



## September 2012

**If you registered previously at the MFCC site, we now have our own Web site. Please register there:**

**Alliance Web Site - Register NOW at the link below:**

**[Alliance Web site link - http://www.ecu.edu/che/alliance/](http://www.ecu.edu/che/alliance/)**

### **Alliance 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.

### **Membership:**

Membership in the Alliance is open to family behavioral health providers, educators and others seeking to advance the mission of the Alliance. Membership requires signing on to registration link and taking the initial survey.

### **Member Opportunities:**

Participation as a Member of the Alliance offers the following, specific opportunities:

- Access to relevant resources, e.g., Alliance Resource Guides;
- Contribution of information and resources for dissemination by the Alliance;
- Subject matter expertise for panels, summits, and educational and training activities;
- Submission of practice exemplars for consideration and publication on the Alliance web site;
- Participation in designated discussions/meetings;
- Participation in continuing education activities; and
- Submission of contributions for the monthly Newsletter

## **Do you have information for the September 2012 Newsletter?**

**Please send it to Dr. Gregory Leskin, (UCLA) at**

**[GLeskin@mednet.ucla.edu](mailto:GLeskin@mednet.ucla.edu) NLT September 20, 2012.**

## Text of the President's Executive Order

[www.whitehouse.gov/the-press-office/2012/08/31/fact-sheet-president-obama-signs-executive-order-improve-access-mental-h](http://www.whitehouse.gov/the-press-office/2012/08/31/fact-sheet-president-obama-signs-executive-order-improve-access-mental-h)

For Immediate Release

August 31, 2012

# Fact Sheet: President Obama Signs Executive Order to Improve Access to Mental Health Services for Veterans, Service Members, and Military Families

WASHINGTON, DC – Today, President Obama will sign an Executive Order directing key federal departments to expand suicide prevention strategies and take steps to meet the current and future demand for mental health and substance abuse treatment services for veterans, service members, and their families.

Ensuring that all veterans, Active, Guard, and Reserve service members and their families receive the support they deserve is a top priority for the Obama Administration. Since September 11, 2001, more than two million service members have deployed to Iraq or Afghanistan with unprecedented duration and frequency. Long deployments and intense combat conditions require optimal support for the emotional and mental health needs of our service members and their families. The Obama Administration has consistently expanded efforts to ensure our troops, veterans and their families receive the benefits they have earned and deserve, including providing timely mental health service. The Executive Order signed today builds on these efforts.

## President Obama's Executive Order

The Executive Order signed by President Obama:

### **Strengthens suicide prevention efforts across the Force and in the veteran community:**

- The Executive Order directs the VA to increase the VA veteran crisis line capacity by 50% by the end of the year.
- Under the Executive Order, VA will ensure that any veteran identifying him or herself as being in crisis connects with a mental health professional or trained mental health worker within 24 hours or less.

- VA will work with the Department of Defense to develop and implement a national 12 month suicide prevention campaign focused on connecting veterans to mental health services.

**Enhances access to mental health care by building partnerships between VA and community providers:**

- In service areas where VA has faced challenges in hiring and placing mental health service providers and continues to have unfilled vacancies or long wait times, the Executive Order Directs the Department of Veterans Affairs to work with the Department of Health and Human Services (HHS) to establish at least 15 pilot sites. In pilot sites, VA will contract with community health centers, community mental health clinics, community substance abuse treatment facilities and other HHS grantees and community resources to help reduce VA mental health waiting lists.
- Under the Executive Order, HHS and VA will develop a plan for a rural mental health recruitment initiative to promote opportunities for VA and rural communities to share mental health providers when demand is insufficient for either to support a full-time provider.

**Increases the number of VA mental health providers serving our veterans:**

- Under the Executive Order, VA will hire 800 peer-to-peer support counselors to empower veterans to support other veterans and help ensure that their mental health care and overall service needs are met.
- VA has launched an effort to hire 1,600 new mental health professionals to serve veterans. The Executive Order directs VA to use its pay-setting authorities, loan repayment and scholarships, partnerships with health care workforce training programs, and collaborative arrangements with community-based providers to recruit, hire, and place 1,600 mental health professionals by June, 2013. Since, 2009, the VA has expanded its mental health programs, hiring more than 3,500 mental health professionals since 2009.

