

# The Military Family

A Newsletter Focused on Enhancing Awareness of Military Families

Volume 1: Issue 1 September 2009

## Resources for Clinical Practice

**Sesame Workshop:** Bilingual educational outreach initiative designed for military families and their young children to share <http://archive.sesameworkshop.org/tlc/>

**After Deployment:** <http://www.afterdeployment.org/>

**Army Behavioral Health:** <http://www.behavioralhealth.army.mil/index.html>

**National Guard Family Program:** <http://www.jointservicesupport.org/fp/>



Please feel free to contact the **Institute for the Health and Security of Military Families** for additional support or outreach/psychoeducational materials.

### **Real Warriors Campaign**

The Real Warriors Campaign combats the stigma associated with seeking psychological health care and treatment and encourages service members to increase their awareness and use of these resources.

<http://www.realwarriors.net/>

## RESEARCH UPDATE:

### A Look at Traumatic Brain Injury (TBI) and the Family

Instances of traumatic brain injury (TBI) have been on rise as more and more soldiers become subjects of Intermittant Explosive Devices (IED) and other combat-related attacks. Based on existing data, veterans' advocates estimate that between 10 and 20% of Iraq veterans, or 150,000 to 300,000 people, have some level of TBI. Among wounded soldiers, the rate rises to 33% (Brain Trauma Foundation, 2009). From 2003-2005, the Defense and Veterans Brain Injury Center (DVBIC) at Walter Reed Army Medical Center screened 862 soldiers who had returned from Iraq or Afghanistan and were deemed as being at risk for brain injury. Of these soldiers, 51% were found to have a brain injury (DVBIC, 2006).

In many cases of TBI, the family must assume the major responsibility for the injured person's long term care (Kosciulek, 1996). Unfortunately, the burden of this responsibility can result in strained family and marital relationships, a decline in quality of life, and increased social isolation of the family (Curtis, Klemz, and Vanderploeg, 2000; Ergh, Rapport, Coleman, and Hanks, 2002; Kozloff, 1987, 1996; Perlesz, Kinsella and Crowe, 2000). The additional burden of financial strain related to medical and prescription bills and legal expenses adds yet another layer of strain to the already stressed family unit. It has been suggested that the impact of head injury is at least as great for family members as it is for the injured person and that family members are often *more* distressed than then injured person (Kosciulek et al., 1993).

Kosciulek et al. (1993) suggested that TBI families experience a pileup of demands that lead to heightened stresses and strains on the family system. Among these stressors are: (a) the head injury and related hardships over time; (b) normative transitions such as the death of a family member, aging children, career changes, retirement, etc.; (c) prior strains accumulated over time; (d) situational demands and contextual difficulties such as transitioning from one service center to another; (e) consequences of the family's efforts to cope such as suppression of feelings and frustration; and (f) intrafamily and social ambiguity that emerges as a result of the family altering its structure, roles and responsibilities. Additional stressors reported by Curtiss, Klemz and Vanderploeg (2000) involve the changes brought about by the need for the caregiving spouse to assume a singular head of household role for decision making, childrearing, household maintenance, as well for decisions involving medical and legal issues.

## The Military Family Provider Network of Kansas

**Thank you** to all of the providers who have eagerly accepted the challenge of servicing our military families! The response to MFPN has been outstanding, and we are so grateful to have such a willing group of providers in Kansas.

### What has been done?

Funding to support efforts to establish the Military Family Provider Network of Kansas (MFPN) has been made available through the Kansas National Guard (KNG). Recruitment efforts for MFPN of Kansas have been underway since June 2009. To date, over 100 mental health and substance abuse providers have elected to participate in the network.

This includes a combination of clinicians in agency settings, including several Community Mental Health Centers, as well as private practitioners.

Part of our recruitment efforts have included working directly with the Governor's Military Council Subcommittee on Mental Health and Substance Abuse, which was tasked with developing a statewide network by the Governor. K-State will be represented on this committee, which has indicated an interest in the progress already made by K-State in developing and recruiting members for the MFPN.

### What are the next steps?

Kansas State University, in collaboration with the KNG, is currently developing a training for MFPN providers that will orient them to the military culture, special issues facing military families, and treatment recommendations. This training will be made available later this fall. Training dates/times and location will be announced as soon as they are confirmed. Every effort will be made to make this training as convenient as possible for providers across Kansas.

We will also be expanding the network to include healthcare professionals, clergy/ministers/pastors, school personnel and administrators, and others who may be the first points of

## WARFIGHTERDIARIES

WarFighterDiaries.com is a social network provided as a resource to our Armed Forces. It's designed to foster relationships with uniformed service members, through short videos of actual war stories, and real life experiences to build a resilient team. Learning from people that know what's involved when you're fighting for your country is the best path to follow toward success in your career. The goals of WarFighterDiaries.com are to give first hand advice to our resilient teams and help them cope with issues that only they encounter. These stories are about preparedness, training, combat experience, career, stress, family, and how we endure and grow learning to be resilient. Learning to be resilient is a journey that we take as a team.



