connected as a whole, right? Over 1. 5 million veterans live below the [00:15:00] poverty line. 1.5 million veterans live below the poverty line. And it hurts me physically every time I bring that up because that's been the same since the military was founded, right? There's a very small population of the military that enjoys financial freedom and that's something we should be ashamed of as a country.

I mean, you look at the stats, approximately 460, 000 vets pay over 50 percent of their income to rent or mortgage. And that's from the National Veterans Homeless Services. I, I can attest to that. And I'm going to talk about that in a little bit. Uh, but if you don't, if you think that's an exaggerated statistic, you are sorely mistaken. You are sorely [00:16:00] mistaken because you only need to see the people on the street holding the signs for that proof. And if you need more, trust me, I will give it to you moving forward. Um, this is one that hits very close to home for me because I served during this time, 28 percent of Operation Enduring Freedom or Iraqi Freedom Veterans self reported, and I, I bolded that for a reason, self reported that they had received at least one mental health diagnosis in previous, in the previous 24 months. Now I, I, I highlighted self reported because that's who said something. Right? And if there are any veterans in the audience today, you know, it is not a popular subject to talk about mental health in military society for many reasons. Um, stigma, stereotype one, but many, because many are afraid of what it would do to their careers, right? Um, social media and, and, and, [00:17:00] and cinema do a decent job, decent job of portraying some of those troubles, but those that have served know that, that, that line goes much deeper than whatever, whatever camera or news article could say.

Right? And, and unfortunately, we're still dealing with a pop, uh, a system that penalizes many people for coming forward with their, with their disabilities. Um, and that leads to tragic outcomes, like our next line of facts, which is suicide. And, um, you need only turn on your, your streaming service or your TV or radios if you're old school like me, right? And you know that suicide is a major, major problem for the veteran culture. It's the second leading cause of death for post 9 11 veterans. Now, think [00:18:00] about, through this whole presentation, I want you to do a practical cognitive exercise. As we're going over these stats, remember that first slide, right? I want you to keep that first slide in mind as we go over these, these numbers and these tragedies, because this is the same culture that embodies, that looks at our military with that sense of pride and honor for embodying the best values of us. Yet this is what's happening to those same men and women when the uniform comes off, when they've done their duty. This is what happens. So just keep that slide, .I want you to keep that slide in mind as we go over this, because that's what really hurts the most.

It'd be different if we were part of a population, and I say we because I am part of the veteran population that suffers from a co occurring disorder. I was just a lucky one [00:19:00] to be able to move beyond it. And not only that, have a platform to be able to teach others what's going on, what's happening to us, but I proudly say we. Um, because this is what's happening that many people don't know about, and I know people that have taken their own lives. And it does not get easier, and it can be avoided in many cases, but again, it's about spreading that knowledge, and that's what we're doing today with what we're doing. So, I understand that some of these slides are going to be difficult to see, but they need to be, they need to be seen, but just keep that in mind, that first slide about that pride when we're talking about the tragedies that this culture is, is the veteran demographic and culture is suffering. 8.3 percent of 1.3 million veterans reported with alcohol abuse disorder, the most common drug addiction among vets. Now that shouldn't be a surprise. Why? Because alcohol is legal, [00:20:00] right?

That's, you know, and we are, we are opiate crazed in this country. Right, but we, we, it's, it's amazing what a backseat, the deadliest drug on this, on this Earth gets, which is alcohol.

Takes more lives than any drug combined. All right, wrong presentation for that. Uh, there's a webinar for that, those stats, but trust me, I have those too. Um, and for veterans, it's extremely hazardous because it's available. And if you know anything about military culture, a lot of times encouraged. So, it's quite natural that after we ETS, they, and these problems start to compound, it's what many of us reach for, myself included, to self medicate for the issues that we don't know how to deal with, or not equipped to deal with, and that's what we're going to talk about right now, because why are we falling short?

Why? [00:21:00] It's not like there aren't services out there, right? I put a couple on the screen for you. Disabled American Veterans helps with, with transportation all over the country, right? Obviously, we have the VA. I mean, I'm not going to get into that right now. We don't have enough time, but they try their best. Um, and they are, they are available in many locations, right? Then most states have a Department of Military or Veterans Affairs. I'm in North Carolina. That's their symbol there. And my, my hat goes off to the men and women and peoples that serve in these services. And I know what you're thinking. I know what you're thinking.