**Promotes mental health research and development of more effective treatment methodologies:**

- The Executive Order directs the Department of Defense, the Department of Veterans Affairs, the Department of Health and Human Services and the Department of Education to develop a National Research Action Plan that will include strategies to improve early diagnosis and treatment effectiveness for TBI and PTSD.
- The Executive Order further directs the Department of Defense and Department of Health and Human Services to conduct a comprehensive mental health study with an emphasis on PTSD, TBI, and related injuries to develop better prevention, diagnosis, and treatment options.

**Launch a government-wide collaborative effort to address these issues through a Military and Veterans Mental Health Interagency Task Force:**

- The Executive Order establishes an Interagency Task Force, including the Department of Defense, Department of Veterans Affairs, Department of Health and Human Services, Department of Education, the Domestic Policy Council, National Security Staff, the Office of Management and Budget, the Office of Science and Technology Policy, and the Office of National Drug Control Policy, which will make recommendations to the President on additional strategies to improve mental health and substance abuse treatment services for veterans, service members, and their families.

**Supporting our Military, Veterans, and their Families**

The President has taken key steps to protect and strengthen the health of our military, veterans and their families here at home. Many of these initiatives are supported by agencies across the federal government and collaborative partnerships with states and communities.

## **Health Care**

- For the first time ever, 135 medical schools have committed to exchanging leading research on PTSD and TBI and will also train future physicians to better understand veteran health needs. More than 150 state and national nursing organizations and over 650 nursing schools have committed to ensure our nation's 3 million nurses are prepared to meet the unique health needs of veterans and their families by educating the current and future nurses of America to have a better understanding of PTSD and TBI.
- President Obama signed the "caregivers and Veterans Omnibus Health Services Act of 2010", into law which helps our most seriously injured post-9/11 veterans and their family caregivers with a monthly stipend; access to health insurance; mental health services and counseling; and comprehensive VA caregiver training and respite care.
- The Department of Labor has proposed new regulations for the Family and Medical Leave Act (FMLA) to support military families and caregivers. This rule would implement statutory changes to the FMLA, expanding leave to family members caring for veterans who have suffered a serious injury or illness.
- In July 2010, the VA published a historic change to its rules, streamlining the process and paperwork needed by combat veterans to pursue a claim for disability pay for post-traumatic stress disorder (PTSD).
- The VA expanded its workforce by over 2,600 people to handle applications for disability pay. The VA is also using technology and new approaches to help veterans get their benefits by accepting online applications for initial disability benefits, initiating an innovation competition, launching pilot initiatives, and investing over \$128 million in a paperless Veterans Benefits Management System.
- The administration is utilizing partnerships to reduce the stigma associated with seeking treatment for behavioral health issues. Make the Connection, a campaign launched by the Department of Veterans Affairs, is creating ways for veterans and their family members to connect with the experiences of other veterans and access the information and resources to help these families confront the challenges of transitioning from service to daily civilian life.

## **Licensing and Credentials**

- Nearly 35 percent of military spouses in the labor force require licenses or certification for their profession. Many military spouses hold occupational licenses and routinely move across state lines, causing licensing requirements to disproportionately affect the military spouse population. The First Lady and Dr. Biden encouraged all 50 governors to pass legislation by 2014 to reduce the financial and administrative strains that 100,000 military spouses incur from trying to get their state licenses or certification credentials to transfer from state to state as they move. Mrs. Obama and Dr. Biden encouraged governors to take Action in February 2012 when only 11 states had legislation on the books. 26 states now have measures in place to support military spouses and the initiative is on-track to meet the 2014 goal.

## **Education**

- The Department of Defense has awarded \$180 million in grants to support military-connected public school districts. These grants support improved academic programs for military children. More than 400,000 students from military families across all grade levels are impacted by these grant projects.

- The Department of Defense has awarded approximately \$25 million to military-connected Local Education Agencies (LEAs) this summer to focus on increasing student achievement and easing transitions through research-based academic and support programs.
- The Department of Defense, in collaboration with the Council of State Governments' (CSG) National Center for Interstate Compacts developed the Interstate Compact on Educational Opportunity for Military Children (the Compact) to address the educational transition issues of children of military families. The Compact covers transition issues including class placement, records transfer, immunization requirements, course placement, graduation requirements, exit testing, and extra-curricular opportunities. States adopt the Compact through legislation, and as a result, join the Military Interstate Children's Compact Commission (MIC3). To date, 39 states have approved the Compact and these states are home to 89 percent of school age children whose active duty parents are assigned to military installations in the United States. We will continue to work with leaders to encourage the 11 remaining states approve the Compact and become members of MIC3.
- VA eased the Post-9/11 GI Bill application process within the eBenefits portal, including transferability to spouses or children for service members with over six years of service. Servicemembers can now apply on-line to transfer the benefits of their Post-9/11 GI Bill to eligible beneficiaries.

