

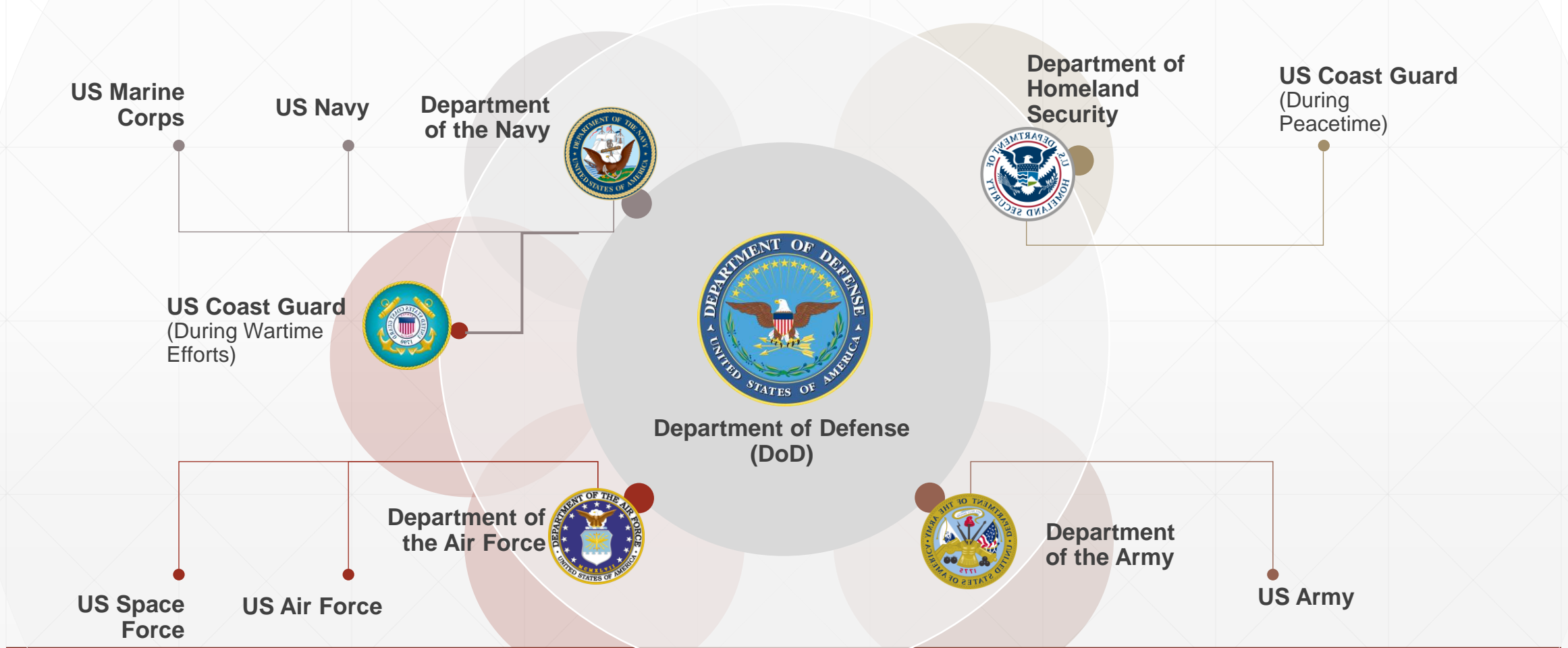
Mental Health and The Military Family

Presented by: Shayona Montemurro, MA, CPS
CT Prevention Training and Technical Assistance Service Center

Presentation Objectives

- Provide participants with an overview in topics in mental health as they pertain to military subpopulations: active-duty military families, the Military Child, the Military Spouse and the Dual-Military Couple
 - Obtain usable knowledge of military culture, terminology, and demographic information, especially as it pertains to mental health in the context of military/Armed Forces populations.
 - Presenter's lived experience of mental health and military cultural aspects, which may be helpful for practitioners in determining risk and protective factors, understanding needs of veteran populations and understanding how to interact with veteran populations and their families.
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Military Organization Chart

