



To heal the hidden wounds of war

Zach Iscol
Headstrong Project
655 Madison Avenue, 18th Floor
New York, NY 10065

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Since our founding in 2012, the Headstrong Project has been making great strides to solve a simple, but daunting **question**, posed by a founding Headstrong Board Member and highly successful finance executive...

"If I can receive immediate, expert mental health care treatment; why can't a veteran?"

That question led us to develop a program that provides world-class, confidential, individually tailored, cost and bureaucracy free treatment for Iraq and Afghanistan veterans suffering from the hidden wounds of war. Our **answer** is not possible without a patriotic and philanthropic donor base that values an increased quality of life for America's military all while respecting the long-term societal benefits of a mentally stable and healthy local-veteran community. Thank you for considering our vision for veteran mental health treatment and recovery.

Video Link: Please watch the 4-minute Headstrong Project video testimonial (click or copy into your browser <https://www.youtube.com/watch?v=To4r0cQttcQ&feature=youtu.be>)

Sincerely,

A handwritten signature in black ink, appearing to read "Zach Iscol", with a stylized, flowing script.

Zach Iscol
Founder & CEO, Headstrong Project
Former USMC Captain and Iraq War Veteran



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THE HEADSTRONG PROJECT
(Executive Summary)

Use of Proceeds	Provide individually tailored mental health treatment to post-9/11 veterans	
Capital Requirements	\$5,000 expected budget (pays for the treatment for 1 veteran for 6 months)	
Capital Duration	6-month treatment budget (estimated on historic treatment durations)	
Capital Restrictions	1) 100% mental health treatment only (no overhead, no event costs, or admin) 2) NYC, Southern California, and Houston areas (within driving distance) 3) Post-9/11 combat veterans	
Partnership Engagements	The Headstrong Project routinely conducts information sessions in the markets it serves. Headstrong envisions conducting information sessions for post-9/11 veterans with partners ranging from donors to partners in the markets that it serves or operates within. Headstrong is devoted to begin treatment for veterans in new locations and partners can help develop those markets.	
About Headstrong	In partnership with Weill Cornell Medical College, the nation's leading mental health care centers, Headstrong developed a 1 st of its kind, individually tailored comprehensive treatment program for Post-Traumatic Stress Disorder (PTSD); Addiction Treatment; Anxiety & Depression; Trauma, Grief and Loss; and Anger Management. Since 2012, we have demonstrated a successful treatment program, eliminating or materially decreasing symptoms of mental health challenges like restored sleep, improving family communications, reducing substance abuse, and weaning of medications.	
Veterans Treated	The Headstrong Project has treated over 200 post-9/11 veterans to date and has provided more than 3,000 clinical treatment hours.	
Measurable Results	86% better sleep 89% fewer flashbacks and nightmares 95% improvements in job and/or education, 89% used less drugs or alcohol 78% reduction or elimination of medication	86% less hyper vigilant 91% improved mood 76% improved relationships 92% reduced suicidal ideation
Expansion	Following the advice, guidance and strategic direction of Morgan Stanley, the Headstrong Project expanded clinical services to Southern California and will soon begin treatment in Houston, Texas. Teaming with a select group of clinicians in Temecula, Oceanside, Encinitas, Poway, San Diego, and Houston, Headstrong began providing group and individual therapy. The expansion has been highly successful and provided the framework and roadmap for our expansion to new markets. In preparation for Houston, the Headstrong medical team spent considerable time and effort researching and screening potential clinicians in the Houston market. We found a terrific partner in the Menninger Clinic (outpatient services), one who shares our vision and values.	



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Care

In partnership with local expert mental health care providers, we have a fully integrated treatment model that includes case planning, treatment, management, supervision, oversight, and funding. Acting as a case manager and single-payer, the Headstrong will pay providers directly for the treatment costs (a pre-negotiated rate) of Headstrong patients.

Community

Headstrong has and will continue to build partnerships with local veteran service organizations (VSOs) to market the mental health services to local veterans. This is necessary to the success of the program, because Headstrong's number one referral source is other veterans that have successfully completed treatment.