You're thinking, Mike, we're trying. We are trying our butts off. I get it. I get it. Right. And you know, for every dollar that you try to squeeze out of the 15 cents you have in your budget, you're doing your best to save lives and you are to be commended. Right. But my point is, with so many of these [00:22:00] services out there, how can we still be falling short for so many people that are still suffering with poverty, suffering with homelessness, suffering because they feel like life is not worth living anymore? And I'm going to get into that because if you've ever seen a presentation that I've done before, I do not present simple problems. I don't do that. I present problems with options because I don't believe in just talking about a problem for 45 minutes.

We all know there's a problem, right? We might not have all the details. Which I'm hopefully going to provide for many people here, but we know there's a problem, right? Unless you've been living under a rock for the last 200 years, there's a problem with the military and how we service the people that serve when their, when their time of duty is, is done. But the problem, the main problem is, is that we don't know why, truly why, these things [00:23:00] happen and how to properly attack these issues, right? Because if you look at these services, a lot of them don't talk to each other. A lot of them don't interconnect. A lot of them don't provide the proper aftercare when their obligations are over. And this is again, I'm not pointing fingers at these organizations in particular, because a lot of it revolves around budget. A lot of it revolves around personnel. There's a lot of bureaucracy behind it. And I get it. All right. I understand it, which is why I say my hat goes off to the people that serve in these, in these industries.

I'm in the industry myself. Even though I serve the civilian population as well, I see a lot of veterans come through these doors. And who do you think that these, that my boss sends when they need counseling, right? Because I'm the only veteran currently employed with this organization, that the organization I'm with. And I do that proudly, but it is very difficult to connect these services, right? And we're going to talk about why these problems compile, okay? Why we're falling short and why these problems compile. So [00:24:00] let's start with

homelessness, right? Homelessness. Why is homelessness such a big problem for veterans, all right? Why are 50 percent more likely to become homeless than any other Americans, right? Well, due to poverty? Lack of support networks? Dismal living conditions and overcrowded or substandard housing? And then there's another 1.5 million veterans who are considered at risk for homelessness. That is a strange statistic for me.

It's a very strange statistic for me, right? Um, until you get down... to some facts that aren't usually considered when you think about this problem. Think about right now. I want you to close your eyes and think about what, when I say homeless vet, what pops into your head, what image pops into your head, right?[00:25:00] I doubt many of you are thinking about a vibrant young person. When, when you have that image in your head, right? But take into account this, 87 percent of new recruits in our military are between the ages of 18 and 24. Now, if you're like me, you thought you knew everything about the world between 18 and 24, but how smart were you really, right?

About living life. Okay, most 18 to 24 year olds in this country are working jobs or those that are lucky enough to get higher education or enjoying college, maybe even master's programs, you know what I mean, provided by good support networks, but our military are learning skills to keep themselves alive, keep their battle buddies alive, protect the infrastructure of this nation. Right? Skills that are very, very adult. Yet, very specific to the jobs that they are required to perform. Okay? And that makes a [00:26:00] difference. Because if you start your adult life in that type of environment, coming into the civilian world is a culture shock. Is a culture shock. Okay? Remember, stay with me.

We're exploring why these problems exist. Right? In our country. All right? Now, if you know anything about the military, if you are active duty, okay, you're provided with some benefits, some resources to live your life while you're serving your country, right? If you're on an active duty base, you know, there's housing allowances, clothing allowances, food allowances, right? Things to help you survive that you don't have to come out of pocket for. Right? It makes a big difference. Because why the American government wants our people in uniform to be able to concentrate on the jobs that they are performing for this country. Makes sense. That's why we're the greatest military in the world, right.

And those allowances [00:27:00] increase the more dependents you have. So that's why you see so many young soldiers, sailors, airmen, marines get married and have kids at such a young age, right? There's benefits to that. Good old American family starting it soon as a military personnel, right? There's money involved in it. Money involved in it. I'm not saying everybody that does it does it for those reasons, but that definitely has an impact for many involved. I, on base at Fort Dix, two of my guys in the scout platoon got married before we deployed. 18 years old, one of them, right? 18 years old. So yeah, it happens. Right? But you think about this now, with all those resources, with all that, that backing, all those, all that support thrown at you while you're serving, you're like, well, Mike, why don't, why don't you just stay in, right?

