

Supporting The Whole Military Family: A Systemic Approach To Family Focused Outreach and Community Based Programs

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What is Blue Star Families?

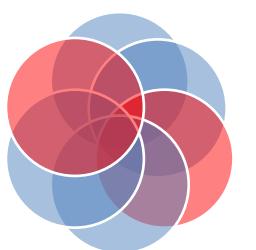


Blue Star Families is a nonprofit organization passionately dedicated to helping military families across America and overseas. BSF members include active duty, National Guard, reserve and veteran service members and their families as well as the civilians that strongly support them.

BSF conveys a realistic and balanced portrayal of military life to thought leaders and policymakers

Empower

Support



BSF creates
sustaining
partnerships with
nonprofits, military
installation
commands and DoD
personnel to deliver
support to military
families

Connect

BSF is a civilian, grassroots organization that links military families across traditional lines, promoting a more robust exchange of ideas.

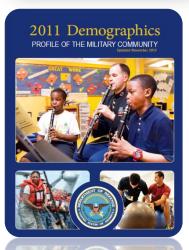
- More than 70,000 members
- 40 chapters with representatives in every state in the U.S. and overseas
- More than a million military family members have participated in BSF programs
- Millions of civilians have engaged with the military community through BSF

Sources of Information About Military Families



Link





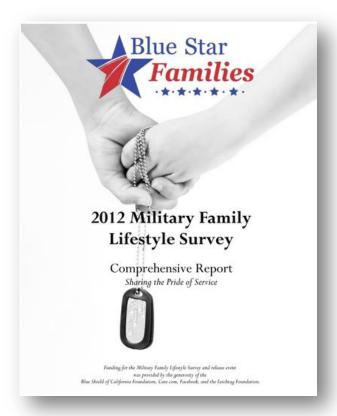
Source of Information	LINK
Demographic Survey DoD	http://www.militaryonesource.mil/12038/MOS/ Reports/2011_Demographics_Report.pd
Blue Star Families' Annual Military Family Lifestyle Survey	http://www.bluestarfam.org/Policy/Surveys
RAND Reports	http://www.rand.org/content/dam/rand/pubs/research_briefs/2011/RAND_RB9568.pdf
	http://www.rand.org/content/dam/rand/pubs/occas ional_papers/2011/RAND_OP316.pdf
	http://www.rand.org/pubs/technical_reports/TR913.html
Institute of Medicine	http://www.iom.edu/Reports/2010/Returning- Home-from-Iraq-and-Afghanistan-Preliminary- Assessment.aspx
United States Census	http://www.census.gov/population/www/cen20 00/censusatlas/pdf/12_Military-Service.pdf

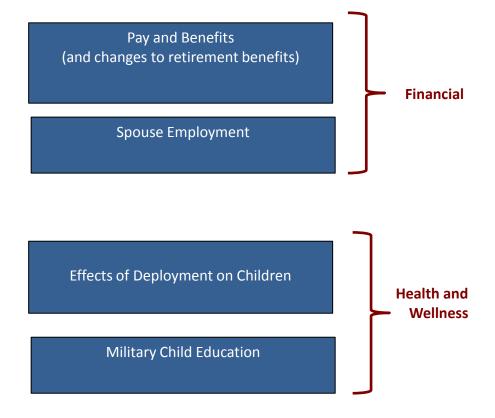
Source of Information

BSF's Military Family Lifestyle Survey



BSF released the results of our fourth annual, national survey of military families in May 2013 at an event and panel hosted by the Congressional and Senate Military Family Caucuses. The next survey will be released in September 2014.

