



Army Family Readiness Groups (FRGs): Are they all that they can be?

A curriculum menu and guide to conduct FRG meetings on Joint Base Lewis-McChord

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Family Readiness Groups (FRGs): Are they all that they can be?
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Dedication

I would like to dedicate this intervention to all military families, military members and support personnel.

Introduction

This intervention was designed by an FRG member for FRG members. As a spouse, former military member and former FRG leader, I have found my experiences with FRGs to be extremely rewarding and sometimes frustrating. As a volunteer organization with mandatory guidelines, volunteer trainings (and potentially mandatory meetings by unit policy), there is an overwhelming amount of information to disseminate and only so much time and energy to devote toward meeting planning. Even if you have the “fun” or social events, a question remains on how to disseminate the most critical resources and information in an efficient manner and have a guide with which to do it. After key informant interviews and extensive research it became apparent there was a consistent theme: commanders have a great ability to impact their FRGs and lack empirically based tools to evaluate and supervise *how* their FRGs are serving and supporting families. A needs statement emerged: Army commanders need more consistent methods of supervising their Family Readiness Groups; and in doing so commanders will be able to promote unit cohesion, confidentiality and support for optimal FRG member participation and outcomes.

This curriculum is designed to be a menu, a framework from which to reference and pull critical resources and thoughts for FRG members at any stage of membership. Whether it’s a first meeting for a member or they have been coming for years, these frameworks can be adjusted to tailor to the unit’s needs and focus on what’s needed within a deployment cycle. It is intended for any facilitator of an FRG (to include military personnel) conducting meetings on Joint Base Lewis-McChord. A facilitator could be a commander, an FRG leader, or FRG member asked to conduct meetings. Understanding the complex and varied needs of FRGs, this curriculum provides the ability to replicate most lessons and/or have the flexibility to adjust with updated resources, supplement with other ideas and tailor meetings as the commander and FRG leaders

deem appropriate. The curriculum can also provide feedback on how their FRG is fulfilling their mission. Applying Social Network Theory, it is understood that there are two main ways that families seek assistance in FRGs: informal (other family, friends, neighbors) and formal helping channels (Family Readiness Support Assistants (FRSAs), commanders, special staff, designated volunteers). Acknowledging the need for self-sustaining, empowering resources to circulate throughout the informal and formal helping channels can facilitate better practices. It is unfortunate that in some cases taking over an FRG can feel like “starting from scratch” without a framework to acknowledge the cycle of new commanders, new leadership, new faces and new members. A strengths based perspective in acknowledging the excitement that comes with meeting newer members time and time again can be used to harness this energy into a positive momentum shift. Sometimes every meeting throughout a command cycle can feel like a first meeting because of an “open group” atmosphere in which anyone can come at any time, to include those who just joined the unit. Using feedback from the FRG as a guide to know what is working can build a better foundation for future commanders and FRG members alike.

Objectives include increased participation and desired participation, increased FRG support and increased FRG confidentiality. Objectives can be measured through short surveys developed and integrated into this curriculum. In accordance with social work values, this curriculum helps to empower a unique population with unique needs. It is my hope that those using this curriculum find it useful and may suggest it to others for future FRG functions, ensuring we continually strive to serve those who in many cases serve the most: our military families.

How to Use This Curriculum

Before the first FRG meeting

1. It is helpful for commanders to meet with FRG leaders or members expected to lead a meeting prior and indicate which meetings you would like to accomplish. Ideally, a commander could review the meetings prior to taking command.
2. After meeting selection (if the commander deems appropriate), guidance and resources on the topic can be requested from the command, FRSA and/or special staff support.
3. Some meetings outline professional personnel that should be present in executing the material, therefore it is important to outline dates of availability and location for all parties involved.
4. An email invitation may be disseminated to FRG members with the elements/theme of the meeting along with any pertinent handouts useful to have (even if members don't attend meetings). Critical elements of these emails involve physical directions to each meeting, places, times and target audience (warnings for adult content are outlined in some meetings).
5. Prior to the meeting it is helpful to ensure all corresponding handouts outlined in the curriculum are updated and ready to disseminate as needed for reference. Some easier ways of doing this are to have folders ready with the information to give to members. The folders may then be re-used and re-circulated for future meetings as long as information is updated. Specific administrative support is available and any unit FRSA should have more information on how to accomplish this. In some cases, it may suit FRG needs to have limited paper copies to pass around for reference, making copies on an "as needed" or "as requested" basis. This method is adequate except when conducting the pre and post

surveys. It is important that there be enough copies of the pre and post survey for all members that are present to accomplish.

During the meeting

1. It is important to accomplish the pre survey prior to any meeting events
2. Document attendance in one place to see trends throughout the FRG group.
3. Use curriculum outline as guideline to conduct meeting. The curriculum also outlines areas where other activities may be supplemented.
4. Accomplish the post survey after meeting events.
5. Collect pre and post survey from FRG members. It is important to keep the surveys together in order to distinguish results from the same member. One way of doing this is to ask members to complete their pre survey and place it in the folder until the post survey is complete, then hand the folders in with the pre and post survey together. Another method is to ask members to place their pre survey at the corner of their desk or under their chair until the conclusion of the post meeting survey. Fold both together and hand them in. Whatever method is easiest and can get the data accurately will suffice.

After the meeting concludes

FRG members are welcome to choose any number of social activities after the formal meeting portions have concluded. Many key informants referenced the importance of balancing both social activities and information dissemination. While this curriculum is solely a guide for FRG meetings, it does not discourage conducting other social activities or events other than meetings. It may suit unit FRG needs to select two or three topics to conduct throughout the year intermittently with planned social events. The intent is that no meeting feels like time wasted, if indeed there is a meeting. All in all, hopefully most can have a balance, selecting the most productive meeting topics to coordinate throughout a command cycle.

Meeting 1

Introduction to FRG (90 minutes- coordinate for 10 minutes in beginning for convening and gathering, getting seated)

Objective: Build a rapport

Description: The FRG has to start building trust in order to openly discuss issues. As a commander and FRG Leader, you have a good opportunity to introduce yourself and re-introduce important special staff at the meeting that may be resourceful for your families (FRSAs, Chaplains, Social Workers, Psychologists). Use this opportunity to ask families and soldiers how they view their FRGs and goals with outlined handouts. The agenda can be sent out via email prior and can include outlined handouts. Referral to the Checklist for Incoming FRG Leader (Appendix 4) can be extremely helpful in preparing and collecting information necessary for this meeting.

Goals:

- Demonstrate your dedication to Family Readiness and why it's important to you
- Present the Family Readiness Group as another resource for family members and soldiers
- Start building trust by getting to know one another
- Review confidentiality process in referral and seeking resources and mandatory reporting

Supplies Needed:

- ✓ chairs set up in an open area (attempt to face each other in a large circle)
- ✓ White Board or Standing butcher block with written agenda and anything else you want to cover.
- ✓ It is up to the FRG leader/coleader as to whether you would like to do nametags.
Sometimes it is effective to ask everyone to make their own nametag on a scrap piece of paper and place on desk. When they leave you can ask them to place their nametag in a

bin for storing for the next meeting. You will begin to know who attends meetings which can be helpful in selecting volunteers.

- ✓ Depending on funding it may be good to “kick off” events by offering light refreshments. Some may elect to provide pizza and drinks, etc.
- ✓ The following handouts can be given in a folder format to members who have not attended previously: FRG Roster (ask unit Commander for most up to date roster), Confidentiality Policy for review (Appendix 1), FRSA paperwork the unit keeps on spouses for review/updates by newer members or those who want to review (ask FRSA for updated form they use or to bring existing information on group members for review), FRG volunteer position descriptions (Appendix 2), Post map-Optional (Obtain most current/up to date)
- ✓ Handouts: Pre/Post survey –accomplished every meeting since participants vary and topic of feedback varies (Appendix 1), Checklist for Incoming FRG Leader (Appendix 4), Additional introduction game (Appendix 5)
- ✓ **Notes to Group Leader:** The first five minutes as people convene should be devoted to mingling and allowing time for lateness. Try as best as you can to match members on the roster with points of contact who regularly call others and introduce them. Document attendance and date in one place to note trends throughout command cycle. If possible, ask that the FRSA bring administrative paperwork kept on spouses so they can review when they come in and make any necessary updates. For this particular meeting, ensure you have reviewed Appendix 1 to assist in preparing for this first session.

1.Check-in. Clarify the purpose of the group (3 minutes):

Example: “How is everyone doing today? Today we will be..., any questions/comments before we get started?” (*If this is not first meeting, good to reference previous meeting and get any feedback and/or comments, “Last meeting we...any thoughts on that before we get started?”*)

2. Learning/Working Activities:

A. Orientation (2-5 minutes): Review facilities (water/bathrooms) and exits, where you are relative to others in the unit or offices (how to find Commander/ISG and FRSA).

This may be the first time people have seen the building you are sitting in if it’s in the unit area.

B. Complete Initial Assessment Instrument (8 minutes): Describe the pre-survey and what it is helping you to do (measure outcomes for how the FRG is serving families).

Ask everyone to complete it then as best as possible and keep it with them until the end of the meeting.

C. Introductions Activity (30 minutes): Ask families and special staff to pair up (mixed together) and learn the following pieces of information *about their partner* (posted in the room so they can refer to it): 1) first and last name, 2) how long they have been in the unit, 3) any family members they would like to mention such as children/ages, and 4)

Two Truths and a Lie about themselves (optional or can be replaced with another “ice-breaker” activity). After each person introduces their partner the group can guess which thing they told was a “lie”. It is helpful to have someone tally on the board what age groups children are (infant, toddler, elementary, middle school or high school aged) to notice demographic trends in families which can help in planning future activities.

Afterward, introduce special staff and what they do for families, how to get a hold of them. There is an option for a different game, Introduction BINGO-Appendix 1.

D. Review of FRG organization and structure (30 minutes): Discuss a short history of the FRG mission, you can query others to describe positive things the FRG has assisted them with in the past, and elaborate on your expectations for confidentiality using the confidentiality policy handout. Use the FRG roster to reference contact information, who volunteers for what (contacts) and query if others interested in filling positions or volunteering more. You can use the attached position description handouts and ask if anyone in the room has held those positions and feedback.

E. Complete Post Assessment Instrument (8 minutes): Describe the instrument as helping you see the comparison/results pre and post meeting. Ask them to hand it in with their pre-survey. Ensure it is collected and tracked together with their pre-survey to ensure results are from the same individual.

3. Closeout (2 minutes): Answer questions and review next meeting agenda. Ensure people have had an opportunity to talk about any unit newsletters and applicable post/unit events coming up for the unit and families. Is everyone getting information you are handing out via email or calls? Thank everyone for coming and invite all to stay for a while to visit with each other and time permitting conduct a different social activity.

Meeting 2

Forming the Group; Everyone is a Stakeholder

Objectives: Encourage all to know they have a vote in how the organization is structured and what kinds of activities the group does.

Description: This meeting is important to promote solidarity in the group process by introducing each other to new ideas in the community and having a vote to decide on one or two events the group is interested in throughout the year. Prior to this session, it is important to prepare a list of activities the unit and/or FRG leader thinks the group would be interested. The Leader and/or Commander will conduct an exercise to promote the five top ideas the group devises for voting on at the end of the meeting.

Goals:

- Review major activities planned for the year (discuss what commander would like to do or traditions from past, i.e. unit or battalion level Christmas party, Easter parties, etc.)
- Define priority for activities that the majority within the FRG are interested in (parties vs. recreational outings or both?) It is important to have goals that are realistic and attainable for how many events the unit will have throughout the year in addition to meetings).
- Encourage solidarity and group cohesion
- Review confidentiality process in referral and seeking resources and mandatory reporting

Supplies Needed:

- ✓ A large piece of butcher block paper and marker per small group
- ✓ List of activities for FRG leader
- ✓ White Board or Standing butcher block with written agenda and anything else you want to cover.
- ✓ Nametags used from Meeting 1 and supplies for others to create own nametags

- ✓ Depending on funding available offer light refreshments. Pot-luck is also encouraged.
- ✓ The following handouts can be given in a folder format to members who have not attended previously: FRG Roster (ask unit Commander for most up to date roster), Confidentiality Policy for review (Appendix 1), FRSA paperwork the unit keeps on spouses for review/updates by newer members or those who want to review (ask FRSA for updated form they use or to bring existing information on group members for review), FRG volunteer position descriptions (Appendix 2), Post map (Obtain most current/up to date)
- ✓ Handouts: Pre/Post survey –accomplished every meeting since participants vary and topic of feedback varies (Appendix 1)

Notes to Group Leader: Refer to Meeting 1 Notes to Group Leader. Ask them to complete the meeting pre survey, and administer post survey again (this will be standard for every meeting topic for feedback). For this lesson, it may be good to obtain most current MWR information on local activities and potential discounts such as bowling, golfing, etc. at <http://www.jblmmwr.com>

1. Check-in. (3 minutes): Refer to Meeting 1.

2. Learning/Working Activities:

A. Orientation (2-5 minutes): Refer to Meeting 1. This part can be skipped if you feel the majority already knows this information.

B. Complete Initial Assessment Instrument (8 minutes): Refer to Meeting 1.

C. Introductions (10 minutes): Applicable to ask for information from newer members who have not been introduced. Refer to Meeting 1 notes about this activity for guidance on ways to track information given.

D. Review of FRG organization and structure (10 minutes): Give newer members handouts from Meeting 1 if they do not have them. Review elements of what FRG is,

confidentiality policy and use the FRG roster to reference contact information, who volunteers for what (contacts).

E. Group Activity on Future Events (15 minutes): Ask audience to get into small groups of 2-4 to discuss things they've done in the area and write down an idea they think would be good to volunteer for an FRG group function. At the conclusion of 15 minutes, ask them to write up on board their choice. Group leader can hold a vote for the top two choices to facilitate and accomplish throughout the year.

F. Complete Post Assessment Instrument (8 minutes): Refer to Meeting 1.

3. Closeout (2 minutes): Refer to Meeting 1.

Meeting 3

Family Advocacy Program, Benefits and Referral

Objectives: Empower family members and soldiers by giving knowledge on how to elect for services through Family Advocacy Programs and discuss reporting procedures in the process.

Description: There are many programs that are available and provided by referral through Family Advocacy. Discussing how to access those programs and who has to know can be empowering for family members to seek their own resources without fear or worry of retribution for their soldier.

Goals:

- Review the Family Advocacy Program
- Discuss how to access or refer to services if you are assisting another
- Review confidentiality process in referral and seeking resources and mandatory reporting

Supplies Needed:

- ✓ White Board or Standing butcher block with written agenda and anything else you want to cover.
- ✓ Nametags used from Meeting 1 and supplies for others to create own nametags
- ✓ Depending on funding available offer light refreshments. Pot-luck is also encouraged.
- ✓ The following handouts can be given in a folder format to members who have not attended previously: FRG Roster (ask unit Commander for most up to date roster), Confidentiality Policy for review (Appendix 1), FRSA paperwork the unit keeps on spouses for review/updates by newer members or those who want to review (ask FRSA for updated form they use or to bring existing information on group members for review), FRG volunteer position descriptions (Appendix 2), Post map (Obtain most current/up to date)

- ✓ Handouts: Pre/Post survey –accomplished every meeting since participants vary and topic of feedback varies (Appendix 1), Family Advocacy can bring applicable handouts and pamphlets (Appendix 15 example)

Notes to Group Leader: Refer to Meeting 1 Notes to Group Leader. Since more than likely there are different meeting participants in the group, ask them to complete the meeting pre survey, and administer post survey again (this will be standard for every meeting topic for feedback). Additionally, for this particular meeting, it can be helpful to ask someone from Family Advocacy and/or applicable staff involved in the referral process to attend and be available for questions and clarification on what they can offer.

1. Check-in. (3 minutes): Refer to Meeting 1.

2. Learning/Working Activities:

A. Orientation (2-5 minutes): Refer to Meeting 1. This part can be skipped if you feel the majority already knows this information.

B. Complete Initial Assessment Instrument (8 minutes): Refer to Meeting 1.

C. Introductions (10 minutes): Applicable to ask for information from newer members who have not been introduced. Refer to Meeting 1 notes about this activity for guidance on ways to track information given.

D. Review of FRG organization and structure (10 minutes): Give newer members handouts from Meeting 1 if they do not have them. Review elements of what FRG is, confidentiality policy and use the FRG roster to reference contact information, who volunteers for what (contacts).

E. Guest Speaker Activity (15 minutes): Ask someone from the Family Advocacy Program to speak to the group and/or the unit Social Worker about opportunities for Family Advocacy and the referral process.

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F. Complete Post Assessment Instrument (8 minutes): Refer to Meeting 1.

3. Closeout (2 minutes): Refer to Meeting 1.

Meeting 4

Post Resources for Soldiers and Families

Objectives: Empower family members and soldiers by giving knowledge on important post resources and where to find them.

Description: There are many post resources that are available to families but may not be accessed due to many reasons. Sometimes presenting the resources and asking others if they want to address a service or how to access a service can be helpful for the group. Informal helping can be encouraged through peer support in these groups, sharing their experiences in a productive manner.

Goals:

- Review Post Resources the group would like to concentrate on and all the Group Leader feels pertinent
- Discuss how to access or refer to services if you are assisting another
- Remind family members of right to provide feedback on these services (Interactive Customer Evaluation (ICE) comments)
- Review confidentiality process in referral and seeking resources and mandatory reporting

Supplies Needed:

- ✓ A large piece of butcher block paper and marker per small group
- ✓ White Board or Standing butcher block with written agenda and anything else you want to cover.
- ✓ Nametags used from Meeting 1 and supplies for others to create own nametags
- ✓ Depending on funding available offer light refreshments. Pot-luck is also encouraged.
- ✓ The following handouts can be given in a folder format to members who have not attended previously: FRG Roster (ask unit Commander for most up to date roster),

Confidentiality Policy for review (Appendix 1), FRSA paperwork the unit keeps on spouses for review/updates by newer members or those who want to review (ask FRSA for updated form they use or to bring existing information on group members for review), FRG volunteer position descriptions (Appendix 2), Post map (Obtain most current/up to date)

- ✓ Handouts: Pre/Post survey –accomplished every meeting since participants vary and topic of feedback varies (Appendix 3), How to Find Help at JBLM (Appendix 7),

Notes to Group Leader: Refer to Meeting 1 Notes to Group Leader. Since more than likely there are different meeting participants in the group, ask them to complete the meeting pre survey, and administer post survey again (this will be standard for every meeting topic for feedback). Additionally, for this particular meeting, it can be helpful to ask someone from applicable staff and/or parent advisory board of a popular resource to attend (i.e. child care parental advisory board, resource specialist at the education center, someone from Morale Welfare and Recreation or ACS financial planning) to attend and be available for questions and clarification on what they can offer.

1. Check-in. (3 minutes): Refer to Meeting 1.

2. Learning/Working Activities:

A. Orientation (2-5 minutes): Refer to Meeting 1. This part can be skipped if you feel the majority already knows this information.

B. Complete Initial Assessment Instrument (8 minutes): Refer to Meeting 1.

C. Introductions (10 minutes): Applicable to ask for information from newer members who have not been introduced. Refer to Meeting 1 notes about this activity for guidance on ways to track information given.

D. Review of FRG organization and structure (10 minutes): Give newer members handouts from Meeting 1 if they do not have them. Review elements of what FRG is, confidentiality policy and use the FRG roster to reference contact information, who volunteers for what (contacts).

E. Guest Speaker Activity (optional) (15 minutes): Ask someone from a relevant resource(s) that is knowledgeable to speak to the group (i.e. Army Community Services or Morale Welfare and Recreation)

F. Sharing Activity (15 minutes): Review Handout (How to find help on JBLM). Ask others (if they are comfortable) to volunteer information about one resource they have accessed on post. For example, this can be having a child enrolled in childcare. Place on board the resource and identify one sustain (a positive) and improve (a negative, if applicable) in their experience of accessing the resource that they feel the group would benefit from. This is meant to be a conversation starter for others and identify those within the group that have commonality in accessing certain resources. This can also identify for the Group Leader what needs are priorities during this snapshot in time. Introduce others to the ICE comment system and where they can provide feedback to any post resource online.

F. Complete Post Assessment Instrument (8 minutes): Refer to Meeting 1.

3. Closeout (2 minutes): Refer to Meeting 1. Thank others for sharing their experiences.

Meeting 5

Family Resiliency Training (FOCUS, Families Overcoming Under Stress)

Objectives: Empower family members and soldiers by introducing them to FOCUS a training that **should be facilitated during the meeting by a Mental Health professional. Please clarify appropriateness for age levels in room prior to conducting this meeting with instructor.**

Description: FOCUS acknowledges that small tools in skill building can make large differences in many different areas of family life, including interactions with children. A professional can discuss ways to enhance resiliency and build skills in communication, emotional regulation, problem-solving, goal-setting, and managing deployment tasks. Refer to <http://www.focusproject.org/home> for more detailed information.

Goals:

- Introduce what FOCUS is and conduct a short session in a group setting with a MH professional.
- Discuss how to access or refer to this service if you are assisting another
- Review confidentiality process in referral and seeking resources and mandatory reporting

Supplies Needed:

- ✓ A large piece of butcher block paper and marker per small group
- ✓ White Board or Standing butcher block with written agenda and anything else you want to cover.
- ✓ Nametags used from Meeting 1 and supplies for others to create own nametags
- ✓ Depending on funding available offer light refreshments. Pot-luck is also encouraged.
- ✓ The following handouts can be given in a folder format to members who have not attended previously: FRG Roster (ask unit Commander for most up to date roster), Confidentiality Policy for review (Appendix 1), FRSA paperwork the unit keeps on

spouses for review/updates by newer members or those who want to review (ask FRSA for updated form they use or to bring existing information on group members for review), FRG volunteer position descriptions (Appendix 2), Post map (Obtain most current/up to date)

- ✓ Handouts: Pre/Post survey –accomplished every meeting since participants vary and topic of feedback varies (Appendix 3), FOCUS flyers and/or pamphlets (Appendix 7)

Notes to Group Leader: Please clarify appropriateness for age levels in room prior to conducting this meeting with instructor. Refer to Meeting 1 Notes to Group Leader. Since more than likely there are different meeting participants in the group, ask them to complete the meeting pre survey, and administer post survey again (this will be standard for every meeting topic for feedback).

1.Check-in. (3 minutes): Refer to Meeting 1.

2. Learning/Working Activities:

A. Orientation (2-5 minutes): Refer to Meeting 1. This part can be skipped if you feel the majority already knows this information.

B. Complete Initial Assessment Instrument (8 minutes): Refer to Meeting 1.

C. Introductions (10 minutes): Applicable to ask for information from newer members who have not been introduced. Refer to Meeting 1 notes about this activity for guidance on ways to track information given.

D. Review of FRG organization and structure (10 minutes): Give newer members handouts from Meeting 1 if they do not have them. Review elements of what FRG is, confidentiality policy and use the FRG roster to reference contact information, who volunteers for what (contacts).

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E. Guest Speaker Activity (45-60 minutes): Ask MH professional to facilitate FOCUS session with group

F. Complete Post Assessment Instrument (8 minutes): Refer to Meeting 1.

3. Closeout (2 minutes): Refer to Meeting 1.

Meeting 6

Red Cross Emergency Planning

Objectives: Empower family members and soldiers by giving tools to help with own Emergency Preparation should a natural disaster occur. Additionally, discuss the American Red Cross role in supporting military families and the community.

Description: Military families in the JBLM area have sustained blackouts for days due to snow, severe flooding conditions and may live in an area that could be impacted by volcanic eruption from Mount Rainier. Precautions for any situation can be valuable in emergency family planning. The Red Cross offers multiple resources for this particular mission. The Red Cross provides links to community resources, nation and worldwide communications for military families across posts, resiliency training and support for wounded warriors and military hospitals. Additionally, Red Cross offers babysitting training, CPR/AER/First Aid training and many other certifications that families may be interested in learning more about and how to accomplish.

Goals:

- Introduce Red Cross to families as a resource
- Discuss disaster planning and assist one another in ideas for preparedness
- Review confidentiality process in referral and seeking resources and mandatory reporting

Supplies Needed:

- ✓ A large piece of butcher block paper and marker per small group
- ✓ White Board or Standing butcher block with written agenda and anything else you want to cover.
- ✓ Nametags used from Meeting 1 and supplies for others to create own nametags
- ✓ Depending on funding available offer light refreshments. Pot-luck is also encouraged.

- ✓ The following handouts can be given in a folder format to members who have not attended previously: FRG Roster (ask unit Commander for most up to date roster), Confidentiality Policy for review (Appendix 1), FRSA paperwork the unit keeps on spouses for review/updates by newer members or those who want to review (ask FRSA for updated form they use or to bring existing information on group members for review), FRG volunteer position descriptions (Appendix 2), Post map (Obtain most current/up to date)
- ✓ Handouts: Pre/Post survey –accomplished every meeting since participants vary and topic of feedback varies (Appendix 3), Your Family Disaster Plan, How to send a Red Cross Message, and Emergency Car Seat labels (Appendix 8).
- ✓ Optional: Contact your local Red Cross to ask someone to come speak to the group about services offered.
- ✓ **Notes to Group Leader:** Refer to Meeting 1 Notes to Group Leader. Since more than likely there are different meeting participants in the group, ask them to complete the meeting pre survey, and administer post survey again (this will be standard for every meeting topic for feedback).

1. Check-in. (3 minutes): Refer to Meeting 1.

2. Learning/Working Activities:

A. Orientation (2-5 minutes): Refer to Meeting 1. This part can be skipped if you feel the majority already knows this information.

B. Complete Initial Assessment Instrument (8 minutes): Refer to Meeting 1.

C. Introductions (10 minutes): Applicable to ask for information from newer members who have not been introduced. Refer to Meeting 1 notes about this activity for guidance on ways to track information given.

D. Review of FRG organization and structure (10 minutes): Give newer members handouts from Meeting 1 if they do not have them. Review elements of what FRG is, confidentiality policy and use the FRG roster to reference contact information, who volunteers for what (contacts).

E. Optional Activity (20 minutes): Ask someone from Red Cross to come and discuss with the group services they can offer in community and to military members.

F. Activity (20 minutes): Ask family members to pair up and discuss their Emergency Preparedness. Use “Your Family Disaster Plan” worksheet (Appendix 8). Ask them to go through and interview each other on where they are at with the list and make suggestions. Additionally, fill out Emergency carseat labels for take home to tape on carseats and offer additional information on how to send a message to a deployed family member (Appendix 8) and/or contact local chapter of Red Cross. Is everyone “Red Cross Ready?”

G. Complete Post Assessment Instrument (8 minutes): Refer to Meeting 1.

3. Closeout (2 minutes): Refer to Meeting 1.

Meeting 7

Tri-care services and Behavioral Health

Objectives: Provide additional resources and information on Tri-West healthcare in addition to Behavioral Health Resources. This meeting is designed so that at least one unit professional (from Mental Health, Tri-West) should be present to guide in appropriate resource information and referral since information is subject to change. At the very least, it is important that any information or resources be reviewed by a knowledgeable professional or service representative prior to meeting if you cannot have someone there from the resource. Of note, it is important to caution audience members of sensitive nature/adult content in referral process for Domestic Violence and/or mandatory reporting prior to conducting meeting

Description: Although this resource may have been offered during other meetings across post, other families and audiences may have missed the information and may have questions about where to go for assistance in seeking healthcare. It can be helpful to use Tricare information as reference and ask if anything specific they want to know about. Other family members may share their experiences and guide others in a peer support role through seeking healthcare, how to enroll, urgent care, contacts, etc.

Goals:

- Discuss Behavioral Health Services and Tri-West Healthcare to families as a resource
- Introduce service professionals who are knowledgeable and providing resources
- Review confidentiality process in referral and seeking resources and mandatory reporting

Supplies Needed:

- ✓ White Board or Standing butcher block with written agenda and anything else you want to cover.
- ✓ Nametags used from Meeting 1 and supplies for others to create own nametags

- ✓ Depending on funding available offer light refreshments. Pot-luck is also encouraged.
- ✓ The following handouts can be given in a folder format to members who have not attended previously: FRG Roster (ask unit Commander for most up to date roster), Confidentiality Policy for review (Appendix 1), FRSA paperwork the unit keeps on spouses for review/updates by newer members or those who want to review (ask FRSA for updated form they use or to bring existing information on group members for review), FRG volunteer position descriptions (Appendix 2), Post map (Obtain most current/up to date)
- ✓ Handouts: Pre/Post survey –accomplished every meeting since participants vary and topic of feedback varies (Appendix 3), Pamphlets/information on Tri-West (Obtain most up to date and pass around), Introduction to Tricare briefing for group leader reference-download prior to meeting from www.tricare.mil/briefings, JBLM Behavioral Health Services Resource List (Appendix 9), Restricted and Unrestricted Reporting handout for Domestic Violence (Appendix 10), Military Power and Control Wheel (Appendix 11)

Notes to Group Leader: Of note, it is important to caution audience members of sensitive nature/adult content in referral process for Domestic Violence and/or mandatory reporting prior to conducting meeting. Refer to Meeting 1 Notes to Group Leader. Since more than likely there are different meeting participants in the group, ask them to complete the meeting pre survey, and administer post survey again (this will be standard for every meeting topic for feedback).

1.Check-in. (3 minutes): Refer to Meeting 1.

2. Learning/Working Activities:

A. Orientation (2-5 minutes): Refer to Meeting 1. This part can be skipped if you feel the majority already knows this information.

B. Complete Initial Assessment Instrument (8 minutes): Refer to Meeting 1.

C. Introductions (10 minutes): Applicable to ask for information from newer members who have not been introduced. Refer to Meeting 1 notes about this activity for guidance on ways to track information given.

D. Review of FRG organization and structure (10 minutes): Give newer members handouts from Meeting 1 if they do not have them. Review elements of what FRG is, confidentiality policy and use the FRG roster to reference contact information, who volunteers for what (contacts).

E. Activity (20 minutes): Ask a service professional from a relevant field in Behavioral Health or TriWest to come and discuss with the group services they can offer in community and to military members (Can be a unit Social Worker, Psychologist, etc).

F. Activity (20 minutes): Discuss handouts provided if have not already. Use these handouts as education for what Domestic Violence may look like and how to seek help from a MH professional. Use the latest Introduction to Tricare briefing as a reference for frequently asked questions (downloadable from: www.w.tricare.mil/briefings). Additionally reference the confidentiality agreement given to FRG volunteers and clarify questions of the mandatory reporting process.

G. Complete Post Assessment Instrument (8 minutes): Refer to Meeting 1.

3. Closeout (2 minutes): Refer to Meeting 1.

Meeting 8

FRG funding: How to acquire funding and ideas for future activities

Objectives: Provide additional information on FRG fundraising

Description: This meeting is intended to provide more ideas for fundraising and also aid in planning process of conducting an event.

Goals:

- Provide resources for choosing fundraising activities
- Provide resources for fundraising planning and where group is in process

Supplies Needed:

- ✓ A large piece of butcher block paper and marker per small group
- ✓ White Board or Standing butcher block with written agenda and anything else you want to cover.
- ✓ Nametags used from Meeting 1 and supplies for others to create own nametags
- ✓ Depending on funding available offer light refreshments. Pot-luck is also encouraged.
- ✓ The following handouts can be given in a folder format to members who have not attended previously: FRG Roster (ask unit Commander for most up to date roster), Confidentiality Policy for review (Appendix 1), FRSA paperwork the unit keeps on spouses for review/updates by newer members or those who want to review (ask FRSA for updated form they use or to bring existing information on group members for review), FRG volunteer position descriptions (Appendix 2), Post map (Obtain most current/up to date)
- ✓ Handouts: Pre/Post survey –accomplished every meeting since participants vary and topic of feedback varies (Appendix 3), Fundraising Quick Reference Chart and Fundraising Planning Checklist (Appendix 12)

Notes to Group Leader: Refer to Meeting 1 Notes to Group Leader. Since more than likely there are different meeting participants in the group, ask them to complete the meeting pre survey, and administer post survey again (this will be standard for every meeting topic for feedback).

1. Check-in. (3 minutes): Refer to Meeting 1.

2. Learning/Working Activities:

A. Orientation (2-5 minutes): Refer to Meeting 1. This part can be skipped if you feel the majority already knows this information.

B. Complete Initial Assessment Instrument (8 minutes): Refer to Meeting 1.

C. Introductions (10 minutes): Applicable to ask for information from newer members who have not been introduced. Refer to Meeting 1 notes about this activity for guidance on ways to track information given.