## **Housing**

- On top of the historic settlements completed by the Federal government and 49 state Attorneys General, major mortgage servicers will be providing relief to thousands of service member and veteran households. A review will be conducted of every service member household foreclosed upon since 2006. Those wrongly foreclosed upon will be compensated equal to a minimum of lost equity, plus interest and a refund for money lost because they were wrongfully denied the opportunity to reduce their mortgage payments. Additionally, these organizations will pay \$10 million into a VA fund that guarantees loans on favorable terms for veterans.
- The Administration is working to end veteran homelessness through leveraging broad support at Federal, State, and local levels in both the public and private sectors. Working with over 4,000 community agencies, the VA and HUD have successfully placed more than 37,000 veterans in permanent housing with dedicated case managers and access to high-quality VA health care since 2009. To ensure we reach out to our homeless veterans, the VA created a National Registry for Homeless Veterans and established a National Homeless Hotline. Veteran homelessness was reduced by nearly 12 percent between January 2010 and January 2011.
- In 2011, VA helped save 72,391 Veteran and military borrowers with VA-guaranteed loans from foreclosure, a 10% increase from the prior year. VA has helped nearly 59,000 borrowers avoid foreclosure so far in 2012. The home loan guaranty program helps Veterans and their families purchase homes, often with no down payment required. The program expects to guaranty the 20 millionth loan in early November 2012.
- Using their Interest Rate Reduction Refinancing Loan, also known as the Streamline Refinance, VA refinances existing VA loans into new loans with lower interest rates, or adjustable rate mortgages (ARMs) into fixed rate mortgages. In 2011, this program saved an average of \$202 per month in individual payment reductions and 1.42% in interest rates. This equates to saving military and veterans \$24 million a month and \$293 million per year.

## **Financial Readiness**

- The Department of the Treasury's Office of Financial Education and Financial Access has helped military families identify predatory lending practices. The Consumer Financial Protection Bureau (CFPB) established an office of service member affairs to ensure that the CFPB addresses the financial challenges that confront military families and strengthens protections against abusive financial practices.

# Resources for Military and Veteran Families

## Exceptional Advocate eNewsletter

The new school year is officially underway. Are you looking for ways to set your child up for a success? Then check out our article: "Ten Tips to Help Your Child Succeed in School" included in this month's issue. A therapeutic ice skating program was offered this summer for children enrolled in the Peterson Air Force Base Exceptional Family Member Program; you can read all about it this month. On August 31, Dr. Rebecca Posante retired from her position as director of the Office of Military Community Support for Military Families with Special Needs (OSN). In this issue she says farewell and, in her own words, recalls some of her career highlights and personal experiences. You won't want to miss it. You'll find these articles and much more in the September issue of The Exceptional Advocate.

To view the interactive flip version of The Exceptional Advocate, click on the link below.

<http://apps.mhf.dod.mil/efmp/book/2012/September>

You may also view the html version of The Exceptional Advocate by clicking on the link below.

<http://apps.mhf.dod.mil/efmp/news>

## Veterans United Foundation Scholarship Program

Award - Five bi-annual \$2,000 scholarships will be awarded to help pay for tuition and books.

Eligibility - Potential applicants must be pursuing a post-secondary degree at an accredited college or university and have a connection to the military by being one of the following:

- \* Active-duty service member
- \* Veteran
- \* Spouse of military member or veteran
- \* Surviving spouse of a fallen soldier
- \* Child of a military member or veteran

How to Apply - Applicants must also submit an essay no longer than 750 words based on one of three prompts made available in the spring and fall by Veterans United Scholarship Program. Spring essays will be accepted on April 1-30th and recipients will be announced by May 15th. Fall submissions will be accepted October 1-31st with recipients announced by November 15th.

The time to apply is rapidly approaching, so now would be the perfect time to share this scholarship with your students.

More information about the scholarship and Veterans United Foundation can be found at <http://www.veteransunited.com/about/scholarships/> and <http://www.enhancelives.com/> respectively. If you have any questions and/or decide to share our scholarship with your audience, I'd love to hear from you. Thanks for your time and consideration, and have a great day!