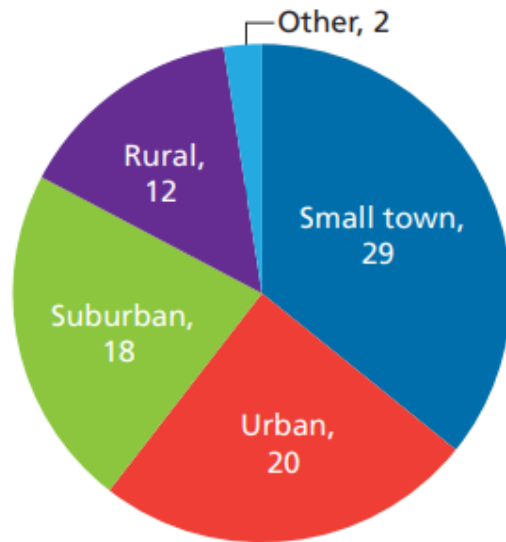


The Military as an Organization

- What types of people join the military?
 - What are their motivations for joining the military?
 - How are their families involved in their decision to pursue employment in the military or to remain in the military once they have enlisted or commissioned in their branch of service?
 - What unique health disparities affect military servicemembers and their families?
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Who Joins the Military?

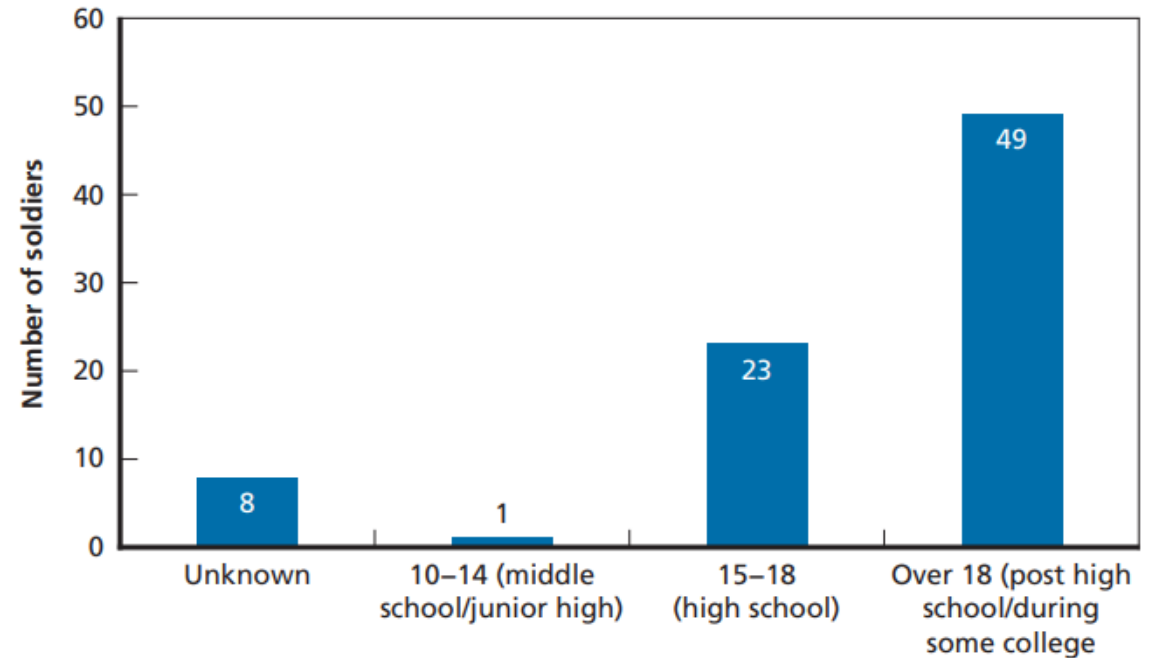
Figure 2.3
Where Soldiers Come From



NOTE: "What is your hometown; where did you come from?" n=74; numbers inlaid in the figure represent number of soldiers.

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Figure 2.2
When and at What Age Decided to Enlist in the Army



NOTE: "When/at what age did you decide to join the Army?" n=73.

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What are Their Motivations?

