

Research Update -- July 25, 2019

What's Here:

- The Best Medicine? Focus on What's Bothering You (PTSD Monthly Update)
- Association Between Shame and Posttraumatic Stress Disorder: A Meta-Analysis.
- The International Society for Traumatic Stress Studies New Guidelines for the Prevention and Treatment of Posttraumatic Stress Disorder: Methodology and Development Process.
- Mental health help-seeking intentions and organizational climate among military members.
- An empirical examination of stigma toward mental health problems and psychotherapy use in Veterans and active duty service members.
- Factor structure and initial validation of a brief measure of perceived emotional and physical distress tolerance in post-9/11 US Veterans.
- PTSD Symptom Clusters and Craving Differs by Primary Drug of Choice.
- Associations of Lifetime Traumatic Brain Injury Characteristics With Prospective Suicide Attempt Among Deployed US Army Soldiers.
- Lifetime Smoking Patterns and Preferences for Smoking Cessation Among
 Women Veterans Receiving Veterans Health Administration Care.
- Factor structure of deployment experiences and relations to mental health disorders among treatment-seeking Canadian armed forces personnel and veterans.

- Posttraumatic Stress Symptom Severity Mediates the Relationship Between Military Sexual Trauma and Tension Reduction Behaviors in Male and Female Veterans.
- "Honey, I Want to Be a Surrogate": How Military Spouses Negotiate and Navigate Surrogacy With Their Service Member Husbands.
- Sexual Assault Experiences Vary for Active Duty Military Women Depending on their Relationship to the Perpetrator.
- Links of Interest
- Resource of the Week: Strengthening the Military Family Readiness System for a Changing American Society (National Academies)

https://content.govdelivery.com/accounts/USVHA/bulletins/251e8f9

The Best Medicine? Focus on What's Bothering You

PTSD Monthly Update - July 2019 National Center for PTSD

It's common to hope that PTSD symptoms will just go away over time, but this is unlikely if you've had symptoms for longer than a year. Even if you feel like you can handle your symptoms now, they may get worse over time. Seeking treatment and talking about a traumatic event may seem hard, but confronting difficult memories can help you heal and move forward.

https://onlinelibrary.wiley.com/doi/10.1002/jts.22411

Association Between Shame and Posttraumatic Stress Disorder: A Meta-Analysis.

López-Castro, T., Saraiya, T., Zumberg-Smith, K. and Dambreville, N.

Journal of Traumatic Stress First published: 10 July 2019 https://doi.org/10.1002/jts.22411 Posttraumatic stress disorder (PTSD) is a complex condition with affective components that extend beyond fear and anxiety. The emotion of shame has long been considered critical in the relation between trauma exposure and PTSD symptoms. Yet, to date, no meta-analytic synthesis of the empirical association between shame and PTSD has been conducted. To address this gap, the current study summarized the magnitude of the association between shame and PTSD symptoms after trauma exposure. A systematic literature search yielded 624 publications, which were screened for inclusion criteria (individuals exposed to a Criterion A trauma, and PTSD and shame assessed using validated measures of each construct). In total, 25 studies employing 3,663 participants met full eligibility criteria. A random-effects meta-analysis revealed a significant moderate association between shame and posttraumatic stress symptoms, r = .49, 95% CI [0.43, 0.55], p < .001. Moderator analyses were not completed due to the absence of between-study heterogeneity. Publication bias analyses revealed minimal bias, determined by small attenuation after the superimposition of weight functions. The results underscore that across a diverse set of populations, shame is characteristic for many individuals with PTSD and that it warrants a central role in understanding the affective structure of PTSD. Highlighting shame as an important clinical target may help improve the efficacy of established treatments. Future research examining shame's interaction with other negative emotions and PTSD symptomology is recommended.

https://onlinelibrary.wiley.com/doi/10.1002/jts.22421

The International Society for Traumatic Stress Studies New Guidelines for the Prevention and Treatment of Posttraumatic Stress Disorder: Methodology and Development Process.