### **NBCC Foundation**

The NBCC Foundation is pleased to announce the 2013 Foundation scholarships. The scholarship program is integral to the NBCC Foundation's mission to leverage the power of counseling by strategically focusing resources for positive change. The goal of the scholarship program is to increase the number of counselors in priority underserved communities, currently considered to be military and rural populations.

Scholarships are available to students currently enrolled in a CACREP-accredited, master's-level counseling program. The NBCCF military scholarships provide financial support to service members and veterans who commit to serving military, veterans and families for a minimum of two years upon graduation. The rural scholarships support students living in rural areas who commit to serving rural populations upon graduation.

Five military and five rural scholarships are available in the amount of \$5,000 each. The military scholarship requires recent military experience, and residence in a rural area is required for the rural scholarship. The deadline for applications is November 1, 2012. NBCCF will award the scholarships in February 2013.

For more information about the NBCC Foundation scholarships, please visit [www.nbccf.org/programs](http://www.nbccf.org/programs).

### **Workshop on the Scientific Study of Military Children**

CNA in November 2011 funded and hosted a scientific workshop on the well-being of military families and children. CNA planned the workshop in collaboration with several other organizations, including the Military Child Education Coalition, Blue Star Families, the Center for a New American Security, Joining Forces, and the Uniformed Services University of the Health Sciences.

The workshop aimed to provide an opportunity for an exchange of information and ideas between researchers and other stakeholders who don't frequently communicate. Although this is changing, researchers of civilian children and family issues don't frequently collaborate with researchers who focus on military children and families. Conferences focused on military children and families rarely include leading researchers of civilian children and family issues, and vice versa. Moreover, funders of research and policy-makers who promote research on children and families don't frequently have an opportunity to learn about the research needs pertaining to military families and children.

The CNA website [www.cna.org/militarychildren](http://www.cna.org/militarychildren) provides the agenda of the 2011 workshop, access to the slides of many of the speakers, the workshop summary document and a Future Directions for Research document.

### **New in the Scientific Literature**

#### **Recent Articles**

**Sawyer, G. C. and R. R. Minick (2012). Integrated care for returning members of the military and their families.** Integrated care: Applying theory to practice. R. Curtis and E. Christian. New York, Routledge/Taylor & Francis Group; US.: 243-255.

(from the chapter) The White House's Policy Committee on Military and Veteran Families identified two critical service area initiatives in an effort to help military members and their families thrive during and after deployment: (a) increase behavioral health care services through prevention-based integrated services in the community and (b) build awareness among military families and communities that psychological fitness is as important as physical fitness (U.S. Department of Veterans Affairs, 2011a). To carry out these initiatives, the Service Members Counseling and Support Center (SMCSC) was established as part of an integrated behavioral health program embedded within an urgent care clinic located in a rural area of the southeastern United States. The SMCSC resides on a hospital campus and provides integrated services for all patients and a specialty service that accommodates the unique health needs of active-duty, National Guard, Reserve, and veteran military personnel and their families. This chapter will describe the programming that meets the needs of service members and their families, as well as highlight the reasons why this approach is necessary. It will also explore the behavioral health issues facing military service members and their families and present considerations for how to best serve this population in integrated care (IC) settings. **Book chapter**

**Oman, N. (2012). What do Spouses of Current Service Members Consider Risks and Protective Factors for Suicidal Ideation.** Master of Social Work. St. Paul, St. Catherine University/University of St. Thomas School of Social Work: **Paper 70**.

This quantitative study investigates what current service members' spouses identify as risk and protective factors for suicidal ideation, for themselves and for other military spouses. Online surveys were used to obtain demographic information, place of residence, impact of deployment, and identify risk and protective factors for suicidal ideation for military spouses. Respondents (n=55) were military spouses, recruited through Facebook "Military Spouse" pages. Findings identified immediate family, peers, and resilience as protective factors for suicidal ideation in themselves and legal issues, financial issues, and thoughts of ending ones' own life as risk factors in other military spouses. Respondents were more likely to identify risk factors for suicidal ideation for other military spouses and protective factors for suicidal ideation for themselves. Implications for practice and research are provided.

**Escolas, S. M., R. Arata-Maiers, et al. (2012). "The Impact of Attachment Style on Posttraumatic Stress Disorder Symptoms in Postdeployed Military Members."** US Army Medical Department Journal(July-September): 54-61.