Institutional Motivation

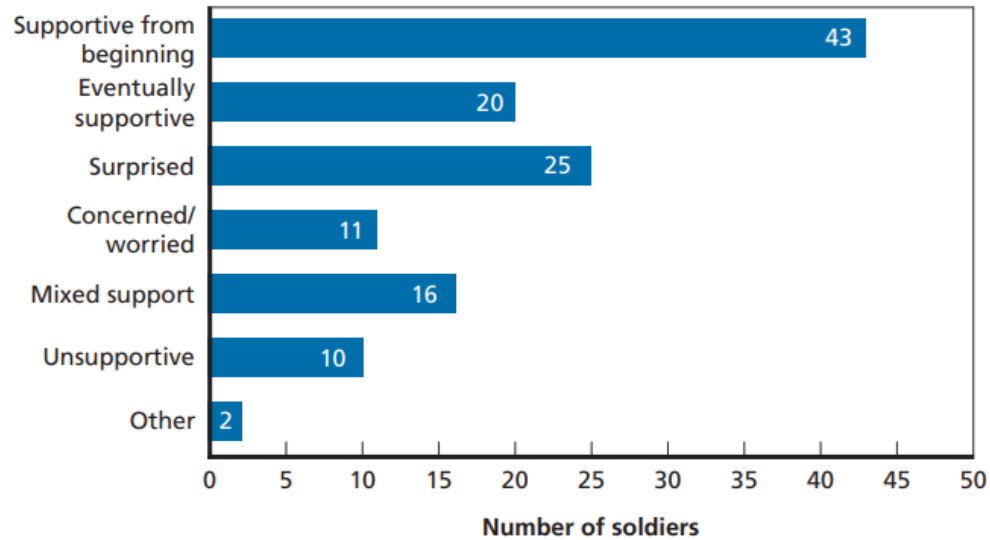
- Call to Serve
- Family History
- Honor/Respect

Occupational Motivation

- Adventure/travel
- Benefits (health insurance, housing, education)
- Job Stability/Pay

Family Support in Military Career Decision

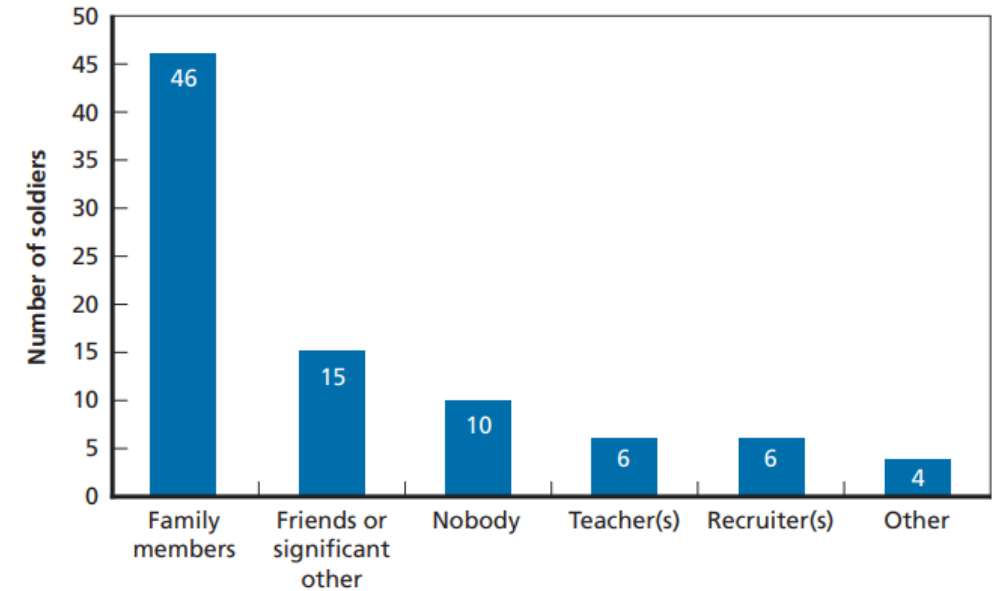
Figure 2.6
Family Reactions to Enlistment



NOTE: "What did your family and friends think of your decision to join the military?" n=79; more than one response allowed.

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Figure 2.7
Influences on Soldiers' Decision to Join



NOTE: "Who, if anyone, was especially influential in your decision [to join the Army]?" n=73; more than one response allowed.

