

THE MILITARY PSYCHOLOGIST

The Official Newsletter of the Society for Military Psychology Division 19 of the American Psychological Association Volume 36 Number 2 Summer 2021









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January – December 2021

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THE MILITARY PSYCHOLOGIST: *The Military Psychologist* is the official newsletter of the Society for Military Psychology, Division 19 of the American Psychological Association. *The Military Psychologist* provides news, reports, and noncommercial information that serves to (1) advance the science and practice of psychology within military organizations; (2) foster professional development of psychologists and other professionals interested in the psychological study of the military through education, research, and training; and (3) support efforts to disseminate and apply scientific knowledge and state of the art advances in areas relevant to military psychology. *The Military Psychologist* is published three times per year: Spring (submission deadline January 20), Summer (submission deadline May 20), and Fall (submission deadline September 20). Instructions for Contributors appear on the back cover.

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Editor's Column

Shawnna Chee



The Summer Issue of Division 19, The Society of Military Psychology, The Military Psychologist (TMP) Newsletter is here at last! As we begin to move into a more open and less face-masked society, it will be interesting to see how the forced changes since the pandemic began have impact the service delivery of our mental healthcare and relationships with our patient population. If you have had a

unique experience due to the pandemic in your practice, and believe it will be a permanent move, consider writing this up for the Fall Newsletter to share with the Division 19 members. We always want to hear more about what the division members are doing and to utilize the newsletter to disseminate information, to be archived. Please consider writing up your journey for all to hear.

In this issue, our Feature Article provides information about a program that will help military psychology providers transition our patients who require ongoing mental health care from Active Duty to the civilian sector. This innovative program of "inTransition" allows the provider to give a warm hand-off to a dedicated group of service providers who will ensure that each patient be aligned with ongoing care no matter where in the states they transition. Our Trends Article, by a collaboration of students at USUHS and USAFA, provides a case report on how to approach mental healthcare during COVID-19 from a systems point of view. Both of these are very timely and relevant articles to the work that we do within Military Psychology.

Our Division President, Maurice Sipos, speaks about how the Division has met the goals he set out at the beginning; specifically to promote financial stability, which is outlined in the Executive Committee (EXCOM) Treasurer's report and the approved budget for 2021. Be sure to read up on all the initiatives and discussion the EXCOM has in the meeting minutes too. There is a lot of behind-the-scenes work that makes the Division the success it is. Also, huge congratulations are in order for our Communications and Website Committee members for launching the new website! <u>https://www.militarypsych.org</u>. This was only one of the many changes that the EXCOM has facilitated to meet strategic goals to promote the Divisions relevance and foster a solid transition into the digital age.

This Summer Issue also has updates from our committees. We hear from the APA Convention Program, Diversity in the Military Committee, Division Membership, Early Career Psychologist and Student Affiliate Committee Chairs. Looks like the APA convention will be all-virtual again, where daily updates are being added to the website https:// convention.apa.org. Registration is open NOW! Division 19 specific programing is still being finalized, as of the date of this newsletter publication, so keep your eyes on our website for updates.

Pat DeLeon, past president of APA, offers his continued updates through commentary about USU graduate programs and their maintenance of Military Psychology education, training and standards. He also keeps us up to date on legislative projects and support for The Society's goals.

Finally, check out the Announcements section to learn of educational, employment and training opportunities specific to our work in Military Psychology as well as upcoming conference information, research volunteer projects and funding opportunities. If you have any announcements, please email them to our Announcements editor, Grace Seamon at seamon@csu.edu.

This Fall, I'll be turning over the Senior Editor roll to a member who has an extensive history of scientific research publications and editorial experience as well as the desire to launch the newsletter into the digital future, by heading up in-house copy editing and making the electronic issues more web-friendly and searchable for the articles to be referenced online. Stay tuned to the announcement this Fall!

In order to better serve you, the TMP newsletter has a new consolidated email for everyone to submit articles, updates, news, and announcements for inclusion. From now on, please email prepared submissions to <u>DIV19newslettercommittee@gmail.com</u>. Please note, that newsletters issues, since 2012, are archived online and available on the updated website at <u>https:</u>//www.militarypsych.org/the-military-psychologist.html.

The History committee is working to get all the prior issues on the website, which is a huge undertaking, but important. Until the Fall Issue, may you be well, stay clean and forever be surrounded by "blue skies"!