You know it, you're, you're part of that, that lifestyle, just stay forever. Yeah, right? Except, a lot of people don't join the military with the idea that they're going to serve for the rest of

their [00:28:00] lives. They're doing it for specific, a lot of them do it for specific reasons, right? There's a tragedy that they want to avenge or they, they, they, um, you know, they're doing it for school money or, you know, they're getting, they want to be proficient in a certain, uh, field so they can come out and do it in the civilian world. There's a lot of reasons, right? There's a lot of reasons, which is why you only see about 17 percent of active duty personnel stay in longer than 20 years. Out of my scout platoon of 32 guys I know of two that stayed in longer than 10 years, right? Two that re enlisted twice. Uh, I was not one of them, right?

I tried to start my life out here. Um, so it's, it's not very common for somebody to serve for, like you would in say, a corporation where you move up the ranks, right? No, it doesn't work that way in the military. And if you give half a minute to think about what military personnel have to do for a living, it would make sense. It's a very high stress job, right? So [00:29:00] it's no surprise that over 44 percent of veterans serving post 9 11 reported having difficulties transitioning back to civilian life, right? Generalization of priorities, right? Lack of preparedness and training, right? Lack of transitional support. There was no home economics course.

At least there wasn't when I was in. Right? And a lot of times, especially now, if you even move away from active duty and talk about reserve and National Guard, there's even less of that support when you transition out. So you go from basically a kid, some of them not even old enough, you know, to, to, to buy a legal alcoholic beverage, to having to learn how to live their life. Because you wonder, well, Mike, they're young, where's their family? Think about that for a minute. Where do most of our military come from? They're not coming out of affluent and well preserved homes, right? Many have [00:30:00] extreme hardships they're trying to escape from. I know the neighborhood that I would, grew up in, you know, there was, there was three main ways you got out.

There's three main ways you got out. The military was one of them, right? Trust me, it was not school. So a lot of times, it's a lot of people view it as the only way out, which is why when they get out, they go back to those same dismal living conditions and overcrowded or substandard housing. Especially when they don't know what to do with themselves because of lack of proper preparation. And then we are not towing the line either as the job market and the civilian atmosphere that thanks us for our service all the time, does not provide the type of resources that are equivalent to that air of honor that seems to cultivate around so many other people. Right? [00:31:00] So we look at this, um, stat, right?

The rate of poverty against veteran households is actually lower than that of non-veteran households. 6.6% compared to 13% according to measurements conducted in 2017. Now, why is that? Well, if you, again, if you don't know about the military, a lot of our jobs, our MOSs for short, Military Occupational Specialties, do not translate well to civilian life. And what's worse, higher paying job employers do not recognize military skill sets on the same par as they do as academic training. Practical exercise, if anybody's still paying attention, while I'm talking, you don't have to, you don't have to stop listening, but I'll keep going, but while I'm talking, look at your phones.

If you have, pull up Indeed, or one of the popular job apps, right? Find me a job, find as many jobs as you can. [00:32:00] Find as many jobs as you can that have qualifications that say either bachelor's, master's degree, or military experience equivalent that are paying over 18 an hour. The reason why I say that rate, that's about the rate of an E4 specialist who's been in the military for about two to three years. OK? Try to do that. And let's see, and put them in the chat, put the number in the chat of how many you can find, we'll, we'll tally it up at the end. But most higher paying jobs do not recognize military service on the same level as they do academic. And we're going to talk about that in a minute as well. Despite the years of decorated service, veterans, especially Combat Military Occupational Specialists, like myself, who was a Calvary Scout, right, are forced to work entry level jobs at a fraction of their former pay scales that we had in the military. So you serve your country. You have this idea of coming out and starting a life, living that "American dream," quote unquote, and you have to [00:33:00] endure people thanking for your service while they reject your resume because they say you're not qualified.

You wonder why with those types of odds against people that, that, that duality of existence, how did they go from being these renowned heroes to now I can't even get a job? These things begin to compile. You think that it doesn't affect their social lives, their family lives? Absolutely. It does strain on the family, strain on their relationships. Everything starts to compile. It starts to build in, the pressure builds. Now, many of us do not have the proper capabilities or training to deal with these types of stress. So, we're taught to deal with them the best way we know how, right? Military, we get rowdy. A lot of us. We get rowdy, we get drunk, we play, we play, we play hard, right?