Institute for the Health and Security of Military Families

**The Institute provides development and management of programs that are committed to furthering our knowledge of military families such as:**

- Specialized training on working with military families
- Comprehensive research on military family issues, such as the effects of trauma on deployed personnel and family and the impact of deployment on marriage, children, employment and family income.
- Services to the State of Kansas and the nation that address current and future needs of military families.

**The Institute is located in the School of Family Studies and Human Services, College of Human Ecology, Kansas State University, which is home to a unique cadre individuals from diverse disciplines with an impressive track record in research and service programs addressing the health and well-being of military personnel and veterans, including:**

- Research on the effects of trauma on deployed personnel and family members
- Studies on the effects of deployment on marriages, children, employment, and family income
- Research and training programs on violence prevention in military families
- Counseling and conflict mediation for families of military personnel
- Speech and language services for Traumatic Brain Injury (TBI) and other disorders
- Programs for children and youth of deployed service members
- Extension services to military personnel and family members
- Research and education on the effects of Desert Storm and OIF/OEF service on veterans and their families
- Development of the Military Family Provider Network of Kansas (MFPN)
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Visit us at [www.militaryfamilies.k-state.edu](http://www.militaryfamilies.k-state.edu)



## CLINICAL CORNER: *Tips for Communicating with Children about War and Deployment*

- ✓ Be careful about sharing your emotions with children. Some parents share too much (losing control in front of kids) or share too little (no emotion or giving the message that you can't talk about it). Children take their cues from you.
- ✓ Keep up the routine. Activities, such as games, schooling, bed times, are important to keep regular. Continue to celebrate birthdays or other special occasions with enthusiasm.
- ✓ Have your spouse before or while deploying record chapter books on a cassette recorder to be played back to young children. This helps with separation and attachment issues. Likewise, help your children create scrapbooks, video or journals to send or share upon return.
- ✓ Listen to your children and their concerns. Children may think a lot and have worries or concerns about their parents that are difficult to express. Be available when they are ready to communicate.
- ✓ Limit television and other media coverage of the war to help reduce anxiety and worries.
- ✓ *Take care of yourself!* Find time to rest, see a movie or do something just for you. Accept help from family or friends if feeling overwhelmed or in need of time out. We are all more vulnerable to stress when we are tired, and can manage better when we are rested and in tune with ourselves.

(Excerpt from Helping Children Cope During Deployment, Courage to Care campaign, Uniformed Services University of the Health Sciences, [www.usuhs.mil](http://www.usuhs.mil))



Military OneSource is a free 24/7 information and referral service available by toll-free telephone and the Web to active duty, Guard, and Reserve (regardless of activation status) members and their families. The program is especially helpful to those who live at a distance from installation services or who can't easily seek assistance during traditional working hours. The goal is to improve the quality of life of military families and the overall effectiveness of the military community

Providers looking to join the Military OneSource Team must have a Master's degree or higher in counseling, social work, psychology, or a related mental health profession. MD's (psychiatrists) are not eligible. Providers must have a state license. New providers can apply to join our network at [www.CeridianProviderSolutions.com](http://www.CeridianProviderSolutions.com) or contact the Military Provider Network Services at 1-800-367-3920 for further information.

Military OneSource provides referrals for face-to-face counseling (up to twelve sessions per issue) in the local community to service members and their families. These free non-medical, short-term, solution-focused sessions focus on issues such as normal reactions to abnormal situations (e.g. combat), couples concerns, work/life balance, grief and loss, adjustment to deployment, stress management, and parenting.

*Disclaimers: Military OneSource counseling services are not part of Tricare. Provider Services are a part of the Ceridian EAP network. If you are an existing Military OneSource provider, please contact Military Provider Network Services with questions about rates, paperwork, or referrals. Network providers near Military installations do not coordinate care for Military OneSource referrals with base personnel. Providers contact Military OneSource consultants or Provider Services to discuss care.*

(Retrieved from [www.militaryonesource.com](http://www.militaryonesource.com))

## What do you need to do?

After submitting your membership form, you will be required to attend the Military Family training later this fall. The training will cover the following areas:

- Branches of the military
- Elements of the military culture (including the military salute, acronyms, chain of command, soldier and officer ranks, HOOAH!, & military customs)
- Brief overview of combat stress and PTSD
- The deployment cycle
- Common concerns and frustrations for military couples
- Military children
- Brief overview of suicide prevention, domestic violence, and substance abuse in the military
- Treatment recommendations

If you are part of an agency or community mental health center, any provider from your agency who will be providing services to military families under MFPN will be asked to complete the training. Exceptions will be made for any provider who has extensive experience working with military families.

## Training dates and locations will be announced soon!

After completing the training, you and/or your organization will be included in the network directory, which will be made available to returning soldiers and their families. Please note that this network is intended to be a resource for military families. As such, military families can opt to receive services from whomever they wish. Also, please remember that you are not expected to see military families free of charge. They will be serviced in the same manner as any other client.



# Military Family Provider Network of Kansas

*Kansas Professionals Dedicated to Supporting Kansas Soldiers and Their Families*

For questions, comments, concerns, or suggestions on any of the information included in this newsletter, please contact:

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*Collectively, we can support and strengthen our military families.*