This study examined the effects of attachment style on self-reported posttraumatic stress disorder (PTSD) symptoms in a population of service members (N=561). Active duty, post-deployment service members completed anonymous questionnaires including 2 measures of adult attachment and the PTSD checklist–military as a measure of PTSD symptoms. Results confirmed the central hypothesis that attachment style was related to reported PTSD symptoms. Secure attachment style was associated with less reported PTSD symptoms and therefore may be involved in mechanisms associated with protection from developing PTSD after experiencing wartime trauma. Results were consistent when tested across continuous and dichotomous assessments that captured diagnostic criteria. This study demonstrates a significant relationship between attachment style and PTSD symptoms within a military population, potentially providing the basis for future research in this area.

**Maholmes, V. (2012). "Adjustment of Children and Youth in Military Families: Toward Developmental Understandings."** Child Development Perspectives: Online First.

Nearly, 2 million children in the United States live in military families. Throughout all branches of the U.S. military since September 11, 2001, ca 700,000 children have had or currently have a parent deployed to the combat zones of Iraq or Afghanistan. As a result, researchers are paying increasing attention to the effects of military deployment on children



and families. These facts and the changing landscape of military service point to the need to empirically examine the impact of parental military deployment on immediate and longer term child adjustment. The Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) recently initiated a research program to address these issues. This article draws on attachment and family stress theories as a frame for discussing the effects of parental deployment on child adjustment and family functioning and for outlining the NICHD research priorities. It discusses areas where developmental science can make important contributions as well as challenges for conducting research in military families.

**Lambert, J. E., R. Engh, et al. "Impact of Posttraumatic Stress Disorder on the Relationship Quality and Psychological Distress of Intimate Partners: A Meta-Analytic Review." Journal of Family Psychology.**

The authors conducted a meta-analysis of the literature on associations between trauma survivors' PTSD symptoms and the (a) relationship quality and (b) psychological distress of intimate partners. Results yielded a small combined effect size ( $r = -.24$ ) for the association between PTSD and partners' perceived relationship quality. Gender and military status moderated this association with a larger effect size for female partners of male trauma survivors than for male partners of female trauma survivors and a larger effect size for military samples than for civilians. The effect size of the association between PTSD and partners' psychological distress was moderate in magnitude ( $r = .30$ ). Analysis of hypothesized moderators indicated this association was stronger among military than civilian samples. The association was also stronger among samples of survivors who experienced traumatic events in the more distant past compared with those who experienced more recent events. Results support the systemic impact of one family member's PTSD symptoms and highlight areas for future research., (C) 2012 by the American Psychological Association.

**Meis, L. A., K. W. Schaaf, et al. (2012 Online First). "Interest in Partner-Involved Services Among Veterans Seeking Mental Health Care From a VA PTSD Clinic. [Article]." Psychological Trauma: Theory, Research, Practice, & Policy.**

Associations between PTSD and difficulties in intimate relationships have prompted national calls for partner-involvement in treatment for PTSD. However, research is limited evaluating patient preferences for the format of these services or predictors of these preferences. Such information is vital to shaping services so they are relevant to those most interested in them and to those with greatest need. To address these gaps, we surveyed 185 coupled veterans as they presented for mental health appointments at a VA PTSD treatment clinic. We assessed broad interest in greater partner-involvement, specific interest in couple therapy, and potential predictors of these interests, including family concerns, relationship satisfaction, PTSD symptom severity, and combat era. We found unique positive associations between interest in partner-involvement and both family concerns and relationship satisfaction, suggesting those most interested in partner-involvement are likely those experiencing the greatest family concerns and the most satisfied in their intimate relationships. Associations between interest and PTSD severity were nonsignificant. Interest in couple therapy was significantly greater among returning veterans than Vietnam/Korean War Veterans. However, these two groups did not vary significantly in their interest in greater partner-involvement more broadly. Discussion of findings considers the roles of both insight into PTSD-related family problems and relationship satisfaction in motivating interest in partner-involvement in care, the potential need to address motivation for partner-involvement among veterans in distressed relationships, and the importance of alternative methods of partner-involvement to full courses of couple therapy, particularly for Vietnam/Korean War era veterans., (C) 2012 by the American Psychological Association

**Anderson, J. R., Y. Amanor-Boadu, et al. (2013). Resilience in Military Marriages Experiencing Deployment. Handbook of Family Resilience. D. S. Becvar, Springer New York: 105-118.**

