

## Beyond the Dais Podcast: Episode 35 – An Interview with Mt Carmel Veterans Service Center

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**Scott Anderson:** Thank you for tuning in to Beyond the Dais, a podcast about the stories taking place in and around El Paso County, Colorado. I'm your host, Scott Anderson, and today I'm joined by Kirsten Belaire, Director of Behavioral Health at Mount Carmel Veterans Service Center. How you doing today, Kirsten?

**Kirsten Belaire:** I'm good, thanks for having me on.

**Scott:** Good. So before we get started, I want to add that if listeners are interested in more stories about people doing good in and around El Paso County, or hearing from county leadership about local government priorities and how they operate, you can find additional episodes of this podcast on your podcast platform of choice. But to get into things, Kirsten, I was wondering if you can start by giving us some background about yourself and how you came to be here at Mount Carmel.

**Kirsten:** Yeah, so my dad is a Vietnam veteran, and I didn't really hear too much about his service, time in service, until I got older. But right before 9/11, I had met a gentleman and we started dating, and ultimately 9/11 happened, and he was active duty Air Force. He volunteered to be one of the first tours, in response to protecting our country. And so we actually created a relationship via e-mail back then. And I got one of the most beautiful creations from our relationship who's my daughter Vivian. So I've always had a heart and a passion for the military and the military community. I actually did personally want to serve. I wanted to become a pilot. And but back then, basically you couldn't necessarily get in and be a pilot unless you had 2020 Vision, which I did not have.

**Scott:** I feel that pain.

**Kirsten:** Yeah, yeah, I was like, well, OK, so that's not an option. But again, of course, you know, Colorado Springs is so heavily influenced by the military members, veterans or service members that we have. It's kind of like, why not be able to give back in a different way and to be able to serve those who serve us? And so, the position of Mount Carmel opened up and I was really excited. It seemed like a good fit and it's just been a launch from there for the past about 6 1/2 years.

**Scott:** Awesome. So tell me a little bit of Mount Carmel and specifically what you do here, and what is the main mission of your work and the organization's.

**Kirsten:** Yeah, so. Some of the people who are from our community will be familiar with Phil Long Ford, and so actually Mr. Long was a veteran, and he had a philanthropic and just heart for our military community. And then when Mr. J. Chimino took over Phil Long Ford, he, too, is a veteran, and he has a huge heart for our military, and so he wanted to create a location where it would be like... one location where you can have multiple needs met, and so he basically conceptualized Mount Carmel, along with Mr. you know, retired Colonel Bob McLaughlin, and they stood up and conceptualized and have launched Mount Carmel Veterans Service Center. And so, I think the real premise of our organization as a nonprofit is to be able to provide wraparound services at low to no cost for our military community. And what that means is it's not just focused on one need that our clients might have, it's looking at all of the needs, whether it's like "I need a job and I need to translate my DoD resume to civilian resume because I've just transitioned out". Or maybe it's "I am struggling to pay my rent, or my car broke down and it's either between fixing the car or paying the rent" type of ideas or "I'm struggling with housing". That's another program that we have. And then the behavioral health side and from there, those are a few of our core tenant programs. We also have what we call our Green Connect program, and that's where, when people come into Mount Carmel, we want them to feel welcome. We want them to feel like they're coming into a military home connection. And so, our Greet and Connect team really helped people navigate what their needs are and link them up to the services that either Mount Carmel provides, or the partners that we have in the community.

**Scott:** Yeah. And as you mentioned, we have a huge population, both veteran and active duty military here in Colorado Springs. Approximately how many people do you serve here at Mount Carmel, and what communities do you serve?

**Kirsten:** Yeah. So I can't give you the total specific numbers for Mount Carmel as a whole. I don't have that off the top of my head. Potentially we can get that to you. But I will say for the behavioral health side, we've served over, I want to say 3,500 people now. We run a caseload of about 150 people that we're serving every week, and that's just through our classic behavioral health talk therapy, modalities. But we also have our alternative therapies and retreats that we have served even more people in.

**Scott:** So, can you talk to me about how important it is, in your mind, for Mount Carmel to be viewed as an organization that the community can go to in their times of need?