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Populations of Concern: The Servicemember, The Spouse and The Military Child

Mental Health in the Military Family

Mental Health within the Military System

- ▶ Military men are more likely to be diagnosed for alcohol and substance abuse disorders than their female peers
 - ▶ Younger personnel are more likely than older servicemembers to be diagnosed with mental health disorders with prevalence rates of:
 - ▶ Army 10.7%
 - ▶ Navy 7.4%
 - ▶ Air Force 7%
 - ▶ Marine Corps 6.5%
 - ▶ Mental health disorders are still highly stigmatized in the military. Some military members fear that diagnosis of a mental health disorder will lead to a record profile (limitation of duties), limitation of career progression and alienation from peers.
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Population: The Servicemember

Issues of Concern

- ▶ Posttraumatic Stress Disorder (PTSD)
- ▶ Depression/Anxiety Disorders
- ▶ Substance Use Disorders (SUDs)
Traumatic Brain Injury (TBI)
- ▶ Military Sexual Trauma
- ▶ Stress
- ▶ Transitioning/finding meaning in civilian life



Exposure to Combat

Combat experience situations are situations in which it is expected that the service member or their comrades will be engaged in having to actively defend their life or the lives of others in against other human combatants. Combat exposure may include:

- ▶ Firing live ammunition at enemy combatants in order to kill or disarm.
- ▶ Evading enemy capture.
- ▶ Movement toward an enemy territorial which may put oneself, team and nearby civilians in danger (risky situations).
- ▶ Being on alert for attack on an American objective or during a movement (ambush).

Because of the necessity during combat to always remain on high alert and engage in risk taking behavior for the survivability of the team, many servicemembers may have a difficult time adjusting back to pre-combat behavior after a deployment.

Psychological Outcomes of Service

- ▶ Service members and veterans diagnosed with post-traumatic stress disorder are at an increased risk for alcohol misuse, problem substance use, and developing a lifetime substance use disorder.
 - ▶ Service members and veterans who experience mental health disorders (such as depression or anxiety) are at an increased risk for problem substance use.
 - ▶ Experiencing greater levels of stress is associated with an increase in problematic alcohol and other substance misuse behavior among service members.
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Risk Taking Behaviors

- ▶ Risk taking and impulsive behaviors are associated with increased frequency, quantity, and total drinking in the past year.
 - ▶ Service members who separated from the military and engage in sensation seeking behavior are more likely to have problem substance use.
 - ▶ Having been prescribed pain relievers or anxiety/depression medication is associated with their misuse for active-duty service members.
 - ▶ Being a current smoker and engaging in other drug use is associated with past year cannabis use for veterans.
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Stressful Relationships

Some specific research findings:

- ▶ **Effects of Combat on Marriage:** Combat experience is related to subsequent marital problems and a 62% increase in the risk of divorce. PTSD and Combat Stress Reaction conditions have shown to have long-term effects on soldiers' psychological well-being in ways that have a negative effect on their marriages.
 - ▶ **Relationship Challenges:** Distressed military couples are more vulnerable than are civilian couples to conflict (or jealousy) regarding relationships with other men and women. Other higher-risk areas include alcohol abuse, lack of emotional expression on the part of the military spouse, the demands of military work, and long and frequent separations.
 - ▶ **Spousal Abuse and Aggression:** Rates of spousal abuse are higher among military personnel than they are among civilians. More than 90 percent of the victims are women, and child abuse frequently accompanies spousal abuse.
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Population: The Military Spouse

Issues of Concern

- ▶ Domestic Violence
- ▶ Underemployment or unemployment
- ▶ Lack of stable social support
- ▶ Constant moves/Permanent Change of Station (PCS) Depression
- ▶ Anxiety/Stress
- ▶ Deployment and extended separation from spouse due to field training and exercises
- ▶ Limited acknowledgement of male civilian spouses and resources available to them



Military Spouses are an at-risk population by the very nature of their relationship to the service member or veteran.

Adverse interpersonal experiences are the most common risk factors for military spouses as they are often struggling with their own stressors, mental health and relationship satisfaction while sharing in the trauma associated with their military counterpart.