Cases

Within 48 hours of a veteran initiating contact with the Headstrong, a Headstrong clinician will screen and evaluate the patient needs. The Headstrong clinician will assess the veteran for appropriateness for treatment and will connect the veteran to local ongoing mental healthcare.

Barriers to Care

Post 9/11 Veterans face long wait times through the VA
Up to 60 days for "new" patient mental health care (screening + appointment)
Long "new" patient evaluation / screening for appointments at VA = 21 days
Long "new" patient wait times at VA = 35 days (not including screening)
Long "existing" patient wait times at VA = 3.5 days
Veterans seeking mental health at VA = 7,599 (21 / day)



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HEADSTRONG PROJECT OVERVIEW



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Thank you for considering our vision for mental health treatment and recovery for post-9/11 veterans. We have outlined more details on the history of the Headstrong Project, goals, clinical practices, family support, operations, expansion and issues for your review. In partnership with a leading capital source, the Headstrong Project is poised to make a material difference in delivering treatment to veterans.

I. PTSD AND HISTORY OF HEADSTRONG PROJECT

Headstrong Project's mission is to provide *cost-free, stigma-free, and bureaucracy-free* mental healthcare to post-9/11 combat veterans.

The numbers are staggering. Over 300,000 Iraq and Afghanistan veterans report symptoms of Post-Traumatic Stress Disorder (PTSD). The VA estimates we lose 20 veterans a day to suicide and the Department of Defense reports 30-50 active duty troops take their lives every month. For each service member we have lost in combat, 25-30 have taken their own lives. These numbers also do not reflect increases in dangerous and destructive behaviors among veterans - such as domestic abuse and substance abuse.

Beginning in 2012, under the leadership of Zach Iscol, a combat decorated former Marine officer and Iraq veteran of the Battle of Fallujah, and Dr. Ann Beeder of Weill Cornell Medicine, a leading psychiatric and public health expert, we launched a long term project to provide confidential cost-free, stigma-free, and bureaucracy-free mental healthcare to post-9/11 combat veterans. Our model is veteran led and driven. Treatment plans are a collaborative effort between care providers and the veteran seeking help. Veterans who have successfully completed treatment are part of the team, advising on veteran engagement, acting as peer navigators and advocates, and taking part in long term strategy development.

Headstrong Project became a registered 501(c)3 organization in 2012 and is 100% compliant with all rules and regulations being a 501(c)3.

II. GOALS OF HEADSTRONG PROJECT

Headstrong Project has the vision to provide the correct treatment and is expanding to markets across the country to ensure that this generation can meet their potential in life. The key is continuing our growth of the brand to other markets with partners that understand the magnitude of having our youngest generation of veterans become mentally healthy.

The program's goal is to engage veterans and provide treatment to help them reduce the crippling symptoms associated with combat PTSD, including suicidal ideation. Veterans who receive tailored and consistent mental health treatment then experience measurable improvement in their emotional well-being, they enjoy longer and better sleep, better home and work relationships, and they experience a reduction in harmful behaviors including excessive substance use. They are able to go to school, get jobs, and maintain sobriety from alcohol and drugs when indicated.

III. CLINICAL PRACTICES

Headstrong Project and Weill Cornell Medicine bring together clinicians who are specifically trained in trauma and PTSD. These include psychiatrists, addiction psychiatrists, psychologists, and licensed clinical social workers. Veterans in need of help are identified through direct veteran to veteran outreach, veteran service organizations, Department of Veterans Affairs, self-referral through ads in social media, and Headstrong Project's website (www.getheadstrong.org). Once referred, veterans are screened, assessed and then the



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veteran and clinician together craft a course of treatment that is tailored to the individual veteran's wants and needs following the three tenets of trauma therapy; stabilization, memory processing, and reintegration.