D. Review of FRG organization and structure (10 minutes): Give newer members handouts from Meeting 1 if they do not have them. Review elements of what FRG is, confidentiality policy and use the FRG roster to reference contact information, who volunteers for what (contacts).

E. Activity (20 minutes): Ask attendees to get into small groups of twos and/or threes. Discuss your fundraising goal with the group (how much is in the FRG account, how much you would like and purpose for funds). If a specific purpose for fundraising has not been defined yet, ensure to discuss this with group to find any interests for what to spend for the group (this can be self-sustaining funds for light refreshments during meetings, etc.). Give them a butcher block piece of paper and ask them to list out any fundraising activities they've done in the past. Ask them to select what they thought was most successful and describe why. Ask the small groups to collectively select a fundraising

activity they are interested in doing and discuss the ability to accomplish the activity using the planning checklist. When they have done this, ask groups to volunteer their idea and vote on an idea as a group. Go through the fundraising checklist and attempt to delegate/plan as many tasks as possible in order to accomplish the goal.

F. Complete Post Assessment Instrument (8 minutes): Refer to Meeting 1.

3. Closeout (2 minutes): Refer to Meeting 1.

Meeting 9

Self-care and Mindfulness

Objectives: Introduce FRG members to small exercises in awareness of their stress levels and what they can do to “de-stress”. Discuss other ways group members conduct self-care and ask unit social worker or Psychologists for other tools to assist.

Description: Often, FRG members are informal or formal helping members of the organization and experience compassion fatigue just as any other volunteer in a service organization would. This meeting is intended to be raise self-awareness about stress levels related to helping others or in their professions and conduct exercise(s) that can be led by a professional (such as a unit Social Worker/Psychologist) or conducted by volunteers guided by handout. Short exercises in breathing and sharing approved exercises with each other by a unit professional can enhance self-care and build tools for a positive, physical response in the present moment. Additionally, exchanging self-care tips can be useful for the group.

Goals:

- Provide a safe learning environment for helpful, self-care skills
- Provide more learning about access to the unit Social Worker, Psychologist and/or sample of what they can offer

Supplies Needed:

- ✓ A large piece of butcher block paper and marker per small group
- ✓ White Board or Standing butcher block with written agenda and anything else you want to cover.
- ✓ Nametags used from Meeting 1 and supplies for others to create own nametags
- ✓ Depending on funding available offer light refreshments. Pot-luck is also encouraged.

- ✓ The following handouts can be given in a folder format to members who have not attended previously: FRG Roster (ask unit Commander for most up to date roster), Confidentiality Policy for review (Appendix 1), FRSA paperwork the unit keeps on spouses for review/updates by newer members or those who want to review (ask FRSA for updated form they use or to bring existing information on group members for review), FRG volunteer position descriptions (Appendix 2), Post map (Obtain most current/up to date)
- ✓ Handouts: Pre/Post survey –accomplished every meeting since participants vary and topic of feedback varies (Appendix 3), Self-rated Professional Quality of Life scale (Appendix 13), Mindful Breathing handout (Appendix 14). Ask unit professional for approved breathing and/or mindfulness exercises for limited use during this lesson (optional).

Notes to Group Leader: Refer to Meeting 1 Notes to Group Leader. Since more than likely there are different meeting participants in the group, ask them to complete the meeting pre survey, and administer post survey again (this will be standard for every meeting topic for feedback).

1. Check-in. (3 minutes): Refer to Meeting 1.

2. Learning/Working Activities:

A. Orientation (2-5 minutes): Refer to Meeting 1. This part can be skipped if you feel the majority already knows this information.

B. Complete Initial Assessment Instrument (8 minutes): Refer to Meeting 1.

C. Introductions (10 minutes): Applicable to ask for information from newer members who have not been introduced. Refer to Meeting 1 notes about this activity for guidance on ways to track information given.

D. Review of FRG organization and structure (10 minutes): Give newer members handouts from Meeting 1 if they do not have them. Review elements of what FRG is, confidentiality policy and use the FRG roster to reference contact information, who volunteers for what (contacts).

E. Activity (20 minutes): Conduct the self-inventory for Compassion Fatigue. This can be thinking of their FRG volunteering job, or role outside of the FRG. Welcome others to share results such as if they found anything surprising or learned something about themselves. Go through the mindfulness and breathing activities and try them out! Ask others if they are comfortable to share what they do for positive self-care habits and to “de-stress”.

F. Complete Post Assessment Instrument (8 minutes): Refer to Meeting 1.

3. Closeout (2 minutes): Refer to Meeting 1.

Meeting 10

Closing

Objectives: Bid farewell to unit, final feedback and retrospective outlook on year

Description: Change of command will come and it can be beneficial to use a meeting to introduce incoming command, staff and/or volunteers. Also, this can provide time to acknowledge volunteers for their hard work.

Goals:

- Review what you found over time with survey
- Reflect on experiences together and feedback for incoming command team
- Invite others to change of command ceremony (if applicable).

Supplies Needed:

- ✓ White Board or Standing butcher block with written agenda and anything else you want to cover.
- ✓ Nametags used from Meeting 1 and supplies for others to create own nametags
- ✓ Depending on funding available offer light refreshments. Pot-luck is also encouraged.
- ✓ The following handouts can be given in a folder format to members who have not attended previously: FRG Roster (ask unit Commander for most up to date roster), Confidentiality Policy for review (Appendix 1), FRSA paperwork the unit keeps on spouses for review/updates by newer members or those who want to review (ask FRSA for updated form they use or to bring existing information on group members for review), FRG volunteer position descriptions (Appendix 2), Post map (Obtain most current/up to date)
- ✓ Handouts: Pre/Post survey –accomplished every meeting since participants vary and topic of feedback varies (Appendix 3)

Notes to Group Leader: Refer to Meeting 1 Notes to Group Leader. Since more than likely there are different meeting participants in the group, ask them to complete the meeting pre survey, and administer post survey again (this will be standard for every meeting topic).

1. Check-in. (3 minutes): Refer to Meeting 1.

2. Learning/Working Activities:

A. Orientation (2-5 minutes): Refer to Meeting 1. This part can be skipped if you feel the majority already knows this information.

B. Complete Initial Assessment Instrument (8 minutes): Refer to Meeting 1.

C. Introductions (10 minutes): Applicable to ask for information from newer members who have not been introduced. Refer to Meeting 1 notes about this activity for guidance on ways to track information given.

D. Review of FRG organization and structure (10 minutes): Give newer members handouts from Meeting 1 if they do not have them. Review elements of what FRG is, confidentiality policy and use the FRG roster to reference contact information, who volunteers for what (contacts). It may be relevant to discuss any upcoming changes in structure.

E. Activity (20 minutes): Commander and FRG Leader(s) review end of year results of surveys throughout year, events, lessons learned, thank volunteers for their hard work, provide awards if applicable. Ensure all know when change of command is and officially invite them (if applicable).

F. Complete Post Assessment Instrument (8 minutes): Refer to Meeting 1.

3. Closeout (2 minutes): Refer to Meeting 1.

Appendix 1
(Unit Name Here)

Volunteer Confidentiality Agreement

Confidentiality plays an important part in your position as an FRG volunteer. You must be able to guarantee any person who contacts you the freedom to discuss matters in a private and safe environment. It is your duty and obligation to keep each conversation and the personal matters discussed during such interactions in the strictest confidence with exception of the Commander or his/her designated representative.

Please read and initial the statements below to affirm understanding of each.

_____ I will not disclose names or details of any contact or conversation in any way that may identify them to others with exception of the Commander or his/her designated representative.

_____ I will obtain the permission of the person involved before sharing information about them or their situation when contacting a resource or making a referral for services.

EXCEPTION: AS A DEPARTMENT OF THE ARMY VOLUNTEER, YOU HAVE A DUTY TO WARN THE APPROPRIATE AUTHORITIES IF A PERSON INDICATES THEY INTEND TO HARM THEMSELVES OR OTHERS.

If a person begins to discuss something with you that lies outside the area of confidentiality (e.g. suicide, child abuse, neglect, sexual abuse and/or assault, any other criminal activity), you must immediately inform them that you will be obligated to report the call/discussion and its nature to the Chain of Command and/or the appropriate resource.

_____ I understand the duty to warn, and agree to report any discussion that indicates harm to self or others is imminent.

_____ I will protect contact information sheets and destroy them when they are obsolete.

_____ I will immediately relinquish all FRG documentation in my possession to the FRSA (or designated command representative) upon terminating my status as a static FRG volunteer.

_____ I understand that all information I receive because of my volunteer position within the FRG is for official use only within this unit and will not be furnished to any commercial enterprise, company, representative, organization, or agency outside the Department of Defense.

As an FRG volunteer, I am being entrusted to keep all private matters private, and will not gossip or betray the trust of the Family member seeking my help and guidance.

Printed Name

Signature

Date

Slightly modified from the original.

Created by Leslie Thomas (FRSA). Acquired from Lori Parker, JBLM Volunteer Corps Program Manager on February 11th, 2014.

Appendix 2
FAMILY READINESS GROUP
VOLUNTEER POSITION DESCRIPTION

POSITION TITLE: COMMANDER

DESCRIPTION OF DUTIES:

- Encourage an environment which encourages an effective family program
- Provide command emphasis to family readiness programs
- Ensure soldier and family member access to entitlements, family programs and family services
- Facilitate, prior to and during deployment, the organization of a community network and mutual assistance system to include FRG and chain of command.
- Provide unit information systems, facilities and resources to FRG's. These may include unit roster, administrative supplies, equipment, transportation (when available and applicable), and training from unit and installation professional resources.
- Define where volunteer's role begins and ends - provide complete job descriptions for all volunteers with proper referral resources.
- Ensure that each level of authority from CSM, CO, 1SGT, Chaplain and Rear Detachment are trained so each has a clear understanding of the Commander's FRG intent.
- Understand that part of their command responsibilities include responsiveness to their FRG representatives.
- Volunteer recognition - Volunteers need to be thanked, to feel appreciated - they need to make family support work.

TRAINING: FRG Leadership Training "Green Suit Style" provided at the Family Resource Center.

Date	Volunteer	Date	Commander
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Appendix 2
FAMILY READINESS GROUP
VOLUNTEER POSITION DESCRIPTION

POSITION TITLE: FRG LEADER/CO-LEADER

SUPERVISOR: BATTALION/COMPANY COMMANDER

DESCRIPTION OF DUTIES:

- Serve as a liaison/advisor between FRG, Commander and rear detachment.
- Assist, as required, in referring family problems to appropriate supporting agencies through rear detachment commander.
- Schedule company FRG meeting.
- Act as a chairperson or co-chair person on company FRG advisory committee.
- Represent FRG on FRG Advisory committee.
- Keeps current addresses/phone numbers of each spouse.
- Maintain regular communication with all FRG members.
- Maintain link with BN/CO level military unit.
- Recruit volunteers to serve with FRG.

TIME REQUIRED: One-year commitment, hours are flexible

QUALIFICATIONS:

- Manage multiple priorities and develop follow through
- Ability to effectively communicate orally and in writing
- Ability to apply time management skills
- Ability to focus on details

TRAINING: FRG Leadership Training provided by the Family Resource Center

Date	Volunteer	Date	Commander

Slightly modified from the original.
Acquired from Lori Parker, JBLM Volunteer Corps Program Manager on February 11th, 2014.

Appendix 2
FAMILY READINESS GROUP
VOLUNTEER POSITION DESCRIPTION

POSITION TITLE: SECRETARY

SUPERVISOR: FRG LEADER

DESCRIPTION OF DUTIES:

- Maintains minutes for all FRG meetings.
- Documents every time vote is taken for use of funds or other activities.
- Assists with correspondence generated by FRG.
- Recruit volunteers to serve with FRG.

TIME REQUIRED: One-year commitment, hours are flexible

QUALIFICATIONS:

Ability to effectively communicate orally and in writing
Ability to focus on details

TRAINING: FRG Leadership Training provided by the Family Resource Center

_____	_____	_____	_____
Date	Volunteer	Date	FRG Leader

Appendix 2
FAMILY READINESS GROUP
VOLUNTEER POSITION DESCRIPTION

POSITION TITLE: TREASURER

SUPERVISOR: FRG LEADER

DESCRIPTION OF DUTIES:

- Maintains records of FRG funds.
- Ensure FRG fund activities are conducted in accordance with the above procedures.
- Assists Commander with Fort Lewis financial reporting requirements (audits).
- Coordinates opportunities for fund-raising.
- Recruit volunteers to serve with FRG.

TIME REQUIRED: One-year commitment, hours are flexible

QUALIFICATIONS:

Ability to effectively communicate orally and in writing
 Ability to track and record transactions of a checking account
 Knowledge of AR 600-20 and Joint Ethics Regulation

TRAINING:

- FRG Treasurer Training provided by the Family Resource Center
- FRG Leadership Training provided by the Family Resource Center

Date	Volunteer	Date	FRG Leader

Appendix 2
FAMILY READINESS GROUP
VOLUNTEER POSITION DESCRIPTION

POSITION TITLE: NEWSLETTER EDITOR

SUPERVISOR: FRG LEADER

DESCRIPTION OF DUTIES:

- Compiles news articles and calendar.
- Collects written columns from key contributors to command information letter (i.e., Commander, CSM, Chaplain, Company Commander, 1SG, FRG Leader).
- Directs layout of published material.
- Assembles command information letter.
- Recruit volunteers to serve with FRG.

TIME REQUIRED: One-year commitment, hours are flexible

QUALIFICATIONS:

Ability to effectively communicate orally and in writing

Possess effective computer skills

Ability to focus on details

TRAINING: FRG Leadership Training provided by the Family Resource Center

Date	Volunteer	Date	FRG Leader
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Appendix 2
FAMILY READINESS GROUP
VOLUNTEER POSITION DESCRIPTION

POSITION TITLE: FRG VOLUNTEER COORDINATOR

SUPERVISOR: FRG LEADER

DESCRIPTION OF DUTIES:

- Keeps current addresses/phone numbers of volunteer roster.
- Recruit volunteers to serve with FRG.
- Maintains management of volunteers as an Organization Point of Contact (OPOC) through the Volunteer Management Information System (VMIS).
- Maintains record of volunteer hours through VMIS.
- Ensure that FRG volunteers receive training and recognition.
- Sends notes of appreciation to guest speakers.
- Sends cards for births, etc

TIME REQUIRED: One-year commitment, hours are flexible

QUALIFICATIONS:

Ability to effectively communicate orally and in writing
Manage multiple tasks and develop sense of follow through

TRAINING:

- FRG Leadership Training provided by the FRC
- VMIS Organization Point of Contact Training provided by the Army Volunteer Corps Program Manager

Date

Volunteer

Date

FRG Leader

Appendix 2
FAMILY READINESS GROUP
VOLUNTEER POSITION DESCRIPTION

POSITION TITLE: FRG POINT OF CONTACT (POC)

SUPERVISOR: FRG LEADER

DESCRIPTION OF DUTIES:

- Initiates and maintains contact with family members within support circle. Contact can be made through meetings, visits, phone calls, and/or e-mail. At a minimum, phone contact is made to check on problems and concerns, to let families know that support is available.
- Distributes important information to family members.
- Identifies family member concerns to company FRG representative and/or advisory committee.
- Refers family problems through company FRG representative, commander and/or rear detachment command.
- Recruit volunteers to serve with FRG.

TIME REQUIRED: One-year commitment, hours are flexible

QUALIFICATIONS:

Ability to effectively communicate orally and in writing
Manage multiple tasks and develop sense of follow through

TRAINING:

- FRG Leadership Training provided by the Family Resource Center
- Point of Contact Training provided by the Family Resource Center

_____	_____	_____	_____
Date	Volunteer	Date	FRG Leader

Appendix 3

Pre-survey

The purpose of this survey is to take a "baseline" of the audience at a Family Readiness meeting prior to information given at the meeting and to have comparable information for the post-survey. Survey taker may remain anonymous as long as their pre/post test remain together for measuring.

1. How would you rate your knowledge of who to go to with an issue or concern within this unit FRG? (Do you have FRG representatives you are comfortable approaching with an issue?):

- Excellent
- Very good
- Fairly good
- Mildly good
- Not good at all

2. Please check the following post resources you are familiar with and would be comfortable accessing and/or referring other family members to:

- | | | |
|---|--|--|
| <input type="checkbox"/> Legal Resources | <input type="checkbox"/> Recreational Info | <input type="checkbox"/> Food Stamp/WIC/Temporary Assistance Referrals |
| <input type="checkbox"/> Medical Care/Tri-care benefits | <input type="checkbox"/> Red Cross/Emergency Planning and Preparedness | <input type="checkbox"/> Housing Office |
| <input type="checkbox"/> Family Advocacy Programs | <input type="checkbox"/> Education and/or Employment | <input type="checkbox"/> Installation Chaplain |
| <input type="checkbox"/> Counseling (Family and Marital) | <input type="checkbox"/> Alcohol and Drug Abuse | <input type="checkbox"/> Madigan Behavioral Health |
| <input type="checkbox"/> Financial Assistance | <input type="checkbox"/> Report Child/Family Abuse | <input type="checkbox"/> Parenting Education/Support |
| <input type="checkbox"/> Army Community Services | <input type="checkbox"/> Commissary/PX | <input type="checkbox"/> Exceptional Family Member Program (EFMP) |
| <input type="checkbox"/> Youth, school services and/or child care | <input type="checkbox"/> ID Card/DEERS/Access to Compound | |

Other (please specify)

3. How comfortable do you feel asking questions to civilian Family Readiness Group representatives?

- Extremely comfortable
- Quite comfortable
- Moderately comfortable
- Slightly comfortable
- Not at all comfortable

Appendix 3

4. How comfortable do you feel asking questions to the Commander or a military representative such as the First Sergeant within the organization?

- Extremely comfortable
- Quite comfortable
- Moderately comfortable
- Slightly comfortable
- Not at all comfortable

5. How would you rate your knowledge of the confidentiality policy within this unit's Family Readiness Group?

- is Excellent
- Very good
- Fairly good
- Mildly good
- Not good at all

6. Since this current command team started in _____ (date):

Have you felt your confidence and/or trust has been violated by an officially appointed FRG volunteer or military FRG leader (Commander and/or 1SG) when trying to seek assistance or resources? If so, please elaborate below:

- Yes No

If so, please describe issue and any suggestions on how to avoid this in the future:

Appendix 3

Post-survey

You'll notice the first five questions are the same questions you took prior to the meeting. The purpose of this survey is to compare your survey results taken prior to the meeting with your post meeting results. The survey taker may remain anonymous as long as their pre/post test remain together for measuring.

On the second page, this post survey also incorporates more questions about the FRG event held for further discussion and information

1. How would you rate your knowledge of who to go to with an issue or concern within this unit FRG? (Do you have FRG representatives you are comfortable approaching with an issue?):

- Excellent
- Very good
- Fairly good
- Mildly good
- Not good at all

2. AS A RESULT OF THIS MEETING, Please check any of the following post resources you learned about TODAY. If they aren't listed, please write them in.

- | | | |
|--|---|---|
| <input type="radio"/> Legal Resources | <input type="radio"/> Recreational Info | <input type="radio"/> Food Stamp/WIC/Temporary Assistance Referrals |
| <input type="radio"/> Medical Care/Tri-care benefits | <input type="radio"/> Red Cross/Emergency Planning and Preparedness | <input type="radio"/> Housing Office |
| <input type="radio"/> Family Advocacy Programs | <input type="radio"/> Education and/or Employment | <input type="radio"/> Installation Chaplain |
| <input type="radio"/> Counseling (Family and Marital) | <input type="radio"/> Alcohol and Drug Abuse | <input type="radio"/> Madigan Behavioral Health |
| <input type="radio"/> Financial Assistance | <input type="radio"/> Report Child/Family Abuse | <input type="radio"/> Parenting Education/Support |
| <input type="radio"/> Army Community Services | <input type="radio"/> Commissary/PX | <input type="radio"/> Exceptional Family Member Program (EFMP) |
| <input type="radio"/> Youth, school services and/or child care | <input type="radio"/> ID Card/DEERS/Access to Compound | |

Other (please specify)

3. How comfortable do you feel asking questions to civilian Family Readiness Group representatives?

- Extremely comfortable
- Quite comfortable
- Moderately comfortable
- Slightly comfortable
- Not at all comfortable

Appendix 3

4. How comfortable do you feel asking questions to the Commander or a military representative such as the First Sergeant within the organization?

- Extremely comfortable
- Quite comfortable
- Moderately comfortable
- Slightly comfortable
- Not at all comfortable

5. How would you rate your knowledge of the confidentiality policy within this unit's Family Readiness Group?

- is Excellent
- Very good
- Fairly good
- Mildly good
- Not good at all

Appendix 3

These questions provide more insight specific to this meeting

6. How useful was the information presented at this event?

- Extremely useful
- Quite useful
- Moderately useful
- Slightly useful
- Not at all useful

7. Overall, were you satisfied with this presenter, dissatisfied with this presenter, or neither satisfied nor dissatisfied?

- Extremely satisfied
- Quite satisfied
- Somewhat satisfied
- Neither satisfied nor dissatisfied
- Somewhat dissatisfied
- Quite dissatisfied
- Extremely dissatisfied

8. Was this event better than what you expected, worse than what you expected, or about what you expected?

- A great deal better
- Quite a bit better
- Somewhat better
- About what was expected
- Somewhat worse
- Quite a bit worse
- A great deal worse

9. How likely are you to attend this event again?

- Extremely likely
- Very likely
- Moderately likely
- Slightly likely
- Not at all likely

Appendix 3

10. How likely are you to recommend the event to a friend?

- Extremely likely
- Very likely
- Moderately likely
- Slightly likely
- Not at all likely

11. Overall, how would you rate the event?

- Excellent
- Very good
- Fairly good
- Mildly good
- Not good at all

12. Do you have any other comments, questions, or concerns?

In-Coming FRG Leader Checklist

To be completed during meeting with unit Commander

**** Checklist designed by Megan Fourland – Fort Bragg ACS / Modified by FRC – JBLM, 2014**

Commander:	
Phone:	
Cell :	
Email:	

FRSA:	
Phone:	
Cell:	
Email:	

Rear Detachment Commander:	
Phone:	
Cell:	
Email:	

Family Readiness Liaison:	
Phone:	
Cell:	
Email:	

Current Phase of Deployment Cycle:			
Deployment/Re-Deployment Date:			
Number of Single Soldiers:		Number of Married Soldiers:	

FRG Resources

- o FRG use of unit office space, copier, fax machine – FRC copier, meeting space?

Does FRG have FRG Informal Fund?		Employer Identification Number (EIN)	
Bank Name:		Bank Account Number:	
Treasurer/Fund Custodian:		Alternate Treasurer:	
Date of last audit?			
Generic FRG Email			

Appendix 4

- Informal Fund SOP? Date updated: _____
- Newsletter/Facebook/vFRG SOP? Date updated: _____
- FRG SOP? Date updated: _____

ÿ FRG Volunteers

- List of current volunteers
- List of required training by Command
- Are volunteers registered, applied/submitted application, and are they tracking hours in VMIS – www.myarmyonesource.com? What FRG positions are listed and/or filled in VMIS?
- Have all volunteers complete DD 2793 Volunteer Agreement and copy furnished to FRSA
- What training has been completed by current volunteers?
- How does unit recognize volunteers?

ÿ FRG Phone Tree

- How current is unit roster?
- Copy of current FRG roster
- Unit's policy/guidance regarding who is to be included on Phone Roster (i.e. significant others, extended Family, fiancés, friends, etc)
- What information is to be restricted from these individuals?

ÿ Current FRG Procedures

- FRG Meeting frequency
- Average attendance of past meetings/events
- Key Caller (POC) Procedures - contacting Families, activation of Phone Tree, flow of communication, generic email addresses, and role/responsibilities
- Sample and frequency of FRG Newsletter
- What activities or information do the FRG members need?
- Is there a battalion/brigade Facebook page and if so who is the administrator?
- Is there an active vFRG site? Who is the administrator?

ÿ FRG Reputation

- What perceptions do leadership, Soldiers and families have of the FRG?

ÿ Unit Information

- What is the unit's mission statement?
- What is unit's deployment/training schedule?

Appendix 5

Introduction Game (if not conducting exercise in Meeting 1)

Directions: Ask the participants to move around the room and ask each other what they have in common. First person to get BINGO must shout out BINGO!

B	I	N	G	O
Flosses Every Night	Has same birth month	Likes white chocolate	Has no kids	Lives off post
Has same middle initial	Has two kids under age of 5	Watches reality tv	Married	Hates scary movies
Plays soccer	Wearing Blue	FREE SPACE	Can read music	Likes to bowl
Has a cat	Has same eye color	Drives a truck	Has a tattoo	Watches football
Speaks a foreign language	Lives on post	Loves art	Plays an instrument	Likes to read

Appendix 6

F★O★C★U★S Resiliency Training for Military Families



When a Service Member deploys the entire family may experience changes in roles and duties. The remaining spouse has to take on new responsibilities. Children may have different reactions when separated from a caregiver. Many adapt well, but changes in behavior are normal and expectable. They often lack the words to express their feelings and experiences. Some throw tantrums and act out, while others may hold their feelings in and become sad and withdrawn. FOCUS helps families plan ahead for these challenges by developing a personalized toolbox of skills specifically designed to meet their needs.

MANAGING FEELINGS • SETTING GOALS • COMMUNICATING • PROBLEM SOLVING • HANDLING STRESS

FOCUS Individual Family Resiliency Training sessions allow families to build their own story about military life experiences. This helps families to:

- Identify, manage, and discuss emotions
- Clarify misunderstandings and respect individual points of view
- Build on family strengths
- Feel closer and more supportive
- Use family-level problem solving and goal setting to empower the entire family

To stay safe during deployment, a Service Member would never head off without months of specialized training. To remain strong and healthy during deployment, the Service Member's family also needs training and preparation. FOCUS helps families to be prepared.

Contact FOCUS today for more information at:

FOCUS Joint Base Lewis-McChord

Bldg. 2013B, RM. 331

Joint Base Lewis-McChord-Main, WA 98433

P 253.966.6390
E jblm@focusproject.org



www.focusproject.org

Revised August 18, 2010

Learn your family's strengths, then build on them.

What is FOCUS?

FOCUS, or Families OverComing Under Stress, provides resiliency training to service members and their families. FOCUS teaches practical skills to help families meet the challenges of military life, including how to communicate and solve problems effectively and to successfully set goals together.

Based on more than 20 years of research, FOCUS has been designed especially for military families. The program uses a series of unique tools to help all members of the family create a shared family story. Families who participate in FOCUS experience a renewed sense of confidence by recognizing their family's strengths, and then building on them.

How it works.

FOCUS trainers partner with each couple or family to help them achieve their unique goals. All of our trainers have master's or doctoral degrees and are specialized to work with military couples and their children.

Many are themselves veterans or military spouses. They are skilled, compassionate and committed to serving you. FOCUS trainers are conveniently located on military installations and in nearby communities. Their office hours are tailored to meet the demands of busy schedules.

During FOCUS training sessions, each family member builds a timeline of important events, transitions and challenges.

When combined into the "Family Timeline," the entire family's journey takes shape. This creates greater understanding and empathy among family members as they share their stories.

FOCUS sessions provide families with activities and techniques to practice and master new skills, including:

Emotional Regulation

Using the Feeling Thermometer, family members learn to better understand their emotions and use a common language to talk about them.

Communication

Family members learn to actively listen and respond to one another's concerns. They learn how to express feelings, talk to each other and deal with stress.

Problem-Solving

While recognizing and building upon their existing strengths, families learn how to clearly define problems and implement effective solutions, as well as ways to handle day-to-day challenges.

Goal-Setting

Families learn how to set and take steps toward achievable goals.

Managing Deployment Reminders

Family members learn how to develop a plan together to deal effectively with deployment and combat stress reminders.

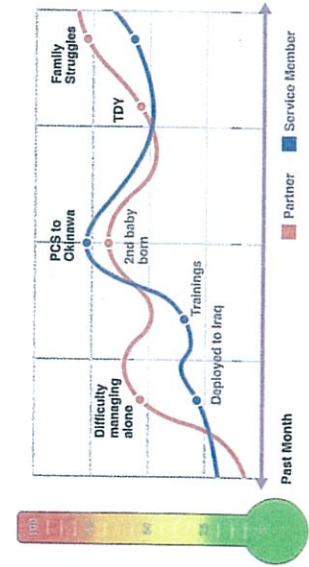
In sum, FOCUS builds healthier, happier and stronger families, one family at a time.

"FOCUS has opened up more communication between my spouse and me. Our relationship is becoming stronger. It is especially helpful to know how my spouse was feeling during our timeline together and it was nice to have him see how I was feeling as well."

- FOCUS Spouse



BUILDING A FAMILY STORY



FOCUS FAQs

- > We've been through reintegration and deployment before. How can FOCUS help us now?
Families are always changing and require new skills for each transition experience. FOCUS can help your family build strength and confidence to thrive in any situation.
- > I think I have a pretty good idea of how my children feel about military life. How can FOCUS help me understand their concerns and better prepare them for changes?
Sometimes children have a hard time telling their parents about their worries. FOCUS teaches your kids how to talk to you about their concerns and shows you helpful ways to respond, which can make kids less likely to have problems at home or in school.
- > My spouse seems different since he/she returned. How can FOCUS help us come together as a family to support each other?
Service members returning from deployment might find it hard to adjust to being home again. They may be dealing with the effects of stress or physical injuries, or they may feel distant after missing important family events. FOCUS teaches your family how to talk about your experiences and suggests activities that can help you and your kids reconnect.

FOCUS PROGRAM
 BLDG.2013B, Pendleton & 3rd.
 RM.331
 JBLM-MAIN WA 98433
 (253)966-6390
 JBLM@focusproject.org

Come see us today.

FOCUS offers a wide range of services, including:

- Family Resiliency Training
- Skill building groups
- Workshops
- Consulting services

We work with all types of families, including couples, recovering warriors and families with children ages 3-18.

Let FOCUS show you how to make your family a stronger family.

focusproject.org

Don't just get by. Get stronger.

Millions of service members and their loved ones face the challenges that often come with a parent's military service: transitions, reintegration, deployment, illness and injury.

These stressors mean many military couples and families go through a series of emotional ups and downs that affect parents, kids and extended family members. FOCUS not only helps military couples and families cope with these challenges, it also helps them come away from these experiences as stronger, more resilient family units. FOCUS has strengthened thousands of military families just like yours.