Bisson, J. I., Berliner, L., Cloitre, M., Forbes, D., Jensen, T. K., Lewis, C., Monson, C. M., Olff, M., Pilling, S., Riggs, D. S., Roberts, N. P. and Shapiro, F.

Journal of Traumatic Stress First published: 08 July 2019 https://doi.org/10.1002/jts.22421

Over the last two decades, treatment guidelines have become major aids in the delivery of evidence-based care and improvement of clinical outcomes. The International Society for Traumatic Stress Studies (ISTSS) produced the first guidelines for the prevention and treatment of posttraumatic stress disorder (PTSD) in 2000 and

published its latest recommendations, along with position papers on complex PTSD (CPTSD), in November 2018. A rigorous methodology was developed and followed; scoping questions were posed, systematic reviews were undertaken, and 361 randomized controlled trials were included according to the a priori agreed inclusion criteria. In total, 208 meta-analyses were conducted and used to generate 125 recommendations (101 for adults and 24 for children and adolescents) for specific prevention and treatment interventions, using an agreed definition of clinical importance and recommendation setting algorithm. There were eight strong, eight standard, five low effect, 26 emerging evidence, and 78 insufficient evidence to recommend recommendations. The inclusion of separate scoping questions on treatments for complex presentations of PTSD was considered but decided against due to definitional issues and the virtual absence of studies specifically designed to clearly answer possible scoping questions in this area. Narrative reviews were undertaken and position papers prepared (one for adults and one for children and adolescents) to consider the current issues around CPTSD and make recommendations to facilitate further research. This paper describes the methodology and results of the ISTSS Guideline process and considers the interpretation and implementation of the recommendations.

https://www.tandfonline.com/doi/abs/10.1080/08995605.2019.1630229

Mental health help-seeking intentions and organizational climate among military members.

Mishaw Cuyler & Laura Guerrero

Military Psychology

Published online: 17 Jul 2019

https://doi.org/10.1080/08995605.2019.1630229

The psychological effects of war include anxiety, depression, alcohol misuse and Post-Traumatic Stress Disorder (PTSD). Military members that displayed symptoms of mental illness were thought to lack the strength and courage necessary to be soldiers. As a result, many military members who suffered from these symptoms would not seek help for mental health care. This paper investigates the mental health help-seeking intentions of military members using the Theory of Planned Behavior (TPB) and the role of leadership support climate and coworker support climate. This paper contributes to the literature in three ways. First, this paper applies a rigorously tested theoretical framework to the study of mental health help-seeking intentions in military members.

Second, this paper incorporated the constructs of leadership support climate and coworker support climate into mental health help-seeking literature. Third, this paper introduces the concepts of leadership support climate and organizational support climate into the study of the theory of planned behavior. This study found that the personal attitudes of military members towards mental health help-seeking are positively related to their mental health help-seeking intentions. The study also found that mental health help-seeking attitudes mediated the relationship between leadership support climate and mental health help-seeking intentions. These results underscore the importance of role of leaders in setting a supportive organizational climate and influencing military members to seek help for mental health problems.

https://www.tandfonline.com/doi/abs/10.1080/08995605.2019.1630231

An empirical examination of stigma toward mental health problems and psychotherapy use in Veterans and active duty service members.

Jonathan Goode & Joshua K. Swift

Military Psychology

Published online: 17 Jul 2019

https://doi.org/10.1080/08995605.2019.1630231

Although many Veterans and active duty service members experience mental health problems, most do not seek out any sort of mental health help. Stigma (a significant predictor of treatment-seeking) has been documented among Veterans and active duty service members; however, previous research on stigma in these groups has primarily utilized correlational and qualitative designs. The purpose of this study was to gain a better understanding of stigma toward mental health problems in Veterans and active duty service members using an experimental design. One hundred sixty-five Veterans and active duty service members were randomized to read a vignette that described a Veteran who either did or did not experience a mental health problem and did or did not seek psychotherapy. Results indicated that the participants held more stigmatizing attitudes toward the Veteran who was described as having a mental health problem, but not toward the Veteran who was described as seeking psychotherapy. Additionally, participants held more positive attitudes toward the Veteran, compared to the attitudes that they believed other military members would hold. Last, with this sample of Veterans and active duty service members, self-stigma toward seeking psychotherapy was found to partially mediate the relationship between perceived public stigma and attitudes.