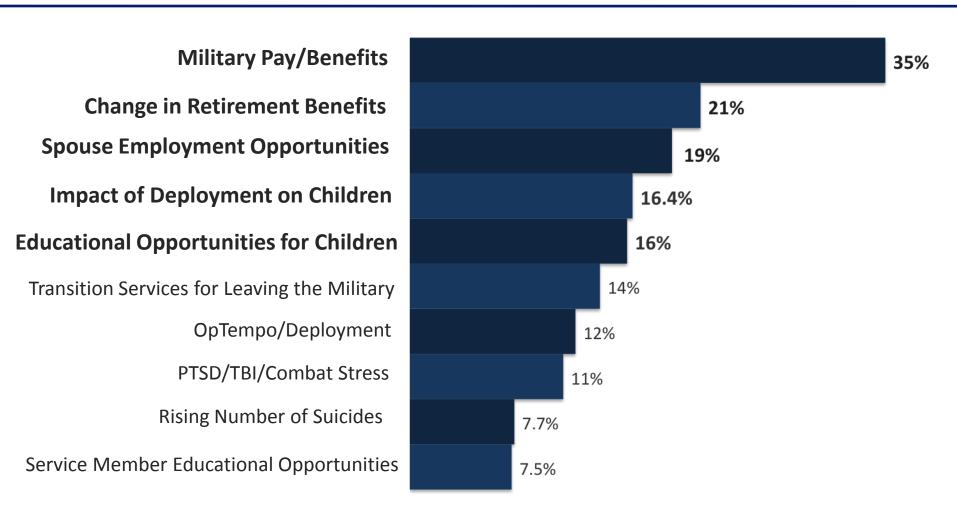




Source: http://www.bluestarfam.org/Policy/Surveys

Top Military Family Issues: 2013





Financial and Health & Wellness Concerns Categorize the Top Military Family Issues

Knowledge about military family members is important. But, sources of information are limited. However, there are a few key findings.

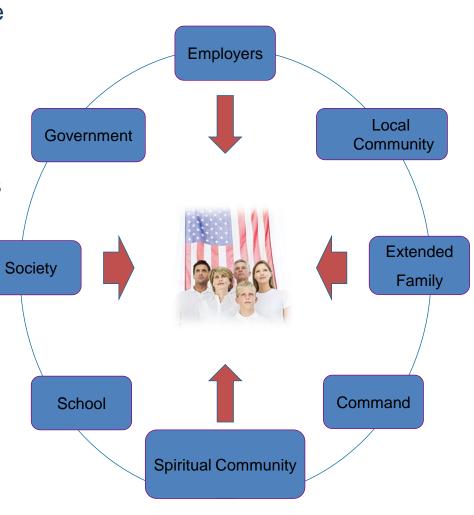


 Families who are better prepared to cope with deployment are more likely to report higher levels of satisfaction with the military lifestyle

 Repeated deployment and prolonged deployments have mental health impacts on families as well as public health consequences

 The non-deployed parent's mental health impacts their child's mental health

- Teenagers and females seem to be most impacted by deployments
- Service-members appear to have more difficulty reintegrating with spouses and children



The Modern-Day Military Family: Changing Definitions



- Military service has implications for families—broadly defined
- Family health serves as a protective factor for veterans seeking health services
- The definition of family is changing to include same-sex partners, single parents, and dual military families, and caregivers
- Family needs will change as the focus shifts from repeated deployments to reintegration and transition from service
- Funding challenges will shift the burden of care to communities
- Enhanced and proactive preparation within communities with increase community readiness

4.07. Number and Percentage of Total Force Personnel by Family Status Trends: 2000-2011

This table presents the number and percentage of total force personnel by family status from 2000 to 2011. Compared to 2000, the proportion of military personnel who are single with children, married to a civilian with children, or in dual military marriages (with or without children) has increased, while the proportion of military personnel who are single without children or married to a civilian without children has decreased.

	200)*	2005		2010		2011	
	N	%	N	%	N	%	N	%
Single, no children	917,764	41.0%	880,304	40.1%	903,615	39.9%	901,264	39.9%
Single, with children	132,518	5.9%	141,982	6.5%	155,143	6.8%	154,934	6.9%
Married to Civilian, no children	371,096	16.6%	301,205	13.7%	306,803	13.5%	305,204	13.5%
Married to Civilian, with children	718,443	32.1%	754,549	34.4%	784,663	34.6%	784,073	34.7%
Dual-military Marriage, no children	54,015	2.4%	65,710	3.0%	63,209	2.8%	61,562	2.7%
Dual-military Marriage, with children	42,060	1.9%	50,602	2.3%	53,256	2.3%	52,322	2.3%
Total	2,235,896	100.0%	2,194,352	100.0%	2,266,689	100.0%	2,259,359	100.0%

^{*} An additional 24 cases were not reported in 2000.