"In this community it is hard to make time for family, but this program showed us how to focus on every family member. It taught me more about my spouse than I knew before." - FOCUS Spouse

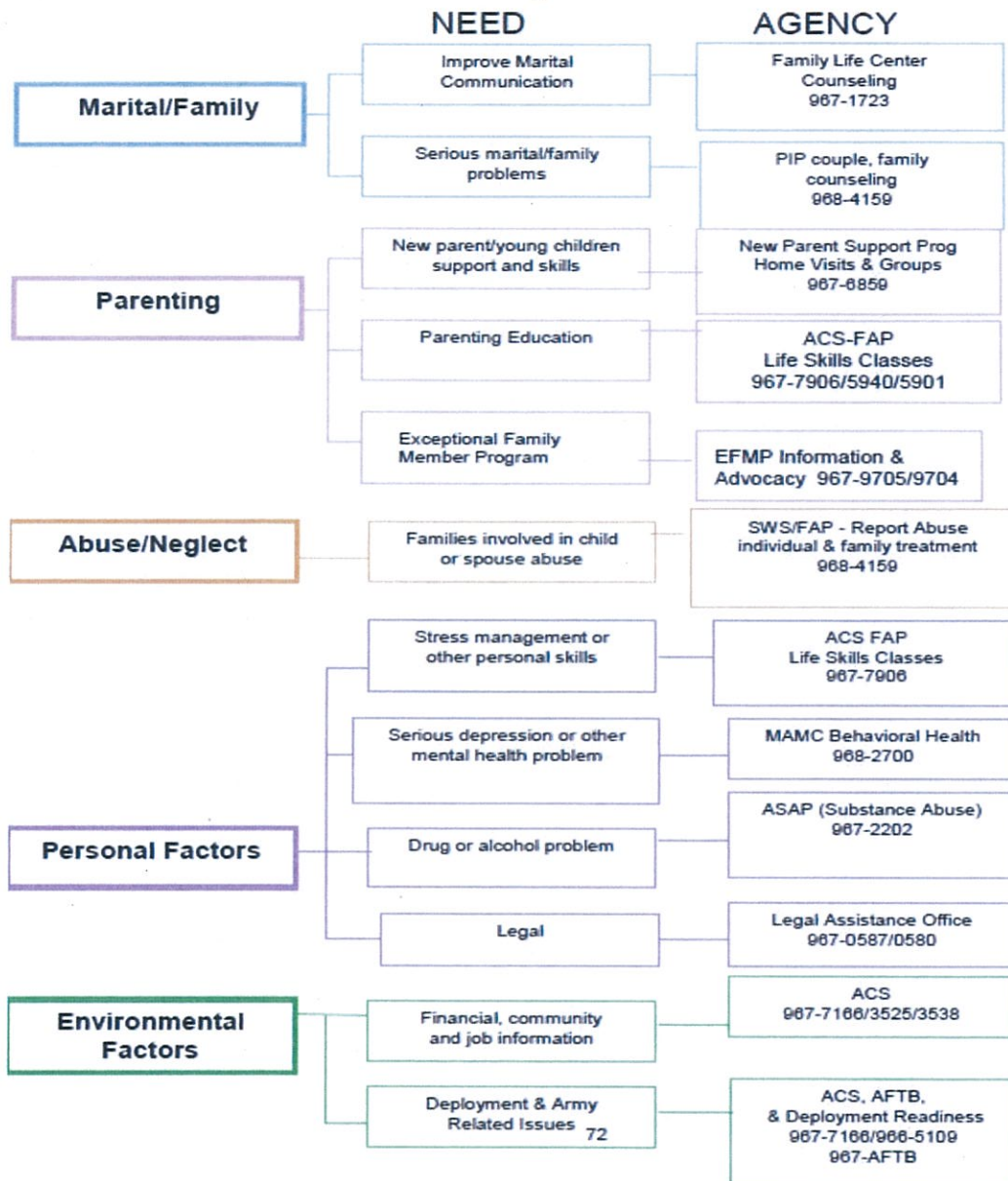


F★O★C★U★S

Strengthening the Home Base

Appendix 7

How to Find Help You Need at JBLM



JBLM Family Readiness Center. (2011). *US Army Family Readiness Group Leader's Handbook*. Permission from Lori Parker, JBLM Volunteer Corps Program Manager on February 11th, 2014. *JBLM* Available from: <http://www.jblmmwr.com/pdf/acs/family%20resource%20ctr/FRG%20Leaders%20Guide.pdf>

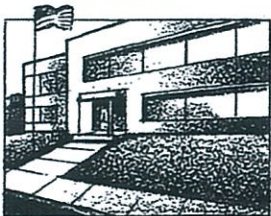
HURRICANE • FLASH FLOOD • FIRE • HAZARDOUS MATERIALS SPILL • EARTHQUAKE • TORNADO • WINTER STORM

Your Family Disaster Plan

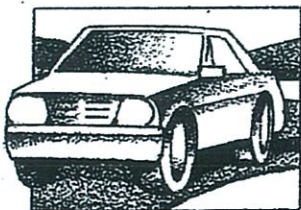
Where will your family be when disaster strikes? They could be anywhere —



at work



at school



or in the car.

How will you find each other? Will you know if your children are safe?

Disaster can strike quickly and without warning. It can force you to evacuate your neighborhood or confine you to your home. What would you do if basic services—water, gas, electricity or telephones—were cut off? Local officials and relief workers will be on the scene after a disaster, but they cannot reach everyone right away.

Families can—and do—cope with disaster by preparing in advance and working together as a team. Follow the steps listed in this brochure to create your family’s disaster plan. Knowing what to do is your best protection and your responsibility.



Safe in the Sound

Appendix 8

3

Complete This Checklist

- Post emergency telephone numbers by phones (fire, police, ambulance, etc.).
- Teach children how and when to call 911 or your local Emergency Medical Services number for emergency help.
- Show each family member how and when to turn off the water, gas and electricity at the main switches.
- Check if you have adequate insurance coverage.
- Teach each family member how to use the fire extinguisher (ABC type), and show them where it's kept.
- Install smoke detectors on each level of your home, especially near bedrooms.
- Conduct a home hazard hunt.
- Stock emergency supplies and assemble a Disaster Supplies Kit.
- Take a Red Cross first aid and CPR class.
- Determine the best escape routes from your home. Find two ways out of each room.
- Find the safe spots in your home for each type of disaster.

4

Practice and Maintain Your Plan

- Quiz your kids every six months so they remember what to do.
 - Conduct fire and emergency evacuation drills.
 - Replace stored water every three months and stored food every six months.
 - Test and recharge your fire extinguisher(s) according to manufacturer's instructions.
 - Test your smoke detectors monthly and change the batteries at least once a year.
- | | | | |
|------------|------------------|-------------------------------|-------------------------------|
| Year _____ | Drill Date _____ | Jan. <input type="checkbox"/> | July <input type="checkbox"/> |
| _____ | _____ | Feb. <input type="checkbox"/> | Aug. <input type="checkbox"/> |
| _____ | _____ | Mar. <input type="checkbox"/> | Sep. <input type="checkbox"/> |
| | | Apr. <input type="checkbox"/> | Oct. <input type="checkbox"/> |
| | | May <input type="checkbox"/> | Nov. <input type="checkbox"/> |
| | | June <input type="checkbox"/> | Dec. <input type="checkbox"/> |
- Change batteries in _____ (month) each year.

HOME HAZARD HUNT

During a disaster, ordinary objects in your home can cause injury or damage. Anything that can move, fall, break or cause a fire is a home hazard. For example, a hot water heater or a bookshelf can fall. Inspect your home at least once a year and fix potential hazards.

Contact your local fire department to learn about home fire hazards.



EVACUATION

Evacuate immediately if told to do so:

- Listen to your battery-powered radio and follow the instructions of local emergency officials.
- Wear protective clothing and sturdy shoes.
- Take your Disaster Supplies Kit.
- Lock your home.
- Use travel routes specified by local authorities — don't use shortcuts because certain areas may be impassable or dangerous.

If you're sure you have time:

- Shut off water, gas and electricity before leaving, if instructed to do so.
- Post a note telling others when you left and where you are going.
- Make arrangements for your pets.

NEIGHBORS HELPING NEIGHBORS

Working with neighbors can save lives and property. Meet with your neighbors to plan how the neighborhood could work together after a disaster until help arrives. If you're a member of a neighborhood organization, such as a home association or crime watch group, introduce disaster preparedness as a new activity. Know your neighbors' special skills (e.g., medical, technical) and consider how you could help neighbors who have special needs, such as disabled and elderly persons. Make plans for child care in case parents can't get home.

Appendix 8

IF DISASTER STRIKES

If disaster strikes

Remain calm and patient. Put your plan into action.

Check for injuries

Give first aid and get help for seriously injured people.

Listen to your battery powered radio for news and instructions

Evacuate, if advised to do so. Wear protective clothing and sturdy shoes.

Check for damage in your home...

- Use flashlights — do not light matches or turn on electrical switches, if you suspect damage.
- Check for fires, fire hazards and other household hazards.
- Sniff for gas leaks, starting at the water heater. If you smell gas or suspect a leak, turn off the main gas valve, open windows, and get everyone outside quickly.
- Shut off any other damaged utilities.
- Clean up spilled medicines,

bleaches, gasoline and other flammable liquids immediately.

Remember to...

- Confine or secure your pets.
- Call your family contact—do not use the telephone again unless it is a life-threatening emergency.
- Check on your neighbors, especially elderly or disabled persons.
- Make sure you have an adequate water supply in case service is cut off.
- Stay away from downed power lines.

The Federal Emergency Management Agency's Community and Family Preparedness Program and the American Red Cross Community Disaster Education Program are nationwide efforts to help people prepare for disasters of all types. For more information, please contact your local emergency management office and American Red Cross chapter.

FEMA's Web site: fema.gov

American Red Cross Web site: safeinthesound.org



American Red Cross

Safe in the Sound

For more information about disaster preparedness, visit us online at

safeinthesound.org

Click on "Contact us" to find your closest Red Cross chapter.

King, Kitsap & North Mason Counties: Seattle 206-323-2345 / Bremerton 360-377-3761

Mt. Rainier Chapter: 253-474-0400

Olympic Peninsula Chapter: 360-457-7933

Appendix 8



American Red Cross

Call **877-272-7337** 24/7, Toll-Free Nationwide

To Send a Red Cross Message

Send a message when there is a

- ◆ Death or Serious Illness of Immediate Family*
- ◆ Birth Announcement
- ◆ After Hour Financial Need

** "Immediate family" includes the Service Member's & the immediate family of their spouse*

Parents ★ Grandparents ★ Siblings ★ Spouse ★ Child ★ Last Living Relative ★ Person Standing in Place of Parent

Exceptions may be made for a Fiancé, Domestic Partner or a Girlfriend/Boyfriend who can provide the same degree of information about the service member as a spouse. Person Standing in Place of Parent should be documented with the S-1 prior to the event.

Information you will need to provide to the caseworker

The Service Members...

- Full Name
- Date of Birth
- Social Security Number
- Branch, Rank, Unit & Deployed Address

A Verification Source ...

For Example: the name and phone number of a doctor, funeral home director, or social worker.

Red Cross Messages must be verified in order to be sent. An exception may be made if a service member is unaware of the emergency and there are no other means of communication available for the family to reach the service member.

Please Note...

The patient or Medical Power of Attorney will need to give the doctor permission to release medical records to the Red Cross prior to verification.

Important information to know

- ◆ Anyone can initiate a Red Cross message on behalf of a service member's family, including the service member, doctor or friend.
- ◆ Once the caseworker is given the required information listed above, they will verify the event with the verification source.
- ◆ If the verified emergency warrants an emergency message, the message will then be composed and delivered to the command.
- ◆ Command will make the service member aware of the event. The service member may choose to ask command for emergency leave.
- ◆ Red Cross messages provide command with timely, accurate facts to consider and does not guarantee emergency leave. Emergency Leave is granted at the sole discretion of the command and counts against regular leave.
- ◆ Due to difficulties with verification in foreign lands, Red Cross messages are rarely sent for emergencies affecting family outside the United States, its territories or the handful of cooperating nations. The caseworker at **877-272-7337** can inform you of the cooperating nations during the time of your emergency.

Appendix 8



EMERGENCY CONTACTS

Stay connected to your loved ones when it matters most

Home: _____

Work: _____

Wireless: _____

 American Red Cross  PSE **PUGET SOUND ENERGY**
The Energy To Do Great Things

Out of State Contact: _____

School / Daycare: _____

Family Meeting Place(s): _____

Poison Control: 1-800-222-1222

Download free disaster preparedness apps available for iPhone and Android users.
Search "American Red Cross" at the Apple App or Google Play Stores for:
• Earthquake App • Hurricane App • First Aid App • Shelter Finder App

PUGET SOUND ENERGY

Appendix 9

**JBLM Behavioral Health Services
Resource List**

VERSION 4.1 25 FEBRUARY 2014

<p>Name of Agency: Department of Behavioral Health Service Line: 2/2 SBCT Embedded Behavioral Health (EBH) 1 Location: Building R-1880, Lewis North Phone: 253-967-1481 Service: Serving soldiers from 2/2 SBCT Outpatient BH assessment and treatment</p>	<p>Name of Agency: Department of Behavioral Health Service Line: 3/2 SBCT Embedded Behavioral Health (EBH) 2 Location: Building R-3742, Lewis Main Phone: 253-966-3640 Service: Serving soldiers from 3/2 SBCT Outpatient BH assessment and treatment</p>
<p>Name of Agency: Department of Behavioral Health Service Line: 4/2 SBCT Embedded Behavioral Health (EBH) 3 Location: Building R-3150, Lewis Main Phone: 253-967-7337 Service: Serving soldiers from 4/2 SBCT Outpatient BH assessment and treatment</p>	<p>Name of Agency: Department of Behavioral Health Service Line: 17th FIB/555 ENG BDE Embedded Beh Health (EBH) 4 Location: Building 13815, Lewis North Phone: 253-967-8283 Service: Serving soldiers from 17th FIB / 555th ENG BDE Outpatient BH assessment and treatment</p>
<p>Name of Agency: Department of Behavioral Health Service Line: SOF Embedded Behavioral Health (EBH) 5 Location: Building 9930A, Madigan Annex Phone: FOR 1st SFG(A) 253-968-6379 Phone: FOR 4/160th SOAR and 2/75th RGR REG 253-968-6379 Service: Serving Soldiers from the 1st SFG(A), 4/160th SOAR and 2/75th RGR Outpatient BH assessment and treatment</p>	<p>Name of Agency: Department of Behavioral Health Service Line: Denali Behavioral Health Home (BHH) 6 Location: Building 9920A, Madigan Annex Phone: 253-968-4851 Service: Serving Soldiers from 1 CORPS HQ, 16th CAB, 201st BfSB 62nd MED BDE, 42nd MP BDE, 35th SIG BDE and 6th CID Outpatient BH assessment and treatment</p>
<p>Name of Agency: Department of Behavioral Health Service Line: Yukon Behavioral Health Home (BHH) 7 Location: Building 9924B, Madigan Annex Phone: 253-968-6442 Service: Serving Soldiers from 7th ID HQ, 593rd ESC, 31st AD, 71st OD 48th CM, 189th IN BDE, 191st IN BDE, Madigan Troop Bn Outpatient BH assessment and treatment</p>	<p>Name of Agency: Department of Behavioral Health Service Line: McChord Behavioral Health Home (BHH) Location: Building 690 Barnes Blvd, McChord Field Phone: 253-982-3684/3685 Service: Serving Airmen from the 62nd Airlift Wing & McChord Field</p>
<p>Name of Agency: Department of Behavioral Health Service Line: Internal Behavioral Health Consultants Location: Community & Soldier Centered Medical Homes throughout the JBLM community Phone: Madigan Appointment Line 800-404-4506 Service: Serving Active Duty and their family members to provide brief assessment and Behavioral Health services in collaboration with the patient's primary health care manager (PCM)</p>	<p>Name of Agency: Department of Behavioral Health Service Line: Child and Family Assistance Center 10 Location: Madigan Annex, Building 9923A Phone: 253-968-4843 Service: Serving children, adolescents and adult family members of AD to provide individual, marriage and/or family therapy</p>
<p>Name of Agency: Department of Behavioral Health Service Line: Glacier Clinic 11 Location: Madigan Hospital Medical Mall Phone: 253-968-5031 Service: Serving AD, FM, and Retirees to provide specialty BH services including Neuropsychology, Health Psychology</p>	<p>Name of Agency: Department of Behavioral Health Service Line: School Behavioral Health 12 Location: JBLM elementary school locations Phone: 253-477-3731 Service: Serving Military school aged dependents to provide Behavioral Health services at school locations</p>
<p>Name of Agency: Department of Behavioral Health Service Line: Inpatient Social Work 13 Location: Madigan Hospital Tower, 7th Floor Phone: 253-968-2303 Service: Serving Active Duty and DOD beneficiaries to provide discharge planning, crisis intervention, bereavement and palliative care support, brief alcohol assessment, psychosocial and behavioral health consultation</p>	<p>Name of Agency: Department of Behavioral Health Service Line: Sequoia Clinic 14 Location: Madigan Hospital (near Hospital Tower) Phone: 253-968-4495 Service: Serving AD and adult DOD Beneficiaries to provide victim advocacy and enhanced assess for specialized trauma treatment.</p>



Family Readiness Groups (FRGs): Are they all that they can be?

McBride 70

Appendix 9

<p>Name of Agency: Department of Behavioral Health Service Line: Family Advocacy Program Location: Madigan Annex, Building 9905 Phone: 253-968-4159 Service: Serving Active Duty and their family members who are identified as high risk for Domestic Violence. Provide individual, marital, family and group therapy</p>	<p>Name of Agency: Service Line: Location: Phone: Service:</p>
<p>Name of Agency: Developmental Behavioral Pediatrics Division Service Line: Pediatric Service Location: Madigan Medical Mall - Developmental Peds Clinic Phone: 253-968-2310 Service: Behavioral Health assessments of 0-3 year old children. Short term behavioral health intervention. Medical assessment of all children with special health care needs</p>	<p>Name of Agency: Service Line: Location: Phone: Service:</p>
<p>Name of Agency: ACS - Family Advocacy Program Service Line: New Parent Support Program Location: Building 2015A, Room 408, 409 Phone: 253-967-5904 Service: Home visits to parents with children 4-8 years of age <i>Running Classes</i></p>	<p>Name of Agency: ACS - Family Advocacy Program Service Line: Victim Advocacy Program Location: Building 2013B Phone: 253-966-SAFE (7253) Service: Provide assistance to DV victims</p>
<p>Name of Agency: Chaplain Family Life Center Service Line: JBLM Chaplaincy Location: Four Chaplains Memorial Chapel, Bldg 9120 Phone: 253-967-1723 Service: Individual and marriage counseling, deployment related counseling, parenting, divorce and spiritual issues.</p>	<p>Name of Agency: ACS - Family Advocacy Program Service Line: Life Skills Program & Classes Location: Building 2013B Phone: 967-5904 Service: Life Skills Classes available to include Anger Management, Court approved Divorce Class, and many more. <i>Child Abuse annual trainings, Cdr Desk Site briefings</i></p>
<p>Name of Agency: CSF-Performance and Resilience Enhancement Prog Service Line: Location: 1240 Railroad Avenue, BCTC, MS 31, Room 118A, JBLM Phone: (253) 968-7642 Service: Mental Skills Strength Education & Training, Collective and Individual</p>	<p>Name of Agency: Military Family Life Consultants Service Line: Behavioral Health for Soldiers at Unit Level Location: Throughout JBLM Phone: Fort Lewis 253-329-6632, McChord 253-329-6372 Service: Short Term Behavioral Health Intervention at unit level</p>
<p>Name of Agency: FOCUS (Families Overcoming Under Stress) Service Line: Family Communication Skill Building Location: Bldg 2013B, Rm 331 Phone: (253) 966-6390 Service: Resiliency training for military families, children and couples; skill building groups; workshops and consultations</p>	<p>Name of Agency: Military Family Life Consultants Service Line: Behavioral Health for Child & Adult Location: Throughout JBLM Phone: Fort Lewis 253-329-6632, McChord 253-329-6372 Service: Short Term Behavioral Health for child and adult</p>
<p>Name of Agency: Army Substance Abuse Program (ASAP) Subservice: McChord Field Employee Assistance Program (EAP) Location: 555 Barnes Blvd, McChord Phone: 253-982-5815 Service: Free, confidential info, referral and counseling services for DACs, Retirees, & Family Members</p>	<p>Name of Agency: Army Substance Abuse Program (ASAP) Subservice: Suicide Prevention Program Location: Building 2008, Room B019 Phone: 253-966-6693 Service: Suicide Prevention and intervention training, unit briefings, unit consultations, and resources.</p>
<p>Name of Agency: Army Substance Abuse Program (ASAP) Subservice: Substance Abuse Rehabilitation Department Location: Building 2008B, Room 303 Phone: 253-967-2202/253-968-6765 Service: Command involved drug and alcohol assessment, education, treatment, and aftercare</p>	<p>Name of Agency: Army Substance Abuse Program (ASAP) Subservice: Confidential Alcohol Services (CONTREAT) Location: Building 2008B, Room 322 Phone: 253-966-4261 253-477-3644 Service: Confidential self-referral alcohol assessment, education, treatment, and aftercare</p>
<p>Name of Agency: Army Substance Abuse Program (ASAP) Subservice: Employee Assistance Program (EAP) Location: Building 2008B, Room B110 Phone: 253-967-1412 Service: Free, confidential info, referral and counseling services for DACs, Retirees, & Family Members</p>	<p>Name of Agency: Army Substance Abuse Program (ASAP) Subservice: Outreach Prevention Services Location: Building 2008, Room B003 Phone: 253-477-3810/3813/4852 Service: Alcohol and Drug Abuse Prevention classes, unit outreach, Prime For Life, campaign materials</p>

Appendix 10






DOMESTIC VIOLENCE REPORTING OPTIONS

<p><u>RESTRICTED Report</u></p> <ul style="list-style-type: none"> * CONFIDENTIAL * You may ONLY speak to: <ul style="list-style-type: none"> -Victim Advocate -Family Advocacy PM -Healthcare Provider • Chaplain has privilege • May be changed to Unrestricted at any time • Does NOT trigger an investigation or the Case Review Committee (CRC) 	<p><u>UNRESTRICTED Report</u></p> <ul style="list-style-type: none"> *You may speak to: <ul style="list-style-type: none"> •RPOC: JBLM Police •911 •Chain of Command •Victim Advocate •Healthcare Provider •Family Advocacy PM *May NOT be changed to Restricted *Triggers an investigation/CRC Case
---	--

Both reporting options provide you access to:
Advocacy services, medical care, and counseling.

JBLM 24/7 Safe-line: 253-966-SAFE/7233

Advocacy Service

- Safety planning
- Referral to military and civilian shelters
- Notify victim of their rights
- Provide emotional support to victim
- Liaison between Commander and victim
- 24 hour crisis intervention on SAFELINE (966-SAFE)
- Counseling/legal referral to military and civilian resources
- Assist victim in applying for civilian protection orders
- Provide benefit information available to victims of domestic violence
- Help victim apply for emergency financial assistance
- Assist victim with relocation through the military
- Assist victim with obtaining transitional compensation

Advocacy Services are for **ADULT** Victims of Domestic Violence

**SAFETY ISSUE: WHEN WORKING WITH AN ADVOCATE ON A CASE IN YOUR UNIT,
PLEASE PROTECT THE ADVOCATES IDENTITY!**

Appendix 11

MILITARY POWER AND CONTROL WHEEL



Produced and distributed by:

Developed from:
 Domestic Abuse Intervention Project
 202 East Superior Street
 Duluth, MN 55802
 218.722.4134



NATIONAL CENTER
 on Domestic and Sexual Violence
training • consulting • advocacy
 4612 Shoal Creek Blvd. • Austin, Texas 78756
 512.407.9020 (phone and fax) • www.ncdsv.org

National Center on Domestic and Sexual Violence (2014). Available from:
<http://www.ncdsv.org/images/MilitarycontrolwheelNOSHADING.pdf>

Appendix 12

Quick Reference for Fundraising



	Within Unit	Other Peoples Money	Armed Forces Day or Freedom Fest Idea	Sold in Advance	Set Price	Donation only or Suggested Price	Food Handler Course Required ²	Sold by Volunteer	Sold by Off-Duty Soldier	Costs Money In Advance	No prior Expenses /uses Donated Items	Notes/Description
Unit t-shirts	X			X	X			X	X		X	Designed in advance and sold based on cost to create, then ordered
Unit ornaments	X			X	X			X	X		X	Must be coordinated with AAFES so they have the first right of refusal.
Unit calendar	X			X	X			X	X		X	If AAFES cannot provide item, then you may look to outside sources
Unit Cookbook	X			X	X			X	X		X	AAFES POC: 253-964-5122
Unit Wisibands	X			X	X			X	X		X	(possible set up fee or deposit for ordering items)
Unit Signs	X			X	X			X	X		X	
Golf Scramble	X	X ⁴			X			X	X		X	If unit event (not FRG) may coordinate with MWR for corporate sponsorship.
Bowling Tournament	X	X ⁴			X			X	X	X		If unit event (not FRG) may coordinate with MWR for corporate sponsorship.
Sports Tournament	X	X ⁴			X			X	X		X	If unit event (not FRG) may coordinate with MWR for corporate sponsorship.
Fun Run/Walk	X	X ⁴			X			X	X		X	If unit event (not FRG) may coordinate with MWR for corporate sponsorship.
Dunk Tank	X		X		X	X		X	X	X		Great unit fundraiser.
Pet Contest	X	X		X	X			X	X		X	Cubest Pet, Best Costume, Best Trick, etc. Certificate/award, with the money collected for entering the contest going to FRG funds.
Penny Wars	X					X		X	X		X	Containers set up at each battery, pennies are collected and who has the most wins certificate and bragging rights. Pennies go to each FRG funds.
Garage Sale	X	X			X	X		X	X		X	Volunteers/Soldiers donate items to be sold with profits going to the FRG funds. May be held at quarters on Fort Lewis to collect OPM.
Silent Auction	X				X			X	X		X	Items are donated, tables set up and for each item a paper with a starting price. People then write what they will pay and the highest bid wins item.
Bake Sales	X	X ³	X			X	X	X	X		X	Volunteers donate baked goods to be sold.
Gift Wrapping	X	X ⁵				X		X	X	X		Must have supplies and paper in advance, wrap gifts for holidays
Opportunity drawing	X			X		X		X	X ¹		X	Can use funds raised by drawing to purchase item, such as uniform. Item can be purchased with current FRG Funds. Item may be donated.
Portluck Lunch	X				X	X	X	X	X		X	Can bring in portluck to unit, they pay for plate of food during lunch time/etc. Food handler course is needed because the food is being sold.

¹ Soldier selling must be of lowest rank or position

² Food Handler Certificate can be obtained by taking a class through Environmental Health Services at 968-4113/4331

³ P/X/Commissary/Minimal - Arranged through the Family Resource Center at 967-9496, call for dates then submit request in writing

⁴ Must be coordinated with MWR special events person in order to get sponsorship for a Unit Fundraiser. POC Special Events 967-5776/6772

⁵ ESC offers a limited number of slots for FRGs to participate by lottery. For more info contact ESC.

** A food permit is required through Environmental Health for all food sales. Approved permit must be visible at sale location. Contact Environmental Health 968-4113/4331

Appendix 12

Fundraiser Planning Checklist

Initial Planning

- Decide on a financial goal
- Decide on a product/service (any non-food item must be submitted through AAFES for first right of refusal, 964-5122)
- Establish a POC/Committee(s)
- Formulate a plan
 - Identify key tasks
 - Choose a product vendor (if applicable – non food items must utilize AAFES unless they cannot provide the product – get the refusal in writing – 964-5122)
 - Recruit volunteers
 - Identify required supplies
 - Formulate a budget
 - Formulate schedules (if applicable)
- Choose a date
 - Primary date
 - Alternate date
 - Check Unit Training Calendar
 - Check Installation events calendar
 - Check local schools calendars
- Obtain Command approval – fill out Request to Conduct a Fundraiser
- Submit Fundraising request to Family Resource Center (for bake sales in the Exchanges/Mini Mall/Commissaries) – point of contact Linda Daniel, 967-9496
- Request Food Permit through Environmental Health, Grant.Brenneka@amedd.army.mil (for food/bake sales only – permit must be visible during the food/bake sales)
- Choose a venue/location
 - Coordinate with event point of contact (for installation-wide only, i.e., Armed Forces Day, Freedom Fest)
 - Coordinate with unit point of contact (if fundraiser is located in unit area)
- Market Event
 - Place information in FRG Newsletter month prior and month of the event
 - Include on monthly FRG Meeting Agenda
 - Communicate event at Command & Staff
 - Make flyers/posters
 - Post in unit area

Pre Event

- Check venue to understand layout and any special considerations
- Gather supplies
- Confirm volunteer's attendance (volunteers must have JBLM Food Handlers Certification for food/bake sales)

Appendix 12

_____ Review plan

Event

- _____ Arrive early for set-up
 - _____ Food supplies
 - _____ Service supplies (plates, napkins, trash bags, buckets, hoses, hair nets, hats, gloves, etc.)
 - _____ Cookware (if applicable)
 - _____ Tables/chairs (if required)
 - _____ Electronics (power strip, extension cords, CD player, etc.)
 - _____ Cash box/change
 - _____ Administrative items (approvals, food permit, volunteer schedule, contact numbers)
- _____ Hang marketing tools
- _____ Present a positive attitude
- _____ Communicate goal and milestones to volunteers/customers
- _____ Keep notes of success/challenges for AAR (after action report)
- _____ Clean up
- _____ Remove marketing materials

Post Event

- _____ Deposit funds
- _____ Communicate event outcome to FRG/Command
- _____ Compile and share AAR
- _____ Recognize volunteers

Appendix 13

PROFESSIONAL QUALITY OF LIFE SCALE (PROQOL)

COMPASSION SATISFACTION AND COMPASSION FATIGUE

(PROQOL) VERSION 5 (2009)

When you [help] people you have direct contact with their lives. As you may have found, your compassion for those you [help] can affect you in positive and negative ways. Below are some questions about your experiences, both positive and negative, as a [helper]. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the last 30 days.

1=Never	2=Rarely	3=Sometimes	4=Often	5=Very Often
_____	1.	I am happy.		
_____	2.	I am preoccupied with more than one person I [help].		
_____	3.	I get satisfaction from being able to [help] people.		
_____	4.	I feel connected to others.		
_____	5.	I jump or am startled by unexpected sounds.		
_____	6.	I feel invigorated after working with those I [help].		
_____	7.	I find it difficult to separate my personal life from my life as a [helper].		
_____	8.	I am not as productive at work because I am losing sleep over traumatic experiences of a person I [help].		
_____	9.	I think that I might have been affected by the traumatic stress of those I [help].		
_____	10.	I feel trapped by my job as a [helper].		
_____	11.	Because of my [helping], I have felt "on edge" about various things.		
_____	12.	I like my work as a [helper].		
_____	13.	I feel depressed because of the traumatic experiences of the people I [help].		
_____	14.	I feel as though I am experiencing the trauma of someone I have [helped].		
_____	15.	I have beliefs that sustain me.		
_____	16.	I am pleased with how I am able to keep up with [helping] techniques and protocols.		
_____	17.	I am the person I always wanted to be.		
_____	18.	My work makes me feel satisfied.		
_____	19.	I feel worn out because of my work as a [helper].		
_____	20.	I have happy thoughts and feelings about those I [help] and how I could help them.		
_____	21.	I feel overwhelmed because my case [work] load seems endless.		
_____	22.	I believe I can make a difference through my work.		
_____	23.	I avoid certain activities or situations because they remind me of frightening experiences of the people I [help].		
_____	24.	I am proud of what I can do to [help].		
_____	25.	As a result of my [helping], I have intrusive, frightening thoughts.		
_____	26.	I feel "bogged down" by the system.		
_____	27.	I have thoughts that I am a "success" as a [helper].		
_____	28.	I can't recall important parts of my work with trauma victims.		
_____	29.	I am a very caring person.		
_____	30.	I am happy that I chose to do this work.		

Appendix 13

YOUR SCORES ON THE PROQOL: PROFESSIONAL QUALITY OF LIFE SCREENING

Based on your responses, place your personal scores below. If you have any concerns, you should discuss them with a physical or mental health care professional.

Compassion Satisfaction _____

Compassion satisfaction is about the pleasure you derive from being able to do your work well. For example, you may feel like it is a pleasure to help others through your work. You may feel positively about your colleagues or your ability to contribute to the work setting or even the greater good of society. Higher scores on this scale represent a greater satisfaction related to your ability to be an effective caregiver in your job.

The average score is 50 (SD 10; alpha scale reliability .88). About 25% of people score higher than 57 and about 25% of people score below 43. If you are in the higher range, you probably derive a good deal of professional satisfaction from your position. If your scores are below 40, you may either find problems with your job, or there may be some other reason—for example, you might derive your satisfaction from activities other than your job.

Burnout _____

Most people have an intuitive idea of what burnout is. From the research perspective, burnout is one of the elements of Compassion Fatigue (CF). It is associated with feelings of hopelessness and difficulties in dealing with work or in doing your job effectively. These negative feelings usually have a gradual onset. They can reflect the feeling that your efforts make no difference, or they can be associated with a very high workload or a non-supportive work environment. Higher scores on this scale mean that you are at higher risk for burnout.

The average score on the burnout scale is 50 (SD 10; alpha scale reliability .75). About 25% of people score above 57 and about 25% of people score below 43. If your score is below 43, this probably reflects positive feelings about your ability to be effective in your work. If your score above 57 you may wish to think about what at work makes you feel like you are not effective in your position. Your score may reflect your mood; perhaps you were having a “bad day” or are in need of some time off. If the high score persists or if it is reflective of other worries, it may be a cause for concern.

Secondary Traumatic Stress _____

The second component of Compassion Fatigue (CF) is secondary traumatic stress (STS). It is about your work related, secondary exposure to extremely or traumatically stressful events. Developing problems due to exposure to other's trauma is somewhat rare but does happen to many people who care for those who have experienced extremely or traumatically stressful events. For example, you may repeatedly hear stories about the traumatic things that happen to other people, commonly called Vicarious Traumatization. If your work puts you directly in the path of danger, for example, field work in a war or area of civil violence, this is not secondary exposure; your exposure is primary. However, if you are exposed to others' traumatic events as a result of your work, for example, as a therapist or an emergency worker, this is secondary exposure. The symptoms of STS are usually rapid in onset and associated with a particular event. They may include being afraid, having difficulty sleeping, having images of the upsetting event pop into your mind, or avoiding things that remind you of the event.