And unfortunately, many of us walk away. with compounded problems. You look at the statistic here, [00:34:00] right? According to, to, to SAMHSA, right? We've got 12%, 2.4 million over the age of 18 of veterans that have, are older, have some sort, some sort of substance use disorder. Then you've got another 3.9 with a mental, mental illness. Okay. Now top that with another 1.1 million, have both. Like me. You're suffering from a mental health disorder and a substance use disorder. Right? Again, without the proper knowledge of how to deal with either. That is 7.4 million veterans living with at least one major health crisis in the U. S. That is four times the population of Manhattan. If that number doesn't stagger you, I don't know what I'm doing wrong. Because I'm from North Jersey, I've been to New York more times than I can count. There's a [00:35:00] lot of people in Manhattan.

There's a lot of people in Manhattan. And there's four times that walking around suffering. That have served this country proudly. Now, let's talk about the other elephant in the room for a minute. And again, this is where I had the disclosure. So if you need to walk away, I understand. We're going to talk about suicide a little bit. Okay, I'm going to talk about it a little bit because it's a major problem for the veteran population, right?

I'm sure you all seen something about it, right? And I'm not going to get into semantics, right? If I say 22 a day, somebody might bring up, oh, that's, that's not completely accurate, doesn't account for blah, blah, blah, blah, blah. One a day is too many. That's my answer for people that actually have the audacity to argue that stat.

One a day is too many. And for it to be the second highest rated cause of death for veterans is [00:36:00] absolutely unacceptable. I don't care what your statistics say. So we're just going to leave that as it is. I warned you guys I get passionate about this. So according to the National Veterans Suicide Prevention Report 2021, survey done in 2019, 6,261 deaths attributed to suicide for veterans. That is reported, ladies, gentlemen, and others. That is reported. All right, 38 percent, a little bit over, were of the age of 55 to 74. We see a lot of that, right, from the Vietnam era. Um, again, our modern generation doesn't even know what that is compared to those poor men and women.

Different country back then. Different country. They did not look at our people who serve with the same light. I don't get into politics. I don't do that. I don't play that game. A man, a man or woman should not have to suffer for serving their country, regardless [00:37:00] of the politics that go on in this nation. And too many from that generation did and still are. And unfortunately, because they lack proper support resources, um, they feel the only way out is death, before their time. So, then we have the other issue, right? Lack of access, excuse me, to proper mental health care, right? Again, all those services we had up before, right?

All these hundreds of thousands of places you can go, but there are many regions in this country that don't have anything nearby. I live in a very rural area in North Carolina. If you don't have a car around here, it's very difficult to get around. And if you are someone that is disabled or suffering from a mental illness or maybe unfortunately have a criminal history or background that you've lost your license to something, it's nearly impossible to get the care you need in areas like this where I live. Uh, and [00:38:00] I am by no means in a exclusive situation here in North Carolina. This is... Obviously a problem all over the country. I've worked with The Fletcher Group, um, many times with Smart Recovery, trying to bring services to rural areas that are lacking support. They do a fantastic job combining our technology for what is needed in these areas, but for the veteran population, it's always, it's not always that easy.

Then you have the cultural, societal, battery, social, societal barriers, uh, to seeking help. I grew up in a culture that, again, I mentioned it was not popular to speak about mental health issues. It's still not. Uh, and then you talk about our military, our veterans, and our first responders. For our first responders out there, you are part of this family, uh, because many of you went from one uniform to another, right, which is why the group I started included first responders, because you are the same cut of cloth. In some ways, your problems are harder [00:39:00] when we're talking about these issues. So, um, there are barriers even for your profession to admit that you have a problem. The risk of losing said profession is very real for many people. Then there's a disconnection from family, friends, and positive resources, right?

When you live in an area that does not support positivity or, or, or good or positive societal growth. It is very difficult to reach out to your social network for support. And then you begin to not accept this lifestyle and you begin to lose hope. And many people don't see a way out for that. And we lose too many every day because of a lot of these issues, and many of them can be avoided.

I want to tell you guys a secret, okay? [00:40:00] I see a lot of statistics, a lot of things that make common sense, right? About why veterans, uh, experience what they experience. I will tell you from personal experience, and from speaking to hundreds of my brothers and sisters in uniform that come out into the civilian world and fall prey to mental health disorder and substance use disorder, our lack of purpose kills us. It literally kills us. It takes away our will to live. When we have that uniform on, we fulfilled something inside us, many of us. We took it off, we came out here, and many of us could not do the same things or equivalent to what we wanted to do with this life because the civilian world does not translate the language that we speak in the [00:41:00] military properly. Now, I have this slide up for a reason, because I want you to see the comparison to another American institution that is extremely similar to being in the military. That is a prison system. What? Like, prison, military, come on, man. Really? Let's take a look. Everything on each side is exactly the same. And please correct me if I'm wrong, I love to have this debate. Released from an institutionalized culture with distinct values, traditions, and cultural practices from a typical civilian life.

