



HUMAN ASSISTANCE RAPID RESPONSE TEAM (HARRT)[®]

PROCEDURES AND GUIDELINES

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ACKNOWLEDGEMENTS

As a civilian psychologist, I have spent many years developing programs to help people live better lives. Work with private and public organizations has helped me to develop insight as to how the military can benefit from an instrument focusing on human support concepts. Applying this information while functioning as an Army Reserve psychologist has been a rewarding experience. Without the help and support of Brigadier General Richard Lynch, and all the civilian and military staff who assisted with the development of the Human Assistance Rapid Response Team (HARRT), this program would not be as effective a tool in assisting military personnel and their families.

Ideas from family, friends as well as from Dr. William Glasser helped move this project to fruition over the past 10 years. There has been an extensive list of people who helped and supported this program, and I would now like to thank them, one and all, for helping to develop a program that will make a difference in people's lives.

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PREFACE

During the Persian Gulf War, many military units were mobilized, and some units were given only a few days to prepare. When this occurred, immediate human services to personnel and their families were lacking, resulting in unresolved conflicts for personnel being shipped to their duty stations. There were situations where personnel became casualties of the stress resulting from family, personal, financial, job, etc., issues not being resolved prior to deployment. As a result, some personnel were prematurely returned from duty prior to completion of their mission or tour of duty while others were not as effective as they could have been if issues at home were initially resolved prior to deployment.

The HARRT multidisciplinary interventions can result in optimal personnel proactive reaction to the psycho-social-vocational-family-financial realities of deployment. This can result in enhanced and optimal staff performance while deployed.

HARRT interventions are based on *"Choice Theory Psychology"* by William Glasser, M.D. The total HARRT program helps people to examine the many complex facets of their lives (job, family needs, personal and family health, financial, spiritual, psychological, etc.), identify strengths and areas needing improvement, evaluate possible alternatives (choices) for betterment, and learning how to make "good" choices in life, whether in the military or civilian world.

I. PURPOSE

At the request of the Unit Commander, the HARRT inventory is administered to personnel to assist in evaluating readiness for duty and as such, assists the military as a force multiplier. Its intention is:

- To support Commanders in determining readiness of unit personnel for deployment.
- To provide human services support (medical, legal, mental health, religious) on an ongoing basis as well as prior to and immediately following notification to a unit of activation.
- To prevent short- or long-term concerns over family, legal, medical, psychological, and religious difficulties that are inherent when a reserve military person is removed from their civilian life on short notice or when an active duty person is deployed.
- To enhance performance of military personnel when deployed.

II. SCOPE

Conducting the inventory and assessment will include but is not limited to a team consisting of a diverse representation of professional specialists during scheduled interviews with service members. Interviews will be conducted during normal scheduled working hours. The team consists of the following personnel:

- Physician
- Attorney
- Nurse
- Social Worker
- Psychologist
- Chaplain
- LPN
- Medical Specialist
- Psychologist Technician
- Chaplain Assistant
- Legal Assistant
- Family Readiness Liaison / Leader

III. REFERENCES

The HARRT is consistent with preventative measures as identified in the following DoD directives.

- A. DoD Directive 6490.2, "Joint Medical Surveillance," 30 August 1997.
- B. DoD Instruction 6490.3, "Implementation and Application of Joint Medical Surveillance for Deployment," 07 August 1997.
- C. DoD Inspector General Report No. 96-079, "Evaluation Report on the Management of Combat Stress Control in the Department of Defense," 29 February 1996.

IV. RESPONSIBILITIES

- A. **TEAM.** It is the responsibility of the selected team members to meet with the Unit Commanders to determine the method of introducing the team and subsequent interview activities.
- B. **TEAM LEADER.** It is the express duty of the Team Leader to explain the purpose and conduct of the interviews at the unit's formation in accordance with the following guideline.

We are a team composed of different specialists including psychologists, psychiatrists, and other physicians, nurses, social workers, chaplains, attorneys, technicians, and family liaison / leader.

We are here to help identify any personal and family issues or needs that you may have and determine how these needs are being met now, or can be met, and how they will be met if you are activated for duty.

Our purpose is to uncover and address potential problem areas now to increase personnel readiness for deployment and to improve the quality of life of individuals and their families.