Separation due to deployment is a hallmark of married life for military couples. As a result of U.S. military engagement in the Middle East since 9/11, known as Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF), these separations resulting from military related deployments have become more frequent and longer. According to recent Department of Defense statistics, since September 11, 2001, over two million service members have been deployed,

with nearly 800,000 deploying more than once. In total, U.S. troops have deployed 3.3 million times (Tan, 2009). Since 56 % of the nearly 1.5 million service members are married and 71 % of all officers in the military are married, the vast majority of military couples have experienced one or multiple deployments. The most dominant narrative related to the effects of military service in general, and specifically to deployment to combat zones, is that deployment harms personal well-being and marriages, often irreparably (Dao & Einhorn, 2010). However, there is also evidence that deployment seems to have little effect on marital stability (Karney & Crown, 2007), and many report that deployment strengthened their marriage (Kaiser Family Foundation, 2004). The purpose of this chapter is to begin to understand and describe how some marriages are able to be resilient following the stress of deployment. **Book chapter**

**McNally, R. J. (2012). "Psychiatric disorder and suicide in the military, then and now: Commentary on Frueh and Smith." *Journal of Anxiety Disorders* 26(7): 776-778.**

Consulting archival medical data from the American Civil War, Frueh and Smith found little evidence of mental disorders, no evidence of reexperiencing symptoms suggestive of posttraumatic stress disorder, but a notable rate of suicide. In this commentary, I suggest reasons why the archives contain so few traces of combat-related disorders despite the massive trauma experienced by soldiers in the Civil War, and I draw implications for military personnel returning from the wars in Iraq and Afghanistan.

**Krull, H. and M. T. Haugseth (2012). Health and Economic Outcomes in the Alumni of the Wounded Warrior Project** [http://www.rand.org/pubs/technical\\_reports/TR1245](http://www.rand.org/pubs/technical_reports/TR1245). Santa Monica, RAND Corporation.

Since 2002, the not-for-profit Wounded Warrior Project (WWP) has sought to offer support for and raise public awareness of those injured during service on or after September 11, 2001. WWP gives members (alumni) access to programs that ensure that wounded warriors are well-adjusted in mind, spirit, and body and that they are economically empowered. Here the authors report a detailed analysis of how individuals with different marital statuses, genders, pay grades, and employment statuses were meeting these goals and how outcomes of its alumni compared with the outcomes of other veteran and nonveteran U.S. populations. The organization's decisionmakers can use the information from this report to determine the degree to which strategic objectives are met for each subgroup and to set new goals and the means by which the organization and its alumni and may reach those goals. **Key Findings:**

[http://www.rand.org/pubs/technical\\_reports/TR1245.html#key-findings](http://www.rand.org/pubs/technical_reports/TR1245.html#key-findings)

**Zolkoski, S. M. and L. M. Bullock (2012 Online First). "Resilience in Children and Youth: A Review." *Children and Youth Services Review*(0).**

Many children are reared in less than ideal family conditions (e.g., poverty, violence, substance abuse, family dissonance, family or personal illnesses). Situations such as these may inhibit the normal intellectual, social, and emotional development of children and youth, thus interfering with them reaching their full potential as adults. Conversely, many children encounter such adversities and fair well in spite of the challenges and may be considered to be resilient. This paper offers a review of the literature dating back to the 1970s to the present. In addition, several monumental longitudinal studies dating back to the 1950s are included. The paper reviews the (a) definition of resilience, (b) origins and recent advances in researching resilience, (c) protective factors, (d) models of resilience, (e) issues when researching resilience, (f) measures of resilience, and (g) resilience-based interventions.

## Resources for Providers

[Afterdeployment.org](http://Afterdeployment.org)

## [Provider Pro on afterdeployment.org](http://www.afterdeployment.org)

Resources for clinical providers that includes clinical practice guidelines, a “Behavioral Health News Reader” section, mobile applications, client handouts, continuing education information, and more.

- [Continuing Education](#)

## **National Healthy Marriage Resource Center**

### [National Healthy Marriage Resource Center - Military Resources](#)

Includes :

- [You're Not Alone](#) (2012) – An activity to help grandparents who are caring for children of deployed soldiers identify support systems.
- [Working Together to Strengthen Guard and Reserve Couples and Families: A Closer Look at Challenges and Strategies](#) (2011 – Bouchet, Stacey. National Healthy Marriages Resource Center (NHMRC ) and Annie E. Casey foundation) – This paper provides a summary of the forums convened by The Annie E. Casey Foundation and the NHMRC around efforts to discover the challenges posed to intimate relationships of National Guard and Reserve services members and their relationships with their families.
- [The Art of Military Ops](#) (2012) – Designed to raise awareness about the challenges that military families face when returning home. The Art of Marriage Ops campaign equips military couples with The Art of Marriage DVD series.
- MANY MORE!