Military life and prison life are different than civilian life. I've been to both. I've been to all three actually, so I can tell you they are different. You are given information about basic job opportunities. Now we're talking about when you leave, right? We're talking about when [00:42:00] you leave. And I put in a prison of level two or higher for a reason, for those that understand the judicial system, right? You're given information of basic job opportunities, housing options, and medical support. When you discharge from the military and ETS, you're given a debrief. Information is given to you. Same thing when you leave a prison, you got a lot of stuff shoved in your face when you're walking out the door, but it's up to you to adapt to the civilian lifestyle that is completely, usually contradictory from the formal, accustomed living situation.

One of the major similarities between prison and the military is routine. Routine kept my hope alive in both situations, many a times when I was on deployment and when I was locked up. That routine saved my life, so when I left and could not find a routine that mattered to me, that lack of purpose became extremely defeating, okay? And then both are [00:43:00] subject to stigma, bias, and stereotypes, often detrimental to lifestyle balance. And I'm talking about military personnel suffering from mental health or substance use disorder. Those same heroes that we worship can be looked at as failures when they admit that they are not superhuman, they are not invincible, that they have problems.

But many of us tend to shun that, right? So these misconceptions, many misconceptions of serving veterans. Now we're going to get into what I was talking about, right? Mentally unstable, inherently violent by nature, completely unteachable, that old dog complex, unable to adapt to civilian culture, lack of respect for civilian authority, right? The real reason, right? This comes from an article from Dr. Mark Golston, Don't Hire Veterans. Real Reason Why, right? Well, let's look at some of these, some of these commonalities, why people say they can't hire military veterans on the same equivocal [00:44:00] stance as those that have had academic training.

Remember I told you I was tying all this in. The military skills are not transferable to civilian life, and they're too rigid to change. That is absolutely false. If you are, if you are familiar

with the three block war concept by General and Commandant Charles Krulak, um, military personnel are trained to do multiple types of aspects of a job on many different levels. Where civilians are only obligated to learn about one. For instance, we are learned to train to respond to combat situations, right? Then we are also trained in humanitarian scenarios. And on top of that, also how to endorse and enforce peace, speaking to media, speaking to the public and upholding laws and values after the conflict is over. That is a lot of responsibility for an 18 to 24 year old to learn, but they do it.

But for some reason that doesn't translate to many of our employers, right? Their military background makes them a poor fit [00:45:00] for the civilian business world. Really? Remember I told you to keep your mind on slide number one, respect for loyalty, authority, and willingness to engage problems versus entitlement that we see in the young workforce today. No one is more versatile than a military personnel, no one right? If they have PTSD, they're too much of a risk. They'll do something destructive, really? Job seeking veterans are more aware of their mental health and substance use disorders because it's what's causing all these problems, right? We know it better than anyone.

Therefore, we're more prepared to deal with those stressors than many in the civilian workforce who try to hide it. Right? Or who may be prone to hide these disadvantages to get ahead more quickly. Military personnel don't run from problems. And that's something that the hiring force has an issue with learning, right? There's a famous Japanese proverb, one of my favorites. Uh, it was actually mentioned in a movie I used to love with Sean Connery, [00:46:00] Wesley Snipes, Rising Sun. "Fix the problems, not the blame." All right, so we need to go beyond identifying the needs and create solutions. Nick Goodwin, who was one of the co founders of the Veterans and First Responders community that I established with SMART, used to say, "instead of saying why, start saying what."

Well, what do you mean by that? Well, let's talk about how we focus on the what. Can't we get more veterans to come to services? Well, instead of saying that, say, what can we advertise that veterans might find appealing to our services, right? Like evidence based recovery programs, like I found, which changed my entire life. Practical step by step vocational training that can help individuals learn how to survive in this new culture of civilian life, right? Environmentally and recovery forward transitional housing. I am not talking about putting a house in the middle of an area that is condones and covets the type of behavior and the type of harms that have brought us in the same problems in the first place.