Note: Single includes annulled, divorced, and widowed. Children include minor dependents age 20 or younger or dependents age 22 and younger enrolled as full-time students.

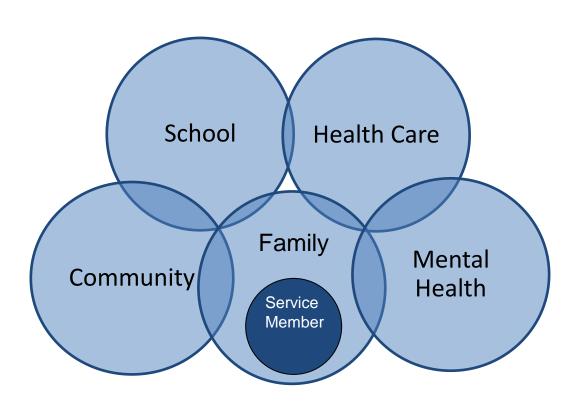
Note: Percentages may not total to 100 due to rounding.

DMDC Active Duty Military Family File (September 2000, 2005, 2010, 2011); DMDC Reserve Components Family File (September 2000, 2005, 2010, 2011)

Source: http://www.militaryonesource.mil/12038/MOS/Reports/2011_Demographics_Report.pdf

Military Families, in Context: A Systemic Approach





- Family is the closest social support
- Health of family and service member is interrelated
- Interactions across layers may be helpful or problematic
- There is a dynamic and reciprocal interplay between layers

Source: Shelley MacDermid Wadsworth, Patricia Lester, Christina Marino, Stephen Cozza, Jo Sornborger, Thomas Strouse & William Beardslee (2013): Approaching Family Focused Systems of Care for Military and Veteran Families, Military Behavioral Health, 1:1, 31-40.

Military Families: Multiple Stressors

Blue Star

Families

- Major change in responsibilities at work
- Changing to a new school
- Changes in residence
- Marital separation from mate
- Retirement
- Major change in health of family member
- Major changes in financial state
- Major change in living condition
- Major change in sleeping habits
- Major change is number of family get-togethers
- Death of a close friend

The Holmes-Rahe Life Stress Inventory

The Social Readjustment Rating Scale

INSTRUCTIONS: Mark down the point value of each of these life events that has happened to you during the previous year. Total these associated points.

Life Event	Mean Valu
1. Death of spouse	100
2. Divorce	73
	65
3. Marital Separation from mate	63
4. Detention in jail or other institution	63
5. Death of a close family member	
6. Major personal injury or illness	53
7. Marriage	50
8. Being fired at work	47
9. Marital reconciliation with mate	45
10. Retirement from work	45
11. Major change in the health or behavior of a family member	44
12. Pregnancy	40
13. Sexual Difficulties	39
 Gaining a new family member (i.e birth, adoption, older adult moving in, etc) 	39
15. Major business readjustment	39
 Major change in financial state (i.e a lot worse or better off than usual) 	38
17. Death of a close friend	37
18. Changing to a different line of work	36
19. Major change in the number of arguments w/spouse (i.e either a lot more or a lot less than	35
usual regarding child rearing, personal habits, etc.)	
20. Taking on a mortgage (for home, business, etc)	31
21. Foreclosure on a mortgage or loan	30
22. Major change in responsibilities at work (i.e. promotion, demotion, etc.)	29
23. Son or daughter leaving home (marriage, attending college, joined mil.)	29
24. In-law troubles	29
25. Outstanding personal achievement	28
26. Spouse beginning or ceasing work outside the home	26
27. Beginning or ceasing formal schooling	26
28. Major change in living condition (new home, remodeling, deterioration of neighborhood or	25
home etc.)	
29. Revision of personal habits (dress manners, associations, quitting smoking)	24
30. Troubles with the boss	23
31. Major changes in working hours or conditions	20
32. Changes in residence	20
33. Changing to a new school	20
34. Major change in usual type and/or amount of recreation	19
35. Major change in church activity (i.e., a lot more or less than usual)	19
36. Major change in social activities (clubs, movies, visiting, etc.)	18
37. Taking on a loan (car, tv,freezer,etc)	17
 Major change in sleeping habits (a lot more or a lot less than usual) 	16
39. Major change in number of family get-togethers (**)	15
40. Major change in eating habits (a lot more or less food intake, or very different meal hours or	15
surroundings)	
41. Vacation	13
42. Major holidays	12
43. Minor violations of the law (traffic tickets, jaywalking, disturbing the peace, etc)	11

Now, add up all the points you have to find your score.