President's Column

Maurice Sipos



Dear Colleagues:

It is hard to believe that we are already halfway through our 75th year as a society! As the world continues to battle a global pandemic, our members continue to *Build a Future on the Foundation of Trust* that our predecessors spent 75 years building. Our mem-

bers remain engaged in fighting the deadly COVID-19 virus and in understanding the psychological toll it has taken on service members and their families across the world. The pandemic has claimed approximately 590K American lives and over 3.5 million lives worldwide.¹ As the average weekly numbers of confirmed COVID-19 cases and deaths from the last surge begin to decline, we continue to see disparities across the globe in terms of access to healthcare and vaccines. Please continue doing your part to contain the virus, care for yourself and your family, and care for each other. This may sound simple, but it is stressful to accomplish while also performing your mission in advancing the psychological study and practice in support of the military, military families, national defense, and national security organizations.

We have also seen a national effort to address structural inequities and harmful behaviors that erode national trust. According to a recent Reagan Institute survey, trust and confidence in the military dropped by 14% since 2018 (from 70% to 56%). Although the military remains the most trusted institution (compared to law enforcement, the Presidency, the Supreme Court, public schools, news media, and Congress), these findings remind us that we cannot take America's trust for granted.² Many of our members are using their talents to understand how these issues affect our community and the nation's confidence in the military. I cannot thank our members enough for their unwavering efforts to address these harmful behaviors and to promote diversity, equity, and inclusion in the military community.

Within the Society for Military Psychology, we have also initiated steps to reflect on our legacy as we focus on my presidential theme—*A Future Built on a Foundation of Trust.* Here are a few updates on the Division's activities since my last column:

Our primary focus for 2021 is to recognize member contributions. Last year, Dr. Eric Surface (Past-President) and I launched the Named Award Review Task Force to review our named awards systematically; to seek out information from members and historical experts to aid in their review; and to recommend to the Society's Executive Committee a course of action with regard to each named award. Under Dr. Bruce Crow's and Dr. Emily Grieser's leadership, the Task Force began fulfilling its charter by reviewing the Robert M. Yerkes Award, which recognizes the significant contributions to military psychology by a non-psychologist. The Task Force recommended that the Yerkes name be removed from the award based on his active association with the American eugenics movement. The Executive Committee accepted the Task Force's recommendation to rename the award since Dr. Yerkes' legacy related to eugenics is not consistent with our Society's values. The Task Force has continued their review of historical and contemporary publications and documents associated with each named award. As they did with the first award, the Task Force will offer Division 19 members a period of time to comment on each recommendation, incorporate member comments, and submit a final recommendation to the Executive Committee for the remaining named awards.

The Awards Committee, led by Dr. Eric Surface, launched a new awards nomination and research grant application platform (<u>https://division19.awardsplatform.com</u>). Please access the new platform to nominate individuals by 20 June (23:59 ET) for the Division 19 Presidential Citation/ Special Recognition, the John C. Flanagan Lifetime Achievement Award, the Julius E. Uhlaner Award, the Charles S. Gersoni Award, the Arthur W. Melton Early Career Achievement Award, the Military Psychology Distinguished Mentor Award, the Outstanding Contributions to Military by a Non-Psychologist Award, or the Robert S. Nichols Award. The same platform will be used for travel awards and research grants.

Our second focus area for 2021 is to promote financial stability. Along these lines, the Military Psychology Foundation Task Force, led by Dr. Scott Johnston, recommended the creation of the Military Psychology Foundation. The Foundation's mission is to support education, training, research, collaboration, community and professional engagement, and support advances in scientific knowledge to military psychology. The Executive Com-

¹WHO Coronavirus (COVID-19) Dashboard, World Health Organization, <u>https://covid19.who.int/</u> accessed May 30, 2021.

²February 2021 Reagan National Defense Survey, The Reagan Institute, <u>https://www.reaganfoundation.org/reagan-institute/centers/peacethrough-strength/reagan-institute-national-defense-survey/</u> accessed May 30, 2021.

mittee voted to allocated \$400K for the establishment of the Foundation. The proceeds from the Foundation will be used to fund Division 19 awards and grants. Earlier this year, a call for nominations to serve on the Foundation Board of Directors went out to Society Members. Upon selection, the Foundation Board of Directors will establish the Military Psychology Foundation within a Community Foundation and develop a memorandum of understanding between the Society and the Foundation. The inaugural Foundation Board of Directors will be selected by the Division 19 Executive Committee and will be announced this summer.