Be aware of where your services are located and how they appear [00:47:00] to those coming in through the doors. That does make a difference. Let's talk about another why, why do vets have to be serviced by other vets? Well, instead of saying that, what's stopping us from starting a veterans program at our location? The answer is nothing. Nothing. Veterans are people too. We just have a distinct culture. If you were somebody in the health field, or a mental health field, or medical health field, you learn cultural competency. It's the same thing with veterans. Learn about us. Learn about our values, and how to translate that, and how to help us.

Understand the biopsychosocial model, right? Hire veterans. Please hire veterans. Understand that their training does translate, period. Okay? Why have we failed in servicing veterans before? Instead of that, instead of looking at all those stats that we've been doing this whole afternoon, folks, talk about what we can do differently. Clean, modern, veteran forward programs. Let's not live in the past. It's not a soldier's disease, okay? [00:48:00] Addiction affects everyone, right? Incorporate peer support. If you have a problem understanding the veteran culture, hire someone from that culture to help translate. Hire a program coordinator for veteran affairs.

What are their qualifications? Not a master's degree from Harvard, surviving military training, and getting out with honorable discharge. And they served proudly and well. They understand what they're doing. They can help you. Cultural competency training for non military veteran first responder personnel, someone, get them in there to train your people so they understand, okay? And understand how you're already making that difference. Point one, you people are here today. I can't see you, but I know you can hear me. I'm loud. So even if you're walking around the house doing chores right now, with this on in the background, you hear me. And that's making a difference because it's going to be there when you leave today. Right? The second point, your interest in creating or [00:49:00] enhancing services for veterans is making a difference.

You didn't have to spend your afternoon with me today. But you did because the subject matters to you. And finally, you see the value in the health and welfare of the veteran culture because we are the embodiment of that pride that this country feels for itself. We are what we should be. And I understand we are a broken nation right now. The military still holds that honor that we can still all live up to. And we see that the people in this room right now find that to be important. And I want to thank you all for that because that matters. So on behalf of the men and women who serve and are suffering today, I want to thank you all for coming and putting your interest in saving these lives that so matter to the American culture.

Thank you very much [00:50:00] all. And with that, I will stop my screen from sharing and we'll open the floor.

[00:50:06] **Janice Fulkerson:** Mike, we do have quite a few questions, so thanks for making a few time, a few minutes at the end for them. Um, question, um, what and how can people on this phone work out to organizations? Like who should be reaching out to partner with veteran, you know, organ, organizations that currently serve veterans? Or if somebody has an interest in doing more, like what's the first step?

[00:50:33] **Mike Hooper:** It's, it's usually, it's not as hard as you would think, Janice. And honestly, um, it's, it's as easy as understanding what you have to offer. Coming up with a, with a, a presentable model of what your organization offers. And then looking at, we all know about the VA, right? We all know about what the VA is, but there's plenty of nonprofit organizations that specialize in serving in Veterans Affairs, but they might have specific [00:51:00] specialized care that they provide. For instance, there might be somewhere that provides, uh, enrollment for free Insurance for veterans, but might not be able to provide counseling right away.

Whereas you might be an organization that have counselors that can provide work pro bono, offer those services, right? Or you may be a transportation hub that wants to offer a discount for veterans, right? Great place to start would be an organization that doesn't have a program like the DAV. So a lot of it is looking at what's in your area and better yet, looking at what's not there. Right? If you're searching your area and you see, wow, there's no, there's no veteran peer support program, right? But we have peer supporters here. We have people that are trained in mental health. Um, why can't we start something like that? As I said in the presentation, you don't have to be a veteran to help veterans.

A lot of times civilians get stuck on that, right? They, oh, well, they're not going to listen to me because I'm not a veteran. It's like any other [00:52:00] culture. When you are ignorant of a culture, what's the best way to learn about it? Talk, ask, have that conversation, right? Share what you are good at, share what you can offer, and ask, how can I be a part of making your life better? And I think that's a great way to start. It's what I've done in the past. It's what I've done here in North Carolina. It's what I did in Ohio. It's what I did in Jersey. So I think that's a great place to start to answer that question, Janice. It's just find out what's in the area and what's not available and what you can offer to fill in the gap.

[00:52:33] **Janice Fulkerson:** And what I find too sometimes, Mike, is that when we do reach out, when we say, hey, I can do something and it looks like this, the timing might not be right, but it might be right a little bit down the road. Somebody might say, hey, I met this great guy named Mike. And he has this program. I think now's a great time to reach out to him. So that connection might not be most immediate or a program might pop out, might not [00:53:00] flourish right away, but eventually those connections make a difference.