Cognitive Behavioral Therapy and EEG Neurofeedback are the primary methods in the stabilization process. The goal is to ensure that the veteran's anxiety is brought to a level where memory processing can begin. Headstrong Project utilizes the evidence-based practice of Eye Movement Desensitization Reprocessing (EMDR) for memory processing and is the cornerstone therapy of the program. EMDR therapy was implemented as the cornerstone therapy because it allows the veteran and the clinician to work as a team through each traumatic event. It is not a regimented or an aggressive form of therapy, but a method that works into the tailored model of the program. Results from EMDR work very quickly and it is a therapy that is used around the world for a variety of trauma victims; rape, abuse, natural disasters, etc. When the traumatic memories from the veteran have been processed, then the reintegration process will begin. Reintegration is when the clinicians become "life coaches" for the veteran. Veterans begin to become a part of a community again, redevelop work skills, and develop their next passion in life.

The final piece of the clinical practices and mindset is that Headstrong Project's entire program takes mind-body therapy approach. We understand that there are certain activities that will put the mind at ease, keep the brain focused at a correct level, and physical activity is part of healing body and mind. These activities include, but are not limited to yoga, canoeing, and rock climbing. We have seen tremendous strides in our veterans in the areas of stabilization and reintegration when they participate in such activities. In summary, Headstrong Project's clinical practice is a tailored approach using the three tenets of trauma therapy with a mind-body therapy mentality.

The methods of our program have shown extremely positive data outcomes. Clinical outcomes for our clients are as follows: after treatment 86% reported better sleep, 89% had fewer flashbacks and nightmares, 86% were less hyper vigilant, 76% reported improved relationships, 92% had reduced suicidal ideation, 91% had improved mood, 95% had improvements in job and/or education, 89% used less drugs or alcohol, and 78% required less or no medication for their symptoms.

IV. FAMILY SUPPORT

We understand at Headstrong Project that not only does the veteran suffer from PTSD, but this can also affect the family. We recognized to make our program as effective as possible for the veteran, that educating spouses on the issues that come with PTSD would be of enormous value.

The same confidential *cost-free, stigma-free, and bureaucracy-free* approach carries into the group therapy that we provide to spouses. The purpose of this group is to educate the spouses on what their veteran is going through, to give them a community that is going through similar issues at home, and allow them to gain advice on how to handle certain situations that have occurred from the PTSD.

We have seen tremendous increases amongst the couples involving their trust, communication, and commitment to one another. The spouse group therapy empowers the couple to become a team again to work towards a healthy lifestyle.



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V. OPERATIONS

Mental health is a highly stigmatized arena in this country. This stigmatized feeling is exponentially higher in the veteran community because in a combat zone, service members must “tough it out” and this is what they were trained to do. Many veterans have learned that one doesn’t discuss symptoms of PTSD, that physical injuries you can see are more “real”. They fear being labeled crazy, or that having a diagnosis of PTSD will impact on employment opportunities. Warrior culture can prevent veterans from wanting to talk about their experiences; many fear overwhelming and upsetting themselves and others. Often veterans find it difficult to mourn fallen brothers and sisters, and they may expend much of their energy keeping thoughts and feeling at the perimeter of their consciousness. Some veterans have been found to self-medicate with alcohol and other drugs, resulting in consequences such as loss of employment, loss of relationships and sometimes their life.

As mentioned before, Headstrong Project recognizes that there are evidence-based, effective mental health treatments and protocols that can immediately impact returning combat veterans for the better. The first challenge is reaching those veterans, engaging them, and retaining them in care. Our first goal is to enhance the mental health of wounded service members, and to help them foster healthy readjustment to civilian life. By reducing PTSD and emotional symptoms and increasing mental wellness, we are helping veterans regain part of themselves that they feared they’d left on the battlefield.

When a veteran calls our program, or submits their contact information on the website, we respond personally within 48 hours. This means calling the veteran, and/or emailing them, and engaging them in a conversation that serves to explain that we understand what they are going through, and that we can help.