Our third focus area for 2021 is to continue to invest in our members. Along these lines, I want to highlight the great work that the Communications Committee has been doing in support of this initiative. The Communications Committee, led by Dr. Katherine Rahill, launched a new and improved website to increase member engagement. If you have not had the chance yet, please check out the new website at <u>https://www.militarypsych.org</u>. The committee's efforts definitely reflect our professional mission and identity and resulted in a very engaging and professional looking website that will allow us to continue moving the society forward. Please send questions, content requests, and updates to the Communications Committee at: div19communications@gmail.com.

The Military Psychology Podcast Network released the first season of episodes of *Beyond the Uniform* in February. If you have not had the chance to listen to *Beyond the Uniform*, you can enjoy them on Apple, Spotify, Stitcher, or wherever you get your podcasts. Congratulations to Drs. Tracy Beegen. Erin Moeser, Julie Kinn, Jennifer Selke, Jeremy Jinkerson, Katherine Rahill, and many others for bringing this new capability to allow our members to share their voices on topics relevant to military psychology.

Our fourth focus area for 2021 is to promote continuity and transparency in governance. On this front, we will be beta testing Google Suites as a tool to allow the Executive Committee to collaborate, provide continuity, and manage knowledge across time. We hope to launch the new EX-COM email addresses later this summer and will begin creating a knowledge repository for key leadership positions and committees as we move forward. More to follow as we establish a knowledge management strategy for the division.

The Executive Committee recently approved a new approach to managing our bylaws, policies, and procedures. In consultation with the APA Office of Division Engagement, Dr. Tatana Olson (President-Elect) and I have initiated an effort to revise the bylaws and the Division 19 Handbook in a way that will facilitate governance and minimize the need to revise the bylaws for routine changes to committee descriptions, processes, and procedures. We anticipate this process taking time and requiring an annual review to ensure that the Division 19 Handbook remains current. As I mentioned in my first column, all digital and printed publications describing the roles, responsibilities, and procedures related to all Society business will be reviewed to ensure consistency and accuracy across all sources. Our goal is to update the bylaws in time for a division-wide vote in August.

We held our midyear meeting virtually this year due to COVID-19. Although I missed the opportunity to engage with our team in person, I thank them for their efforts in making the meeting a success. I want to especially thank our Secretary, Dr. Angela Legner, for capturing the details of the meeting. Please take the time to review the minutes for more details on the work that our team has done on behalf of the society. If you are interested in serving the society, please reach out to me or other members of the leadership team. We thrive on the voluntary service of our officers, chairs, members, and student members and invite your talent and ideas to help the Society for Military Psychology remain strong for the next 75 years!

Again, I am honored to serve as President, and will see you at the APA convention which will be conducted virtually this year! In the meantime, please take care of yourself and each other as you do the important work that helps define who we are as military psychologists.

Sincerely,

Maurice L. Sipos, PhD President, Society for Military Psychology Fellow, APA Division 19

Feature Article: Program Profile of inTransition: Optimal Use for Military Service Members and Veterans

Matthew Lowery	Tara Davis
Psychological Health Center of Excellence,	Psychological Health Center of Excellence,
Defense Health Agency	Defense Health Agency
Autumn Onna	Nicholas Polizzi
Psychological Health Center of Excellence,	Psychological Health Center of Excellence,
Defense Health Agency	Defense Health Agency
Brenda Campbell	Tim Hoyt
Psychological Health Center of Excellence,	Psychological Health Center of Excellence,
Defense Health Agency	Defense Health Agency

Military service members and veterans frequently undergo transitions during their service, such as changes in duty stations, demobilization following deployment, and adjustments to civilian life following military service. Approximately 180,000 active duty service members and 120,000 reservists separate from the military each year (Department of Defense, 2018). The process of separation from the military is a period of elevated risk, with these service members reporting frequent anxiety, depression, anger, and thoughts of suicide (Drebing et al., 2018; Reger et al., 2015). Service members transitioning out of military service may experience a loss of their social network and are left with the challenge of creating a new social support system outside of the military environment. Combat veterans can have a particularly difficult time with transitions, with over 50% describing the transition to civilian life as a "real struggle" and 58% meeting criteria for a mental health diagnosis (Morin, 2011; Department of Veterans Affairs [VA], 2015).