Implications for addressing stigma in military service members and Veterans are discussed.

https://www.tandfonline.com/doi/abs/10.1080/08995605.2019.1637210

Factor structure and initial validation of a brief measure of perceived emotional and physical distress tolerance in post-9/11 US Veterans.

Meghan A. Crabtree, Eric C. Meyer, Nathan A. Kimbrel, Bryann B. DeBeer, Marc I. Kruse, Suzy B. Gulliver, Michael Telch & Sandra B. Morissette

Military Psychology

Published online: 17 Jul 2019

https://doi.org/10.1080/08995605.2019.1637210

Distress tolerance (i.e., perceived or actual capacity to tolerate aversive internal states) has received considerable research attention as a transdiagnostic risk-factor underlying the development and maintenance of psychopathology. Lower levels of emotional distress tolerance have been linked to psychopathology (e.g. Posttraumatic Stress Disorder) within Military populations; however, the association of physical distress tolerance to psychopathology in this population has been under-researched. This research gap may be due in part to a paucity of comprehensive, temporally stable and brief measures of distress tolerance that have been validated within Military populations, which may hinder further examination and refinement of the construct. Addressing this problem, the current study evaluates the psychometric properties of a novel and brief measure of emotional and physical distress tolerance in a sample of United States post-9/11 Veterans. Participants were 307 Veterans (Mage = 38.9, 67.7% male) who completed the 10-item Distress Tolerance Inventory at baseline and annual follow-up. Exploratory structural equation modeling was used to examine the optimal latent factor structure and longitudinal invariance of the DTI measurement model, along with correlational analyses to examine the convergent properties of the DTI subscales. The DTI reflected a longitudinally invariant two-factor structure (emotional and physical distress tolerance), with excellent internal consistency and preliminary evidence of convergent validity. Thus, the DTI represents a brief, reliable and temporally stable measure of physical and emotional distress tolerance.

https://www.tandfonline.com/doi/abs/10.1080/15504263.2019.1637039

PTSD Symptom Clusters and Craving Differs by Primary Drug of Choice.

Vanessa C. Somohano, Kristoffer L. Rehder, Tyree Dingle, Taylor Shank & Sarah Bowen

Journal of Dual Diagnosis
Published online: 14 Jul 2019

https://doi.org/10.1080/15504263.2019.1637039

Objective: Research has demonstrated a cyclical relationship between posttraumatic stress disorder (PTSD) and substance use disorder. Identifying factors that link PTSD symptom clusters and substance use disorder may illuminate mechanisms underlying the PTSD-substance use disorder relationship, better informing interventions that target this comorbidity. The current study of individuals enrolled in an outpatient aftercare chemical dependency program in King County, Washington, assessed whether overall PTSD symptoms and specific PTSD symptom clusters predicted craving depending on individuals identified primary drug of choice (DOC). Methods: Participants eligible for the parent study were at least 18 years of age, fluent in English, medically cleared from substance withdrawal, and able to participate in treatment sessions and agreed to random assignment. Random assignment to either a mindfulness-based relapse prevention group, a standard relapse prevention group, or a treatment as usual group was conducted on a computer randomization program. A secondary analysis of baseline data was employed in the current study to determine which of the PTSD symptom clusters (avoidance, hyperarousal, and intrusion) predicted substance craving. Results: Covarying for severity of dependence, results suggest that overall PTSD scores predicted craving in participants who identified alcohol, stimulants, and opiates as their primary DOC. Further, avoidance-related PTSD symptoms alone predicted a significant proportion of the variability in craving in stimulant users, and hyperarousal symptoms alone predicted a significant proportion of the variability in craving in alcohol users. No specific PTSD cluster significantly predicted a proportion of the variability in craving in marijuana or opiates users. Conclusions: Findings suggest that craving may play a role in maintaining the relationship between specific PTSD symptom clusters and substance use disorder, and the nature of this relationship may differ by primary DOC. The clinical trial on which this secondary analysis of data was conducted is registered as NCT01159535 at www.clinicaltrials.gov.