The average score on this scale is 50 (SD 10; alpha scale reliability .81). About 25% of people score below 43 and about 25% of people score above 57. If your score is above 57, you may want to take some time to think about what at work may be frightening to you or if there is some other reason for the elevated score. While higher scores do not mean that you do have a problem, they are an indication that you may want to examine how you feel about your work and your work environment. You may wish to discuss this with your supervisor, a colleague, or a health care professional.

Appendix 13

WHAT IS MY SCORE AND WHAT DOES IT MEAN?

In this section, you will score your test so you understand the interpretation for you. To find your score on each section, total the questions listed on the left and then find your score in the table on the right of the section.

Compassion Satisfaction Scale

Copy your rating on each of these questions on to this table and add them up. When you have added them up you can find your score on the table to the right.

3. _____
6. _____
12. _____
16. _____
18. _____
20. _____
22. _____
24. _____
27. _____
30. _____

Total: _____

The sum of my Compassion Satisfaction questions is	So My Score Equals	And my Compassion Satisfaction level is
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

Burnout Scale

On the burnout scale you will need to take an extra step. Starred items are "reverse scored." If you scored the item 1, write a 5 beside it. The reason we ask you to reverse the scores is because scientifically the measure works better when these questions are asked in a positive way though they can tell us more about their negative form. For example, question 1. "I am happy" tells us more about

- *1. _____ = _____
*4. _____ = _____
8. _____
10. _____
*15. _____ = _____
*17. _____ = _____
19. _____
21. _____
26. _____
*29. _____ = _____

Total: _____

The sum of my Burnout Questions is	So my score equals	And my Burnout level is
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

You Wrote	Change to	the effects of helping when you are not happy so you reverse the score
	5	
2	4	
3	3	
4	2	
5	1	

Secondary Traumatic Stress Scale

Just like you did on Compassion Satisfaction, copy your rating on each of these questions on to this table and add them up. When you have added them up you can find your score on the table to the right.

2. _____
5. _____
7. _____
9. _____
11. _____
13. _____
14. _____
23. _____
25. _____
28. _____

Total: _____

The sum of my Secondary Trauma questions is	So My Score Equals	And my Secondary Traumatic Stress level is
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

Appendix 14

Mindful Breathing

The primary goal of mindful breathing is simply a calm, non-judging awareness, allowing thoughts and feelings to come and go without getting caught up in them.




- ❖ Sit comfortably, with your eyes closed and your spine reasonably straight.
- ❖ Bring your attention to your breathing.
- ❖ Imagine that you have a balloon in your tummy. Every time you breathe in, the balloon inflates. Each time you breathe out, the balloon deflates. Notice the sensations in your abdomen as the balloon inflates and deflates. Your abdomen rising with the in-breath, and falling with the out-breath.
- ❖ Thoughts will come into your mind, and that's okay, because that's just what the human mind does. Simply notice those thoughts, then bring your attention back to your breathing.
- ❖ Likewise, you can notice sounds, physical feelings, and emotions, and again, just bring your attention back to your breathing.
- ❖ You don't have to follow those thoughts or feelings, don't judge yourself for having them, or analyse them in any way. It's okay for the thoughts to be there. Just notice those thoughts, and let them drift on by, bringing your attention back to your breathing.
- ❖ Whenever you notice that your attention has drifted off and is becoming caught up in thoughts or feelings, simply note that the attention has drifted, and then gently bring the attention back to your breathing.

It's okay and natural for thoughts to enter into your awareness, and for your attention to follow them. No matter how many times this happens, just keep bringing your attention back to your breathing.




Appendix 15



Family Advocacy Program
JOINT BASE LEWIS-MCCHORD

FAP FOR PARENTS
CLASS SCHEDULE
JAN - APR
2014
253-967-5901



FAMILY ADVOCACY SERVICES AVAILABLE (proudly serving all military branches, DoD Civilians, Retirees & their Families)

Prevention & Education Classes, including a variety of life skills classes to strengthen Family relationships using education, information and referral. Staffed with licensed Social Workers, Nurses & Social Service Professionals, our program includes the New Parent Support Program and Domestic Violence Victim Advocacy. Services are free! To register for a class or for more information, please call 253-967-5901.

P A R E N T I N G T E C H N I Q U E S

STRESS-FREE PARENTING 10:30 A.M. - 12 P.M.

2013 N. 3rd St. & Pendleton
Lewis Main, Room 201A

Jan. 6, 13, 27 & Feb. 3, 10, 24

1-2-3 MAGIC!
(discipline without yelling, screaming or spanking)

Escape Zone, McChord Field

Jan. 14, 16, 21, 23 9-11:30 A.M.
Mar. 18, 20, 25, 27 6-8:30 P.M.

SCREAM-FREE PARENTING 12-1:30 P.M.

2013 N. 3rd St. & Pendleton
Lewis Main, Room 102

Jan. 9, 16, 23, 30, Feb. 6, 13, 20, 27
Mar. 6, 13, 20, 27, Apr. 3, 10, 17, 24

J U S T F O R D A D S

DR. DAD 11:30 A.M. - 1:30 P.M.

Increases skills and confidence for new fathers, focusing on health and safety.

2013 N. 3rd St. & Pendleton
Lewis Main, Room 111

FEB. 6 & 13

24/7 DAD 10 A.M. - 12:30 P.M.

Whether you're a new, single, or seasoned father, be the best Dad you can be!

2013 N. 3rd St. & Pendleton
Lewis Main, Room 201

APR. 1, 3, 8 & 10

I N T E R A C T W I T H Y O U R C H I L D R E N

BABY PLAY GROUP

Raindrops & Rainbows
8197 American Lake Ave.
Lewis North

THURSDAYS 1-2:30 P.M.

PLAY MORNING

Raindrops & Rainbows
Lewis North 10-11 A.M.


Escape Zone
McChord Field 10:30-11:30 A.M.

FRIDAYS

INFANT MASSAGE

Raindrops & Rainbows
8197 American Lake Ave.
Lewis North

Jan. 7, 14 & 21 10-11:30 A.M.
Mar. 4, 11 & 18

For a complete list of JBLM AFCS Programs & Services visit: http://www.jblmmwr.com/army_comm_service.html or call 253-967-7166
www.facebook.com/JBLMACS  www.facebook.com/AirmanFamily

Appendix 15



Family Advocacy Program
JOINT BASE LEWIS-MCCHORD

**FAP FOR COUPLES
CLASS SCHEDULE
JAN - MAR
2014**
253-967-5901



FAMILY ADVOCACY SERVICES AVAILABLE (proudly serving all military branches, DoD Civilians, Retirees & their Families)

Prevention & Education Classes, including a variety of life skills classes to strengthen Family relationships using education, information and referral. Staffed with licensed Social Workers, Nurses & Social Service Professionals, our program includes the New Parent Support Program and Domestic Violence Victim Advocacy. Services are free! To register for a class or for more information, call 253-967-5901. *Registration required for all classes.*

F O R R E L A T I O N S H I P S

**HEALTHY RELATIONSHIPS/
COMMUNICATION**

Airmen & Family Readiness Ctr.
McChord Field

4th Friday every Month
11:30 A.M. - 12:30 P.M.

MARRIAGE CONCEPTS
Strengthen your marriage using scream-free principles

2013 N. 3rd St. & Pendleton
Lewis Main, Room 201

Jan. 9, 16, 23, 30, Feb. 6, 13, 20, 27
12-1:30 P.M.

A N G E R M A N A G E M E N T

FACT MEN 9 - 11:00 A.M.
Family Anger Control Training

2013 N. 3rd St. & Pendleton, Lewis Main, Rm 102

JAN. 6, 8, 13, 15, 22, 27, 29, FEB. 3
FEB. 5, 10, 12, 19, 24, 26, MAR. 3, 5
MAR. 10, 12, 19, 24, 26, 31, APR. 2, 7

FACT WOMEN 9 - 11:00 A.M.
Family Anger Control Training

2013 N. 3rd St. & Pendleton
Lewis Main, Rm 102

JAN. 7, 9, 14, 16, 21, 23, 28, 30
MAR. 4, 6, 11, 13, 18, 20, 25, 27

S E P A R A T I O N

**LETTING FLO DRIVE:
MANAGING ANGER & STRESS**

Airmen & Family Readiness Ctr.
McChord Field

2nd Friday every Month
11:30 A.M. - 12:30 P.M.

**CROSSROADS OF
PARENTING & DIVORCE**
WA State-approved & mandated class for divorcing parents

2013 N. 3rd St. & Pendleton, Lewis Main

**Call for class schedule & to register:
253-967-5901**

In the event of Domestic Violence, contact our 24/7 Safeline at 253-966-SAFE (7233)

For a complete list of JBLM AFCS Programs & Services visit: http://www.jblmmwr.com/army_comm_service.html or call 253-967-7166
www.facebook.com/JBLMACS  www.facebook.com/AirmanFamily

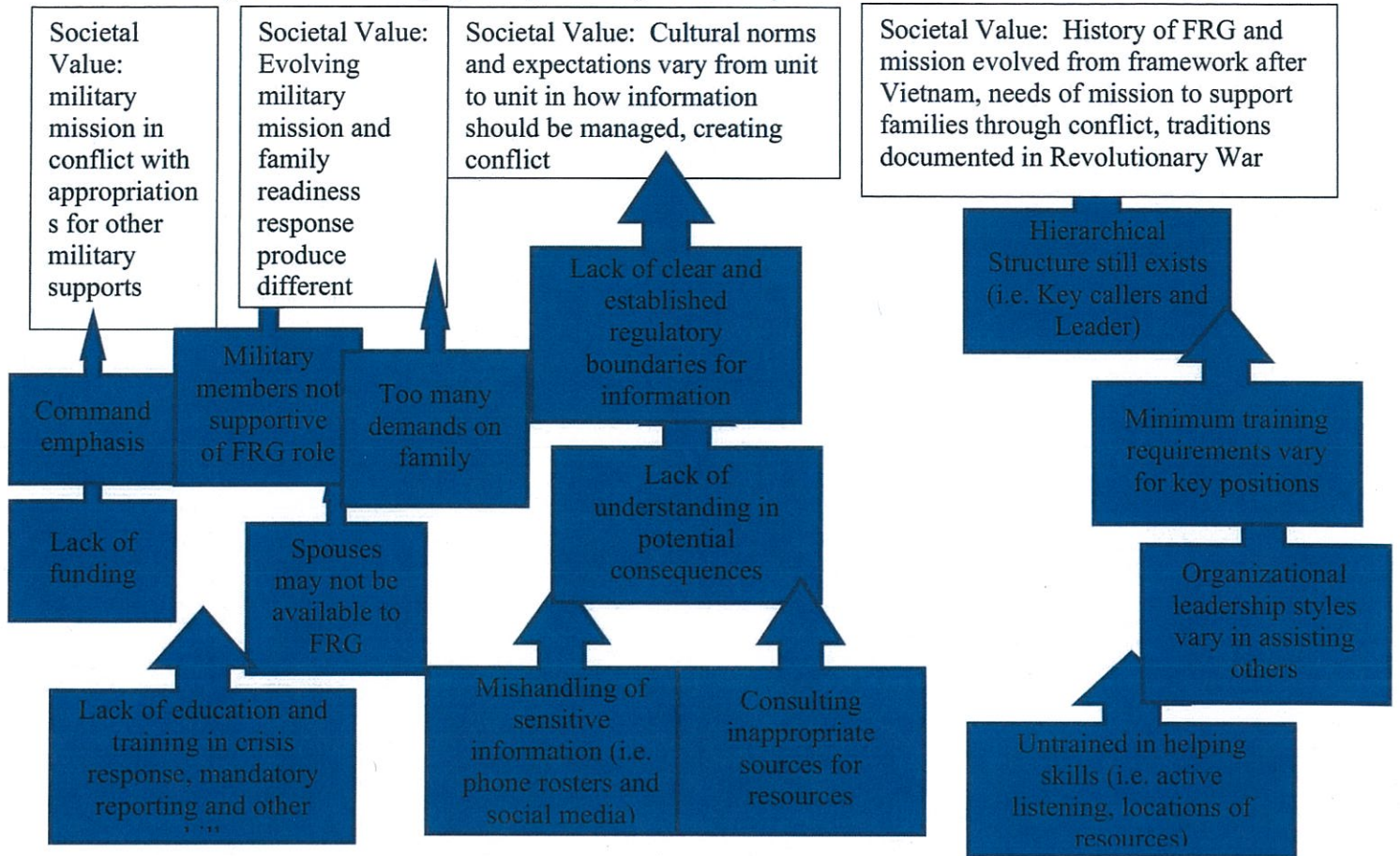


Intervention Planning Process

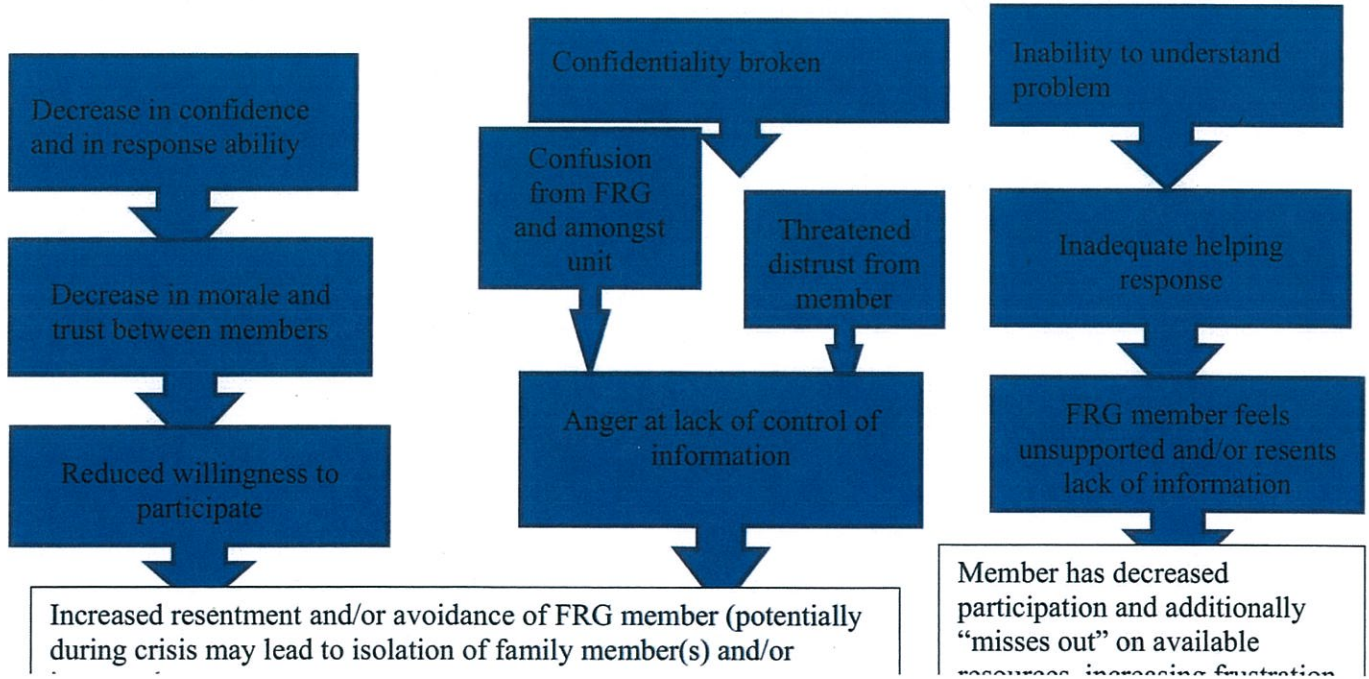
The following tools were used in the planning process as a blueprint to visually map the intervention. Careful thought as to what problem is identified led to the research intended to inform and develop a needs statement. This research and planning was all conducted prior to developing an intervention. All of the following works are prior submissions for review by a UWT Social Work professor, however, a disclaimer is that the following work was a process of annotating thought processes and research to be used solely for background and informational purposes only.

Family Readiness Groups (FRGs): Are they all that they can be?

McBride 83



FRG Problem statement: Army Family Readiness Group (FRG) volunteers experience barriers to assisting other members.

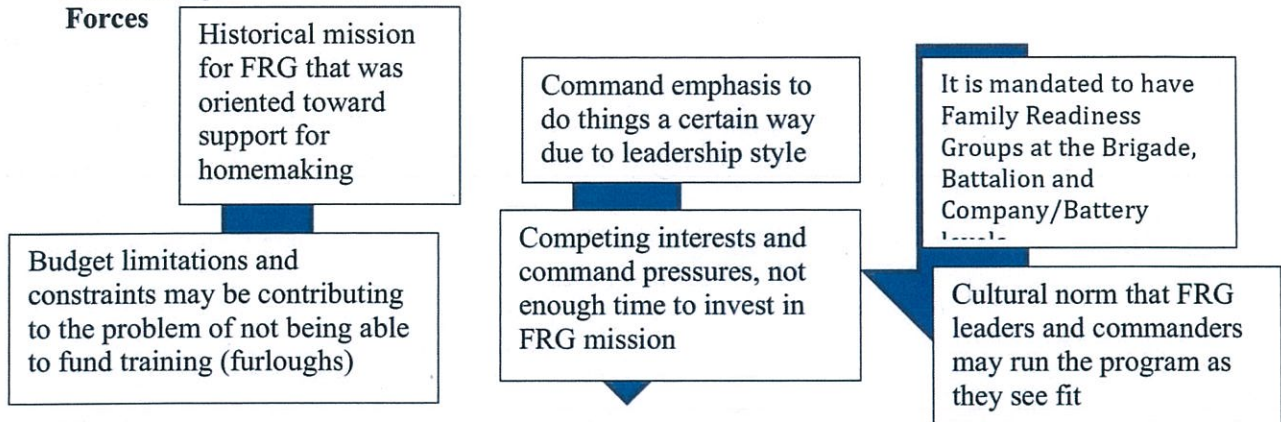


Force Field Analysis Guidelines

100% ----- (elimination of the problem)

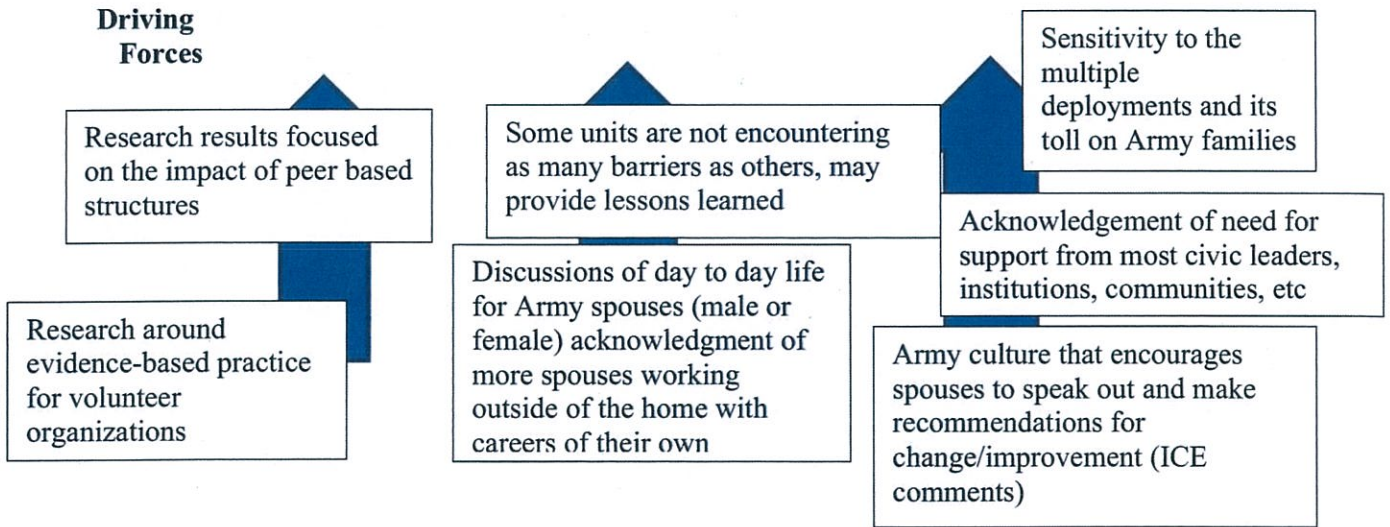
(In this space, list as many of the situations, events, social norms, laws, policies, beliefs, etc., that create or contribute to the barriers for successful attainment of your identified goal statement.)

Restraining Forces



(Language from the problem statement on the problem map is restated into a goal statement and noted in this middle text box.) Goal Statement: Army Family Readiness Group (FRG) volunteers will assist other members by adopting a more evidence-based approach and structure.

Driving Forces



0% intensity ----- no improvement to problem

References

Hall, L.K. (2008). *Counseling Military Families: What Mental Health Professionals Need to Know*. New York, NY: Taylor & Francis Group, LLC.

Pryce, J.G., Pryce, D.H., & Shackelford, K.K. (2012). *The Costs of Courage: Combat Stress, Warriors, and Family Survival*. Chicago, IL: Lyceum Books, Inc.

Venue: (Citation)	Theme	Critical Comments & Connection to Project
<p>Key Informant (KI) (Soldier)</p>	<p>Implications for single soldiers and others without family active in FRG that it is an inconvenience</p> <p>Perceptions that wives do wear husband's rank</p> <p>Has done a good job of linking resources prior to deployment for all soldiers</p>	<p>Often attendance can come in the form of mandatory fun when you just want to get home especially if the meeting is at the end of the work day or drill weekend. I do appreciate the time that the FRG members put into organizing the meetings, bringing in resources, preparing food. However the timing is often bad because most of the Soldiers want to return to home. Everyone in the National Guard is spread out so its not likely someone's spouse who lives an hour away would make an extra trip just to participate for that evening's meal. My issue is the timing. On a drill weekend there is limited time to fit in the meeting so its typically at the end of the duty day. In this case I'm fine with meetings centered around a few key holidays and events where the unit spends part of the day together with their families. When not deployed its more of nuisance...updating contact information, trying to make meetings, bring a food dish.</p> <p>If we had deployed, then I would've have relied more on the FRG and established more contact between it and my spouse.</p> <p>Perceptions? "Another social circle where the spouse can take the "rank" of their service member. Spouses can complain to the the FRG leader or Commander's wife if they are upset about something which can create unit drama especially when the gossip spreads."</p> <p>In my recent experience prior to our cancelled deployment, the FRG brought in resources that were available to National Guard soldiers like counselors and programs for the kids that some people might not have been aware of being available. The meals are also a nice touch.</p> <p>The only association of confidentiality I perceived was when using resources from the FRSA, like counseling.</p> <p>Regarding specific guidance on knowledge of what to bring to commander with families: No direct guidance, beyond if you were going to fall into financial hardship with the cancelled deployment.</p>
<p>KI (SpouseK-03)</p>	<p>Has perspective of both being enlisted and officer's wife, implies developmental stage is a factor in perceptions of FRGs</p>	<p>As a lower enlisted spouse I felt the FRG was more of a social mission and more drama, and I was hardly involved, just to get information. As an officer's wife it is more "expected". Unspoken expectation to participate. I have more skill sets to be "self-sufficient" now and church is a large part of social support- didn't feel a need to have FRG as social support.</p> <p>An FRG is...supposed to be able to provide resources to spouses when there is an emergency or set things up preventatively, prepare for deployment.</p>

	<p>Positives: communication/information dissemination</p> <p>Speaks to the crisis response piece, even if not characterized formally as crisis response, it is encountered, and some perceive it as part of the mission</p> <p>Some commanders and where they are in life cycle/stages plays a large role</p> <p>Implications of differences of relationship in being married to the FRG Commander vs. not</p> <p>Psychological/emotional stress of feeling the obligation to participate and differences in personality</p> <p>Some strangeness with power dynamic between volunteers and authority</p>	<p>Perceptions? Doesn't provide what it should in terms of readiness. It was used more for socialization and support atmosphere. is more of a distraction for a lot of spouses that don't have a lot going on.</p> <p>Benefits: Communication tree has been good, being able to dispense information rapidly to large amounts of people.</p> <p>Most impact: Had a soldier who had multiple cardiac arrests, there for a couple for emotional support, helped bridge gap and be there as a support structure for everyone involved. Spent time in hospital, childcare for daughter, food, etc.</p> <p>Challenge with commander: I feel some commanders that have no family or children, "indifference",</p> <p>Phone tree/info dissemination: When soldiers were coming home there was a "snafu" about that, One of the LTs put in charge of list and confused it with another and a lot of people did not get word of everyone coming home. Husband came home early and spouse was having surgery- adding more stress to both unaware of situation, phone tree was not very developed. FRSA and leadership didn't understand the phone tree was the wrong list. In order to fix it, husband (commander) asked wife to get involved and assist in straightening out lines of communication.</p> <p>What info to bring to families: .In part from being married, I knew what he would want to know. If we did talk about it, he would feel what I thought was appropriate would come to him</p> <p>Training: . It would be more beneficial if there were more classes that were flexible. Never foreseeable or doable for me.</p> <p>Varied FRG standards: some units had nonexistent FRGs (i.e. MITT teams started a group ¾ of way through the deployment).</p> <p>Psychological/emotional impact: Stressful, because there were expectations that I wasn't able to meet, in work, home life and "expectation to be a figure head". Feel it would have been more pain to replace the co-leader- 1SG's wife had in home daycare- no one else would have wanted to take it.</p> <p>Didn't rate FRG experience as a 10 because: It just isn't my cup of tea. Not a very social person, don't need that "social interaction". I'm an introvert, it's draining. In 13 years, it has changed a lot, there wasn't that initial support, no paid positions, maybe a few at the division level. Not a consistency to it, the priorities of each FRG has been different. Sometimes it's about fun, sometimes it's about deployment or homecoming, so feels there should be more of a goal and priority. Readiness not fundraising. Don't feel it benefits me as much. There are a lot of people that don't need it, but you are forced in it, simply from your role, marriage. It's a strange relationship to the commander, supposed to be a partnership, but you need an "okay", it's "odd."</p> <p>Multiple deployments in "this generation"- expectations of generation that didn't work as much, peacetime, no deployments – leading new generation, facing more working, breadwinner and</p>
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		<p>rapid fast deployments. How do you bridge gap, have more women in military now than years ago. Loyalty- "millenials only stick with a job three years" impacts spouses and military personnel. Pay for their education and get out, not as much of a "loyal" institution anymore, there is a need for "quick information". For future: More definitive blueprint for what FRG is and what it needs to become to support of TODAY's MILITARY.</p>
<p>KI (SpouseR-E6)</p>	<p>Unaware of what FRG mission is formally, but feels it is a support for when spouses are gone and a way to network</p> <p>Best impact on her was a BN CDRs wife that was previously in the military and had a good understanding of FRG (senior leadership)</p> <p>Roster activated for redeployment calls</p> <p>Confidentiality: reputation for a "rumor mill"</p> <p>Rachelle knew of PCC training and heard great things about it (TDY)</p>	<p>? I don't know that anyone has ever told me the definition of an FRG, what it seems like it is...is a support for the family when the spouses are gone. A way to meet spouses and military spouses through functions.</p> <p>"some FRGs are there to provide alcohol (socially), then some have really tried, I think it really tends to rely on who's running it, how their running it and what their own idea of the FRG is. "</p> <p>Best benefit has been interaction in a social sense, but I get my interaction/support through my church. Enjoyed large social events at lake inclusive of children and families.</p> <p>Good impression: (BN CDR's wife), was in military 10 years previously to that, and had a better understanding of "what the FRG was supposed to be" and go to leadership courses, More positive experience for her to be involved,</p> <p>Confidentiality: Based on things that I have heard, FRGs can be kind of rumor mills, some people are really hesitant to say anything in the FRG, afraid it will go through. I do know that people have had those experiences. It has gotten a bad reputation I think.</p> <p>Because of work politics and rank and duties- husbands not getting along, getting back to spouses, spouses all talk amongst each other and it impacts social relationships sometimes negatively.</p>
<p>KI (SpouseL-O5)</p>	<p>-Has been part of an FRG that did crisis response in the most dire of needs (i.e. Fort Hood shooting and a spouse who lost a soldier and</p>	<p>Father was in military then spouse was in military and now husband is in military, so only a period of 7 or 8 years where she was not "in" or a family member</p> <p>As an "advisor" she has coffees or calls leaders stay in touch about once/month, if something tragic happens, it is "live, eat, breath" FRG event, also responded in crisis: MAJ Nadal in Ft. Hood- 4 of 15 soldiers killed were in our unit, 15/32 wounded were in our</p>

	<p>she had no social supports)</p> <p>-FRG is information dissemination</p> <p>-Modern spouse can still participate (i.e. dual military) depending on communication</p> <p>-Critical to have social infrastructure prior to deployment</p> <p>-need for more activity when deployed or abroad</p> <p>-all female co-leaders, speaks to the institution as mostly male</p> <p>Perceptions and definitions of what FRGs do/can do are different</p> <p>Stage in life cycle different and rank structures can get in way of building community (maybe address it as the elephant in the room)</p> <p>Discusses the</p>	<p>Brigade. All deploying soldiers at SRP site. We were called in to provide support for families. Brigade FRG called, devised a plan on how to help soldiers. Had people flying in for funerals, wounded, single soldiers in barracks wounded and couldn't stay alone and needed someone. Making meals- everyone did food distribution. FRG offered crisis response. All FRGs everyone provided crisis response.</p> <p>-helped fill role as co-leader/spouse even though she was in military at time and stationed 1.5 hours apart</p> <p>Need is greater for FRGs who's spouses are alone or abroad (i.e. "no thanksgiving in Germany, but FRG has one")</p> <p>When I was an E5-E6- as a recruiter, Guard unit- Family Support Group. Feel guard has better FRGs- it's a community supports unit because many more resources to unit being so enmeshed in community. Parties with single soldiers, participated more, more social events. When people got called out for Desert Storm, everyone "did what they were supposed to do" support group was already established, already knew each other at time of deployment.</p> <p>My perception is to disseminate information. But what I see in FRGs and other people's FRGs and our own is leaders and participants feel the Army has to provide something for you. "they can watch my kids, or I can complain to FRGs" . Can't go to FRGs to "have them fix stuff". If there is something they can assist with, they can. It seems a lot of younger spouses think senior spouses have more of a "in the know", but not always true. Just older and tend to handle things differently, such as not getting angry or complaining and going with flow.</p> <p>Only reason I would ever be part of an FRG is to get information and get to know other spouses in husbands unit. And if husband goes to war, know each other and help each other and be resilient. In the next assignment I will still want to be part of an FRG. FRGs sometimes don't invite senior spouses because they feel intimidated. I'll never "drop by" unless you ask. The "BN commander's wife" or the "General's spouse". sometimes a "hotbed of gossip". If you are not a senior person, you might not be able to get it to stop. It seems that "younger people" tend to be more melodramatic.</p> <p>Most impacting experience: When we got here, the unit had just gotten back from Afghanistan, not even 6 weeks, a soldier was killed and the spouse had just moved here prior to deploying. Had never been on post, never been to meetings, she didn't know anyone here on post. First time she interacted with anyone was</p>
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	<p>impact of the commander on information dissemination and their influence</p> <p>Feel FRSAs are good support as “added cushion”, but not critical.</p> <p>-Toxic personalities</p> <p>-Referrals (spouse who’s husband was depressed, referred to resource, but draw the line at involvement for “getting involved” at some point. Subjective how much to do.</p> <p>-Didn’t think permissive reporting should be encouraged and that you should just “go to commander with it” (may discourage reporting/restrictive reporting options available immediately)- is commander’s job to instill their philosophy when it comes to reports, do they have to launch a formal investigation once</p>	<p>CNO team. That FRG leader took this on and the spouse had no support. Her soldier did not have enough time to get her acclimated to area, didn’t know where unit was. Spouse didn’t know anyone. She was doing fine until the tragedy happened. She stayed here a year with the Casualty Assistance Officer, chose not to go home, because she was “kind of like in a fog” with a son with special needs, so she needed to be close to resources for him. Her “real family” ended up being that FRG group. Spouse says she can’t remember who came to her house, all she can remember is there were some ladies from the FRG that came and stayed with her. She didn’t know “how much” she needed that interaction. She felt like she “missed out” on the comraderie of knowing these people. She is always invited to Battalion functions that still occur and a BN association that is a non-profit which she is an honorary member. The only thing that spouse said she was going to miss about the area was the FRG. Thinks it had a “profound effect” on her. So many dedications, etc. Partner community assisted, facilitated by AUSA. Every Brigade has a partner town. It’s good to work with a commander who gets the fact you need an FRG. There are many commanders that believe you don’t need one, then information doesn’t get disseminated. For example, at a coffee, I brought up a ball coming, and since a spouse in her coffee moved from unit to another unit, there was no information disseminated. Advocated for that unit to get information dissemination. In advocacy, it may result in a negative reaction for the person who needed to disseminate information. Feels important to potentially help those people who need assistance information dissemination.</p> <p>Most challenging: a commander that thinks FRGs aren’t needed. I feel I come across that with predominately single soldiers that don’t have families and don’t see the need. My husband and I don’t have children, but don’t understand sometimes how difficult it can be to get child care, and a special effort to try to understand. Maybe especially young spouses don’t understand busy career spouses can’t participate and feel slighted. I think it’s very courageous to marry into the military, and keep their career lives separate. “I feel there is no need for FRSAs”. It’s an extra “added cushion” but the administration piece can be done by spouses, not FRSAs with “mailing lists” etc. FRG Rosters weren’t “complete enough” so FRSAs were funded to ensure to track everyone. But feeling is in this “day and age” it is much easier to connect people. I had a spouse call because she said her husband was “different” since he came back from the war, doesn’t do this, doesn’t do that, doesn’t eat dinner with us anymore. Talked to husband and husband said, “he’s fine at work”. Spouse continued to call, doesn’t participate in family, etc. So referred spouse to counseling and if he won’t go, just her. Husband felt, unless spouse came in to him, he</p>
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	<p>they know?</p> <p>-Time constraints in Army now with scaling back, placing more emphasis on Army, not a simple 9-5 job, competes for interests with FRGs (argument for making time during duty day)</p> <p>-Close hold on rosters and controlling dissemination</p>	<p>cannot approach husband. You get put in those positions, FRGs are not the place to go for those things. Only thing we can do is refer to help. FRG cannot be liable for information given. Must give other resources. Make suggestions for hours to access resources, etc. Other means for that. Can't use the FRGs as "fixers" and sometimes the Army uses the FRG to get information. FRG should only be to disseminate information- but the Army uses the FRG in other ways, using their meetings, etc.</p> <p>I think they (FRGs) should be more discreet about resources. Too many people hear too much and it gets turned into gossip. When something happens, it should come from source, not second source. Believe if confidentiality encouraged, there would be more participation. Everyone in an FRG felt confident it wouldn't be turned on them. Clear expectation. Rosters should not be digitally given. If your name is on roster, you have a right to it. But I should be able to contact every person on roster for help. Because of the "life that we are all in" we should protect each other's privacy and my own. Opt out policy.</p> <p>Psychological/emotional: Yes...if you are an emotionally charged person, I feel it would be taking a toll. For example, a training death took a toll on the unit FRG, paperwork was not up to date- soldier amidst divorce and mother and soon to be ex-wife fighting over all steps of funeral arrangement, etc.</p> <p>Feel the Army has "scaled back so much", they've taken a lot of jobs that soldiers used to do and civilianized them, there are too many jobs for soldiers to do, long hours, puts strain on them, doing more jobs than people used to do. Time is a constraint, Make dinner for family at 5pm then dinner when he comes home at 7pm, and ask too much of people. Organization for coming together to disseminate information, we don't have to "have an event" or do something every month.</p> <p>Magic wand: Increase participation if people understood it is a network, a mutual network to come together. Feel there is a shift "what can the FRG do for me?" seems prevalent. But it's more for together, what we can do for the FRG. Do we make it harder on people for any "mandatory events"- look up regulation for monthly meetings? Should have a clear expectation of what events should be. I think they are a great support mechanism. Great networking process. I think people that preside over them should be recognized.</p>
<p>KI (FRSA)</p>	<p>-40 hour work week, but not all work same levels if more efficient or not as driven by right purpose.</p>	<p>-40 hour work week; All in all, I think FRSAs do as well as they are supposed to do or as best as they can. Some FRSAs may "abuse" the system of the FRSA. Some not "overly supervised" and take full advantage of that.</p> <p>(crisis response), Husband deployed, Medevacuated from environment to Germany. Only reason spouse knew to go through</p>