Behavioral health support services for service members and veterans during transitions is critical. Transitioning service members who receive behavioral healthcare typically will have an easier time with transition compared to those who do not receive behavioral healthcare (Ainspan et al., 2018). However, many veterans do not seek care after leaving active duty. Out of the estimated 1,965,534 veterans who became eligible for care through the VA between 2002 and 2015, only 1,218,857 (62%) sought care (VA, 2015). The most common identified barriers to initiating care are that veterans they do not know that the VA offers behavioral healthcare benefits, they are unsure how to apply for VA behavioral health benefits, or they are unaware of their eligibility status with the VA (Committee to Evaluate the Department of Veterans Affairs Mental Health Services, 2018).

Addressing Barriers

To address concerns regarding service members and veterans undergoing transitions, the inTransition program was established in 2010 (DeFraia et al., 2014). The program is available via phone 24/7, 365 days per year, including toll free, international, and collect call options. Treating providers can refer any service member or veteran to the program, or individuals interested in coaching can contact the program directly. Service members and veterans are eligible for the program regardless of service era, length of service, or discharge characterization. More information available on the web at https://www.pdhealth.mil/resources/intransition.

Once enrolled in the program, participants are assigned a dedicated coach that facilitates regularly scheduled calls—typically weekly—to assist the service member or veteran in obtaining behavioral health care. The service member or veteran works exclusively with this coach until they are connected to a new care provider or wish to disengage from the program. These confidential coaching calls allow for the coach and service member or veteran to check-in on the progress towards the goal of connecting with a new behavioral health provider. An added benefit of this continuity is that the service member or veteran develops a relationship with their coach and as a result does not need to retell their story, or explain their situation, to a new coach every week. Coaches with the in-Transition program are licensed, masters-level providers.

Coaching sessions leverage a health belief model and Motivational Interviewing techniques to identify treatment needs and resource options that are tailored to the needs of the individual service member or veteran. When identifying resource options, coaches take into consideration the participant's preferences for care location (e.g., VA hospital, local Vet Center, non-profit community clinic) and the benefits for which participants are eligible (e.g., VA services, TRICARE, private insurance). It is important to note that inTransition is not incentivized to provide referrals to any particular health care system. Coaches provide all available care options to the service member or veteran and work with them on an individual care plan. Although the coach serves as a guide in this process, all care decisions are left to the individual service member or veteran.

Coaching cases are closed once the service member or veteran has confirmed connection with the receiving behavioral health care provider in their local area and indicates that they are satisfied with the care they are receiving. Once a case is closed, service members and veterans are welcome to re-initiate services with the inTransition program at any time. There is no limit to the number of times a service member, veteran, or their clinician may use the program.

Program Access Points

The inTransition program has two main enrollment entry points: the "Inbound Model" and the "Outbound Model." The Inbound Model typically involves a "warm handoff when a provider calls inTransition with the service member or veteran present. Providers contacting inTransition can include those from Military Treatment Facilities, Transition Assistance Offices, Base Counseling Offices, Family Programs, other military and civilian clinics and support organizations. Service members or veterans also can self-refer by contacting inTransition directly. Calling the Inbound Model has shown the highest rates of successful program enrollment, with between 63% and 69% of referred service members completing the initial intake process, accepting the program, and being assigned one of the inTransition coaches.

As mandated by Defense Health Agency Procedural Instruction 6490.01, service members leaving the military who have received psychological healthcare within one year of their separation date are automatically enrolled in the inTransition program. This "Outbound Model" involves inTransition call center personnel directly contacting these separating veterans up to three times to offer program enrollment and associated services. Because the program is voluntary, the service member or veteran may decline services at any time and be taken off the outbound roster. Compared to the Inbound Model, the Outbound Model has a much lower success rate for enrollment. Nonetheless, the Outbound Model has the greatest potential for growth, given the number of separating service members each month. One of the biggest challenges with the Outbound Model is that the majority of service members are never reached. In many cases, the service member does not respond to calls or voicemail, or the number provided in their record is no longer valid. Out of all service members contacted through the Outbound Model between 2017 and 2019, 62-66% each year were unresponsive. Once reached by the program, 22-36% of service members each year indicate that they already are engaged in care, and 3-4% decline coaching services. Out of all service members contacted by the program through the Outbound Model, 8-9% each year will formally enroll in coaching. Taken together, these rates show that the Inbound Model has a much higher success rate for program acceptance than the Outbound Model.