**Kirsten:** Yeah. So, one of the things that we have heard from our veteran and military community is that they don't necessarily want all the time to be, basically, to get their needs met or to see service providers who are not either veterans themselves, or culturally competent. And so, one of the things that we want is to provide a hub where when our service members come, or our veterans, or even the families, they're coming into an environment where it's like, "Okay. These people understand. They understand that the military in and of itself is a culture." The multiple combats that people have seen during this last phase in our like history, I'll just say the last few decades, couple decades, and then also understanding the family dynamics that occur with that. So you have the strengths, and adaptability, and gifts, and talents, and ethics, and hard work that you have from those who've served, and you also have the systems around them

that support them. So again, no matter what, basically we're working to serve or what need we're trying to meet. We want people to feel like in a way they're coming home or they're coming to connection with what's familiar, and what's safe, and that they feel hopefully understood.

**Scott:** So, you mentioned how important it is for the veteran community to be able to come here to Mount Carmel and have someone that understands their experience, and that's one of the reasons why they do come here. If you're someone like me though, who doesn't necessarily, who doesn't have specific ties to the military, how can someone like me empathize with that community, but not have that experience?

**Kirsten:** Yeah, I think there's a few ways. One, of course, is always gonna be potential research, Psych Armor Online, it's an online platform that has free trainings. That's sometimes a good exploratory process. But, ultimately, I think it's important for us civilians who haven't served, to understand that the military culture is a warrior culture. And what that means is, warrior cultures are based on secrecy, denial, and stoicism. And that what they do, and in everything that they do, it has a purpose. It has extreme importance, excuse me, because if they potentially are not doing what they're supposed to do, this could mean breakdowns of missions. This could mean loss of lives, and so, it's not like a typical eight to five job that these individuals go through, right?

**Scott:** Right.

**Kirsten:** Like they're working way beyond eight to five. And it is intense, and it is important. And the sense of community and brotherhood, I think that's something that sometimes families don't understand, is how service members will sometimes feel more connected with their brothers and sisters that they're serving with than their own families because they share so, so many activities, and sometimes extreme experiences. So, when we have people who are either serving, or are veterans, understanding that they're gonna be stoic a lot of times, and they don't want to be burdens because they're supposed to be of the servant heart, and helping and be a support and capable. And that they sometimes, you know, hold it inside. And one of the kind of analogies or stories that I remember somebody sharing with me who had served, was like this idea that you don't go to sick bay unless basically you're profusely bleeding or you're passed out. Like that's kind of one of those things you just, they push through the pain. They push through the stress and the pressure. That's what you have to do sometimes on missions to be mission ready. Excuse me. So. Understanding that that's how that culture has been reinforced. And so, whether people get out early after serving only a couple few years, or whether they've served decades, that mentality is still there. It doesn't mean, though, that they're not approachable. It doesn't mean that they don't have extreme tenderness and huge hearts, and that they're, you know, shut down per se. Some people are. I mean, again, we know with. You know, post traumatic stress disorder, some of the symptoms are the withdrawal, are the dissociation or disconnection of self or whatever, because they're trying to navigate and move forward in their lives after experiencing whatever hardships they have. But that it's just a unique community. And

what I've learned for most every person that I've talked to that has served, is that they really are open to curiosity. And I think as humans, hopefully we're open to curiosity. So, if I don't know the military culture and I'm speaking to somebody who is of the military culture, the military community, I might be like, can you help me understand that, or what does that mean? Or is there anything I should know that that you think I should know about your culture, the military culture, that I maybe don't?

**Scott:** Right.

**Kirsten:** And those conversations are just brilliant opportunities to increase our understanding and knowledge, and again, not again, I didn't say it earlier so that didn't work, but this concept of they, let's say the community wants to be understood, but for the most part, I will say if a civilian says to a veteran, especially combat veteran, "I understand, like I get it. I understand" if you haven't served, they might be like, "No, you don't."

**Scott:** Right.

**Kirsten:** You don't understand. You don't get it.

**Scott:** Of course.

**Kirsten:** And that's okay, because it's not about us saying "I get it, I understand. I've been there," because we haven't.

**Scott:** Right.

**Kirsten:** But I want to know more. I want to better understand what it was like for you.

**Scott:** Well, and I think what's interesting about that is just listening. It seems pretty ubiquitous for any culture you want to understand, right? Listen, listen, and be open to hearing what's said, don't try. And like you said, don't try and say "Oh, I get it, oh, I understand," because yeah, you're right, we really don't, if we haven't been there.