### [National Healthy Marriage Resource Center - Featured Resources](#)

Includes “Mental Health and Marriage/Relationship Education: What’s the Connection

## **Center for the Studies of Traumatic Stress**

### [Courage to Care, Courage to Talk New Fact Sheets About War Injuries and Intimacy](#)

## **Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE)**

New ‘LifeArmor’ Mobile App Helps Families with Military Life [ <http://www.dcoe.health.mil/NewsArticle.aspx?id=3526> ]  
7/24/2012

By National Center for Telehealth and Technology Public Affairs

The Department of Defense has a new smartphone mobile application to help service members and their families manage the challenges of military life. "LifeArmor" has 17 behavioral topics with information, assessments, videos with personal stories and interactive exercises to develop coping skills.

"LifeArmor" is a comprehensive learning and self-management tool to assist members of the military community with common mental health concerns. It was developed by psychologists at the Defense Department's National Center for Technology and Technology, known as T2, as a companion application to their afterdeployment.org website, launched in 2008 to help service members returning from combat deployments. The new mobile application brings behavioral health topics from the website to smartphones and tablets, used by most service members.

### [DCoE Schedule of Monthly Webinars](#)

Sept. 27, 2012 – Managing Suicide Behaviors

Oct. 25, 2012 – Learning from Real Cases, Military Medicine Supplement

Nov. 15, 2012 – Emerging Technologies to Address PTSD/TBI

Previous 2012 DCoE Webinar information and resources can be found at:

<http://www.dcoe.health.mil/Training/MonthlyWebinars/2012Webinars.aspx>

## Featured Upcoming Training

### Recent Articles

## FEATURED RESOURCES

### Online Resources

#### MILITARY CHILD EDUCATION COALITION (MCEC) – TRAININGS/PROFESSIONAL DEVELOPMENT

Living in the New Normal: Helping Children Thrive through Good and Challenging Times (LINN)

- LINN training is a comprehensive initiative providing community professionals, educators, family members, and other concerned individuals with information on how to support military children during times of uncertainty, trauma, and grief. This three-part initiative includes an accredited professional development institute, a professional development practicum, and a public engagement model, grounded by well-researched, vetted resources.
- LINN Institute: designed for educators and community professionals
- LINN Practicum: designed for parents, child care practitioners, educators, Family Readiness Group leaders, and other concerned adults
- LINN Public Engagement: designed for state and community leaders
- Trained over 8370 professionals since 2007

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#### Sep 13, 2012

08:00am [Guard and Reserve Institute - Chattanooga, TN](#)

08:00am [Living in the New Normal Practicum - Niceville, FL](#)

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#### Sep 18, 2012

08:00am [Living in the New Normal Practicum - Prescott, AZ](#)

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#### Sep 19, 2012

08:00am [Living in the New Normal Practicum - Ft. Benning, GA](#)

08:00am [Transition Counselor Institute \(Phase One\) - Fort Belvoir](#)

## UPCOMING CONFERENCES AND TRAININGS

### September 2012

September 13-16

## **American Association for Marriage and Family Therapy (AAMFT) Annual Conference**

[http://www.aamft.org/iMIS15/AAMFT/Education\\_and\\_Training/Annual\\_Conference/Content/Events/Annual\\_Conference.aspx?hkey=01376fe8-c4e8-439f-a51b-8418d371323f](http://www.aamft.org/iMIS15/AAMFT/Education_and_Training/Annual_Conference/Content/Events/Annual_Conference.aspx?hkey=01376fe8-c4e8-439f-a51b-8418d371323f)

Charlotte, NC Theme – Women: Evolving Roles in Society and Family

September 9-12 (Affiliated Training Sept 7-8 and Sept 12 is post-conference workshop)

## **International Violence, Abuse and Trauma (IVAT) Conference – Call for Submissions**

[http://www.ivatcenters.org/conferences/17thIC/2012\\_Call\\_for\\_Submissions-FINALVERSION.pdf](http://www.ivatcenters.org/conferences/17thIC/2012_Call_for_Submissions-FINALVERSION.pdf)

Town and County Hotel and Resort, San Diego, CA

Theme – Best Practices: Compassion in Action Includes military track

## **October 2012**

October 23-28, 2012 *New entry*

59<sup>th</sup> American Academy of Child and Adolescent Psychiatry (AACAP)

Hilton San Francisco Union Square

### **Preliminary Schedule**

The Annual Meeting [Preliminary Schedule](#), including the full list of speakers is now available. The Program Schedule is searchable by speaker, date, type of program, or topic keyword and descriptions are listed for all sessions.