150pts or less means a relatively low amount of life change and a low susceptibility to stress-induced health breakdown.

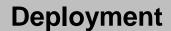
150 to 300 pts implies about a 50% chance of a major health breakdown in the next 2 years

300pts or more raises the odds to about 80%, according to the Holmes-Rahe statistical prediction model.

Sources: Adapted from Thomas Holmes and Richard Rahe, Homes-Rahe Social Readjustment Rating Scale, Journal of Psychosomatic Research, Vol II, 1967

Military Families: Challenges Related to Deployment





- Transient stress
- Modify family roles/function
- Temporary accommodation
- Reunion Adjustment
- Military common maintained
- Probably sense of growth and accomplishment

Multiple Deployments?

Injury

- Transient or permanent stress
- Modify family roles/function
- Temporary or permanent accommodation
- Injury Adjustment
- Military common jeopardized
- Change must be integrated before growth

Psych Illness

- Transient or permanent stress
- Modify family roles/function
- Temporary or permanent accommodation
- Illness adjustment
- Military common jeopardized
- Change must be integrated before growth

Death

- Permanent stress
- Modify family roles/function
- Permanent accommodation
- Grief adjustment
- Military common jeopardized or lost
- Death must be grieved before growth

Complicated Deployment

Stress Level

Military Children: Effects of Deployment



Chartrand, et. al. 2008

• Three to five year old children show elevated behavioral symptoms

Flake, et. al., 2009

- 32% of children "high risk" stress
- 42% of parents "high risk" stress
- Parent stress predicted child morbidity

Chandra, et al., 2010

- Higher emotional difficulties than national samples
- Older children and girls showed more school/family/peer problems
- Greater deployment length and poor non-deployed parent function related to greater challenges

Lester et. al. 2010

- Parent distress and cumulative length of deployment predicted depression and behavioral problems
- Children evidenced elevated anxiety in deployment and recently returned parent groups



- Caregiver's
 ability to cope
 affects the
 child's ability to
 cope
- Resilience is important, but there is a limit

Military Family Relationships: A Key to Readiness and Retention Issues



Spouses face similar levels of distress and appear to develop mental anxiety or trauma as a result of experiences prior to, during, and after the service members' deployment

USMEDCOM study from 2008 found that since 2003 the top concern amongst service members stationed in Iraq and Afghanistan is family separation and that this is more strongly related to mental health problems than any other concern (p. 78 RH, IOM)

After return from deployment family members may find it challenging to reorient themselves

IOM (2008) found strong evidence that people who were deployed were more likely to have marital problems with they returned, including IPV (based on Vietnam Veterans); other results are inconclusive

Vinokur et al. (1999) found that among Air Force women, parenting stress was associated with both increased familywork conflict and decreased parental involvement and emotional functioning.

Spouses as compared to service members are more likely to seek care and less likely to be worried about stigma

42% of Army parents who had children 5-12 years old and a deployed spouse report clinical significant parenting stress, 32 % reported significant psychological symptoms in their children

Military Families Mental Health: Positive Family-Centered Approaches

Prevention based



Spiritual Community

Integrated Research **Programs** Policy/Procedures **FOCUS Strong Bonds MOMPR** Perdue Institute of **NCTSC ADAPT** Military Family Sesame Street **Passport Toward Studies** Success **Joining Forces** Military Family Intern Campaign **Program** MCEC Initiatives **USC School of Social** Work **Employers** Local Evidence based Government Community Practical—fills gaps, meets a need, measurable impact **Best** Dissemination strategy **Military** Extended Society Practices Community-based **Family** Family Cross-agency, cross-sector collaboration Sustainable School Command Population Health