**Kirsten:** Yep. Yep.

**Scott:** But keeping those ears open and be willing to take in that information and hear what they have to say. That's really great, thank you for sharing that. So, after submitting your grant request to the county, Mount Carmel was awarded \$300,000 of ARPA funding. Can you talk to me about what the money has gone to fund?

**Kirsten:** Yeah. Well, as a nonprofit, we are always so grateful for the supports that we can get in the grants that we can get. It has helped us continue forward and keep our doors open, for some years now. So I can tell you that directly, this funding is going to our behavioral health program, and it's going to two positions, one of which is our gateway coordinator. And what that means is this is a person who, when we have screenings, we have a no cost screening process, which means we're going to have somebody from the military community come and we're going to sit down, have a conversation, and from there identify what are their behavioral health needs. Once we

identify what those needs are, we're going to help them, or together with them, excuse me, determine if our program is a good fit, or if somebody else in the community would be a better fit to ensure that their needs are getting met, and met effectively. And then from there, the cool thing is instead of going, "Hey, call these three providers." Hopefully, what we're doing, the plan – let me back that up – not hopefully, we are doing. I just know I have a hard time like speaking from, if I'm not doing the job myself, I give it general-

**Scott:** No, no, I understand.

**Kirsten:** But we are able to say okay. So let's say you are a veteran and you're looking for medication management. You have Tricare for insurance. And you're wanting to get in like soon, very soon. So we have the gateway coordinator position that is doing a lot of the legwork.

**Scott:** Okay.

**Kirsten:** Identifying who in the community has openings, do they take your insurance? Are they going to be able to serve what needs you do have and then getting that warm connection? And then if there are barriers to that, like the, let's say the service person reaches out and well, they're booked or they said no, it's like whoa, okay, well, let's see if we can get you connected with somebody else. So just, kind of that, not hand holding but a little bit of guiding-

**Scott:** Sure.

**Kirsten:** -to support, because I know by the way, we joke because the military has a plethora of acronyms. Well, so does behavioral health. And so if you just look something up on the Internet, you may not know what an LCSW is versus an LMFT versus you know we're using CPT treatment versus EMDR treatment, blah, blah, blah.

**Scott:** Yeah.

**Kirsten:** Make sense?

**Scott:** Well, I recognize LCSW, but that's about it.

**Kirsten:** There we go, right? So it's just a beautiful part of our program that again we just wanted to reduce the gaps and barriers that people had to getting behavior healthcare. And then it also is funding a, it's kind of a cool morph position. So it is a clinical position, and we have an MFT candidate, and so he is a support supervision kind of role for our clinical team. Most of our team are either graduate interns, from the accredited universities, or their licensure candidates.

**Scott:** Okay.

**Kirsten:** Earning hours towards licensure, and then he also sees clients and provides services that way. So, with those two like, it's pretty powerful because through both of

those roles we're actually reaching out and serving more than the average. Just if I was just to say you know you pay me and then I'm going to see 20 clients.

**Scott:** Sure, sure.

**Kirsten:** It's like actually we're serving. Way more than 20 clients through those positions. Yep.

**Scott:** Excellent. And what is some of the feedback you've received from those positions? I mean, again, this is these are positions funded by ARPA funding. And like what has that feedback been having, I guess maybe around campus here at Mount Carmel, like what are you hearing from people about like how great it is to have those positions in place?

**Kirsten:** Yeah, well, I can say for the Gateway Coordinator position, I feel like... a lot of the feedback that we have heard is extremely positive, that it was very helpful, that it was nice to not have to- for example, if I was a client, to go to this provider and then start services, oh wait, nope, that's not what I needed. Let me go to this person, oh wait, whoops, that's not what I needed.