- Spouses were predominantly female (86%), had not served in the military themselves (79%), and were spouses of enlisted (91%) active duty (86%) service members.
 - Approximately 48% of military spouses had used Military Health System insurance to fill at least one opioid prescription during the 2-year observation period.
 - Almost half (47.6%) of spouses obtained at least one opioid prescription during the 2-year observation window, and 8.5% had received opioid prescriptions that posed risk to their health.
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POTENTIAL SOLUTIONS FOR THESE CHALLENGES

Spouses can have difficulty finding support and treatment. While members of this population can access VHA/Tricare benefits if their military member is eligible, most report a sense of discomfort or misalignment of treatment options. Solutions need to involve Family-based SUD interventions.

Spouses need know they can involve their family.

- Family-based SUD interventions require civilian and in-service partnerships which create an environment to include family members in a client's treatment or services for substance misuse is beneficial and makes achieving and sustaining long-term recovery more likely.
 - Inpatient Drug And Alcohol Rehab Programs For Women that involve **WRAP AROUND SERVICES** such as childcare, transportation and a focus on emotional needs including coping skills to address expectations, stigma, and stress.
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Population: The Military Child

Issues of Concern:

- Sleep disorders
- Depression
- Anxiety
- Earlier onset of substance use/substance use disorders
- Suicidal ideation
- Emotional reactivity or withdrawal



Military Youth

Children of deployed military personnel should be considered at higher risk for substance use and the development of mental health disorders than children of non-military citizens. Stressors unique to the military experience:

1. Constant school transfers (sometimes mid-year),
2. Frequent culture shock
3. Constant loss or disconnection in friendships
4. Home instability due to the missing parent

Some adolescent/teen developmental stages can be pivotal to the identity of the child, and military children face challenges which may not be found in their civilian counterparts.

Military youth are at an increased risk of using substances in adolescence. Research shows that compared to their civilian peers, military-connected youth are about 50% more likely to report using alcohol, cigarettes, cannabis, and other drugs.

Parent/Sibling Deployment

- ▶ Research shows that deployment of a military family member significantly increases a child's risk of substance use as compared civilian and non-deployed military peers.
 - ▶ The child's risk of substance use, or development of mental disorder also increases the longer deployments last and the more deployments they experience.
 - ▶ The non-deployed parent or caregiver may also begin to experience signs and symptoms of being stressed and overwhelmed due to suddenly dealing with more household, childcare, and financial responsibilities.
 - ▶ Stressors of re-assimilation into the family unit upon return from deployment.
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Potential Solutions for these Challenges

While being from a military family alone does not increase a child's risk for substance use, certain experiences common to military life (multiple deployments, frequent moves, physical injuries and/or mental health difficulties of a parent or caregiver) can create stress for the child.

Children and family members need know they can involve their military family in recovery.

- Family-based SUD interventions require civilian and VHA partnerships which create an environment to include family members in a client's treatment or services for substance misuse is beneficial and makes achieving and sustaining long-term recovery more likely.
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**What do these populations
have in common?**

Stress

- ▶ Military life is very structured and contains a clear chain of command, whereas civilian life and certain civilian work cultures may not have as much of a structure when it comes to custom, courtesies and language.
 - ▶ Transitioning to civilian life can be a stressful challenge for many service members due to an overwhelming number of daily choices. Finding employment, finding housing, acquiring transportation, family issues, and coping with Post-traumatic Stress Disorder (PTSD) are a few things that could trigger overwhelming stress.
 - ▶ Having to maintain open flexibility over one's life can have a strain on the lives of servicemembers, their marriages/friendships and the relationships they maintain with their children.
 - ▶ Military spouses are also expected to maintain flexibility in their own lives to support their service member. This may lead to feeling professionally unfulfilled due to having to be unemployed or underemployed, overwhelmed from managing the household, and unsupported if moving to a new place (
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Stigma

- ▶ Lack of confidentiality, zero-tolerance policies, and mandatory drug testing can add to the stigma of substance use or substance abuse and may discourage individuals from seeking treatment if they need it.
 - ▶ One study of substance abuse in the military found that 50 percent of military personnel who participated in the study believed that seeking help for substance use or mental health issues would have a negative impact on their career.
 - ▶ Service members may face being dishonorably discharged or criminally prosecuted if they test positive for drugs, which can further prevent those who need treatment for substance abuse to seek help.
 - ▶ Family of service members have also noted that mental health/substance use stigma negatively affects them as well. Many family members felt that their enrollment into the Exceptional Family Member Program (EFMP), a program created with the purpose of securing family mental health care needs by making certain that military members are only stationed where proper psychiatric care is available, could negatively impact the career prospects of the serving family member.
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Solving the Problem?