Military Families: Civilian Communities and Services



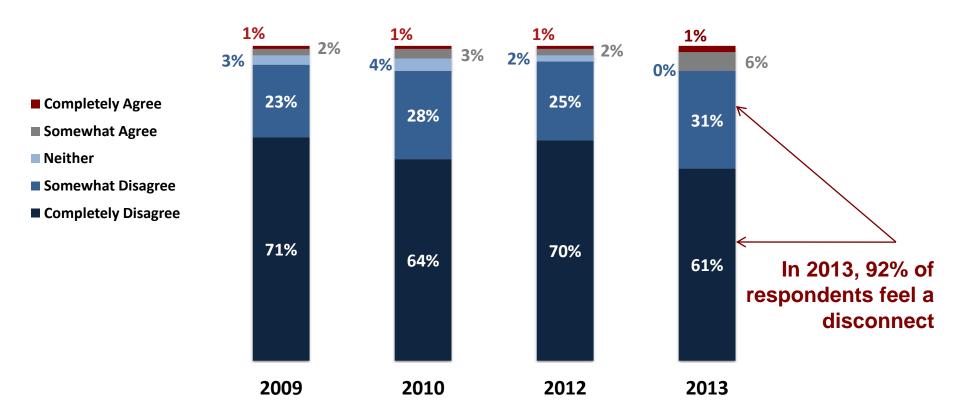
Public	Private	Non-Profit
Executive Branch Departments	Foundations	 Military Service Organizations (e.g., Blue Star Families, National Military Family Association (NMFA), Military Officers Association of America (MOAA)
Universities	Small Businesses	 Service Specific Organizations (e.g., Association of the United States Army (AUSA), Naval Institute)
State Government	Corporations	 Veterans Service Organizations (VSO's) (e.g., Wounded Warrior Project, Veterans of Foreign Wars, American Legion)
 Regional Government 	Donors	Alumni Associations
■ Local Government	 Private Universities and Colleges 	 National Service Organizations (e.g., Red-Cross, Easter Seals,)
Congress	 Professional Associations 	■ Local Community Based Programs
Legislation	Lobbyists	 Churches, Faith Based Organizations

Barriers; Connectedness: Military/Civilian Divide 4-Year Trend



To what extent do you agree with the statement:

"The general public (without close ties to the military) truly understands the sacrifices made by service members and their family."

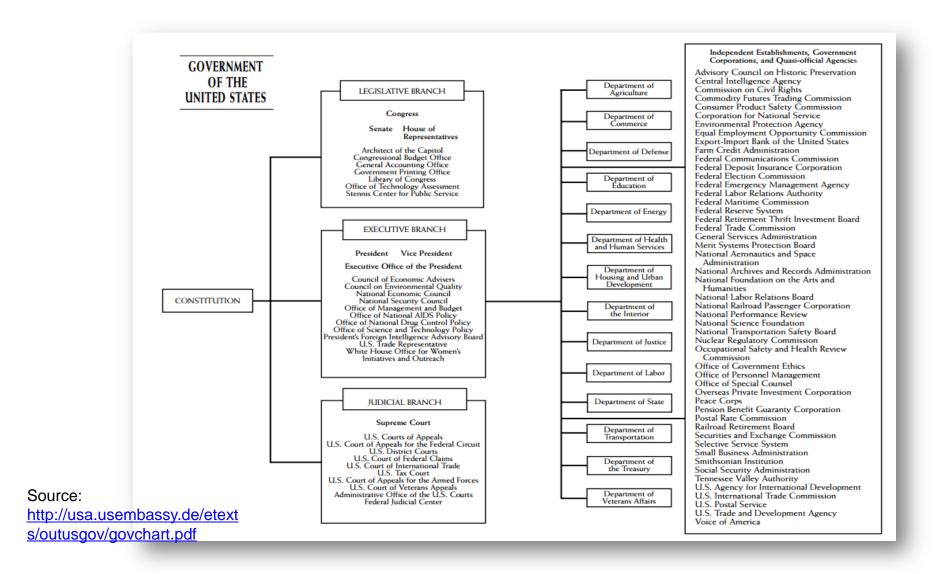


Source: Blue Star Families

*In 2013 "neither" was not an option

Barriers; Stovepipes: Executive, Legislative, & Judicial Branches Initiative and Engagements





Recent Developments: Improvement in Services for Military Families



- Center for Deployment Psychology training (2006)
 - Teaches military cultural competence to civilian providers
- The post 9/11 GI bill—enables transfer of education benefits to family members
- Mandated Military Family Readiness Groups
- Omnibus health act for families of wounded warriors
- Interstate education compact— a start to improving services and access to education for military children who are moving from one location to another
- Inclusion of masters level clinicians (MSW, MFT) on Tricare panels-broadens access to mental health providers
- Military Family Life Consultants
- Development of outreach materials for families related to TBI, PTSD, etc.
- Recognition of the need for accessible childcare for military families
- Joining Forces campaign- increased recognition of military family needs (e.g, employment, mental health, child-care, education)

Military Families: What Do You Need to Know?