	<p>-Difference is FRG support group closer when unit is deployed</p> <p>Some FRGs may be “clickish” have too much power as a leader</p> <p>More crisis response examples</p> <p>Examples of regulation and monitoring of program</p> <p>-supports some form of permissive reporting</p> <p>Worst: FRG leaders that want all credit</p> <p>-no clear guideline on what should/shouldn’t be brought to commander</p> <p>-feel no issues in completing training, but not much follow up</p> <p>Specialists are at new spouse orientations and deployment briefs, but maybe a bi-monthly</p>	<p>FRG to Commander is because she was a former FRG Leader. Were able to assist her to get to right people to get overseas.</p> <p>FRG def: Support group for family members while service members are deployed. Find balance between social and informational. Has to be both or otherwise “not going to work”</p> <p>When unit is deployed- difference seems to be that FRG or support group, close network of spouse more “needed” , but in garrison, not so much, but they have more support. “going through same stuff as you”</p> <p>Some FRGs, it’s “clickish”. If you are not one of the FRG Leaders cronies or buddies, then you are part of “that group”. Although it is open to all family members, you are not as well received. I’ve seen FRG leaders with more “control than they probably should have”. Other times it’s a cohesive team with FRG and co-leaders. If structured well by regulation, don’t have participation that you would hope for in an FRG.</p> <p>Commander-best experience: A commander that wanted the FRG to work, knew it needed to work, gave a binder of regulations and status of FRG before he took command (about a month in advance). Made family readiness a priority by command influence. FRG grew stronger, had very limited issues while deployed. That was the best functioning FRG in 22 years service.</p> <p>Most challenging commander: Least gratifying, commander knew he had to have an FRG, but didn’t play a role. Hold meetings and request for a volunteer, if we don’t get one, meeting over in 5 minutes. Only thing they had is a treasurer. He took on role as FRG leader. Only did minimum requirements. Left incoming commander with “nothing” and disgruntled family members. Potentially bad experience with his prior service enlisted, so when he was in command, did not use it and shape it differently, didn’t feel priority.</p> <p>(monitor) -Some soldiers still put no, I do not want my spouse contacted. That question was supposed to be removed 2 years ago.</p> <p>Regulation- hold “regular” FRG meetings. SOPs come into play and may be dictated from higher command. “at least every other month” is in SOP at brigade.</p> <p>Worst with an FRG leader- she did not “want anyone elses hands in her pie” wanted it all her credit due to her.</p> <p>As commander you have authority to remove FRG member from key position after 6 months if training not complete as per SOP. 80-100% actually completes training. On-line refreshers and training available- just not treasurer. – may be based on post regulatory guidance.</p> <p>MFLEC, Chaplain (military and family life counselor). Don’t get feedback due to confidentiality. Support personnel come to deployment briefs and new spouse orientations. Try to make sure</p>
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	<p>panel would be best or incorporate into steering committee to hear out concerns of FRG community or spouses, any or all welcome and to build relationships with that personnel instead of all individual or small group work. Shift referral source as well.</p> <p>-FRSA budget cut, furloughs, etc.</p>	<p>people know what military and family life counselors do. Every BDE alone has own MFLEC. Groups have been started by deployed parent family member groups for kids at schools. Held on post.</p> <p>Magic wand: Make every commander's heart grow 2 sizes too big-make them become a spokesperson for their FRG and support their FRG. Will be a better functioning readiness group.</p> <p>48% FRSA's cut. More stress on command and volunteers.</p>
<p>KI (CPT A)</p>	<p>Work more hours with events and holiday season on FRG activities</p> <p>Mission is supporting families in everyday activities, connecting and mission different when deploying vs. staying connected at home</p> <p>Had more than 10-20% participation, at peak in deploying unit more like 50-75%</p> <p>Structure: Whoever wanted</p>	<p>Supporting families in everyday activities. In delta company is was supporting families and preparing for upcoming deployment...get family members to know each other, connect. Now that I'm not in a deploying unit, it is supporting soldiers here, families need something, holidays, new babies, etc.</p> <p>Did more activities in showing aircraft and familiarizing family with "what daddy or mommy does" before deploying.</p> <p>Made a couple of meetings mandatory to get people to hear out what the FRG was. A single soldier no contact participated in a smoked pig BBQ for Easter, and now participates a lot. Only forced people for initial meetings. Soldier on no contact- Wasn't a "kid person"- but started participating with kids and having fun.</p> <p>-Waffle breakfasts in hangar did well and large holiday parties, football tournament</p> <p>Life stage quote: When I was a LT, I was single, never went to meetings or supported FRG events, but when deployed, parents were on distro and get updates. When we started up as a company, tried "our hardest" to not make it a "gossip center" or about the families. Greater interest in maintenance company because younger spouses and soldiers and greater need. Unit now is very large with senior ranking individuals, mindset is "I've already done an FRG", kids are in high school or college, "been there done that" kind of mentality. Don't really have an FRG leader, hard to get one.</p> <p>Younger spouses vs. older spouses in careers and has hobbies is</p>

	<p>to volunteer</p> <p>Examples of good turnout and social events attributed to FRG success</p> <p>Made a couple of first meetings mandatory for all soldiers to connect single soldiers and tell everyone what FRG does.</p> <p>Stages in life cycle discussed again- single, no kids, etc</p> <p>Desires taking gossiping and clickish mentalities out of FRGs</p> <p>Crisis response examples: Combat death (info dissemination and assistance with families, and rallied around spouse who's husband was detained, not just soldiers responding to spouse</p> <p>Barrier: rank, gender (female commander felt more approachable) or</p>	<p>different. And already had to run an FRG as a spouse and a commander, so different now- don't care to go through the work.</p> <p>In responding to a spouse: Trying to not have "just soldier (uniform) get in way," have balance of friends. Assisted childcare, transportation.</p> <p>Command deterrent in interaction with families in need: To get an entire intervention- discuss with legal, fill out reports, investigate, written statements, and put together 15-6 or whatever it is. It is time consuming.</p> <p>Different ranks not socializing across other ranks. Maybe don't want to reach out or talk. Sometimes if leader isn't one of top ranking spouses- other spouses don't want to work with as much. Post functions and legal brief, but no training or preparation and starting one from scratch was tough. Didn't know about Family Advocacy, no-one teaches you those things. Would have liked an OPD, quick about FRGs- do you know about this program or that. ASAP, FAC, etc.</p> <p>Mutual interest if members interested: FRG was last of priority in taking command. Priority was up because 1SG wife interested. Facebook- 1SG wife started company facebook page. Only coleaders and treasurer had access, Baby- go to hospital and get family photo, awards, promotions all on facebook. Facebook page in current company- have not had time to maintain and PAOs take over for higher HQ and older generation. Younger generation- Facebook was beneficial.</p> <p>It's tricky dealing with negative volunteers, firing them means causing potential conflict in workplace with their service-member spouse.</p> <p>sometimes males don't want to be a part- "gossiping". Some househusbands.</p>
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	<p>stigma with male participation</p> <p>Lack of training for commanders</p> <p>Increase in priority for commanders if FRG members interested</p> <p>Social network now plays a large increase in responsible communication</p> <p>Difficult to navigate how to handle negative spouses</p>	
<p>KI (CPT B)</p>	<p>FRG mission as many different parts (yet again!)</p> <p>Perceptions good and bad</p> <p>Best benefit is knowing more about the soldier as a whole both home and work</p> <p>More crisis response if an FRG relays to commander</p> <p>Structure: whoever wanted to volunteer, not much follow up on training</p> <p>Permissive</p>	<p>Mission: Builds unit cohesion, incorporates the families as part of the unit, prepares families for the challenges of military service. For deployed units- focus more on communication channels, making sure the soldiers unit information is up to date with Soldier's current family status- married, primary NOK, emergency contact. Not deployed- more "unit cohesion type stuff"</p> <p>Good community spousal/spousal community for families, good place to meet other families undergoing same experiences, negatively: good be "clicky or gossipy"</p> <p>Knowing the full soldier and family and where they come from to know more about their specific needs and how to take care of them. If a spouse contacts a commander directly, it's normally for a significant issue...it's normally not the commander's issue to solve, but the commander may be able to refer the spouse to other resources and usually "dampen emotions", dampen emotions caused by personal issues of both the spouse and soldier.</p> <p>Challenges with members: You have to be flexible and open to ideas they have that you wouldn't choose yourself. Know that they are not part of the chain of command, be open to them directing instead of the directing you.</p> <p>Voluntarily. "whoever wanted to volunteer". Co-leaders were volunteers, a spouse being one of those. It makes sense that spouse would be co-leader since they have most exchange with the commander. Sometimes spouses view themselves as wanting to help their spouse and their career and view families as a valued part</p>

	<p>reporting beneficial or some way of knowing how to get information to right place.</p> <p>Clicks or strong personalities can be dividing</p> <p>-think FRG members should be confidential, but not conveyed, there is training for FRG members, but commanders unaware of what training is received.</p> <p>Training was "self-motivated" for commanders</p> <p>Barriers: attending training due to scheduling conflicts for both commanders and members</p>	<p>of that. Sometimes a lot more experienced spouses that have had more time in the army. I'm sure that there are commanders that pressure their spouses a little bit.</p> <p>No prerequisites on training for members: No- just motivated and wanted to participate. Not initially to be signed to a position did they have to have training complete. Never had an issue with them not completing training after signed-maybe should have followed up?</p> <p>Magic wand: It'd be nice to have the perception of clicks to go away, but not sure how to do that. I didn't have any experience with clicks. Sometimes depends on personalities, sometimes there's a spouse with a strong personality that they may be perceived as a click and members do not want to participate.</p> <p>Confidentiality- In dealing with families you should be as confidential as you can, but if it's beyond your scope of expertise, you have to go somewhere else. If they come to you for personal assistance, it should be handled with a professional. I think everyone in the FRG should be that way, especially key leaders. If someone told me something and it was third hand, and it was something I perceived as sensitive, I would tell them to not share with anyone else. After that, "it would be me" that would refer to the resource.</p> <p>There is training, but not sure what it is on...probably would be beneficial as a commander how the people in your FRG structure are being trained. I didn't enforce training but expected it to be done.</p> <p>Self-driven; 5. Instead of me having to seek out the manuals and read them myself, maybe have a class or training to prepare.</p> <p>Something that is just outside of personal responsibility to know what is going on. Something mandatory.</p> <p>It was difficult to schedule the training based on resources. Access to training personnel was difficult, had to rely on people visiting to conduct training. It's probably commander's responsibility to ensure training, but may not directly coordinate it.</p> <p>Commanders: it's not mandated that we do things a certain way. Publications dictate what an FRG should be, I didn't get any guidance outside of what was published.</p>
<p>KI (BN CDR)</p>	<p>Derived that command emphasis is critical</p> <p>Some program for accountability would be important (need</p>	<p>"Command emphasis is absolutely critical."</p> <p>"I think, like you eluded, that there needs to be a mechanism for accountability. It is a program, like Safety, CSDP and ATP, and the commander is responsible. BCOs need to provide feedback."</p> <p>"The gap between institutional FRG training for company and battalion commanders is significant. There are too many erroneous, pre-conceived notions to prove otherwise. I do my best to rectify this deficiency through personal example and coaching and mentoring. Different leading FRG, put undertrained, under-</p>

	<p>input from higher on that ability)</p> <p>Communication must improve in between company commanders/FRG Leaders and FRsAs.</p> <p>Defining members of FRG different on two levels</p> <p>Negative perceptions of FRGS and disruptive forces</p> <p>Permissive reporting good</p> <p>Barriers: rank and bureaucracy</p> <p>FRG Facebook and ability to reach others.</p> <p>Army resources finite to be able to do what it is trying to do at highest levels and programs, political pressures.</p> <p>Confidentiality- may be useful for all participants /leaders to be informed what information must legally go to commanders at</p>	<p>resourced program. Greatest training PCC. TDY. Breakout sessions. Army can't afford to train commander-Company commander's don't have training. Promoted to captain in 4 years, in command within 5. Not enough time to develop everything you need to be a commander. Responsible for everything they are able to do or not do. Modeling behavior at BN Command."</p> <p>"Communication needs to improve between Co CDRs and FRG Leaders. What is their intent? What do they want to do? Involvement is a part of emphasis. Commanders that give the reigns in total to the FRGs relinquish control and foster drama."</p> <p>Two different angles: FRG is all soldiers/civilians and volunteers- so much that soldiers in uniform do before it gets to referral (un-reported) only hear bad stories. But it's also the gap between family members and command to facilitate communication. Criteria- volunteers, how many do most of work.</p> <p>"I believe that there are misperceptions of the FRG born largely of ignorance or negative past experiences, but largely the impression is positive. "</p> <p>"The most challenging experience is dealing with a toxic, selfish FRG leader. There is hardly anything more disruptive than a self-righteous leader, but the damage is exponential in a network of volunteers. The FRG is about servant leadership, not power. Unfortunately, some are attracted to the role for the wrong reason and abuse their position of influence."</p> <p>Negative experience: "a commander that allows his/her FRG leader and/or spouse to lead in a toxic manner" Positive: "I guided one Company Commander that erroneously thought that he was the Company FRG Leader, an ignorant violation of Army regulation. Now, he has a healthy, engaged FRG."</p> <p>"Permissive reporting could play a pivotal role in the prevention of domestic violence."</p> <p>Confidentiality: BN CDR words can become "law" have to be careful about asking for what you say is significant to report when it comes to families, basically ask of anything that requires the resources or info dissemination at the BN command level or authorization.</p> <p>"Barriers- rank structure itself and the way we structure units for support staff...some spouses feel they can't contribute because of their rank. Operate in a hierarchy/bureaucracy...hard for spouses to act. Some wives give cold shoulder because husbands have been doing this or that...longer, etc. Commander. Extension of command=bad. "Can't spectate your own program. If they stink it's because of your program"- leaders and spouses HAVE to be engaged working at the top. Not a sense of rank. Perspective, been through every single rank." No secretaries at</p>
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	<p>different levels-building transparency</p> <p>Speaks to future relevance of FRGs</p> <p>Speaks to maturity of commanders due to training and developmental stage.</p>	<p>the unit level.</p> <p>“If I had a magic wand, I would make commanders realize the importance of the FRG.”</p> <p>“We put controls in the FRG Facebook site and provided guidelines for appropriate comments and behavior. We discuss need-to-know and sensitive information at Newcomer’s Briefings and reinforce it from time to time at FRG Steering Team Meetings.”</p> <p>“Army has entire army, carve out finite resources for FRSA’s and family programs. Slippery slope to rate commanders.”</p> <p>“I think that a leadership role in the FRG is time consuming and stressful and requires an upbeat attitude and servant spirit. Our leaders are highly committed, but there are times when they over extended.”</p> <p>I think there is a general consensus (among unit commanders), however I don’t necessarily agree with it. I believe that some of my Company Commanders do not share my enthusiasm for the FRG and lack the experience and maturity to see the benefit. Their perspective will change as they rise higher in station and rank. They will appreciate the FRG more as they gain more responsibility and their own family grows.</p> <p>As long as there is an Army and Army families, we will have an FRG largely the same as today, in my opinion. The methods of communication may vary, but the intent, regulation and legal limits are well established and we can expect more of the same in the future. Hopefully, we can continue to invest in training leaders and future leaders earlier in institutional curriculums, such as the Captain’s Career Course and NCO Senior Leader’s Course.</p>
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a.) Is there a theme emerging from the responses?

- All sources state FRGs can be a good resource for support, connection and information dissemination
- Service support specialists – chaplains, social workers, familiar, no significant issues with.
- All sources state the most reliance on FRG is during times of deployment or increased need (i.e. crisis)
- All sources state FRGs can have perceptions of “drama” or power inequities in terms of rank of spouse being used to influence other members
- BN CDR, both CDRs, FRSA, Spouse K and Spouse L have verified that the unit commander can play a pivotal role in FRGs
- BN CDR, CPT A, FRSA, Soldier, Spouses K and L indicate stage in life-cycle/experience in career play a role in how commanders view the FRG
- Both COMMANDERS and BN CDR acknowledge lack of institutional knowledge, preparedness in training for FRGs and/or following up on training of members (what it consisted of, how it is being implemented)

b.) In what ways does the result of your needs assessment add to the knowledge gained in the literature review?

-There is much in the literature to indicate that spouses can be a large source of the “toxic” environment, but less articles on importance of commander engagement with families, response and accountability

-Research shows in Social Network theory that if you don’t manage informal groups, then informal leaders will manage themselves (good or bad). Also different good and bad points to informal helping and providing infrastructure around that.

c.) What needs were identified by the focus group participants?

-Accountability (“Care factor”) for commanders in some form (BN CDR proposed, Commanders propose engagement from institutional knowledge (courses, prep time, command emphasis and follow through)

-More time to engage (commanders are busy- CPT A time constraints on putting together events, giving soldiers time to come to events, competing interests in priority, CPT B- no time set aside for training, expected to do on own time, and not a priority, no accountability)

d.) What key points do you want to include in Assignment 4: Information Report?

Feminist theory may give historical context and understanding to current difficulty in communication between predominately male commanders and predominately female FRGs. Social Network theory may be applied for understanding how important groups are in managing information, using leadership to provide healthy channels for information dissemination

Inserted some key informant quotes to framework:

FRAMEWORK (Numbers below pertain to Article #) labeled above in numeric order:

This paper addresses the current, complex needs of Army military families and the ability of Family Readiness Groups (FRGs) to address those needs. Army personnel (a Battalion Commander, two Company Commanders, one Family Readiness Support Assistant (FRSA), one Soldier and three spouses) from different units located at Joint Base Lewis-McChord were requested to participate in an anonymous survey to offer their perspectives and experience in participating in FRGs. After conducting a review of current literature and eight key informant interviews, evidence suggests appropriate Command emphasis and concern for building trusting relationships in the FRG Program may dramatically reduce barriers encountered by military families seeking information and support from FRGs. Feminist and Social Network Theories are applied as a framework to give historical context, current understanding of the problem and address future implications and interventions at the micro, mezzo and macro levels. Proposed methods for implementation of policy, best practices and accountability at the micro, mezzo and macro levels as a command program are also discussed.

The historical and current understanding (gained from both your information survey and key informant interviews/focus group) of the topic or project target population.

Historical: Article #: 17,15,14, 12 (loneliness and keeping busy during deployments), 13, 11, 6, 1,

Current Understanding: Article #: 1-6, 8, 9, 13, 22, 17, 16, 15

Key informants on mission of FRGs in their own words- all agree on information dissemination with some form of social component or networking component.

All agree can be some form of toxicity in environment brought by volunteers or leadership.

Leadership has authority (legitimate authority), members do not have as much authority.

Becomes a conflict of interest if the legitimate authority does not have any interest.

The impacts of economics, difference and/or diversity.

Economics/funding #s: 10, 11

Lack of training for Unit commanders, but BN Commanders and spouse have opportunity to go TDY and learn about FRGs, Resourcing difficult (KI BN CDR)

Difference/diversity #s: 1, 2, 4

The impact of relevant developmental stages.

Young spouses: 17, 14, 13, 4, 2, (KI spouse L)

All KIs acknowledge where people are at in life cycle (commanders and young spouses) play a role in FRG development.

Young commanders : 13, (key informant (KI FRSA, KI BN CDR, KI spouse L and K) , speaks to maturity levels and depth of knowledge in profession- relevance of FRGs to unit mission

The cultural, systemic and global influences as they apply to your target population.

9 (wives wearing rank, leadership not stepping in). Systemic may be the lack of training available to unit commanders (key informants (CH,B, J).

Political emphasis may receive more money (i.e. sexual assault training).

Include a discussion of the NASW ethical practice guidelines.

18, 24

“Social workers have an opportunity to influence a range of professionals, stakeholders, and laypeople regarding the importance of responding to the needs of military and Veteran populations” (NASW, 2012, p. 6)

“Social and political action: the engagement in action that seeks to ensure that all people have equal access to resources, with understanding of the limits imposed by the client’s military status or employment situation.” (p. 15)

Dignity – not treating spouses as “them and us” mentality. Breaking through commander stigma of FRG.

Identify and discuss the relevant theoretical frameworks, as well as any research interventions found during the literature survey which are influencing the design of the project.

3,6,7,20, 23- It would be remiss to not incorporate Feminist theory as a lens to view how gender has historically and traditionally shaped Family Readiness Groups both on a micro, mezzo and macro level. Also may affect how female commanders relate vs. male commanders to networks. While gender provides understanding around circumstances, Social Network Theory provides framework for interventions, as regardless of gender, the impact of command influence may be able to reduce barriers associated with gender roles. Social Network Theory also provides future implications, understanding as a leader why relating, understanding and managing social networks is key to unit morale and mission.

Considering all you have learned discuss what can be done on the micro, mezzo and macro levels to resolve in whole or in part the emerging needs. Create a preliminary needs statement.

Micro: Commander’s care factor in leadership position and not permitting toxic leaders to mismanage or lead FRGs for wrong reasons.

Mezzo: leadership on mezzo level, key informant (CH) and Battalion commander’s, ability to train commanders and rate them, bi-monthly panels for service support personnel to attend? FRG Steering committees? More phase time and familiarity with unit.

Macro: leadership on macro level placing more emphasis on programs. Maybe room for this with a shift in momentum as the army downsizes. article 19, 21- research more about the implications of permissive reporting, maybe opening/educating more on that channel as an option to empower

key members who encounter crisis and are apprehensive to make a report to command.

NEEDS:

Key informants and literature suggests that negative experiences with FRGs are primarily associated with leadership: either a commander that does not have a “care factor” or a commander who permits a spouse (knowingly or by lack of interest) who is “toxic” to the FRG. Confidentiality is the second primary concern which may be emphasized by command:

It is prudent to emphasize confidentiality on two planes: unit confidentiality for mission needs, and confidentiality as it relates to families. Confidentiality as it relates to the unit may be Administrative Facebook controls, information control on roster dissemination and how far (digital emailings? Etc.) and deployment schedules. Confidentiality as it relates to families may be when a family member’s request for assistance warrants command involvement and how individual key members or volunteers refer to resources without compromising trust of that family member. Commanders may be able educate families on the legal implications and channels of reporting, what they warrant/develop as a set criteria (CCIR) that must be reported to them and to higher and let families know up front through initial meetings. Allow service support professionals to be in the room to introduce them and tailor unit needs and command discretion for defining crisis and expectations for responding.

Make it part of officer’s overall evaluation, not just how they are as an officer, but how they integrate the families and single soldiers into the whole unit...it’s not emphasized as much. For instance- “SHARP is changing”.

End with your ideas for the project you are currently considering. What challenges are there to be worked out, what is well supported by the data gathered to date, and what still remains to be answered?

Un-answered- What some referral programs provide in terms of confidentiality, mandatory reporting and what has to have command involvement.

Would be good to provide a few key programs that commanders work with: Family Advocacy, ASAP, MFLC (Military family life counselors), Social workers, chaplains, psychologists.- good information for commanders in an intervention piece.

Question: is it possible to add family readiness as a point for evaluation in OERs? Do supervisors have that flexibility?

* All quotes taken directly from participant writing answers, if no quotes, then answer is paraphrased within interview and conveyed as best as possible for themes. Quotations around direct words/phrases KI’s used.

Venue: (Citation)	Theme	Critical Comments & Connection to Project
<p>1. Aronson, K., & Perkins, D. (2013). <i>Challenges Faced by Military Families: Perceptions of United States Marine Corps School Liaisons. Journal Of Child & Family Studies, 22(4), 516-525.</i> doi:10.1007/s10826-012-9605-1</p>	<p>Describes longest sustained deployment in US history (p. 516)</p> <p>School transitions for youth and deployments are highest family stressors outlined (p.516)</p> <p>Children and family experience extreme pressures resulting in studies demonstrating decreased psychosocial functioning for youth and spouses (p.516)</p> <p>Describes some reasons families may not use support resources (p.517)</p>	<p>“Despite the limitations of this study, the results suggest that families using the Marine SLPs may be a vulnerable group. Military–school–community partnerships may hold out promise for filling in service gaps faced by those military families experiencing high levels of stressor exposure and low levels of coping resources”(P 516)</p> <p>“Non-deployed spouses also appear to experience a variety of psychosocial problems throughout the deployment cycle including anxiety, role strain, and unexplained somatic symptoms (for reviews, see De Burgh et al. 2011; Institute of Medicine 2010).” P. 516</p> <p>“studies have found that deployments are associated with increased child and youth internalizing and externalizing behaviors (Lester et al. 2010) and other psychosocial morbidity including symptoms of anxiety and depression, prolonged grief, and emotion dysregulation (Chandra et al. 2010; Chartrand et al. 2008; Flake et al. 2009; Barnes et al. 2007). Studies have also found that children and youth do more poorly in school and have decreased social functioning during parental deployments (Huebner et al. 2007; Mmari et al. 2010).”</p> <p>“Some military families who live far from installations also report that it is difficult to access services from such a great distance (Drummet et al. 2003). Although the Department of Defense and each of the service branches provide a broad range of support resources (e.g., physicians, counselors, family programs), a number of military families decide not use them. The lack of utilization often stems from concerns about stigma and the possibility that engagement with traditional service providers will have negative ramifications on career advancement, as well as being a part of a culture where being “tough” is expected and valued (Mahalik et al. 2003).” P. 517</p>
<p>2. Ahmadi, H., & Green, S. (2011). <i>Screening, Brief Intervention, and Referral to Treatment</i></p>	<p>Younger spouses than the civilian population are the target demographic; making them more vulnerable to stressors (p. 129)</p>	<p>“Current literature suggests that military spouses, and families, tend to be at different points in their life course than civilian families of similar ages. Marrying earlier and having children sooner coupled with military lifestyle stressors place them at increased risk for developing adverse coping mechanisms, particularly during deployment” (p.129)</p> <p>Characteristics of the military lifestyle, including deployment,</p>

<p>for Military Spouses Experiencing Alcohol and Substance Use Disorders: A Literature Review. Journal Of Clinical Psychology In Medical Settings, 18(2), 129-136. doi:10.1007/s10880-011-9234-7</p>	<p>This outlines the stressors endured and greater risks associated including statistics on more severe family stressors and concerns (p. 129)</p> <p>Federal involvement and awareness highlighted (p.129)</p> <p>Since soldiers are using a lot of resources, there are fewer supports for family members, placing more emphasis on the need for awareness at all levels (p. 129)</p> <p>Referral is a critical component, providing essential elements such as empathy, feedback on risk, information for alternatives and nonjudgment to facilitate. (p. 132)</p> <p>Note: Impact even more significant for special operation units.</p>	<p>increase the stressors affecting service members and their families. These stressors place military family members at risk of developing depression, post-traumatic stress disorder, and substance use disorders. Left untreated, these problems can lead to long-term health consequences. There is evidence that behavioral health issues among military spouses are becoming increasingly problematic (Booth et al., 2007). (p 129)</p> <p>“evidence shows that alcohol and drug abuse among military spouses has increased since 2001 (Booth et al., 2007), among U.S. Army spouses, only 2% reported alcohol or drug abuse in 2001; this increased to 4% in 2004 and 2005. Emotional and psychological problems tend to be much more prevalent among military spouses, whose rates increased from 12% in 2001 to 15% in 2004 and 2005 (Booth et al., 2007). Nevertheless, research on comorbidity indicates that these emotional problems are commonly accompanied by substance use issues. (p.129)</p> <p>“Federal agencies are paying greater attention to the provision of care for military dependents, many of whom suffer from substance use disorders as they cope with the stressors associated with military life, notably the lengthy separations from their loved ones during deployments (National Institute on Drug Abuse [NIDA], 2009). The number of soldiers seeking treatment for substance use problems has increased, leaving fewer specialty care resources for family members (Eaton et al., 2008).” (p.129)</p> <p>“There are many factors identified through research, however, that influence the success of a referral to treatment, including the referral source (e.g., self, legal, health/social services) (Atkinson, Misra, Ryan, & Turner, 2003), similar to a brief intervention—providing empathy, feedback about the individual’s personal risk, and information about treatment alternatives in a nonjudgmental way can facilitate the referral process. “(p. 132)</p>
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<p>3. Brown, S. and Tracy, E.M. (2011). Social networks and social work practice. In F.J. Turner (ed.), Social Work Treatment: Interlocking theoretical approaches (5th Ed., pp. 447-459). New York: Oxford University Press.</p>	<p>Theory: Social Networks</p> <p>Theory provides framework for mobilizing clients through personal networks across multiple layers: micro, mezzo, macro</p> <p>Understand the macro level-FRG as it functions as a whole by interactions with each other (p. 447)</p> <p>Understand the individual as they relate to the FRG and community resources (p. 448)</p>	<p>Two broad sub-fields:</p> <p>-Macro level is the study of whole networks, examining the pattern of relations within a defined group, (p. 447)</p> <p>-Micro level is personal social networks, examining relationships surrounding a specific focal person, considering “individuals in the context of other people”. (p. 448)</p>
<p>4. Melamed, B., & Cubic, B. (2011). Strengthening Our Soldiers (SOS) and Their Families: Contemporary Psychological Advances Applied to Wartime Problems. Why Now? Why Us?</p>	<p>Provides perspective on how many soldiers and thus, families may be affected by the pressures of recent war (p. 109)</p> <p>Urgency of the issue is communicated to educate reflected about referral processes for families, the “why now?”</p>	<p>“Since October 2001, approximately 2 million U.S. troops have been deployed for Operations Enduring Freedom and Iraqi Freedom (OEF/OIF) in Afghanistan and Iraq.”(p. 109)</p> <p>“Between 11% and 42% of returning service members report some type of mental health problem during post-deployment screenings (Hoge et al., 2004 ; Milliken, Auchterlonie, & Hoge, 2007).” (p. 109)</p> <p>“The knowledge needed to simultaneously provide guidance for the families left behind is also imperative to address issues of family violence, children’s conduct and academic problems, and partners who turn to substances, dealing with the concern about whether their spouse will return alive.” (p.110)</p>