[00:53:04] **Mike Hooper:** A hundred percent. Save the business cards, right? We go to these events all the time and you come home with these, with this pack, this C note of business cards, save them. I know we don't always get to them, but yeah, you're absolutely right. You could not be more correct. Yeah.

[00:53:19] **Janice Fulkerson:** We have a suggestion from one of the attendees and he says, Hey, um, smoking tobacco and having black coffee helped me. Can we help military veterans, um, by making sure that they've got access to really good coffee and other things.

[00:53:34] **Mike Hooper:** I mean, exactly right. We want to talk about creating proper supports. Right. And, and, and. We talk about this a lot. I work in harm reduction and we talk about, you know, what can we do to fill that, that void that so many veterans feel when they, when they get to that point of hopelessness, when they get to that point of emptiness, what can we feel that's healthier, which is less harmful.

Then the course [00:54:00] of action that they're taking now, which may be fentanyl, which may be heroin, which may be crack, which may be cocaine, whatever it may be, alcohol, right? Finding those alternatives, right? And it might not be societally healthy. Right? And I'm not saying become a gym nut, you know, I'm saying finding something that is less harmful sometimes is a good entryway to moving forward to more healthier and more productive things, right? A lot of recovery is like training and what that, what that individual

mentioned is very true. You can start somewhere, right? But you don't have to stay there, right? Yeah. Hey, listen, as long as it's hot and it's, it's dark, if you've been in the military, you understand that's, that's pretty much the only criteria.

[00:54:41] **Janice Fulkerson:** That's right. And I'm old enough, Mike, in the military that I remember, you know, the smoke breaks and someone would say, smoke them if you got them. And you got them, right? Culture, right? Yeah.

[00:54:53] **Mike Hooper:** And you had that big green, hard plastic, you know, spout of, of mud, [00:55:00] army mud, or you know, .

[00:55:02] **Janice Fulkerson:** That's right.

[00:55:02] **Mike Hooper:** That was it. Right? You had your, you had your brief, you went on the range. Hey, smoke 'em if you got 'em right. It's part of the culture. Exactly.

[00:55:08] **Janice Fulkerson:** The culture sure has changed some. So a couple more questions for you, Mike.

[00:55:12] **Mike Hooper:** Sure, sure.

[00:55:12] **Janice Fulkerson:** Um, what are some of the key considerations that recovery houses should focus on if they want to start? Uh, incorporating or bringing veterans into their recovery homes or into, you know, uh, things like, uh, is it, can they, uh, blend populations? Does it need to just be veterans? You know, I think you answered some of this earlier about, you know, people are people, but what are your thoughts?

[00:55:38] **Mike Hooper:** I can be very brief with the answer with this. Understand that people are different, right? And veterans, a lot of us, a lot of us are very tactile, okay? We like structure, so don't penalize a veteran who is seeking recovery that has a problem with faith or trust, right? A lot of times, I know where I came from, it was very difficult to latch [00:56:00] on to a program that was faith based in the beginning.

I didn't have a lot of that. A lot of that was, was burned out of me at the time. I was able to restore that over time, but I needed a methodology that I could relate to, which is why evidence based recovery was so effective for me. I am not saying stop faith based training. I'm saying being a, be flexible enough to incorporate other modalities that include a larger audience.

There's going to be a large population of military that are damaged currently with avenues of faith and trust. So giving them something tangible to work on in their recovery, i. e., programs that incorporate CBT, REBT, ACT, all the alphabetical, right, um, um, letters, can sometimes show a lot more, uh, show better results, especially in the beginning, because it

gives you back something to focus on in a structured line by line environment, which they're already used to.

[00:57:00] So that's a great way to do it. And then eventually, a lot of us do come back to the spiritual and faith side, right? Once we restore how to understand and accept what's in here and what's in here and the traumas that we've lived with. We can start building on that, but sometimes it's expected for everybody to be there right away and that doesn't always work. So be flexible. Be flexible for the populations that walk in if you're truly looking to integrate. Um, that's, that's what I would say.

[00:57:23] **Janice Fulkerson:** Thank you for that. Um, we, we do have several more questions. I'm not sure we're going to get to all of them before we end, but, uh, the next one up is how can we seek out and Employee Veterans. Where do we is, you know, uh, uh, we're thinking about like the Labor Department or employment programs. Is it the VA or are there other places where we might find veterans?