Program Satisfaction

Satisfaction rates for the inTransition program are measured through the Interactive Customer Evaluation (ICE) System. This web-based system allows feedback on DoD programs through an interactive comment card. Program participants have the option to leave anonymous feedback or provide their contact information for additional follow-up. DoD programs routinely utilize this feedback mechanism to make improvements and address participant concerns. The ICE system has captured over 1,200 participant responses for the inTransition program from 2013 to 2020. Overall satisfaction rates for inTransition are high; with a 96% satisfaction rate among service member and veteran participants and a 98% satisfaction rate among providers who have referred patients to the program.

Targeted Program Services

Certain subpopulations of service members may face increased risks during times of transition. In response to these needs, the inTransition program has increased outreach and targeted program services to several of these groups. The Veterans Access, Choice, and Accountability Act of 2014 includes a specific provision—Section 402 which provides service members and veterans who have experienced sexual trauma while serving on active duty or active duty for training (i.e., "military sexual trauma" or MST), access to free and confidential behavioral healthcare at a Vet Center without a referral from the service member's current military treatment facility. To socialize the availability of this service, in 2019 inTransition began letting all service members who contacted the program know of the availability of care for MST at Vet Centers. As a result, the number of service members accepting referrals for MST care jumped 45% and has since continued to grow, resulting in over 1,000 service members referred to Vet Centers for specialized care under Section 402.

According to Defense and Veterans Brain Injury Center (DVBIC, 2020), 413,858 service members have been diagnosed with traumatic brain injury (TBI) between 2000 and 2019. As the military increased focus on assisting TBI-impacted service members as they transition out of the military, the inTransition program was asked to assist in this effort. In June 2019, the in-Transition program expanded outreach to specifically call service members and veterans who had experienced moderate to severe TBI during their military service. This outreach works to ensure that these service members and veterans receive TBI-related treatment. Program data show that 47.6% of these individuals are already enrolled in TBI care, but 31% are not currently in care and were able to utilize the inTransition program to access TBI services.

One of the most vulnerable military populations are those discharged with other-than-honorable (OTH) or punitive discharges. One 2017 study found that veterans with an OTH discharge status have significantly higher rates of behavioral health symptoms, report more substance use, and have lower incomes when compared to veterans with honorable discharges (Holliday & Pederson, 2017). To address this need, inTransition began specific outreach in late 2019 with military brigs and correctional facilities across the U.S. and abroad, to support service members as they transition out of these facilities. As a result, inTransition now has a designated point-ofcontact at all the major military brigs and correctional facilities around the world.

Program Improvements

A noteworthy program improvement during the past year has been a formal collaboration between the in-Transition program and the Veterans Crisis Line (VCL). The VCL is a Veterans Affairs-run phone, text, or online chat program connecting service members and veterans in crisis to crisis care at a DoD or civilian emergency department. Starting in April 2020, the VCL began referring all active duty service members who receive crisis care at either a DoD or civilian emergency department to the inTransition program to assist in their connecting with post-crisis follow-up care. As a result, both the VCL and DoD have achieved better post-crisis support for all active duty service members and veterans seeking follow-on care. The inTransition program also has significantly increased outreach to and coordination with Transition and Care Managers (TCMs) within the VA. TCMs are tasked with helping to address the needs of new veterans navigating the VA healthcare system. Though the TCM and inTransition programs may seem similar, they benefit by supporting one another where needs cannot be reached. For instance, not every veteran that comes to the VA is eligible for behavioral healthcare; the inTransition program supports TCMs by providing a link to external services that are local to these veterans. TCMs are invaluable in working with inTransition coaches as they help transitioning service members navigate the VA enrollment process and getting the veteran connected to care.



...Or any other time they need a new mental health provider, or need a provider for the first time.

Conclusion

There are many different military resources and support programs available to transitioning service members, but many have limiting eligibility requirements and/or time-restrictions for their use post-separation. The in-Transition program is one of the few services available for all active duty service members, National Guard members, reserve component members, and veterans from every service era—regardless of time in service, time since separation, and discharge categorization. As a result, inTransition is a valuable resource for providers who work with any service member or veteran who is transitioning and would benefit from assistance in obtaining behavioral healthcare wherever they may be going.