<p>What Next? Journal Of Clinical Psychology In Medical Settings, 18(2), 109- 115. doi:10.1007/ s10880-011- 9245-4</p>	<p>aspect (p. 110)</p>	
<p>5. Euson, M. J. (1995). Key volunteers. Marines, 24(8), 32.</p>	<p>Addresses information dissemination and management (historic role with successful outcomes)</p> <p>Demonstrates Communication in a scenario in which they were fortunate to recover the downed pilot</p> <p>Shows discretion of commander to communicate, how to communicate.</p> <p>Being proactive is one method of communication believed by this commander to be the way to disseminate information</p> <p>Note: Flexibility can be good for commanders in situations of response, are</p>	<p>“Marine Aircraft Group 31 Family Readiness Program supports the Marine family through the Key Spouses Volunteer Support Structure, made up of spouses of Marines and Sailors of all ranks within the unit.”</p> <p>“Recently, MAG-31 exercised its Family Readiness Program in a real-world scenario. When O’Grady’s F-16 was shot down June 2, two of MAG-31’s squadrons, VMFA(AW)-533, flying out of Aviano Air Base, Italy, and VMFA-312, deployed to the Mediterranean Sea aboard the USS Theodore Roosevelt, were in the region waiting to be called on.”</p> <p>"When O'Grady was rescued, it was early morning over there (Aviano) and late at night here. Col. James E. Cartwright, MAG-31 commanding officer, was receiving regular updates about '533 and '312's involvement in the rescue," White said. "By mid-morning here, the Key Spouses were notified and informed."</p> <p>"The program operates like a network. Once something has occurred with a particular squadron, the group commander or representative calls that squadron's commanding officer's wife and Key Spouse Volunteer coordinator. From there, the Key Spouse Volunteers begin calling all the spouses in the squadron to inform them about the happenings of the squadron. Col. Cartwright will also, as the situation warrants, call a meeting of the spouses and give them an unclassified version of what exactly is going on with the squadron," White said.</p> <p>“Being proactive and doing those things, White said, helps keep the group ahead of the game and heads off a lot of potential problems. "It's comforting for the husbands and the wives.”</p> <p>"The word got passed to us very quickly," said Becky K. Lashier, VMFA(AW)-533 Key Spouses Volunteer coordinator and wife of Maj. Raymond S. Lashier, a weapons and sensors officer. "After the rescue, we were told our squadron was involved, that it was successful, and everyone was safely on deck."</p>

	<p>there any actions that must occur at a minimum? (i.e. Command Critical Incident Reports (CCIR)?)</p>	
<p>6. Gassmann, Jaime Nicole Noble Patrolling the homefront: The emotional labor of Army wives volunteering in Family Readiness Groups. Dissertation Abstracts International Section A: Humanities and Social Sciences, 2011, 72, 5-, ProQuest Information & Learning, US</p>	<p>Addresses gender roles that are reinforced by FRGs (p.6)</p> <p>Addresses the “two for one pay-check” in which spouses are expected to be a “good wife or husband” by participating in their spouses work and volunteering for the organization. (p. 6)</p> <p>Addresses two-for-one labor patterns as part of feminist theory concept (p. 7)</p> <p>Addresses history of organization and FRSA taking on what FRGs formerly and still do (p. 7)</p>	<p>“The term “Army wife” is a widely used term to denote the wife of an Army soldier. It is notable that the term completely elides the soldier and puts the woman in direct relation to the institution, as if she were married to the Army itself.”- p. 5</p> <p>“ The Army’s institutionalization of support reinforces traditional gender roles of mothering and caretaking—women’s unwaged and often demeaned work—that have long been expected of Army wives, particularly of women whose husbands intend to make the Army a career” p. 6</p> <p>The Army militarizes some Army wives, particularly officers’ wives who put forth an effort to conform to expectations. These women work a shift of unpaid emotional labor on behalf of their husbands’ careers, all the while maintaining and perpetuating both the social order dictated by rank and the chain of command as well as emotions supporting and perpetuating the Army’s mission. I explain these expectations using the rich feminist literature on two-for-one labor patterns, as well as the military sociology literature identifying the Army as a greedy institution—i.e., greedy for soldiers’ spouses’ free labor (p.7)</p>
<p>7. Valentich, M. (2011). Feminist theory and social work practice. In F.J. Turner (ed.), Social</p>	<p>Theory: Feminism takes on many forms: revision of existing frameworks to reflect diversity of women’s</p>	<p>“feminist theory development takes several forms: the revision of existing ideological frameworks to reflect the diversity of women’s experience; incorporation of relevant thought systems; formulation of new theories about women; and the critique of concepts and traditional theories about women (Valentich, 1996, 285)” p. 209</p> <p>“Nelson and Robinson (2002) extensively review key concepts related to sex and gender that are fundamental in feminist theories</p>

<p>Work Treatment: Interlocking theoretical approaches (5th Ed., pp. 205-224). New York: Oxford University Press.</p>	<p>experience; incorporation of relevant thought systems; formulation of new theories about women; and critique of concepts and traditional theories about women (p. 209, 211).</p> <p>Note: Must incorporate feminism to account for historical context of the military in it's traditional sense and founding of Family Readiness Groups as primarily women</p> <p>Must incorporate evolution to modernized Social Network Theory as way of how exchanges may work now, regardless of gender</p> <p>Note: there is incorporation of cultural clashes, traditional spouse meets working spouse (key informant L)</p>	<p>as well as social work practice. They present a gender perspective that argues 'that apparent sex and gender differences are the product of ongoing multilevel social construction and reconstruction processes that occur at the sociocultural, institutional, interactional, individual and global levels' (p. 211).</p> <p>Social work also is called to review specific to gender "reassessing the human stress response; relational aggression by girls, and shame as underlying many client problems" (p. 211).</p> <p>"tasks of postmodern feminist social workers are to provide feminist perspectives on society and culture as a way of exposing grand systems of belief, analyzing how power and knowledge affect women in the social world and how women think about themselves, and bringing the voices of marginalized women to the center." (East, p.275)- p. 213</p> <p>Lena Dominelli (2002) theorist- "assessing and dealing with impact of patriarchy on all persons and their relationships...considering social construction of gender, separating needs of all populations working as an insider/outsider" in organizations (p. 212).</p>
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<p>8. Goodman, P. L. (2013). Deployment of Military Mothers: Supportive and Nonsupportive Military Programs, Processes, and Policies. <i>Military Medicine</i>, 178(7), 729-734.</p>	<p>Demonstrates potential for marginalization of male spouses and female active duty members</p> <p>Indicates difficulties with activities geared toward non-working spouses</p> <p>Demonstrates perceived stigma in seeking mental health resources, importance of confidentiality</p> <p>Note: Must have ability to refer to community, just as service-member encounters stigma, so may spouse.</p>	<p>Although the mothers indicated that family readiness groups and behavioral health care resources were beneficial, they also identified aspects of these two programs that were not supportive. A few of the mothers commented that the family readiness groups did not provide supportive services for nontraditional caregivers. The information and resources were typically structured for nonactive duty mothers whose husbands were deployed and did not address issues that applied to other types of caregivers such as a male spouses or grandparents.</p> <p>As one mother stated, "Everything is so focused on the guy going; on dad going, and the briefings are about what the female spouse does who stays behind."</p> <p>In addition, a few of the mothers stated that their working spouses were usually unable to attend many of the family readiness group activities, which were scheduled during the week during work hours. As one mother stated, "Our system is not set up to support husbands and even more, to support working husbands. Some of the stuff that was going on was often during the day and during the week. Well, that's not anything that he could do [attend]."</p> <p>As perhaps relevant to other military service members, the stigma surrounding behavioral health and the perceived threat to a military career prevented some of the mothers from seeking care. One mother, who was a health care provider, described how she could be placed on a command report if she sought behavioral health care. She indicated that typically, as a staff member, if she seeks a particular type of health care, she may be placed on a command report to inform the senior leadership of her situation. The mother feared that the publication of her seeking behavioral health care would be viewed as negative by the senior leadership and detrimentally affect her career. In addition, she was concerned that the issue might become known among her peers and superiors since people with access to the report could disseminate the information to others</p>
<p>9. Gould, Joe Ex-civilian FRG employee files whistleblower suit Army Times,</p>	<p>Demonstrates how much leadership and relationships to FRG leaders and Support Advocates can influence a unit Important codes</p>	<p>Witnesses told the 15-6's investigating officer, Col. Chris Spillman of the 108th Air Defense Artillery Brigade, that Leslie Drinkwine, then the brigade FRG adviser, had for months used her husband's rank to harass and bully the brigade's officers and their wives, and that Col. Drinkwine was his wife's "key enabler." Drinkwine reportedly told battalion commanders, "My wife speaks for me." (p. 36)</p> <p>Jones alleged that although Johns had been counseled two months</p>

<p>2010, 71, 17, 36-37</p>	<p>and guidelines (training) for Casualty Notification are in place for paid FRSA's and some Casualty Notification teams.</p> <p>Note: Brings up good points about how casualty notification is disseminated in units or has been previously.</p>	<p>earlier not to involve herself in casualty notifications, she reported to Jenio and his wife about the death of Sgt. 1st Class Carlos Santos-Silva, a 2-508th trooper killed in action. (p.37)</p>
<p>(<u>extension of previous article</u>)</p> <p><u>Gould, Joe</u> Banned from the brigade Army Times, 2010, 70, 51, 20-22</p>	<p>Note- an extension of above points describing in detail the amount of bullying that can occur by spouses "wearing their husbands rank".</p>	<p>The confrontation between Leslie Drinkwine and Jenio was emblematic of an environment within the 4th Brigade , particularly its family readiness group, that was so toxic that it triggered an investigation by a three-star general.</p> <p>Leslie Drinkwine's influence was "negative, divisive and harmful," several FRG advisers told investigators.</p> <p>What's more, the investigation concluded that the 4th BCT's commander, Col. Drinkwine - who told battalion commanders "my wife speaks for me" - was his wife's "key enabler." Col. Drinkwine not only failed to dispel the perception that his wife "held a level of authority that resembled command authority," he worsened it, the investigation concluded.</p> <p>The findings - accompanied by more than two dozen sworn statements many of which describing Leslie Drinkwine's allegedly abusive manner and widespread use of her husband's rank to harass and bully the brigade 's officers and their wives - led 18th Airborne Corps Commander Lt. Gen. Frank Helmick to ban Leslie Drinkwine from any and all contact with the FRG and the rest of the brigade .</p> <p>In his sworn statement, Col. Drinkwine denies any wrongdoing by himself or his wife and attributes the FRG's dysfunction to " the inability of a few ladies to work professionally with one another." Leslie Drinkwine strongly denies her influence could affect careers and says that she "felt humiliated, her reputation defamed and slandered" by an earlier decision to remove her as FRG adviser.</p>

		<p>Both Col. and Leslie Drinkwine declined to be interviewed for this story.</p> <p>This was not the first time the matter was brought before the top commanders at Fort Bragg. Prior to the brigade's deployment in August, Col. Drinkwine met with Scaparrotti and Helmick's predecessor, Lt. Gen. Lloyd Austin, who told Drinkwine that his wife would have to step down as brigade FRG adviser.</p> <p>But the problems continued.</p> <p>"What was concerning to me was that verbal requests were given to rectify a situation and they weren't really heeded," Helmick told Army Times. "That's why after the investigation was completed and the recommendations were made, I put it in writing. When you put it in writing, people really take you seriously."</p>
<p>10. Grace, L. A. (2012). Good Idea Fairies: How Family Readiness Groups and Related Private Organizations Can Work Together to Execute the Good Ideas. Army Lawyer, 25-34.</p>	<p>Outlines the legal and financial obligations of the FRG by law and historically when these laws came into effect as denoted by a Brigade Judge Advocate (Army Attorney).</p> <p>Discusses Army Regulation (AR) 608-1 (p. 26), minimum expectations by AR and what commander is expected to do.</p> <p>Discusses funding sources (p. 26 and p. 27) and sources of frustration and friction between commanders and FRG leaders.</p>	<p>"Family Readiness Group volunteers donate countless hours and devote a significant amount of energy—many out of a sense of obligation—to help make a challenging lifestyle a little better for the unit. They receive no financial compensation for their efforts, yet as a command-sponsored organization, they are restricted by the same rules and regulations as paid employees."(p. 25)</p> <p>On July 21, 2006, the Department of the Army revised Army Regulation (AR) 608-1 to add the new Appendix J, Army Family Readiness Group Operations.' This revision represented a seismic shift in the world of FRGs—they became official Department of the Army (DA) organizations.* While gaining recognition as an official Army organization has advantages, it also means that FRG volunteers are subject to the same statutory and regulatory restraints as federal employees, including restrictions contained in the Joint Ethics Regulation (JER)^ and the Department of Defense (DoD) Financial Management Regulation.* Gone are the days when Family Support Organizations, as they were formally called, could raise unlimited funds. Fundraising restrictions are a source of frustration for commanders and FRG volunteers, especially for those who fail to appreciate that the FRG's mission is communication, not social events. Having the wrong focus can lead to dysfunction in both the FRG and the unit, which may detract from the mission.' (p. 25, p. 26)</p> <p>FRGs have the explicit mission to: "(1) Act as an extension of the</p>

<p>10. Grace, L. A. (2012). Good Idea Fairies: How Family Readiness Groups and Related Private Organizations Can Work Together to Execute the Good Ideas. Army Lawyer, 25-34.</p>	<p>Outlines the legal and financial obligations of the FRG by law and historically when these laws came into effect as denoted by a Brigade Judge Advocate (Army Attorney).</p> <p>Discusses Army Regulation (AR) 608-1 (p. 26), minimum expectations by AR and what commander is expected to do.</p> <p>Discusses funding sources (p. 26 and p. 27) and sources of frustration and friction between commanders and FRG leaders.</p>	<p>“Family Readiness Group volunteers donate countless hours and devote a significant amount of energy—many out of a sense of obligation—to help make a challenging lifestyle a little better for the unit. They receive no financial compensation for their efforts, yet as a command-sponsored organization, they are restricted by the same rules and regulations as paid employees.”(p. 25)</p> <p>On July 21, 2006, the Department of the Army revised Army Regulation (AR) 608-1 to add the new Appendix J, Army Family Readiness Group Operations.' This revision represented a seismic shift in the world of FRGs—they became official Department of the Army (DA) organizations.* While gaining recognition as an official Army organization has advantages, it also means that FRG volunteers are subject to the same statutory and regulatory restraints as federal employees, including restrictions contained in the Joint Ethics Regulation (JER)^ and the Department of Defense (DoD) Financial Management Regulation.* Gone are the days when Family Support Organizations, as they were formally called, could raise unlimited funds. Fundraising restrictions are a source of frustration for commanders and FRG volunteers, especially for those who fail to appreciate that the FRG's mission is communication, not social events. Having the wrong focus can lead to dysfunction in both the FRG and the unit, which may detract from the mission.' (p. 25, p. 26)</p> <p>FRGs have the explicit mission to: "(1) Act as an extension of the unit in providing official, accurate command information. (2) Provide mutual support between the command and the FRG membership. (3) Advocate more efficient use of available community resources. (4) Help families solve problems at the lowest level."^</p> <p>The extent of the individual FRG's mission will depend on the expectations and support provided by the commander. At a minimum, an FRG will hold FRG member meetings, hold FRG staff and committee meetings, draft and distribute official newsletters, maintain and update unit rosters and family readiness information, establish telephone trees, and schedule educational briefings</p> <p>Family Readiness Groups are permitted to host social activities paid for with informal funds,^ but it is not their mission. Many</p>
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<p>12. Hightower, KathieScherer, Holly Keep busy while spouse is deployed Air Force Times, 2005, 65, 35, 37-37</p>	<p>This shows multiple perspectives on maintaining positive goals and education in order to have positive interactions within FRGs. Shows some ways to foster supportive climates that improve mind, body and spirit.</p>	<p>Others tell us their biggest problem with deployment, especially to Iraq, is finding ways to forget their constant anxiety, even if only for moments. Others express how lonely they are.</p> <p>We asked spouses what worked for them. Almost all of them told us they dove into a project, either improving their mind, body or spirit; taking on a new business or career; or making a difference in other people's lives.</p> <p>Deborah Davis was the family readiness group leader for the Army's 1st Infantry Division when her husband deployed from Germany to Iraq. She decided to put her marketing skills and interest in health to work. She's created a healthy-cooking TV show in Wurzburg involving other military spouse hosts and chefs, as well as active-duty and reserve chefs.</p> <p>Army spouse Amy McCormick found a new interest when her husband was in Iraq. The mother of twins started weight training and competitive bodybuilding. A year later, she's entering her second season of competitions.</p> <p>"You just need to do something positive for yourself," she said. "It gave me a goal for myself, something else to focus on besides worry about my husband."</p> <p>Spouses of the Stryker Brigade Combat Team at Fort Lewis, Wash., signed on for a "Walk to Iraq and Back" program when their spouses deployed to Iraq. Lisa McCaffrey, Andrea Schaille and Sherri Becker were among the 164 spouses who took part in the opening mile walk in October. Participants report their mileage, which simulates the distance from Fort Lewis to Iraq. Progress is tracked on a map for all to see. "The walking helps reduce our stress," Becker said.</p> <p>Stephanie Pompa is a family readiness group leader at Fort Lewis. She spent much of the time her husband was deployed collecting backpacks, school supplies and shoes for the Iraqi school built by her husband's battalion.</p>
<p>13. Phillips, E. (2013). The Engaged Leader Paradigm. Military Review,</p>	<p>Addresses the impact of FRGs and leadership of FRGs. Additionally places overall responsibility of the commander to</p>	<p>Soldiers wrote extensively of their concern for their spouses' well-being during past deployments, of negative family readiness group (FRG) experiences, and offered various solutions to the problem of family stress during deployments.⁴ While not empirical evidence, those anecdotes are illustrative examples of a broader crisis of</p>

<p>93(4), 45-52.</p>	<p>ensure some degree of support.</p> <p>This reviews the strategic level meetings that occur above brigade level for family readiness and emphasize the importance of implementation at the lowest levels (p. 46)</p> <p>Definition of FRG and the paradox of the FRG as a mandatory all volunteer organization run by family members (p. 47)</p> <p>More than likely those who respond to surveys are the small percentages that volunteer, therefore survey still is not a representative sample of FRG members both active and inactive. (p. 47)</p> <p>Also information about how soldiers view FRGs from one small Post Deployment survey mandatory on one</p>	<p>leadership, namely, who specifically is responsible for taking care of families. The responsibility for family readiness belongs to commanders, especially at the lowest unit levels. (p. 45)</p> <p>As the 2010 HP/RR/SP report notes, the contributing factors to a failed relationship can be complex and varied.⁶ I submit that good leadership is important to family readiness, and although family readiness receives lip service, it is rarely seriously discussed in relation to soldier morale and readiness. The discussion that follows is woven from three strands. (p. 46)</p> <p>As it relates to family and soldier readiness, to make sure this top-down approach is effective, there needs to be a bottom-up effort on the part of units to make sure that trends, needs, best practices, and lessons learned are being identified and shared.</p> <p>Definition: Army Command Policy defines family readiness as “the mutual reinforcement provided to soldiers, civilian employees, retirees (regardless of marital status), and their family members—both immediate and extended. Examples include Family Readiness Groups (FRG), newsletters, telephone trees, and other volunteer programs and activities.”¹³</p> <p>I’ll say only one more thing on the matter of my wife. She, smartly, has said that FRGs shouldn’t be run by family members. There’s simply too much anxiety and too much pressure, and too much potential for rivalry...¹⁵</p> <p>The quote above gets at the paradox at the heart of the FRG system—a required command program staffed by volunteers, one which requires family members undergoing the stress of military life to give of their time and energy for other families undergoing many of the exact same stressors (p. 47)</p> <p>Surveys show most are happy with their FRGs (p. 47), but a look at the numbers shows: “Surveys issued to spouses are never mandatory, and so one could hypothesize that those who voluntarily respond to</p>
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	<p>installation. 51% did not have their spouse involved in an FRG (reasons unknown).</p> <p>Indicates the shift to volunteers instead of contractors for family readiness and assistance (p. 48)</p> <p>Discusses outgrowing FRGs and two reasons FRGs may be suffering from a social/societal perspective.</p> <p>Engaged Leader Paradigm is the framework the author supports to remove official pressures from volunteers.</p> <p>Views FRG future with decreased responsibility to assist (p. 51) and more emphasis placed back on command and Boards/Panels collecting information to target areas of need.</p> <p>Note: Maybe in addition to</p>	<p>a survey on Army family life might be the kind of spouses who are already more involved in their spouse's unit. Spouses who finds the Army lifestyle intimidating or not to their taste, or whose soldier spouse does not inform them about the Army or their unit, would probably be less likely to respond to a survey from the Army." (p. 48)</p> <p>A survey of soldiers returning from deployment paints a smaller but contradictory picture of FRGs. The Reintegration Unit Risk Inventory is an 80-item questionnaire that screens for high-risk behaviors and attitudes related to combat and post-combat experiences that may compromise unit readiness. The inventory is required by Deployment Cycle Support (DCS) Directive, dated 26 March 2007, and is conducted 120 to 180 days after redeployment.¹⁹ Fifty-one percent of redeploying soldiers indicated on the inventory that their spouse did not participate in a family readiness group.²⁰ When asked to rate their FRG, 13 percent said poor and 33 percent said the question did not apply to them (p. 48)</p> <p>Like so many other proficiencies, tasks, and skills, family care was outsourced during Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF). This time, however, the responsibility fell not to contractors, but to the families themselves.</p> <p>Results from a 2002 study of a 193-man sample from two infantry battalions at Joint Base Lewis-McChord (then Fort Lewis) showed that when asked to rate their identities as a soldier, 75 percent of respondents viewed their family identities as the most salient, and 93.8 percent viewed their family identity as one of their top three salient identities.²²</p> <p>There are two key reasons for why the Army might have outgrown the FRG paradigm: a negative view of FRGs, and a need to overcome a misunderstanding of the commander's role vis-à-vis family care after 10 years of family-member run FRGs. The 4 August 2011 rapid action revision of Army Command Policy even appears to de-emphasize the role of the FRG. The acronym appears only three times in</p>
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	<p>Community Health Promotion Councils (CPHC and Brigade Health Promotion Teams BHPTs there can be Battalion Health Promotion Teams and Company Health Promotion Teams)?</p>	<p>the regulation, not including its appearance in the glossary. Each time the FRG is mentioned in Army Command Policy, it is in conjunction with other tools for family readiness, and with an emphasis on self-sufficiency on the part of the soldier and his or her family.</p> <p>Engaged leader paradigm would shift pressures off spouses, not eliminate traditions of volunteering and relationships, but remove responsibility from spouses. (p. 51)</p> <p>As the Army returns to more garrison-based operations, there is no reason why a leader's answer to a soldier's family stresses should ever be, "Let the FRG deal with it." Instead, an engaged leader knows the relevant resource, ensures that the soldier takes full advantage, and tries where appropriate to include the soldier's spouse.</p>
<p>14. Don't let spouses' ranks influence family support. Air Force Times, 2010, 70, 52, 13-13</p>	<p>Speaks of the hierarchical structure that may exist in FRGs</p> <p>Speaks of the dangers of this structure</p> <p>The FRG support structure "allows a hierarchy", speaks to difference needing to exist.</p>	<p>Take the allegations against a colonel's wife at Fort Bragg, N.C., who has been barred from most brigade activities because of reports that she was hurting the morale of soldiers and their spouses</p> <p>"She just made the case for, ' Let 's be careful around the colonel's wife,'" said Karen, an Army wife who asked not to be identified further. "She just blew eight years of work people have done in family readiness groups."</p> <p>The Army's family readiness support structure allows a hierarchy of leaders who are commanders' spouses - mostly wives.</p> <p>"There are wives who have their husband's rank embroidered on their bra straps," Karen said. "And there are those of us who don't care about that."</p> <p>But the fact remains, she said, that "when you have a society where what you wear on your shoulder matters, it rubs off on the family."</p> <p>But what about young spouses who encounter this "dark side" of family readiness groups?</p> <p>"Will they cease to be involved because they think this is the way everyone will act? To me, the real danger is the drop-off factor," said Joyce Raezer, wife of a retired Army officer and chief operating officer of the National Military Family Association.</p> <p>Raezer said that if these spouses are "turned off" to family support ,</p>

		<p>the well-being of their families could be affected.</p> <p>Is this situation at Fort Bragg just an aberration? I hope so.</p>
<p>15. JBLM Family Readiness Center. (2011). <i>US Army Family Readiness Group Leader's Handbook</i>. Available from: http://www.jblmmwr.com/pdf/acs/family%20resource%20ctr/FRG%20Leaders%20Guide.pdf</p>	<p>Discusses mission and goals of FRGs (p.7)</p> <p>Outlines how to implement a "successful" FRG program (p.8)</p> <p>Outlines duties of key members</p> <p>Outlines how to respond to crisis and what numbers to call (noting especially commanders (p.53, 56, 70, including abuse/neglect report to Family Advocacy- 72)</p> <p>Note: may be issues in reporting immediacy if going to commander or other sources. Can report/consult, but must know next steps immediately.</p>	<p>The FRG is an organization of Family members, civilians, and Soldiers belonging to the unit that together provide information and assistance to others in the group during periods of separation, thereby, reducing stress.</p> <ul style="list-style-type: none"> · _FRGs provide a network of communication between the Family members, chain of command, and community resources. · _FRGs create a climate of mutual support within the group. They have the potential for improving a unit's readiness. · _The FRG program involves organization, training, administrative support, and command interest from military organizations, in conjunction with support from volunteers, oriented toward assisting unit Family members during deployment by the unit. (p.7) <p>When problems with families occur, the first line of defense is the commander and the FRG. The following situations were put together in an effort to help FRG leaders talk over some common situations which may require you to refer someone to a military or community agency for assistance. Use these or other examples for discussion groups with military and other FRG representatives (p. 53)</p>
<p>16. Sandza, R. (2013, August 5). An epidemic of abuse. <i>The Army Times</i>, pp. 16-20.</p>	<p>Child abuse has increased- another argument for ensuring adequate crisis response on all parties.</p>	<p>Child abuse has increased nearly 40% in the Army from 2009-2012, correlated strongly with post-deployment integration and stress in the home when the soldier is away on duty</p>

<p>17. Hall, L.K. (2008). <i>Counseling Military Families: What Mental Health Professionals Need to Know</i>. New York, NY: Taylor & Francis Group, LLC.</p>	<p>Young demographic of spouses (p. 76)</p> <p>Quotes about military spouses being more independent and career minded, implications (p. 76)</p> <p>Also history and culture of FRG (p. 76)</p>	<p>Statistically, Army spouses give birth to their first child in their late teens and early 20s, therefore young spouses and recently married family members who may need the resource and support the most may not be prepared for the hazards associated with Family Readiness Groups (Hall, 2008, p.76)</p> <p>Today, military spouses are more independent and less likely to view themselves as just an extension of military members. (p. 76)</p> <p>Many spouses, particularly the young and newly enlisted don't know such orientation programs exist, some don't have time, and others just don't see the point.</p> <p>Since 1990s organizations have worked to adapt to military life in a formal way (FRGs).</p>
<p>18. National Association of Social Work. (2012). <i>NASW standards for social work practice with service members, veterans, & their families</i>. Washington D.C.: National Association of Social Workers.</p>	<p>-NASW supports that military and veterans have their own unique set of challenges and values and those working with military work must acknowledge (p.6-7)</p> <p>-Need is greater for social workers (p.6)</p> <p>-Ethics and values- cultural competency and privacy and confidentiality, social and political action and constraints (p. 14-15)</p>	<p>-It is heavily researched and supported that the current "modern" Army family comes with its share of unique challenges and complexities (NASW, 2012)</p> <p>"Social workers have an opportunity to influence a range of professionals, stakeholders, and laypeople regarding the importance of responding to the needs of military and Veteran populations" (p. 6)</p> <p>" Social and political action: the engagement in action that seeks to ensure that all people have equal access to resources, with understanding of the limits imposed by the client's military status or employment situation." (p. 15)</p>
<p>19. Jowers, K. (2013,</p>	<p>-supports more de-emphasis of</p>	<p>Congress created the Pentagon's Military Family Readiness Council with a noble intention - to monitor the effectiveness of</p>

<p>February 18). Military leaders fail to show for family council. <i>Air Force Times</i> 7. Retrieved November 10, 2013, from NewsBank on-line database (Access World News)</p>	<p>leadership in military family readiness</p> <p>-Competing interests? Scheduling?</p> <p>-Limited time provided at the highest levels- i.e. 4 hours!?</p>	<p>military family programs to see what works, what doesn't and what needs to be changed.</p> <p>But in its four years of existence, the council has had problems simply getting enough of its members to show up for actual business to be conducted.</p> <p>The council 's most recent meeting was scheduled weeks in advance for Jan. 22. Yet none of the three-star officers from each service who are the council 's heavyweights even bothered to attend. Instead, they sent representatives - who lack the power to vote on actions in council meetings.</p> <p>The services' senior enlisted advisers, who also sit on the council , had a slightly better showing: The Army and Air Force advisers were there, but the Navy and Marine Corps advisers sent representatives in their stead.</p> <p>In fact, the council was able to meet, conduct business and vote only because the six spouses who sit on the council all managed to show up. The six were added to the council by Congress last year, increasing its size to 18 members.</p> <p>Karen Golden, deputy director of government relations for the Military Officers Association of America, sat in on the Jan. 22 meeting. She noted the council must meet only twice a year, generally for two hours each time.</p> <p>"Four hours in one calendar year is not a lot of time to discuss programs that have an impact on the lives of people who have sacrificed so much," said Golden, who follows the council 's activity - or inactivity.</p> <p>The council is supposed to be evaluating programs, she said, "but I don't see the outcome of the evaluations. I assume it would be critical to know which programs work, which have a great return, and which are not needed."</p> <p>The uniformed decision-makers on the council need to be at the table, Golden said.</p> <p>"Is this an appropriate message to families, that the very leadership that can make these decisions can't attend?"</p> <p>At its Jan. 22 meeting, the council did agree to move up its next meeting, scheduled for June, to sometime in the spring.</p>
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<p>20. Prasad Balkundi , Martin Kilduff The ties that lead: A social network approach to leadership The Leadership Quarterly, Volume 16, Issue 6, December 2005, pp. 941–961. DOI:10.1016/j.leaqua.2005.09.004</p>	<p>Social Network Theory (p. 419) as it applies to leadership and why it is so critical to understand leadership impact in a social network and manage it properly</p> <p>Demonstrates how it appears managing social networks may be intrinsic to leadership which is far from supported (p. 420)</p> <p>It is a social network by definition and because of that it must facilitate the social aspects (social capital) to be successful.</p>	<p>Good administrators sometimes fail to understand social structure, and fail to anticipate its consequences for organizational survival (p.419)</p> <p>This story illustrates the gap at the heart of our understanding of leadership. It illustrates how important it is for would-be leaders (who may or may not hold formal supervisory positions—see Bedeian & Hunt, in press) to accurately perceive the network relations that connect people, and to actively manage these network relations.</p> <p>illustrates how informal leaders who may lack formal authority can emerge to frustrate organizational functioning through the manipulation of network structures and the exercise of social influence (p. 420)</p> <p>“little empirical work has been done on leadership and social networks” (Brass, Galaskiewicz, Greve, & Tsai, 2004, p. 800)</p> <p>“Social capital is at the heart of social network analysis” (p. 421)</p>
<p>21. DID NOT USE Lutgendorf, M. F. (2012). Reports to the Navy's Family Advocacy Program: Impact of Removal of Mandatory Reporting for Domestic</p>	<p>It's possible that mandatory reporting/permisive reporting may be another channel for those fearful of retribution through command or post services such as the FAC (unsure what decline is attributed to) Brings up question- how is</p>	<p>P702-The impact of mandatory reporting laws on domestic violence reports is unclear. In 2006, the Department of Defense removed its requirement for mandatory reporting of domestic violence against adults</p> <p>p.702-Domestic violence reports to the Navy Central Registry have declined over the past 11 years, even with the removal of the requirement for mandatory reporting of domestic violence.</p>