The original trial from which data for this study was drawn was supported by the National Institutes of Health [NIH/NIDA 5 R01 DA025764-02].

https://journals.lww.com/headtraumarehab/Abstract/publishahead/Associations of Lifeti me Traumatic Brain Injury.99401.aspx

Associations of Lifetime Traumatic Brain Injury Characteristics With Prospective Suicide Attempt Among Deployed US Army Soldiers.

Campbell-Sills, Laura PhD; Stein, Murray B. MD, MPH; Liu, Howard SD; Agtarap, Stephanie PhD; Heeringa, Steven G. PhD; Nock, Matthew K. PhD; Ursano, Robert J. MD; Kessler, Ronald C. PhD

The Journal of Head Trauma Rehabilitation
July 11, 2019 - Volume Publish Ahead of Print
doi: 10.1097/HTR.0000000000000516

Objective:

To estimate associations of lifetime traumatic brain injury (TBI) characteristics with prospective suicide attempt among US Army soldiers.

Method:

The Army STARRS (Study to Assess Risk and Resilience in Servicemembers) Pre/Post Deployment Study surveyed 3 Brigade Combat Teams that were deployed to Afghanistan in 2012. Lifetime TBI and past-month postconcussive/post-TBI symptoms were evaluated at predeployment baseline. Recency and number of TBIs were quantified, and TBI severity was classified on the basis of reports of alteration/loss of consciousness and memory lapse. Suicide attempt data came from administrative records and surveys administered after return from deployment. Logistic regression models estimated associations of TBI characteristics with prospective suicide attempt among baseline respondents who were deployed (n = 7677), adjusting for other risk factors including lifetime mental disorder.

Results:

One hundred three soldiers made a suicide attempt over a median follow-up period of 30 months (weighted prevalence = 1.31% [0.14%]). In the final model estimating joint associations of TBI severity/recency and past-month postconcussive/post-TBI symptoms, only postconcussive/post-TBI symptoms were associated with a higher risk of suicide attempt (per standard score increase: AOR [adjusted odds ratio] = 1.31; 95% CI, 1.05-1.63; P = .012).

Conclusions:

Among the lifetime TBI characteristics evaluated at predeployment baseline, only past-month postconcussive/post-TBI symptoms were prospectively associated with an increased risk of suicide attempt following deployment. Detection of postconcussive/post-TBI symptoms could facilitate targeting of Army suicide prevention programs.

https://journals.sagepub.com/doi/abs/10.1177/1049732319857536

Lifetime Smoking Patterns and Preferences for Smoking Cessation Among Women Veterans Receiving Veterans Health Administration Care.

Wilson, S. M., Medenblik, A. M., Neal, J. M., Strauss, J. L., McNiel, J. M., Christian, W. E., ... Calhoun, P. S.

