

Roundtable Discussion Summary

“What Do Warriors-Families Say They Need From Government to Enhance Their Well-being and Psychological Health?”

To effectively meet the evolving needs of warriors and their families, policy makers and governmental and other organizational leaders will need to simultaneously evaluate current services while forecasting future requirements. According to attendees, attaining this 360 degree view while continuing to deliver services will require a redoubling of efforts.

“We recognize that this is an area that if we’re standing still - we’re losing ground,” said one speaker at the Warrior-Family Roundtable, the second of three annual roundtable discussions jointly sponsored by the Military Officers Association of America (MOAA) and Zeiders Enterprises, Inc. The session was hosted by The Chicago School of Professional Psychology on May 3, 2011.

The purpose of the meeting was two-fold; to identify what warrior-families say they need to enhance their psychological health and well-being and secondly, how government and communities can better address those needs. The discussion also included a review of initiatives outlined in the January 2011 White House Report “*Strengthening Our Military Families: Meeting America’s Commitment*,” which focuses on ways the Federal Government can help to improve the quality of life for military members and their families.

Attendees applauded the initiative but cautioned against developing programs without feedback from warrior families. “One size does not fit all,” said one family member, while another echoed the concern that programs designed without participation from affected members and their families result in “someone in Washington telling me what I need.” Another attendee said it is critical to gain ‘real

What do warriors-families say they need?

- To be engaged in a positive way
- To have caring and sensitive providers with good customer service skills
- To have the right help, available at the right time, where they are
- Listen first - don’t immediately pathologize behavioral or mental health issues
- To be better prepared for the two week rest and recuperation periods to mitigate stress and disruption on families
- To better prepare for the two week rest and recuperation periods to mitigate stress and disruption on family routines
- Strategies to help manage chronic grief

What else can government and others do to help?

- Focus additional efforts and resources aimed at reintegration, especially service/units that experience short dwell time at home
- Establish medical support protocols and procedures to address holistic health and well-being that includes immediate and extended family members and friends
- Target and track services and support to at-risk warriors-families, such as those that attempted suicide
- Train military and civilian medical providers to recognize stress-induced medical conditions related to military life and deployments
- Increase provider understanding of military culture and unique lifestyle stressors
- Provide an inventory of available services to avoid duplication, eliminate gaps and identify best practices with family member input

military family’ input if programs are to be flexible enough to deliver appropriate and personalized needs. Participants, especially service members and their families said they want to be included in the development of programs designed to help them. That sentiment was summarized by one participant with the comment, “nothing about us without us”. Families said they want opportunities to provide feedback to both the program developers and service providers.

Attendees suggested that ensuring communication of oversight and program effectiveness measures are equally important to service delivery. “We need to hold people accountable...and make sure they do what they say they’re going to do.” Family members also emphasized how important it is to have services delivered by appropriately knowledgeable professionals, ones that understand the culture of the military community.

One speaker said, “it is my absolute belief that when families stand beside their uniformed loved one - they are answering the call to duty and service to this nation as much as those who are wearing the uniform. Sometimes we need to remind ourselves that there’s a whole family institution that is affected by this (injury) and we need to deal with the whole family.” Families are not ‘add-ons,’ they are “an integral part of the healing process...and they need to be served as wholly and completely as the service member.” This recognition of the entire ‘family system’ is what, attendees suggest, will help both governmental and private organizations deliver needed services, especially in the future.

Issues resulting from transitions, such as returning from deployments, discharge from medical facilities or changing military status are of great concern and, according to participants, ones that will continue. One care giver said, “We need to do a better job of understanding what reintegration is all about. We have a real hard time with that.

Reintegration is probably causing more and more of the stresses and anxieties out there than even deployment because we’ve been deploying for so long.” Her message to leaders is “now is the time to figure out how to re-engage back into the family.” She and others talked about the reluctance in the past to truly reintegrate the returning service member, especially in the face of continued or additional deployments. But reintegration is a process that concerns the entire family and their social systems. To understand warriors and their families’ needs,

providers need to engage them in a variety of settings as they transition. Life upon return, regardless of obvious changes, will be different. To help everyone adjust to this ‘new normal’ service providers must join together and meet “people where they are, in their communities, at the schools, through their faith based organizations” and engage in a positive way.

This year’s final roundtable will be held in the fall. The program will include reports of supportive actions and initiatives that are a result of this roundtable’s discussions and recommendations. The MOAA-Zeiders Warrior Family Roundtable is an outgrowth of the 4th Annual Defense Forum (DFW) that examined the transformational effects of extended war on military forces and their families.

“Nothing about us without us.”

Participants in this roundtable: Ms. Heather Ansley; Ms. Tamra Avrit; Mr. Michael Bargiband; Ms. Patricia Barron; CAPT (USN-Ret) Kathy Beasley; Ms. Meredith Beck; Mr. Jerry Black; Dr. David Brown; Ms. Sherri Brown; CDR (USN-Ret) René Campos; Ms. Evonne Carawan; Mr. Doug Carmon; Mr. Dave Carroll; Ms. Siobhan Casey; Honorable William Chatfield; Mr. Charles Ciccolella; Dr. Matthew Clark; Ms. Barbara Cohoon; Dr. Lynda Davis; SSG (USA-Ret) Charles Eggleston; Ms. Pamela Stokes Eggleston; Mr. Wilbert Forbes; Mr. Brian Gawne; Ms. Jean Hand; Mr. Jeremy Hilton; Ms. Linda Kreter; Ms. Monique Rizer; Dr. Kathleen Roth; VADM (USN-Ret) Norb Ryan, Jr.; Ms. Andrea Sawyer; SGT (USA-Ret) Loyd Sawyer, Mr. Jim Wear; CAPT (USN-Ret) Catherine Wilson; COL (USAF-Ret) Cherie Zadlo; Mr. Mike Zeiders. The roundtable was moderated by Dr. David Brown, Clinical Psychologist, Recovery Care Support Program Manager, Defense Centers of Excellence (DCoE), Resilience and Prevention Directorate.