You will each be interviewed by a member of the HARRT team. The interviewer will use a standard interview form. You will be asked questions in reference to medical, family support, vocational, social, economic, legal, spiritual and psychological needs. The interview will take approximately 20 minutes.

The interview is voluntary and the information will be treated as confidential unless there is a threat to you, family member or the unit. A summary sheet will be given to you to approve and sign. You will keep a copy of this form and a copy will go to the commander. The more detailed questionnaire will be kept by the HARRT team. Follow-up will be done by the HARRT team and Family Readiness Liaison / Leader staff.

Are there any questions?

- C. INTERVIEWER. The Interviewer is responsible for effectively communicating the purpose of the interview, answering applicable questions, and conducting HARRT interview.

V. PROCEDURE

- A. Interviewer will obtain feedback from the interviewee to determine their understanding and purpose of the interview. Examples may include:
Do you understand the purpose of the interview? Can you explain to me what you think the purpose is?
- B. Interviewer explains the key components of the interview and its purpose.
 - 1. Everything that interviewee discloses shall be kept confidential unless disclosed information is considered to be a risk to the interviewee, family or Unit.
 - 2. Interviewee will be given a copy of interview summary results indicating any areas that may need to be addressed.
 - 3. Commander will be given a copy of the interview summary with interviewee's signature of approval. No personal information will be disclosed without prior written approval of service member unless a risk exists (A & B1).
 - 4. HARRT member keeps the original interview summary plus the entire questionnaire.
 - 5. The interviewee has the initial right to refuse the interview.
- C. Interviewer administers the interview in the following manner.
 - 1. Ask each question in reference to the interviewee, then in reference to interviewee's family member.
 - 2. Each question will reference how things are now and how they will be *if* and when the interviewee is deployed.
 - 3. Identify items that need follow-up.
 - 4. Enter notes as needed next to applicable items.
 - 5. Complete the interview summary sheet including signature lines.
 - 6. Give copy of interview summary sheet with signatures to interviewee.
 - 7. Submit copy of interview summary sheet for commander's book.

- D. Interviewer conducts follow-up activities for non-military resources with the help of Family Readiness Liaison / Leader personnel.
- E. Interviewee makes appropriate contacts with person or organization that can assist with resolving potential problem areas.
- F. Family Readiness point of contact makes the initial follow-up with the interviewee within 3 weeks if the unit has this person. Otherwise, the HARRT team member initiates follow-up.
- G. Team meets to debrief and conduct after action review along with Family Readiness person.
 - 1. Discuss individuals with special needs and ways to meet them.
 - 2. Determine what team specialist can best deal with particular needs and / or issues, and make applicable referrals
- H. Team meets with Unit Commander.
 - 1. Discuss issues or areas relevant to interviewee(s) that need to be addressed.
 - 2. Provide assurance to commander regarding counsel, support, and follow-up of interviewee(s).

MOST COMMONLY ASKED QUESTIONS REGARDING THE HARRT PROGRAM

HOW IS THE HARRT PROGRAM DIFFERENT FROM OTHER MOBILIZATION PROGRAMS?

The HARRT Program has several unique characteristics. The program:

- Encourages early identification of issues by screening interviewees yearly, not just in the weeks before mobilization
- Identifies interviewee and family issues
- Uses a standardized interview process
- Focuses on psychological readiness of interviewee and family to cope with mobilization
- Provides practical course of action for interviewees with mobilization-related concerns
- Identifies local resources for problem resolution and includes follow-up by HARRT Team

FOR WHOM IS THIS PROGRAM DESIGNED? WHAT UNITS ARE ELIGIBLE?

This program is designed for all military personnel in any unit with the potential for mobilization. A mobilization order is not required for the HARRT Team to schedule interviews. In fact, the sooner mobilization-related concerns are identified, the sooner effective solutions can be put into place. The purpose of the HARRT program is to resolve mobilization-related concerns well before personnel are mobilized.

GIVE ME EXAMPLES OF HOW THIS WILL HELP MY PERSONNEL.

Effective personnel are not distracted by problems at home. His or her energy and concentration are focused on the job at hand. Consider the following...

- Your First Sergeant's mother has cancer and requires weekly visits to the medical clinic, but his wife doesn't drive. Who will get that person's mother to the clinic every week when he deploys?
- Your S2 is an intense, driven person— one of your best. He runs 6 miles a day... his only source of pleasure and relaxation. How will he cope in the field, confined to an area the size of a large runway?
- Your executive officer is a successful businesswoman. Her husband recently retired, rather unexpectedly. You suspect he is depressed and may have a drinking problem, although your XO denies this. But she does express concerns about how her husband will manage the family finances if she is mobilized.