The benefits of inTransition to providers, service members, and veterans are clear, and provider referrals and self -referrals lead to the most successful enrollment rates. Outreach and partnership with clinicians, military, and civilian organizations is key to the success of the inTransition program, and to ensuring service members and veterans receive behavioral healthcare services whenever they need it. The main sources driving these referrals is knowledge that the program exists, is available 24/7, and standing by to assist service members and veterans to obtain a behavioral health provider during a period of transition or for the very first time.

Author Note

The opinions or assertions contained herein are the private views of the authors and do not necessarily reflect the official policy or position of the Department of Defense or the U.S. Government.

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Case Report: A Systems Approach to Mental Health Care during COVID-19 in a Military Training Environment

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The views expressed in this manuscript are those of the author(s) and do not necessarily reflect the official policy or position of the Uniformed Services University of Health Sciences, the United States' Air Force Academy, the Defense Health Agency, Department of Defense, or U.S. Government.Case Report: A Systems Approach to Mental Health Care during COVID-19 in a Military Training Environment

By the end of June 2020, the United States (US) had confirmed over 2.5 million cases of COVID-19 (WHO, 2020). To combat these rising numbers, the Department of Defense (DoD) implemented quarantine measures to prevent the spread (CDC, 2020). Social distancing measures have been shown to mitigate the spread of the virus, although they have been shown to have unintended consequences.

One consequence has been the cost to individuals' mental health. Brooks et al., conducted a literature review and found several common mental health consequences associated with quarantine including post-traumatic stress symptoms, confusion, and anger. Additionally, several common stressors were associated with quarantine such as, frustration, boredom, inadequate information, financial loss, and stigma. Some of the common causes for negative psychological outcomes during quarantine were boredom, social isolation, and frustration (Brooks et al., 2020).

The Center for Disease Control (CDC) has released suggested guidelines for treating mental health during COVID-19 (e.g., seeking mental health care and exercising) (CDC, 2020). Quarantine and social distancing measures have impeded traditional mental health care, resulting in providers trying to offer creative care (e.g., teletherapy services). One population with unique challenges to access of mental health care are service members under quarantine restrictions.

The United States Air Force Academy (USAFA) is a service academy where students adhere to military standards while they pursue a 4-year Bachelor of Science degree. Incoming freshmen must attend 6 weeks of military training known as Basic Cadet Training (BCT), prior to beginning classes (USAFA, 2020). BCT serves the purpose of acculturating incoming cadets to both military and Academy standards.

Due to military accession sources being deemed "mission critical" by the Secretary of Defense, USAFA prepared for completion of BCT. Throughout BCT, the Peak Performance Center (PPC), the mental health counseling clinic for USAFA, provided mental health care for cadets. In addition to counseling services, the PPC trains and supervises cadets who serve as Personal Ethics and Education Representatives (PEERs), serving as embedded force multipliers for the PPC within cadet squadrons.

Fanjiang et al., proposed a multilevel approach for health care delivery where the levels are nested within each other. Specifically, they posit four levels of a health care system: the individual patient, the care team, the organization, and the environment (Figure 1) (Fanjiang, et al., 2005) The individual patient, commonly referred to as the primary level, frequently involves direct health care interventions by a provider. In mental health care, this would mainly include individual or group therapy. The secondary level consists of the health care team and social support systems (e.g., family members). The tertiary level, or the organizational level, is the structure within the health care is being delivered such as a hospital. Finally, the quaternary level, or environment, is defined as the policy that regulate the health care delivery (Fanjiang, et al., 2005).

The goal of this paper is to broadly discuss the therapeutic strategies and treatments provided to a quarantined military population during the COVID-19 pandemic with a focus on a systems approach to mental health care delivery. The following case report will highlight effective strategies that were offered by mental health providers at USAFA to basic cadets (basics) to help identify and treat mental health symptoms at each of the levels of a systems approach.

Primary Level (The Individual Patient).

Upon arrival at BCT, basics with either a positive COVID-19 test, those determined by a medical officer to have a cluster of COVID-19 symptoms, or those contact-traced would be placed in quarantine and isolation (Q&I) (Davison, 2020). Q&I consisted of a separate dorm hall on designated floors to ensure proper isolation procedures. Those placed in Q&I were required to remain in place for at least 14 days, no longer exhibit COVID-19 symptomatology, and have consistently tested negative for COVID-19 (Davison, 2020).

