Caring for Those Who Serve in the Stormy Present: Introduction to the Special Issue on Treating Military Personnel and Their Dependents

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Springsteen (2005) in a mournful tribute, *Devils and Dust*, wrote, “And I’m just trying to survive. What if what you do to survive kills the things you love.” This profound lyric speaks to the emotional toll combat takes on veterans. Current operations in Iraq and Afghanistan reflect unique stressors for both the service personnel and their dependents. The combat theatre is radically different from previous conflicts. Lengths of deployment are longer and more unpredictable. Troops and their families are challenged to cope with many severe stressors.

Veterans return from their tours of duty emotionally changed from their experiences. Sadly, many military veterans return home with physical and emotional injuries. The emotional wounds often take the form of Post Traumatic Stress, depression, anxiety, and substance abuse. The emotional toll frequently tears at the fabric of marital and familial relationships.

While many returning troops seek services from the Veteran’s Administration and other military resources, the civilian clinical community must also ready itself for a burgeoning population of adults, couples, families, and children psychologically impacted by combat operations. Sammons and Batten (2008) commented “...we are truly at an epochal moment in developing our understanding of the psychological sequelae of war.” This special issue ideally expands the behavioral health community’s knowledge base and scope of interventions to help individuals,

couples, and families deal with the emotional effects of serving during combat operations. It is our professional pleasure to co-edit these fine contributions and to introduce these timely and compelling articles to the journal’s readership.

Delivering interventions to the military community requires both clinical skill and a robust understanding of military culture. Sensitivity to the unique context and pressures is pivotal. All the contributions in this special issue emphasize alertness to this specific context. This special issue includes contributions that offer case reports as well as empirical data. The articles are packed with clinical information, theoretical context, and supporting literature.

Cohen and Mannarino’s article applies their well-known and studied Trauma Focused-Cognitive Behavior Therapy (TF-CBT) to children’s grief reactions at the death of their parent. In their piece, they offer readers resources as well as cogent descriptions of the treatment components. Cohen and Mannarino present the case of an 11 year girl who suffered the loss of her father and the case richly reflects the ebb and flow of real life clinical practice.

Friedberg and Brelsford advocate the application of cognitive behavioral techniques to deal with the psychological issues challenging children of deployed military personnel. They review the emotional issues children with a deployed parent encounter and the extant literature on interventions to help these youngsters. The skills presented focus on building resiliency and target inaccurate appraisals, managing negative affectivity as well as dealing with ambiguity and uncontrollability.

Brief and colleagues offer an innovative web-based intervention for returning veterans with symptoms of PTSD and risky alcohol use. In their compelling contribution they discuss the ways their program obviates barriers to care such as inconvenience, stigma, and cost. They rightly place

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their innovation in the context of previous research and program development. Brief et al. describe the assessment, personalized feedback, motivational enhancement, coping skills, and social support program modules. Indeed, their web-based approach is on the cutting edge of technology and represents a new generation of treatment options.

Borsari and his co-authors suggest clinical considerations in the treatment of substance use disorders in Veterans. A variety of assessment and treatment issues associated with substance use in Veterans are thoughtfully presented. Moreover, they explain a stepped care strategy to treating substance use. Borsari et al. also address treating substance use and co-morbid conditions through sequential, parallel, and integrated approaches.

In their article, Sherman and Bowling take on the challenges and opportunities for interventions with military couples during the Global War on Terrorism. They outlined pivotal assessment domains in couples work paying particular attention to contextual variables such as understanding the military culture and couples' experience in the military. Sherman and Bowling aid the reader with listing numerous resources for psychoeducation. Finally, they integrate their strategies in a coherent case example.

Snyder and Gasbarrini address sexual infidelity in couples therapy with military personnel. In their article, they discuss a three stage approach to resolving infidelity issues within the military culture. They also present data on a project to train Army chaplains in their model because chaplains are the preferred providers within the Army.

Brelsford and Friedberg further address important family issues through the lens of spiritual and religious issues. They briefly review typical family stressors during the deployment cycle and the role of religion and spirituality in families. The process of integrating religious coping, spiritual genograms, and religious prayers/rituals in family therapy is explained.

Abraham Lincoln in his December 1, 1862 message to Congress emphasized, "The dogmas of the quiet past are inadequate to the stormy present. The occasion is piled high with difficulty and we must rise-with the occasion. As our case is new, so we must think anew and act anew." Indeed, we live in a stormy present. As behavioral health professionals, we must continually re-examine our methods and service to different populations. The contents of this timely issue presents ways to think and act anew in order to meet the emerging needs of returning military personnel and their families.

References

- Sammons, M. T., & Batten, S. V. (2008). Psychological services for returning veterans and their families: Evolving conceptualizations of the sequelae of war zone experiences. *Journal of Clinical Psychology, 64*, 921–927.
- Springsteen, B. (2005). *Devils and dust*. Columbia: Bruce Springsteen (ASCAP).