THE HARRT TEAM HELP PERSONNEL VERBALIZE THEIR CONCERNS, IDENTIFY LOCAL RESOURCES TO MEET INDIVIDUAL NEEDS, AND DEVELOP A PERSONALIZED ACTION PLAN FOR PROBLEM RESOLUTION.

- Your unit leader arranges for a fellow church member to drive his mother to the medical clinic each week while he is overseas, in exchange for summer yard work when he returns.

- Your S2 signs up for a tai chi class, well in advance of deployment, so he is familiar with the moves and looks forward to the benefits of this relaxing and energizing activity while in the field.
- Your XO and her husband meet with a financial counselor who specializes in retirement issues. Dealing with the financial ramifications of the husband's retirement helps them recognize the effect of retirement on their personal relationship. They enroll in a course at the community college on life stages and positive adaptation.

WHAT TRAINING HAVE THE INTERVIEWERS HAD?

Interviewers receive a minimum of 40 hours of accredited training in choice theory psychology, reality therapy techniques, interview skills, and human dynamics. Most interviewers also have many additional hours of training in psychology, human behavior, psychosocial issues, and general health care as part of their professional degrees.

HOW LONG DOES AN INTERVIEW LAST?

The primary interview takes 15 to 30 minutes. The length of time depends on the complexity of each person's situation. Personnel with mobilization-related concerns also meet with specialists to develop a course of action for resolving the issue. These meetings last about 30 minutes.

WHAT KIND OF FOLLOW UP DO YOU PROVIDE FOR PERSONNEL WITH UNRESOLVED ISSUES?

Personnel with mobilization-related concerns are referred for individual meetings with appropriate specialists during the HARRT Team's visit. Specialists include attorneys, financial counselors, psychologists, physicians, nurses, social workers, and chaplains. During these meetings, the individual and the specialist identify a course of action for dealing with the issue. They also identify local resources that are available to the individual and his or her family. A HARRT Team member will contact the individual by telephone within four weeks of the initial visit to follow up on progress.

WHY SHOULD A COMMANDER BE CONCERNED ABOUT PERSONNEL AND FAMILY READINESS?

There are ample AARs and "Lessons learned" documenting the premature return from deployment of personnel with unresolved family, personal, psychological problems / readiness issues that exacerbated during deployment. HARRT evaluation and intervention promotes resolution prior to deployment.

WHEN SHOULD I REQUEST A HARRT VISIT?

The HARRT team can be requested for any IDT. Integration into a MOBEX provides an excellent opportunity for this readiness evaluation.

IS THIS THE SAME AS WHAT THE COMBAT STRESS TEAM DOES?

No. The HARRT works with the Commander to evaluate the individual / family and overall unit readiness for activation and deployment. HARRT assists personnel to prepare their family, civilian employer, and themselves for an absence. Use of HARRT proactively, prior to deployment, may prevent the occurrence of combat stress and the need for combat stress intervention.

WHY IS THE HARRT TRAINING NOT ON-LINE (INTERNET) AND TAUGHT TO INDIVIDUAL PERSONNEL AS A WEB-BASED COURSE?

The course is very interactive with each participant completing the requisite 15 personal interviews of other participants to develop and refine interview and counseling techniques. Dr. Billings (Ph.D.) provides each participant ongoing feedback about their interview and counseling techniques and makes recommendations for strengthening. These are required to earn HARRT Certification.

WHAT TYPE OF FEEDBACK IS PROVIDED TO THE UNIT COMMANDER REGARDING THE READINESS STATUS OF PERSONNEL AND FAMILIES?

Upon conclusion of the HARRT interviews, a summary sheet for each individual is provided the Commander with notations indicating there is a readiness issue. A member of the HARRT team retains the detailed questionnaire to provide for personnel confidentiality and follow-up of unresolved readiness issues and problems. A HARRT member contacts each individual needing follow-up to determine whether the individual has followed through with counseling recommendations to resolve the issue. Telephone follow-up continues monthly with the individual until the issue(s) is resolved. The Unit Commander is advised when the issue(s) is resolved.