**Scott:** Yeah.

**Kirsten:** So to bypass that, and then also have the support and some of that leg work done for them, and then to again to increase the immediacy of care. So if somebody is on a wait list, like you know we have great partners that sometimes they fill up, and instead of the client feeling like "Okay, well now I have to wait for three months," instead it can be, well then we're going to divert and connect. So, ultimately I would say I think people are happy and we're always, we are always open to critical feedback because it helps us grow. We can't change what we don't know. And then I think on the other portion, Zachariah, if you ask the team, especially the intern and candidacy team. He is a huge support and I know I'm very busy and I'm one of the lead supervisors and so when I can't be there he is. And I can say for most all of his clients that he's had, they really love him. We have satisfaction surveys that are anonymous, and so they're able to write things about each of the clinicians, brother, it's what's working, what's not working and – it's amazing to hear the feedback of man, this person, whether it's the, you know, the clinician I'm talking about, Zachariah, or whether it's others, how the clients are going, "I never thought that I could not feel that anxiety that I felt my entire life." "I never thought that my marriage could be so fulfilling." "I never thought that I would be able to say I had PTSD. But now it's not ruling my life." And just to feel in a way understood, even though we're not saying we understand!

**Scott:** Sure, sure.

**Kirsten:** But to feel understood, to feel supported, and genuinely just, we like the people that we work with. We are so honored. So just that positivity.

**Scott:** Yeah. So, how is working with other nonprofit organizations in the area benefited these programs that you guys are working on?

**Kirsten:** Yeah. So one thing that I really enjoy, and I think it, you know, it trickles down from Mr. Chimino to Bob. But I know one of the statements that Bob has made in numerous meetings over the years is, you know, can't we all just play in the sandbox together?

**Scott:** Right.

**Kirsten:** And I appreciate that because what that says is, is in a way, our mission. It's not about Mount Carmel's glory. It is about the people that we're serving, and their needs are what's most important. And so in order to be able to serve them well, we have had to, and desired to, collaborate and connect with all of the community partners. So here in Colorado Springs, we have a plethora of organizations that are ready and willing and desiring to serve our military community. And they have, because there's just this huge plethora, it's like, why are we going to do exactly what these other people are doing and they're doing so well?

**Scott:** Right.

**Kirsten:** It's like, again, we were supposed to fill in the gap. So we have a lot of partners, I'm just gonna say a lot of partners and agencies that we work with that we are just so grateful for the services that they do, and for that collaborative like relationship, I guess. Yeah.

**Scott:** And so you mentioned a couple of the programs that you work on here. How do you measure the success of those programs?

**Kirsten:** Yeah. So, for us at least on the behavioral health side, we have quite a few kind of measures. So one of them is that anonymous feedback survey that we get and we have you know, numerical measurements. So we're usually running about a 95% satisfaction rating, and we also have what's called an ORS or an SRS, which is an outcome rating scale and a symptoms, or sorry, session rating scale. And so that's more of an immediate how was the client doing, was that session effective for them. We also do contractual goals, which we're measuring out to say if, for example, the client comes in and wants to reduce their anxiety or depression after a certain amount of weeks or by the time that we're graduating the client did we meet those goals. So we do that. But also, I would say, I think the biggest testimony to the successes that we have are, every time we graduate a client because they came in struggling and walked out with confidence and connection. And hope and healing and recovery. And I just, I have so many great stories. Of course, because of HIPAA, we can't give specifics on that.

**Scott:** Sure, yeah.

**Kirsten:** But to put it in a general term, it's powerful when somebody is courageous enough to come in and sit down across from a stranger, and then they actually open up

their lives, no matter how what I call how deep, dark and dirty it is. And they can come away from that debilitating depression where they weren't able to get out of bed, or that like really intense anxiety that was keeping them homebound, or disconnected from social engagements or people. And after, once their graduation, you know, it's like, "Oh yeah, I'm going to the gym" and "I'm, I've got a new job" and "by the way, I'm dating" or you know, all these great things. So I think that that's a good testimony, and that people do refer to us after having experiences with us. I think that says a lot too, because it's not even just about us tooting our horn of course.

**Scott:** Sure, sure.

**Kirsten:** But it's, if we serve you well and you say, "hey, I trust Mount Carmel, go see them," that means a lot. And again, I think, and I just always want to reiterate like we are, because we're an education-based program, at least on the behavioral health side, we are so open and willing for feedback.

**Scott:** Yeah.

**Kirsten:** And again, that's just growth opportunities for us. So we're hungry for that to be the best we can be.

**Scott:** Yeah. And seeing that success, what does that do for you and your team?

**Kirsten:** Yeah, well, it's a motivator. It's definitely a motivator. I think it reinforces, so everybody who's on our team is like, "I have a passion for this thing called counseling" and no matter where they are in their journey, I think it's a reinforcement of "This is why I do this job," and it makes all of the challenges or the struggles or the really just hard stories or feelings of overwhelm that sometimes as providers we can feel and makes it all worth it. Because, we would do all of that and more for just that one person to experience that positive graduation, because it feels that good.