- The health and wellness of military families impacts military readiness,
 recruitment, and retention
- Military members report that concerns about family members are the number one concern during deployment (MHAT v, 2008)
- It is unclear whether existing services adequately address the needs of military families due to limited program evaluation or tracking of best practices
- There is a perceived gap between the need for services for military families and the number of providers available to meet those needs
- A systemic approach (that involves local communities) to caring for service members and veterans is likely to be more successful
- Family members may be more likely to seek services. Services are more likely to be outside of the military setting, which increases the need for trained civilian providers who have knowledge about military culture

Top Military Family Issues: BSF's Programming for Health/Wellness



Everyone Serves:

A Handbook for Family and Friends of Service Members During Pre-Deployment, Deployment, and Reintegration

Everyone Serves is a free toolkit that includes tips to strengthen relationships and build resilience and coping strategies for service members and their families.

This FREE guide helps you:

- Build resilience
- Strengthen relationships
- Learn coping strategies
- Prepare for and manage reunion and reintegration

<u>Includes video, checklists and resources!</u>



Top Military Family Issues:

BSF's Programming for Financial Readiness



Blue Star Careers:

A Broad Range of Initiatives Throughout The Military Spouse Career Path

Educational Programming

Blue Star Scholarship

• Helps Military spouses finance participation in high quality, academically rigorous distance-learning programs across the country.

Blue Star Credits

 Pilot program with Tidewater Community College, which offers an Organizational Ombudsman Career certificate and academic credit. This certificate will build upon the formal training participants receive in the Navy Family Ombudsman Training program.

Employment Programming

Blue Star Spouse Employment Toolkit

• Shows spouses how to leverage their existing volunteer and military life experiences into successfully locating a desired position.

Blue Star Networks

• Unique platform for military spouses to empower, connect, and advocate for themselves across their career fields.

Blue Star Jobs

 Online job-matching database for short-term or contract-based work that can be done regardless of geographic location

Top Military Family Issues:

BSF's Programming for Financial Readiness



Blue Star Families Fellowship Program

Empowering Military Spouses & Raising Community Capacity

- Fellows serve as ambassadors for Blue Star Families, representing the organization on a local level and creating a vital link to military and civilian community leaders.
- They also serve as a strategic growth project manager, spearheading an initiative focused on outreach, engagement, volunteer management or membership growth to enhance BSF's impact.
- Fellows are sponsored by corporate partners who share a commitment to support and enrich military families and their respective communities.



Nathalie O'Shea 2013 United Health Care Fellow

"As a Fellow, I have worked directly with military spouses around the country, sharing resources and programs available through Blue Star Families. As both a military spouse and an entrepreneur, the Spouse Employment Toolkit and Blue Star Networks available through Facebook have been invaluable to me.

These programs have had an incredible impact on my professional success by putting a wealth of tools and information at my fingertips."

This professional experience, coupled with leadership training and professional development opportunities, ensures that BSF Fellows are well-equipped and ready to compete in the marketplace following their tenure with Blue Star Families.

Top Military Family Issues: BSF's Programming for Health/Wellness





Blue Star Museums is a partnership between Blue Star Families, the NEA and more than 1,900 museums across the country.

The program runs from Memorial Day to Labor Day and offers free museum admission to active duty, reserve, and National Guard service members and their families.

To date, over 700,000 military families have taken part in the program and it continues to grow!



Launched September 2012, Blue Star Theatres is a collaboration between Theatre Communications Group and Blue Star Families, with leadership support from the MetLife Foundation.

To date, 40 theaters have sign onto the program. The program, offering free and/or discounted entry, is designed to help better connect theatre offerings to military personnel across the United States.



www.BlueStarMuseums.org





For more information about BSF's Virginia-based membership and programming, email: membership@bluestarfam.org