[00:57:45] **Mike Hooper:** Work organizations like here in North Carolina, we have a wonderful foundation called NC Works. Uh, it's an organization that's dedicated to help individuals who are, who are facing all types of problems and, and not just the, uh, veteran population, but for all populations, but [00:58:00] they, they have a specific, um, branch that is dedicated to having, to helping veterans find suitable work.

They encourage employers to contact them with job opportunities for veterans, and unfortunately, not enough reach out. So, I would say start there. Start with your local labor forces. Don't always reach for the VA. The VA has a lot going on, and sometimes they're more of the hammer when you need more of a scalpel, right? You want somebody that's specifically trying to connect veterans with a job tomorrow. Right? And a lot of these organizations that work in the community already do that. They just don't have the employers reaching out to them saying, Hey, we do hire veterans. We do pay livable wages. We want to get them in here. What do you got? You know what I mean? So be proactive in looking for those workforces that have a stockpile of resumes this high of people that can do the job if you look past the red tape. Okay? Don't just... shoot somebody down for a good [00:59:00] position because they don't have a bachelor's degree, right? Look at their military experience, right?

If they've had a leadership role in the military, management comes with ease, with absolute ease. I started managing a restaurant when I was 24 years old, right after I got out of the service. So it's, it's, it does translate. It just takes a little bit more, um, depth to understand a little bit more past the black and white of the paper, right? So just reach out to those workforce organizations. Let them know you're there. Let them know you're available and that you're willing to hire.

[00:59:31] **Janice Fulkerson:** Absolutely. You know, there are operations, there's administration, there's leadership. Uh, my MOS was 71 Lima. I made sure people got paid and promoted and had travel orders. I can manage a process. So it's really translating what is that military experience into the, uh, outside the military.

[00:59:53] **Mike Hooper:** Right. And I can tell you that many people don't know how to do that. They see MOS on, on a resume. They have absolutely no idea what [01:00:00] that is, right? People see Calvary Scout. They're like, Ooh, that sounds cool. But they have absolutely no idea what it took to do that. I mean, the arithmetic involved for calling for fire for artillery, right? You know what I mean? Like, and that's something I learned as a young man. So we have the capabilities to do almost anything. It's just being aware enough to know that that skill set is there. You just have to dig a little deeper.

[01:00:23] **Janice Fulkerson:** Yep. Translating them. I think we have time for 1 more question. Uh, and then, uh, I'm going to tell Lily. Lily has a question about the HRSA grant. Um, and how, uh, we're using the Rural Opioid Grant. And I am going to, Lily, take that offline just for a minute, but we've got lots of programs that cover recovery, recovery ecosystem, education, Learning Center courses, developing relationships offline.

For those involved in SMART [01:01:00] Recovery, Mike, who often are sharing information about the program with veterans, what are your suggestions about how we should emphasize any, you know, kind of do's and don'ts, uh, in various situations? Do you have any last minute thoughts about that?

[01:01:13] **Mike Hooper:** Absolutely. And I'll make it very easy for you. Go to smartrecovery.org, go to the veterans website. Contact the, my, my protege and the, the, the, the soldier that took over for me, Holly Paulson, she now runs the Veteran and First Responder, um, or, uh, Community group. She will be more than happy to, to share any resources, any information, any type of advice to help incorporate that level of procedure, we now have a SMART Veterans specific program where we've translated those skills and techniques specifically for the veteran community. So, that was instilled by Johnny Allison and Dr. Charlie Orton over in the UK. And we're now utilizing that here in the US. So contact Holly Paulson from the website, or if not, you can always reach out to me and I'll put you in touch with them.

Uh, you all, I put my email up at the end and, um, but by me, all means [01:02:00] check out smartrecovery.org on the veterans page, reach out to those veterans that are facilitating right now. They are your best source of information on how to connect.

[01:02:07] **Janice Fulkerson:** Great. Thank you, Mike. Uh, there is one more question. I know I said we had only one more, but the question is about other organizations and resources that can help veterans translate things from their MOS into a resume. And I'm going to suggest everyone sign up for our newsletter because our next newsletter is going to have a veterans topic. Um, from a Fletcher Group perspective, we usually host a webinar like this one, and then we follow up afterwards with that topic in our newsletter. So if you haven't signed up for our newsletter, do that.

Thanks everybody for joining us today. It's been fabulous. Thank you, Mike. Uh, and, uh, we'll be in touch everyone. These webinars are available on our website, FletcherGroup.org. Thank you. Thank you all. It's been an absolute pleasure. Thank you.