The rules of engagement for Q&I basics included: remaining in designated rooms through the duration of Q&I, no contact with other cadets outside of the Q&I floors, receiving 30 minutes of outdoor time daily, using laptops to attend virtual seminars, and accessing personal cellphones for 20-30 minutes daily for phone calls. Cadet training staff (i.e., *cadre*) served as the primary support for the floor and provided the basics with food, water, and reading/training materials in order to keep them current with BCT lessons (e.g., military customs).

The primary focus for mental health providers was performance optimization and reducing negative effects of isolation via behavioral health support, goals commonly found in embedded psychological support (Ogle, et al., 2019).

Building Rapport

Providers began establishing rapport by spending time with the basics during their 30 minutes of daily outdoor time. At first this involved no counseling, and the purpose was to establish a therapeutic relationship built on trust and familiarity. This was accomplished by attending and observing training exercises in addition to introducing providers to basics and cadre.

Providers would frequently visit the rooms of basics in Q&I and over time these conversations developed from rapport building to more tailored therapy. As can be expected of a therapeutic alliance, the depth of the conversations increased and time spent in conversations lengthened, often lasting up to an hour. Although many basics were beginning to seek out and request help more often, it remained important to "make rounds." A remark often made by basics when being visited by providers was "I was not going to say anything, but since you are already here..." which demonstrated to providers a continuing reluctance at times to reach out for help and confirmed the value of familiarity with providers and consistency of visits.

Common Stressors

First, basics in Q&I stated they were experiencing isolation and hence, several other depressive-like symptoms (e.g., low-mood, insomnia, low-energy, poor concentration). The effects of isolation have been shown to contribute to and correlate with depression in other populations (Santini, et al., 2015). The social distancing measures resulted in limited social interaction.

Secondly, many basics in Q&I reported complaints of anxiety, guilt, and worry. Specifically, basics stated they were fearful they were missing significant training and therefore, would be unqualified as cadets. The worry was exacerbated due to an additional fear of disappointing others; often basics reported a sense of disappointing their peers who were not quarantined.

Thirdly, a theme of boredom quickly emerged for basics in Q&I. Basics in Q&I had significant free time compared to basics in traditional BCT. Compared to civilians who are in quarantine, basics were restricted to few de-

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vices with which to entertain themselves. Mental health consequences have been observed with individuals who have experienced prolonged boredom (Brooks et al., 2020).

Behavioral Health Support

Due to the short-term nature of the common stressors and environment, most of the interventions offered were administered during short sessions (e.g., 30 minutes). These sessions largely consisted of cognitive-behavioral therapy (CBT) interventions and followed a general CBT session structure. Cognitive restructuring was found to be effective in addressing many maladaptive cognitions commonly endorsed during a training environment. Moreover, individuals who were quarantined often endorsed maladaptive cognitions such as, "I am failing my flight mates." Introducing and practicing cognitive restructuring offered a frontline treatment for individuals suffering from maladaptive cognitions and beliefs.

Additionally, behavioral activation was found to be effective in mitigating the negative psychological effects of some common stressors. Due to the restrictions, basics were limited in behavioral activation, however, one suggestion commonly made was to exercise in their room. Behavioral activation was encouraged with the caveat that all exercises must follow the recommendations of their primary health provider.

Journaling has been found to help mitigate a diverse set of mental health problems. To combat some of the common stressors endorsed in quarantine, a 14-day journal prompt curriculum was created. The curriculum was largely based on Connecticut College's own COVID-19 journaling prompt (Connecticut College, 2020) with additional mindfulness, DBT, and CBT themed prompts intended to follow each day the basics were in Q&I.

Performance Optimization

Many individuals who did not report mental health issues, sought treatment to increase overall performance during BCT. At the individual level, performance optimization commonly refers to increasing one's functional athletic behavior (Röthlin, et al., 2016). A successful matriculation of basics to first-year students requires functional athletic behavior in body and mind, in particular, mental health skills like grit, healthy sleep habits, positive-self talk, and a positive mindset.

Two specific types of interventions have been shown to have an impact on performance. The first was psychological skills training (PST). PST techniques mainly consisted of "self-talk", "arousal-regulation", "imagery", and "goal setting". Self-talk can be either motivational (e.g., "I will continue to march until I have no energy left.") or instructional (e.g., "Do not lock my knees while standing at attention."). Frequent self-talk aids in performance optimization and can be tailored to the BCT setting and tasks. Arousal regulation consisted of the principles of emotional regulation skills, such as deep breathing. Imagery interventions involve engaging all senses and instructing the basic to imagine the task in which he or she wishes to increase performance (e.g., marching). Goal setting was primarily a cognitive intervention where the individual was asked to clearly define their goal and monitor progress made towards it (Röthlin, et al., 2016). Providers reported many individuals reported increases in performance after practicing these interventions.