Address Stigma

- ▶ **The Army training:** Master Resiliency Training (MRT), Suicide Awareness Training and revamping SUDs program for less punitive actions around substance misuse/abuse.
 - ▶ **Combat Operational Stress Control** programs incorporate mental health and substance abuse treatment providers into the fitness and preventative services of each unit.
 - ▶ **Embedded Behavioral Health teams** have also been established, increasing the number of mental health personnel to foster positive relationships with leadership
 - ▶ **Military Pathways:** a program designed to improve mental health through self-directed activities; includes self-assessments, mental health education, and referral to services.
 - ▶ **The Real Warriors Campaign:** provides educational materials about seeking treatment for military service members, veterans, and family members. Materials promote seeking mental health treatment as a strength which does not end one's career and no one is alone in their quest for improved mental well-being
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SAMSHA Military Families Strategic Initiative

- ▶ Improve military families' access to community-based behavioral health care through coordination among SAMHSA, TRICARE, DoD, and Veterans Health Administration services.
 - ▶ Improve the quality of behavioral health prevention, treatment, and recovery support services by helping providers respond to the needs within the military family culture.
 - ▶ Promote the behavioral health of military families with programs and evidence-based practices that support their resilience and emotional health and prevent suicide.
 - ▶ Develop an effective and seamless behavioral health service system for military families through coordination of policies and resources across federal, national, state, territorial, tribal, and local organizations.
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Shared Experience

SPC Montemurro, S.



Military Occupational Specialty: 68W –
Healthcare Specialist (prev. Combat
Medic)

Years in Service: 4 years Active Duty, 2
years Connecticut National Guard

Duty Stations: Schofield Barracks, HI
(225th BSB) and MAFRC, Middletown, CT
(118th MMB)

Special Duties: Family Readiness Liaison,
Medical Operations and Support, Combat
Lifesaver Trainer, Clinical Specialist

Other: Dual-Military, Mother of 1

Resources Numbers for Service members and their Families

The Connecticut National Guard Behavioral Health Team can provide resources for servicemembers and their families within the state of Connecticut

- ▶ Service Member and Family Support Hotline: 800-858-2677 (National)
 - ▶ CT Military Child and Youth Programs: 860-548-3254 (Connecticut Only)
 - ▶ CT State Support Chaplain: 860-548-3240 (Connecticut Only)
 - ▶ Behavioral Health Careline: 855-800-0120 (National)
 - ▶ Risk Reduction: 860-524-4962 (Connecticut)
 - ▶ Suicide Prevention: 860-548-3291 (Connecticut)
 - ▶ Substance Abuse Prevention: 860-524- 4891
 - ▶ Military OneSource: 860-502-5416 (Connecticut)
 - ▶ Veterans Crisis Line: **Call** 800-273-8255 (or Dial 988 and Press 1) | **Text** 988 (National) | **Chat** at **[Veteranscrisisline.net](https://www.veteranscrisisline.net)**
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Resources

- [Life as a Private: A Study of the Motivations and Experiences of Junior Enlisted Personnel in the U.S. Army \(rand.org\)](#)
 - [Military Service and Marriage: A Review of Research \(healthymarriageinfo.org\)](#)
 - [Demographic and Military Service Characteristics of Military Families - Strengthening the Military Family Readiness System for a Changing American Society - NCBI Bookshelf \(nih.gov\)](#)
 - [TIP 39 Substance Use Disorder Treatment and Family Therapy \(samhsa.gov\)](#)
 - [PTSD Basics - PTSD: National Center for PTSD \(va.gov\)](#)
 - [Depression and mental health service use among 12–17 year old U.S. adolescents: Associations with current parental and sibling military service – ScienceDirect](#)
 - [High-risk and Long-term Opioid Prescribing to Military Spouses in the Millennium Cohort Family Study | Military Medicine | Oxford Academic \(oup.com\)](#)
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Contact Information



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