Qualitative Health Research First Published July 16, 2019 https://doi.org/10.1177/1049732319857536

The objective of this study was to identify common themes among women veterans who smoke or recently quit and had used smoking cessation treatment within the Veterans Health Administration (VHA). The study built upon previous research by utilizing indepth interviews to encourage disclosure of potentially stigmatized topics. Twenty women veterans enrolled in VHA care engaged in a quality improvement project focused on improving smoking cessation services. Qualitative analysis of de-identified interviews used a combination of content analysis and thematic analysis within the sociopharmacological model of tobacco addiction. Findings revealed that participants' smoking was influenced by woman veteran identity and by several gender-related contextual factors, including military sexual trauma and gender discrimination. Findings also highlighted other contextual factors, such as personal autonomy, emotional smoking triggers, and chronic mental health concerns. Findings are interpreted within the context of cultural power imbalances, and recommendations are provided for VHA smoking cessation for women veterans.

https://www.ncbi.nlm.nih.gov/pubmed/31318248

Psychol Trauma. 2019 Jul 18. doi: 10.1037/tra0000493. [Epub ahead of print]

Factor structure of deployment experiences and relations to mental health disorders among treatment-seeking Canadian armed forces personnel and veterans.

King L, Ketcheson F, St Cyr K, Marlborough M, Richardson JD

OBJECTIVE:

Among a sample of 341 treatment-seeking veterans and currently serving Canadian Forces members, our objectives were to identify factors of deployment experiences and determine whether they were related to the severity of posttraumatic stress disorder (PTSD) symptom clusters and depressive, anxiety, and alcohol use symptom severity.

METHOD:

Participants completed questionnaires during intake to an outpatient mental health clinic. Factor analysis was used to determine factors of deployment experiences and which mental health conditions were associated with the factors.

RESULTS:

Exploratory factor analysis grouped experiences into 3 factors: (a) combat, (b) exposure to injury or death, and (c) potential moral injury and atrocity. Potential moral injury and atrocity was significantly associated with all outcomes except for alcohol use disorder, and combat was significantly associated with the arousal PTSD symptom cluster and depressive symptom severity.

CONCLUSIONS:

Our study demonstrates the association between combat experiences and PTSD symptom, depression, and anxiety severity. Clinically, it stresses the importance of evaluating specific traumatic events to improve treatment outcomes. (PsycINFO Database Record (c) 2019 APA, all rights reserved).

https://journals.sagepub.com/doi/abs/10.1177/0886260519864355

Posttraumatic Stress Symptom Severity Mediates the Relationship Between Military Sexual Trauma and Tension Reduction Behaviors in Male and Female Veterans.

Hannan, S. M., Thomas, K. B., & Allard, C. B.

Journal of Interpersonal Violence First Published July 17, 2019 https://doi.org/10.1177/0886260519864355

Numerous studies attest to the prevalence and complex negative consequences associated with military sexual trauma (MST). However, relatively less is known about male survivors and about the interaction of psychological problems such as posttraumatic stress disorder (PTSD) symptoms and emotion management difficulties following MST. The current study examined the path of psychological distress following MST in both male and female veterans. We predicted that (a) history of MST would predict more severe PTSD symptoms, which in turn would predict greater use of dysfunctional emotion management strategies (specifically, tension reduction behaviors) and that (b) PTSD symptoms would mediate the relationship between history of MST and tension reduction behaviors. Finally, we explored whether the indirect (i.e., mediating) effect was moderated by gender. Data were obtained from pretreatment paper and pencil assessments administered as part of standard clinical care from 338 veterans seeking treatment at a Veterans Affairs (VA) mental health specialty clinic. Veterans who endorsed MST experienced more severe PTSD symptoms and greater reported use of tension reduction behaviors. Bootstrapping testing the indirect effect revealed that PTSD symptoms mediated the relationship between history of MST and tension reduction behaviors. An exploratory moderated mediation analysis found that the indirect effect did not differ as a function of gender. PTSD symptoms appear to mediate the relationship between MST and tension reduction behaviors in veterans, regardless of gender. While previous research has suggested that civilian men report a greater number of tension reduction behaviors following a sexual assault compared to civilian women, we did not find the same gender differences among veterans. These results may provide support for using trauma-focused treatment even when MST survivors are reporting high-risk tension reduction behaviors.

https://journals.sagepub.com/doi/abs/10.1177/0192513X19862843

"Honey, I Want to Be a Surrogate": How Military Spouses Negotiate and Navigate Surrogacy With Their Service Member Husbands.