**Scott:** Yeah, and I think, so, my wife works in the social work field and so I have a small understanding of this because she'll come home and she'll tell me stories of her day. And to hear you describe that, your team and yourself, you're taking on someone else's burden. And anytime you do that, plenty of people do that, in a lot of different ways, right. But anytime you do that, and then can see that change in the other person, right. I think to me that's a lot of when she talks about it, she's like, yeah, like I take, I take on a lot, and sometimes it's you know, nothing changes, right. And sometimes maybe it can get worse, because it's a process. But when, you take that on and it does change, I think kind of how you mentioned earlier, it makes it all worth it, and it allows you to get through to that next one.

**Kirsten:** Right, and actually, if you don't mind, I'll just, I'm such a semantics person.

**Scott:** Please.

**Kirsten:** It probably drives people that I work with crazy! But, instead of saying we take on a burden, because I don't think that we take on a burden, personally.



**Scott:** Okay.

**Kirsten:** And I also know that a lot of our military community definitely do not want to be burdens.

**Scott:** Sure.

**Kirsten:** So, I would say instead we, we intentionally create the space and work really hard to be focused and open to whatever needs to be laid out in that therapy room for somebody to recover. And sometimes that's really heavy.

**Scott:** Yeah.

**Kirsten:** And it is hard and it's painful to see the suffering of the person that you're sitting across from. And it can be, to a degree, sometimes draining. Not that that person is draining. Not that their stories are too much. It's just, it's hard to witness other people's suffering. But that's what we're trained to do. And the cool thing is, again, it's always an honor to sit with somebody, hold that space for the suffering, and then watch the light come in with every choice and epiphany or tear that they're shedding or however that works, you know.

**Scott:** So yeah, yeah, you said that way better than I did.

**Kirsten:** No, no!

**Scott:** Which is why you're the professional.

**Kirsten:** No, no, it's just that burden thing!

**Scott:** No, no, I appreciate you. I appreciate the semantics. So thank you. So, for those who may be seeking services, how can they go about obtaining those?

**Kirsten:** Yeah, so we do have a website. It's, if you just go online and go to [veteranscenter.org](http://veteranscenter.org). So that's veterans plural center dot org. And then we also have a main line which is 719-772-7000. I would say call the Greet and Connect team if the online like platform or whatever is not your jam, or if our website is overwhelming. Hopefully it's not too overwhelming, but either way, you know, reach out and see what services we might have for you.

**Scott:** And then for those who are listening and they're like, "I love this," "This sounds great. I want to be a part of it." How can they get involved? Where can they start?

**Kirsten:** Yes. So I would say again, if you go to the website, I think that there is a volunteer and or donation tab. But if that doesn't work, just call the Greet and Connect team and they can help navigate and support you in that journey of giving back.

**Scott:** Yeah. And before we close, we've talked about it quite a bit here, but I want to give you an opportunity to, if there's anything else you want to add, maybe something you haven't had a chance to talk about, or maybe reiterating something you really want to drive a point home. Is there anything else that you want to share?

**Kirsten:** Yeah, I think the only thing that I want to share is that over the past 6 1/2 years, one of the things about Mount Carmel Veterans Service Center that has- what do I want to say?- has been like glue, where my feet are stuck here, really is the mission and the passion that the entire team here has. And that's not just behavioral health. I mean, it's across the board. And so, all of the veterans that work here, all the civilians, it's, we do have a deep desire to, leave, you know no one left behind type of thing. And we may not be able to meet every single need because again like our behavioral health, we're not a crisis resource. So, we're not a crisis line, we're not open 24/7 type of thing, but that, hopefully, we could at least somehow connect people to what those needs are. And so it's pretty awesome to be a part of this mission and it's been very rewarding and I'm just looking forward to hopefully many more years.

**Scott:** Right. Well, thank you, Kirsten. I appreciate you taking the time to meet with me today and for all the work that you do here at Mount Carmel, so thanks for having me.

**Kirsten:** Thank you so much, Scott.

**Scott:** If you're interested in listening to additional episodes of Beyond the Dais, be sure to look for us on Pod Bean or wherever you get your podcasts. Thanks for listening and we'll see you next time.