<p>21. DID NOT USE Lutgendorf, M. F. (2012). Reports to the Navy's Family Advocacy Program: Impact of Removal of Mandatory Reporting for Domestic Violence. <i>Military Medicine</i>, 177(6), 702-708.</p>	<p>It's possible that mandatory reporting/missive reporting may be another channel for those fearful of retribution through command or post services such as the FAC (unsure what decline is attributed to) Brings up question- how is reporting handled between state and federal jurisdiction? When is command involvement determined</p>	<p>P702-The impact of mandatory reporting laws on domestic violence reports is unclear. In 2006, the Department of Defense removed its requirement for mandatory reporting of domestic violence against adults</p> <p>p.702-Domestic violence reports to the Navy Central Registry have declined over the past 11 years, even with the removal of the requirement for mandatory reporting of domestic violence.</p>
<p>22. Pryce, J.G., Pryce, D.H., & Shackelford, K.K. (2012). <i>The Costs of Courage: Combat Stress, Warriors, and Family Survival</i>. Chicago,IL: Lyceum Books, Inc.</p>	<p>Confidentiality key, yet concerning</p> <p>Likelihood of coming across a crisis (p. 140,63): -Military children have higher rates of anxiety -Suicide rate is higher than combat deaths</p>	<p>With FRGs there was an increase in communication for some spouses between family members and uniformed personnel, however, there was also an increase in private information being inappropriately shared. Often spouses did not know whom they could confide in with their family concerns, and instead of being referred to other professional resources were shunned or outcast from a group or groups</p> <p>evidence shows military children have increasing rates of anxiety (Pryce, G., Pryce, D. & Shackelford, 2012, p.140).</p> <p>Army suicide rate of soldiers (correlated with Post Traumatic Stress Disorder); reported in 2009 to surpass combat deaths (Pryce et. al, 2012, p.63</p>
<p>23. Brown (continued from above) Turner, F. J. (2011). Social work treatment:</p>	<p>Defines social Network Theory and implications for informal care (p. 448, 455)</p> <p>Discusses</p>	<p>A social support network refers to that set of relationships that nurtures and reinforces coping with day-to-day life tasks (p. 448)- they way you offer supports...in a number of different ways...companionship, etc.</p> <p>Compositional vs. structural components- structural is the density of the network, strength of ties (more qualitative) compositional is</p>

<p>24. Kanel, K. (2012). <i>A guide to crisis intervention</i>. (4th Ed). Belmont, CA/Brooks/Cole</p>	<p>Understanding crisis intervention as it relates to confidentiality for FRG members, why it is key</p>	<p>“Confidentiality is one of the hallmarks of any trusting relationship.” (p.33)</p>
<p>25. Ashton, A. (2013, July 5). JBLM furloughs cutting into training, counseling, and more. <i>The News Tribune</i>. Retrieved from: http://blog.thehenewstribune.com/military/2013/07/05/jblm-furloughs-cutting-into-training-counseling-education/</p>	<p>Supports funding cuts going on on macro level- increased emphasis on FRG support</p>	<p>Funding cuts occurring</p>
<p>26. Cornell University’s Family Life Development Center. (2007). U.S. Army Family Readiness Support</p>	<p>Needed supported definition of FRSA from the official resource guide</p>	<p>FRSA (Family Resource Support Advocate) who’s main effort is “to provide the Commander, the Family Readiness Liaison and FRG Leader with administrative assistance in support of Family readiness programs and activities”</p>

<p>Assistant: FRSA resource guide. Ithaca, NY: Wells Communicat ion.</p>		
<p>27. United States Army War College. (2009). Battle Book IV: A guide for spouses' in leadership roles . Carlisle Barracks, PA: U.S. Army War College. Retrieved from: http:// www.carlisl e.army.mil/u awc/mfp/ba ttlebook/</p>	<p>-gives more pertinent historical information</p>	<p>Although there is evidence of spouses assisting each other as early as the Revolutionary War (US Army War College, 2009</p>
<p>28. United States Department of the Army. (2006). Army Community Service, Army Regulation 608- 1. Washington, DC: Headquarter</p>	<p>Ensure definitions from actual Regulation</p>	<p>“a command-sponsored organization of Family members, civilians, and Soldiers belonging to the unit that together provide information and assistance to others in the group during periods of separation, thereby, reducing stress”</p> <p>The FRG provides a network of communication between all members, a climate of mutual support, and “organization, administrative support, training and command interest in conjunction with support from volunteers” (2006, p. 7).</p> <p>Membership is automatic for family members, unless they specify otherwise. AR 608-1 (f) states that commanders will “ensure that their FRGs appeal to all service members, civilians and family members regardless of rank structure or family size, composition, language spoken</p>

s, Department of the Army		and other characteristics” and FRGs that don’t “reflect their unit’s demographics or have a high level of family participation will be re-evaluated” (US Department of the Army, 2006, p. 39).
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FRAMEWORK (Numbers below pertain to Article #) labeled above in numeric order:

This paper addresses the current, complex needs of Army military families and the ability of Family Readiness Groups (FRGs) to address those needs. Army personnel (a Battalion Commander, two Company Commanders, one Family Readiness Support Assistant (FRSA), and three spouses) from different units located at Joint Base Lewis-McChord were requested to participate in an anonymous survey to offer their perspectives and experience in participating in FRGs. After conducting a review of current literature and seven key informant interviews, evidence suggests appropriate Command emphasis and concern for building trusting relationships in the FRG Program may dramatically reduce barriers encountered by military families seeking information and support from FRGs. Feminist and Social Network Theories are applied as a framework to give historical context, current understanding of the problem and address future implications and interventions at the micro, mezzo and macro levels.

The historical and current understanding (gained from both your information survey and key informant interviews/focus group) of the topic or project target population.

Historical: Article #s: 17,15,14, 12 (loneliness and keeping busy during deployments), 13, 11, 6, 1,

Current Understanding: Article #s: 1-6, 8, 9, 13, 22, 17, 16, 15

The impacts of economics, difference and/or diversity.

Economics/funding #s: 10, 11

Difference/diversity #s: 1, 2, 4

The impact of relevant developmental stages.

Young spouses: 17, 14, 13, 4, 2, key informant (L)

Young commanders : 13, (key informant (C, CH, L) , speaks to maturity levels and depth of knowledge in profession- relevance of FRGs to unit mission

The cultural, systemic and global influences as they apply to your target population.

9 (wives wearing rank, leadership not stepping in). Systemic may be the lack of training available to unit commanders (key informants (CH,B, J).

Include a discussion of the NASW ethical practice guidelines.

18, 24

“Social workers have an opportunity to influence a range of professionals, stakeholders, and laypeople regarding the importance of responding to the needs of military and Veteran populations” (NASW, 2012, p. 6)

“Social and political action: the engagement in action that seeks to ensure that all people have equal access to resources, with understanding of the limits imposed by the client’s military status or employment situation.” (p. 15)

Identify and discuss the relevant theoretical frameworks, as well as any research interventions found during the literature survey which are influencing the design of the project.

3,6,7,20, 23- It would be remiss to not incorporate Feminist theory as a lens to view how gender has historically and traditionally shaped Family Readiness Groups both on a micro, mezzo and

macro level. Also may affect how female commanders relate vs. male commanders to networks. While gender provides understanding around circumstances, Social Network Theory provides framework for interventions, as regardless of gender, the impact of command influence may be able to reduce barriers associated with gender roles. Social Network Theory also provides future implications, understanding as a leader why relating, understanding and managing social networks is key to unit morale and mission.

Considering all you have learned discuss what can be done on the micro, mezzo and macro levels to resolve in whole or in part the emerging needs. Create a preliminary needs statement.

Micro: Commander's care factor in leadership position and not permitting toxic leaders to mismanage or lead FRGs for wrong reasons.

Mezzo: leadership on mezzo level, key informant (CH) and Battalion commander's, ability to train commanders and rate them

Macro: leadership on macro level placing more emphasis on programs. Maybe room for this with a shift in momentum as the army downsizes. article 19, 21- research more about the implications of permissive reporting, maybe opening/educating more on that channel as an option to empower key members who encounter crisis and are apprehensive to make a report to command.

NEEDS:

Key informants and literature suggests that negative experiences with FRGs are primarily associated with leadership: either a commander that is does not have a "care factor" or a commander who permits a spouse (knowingly or by lack of interest) who is "toxic" to the FRG. Confidentiality is the second primary concern which may be emphasized by command: It is prudent to emphasize confidentiality on two planes: unit confidentiality for mission needs, and confidentiality as it relates to families. Confidentiality as it relates to the unit may be Administrative Facebook controls, information control on roster dissemination and how far (digital emailings? Etc.) and deployment schedules. Confidentiality as it relates to families may be when a family member's request for assistance warrants command involvement and how individual key members or volunteers refer to resources without compromising trust of that family member. Commanders may be able educate families on the legal implications and channels of reporting, what they warrant/develop as a set criteria (CCIR) that must be reported to them and to higher and let families know up front through initial meetings. Allow service support professionals to be in the room to introduce them and tailor unit needs and command discretion for defining crisis and expectations for responding.

Make it part of officer's overall evaluation, not just how they are as an officer, but how the integrate the families and single soldiers into the whole unit...it's not emphasized as much. For instance- "SHARP is changing".

End with your ideas for the project you are currently considering. What challenges are there to be worked out, what is well supported by the data gathered to date, and what still remains to be answered?

Un-answered- What some referral programs provide in terms of confidentiality, mandatory reporting and what has to have command involvement.

Would be good to provide a few key programs that commanders work with: Family Advocacy, ASAP, MFLC (Military family life counselors), Social workers, chaplains, psychologists.- good information for commanders in an intervention piece.

Question: is it possible to add family readiness as a point for evaluation in OERs? Do supervisors have that flexibility?

Needs Assessment

1. What purpose does the needs assessment serve?

The needs assessment is to find common themes supportive of the problem statement; that FRGs experience barriers in assisting other members, and to find common themes in what those barriers are. Additionally, it will help to know perceptions about why those barriers are encountered.

2. Why am I doing it?

FRGs are mandatory organizations across the military with a large amount of military families affected in perhaps their most vulnerable of times of need (throughout deployments, etc). It would be helpful to develop an educational tool (intervention) that may be employed by commanders and/or FRG programs based upon what spouses, commanders and Family Support Readiness Advocates outline as critical to an FRG for assisting others.

3. How informed am I about my domain of concern?

Having been a member of an FRG holding key positions, working closely with a commander, and also serving in the military I had some initial foundation to explore with this topic. After heavily researching my topic, I found multiple articles on both the positive aspects and negative aspects of FRGs, attempting to conduct further research into themes that emerge from key informants.

4. Who best can inform me of need?

Commanders (since they run the program), spouses (as members and organizers) and Family Readiness Support Advocates (FRSAs) as paid Advocates to support Family Readiness Groups and advise them. Other funding sources and higher administrative positions in ACS Army Community Services would be helpful as supervisors of FRSAs as well as unit Social Workers and other unit support personnel.

5. Where will I conduct the inquiry?

I'm conducting most key informant interviews in areas where there is privacy and limited interruptions (i.e. conference rooms, the spouse club (as suggested by one of the spouses), and in limited cases office or by phone for those who are difficult to schedule time with such as Battalion Commanders).

6. What degree of participation will I see from my informant(s)?

Spouses are a little bit more accessible, FRSAs have been difficult to access due to apprehension in certain units and don't want to be identified as the "only FRSA" in the project. I believe spouses will be mostly forthcoming, just all are busy, so I will have to ensure most information is gathered at the time of interview. Battalion Commanders and Commanders are difficult to get time with but are helpful in assisting.

7. What resource and time constraints must I consider?

If I had more time, I would design a survey to poll many spouses, commanders and FRSA's. Key informant interviews provide some assurance of the "right direction" for potential interventions pulled from research. Schedules are difficult of all parties involved to "marry" up within deadlines of project. I am also limiting interviews to a max of 2 hours to ensure adequate time for all participants (but trying not to demand too much time).

8. Is the design consistent with the limitations of the practice arena?

I believe the design of selecting key informants is conducive to naturalistic inquiry, incorporating demographic information and some open ended questioning to inform my research and not dictate what I "think" may be the major contributing issues to address and/or interventions. This form of questioning allows for some flexibility as the reading suggests, allowing participants the freedom to express their major concerns on the topic with focus on particular experience.

9. Can the design lead to the discovery of information sufficient for articulating goals, objectives, and expected outcomes of an intervention?

I believe the design can lead to the discovery of information sufficient for articulating goals, objectives and expected outcomes.

10. What are some of the ethical and field limitations that influence the design?

Initially when I started, I was worried about how participants will be perceived if they are "singled out" in the context of such a large organization (the military). Therefore, I opted for information going forward to not specify any identifying information. Connecting with participants is a challenge as well, because if you ask someone else for a contact, you may have already divulged that person's identity if they know it is relative to the project. Therefore contacting multiple people to be interviewed is key as to not "single" someone out. Building a rapport will be instrumental in asking for people's time, I believe letting them know my background as a spouse and servicemember will help. I will state all general concerns up front in the consent form (such as mandatory reporting) and client rights. I am opting to **not** interview anyone I know too personally or that assists my husband's unit in a spouse's capacity, since there are too many conflicting interests involved and I may feel obligated in the future to advocate for them (if I know who they speak of).

Family Readiness Groups: A Social Work Perspective on the Valued Importance of Command
Supervision

This paper addresses the current, complex needs of Army military families and the ability of Family Readiness Groups (FRGs) to address those needs. Army personnel (a battalion commander, two company commanders, one Family Readiness Support Assistant (FRSA), one soldier and three spouses) from different units located on Joint Base Lewis-McChord (JBLM), Washington were requested to participate in an anonymous interview to offer their perspectives and experience in participating in FRGs. After conducting a review of current literature and eight key informant interviews, evidence suggests appropriate command supervision, concern, and accountability for building trusting relationships in the FRG Program may dramatically reduce barriers encountered by military families seeking information and support from FRGs. Feminist and Social Network Theories are applied as a framework to give historical context, current understanding of the problem and address future implications and interventions at the micro, mezzo and macro levels. Proposed methods for implementation of policy, best practices and accountability as a command program are also discussed.

History of the Family Readiness Group

Throughout history, the role of military spouses welcoming other spouses, integrating families into service-member life and offering resources for families and troops is well documented in academic articles, books, journals and media. Although there is evidence of spouses assisting each other as early as the Revolutionary War (United States Army War College, 2009), it was not until July 21, 2006 that the Department of the Army (DA) revised AR 608-1 to add 'Army Family Readiness Group Operations' or Appendix J (Grace, 2012, p. 25). The purpose for selecting the name "Family Readiness" was to ensure more self-sufficiency and readiness among Army families in a "modern Army" (JBLM Family Readiness Center, 2011, p.

7). Before the Army Family Readiness Group gained official DA recognition, it was subject to other cultural, societal, political norms and influences as a predominately female, informal group. As Lena Dominelli (2002) noted, 'considering social construction of gender and separating needs of all populations working as an insider or outsider' can be critical in viewing how populations are served (Valentich, 2011, p. 212). The term "Army wife" is common in a current, cultural context yet expresses the conventional role female spouses have historically adapted; as if to suggest "she were married to the Army itself" (Gassman, 2011, p. 5). The institutionally reinforced role of an Army spouse as a caregiver and committed volunteer to the soldier's career formulates many diverse views and conflicting concept about the role of a current Family Readiness Group. Additionally, how the spouse relates to the Army institution as an "outsider" gives context to other dynamics in Family Readiness Groups. As a fairly new, official Department of the Army organization born during the "longest sustained deployment in U.S. history" it is only expected that the Organization, rich in tradition and culture since the dawn of the Army would encounter a myriad barriers in addressing challenges of the modern, Army spouse (Aronson & Perkins, 2013, p. 516). Commanders especially play a pivotal role in how to address those barriers. A constructive look at the structure and dynamics of modern Army FRGs, Army leadership and how they continue to adapt to the pressures of the current State of the Army family is strongly warranted and hopefully welcomed by all with the acknowledgement of such a critical mission.

State of the Army Family

Over 50% of Army soldiers are married, the ratio of children to soldier-parents is about two to one, and about 6% of soldier-parents are single (Unites States Army War College, 2009, p. 40). It is heavily researched and supported that the current "modern" Army family comes with its share of unique challenges and complexities (NASW, 2012; Aronson & Perkins, 2013).

Statistically, Army spouses give birth to their first child in their late teens and early 20s (Hall, 2008; Ahmadi & Green, 2011). A high concentration of young spouses and recent marriage may indicate greater demands for resources and support. Moving frequently and re-establishing in a new location, employment, seeking resources for schooling, education, financial aid and social supports are just a small list of many needs. Furthermore, research indicates deployment stress in addition to the everyday needs of the military family result in a need for intensive resources and services; a point noted by the Federal Government (Ahmadi & Green, 2011). Child abuse has increased nearly 40% in the Army from 2009-2012, correlated strongly with post-deployment integration and stress in the home when the soldier is away on duty (Sandza, 2013). A 1999 study by Adler-Baeder & Pittman (2005) indicated at least 20% of all service members have experienced divorce. Additionally, evidence shows military children have increased rates of anxiety (Pryce, G., Pryce, D. & Shackelford, 2012). Perhaps one of the most alarming statistics reported is the Army suicide rate of soldiers (correlated with Post Traumatic Stress Disorder); reported in 2009 to surpass combat deaths (Pryce et al., 2012).

With the high incidence of challenges and trauma associated with Army families it is imperative that all community resources be available to military families in a highly sensitive and supportive manner (Melamed & Cubic, 2011). In 2007, the Army mobilized resources in recognition of increased need, moving "\$1.4 billion from supplemental war funding to the Army's base budget," appropriating funds to Army readiness and paid positions in support of this mission. General Casey as the Army Chief of Staff appropriated \$100 million for "family readiness activities and paid positions" (Cavallaro, 2007, p. 14). However much funding is appropriated, there are still ongoing furloughs and cuts for paid positions for Family Readiness Support (Ashton, 2013). The continuing limitations on financial resourcing for family programs contribute to a need for increased flexibility on the Army and Army families to meet family needs; a pressure all

professionals and families should be aware of. Despite macro level policy and resourcing, a delicate balance of resources may be initiated at the unit levels, but requires prudent efforts from commanders and FRG members. In many cases, the Family Readiness Group can be a first resource or encounter for additional supports for families.

What Is the Definition of a Family Readiness Group?

In FRG structure, there is an “FRG Leader” or “Co-Leader(s)” with Points of Contact (or key members) who contact spouses. In some units, assistance is facilitated through a Department of Defense, paid employee called a FRSA (Family Resource Support Assistant) who’s main effort is “to provide the Commander, the Family Readiness Liaison and FRG Leader with administrative assistance in support of family readiness programs and activities” (Cornell University’s Family Life Development Center, 2007, p. 5). Structure may be varied, dependent on many factors such as size of the unit, type of unit or mission, command influence and how Army posts have structured FRSA support.

Depending on the Commander, a unit may have different understandings of what an FRG is able to offer or sustain. The regulation and Handbooks outline a definition (and by intention or not) leave room for creativity in implementation. The United States Army Regulation (AR) 608-1 (2006) definition is “a command-sponsored organization of Family members, civilians, and Soldiers belonging to the unit that together provide information and assistance to others in the group during periods of separation, thereby, reducing stress” (p. 7). The FRG provides a network of communication between all members, a climate of mutual support, and “organization, administrative support, training and command interest in conjunction with support from volunteers” (United States Department of the Army, 2006, p. 7). Membership is automatic for family members, unless they specify otherwise. AR 608-1 (f) states that commanders will “ensure that their FRGs appeal to all service members, civilians and family members regardless

of rank structure or family size, composition, language spoken and other characteristics” and FRGs that don’t “reflect their unit’s demographics or have a high level of family participation will be re-evaluated” (United States Department of the Army, 2006, p. 39).

The JBLM Handbook regards the commanders and the FRG as the “first line of defense” when family “problems” occur (JBLM Family Readiness Center, 2011, p. 53). As a command-sponsored program, the commander is responsible for the program establishment and implementation. Although there are suggested methods by which to implement a “successful” organization in the JBLM Handbook, there is little in research indicating the methods are scientifically supported (JBLM Family Readiness Center, 2011, p. 53). One significant note determined by Key Informants and the Department of the Army regulation is that the commander remains the responsible and legitimate authority within Family Readiness Groups, maintaining accountability for the Organization.

All key informants interviewed define the mission of FRG as a primary mechanism by which to disseminate information for ongoing support and resources (personal communication, 2013). However, the nature of the “problems” by which commanders and members agree FRGs may respond to vary greatly. Pryce et al. (2012) sites the most challenging times of spouses were being informed, misinformed or uninformed about serious incidents that occurred within the unit, especially during deployment. There are spouses and commanders who define the FRG as more of a social support than responding to crisis, however, it is more than likely inevitable this may happen as a first resource or contact with a spouse. As indicated by a Key Informant spouse stationed at one time in Fort Hood, her experience had been part of an FRG as first responders in a crisis when a mass shooting occurred in a gym of deploying soldiers. She stated, “four of the fifteen soldiers killed were in our unit and fifteen of the thirty-two wounded were in our Brigade...we (FRGs) were called in to provide support for families,

staying with wounded soldiers in barracks and greeting families flying in for funerals” (personal communication, November 4th, 2013). Another spouse stated they offered support to a wife who’s husband had multiple cardiac arrests, providing around the clock emotional support, meals and childcare (personal communication, November 8th, 2013). These types of examples are successful stories of the invaluable crisis response FRGs may offer. In times of the “ultimate sacrifice” or death of a soldier, the Army has a specialized team of trained FRG members called Care Teams, handpicked by commanders to respond to the most difficult of circumstances. No matter the support response, it is evident the FRG “operates like a network” to respond from commonplace tasks to the most difficult of circumstances, offering official information “proactively” in order to reduce stress amidst news reports, rumors and lack of communication or support (Euson, 1995, p. 32). As noted, the great versatility in FRG roles and ability to meet family social supports are highly defined by the unit and unit leadership. Inevitably, many challenges and barriers arise during this process.

FRG Challenges and Barriers

Research cited by both Pryce et al. (2012) and Hall (2008) indicate confidentiality, organizational leadership (both uniform and civilian), and a changing culture within the volunteer organizations may pose significant challenges to seeking support from the FRG as intended. It is important to highlight the critical roles commanders play when encountering these barriers.

Confidentiality As It Relates To Families

There are two major subsets of confidentiality: unit confidentiality for mission needs, and confidentiality as it relates to families. Confidentiality as it relates to the unit mission may be administrative Facebook controls, information management on deployment schedules and details of significant injury or death prior to family notification processes. Confidentiality as it relates to

families can be when a family member's request for assistance warrants command involvement and how individual key members or volunteers refer to resources without compromising trust of that family member. As cited by Pryce et al. (2012), the FRG brought a welcomed increase in communication for some spouses between family members and uniformed personnel, yet, there was also an increase in private information being inappropriately shared. Often spouses did not know whom they could confide in with their family concerns, and instead of being referred to other professional resources were shunned or outcast from a group or groups.

Communication between commander and FRGs.

It is outlined in the AR 608-1 that the FRG "provides feedback to the command on the state of the unit 'family' " (2006, p. 39). The task implies a direct relationship of reporting to the commander on spousal needs and the task becomes even more complex depending on the sensitivity of the spouse's issue(s) and how they affect the unit. A large implication then becomes ensuring quality response of a key volunteer based upon adequate training, referral, crisis intervention skills and how to identify an issue that needs to be "reported" to the commander and/or other authority (such as the authorities in mandatory or permissive reporting). Additionally, it is a precarious position for the volunteer to decipher the fine line between gossiping with other members and acquiring resources and interventions for very private matters. Key Informants who were Commanders spoke to the challenge of outlining specifically what should and shouldn't be brought to them. For instance, a battalion commander summarized that if he *did* articulate to commanders and families what should be brought to him specifically, it may isolate other matters that could be just as pertinent and deserving of his attention. For these reasons, the reporting process can be very convoluted and add additional stress for the volunteer who is potentially not formally trained in crisis response and/or mandatory/permissive reporting. It was noted that all Key Informants except for one spouse supported implementing a system in

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FRGs for permissive/mandatory reporting in the case of abuse or neglect of vulnerable populations (personal communication, November 3rd, 4th, 8th, 11th and 15th, 2013).

The referral process and FRG leadership involvement.

All members of FRGs and outside referral sources may not have a clear understanding of what must be disclosed to the commander (and potential implications) during the referral process to outside programs such as Family Advocacy and Substance Abuse. Since the commander can professionally affect a soldier's career, it is important to know when command involvement is warranted and to empower families and FRGs in the advocacy and/or referral process. For example, one unit commander disclosed that the Military and Family Life Counselor (MFLC) told the commander that a service-member in her unit was seeking marital counseling. The commander stated, "I was unsure why the counselor was bringing the soldier's marital counseling to my attention...I'm pretty sure it was a mistake" (personal communication, November 8th, 2013). It is clear that even when professionals and commanders are likely to encounter confusion as to what is deemed appropriate for confidentiality, so will the FRG volunteers.

Varied standards for phone rosters and information dissemination.

FRG leader(s) and phone points of contact also have access to private phone rosters and phone numbers used for "official" information dissemination. In some cases, the phone roster may be misused, accessed and shared without a general unit consensus on what the conditions of "official" phone calls or emails should be. Key informants experienced different approaches to confidentiality as it relates to phone rosters. For instance, methods of emailing numbers to those with only a "need to know" vs. emailing the entire roster to all members of the FRG were encountered. One spouse thought no digital copies should go beyond the commander and FRSA, advocating for paper dissemination of phone rosters in person to Points of Contact (personal

communication, November 4th, 2013). For these reasons, it is even more critical to ensure adequate command supervision and competency in being able to defend and support methods chosen for information dissemination.

There are many reasons why confidentiality may be intentionally or unintentionally violated and reports may not receive the appropriate resources and referrals. As Kanel (2012) states, "confidentiality is one of the hallmarks of any trusting relationship" (p. 33). In cases of inadvertent or advertent intention of confidentiality violations, the impact on morale can be devastating to the family, soldiers and unit as a whole. In all cases, it becomes more apparent why a commander is influential in setting a standard for valuing family readiness by enforcing confidentiality, ensuring quality assurance in information dissemination (whether dissemination or referral) and being a trusted source to strengthen families and facilitate knowledge of family rights in the referral process.

Leadership and Potential for Inconsistency

Commanders.

In large part, key informants attested to FRG challenges in communication and barriers stemming from commanders either lacking knowledge of or not placing emphasis on FRGs. While it is difficult to prove the reasons immediately linked to these FRG challenges, almost every spouse and commander attributed stage in lifecycle and inexperience as a potential contributor for lack in command understanding about current, family issues. For example, some spouses stated that commanders not having children or never being married were already perceived differently than commanders who had. A company commander reflected on her experience as they related to FRGs when first commissioned stating, "when I was a Lieutenant, I was single, I never went to meetings or supported FRG events" (personal communication, November 8th, 2013). It wasn't until seven years later, when the commander was the legitimate

authority for an FRG and taking command that she felt the need to contribute, not knowing much about the organization. Some commanders may take command as early as four to five years into their Army Officer career depending on unit need and mission. The time constraint for command is grueling; anywhere from a limited year to two years and condensing all other aspects of Army deployments, training and priorities into that block of time. Both company commanders attested to “on the job training” in reference to their experience as a commander of an FRG (personal communication, November 3rd and 4th, 2013). Both company commanders thought it would have been “helpful” to have an “Officer Professional Development” or OPD opportunity (personal communication, November 3rd and 4th, 2013). Their intent was something “quick,” yet guided by their superior’s experiences, guidelines and expectations for Family Readiness. Many of the commander FRG scopes of responsibility were built upon what their predecessors had set in place, however little or great. Varied approaches to use of technology such as Facebook also were a factor. All aspects of inconsistency could make it even more difficult to assume the command position in the FRG; at the heart of many challenges taking command year after year.

The battalion commander key informant supported the inconsistency in FRG supervision of many unit commanders stating, “the gap between institutional FRG training for company and battalion commanders is significant and I do my best to rectify this deficiency through personal example and coaching and mentoring” (personal communication, November 11th, 2013). The battalion commander was thankful for a Pre-Command Course curriculum in which the Army paid for soon-to-be commanders and their spouses to attend and receive intensive Family Readiness Group training prior to taking battalion command. Although highly valuable, it is implied the training is a difficult resource to acquire for all company level commanders. Considering the ratio of 3 to 5 company commanders for every one battalion commander, resources may be a factor. Additionally, there is no official method of evaluation for officers

sponsoring the Family Readiness Program. The battalion commander stated, “there needs to be a mechanism for accountability. It is a program like Safety, Command Supply Discipline and Army Training Programs, and the commander is responsible” (personal communication, November 11th, 2013). The battalion commander also referenced the need for brigade commanders or higher to have a way to provide feedback (personal communication, November 11th, 2013).

Volunteers.

Phillipps (2013) references the paradox of a mandatory, all volunteer organization stating “it is a required command program staffed by volunteers, one which requires family members undergoing the stress of military life to give of their time and energy for other families undergoing many of the exact same stressors,” (p. 47). Volunteers may decide to volunteer for various reasons, and inevitably with family member volunteers, there can be a conflict of interest. All key informants attested to or referenced negative experiences with a spouse’s abuse of power (personal communication, November 3rd, 4th, 8th, 11th and 15th, 2013). It is arguable that the term FRG Leader is misleading as it imposes a hierarchical (almost militaristic) structure on a civilian, volunteer organization. This hierarchical structure can create a power dynamic between those who are “leaders” and those who aren’t (Jowers, 2010, p. 52). Other factors to consider are commanders who employ their wife as a leader. Specifically, an incident at Fort Bragg demonstrated these complications with a “toxic” environment in which the brigade commander and husband of his spouse in charge of the FRG allegedly stated ‘my wife speaks for me’ (Gould, 2010a, p. 20). The blatant misuse of legitimate authority led to an investigation or 15-6 in which the wife was permanently removed due to gross violations of confidentiality and harassment. The end result was labeling the brigade commander as a “key enabler” of his wife’s actions (Gould, 2010b, p. 36). It is well acknowledged that the careful and complicated selection

of FRG leaders becomes a function of command supervision and guidelines coupled with careful supervision and feedback on their programs.

Volunteer trainings are offered for military spouses, but due to time constraints, resources and scheduling may be completed as late as 6 months after taking the volunteer position (if completed at all). Although Standard Operating Procedures (SOPs) established at the unit level may state that a spouse must complete the training by six months of taking over, commanders vary in approach as to how much they emphasize and reinforce the training. In addition to training, reasons and frequency for FRG volunteer meetings vary according to command emphasis. For example, some commanders may “strongly encourage” their soldiers to attend meetings, essentially making it feel like an official duty to have them and their family members at meetings. Other commanders may have a more social approach, planning more off post events or larger events with fewer informational or educational opportunities. Either way, all key informants support that a balanced approach incorporating both social and informational meetings are instrumental in building FRGs cohesion.

The Changing State of Family Readiness Group Culture

Hall (2008) cites readings that describe the history of the military spouse as a “two-person career,” meaning the soldier received the paycheck for both while the other spouse performed the “duties of a military wife” (p.77). Some spouses feel undue pressure to participate due to unfounded scrutiny if they don’t. As cited by Hall in 2008, a Russo (2000) study stated spouses placed great emphasis on how they are treated by military members. Spouses in the study also felt that their actions should be viewed as separate from military members (p. 76).