Ziff, E.

Journal of Family Issues
First Published July 18, 2019
https://doi.org/10.1177/0192513X19862843

This article examines how military spouses negotiate the decision to become a surrogate with their service member husband and how the two navigate surrogacy together. It is speculated that military spouses are ideal candidates for surrogacy due to their particular status as a military spouse; however, military spouses face structural constraints in their everyday lives which in turn would prove challenging to their desire to become a surrogate. Based on in-depth interviews with 33 military spouses who had been surrogates, this article examines how military spouses discuss, negotiate, and experience surrogacy with their spouses all the while navigating the structural demands of the military and the contractual demands of surrogacy. Findings highlight egalitarian decision making between the spouses, and a mostly collaborative approach to the surrogacy process. Ultimately, this work illuminates how surrogacy is experienced by the women who participate in the practice and provides insight as to how military marriages function.

https://link.springer.com/article/10.1007/s10896-019-00085-9

Sexual Assault Experiences Vary for Active Duty Military Women Depending on their Relationship to the Perpetrator.

Dina Eliezer, Aubrey J. Hilbert, Lisa H. Davis, Kimberly Hylton, William Xav Klauberg, Maia M. Hurley, Zachary J. Gitlin, Karmon D. Dyches, Nathan W. Galbreath

Journal of Family Violence First Online: 18 July 2019

https://doi.org/10.1007/s10896-019-00085-9

We examined how sexual assault experiences vary depending on active duty women's relationship to their perpetrator (intimate partner versus acquaintances/friends, strangers, and unspecified perpetrators). This study analyzed weighted data from a 2016 survey representative of active duty Service members regarding their sexual assault experiences in the past year. Independent sample t-tests compared experiences based on the nature of the relationship between the victim and perpetrator. Military women sexually assaulted by intimate partners were more likely than those assaulted by non-intimate partners to indicate multiple incidents of sexual assault, penetrative sexual assault, stalking and sexual harassment before and after an incident, and a history of sexual assault in their lifetime. Military women sexually assaulted by intimate partners also indicated lower satisfaction with responses from leadership and victim advocates compared to other relationship types. Survey results distinguish intimate partner sexual assault from non-intimate partner sexual assault. While Department of Defense programs are organized around such differences, these results suggest further tailoring of prevention and response programs to reflect unique victim experiences.

Links of Interest

Why the V.A. Won't Pay for Service Dogs to Treat PTSD https://www.nytimes.com/2019/07/17/magazine/service-dogs-veterans-ptsd.html

She Didn't Act Like a Rape Victim https://www.nytimes.com/2019/07/22/opinion/armed-forces-rape.html

inTransition: Helping Service Members Connect to Confidential VA Mental Health Counseling for Sexual Trauma

https://www.pdhealth.mil/news/blog/intransition-helping-service-members-connect-confidential-va-mental-health-counseling-sexual-trauma

Enlisted women now free to apply for submarine duty at any time https://www.stripes.com/news/enlisted-women-now-free-to-apply-for-submarine-duty-at-any-time-1.590520

Military studies 'hyperfit' women who pass grueling courses https://www.militarytimes.com/news/your-military/2019/07/21/military-studies-hyperfit-women-who-pass-grueling-courses/

VFW snaps 27-year membership decline and adds nearly 25,000 new members

https://www.militarytimes.com/2019/07/16/vfw-snaps-27-year-membership-decline-and-adds-nearly-25000-new-members/

How young troops could be getting hosed on their military education benefits https://www.militarytimes.com/news/pentagon-congress/2019/07/17/how-young-troops-could-be-getting-hosed-on-their-military-education-benefits/

Fewer troops are using Tuition Assistance benefits https://www.militarytimes.com/education-transition/2019/07/23/fewer-troops-are-using-tuition-assistance-benefits/