The intake call is the first point of human contact. It is followed by an in person psychiatric assessment, and the development of a tailored treatment plan. The tailored treatment plan will first evaluate whether this veteran is “high” or “low” functioning. High functioning veterans are typically those that have a job or going to school, have meaningful relationships, and are not using drugs and/or alcohol to an abusive point. Low functioning veterans are those that are using drugs and/or alcohol at dangerous levels and are unable to accomplish tasks that would deem them productive citizens.

We understand that substance abuse is an issue amongst veterans with PTSD because it’s a quick way for veterans to reduce their symptoms. Dr. Ann Beeder is an expert in substance abuse and she has been able to bring on the most highly qualified substance abuse counselors on staff to treat the veterans. Veterans that are not suffering from substance abuse will work with their clinician to reduce their symptoms from all the modalities mentioned previously.

We do not put a cap on the number of sessions or services we provide. Some veterans may utilize us in the short term, to return later if their needs change. Many stay and progress through therapies, working on a variety of issues on the road to recovery. Veterans become “graduates” from our program when the clinician and the veteran come to a decision together that the veteran has returned to the healthy level that they aspire.

Since this program began in 2012 there has been tremendous growth and success. After the initial pilot year, measurements of growth in the program began. In 2013, Headstrong Project registered 155 one-on-one therapy sessions and 2015 saw that number increase to 1071. This is approximately a 590% increase of one-on-one sessions. The reason this number has multiplied is because veterans see life improvements so quickly and they continue to come back for help. Data outcome measures such as sleep, mood, and suicidal ideation are dramatically improved within only a few sessions. Then veterans are eager to improve other aspects of their life through their tailored program.



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Veterans of Headstrong Project become so thankful for their new healthy life and many volunteer as “ambassadors” of the program. They will speak on panels at various public speaking engagements about their success, they will act as mentors to new veterans in the program, and overall will stay involved in helping drive the success of the program.

In addition to clinical operations, Headstrong has a highly efficient centralized back office focused on compliance, administration, and fundraising. The partners and processes we have in place allow the Headstrong to scale efficiently to maximize program benefit.

VI. EXPANSION IS UNDERWAY

While the Headstrong is focused on developing and executing a successful treatment program in Houston, we are fortunate that our model and treatment program has realized patient adoption in new markets. The successful expansion is a direct result of a high quality program and high quality strategic partners like Morgan Stanley. In 2015, the Headstrong Project was selected as the winner of the Morgan Stanley Strategy Challenge (out of 500 applicants) earning the Headstrong both capital and pro-bono strategy consulting. This consultation provided valuable insights on how to thoughtfully and deliberately expand the Headstrong services into new markets as not to lose any of the key ingredients that makes the Headstrong program so successful.

In July 2015, following the advice, guidance and strategic direction of Morgan Stanley, the Headstrong Project expanded clinical services to San Diego and Riverside Counties in Southern California. Teaming with a select group of clinicians in Temecula, Oceanside, Encinitas, Poway, and San Diego, Headstrong began providing group and individual therapies. The expansion has been highly successful and provided a framework and roadmap for our expansion to Houston. In preparation for Houston, the Headstrong medical team spent considerable time and effort researching and screening potential clinicians in the Houston market. Through this process we found a terrific partner in the Menninger Clinic (outpatient services), a partner who shares our vision and values.

In addition to partnering with world-class clinicians, like Weill Cornell Medical College, Menninger Clinic, and our Southern California clinicians, the Headstrong Project partners with world-class veteran service organizations (VSOs) to expand and deepen the Headstrong’s presence, brand recognition, reputation and rapport within the veteran community. These networks are instrumental and necessary to reaching a troubled veteran.

VII. CORRECTING LARGER VETERAN ISSUES

Local and Federal governments have been trying to mitigate major veteran issues such as unemployment, domestic violence, substance abuse, and homelessness. Mental health is a pre-requisite for all of these large societal issues. Headstrong helps veterans regain their emotional well-being and self-esteem so they are in a better position to pursue their life ambitions all while contributing to and once again serving society.

For more information, please go to www.getheadstrong.org