One key informant who was a part-time nurse and mother stated, “I felt like it was this unwritten rule, like I would be judged if I didn’t take the FRG Leader position in support of my husband” (personal communication, November 8th, 2013). Just as Feminist Theory outlines the

major political shifts throughout history in women's rights to include working outside of the home, the military is just one more institution experiencing the shift. In a Durand (2000) study cited by Hall (2008), key differences between today's Army spouses and those from prior decades are that women are working more, don't have time for numerous social events, they volunteer less, and about 70% of those she surveyed live in a community off post. A commander key informant attested to meeting attendance hovering around 10% while larger planned events had better participation, and it is difficult to maintain volunteers in some part due to these specific reasons. Additionally, the increasing number in female soldiers will change the demographics of FRGs and more cultural awareness around invitational activities that are not gender-biased should be encouraged. A Goodman (2013) article studying females who deploy and social supports cited a soldier-mother stating, "a few mothers commented that the family readiness groups did not provide supportive services for nontraditional caregivers...such as male spouses or grandparents" (p. 729). All of these impacts should be studied more in depth to understand if the current structure is a structure that encourages and empowers career spouses, families of single soldiers, and women and men alike throughout different locations to participate.

Applied Theories

Feminist Theory provides some historical and current, contextual framing of FRG barriers, however, Social Network Theory provides a more descriptive framework for mobilizing FRG members through cultivation of their networks in the micro, mezzo and macro levels. For example, a female commander stated she felt that her gender did influence her success in "approachability" for other primarily female FRG members in building a successful FRG (November 8th, 2013). However, by Key Informant accounts, there are many males that have proven just as capable to achieve similar results with their FRGs and it would be sexist and

ignorant to prove otherwise. In applying Social Network Theory, it defines a social support network encompassing all relationships that reinforce and nurture a person coping with tasks from day-to-day (Brown, 2011). It is arguable that changing perceptions of how a leader values those networks within their unit is a vital key.

There are two broad sub-fields of social networks that are referenced at the micro, mezzo and macro levels: the study of personal networks as they relate to person in environment (in the context of others and community resources), and the study of the whole network and relationship patterns within defined groups (Brown, 2011). There are descriptive features such as structural components to denote strength or density of ties, whereas compositional features may reference the amount of ties or frequency of interaction (Brown, 2011). Social Network Theory also is composed of supportive and non-supportive ties, building channels for “natural helping networks” (Brown, 2011, p. 448). Some paths of least resistance may develop, and be fostered by both formal (official) and informal (unofficial) helpers (Brown, 2011). It is even more important for commanders to recognize their critical role in supervising the components of a social network. A successful example of this is when one Key Informant commander summarized that she “looked for sections and small groups having their own social functions within the unit” then she asked them if they wanted to combine their social functions into one social function together, such as a BBQ or pancake breakfast (Personal communication, November 8th, 2013). This opportunity allowed her to capitalize on small social networks and supports within the unit, thus, introducing them to other networks.

An article by Balkundi and Kilduff (2005) analyzed the impact of leadership on social networks. They found that good leaders “sometimes fail to understand social structure, and fail to anticipate its consequences for organizational survival” (Balkundi & Kilduff, 2005, p. 419). The authors made a point for leaders to “actively manage” network relationships as a ‘formal helper’,

otherwise 'informal helpers' will do so, authorized or not (Balkundi & Kilduff, 2005, p. 419). They also describe how "informal leaders who lack formal authority can emerge to frustrate organizational functioning through the manipulation of network structures that exercise social influence" (Balkundi & Kilduff, 2005, p. 420). These barriers to FRG members can be seen in the abuse of power aspects that evolve when FRGs are not properly supervised or guided by commanders. The article also makes a point to describe the perception that "managing social networks may be intrinsic to leadership which is far from supported" (Balkundi & Kilduff, 2005, p. 420). The quote supports the relevancy in training and further analysis into whether commanders are actually prepared to do the job they are mandated to do, or just perceived to do so as part of being a leader.

Additional barriers to social networks may be "institutional, economic, professional and conceptual" (Brown, 2011, p. 454). It is recognized that those who may be in need of informal support the most may be marginalized due to not having a caring social network, lacking skills or resources to interact with the network and/or capabilities to interact (Brown, 2011). For these reasons, it is truly important to manage and supervise social networks.

Implications for Social Work and Social Work Values

Any Social Worker working with military personnel and families should be knowledgeable of FRGs and their impacts during assessment. It shows competence on the Social Worker's part if they are familiar with a unit and know the supports in place such as regular meetings, etc. The FRG is a cultural and mandatory aspect of military, family life and it may be a source of support or challenge for a client. More importantly, a value of military social work as per NASW (2012) is "Social and political action: the engagement in action that seeks to ensure that all people have equal access to resources, with understanding of the limits imposed by the client's military status or employment situation" (p. 15). Additionally, if a unit employs a social

worker, it may be prudent to assess the unit culture and environment by attending meetings and potentially setting up regularly scheduled meetings. Circulating will familiarize Social Workers to the environment, and more importantly, familiarize unit members and family with whom the Social Worker is, allowing for more approachability and confidentiality when crisis emerges.

Of course, unit Social Workers will not be able to attend to all best practices of social supports and resources at the micro and mezzo levels, which is why it is critical to know unit commanders and provide an open channel for discussion about best practices in building social networks and group cohesion. Educational opportunities for policy concerning mandatory and permissive reporting for abuse or neglect of vulnerable populations should also be explored. NASW (2012) states, "Social workers have an opportunity to influence a range of professionals, stakeholders, and laypeople regarding the importance of responding to the needs of military and Veteran populations" (p. 6). Social work with a commander is necessary for maximum outreach potential to families in any given unit. Social Workers can be challenged to not just take on a "counselor" role, but also a "consultant" role in how to infuse more educational and community based resources into regular unit meetings. Additionally, one article polled spouses on the most helpful resources for them while a spouse was deployed and spouses stated that activities improving their "mind, body or spirit; taking on a new business or career; or making a difference in other people's lives" (Hightower & Scherer, 2005, p. 37). These types of activities are activities that social workers may and *should* have countless resources on.

Opportunity for advocacy on the behalf of family resources is endless, and can be influential at the macro level. It was recently noted by *The Air Force Times* (2013) that the "Military Family Readiness Council" appointed by Congress to "monitor the effectiveness of military programs" lacked the most senior, appointed, council member officers from every service branch (p. 7). The article stated that although representatives for the three-star Generals

were sent, they lacked the power to vote on actions, and since all six of the spouses appointed to the council showed up, they were able to vote. It is unclear whether this lack of presence on behalf of leadership is consistent, yet may speak to the competing interest of priority for commanders of all ranks. It should be noted that it cannot be assumed that positive change is occurring at all levels, placing more emphasis on the micro and mezzo levels to manage their FRGs effectively. Awareness and advocacy for senior leadership and all Social Workers should be a consistent goal to balance the priority of Family Readiness and set examples for junior leadership.

Developing Needs for the Future

Phillipps (2013) cited a study administered in 2002 consisting of 193 soldiers from JBLM (then Fort Lewis) asking soldiers to rate their identities. The results indicated “75 percent of respondents viewed their family identities as the most salient, and 93.8 percent viewed their family identity as one of their top three salient identities” (p. 22). Leaders and Social Workers who do not consistently try to find ways to accommodate and prioritize the needs of the Army family are potentially doing harm to the soldier. Phillipps (2013) proposes two reasons for why the Army might have “outgrown” the current structure for FRGs: “a negative view of FRGs, and a need to overcome a misunderstanding of the commander’s role” (p. 51). It is possible that both of these challenges may be overcome with appropriate intervention mechanisms as a pronged approach on the micro, mezzo and macro levels. At the micro and mezzo levels, commanders may implement more consistent methods of supervision of their FRGs. This may incorporate but is not limited to ideas for professional development and education, integrative work with unit social workers, a minimum number of mandatory meetings for soldiers or appropriated FRG time during work hours, and unit surveys. Commanders may be able to educate families on the legal implications and channels of reporting, mandatory reporting, and allow service support

professionals to be in the room to foster appropriate guidelines. Additionally, becoming more knowledgeable on confidentiality and the process of referral for Army programs such as Family Advocacy, Substance Abuse, Behavioral Health and Medical needs may be one of the more valuable implied tasks for commanders and family members prior to taking command.

At the macro level it is possible to review the amount of institutional knowledge gained in leadership courses on FRGs, evaluation mechanisms as a command program, and implications of current shifts in employing social workers, FRSAs, support personnel and their duty descriptions. One unit commander stated it could be valuable to use the Officer Evaluation Report (OER) as a means, yet acknowledged the difficulty in devising measurable objectives for a family program with many complexities. In some cases, commanders view the evaluation approach negatively due to limiting creativity and other numerically immeasurable and valuable efforts for their FRGs. In either case, there is ample evidence to suggest the benefits in devising a mechanism or intervention that alters priority and command emphasis in which soldiers and commanders are afforded more time to develop, implement and supervise FRG objectives.

Additional research is encouraged in the area of Army Family Readiness Group needs. A method of accountability and prioritization on the micro, mezzo and macro levels will reduce barriers encountered by Army family members in feeling supported by their unit FRGs. Army commanders need consistent methods of supervising their Family Readiness Groups; and in doing so, commanders will be able to promote unit cohesion, confidentiality and support for optimal FRG member outcomes.

Logic Model Template

Needs Statement: Army commanders need more consistent methods of supervising their Family Readiness Groups; and in doing so commanders will be able to promote unit cohesion, confidentiality and support for optimal FRG member participation and outcomes.

Theoretical Influences and Assumptions: Social Network Theory provides a descriptive framework for mobilizing FRG members through cultivation of their networks in the micro, mezzo and macro levels. Social Network Theory studies social support networks as a whole and all relationships within networks that reinforce and nurture a person coping with tasks from day-to-day (Brown, 2011). The Theory assumes clients are surrounded by social networks that can “support or weaken the efforts of professional helping,” (Tracy & Brown, 2011, p. 447). The balance of formal and informal leadership within social networks is recognized as critical to positively influence an organization, highlighting the relationships between formal command structures and informal volunteers and organizers.

RESOURCES	ACTIVITIES (Process Objectives)	OUTPUTS* (Outcome/Summative Objectives)	OUTCOMES (Short term goals)	*OUTCOME INDICATORS (Outcome/Summative Objectives)	LONG TERM GOAL
<p>One commander willing to implement curriculum with entire Family Readiness Group for duration of command time.</p> <p>Partnerships with special staff such as Chaplains, Social Workers, Dietitians, Psychologists, Family Readiness Support Assistants</p> <p>Partnerships with on post Family Advocacy, Substance Use, Legal and/or other referral programs for resources</p> <p>Location or space large enough to convene meeting</p> <p>Know available FRG funding to supply food or refreshments for meetings</p> <p>Paper and electronic survey logistically available for accomplishing pre/post</p> <p>Devised curriculum and handouts and supplies</p> <p>Flyers of future meeting dates and topics</p>	<p>Develop/build partnerships with support and special staff to assist in facilitating</p> <p>Develop/build partnerships with on post agencies to facilitate correct information for referral and resources for FRGs</p> <p>Create pre-post survey with scale for each meeting</p> <p>Create initial curriculum to strengthen FRGs and build a rapport amongst members</p> <p>Develop curriculums that incorporate current agency referral information (for support)</p> <p>Create curriculums the commander may select from and prioritize according to survey and needs assessment by commander</p> <p>Publish flyers via email and post flyers where applicable about meetings</p>	<p>A minimum of 8 meetings for 60-90 minutes throughout the course of a command year using the suggested curriculum as a guideline</p> <p>Provide at least one company level orientation to unit and Special Staff (Chaplains, Social Workers, Dietitians, Psychologists, FRsAs)</p> <p>Incorporate one member of special staff in at least two meetings throughout year</p> <p>Incorporate at least one referral agency representative in one meeting throughout the year</p> <p>Incorporate at least one meeting devoted to confidentiality policy</p>	<p>1. Increase in FRG participation</p> <p>2. Increase in FRG support</p> <p>3. Increase in FRG confidentiality</p>	<p>1a. Higher attendance rate indicated over the course of 12 months by analysis of each month in graph form over time.</p> <p>1b. High self reported desire to attend future meetings in post survey</p> <p>2a. Self-reported increase in knowledge of who to consult for referral purposes (within FRG)</p> <p>2b. Self-reported increase in knowledge of post resources such as Family Advocacy, child care, Legal Assistance, etc?</p> <p>2c. Self-reported increase in trust of FRG civilian volunteers by comfort in asking questions</p> <p>2d. Self-reported increase in trust of commander (asking questions)</p> <p>3a. Self-reported increase in knowledge of confidentiality policy</p> <p>3b. No reports of broken confidentiality</p>	<p>Maximum FRG participation</p> <p>All FRG members know where to turn and how when seeking resources</p> <p>All FRG members value confidentiality</p>

Student Name: Lauren McBride
 Program Name: Family Readiness Group Participation, Support and Confidentiality measurements
Data Collection Worksheet

OUTCOMES/CRITERIA	TOOLS	DATA COLLECTION PROCESS	DATA COLLECTION METHOD	VALIDITY	RELIABILITY
<p>Outcome 1 Participation Criteria to achieve outcome 1 (A & B) Indicator a. Higher attendance rate to meetings over time. (Tally of those present at each meeting will demonstrate attendance rate) Indicator 1b. High self reported desire to attend future meetings in post survey (questions 9 and 10 have "moderately likely" or higher response) Outcome 2 Increase in FRG support Criteria to achieve outcome 2 (A-D) Indicator 2a. Self-reported increase in knowledge of who to consult for referral purposes within the FRG (#1 on pre/post survey, compare results) Indicator 2b. Self-reported increase in knowledge of post resources such as Family Advocacy, Child Care, Legal Assistance, etc (#2 on pre/post survey, compare results) Indicator 2c. Self-reported increase in trust of FRG civilian Points of Contact by comfort in asking questions (#3 on pre/post survey, compare results) Indicator 2d. Self-reported increase in trust of FRG military leadership (commander or TSG) by comfort in asking questions (#4 on pre/post survey, compare results) Outcome 3 Increase in FRG confidentiality (knowledge of confidentiality policy) Criteria to achieve outcome 3 (A) Indicator 3a. Self-reported increase in knowledge of confidentiality policy (#5 on pre/post survey) Indicator 3b. No reports of broken confidentiality (no new reported incidents of broken confidentiality in pre survey portion) (#6)</p>	<p>Outcome 1: Numerical count of attendance (attendance sheet) and post survey used to gauge likelihood of future participation (#9, 10 on post survey) Outcome 2: Pre/Post survey with questions indicating higher results on post than pre in questions 1-4 Outcome 3: Pre/Post survey with question indicating higher results on post than pre in question 5</p>	<p>Process used to collect data Who -any FRG volunteer may administer pre/post surveys and take attendance When - Data collected at the beginning and end of every meeting since participants vary greatly depending on subject</p>	<p>Do you gather data on ALL Clients? YES in survey, I gather data individually. Participants can take initial survey prior to meeting and place on desk upside down. Post meeting participants will be given post survey to place on desk paired with first sheet. Sheets will be collected and kept in pairs to distinguish differences in pre-post survey for each individual. This will ensure measurable results for brief encounters with many different volunteers and make them feel valued when they attend. Participant numbers per official meeting will have to be documented with a correlated increase in attendance over time. Graph attendance over twelve months to solely FRG company level meetings</p>	<p>Question language in post survey is derived from government participation surveys Questions assume that knowledge of resources is directly correlated with increase in support Internal validity may be maintained due to short time constraint between pre and post test. Important to note that external validity can be affected due to reactions from being asked to complete a survey before and after the meeting. May characteristically see higher results</p>	<p>The same method will be used to collect data monthly regarding attendance and pre/post survey The pre/post survey will include same questions in same order (same scales)</p>

Intervention Proposal

Description of Intervention

Requesting Family Readiness Group(s) adopt a curriculum to build and strengthen social supports and provide a framework for command supervision. Survey, research and first-hand experience suggest that often commanders and FRG volunteers are placed in the position of holding meetings without access to specific outlines and mechanisms to monitor progress and outcomes. Focused efforts in this area may increase access to resources, reduce stress on commanders and FRG members and allow for more integration of critical resources. The United States Army Regulation (AR) 608-1 (2006) definition of a Family Readiness Group is “a command-sponsored organization of Family members, civilians, and Soldiers belonging to the unit that together provide information and assistance to others in the group during periods of separation, thereby, reducing stress” (p. 7). The FRG provides a network of communication between all members, a climate of mutual support, and “organization, administrative support, training and command interest in conjunction with support from volunteers” (United States Department of the Army, 2006, p. 7). This intervention addresses the current, complex needs of Army military families and the ability of Family Readiness Groups (FRGs) to address those needs and fulfill their mission. A value of military social work as per NASW (2012) is “Social and political action: the engagement in action that seeks to ensure that all people have equal access to resources, with understanding of the limits imposed by the client’s military status or employment situation” (p. 15). Unit Social Workers will not be able to attend to all best practices of social supports and resources at the micro and mezzo levels, which is why it is critical for unit commanders to provide an open channel for discussion about best practices in building social networks and group cohesion within FRGs. Army personnel and families requested to participate in an anonymous interview in conjunction with a review of current literature suggest command supervision, concern, and accountability for building trusting relationships in the FRG Program may dramatically reduce barriers encountered by military families seeking information and support from FRGs. Using empirically supported methods and Social Network Theory for building and cultivating social networks is an opportunity for commanders and FRG volunteers through use of a standardized curriculum and education. The curriculum will incorporate, but is not limited to, surveys for FRGs, ideas for professional development and education, integrative work with unit social workers and/or professionals and building awareness of other post and/or unit resources. Education may be available through this curriculum on the channels of reporting, mandatory reporting, and allow service support professionals opportunity to foster family member empowerment through knowledge in the referral process. Additionally, becoming more knowledgeable on confidentiality and the process of referral for Army programs such as Family Advocacy, Substance Abuse, Behavioral Health and medical needs may be one of the more valuable implied tasks for commanders and family members. Proposed methods for implementation of policy, best practices and accountability as a command program are also discussed.

Background

The JBLM Handbook regards the commanders and the FRG as the “first line of defense” when family “problems” occur (JBLM Family Readiness Center, 2011, p. 53). As a command-sponsored program, the commander is responsible for the program establishment and implementation. Although there are suggested methods by which to implement a “successful”

organization in the JBLM Handbook, there is little in research indicating the methods are scientifically supported (JBLM Family Readiness Center, 2011, p. 53). One significant note determined by Key Informants and the Department of the Army regulation is that the commander remains the responsible and legitimate authority within Family Readiness Groups, maintaining accountability for the Organization. It is evident that Army Commanders may benefit by employing more consistent methods of supervising their Family Readiness Groups; and in doing so they will be able to promote unit cohesion, confidentiality and support for optimal FRG member participation and outcomes.

Over 50% of Army soldiers are married, the ratio of children to soldier-parents is about two to one, and about 6% of soldier-parents are single (Unites States Army War College, 2009, p. 40). It is heavily researched and supported that the current "modern" Army family comes with its share of unique challenges and complexities (NASW, 2012; Aronson & Perkins, 2013). Statistically, Army spouses give birth to their first child in their late teens and early 20s (Hall, 2008; Ahmadi & Green, 2011). A high concentration of young spouses and recent marriages may indicate greater demands for resources and support. Moving frequently and re-establishing in a new location, employment, seeking resources for schooling, education, financial aid and social supports are just a small list of many needs. Furthermore, research indicates deployment stress in addition to the everyday needs of the military family result in a need for intensive resources and services; a point noted by the Federal Government (Ahmadi & Green, 2011). Child abuse has increased nearly 40% in the Army from 2009-2012, correlated strongly with post-deployment integration and stress in the home when the soldier is away on duty (Sandza, 2013). A 1999 study by Adler-Baeder & Pittman (2005) indicated at least 20% of all service members have experienced divorce. Additionally, evidence shows military children have increased rates of anxiety (Pryce, G., Pryce, D. & Shackelford, 2012). Perhaps one of the most alarming statistics reported is the Army suicide rate of soldiers (correlated with Post Traumatic Stress Disorder); reported in 2009 to surpass combat deaths (Pryce et al., 2012).

With the clear incidence of potential challenges and trauma associated with Army families it is imperative that all community resources be available to military families in a highly sensitive and supportive manner (Melamed & Cubic, 2011). In 2007, the Army mobilized resources in recognition of increased need, moving "\$1.4 billion from supplemental war funding to the Army's base budget," appropriating funds to Army readiness and paid positions in support of this mission. General Casey as the Army Chief of Staff appropriated \$100 million for "family readiness activities and paid positions" (Cavallaro, 2007, p. 14). However much funding is appropriated, there are still ongoing furloughs and cuts for paid positions for Family Readiness Support (Ashton, 2013). The continuing limitations on financial resourcing for family programs contribute to a need for increased flexibility on the Army and Army families to meet family needs; a pressure all professionals and families should be aware of. Despite macro level policy and resourcing, a delicate balance of resources may be initiated at the unit levels, but requires prudent efforts from commanders and FRG members. In many cases, the Family Readiness Group can be a first resource or encounter for additional supports for families.

As a former Army Officer, current Active Duty Army spouse, and volunteer for a Family Readiness Organization, it is with passion to pursue feedback from other military families about their experiences with FRGs. More often than not, similar complexities of FRGs as a mandatory "all volunteer organization" are recognized. Complexities include, but are not limited to, gross confidentiality violations, challenges with organizational leadership (both uniform and civilian), and a changing culture within the volunteer organizations to appeal to a broader demographic (male spouses, single soldiers, single mothers and relatives other than spouses). Commanders

especially play a pivotal role in how to address those complexities and reduce barriers to support. A constructive look at the structure and dynamics of modern Army FRGs, Army leadership and how they continue to adapt to the pressures of the current State of the Army family is strongly warranted and hopefully welcomed by all with the acknowledgement of such a critical mission.

Risk/opportunities

Phillipps (2013) cited a study administered in 2002 consisting of 193 soldiers from JBLM (then Fort Lewis) asking soldiers to rate their identities. The results indicated “75 percent of respondents viewed their family identities as the most salient, and 93.8 percent viewed their family identity as one of their top three salient identities” (p. 22). Leaders and Social Workers who do not consistently try to find ways to accommodate and prioritize the needs of the Army family are potentially doing harm to the soldier. Phillipps (2013) proposes two reasons for why the Army might have “outgrown” the current structure for FRGs: “a negative view of FRGs, and a need to overcome a misunderstanding of the commander’s role” (p. 51). It is possible that both of these challenges may be overcome with appropriate intervention mechanisms as a pronged approach on the micro, mezzo and macro levels. At the micro and mezzo levels, commanders may implement more consistent methods of supervision of their FRGs. This may incorporate but is not limited to a curriculum with ideas for professional development and education, integrative work with unit social workers, empowerment through knowledge of the referral process to both professionals and post resources and FRG survey.

At the macro level it is possible to review the amount of institutional knowledge gained in leadership courses on FRGs, evaluation mechanisms as a command program, and implications of current shifts in employing social workers, FRsAs, support personnel and their duty descriptions. One unit commander stated it could be valuable to use the Officer Evaluation Report (OER) as a means, yet acknowledged the difficulty in devising measurable objectives for a family program with many complexities. In some cases, commanders view the evaluation approach negatively due to limiting creativity and other numerically immeasurable and valuable efforts for their FRGs. In either case, there is ample evidence to suggest the benefits in devising an intervention that affords soldiers and commanders more time to develop, implement and supervise FRG objectives. In present time, micro and mezzo level interventions approved by commanders and within Army guidelines are more flexible and able to be implemented as soon as commander(s) dictates.

Additional research is encouraged in the area of Army Family Readiness Group needs. A curriculum incorporated as a method of accountability and prioritization on the micro and mezzo levels shall reduce barriers encountered by Army family members in feeling supported by their unit FRGs. Implementing some sort of guideline based in empirically supported methodology shall reduce liability on the commander’s part in what is a mandated part of his or her command-sponsored organization. Having a guided curriculum can remove pressure from family volunteers in assisting in leading the organization. The curriculum is designed to be a menu from which commanders and FRG volunteers may “pick and choose” to tailor to their unit needs and areas of education.

Advertising

FRG members and commanders may be informed about the curriculum by request for review in email and/or in person. As a spouse of a future company commander and potential FRG leader I will request my spouse review the curriculum and allow for review and/or approval

by superiors, key FRG volunteers and unit Family Readiness Support Assistant. After commanders are approached about implementation and thorough review and discussion of selected modules, appropriate email channels may be used for advertising in advance the objectives to be discussed and flyers for meeting places and times. Additionally, short survey may be emailed in advance and used from the curriculum in obtaining feedback from family members on a regular meeting basis.

Evaluation criteria (refer to logic model, data collection sheet and surveys)

- Logic Model
- Method of data collection
- Means of evaluation-validity and reliability statements. Individual survey (under 100).

Next steps

Social Network Theory provides a descriptive framework for mobilizing FRG members through cultivation of their networks in the micro, mezzo and macro levels. There are two broad sub-fields of social networks: the study of personal networks as they relate to person in environment (in the context of others and community resources), and the study of the whole network and relationship patterns within defined groups (Brown, 2011). There are descriptive features such as structural components to denote strength or density of ties, whereas compositional features may reference the amount of ties or frequency of interaction (Brown, 2011). Social Network Theory also is composed of supportive and non-supportive ties, building channels for “natural helping networks” (Brown, 2011, p. 448). Some paths of least resistance may develop, and be fostered by both formal (official) and informal (unofficial) helpers (Brown, 2011). It is even more important for commanders to recognize their critical role in supervising the components of a social network. A successful example of this is when one Key Informant commander summarized that she “looked for sections and small groups having their own social functions within the unit” then she asked them if they wanted to combine their social functions into one social function together, such as a BBQ or pancake breakfast (Personal communication, November 8th, 2013). This opportunity allowed her to capitalize on small social networks and supports within the unit, thus, introducing them to other networks. A curriculum that is carefully instituted to build a rapport, introduce groups within groups, foster group cohesion and offer tools of self-empowerment can produce a similar outstanding result across Family Readiness Groups.

An article by Balkundi and Kilduff (2005) analyzed the impact of leadership on social networks. They found that good leaders “sometimes fail to understand social structure, and fail to anticipate its consequences for organizational survival” (Balkundi & Kilduff, 2005, p. 419). The authors made a point for leaders to “actively manage” network relationships as a ‘formal helper’, otherwise ‘informal helpers’ will do so, authorized or not (Balkundi & Kilduff, 2005, p. 419). They also describe how “informal leaders who lack formal authority can emerge to frustrate organizational functioning through the manipulation of network structures that exercise social influence” (Balkundi & Kilduff, 2005, p. 420). These barriers to FRG members can be seen in the abuse of power aspects that evolve when FRGs are not properly supervised and/or guided by commanders such as volunteers excluding or chastising other members. The article also makes a point to describe the perception that “managing social networks may be intrinsic to leadership which is far from supported” (Balkundi & Kilduff, 2005, p. 420). The quote supports the relevancy in training and further analysis into whether commanders are actually prepared to do the job they are mandated to do.

Additional barriers to social networks may be “institutional, economic, professional and conceptual” (Brown, 2011, p. 454). It is recognized that those who may be in need of informal support the most may be marginalized due to not having a caring social network, lacking skills or resources to interact with the network and/or capabilities to interact (Brown, 2011). For these reasons, it is truly important to manage and supervise social networks.

This intervention implementation can be offered at no extra costs incurred to units. It can be implemented in a balanced approach with social activities as an effective tool to empower families and build relationships. Careful consideration and support for Army families is requested and may be shaped in the future to expand to other Family Readiness Groups in different branches of services across multiple post locations. This curriculum will address (at a minimum) the following objectives as building blocks to a command relationship with the FRG:

- Build a rapport (introductions, survey, confidentiality agreements within FRG and unit, what unit is/does, how to find unit, what information does the unit keep and/or need about me?, confidentiality agreement)
- Defining an FRG (who’s who? Definitions of jobs, Rosters, contacts, special staff in unit, policy on communication (emailing/texting), positions open, volunteer hours, etc.)
- Family rights in the referral process (who has to know?), counseling and behavioral health resources
- Post resources (how to refer, financial, education, employment, housing, Legal, Child care/youth services, schools, parenting resources, recreational resources, BOSS Program (Better Opportunities for Single Soldiers, etc)
- Red Cross Emergency Planning/FOCUS training resources (Families Overcoming Under Stress – Resiliency training access
- Tri-care referral process (healthcare)
- FRG funding (how do FRGs get funds, what can we do with them? What ideas for future activities)
- Self care, taking care of yourself while spouse is gone and/or here (mindfulness exercises, breathing).
- Recreational activities (innovative ways to poll others on what they want to do in the FRG group throughout the year).

The curriculum is structured with flexibility for the FRG leader and/or organizers to be able to conduct without commander presence if necessary. However, commander is encouraged to attend and participate as much as possible when able. At the very least it will be critical for commanders to plan and select meeting topics with organizers, giving ample time for others to plan to attend.



Effectiveness of Army Family Readiness Groups (FRGs): Are they all that they can be?

1. Problem statement

Army Family Readiness Group (FRG) volunteers experience barriers to assisting other members.

2. Research results

Evidence suggests that commanders (CDRs) need a way to consistently supervise and evaluate FRGs. Command consistency reduces barriers encountered by military families seeking resources and support. Key informants include a Family Readiness Support Assistant (FRSA), a battalion CDR, two company CDRs, three spouses of soldiers with varied ranks, and a soldier. Literature and key informant findings were the emphasis on the CDRs' ability to foster a positive or negative FRG climate. FRG programs are mandatory and some commanders are more successful at fulfilling its mission than others. Reasons for varied success include command inability to devote time to FRG mission and lack of evaluation and/or supervision from higher.

3. Needs statement

Army commanders need more consistent methods of supervising their Family Readiness Groups; and in doing so commanders will be able to promote unit cohesion, confidentiality and support for optimal FRG member participation and outcomes.

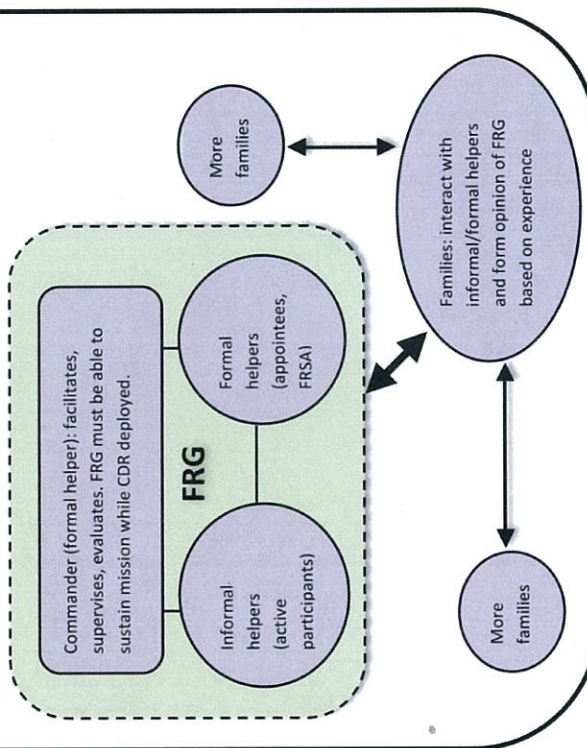
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Ribbon image: Obtained from: www.cllker.com

4. Intervention

A curriculum can reduce stress on all FRG members by providing a menu to select from and conduct meetings. A curriculum also implements common outcome indicators and measurable goals to assess if families are obtaining needs; thus achieving a positive FRG climate and fulfilling the FRG mission.



FRG mission: Composed of family members, soldiers, and civilians in a unit that together provide assistance to others in the group; thereby reducing stress during times of separation.

Social Network Theory: Networks are ties to both informal and formal helpers. It's important for networks to be evaluated to avoid frustrations such as power imbalance, inaccurate information, etc.

5. Outcomes, outcome indicators and criteria

Outcome 1: Participation (Indicators)

- a. Higher attendance (Tally of those present at each meeting thru year compared to group w/out intervention)
- b. High desire to attend future meetings (#9 and #10 in post survey)

Outcome 2: Increase in FRG support (Indicators)

- a. Increase in knowledge of who to consult within the FRG (#1 on pre/post survey, compare results)
- b. Increase in knowledge of post resources (#2 on pre/post survey, compare results)
- c. Increase in trust of FRG civilian Points of Contact, comfort in asking questions (#3 on pre/post survey, compare results)
- d. Increase in trust of FRG military leadership (commander or 1SG), comfort in asking questions (#4 on pre/post survey, compare results)

Outcome 3: Increase in FRG confidentiality (Indicators)

- a. Increase in knowledge of confidentiality policy (#5 on pre/post survey, compare results)
- b. No reports of broken confidentiality (#6 on post survey)

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