October 25-27

Advancing School Mental Health

<http://csmh.umaryland.edu/Conferences/AnnualConference/AnnualHome.html>

Salt Lake City, UT

The **17th Annual Conference on Advancing School Mental Health** will be held October 25-27, 2012 at the Salt Lake City Marriott Downtown Hotel (75 S. West Temple) in Salt Lake City, Utah. The Conference is sponsored by the Center for School Mental Health (CSMH) and the IDEA Partnership (funded by the Office of Special Education Programs [OSEP], sponsored by the National Association of State Directors of Special Education). The theme of the 17th Annual Conference is "**School Mental Health: Promoting Positive Outcomes for Students, Families, Schools, and Communities.**" [Save-the-date!](#)

October 31-Nov 4

**74<sup>th</sup> National Council on Family Relations (NCFR) Annual Conference**

<http://www.ncfr.org/ncfr-2012> Hyatt Hotel, Phoenix, AZ

## **November 2012**

November 11-15

The Association of Military Surgeons of the U.S. (AMSUS) 118<sup>th</sup> Annual Meeting

<http://amsusmeeting.org/> Phoenix, AZ

# JOB OPENINGS

## Becoming a TRICARE Provider

### TRICARE

TRICARE is the health care program for uniformed service members, their families, and survivors. TRICARE uses military treatment facilities (also known as direct care) as the main delivery system and augments direct care with a network of civilian providers and facilities to provide timely access and high quality service while maintaining the capability to support military operations.

The program is available worldwide and managed regionally in six separate TRICARE regions jointly by the TRICARE Management Activity (TMA) and TRICARE Regional Offices.

- [North](#)
- [South](#)
- [West](#)
- [Eurasia-Africa](#)
- [Latin America & Canada](#)
- [Pacific](#)

For information on becoming a TRICARE Provider, go to:

<http://www.tricare.mil/providers/BecomeAProvider.aspx>

## USAJOBS.GOV Job Openings by Series Number

Go to [www.usajobs.gov](http://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.

### 0101 Series

**0101 Series:** Covers jobs in Social Sciences, Psychology and Welfare Services. These jobs may or may not require licensure.

List of Current Positions under this category:

<http://www.usajobs.gov/JobSearch/Search/GetResults?Keyword=0101&Location=&search=Search!>

### 0180 Series

**0180 Series:** Covers jobs in Psychology and Counseling Psychology. These jobs are primarily for those with PhD or PsyD, LMFT or other counseling degree and licensure.

List of Current Positions under this category:

<http://www.usajobs.gov/JobSearch/Search/GetResults?Keyword=0180&Location=&search=Search>

### 0185 Series

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

**List of Current Positions under this category:**

<http://www.usajobs.gov/JobSearch/Search/GetResults?Keyword=0185&Location=&search=Search>

**Non-federal job openings**

- **Zeiders Enterprises:** [Link to current job openings](#).
- **SERCO** - [Link to All SERCO Counseling/Support/Outreach/Job Announcements](#)
- **CERIDIAN** - [Link to current Ceridian Jobs](#) – at drop down menu for functional area, choose Social Work/Health Care.
- **Choctaw Enterprises** - [Main link to all jobs](#)
- **SAIC Career Opportunities** - [SAIC Job Openings](#)
- **Health Net** - [Link to all job openings at Health Net](#)
- **Eagle Applied Sciences** – Eagle’s direct link to job openings  
[http://www.eagle-app-sci.com/index.php?option=com\\_content&view=article&id=51&Itemid=92](http://www.eagle-app-sci.com/index.php?option=com_content&view=article&id=51&Itemid=92)
- **Health e-Careers Network** - [Main link to all jobs](#) - when you go to this site, type in the following keywords to find military-affiliated jobs:
  - Sterling Medical
  - Spectrum Healthcare Resources
  - Henry M. Jackson Foundation for the Advancement of Military Medicine
  - Eagle Applied Sciences