New commandant considering 1 year leave of absence for moms and changes to evaluating and promoting Marines

https://www.marinecorpstimes.com/news/your-marine-corps/2019/07/17/new-commandant-considering-1-year-leave-of-absence-for-moms-and-changes-to-evaluating-and-promoting-marines/

Top Marine says most Marine recruits require a drug waiver. But does the Marine Corps have a drug problem?

https://www.marinecorpstimes.com/news/your-marine-corps/2019/07/18/top-marine-says-most-marine-recruits-require-a-drug-waiver-but-does-the-marine-corps-have-a-drug-problem/

Transgender troops welcome in Massachusetts National Guard, state official says https://www.armytimes.com/news/your-army/2019/07/19/transgender-troops-welcome-in-massachusetts-national-guard-state-official-says/

Why leaving the military is harder for female vets https://www.militarytimes.com/education-transition/2019/07/18/why-leaving-the-military-is-harder-for-female-vets/

VA-DOD Program Educates Transitioning Female Service Members on Health Resources

http://www.airforcemag.com/Features/Pages/2019/July%202019/VA-DOD-Program-Educates-Transitioning-Female-Service-Members-on-Health-Resources.aspx

Special duty airmen: Shorter tours will help maintain family balance, career edge https://www.airforcetimes.com/news/your-air-force/2019/07/22/special-duty-airmen-shorter-tours-will-help-maintain-family-balance-career-edge/

To Support Military Families, Pentagon Must Fix Fractured, Outdated Programs: Report https://www.military.com/daily-news/2019/07/19/support-military-families-pentagon-must-fix-fractured-outdated-programs-report.html

New Military Suicide Report May Revive Debate Over Gun Restrictions https://www.military.com/daily-news/2019/07/20/new-military-suicide-report-may-revive-debate-over-gun-restrictions.html

Veterans: It's on you to bridge the civil-military divide https://taskandpurpose.com/veterans-civilian-military-divide

VA releases Request for Information, seeks strategies for ways to end Veteran suicide https://www.blogs.va.gov/VAntage/61985/va-releases-request-for-information-as-it-seeks-strategies-for-ways-to-end-veteran-suicide/

Resource of the Week: <u>Strengthening the Military Family Readiness System for a Changing American Society</u>

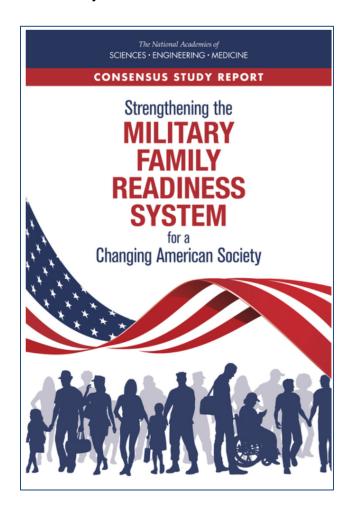
New, from the National Academies:

The U.S. military has been continuously engaged in foreign conflicts for over two decades. The strains that these deployments, the associated increases in operational tempo, and the general challenges of military life affect not only service members but also the people who depend on them and who support them as they support the nation – their families.

Family members provide support to service members while they serve or when they have difficulties; family problems can interfere with the ability of service members to deploy or remain in theater; and family members are central influences on whether members continue to serve. In addition, rising family diversity and complexity will likely increase the difficulty of creating military policies, programs and practices that adequately support families in the performance of military duties.

Strengthening the Military Family Readiness System for a Changing American Society examines the challenges and opportunities facing military families and what is known about effective strategies for supporting and protecting military children and families, as well as lessons to be learned from these experiences.

This report offers recommendations regarding what is needed to strengthen the support system for military families.



Shirl Kennedy Research Editor Center for Deployment Psychology www.deploymentpsych.org skennedy@deploymentpsych.org 240-535-3901