

Alliance Newsletter

Volume 3 Issue 9



Mission Statement: The Alliance seeks to optimize the preparedness of behavioral health providers working to enhance the resilience, recovery and reintegration of Service members, Veterans, and their Family members and communities throughout the military, post-military, and family life cycles.

Current Research

Taft, C. T., Creech, S. K., Gallagher, M. W., Macdonald, A., Murphy, C. M., & Monson, C. M. (2016). Strength at home couples program to prevent military partner violence: A randomized controlled trial. *Journal of Consulting and Clinical Psychology*, [Epub ahead of print].

Researchers conducted a randomized control trial (RCT) to evaluate the efficacy of Strength at Home Couples, a cognitive– behavioral trauma-informed intimate partner violence (IPV) preventive group intervention for married or partnered military service members or veterans. Participants included 69 male service members or veterans and their female partners. Couples completed pre-intervention assessments including diagnostic interviews and measures of physical and psychological IPV and were then randomized to a supportive prevention couples group or Strength at Home Couples. All couples were reassessed at post-intervention and at 6 and 12 months follow-ups. The results of the study indicated that service members or veterans and their female partners engaged in fewer acts of reported physical and psychological IPV in the Strength at Home Couples condition relative to supportive prevention, and relative risk of physical violence was lower for both members of the dyad in Strength at Home Couples at follow-up assessments (male service member or veteran IPV relative risk [RR] .53; female IPV RR .43). Additionally, those in Strength at Home Couples evidenced significantly greater program completion than did those in supportive prevention (RR 1.73; 95% confidence interval [1.00, 2.99]). The authors argue that these results provide support for the efficacy of Strength at Home Couples in preventing physical IPV and reducing psychological IPV.

September is National Recovery Month

National Recovery Month is a national observance held every September to educate Americans about how substance use treatment and mental health services can enable those with a mental and/or substance use disorder to live a healthy and rewarding life. Recovery Month celebrates the gains made by those in recovery—as we do with other health conditions—reinforcing the message that behavioral health is essential to overall health, and disseminating information about prevention, treatment, and recovery. The observance also provides a vehicle for challenging citizens to take action to help expand and improve the availability of effective prevention, treatment, and recovery services for those in need. Materials produced for the Recovery Month observance include print, Web, television, radio, and social media tools, which are available [here](#).



Upcoming Webinar Training

The Center for Deployment Psychology is offering a half day webinar on November 3, 2016 from 13:00-17:00 that will provide clinicians using CBT-Insomnia an opportunity to review and expand on topics and techniques for treating deployment-related sleep disturbances. Treatment resistance and new diagnostic guidelines for insomnia will be discussed. Case examples will be introduced to demonstrate complexities that can arise during the course of CBT-I. Free Continuing Education (CE) credits are available. CME credits are not provided. For specific CE questions, contact Bridget Schaub at bschaub@pesi.com. To register, [click here](#). If you have registration questions, please contact Ms. Kris Hannah at khannah@deploymentpsych.org.

Integrated Care Basics

Are you trying to develop an elevator speech for times when providers and clients ask you about integrated care? Not sure what to tell new staff during orientation, or when trying to convey the value to potential partners? Are you considering a move to practice in an integrated care setting? This pre-recorded webinar from the SAMHSA-HRSA Center for Integrated Health Solutions will assist providers in understanding the basics of primary and behavioral health care integration in medical settings and learning how to effectively communicate the importance and value of integrated care. After the webinar, participants will: 1) understand the key definitions and terminology of primary and behavioral health care integration; 2) recognize bi-directional approaches to integration; and 3) have access to tools and resources to help further communicate the value and importance of integrated care. The webinar is free. Certificates of attendance and continuing education credits for webinar attendance are not available. To register, click [here](#), complete the form, and click "submit" to enter the webcast.



Conferences

[Collaborative Family Healthcare Assoc.](#)

October 13-15, 2016
Charlotte, NC

[National Council on Family Relations](#)

November 2-5, 2016
Minneapolis, MN

[Council of College and Military Educators Symposium](#)

March 6-9, 2017
Atlanta, GA

[National Council for Behavioral Health](#)

April 3-5, 2017
Seattle, WA

Federal Job Opportunities

All federal jobs are posted on the USAJOBS.Gov website. Go to www.usajobs.gov & go to “Advanced Search” & under “Series Search” type in “0101”, “0180” or “0185”
NOTE: You can refine your search on the page to limit to VA, Army, Navy, Air Force etc. Tips for using the USAJOBS website can be found [here](#).

0101 Series Jobs: Covers jobs in the Social Sciences, Psychology, and Welfare Services. These jobs may or may not require licensures.

0180 Series Jobs: Covers jobs in the Psychology and Counseling Psychology. Primarily jobs for those with PhD or PsyD, LMFT, or other counseling degrees and licensures.

0185 Series Jobs: Covers jobs for Social Workers ONLY. Must have licensure (i.e. LCSW)

0602 Series: Covers jobs for Psychiatrists.

Non-Appropriated Fund (NAF) Positions

NAF employment is considered federal employment. However, the monies used to pay the salaries of NAF employees come from a different source. Civil service positions are paid for by money appropriated by Congress. NAF money, on the other hand, is self-generated by activities and services that use NAF employees. Visit the following links to apply for NAF positions.

Department of Veterans Affairs Jobs

VA Hiring Initiative: The VA is hiring behavioral health providers for positions at VA facilities across the country.

VA Jobs: The VA has created links for providers that make it easy to search for VA jobs in your profession. Please click on the links below in order to see all of the current VA job openings, as listed on the USAJOBS website, for your profession:

[Psychiatrists](#)

[Psychologists](#)

[Social Workers](#)

[Licensed Professional Counselors](#)

[Marriage and Family Therapists](#)

[Psychiatric Nurses](#)

Non-Federal Job Opportunities

The federal government also uses contractors to provide behavioral health services to Service members and others. The government contracts with private contracting companies, who will then hire the individual providers to provide the necessary services. Several contractors known to hire behavioral health providers are listed below, along with links to websites that list job opportunities for providers.

Zeiders Enterprises [Link to current job openings.](#)

SERCO - [Link to All SERCO Job Announcements](#)

Choctaw Enterprises - [Main link to all jobs](#)

SAIC Career Opportunities - [SAIC Job Openings](#)

Health Net - [Link to all job openings at Health Net](#)

Health e-Careers Network - [Main link to all jobs](#)

Magellan Health- [Main link to all jobs](#)

Do you have information for the October 2016 Newsletter?

Please send it to Dr. Angela Lamson at lamsona@ecu.edu by October 8, 2016