The second type of intervention employed during BCT was mindfulness, broadly defined as paying attention, in a non-judgmental way, to the present moment. For the purposes of BCT, mindfulness interventions were taught to bring awareness to the basics' current surroundings and encouraging them to respond to circumstances around them. Mindfulness interventions can be offered to individuals with mental health issues, but also has been shown to improve non-symptomatic individual's attention and performance (Röthlin, et al., 2016). An example of a mindfulness intervention commonly offered was grounding. Grounding techniques often are prescribed for individuals suffering from panic attacks but have shown to promote attention in healthy individuals (Buhlmayer et al., 2017).

Secondary Level (The Care Team)

The secondary level consisted of cadre who provided 24/7 support and training instruction. Step one for embedding with any unit from the outside is building rapport with those within the unit (Ogle et al., 2019). Consistent with this research, the clinicians providing behavioral health support during BCT was a critical element to the successful completion of BCT. Providers needed to first establish rapport with the cadet staff in charge of Q&I who held a 24/7 presence on the Q&I floors. The Q&I cadre's presence allowed them to gain a better understanding of the level of care needed by the basics.

Rapport with cadre was initially established by spending time observing training of the cadets and henceforth, building relationships. As rapport developed, cadre shared more information about their own struggles of coping with high stress and 24/7 operations. Due embedded operations, providers were able to provide on-thespot coping strategies and behavioral health support to those who needed it.

Psychoeducation Support

As previously mentioned, the PPC provides the PEERs with an introductory instruction regarding counseling techniques. During BCT, consultation, education, and training were continuously provided by PPC providers to PEERs. Specifically, this included supervision akin to common case supervision and training of therapeutic interventions. Additionally, psychoeducation regarding provider burnout demonstrated to be essential for this population.

The PEERs and cadre were experiencing shift work during a pandemic. To help mitigate the negative effects of burnout, PPC providers offered psychological support to all cadre in addition, to discussing effective strategies to decrease burnout.

Common Stressors

Different stressors were experienced between basics and the cadre. The cadre commonly reported burnout, stress, feeling unqualified, and a perceived lack of support.

Cadets who were in training, but not in Q&I, reported stressors associated with adjusting to college and military life. Many were transitioning from living at home to entering the military with no prior military experience. Stressors included homesickness, anxiety, and a general sense of unpreparedness.

Tertiary Level (Organization)

During BCT at USUFA, there are many active-duty service members and civilian staff who are integral to the operation of BCT and the following school year. These individuals can be conceptualized as the tertiary level of care for PPC providers.

Consultation

Consultation in the PPC comes in the form of consultation to command about the mental health status of their members, recommendations for suitability and fitness for continued services, and to administrators when making policies with regards to mental health.

Often when providers met with basics, commanders would request status updates. Commanders would have a desire to know about any risk concerns, what they could do to help, and if they were fit to resume training. Providers could tell commanders if basics are fit to resume training or at risk for suicide.

Secondly, a unique task required of the staff, is the evaluation of basics who have missed substantial training days. For instance, if a basic was injured and was unable to complete a significant amount of training days, then a team consisting of command and medical/PPC staff would consult to determine if the cadet should be offered a medical turn-back. PPC providers play an essential role in this evaluation process and serve as the psychological consult.

Finally, PPC providers were utilized as consultants by administrators regarding policy. For providers, this is opportunity to showcase the effectiveness of interventions utilized in the primary/secondary levels of care and share identified areas of ineffectiveness or in the system. Although providers do not have the final say, they provide insight into the delivery of mental health care which is affected by policies at the organizational and environmental level.

Quaternary Level (Environment)

Finally, the quaternary level, or environment, is defined as the policy or overarching structures that regulate the health care delivery (Figure 1). The environmental level can be seen as USAFA.

At the time in which BCT commenced, few policies were in place for healthcare delivery regarding COVID-19 in training environments. Moreover, USAFA was the first of the service academy to do begin training in the summer of 2020, providing more ambiguity. USAFA leadership leaned on the expertise from past BCTs and incorporated available research about COVID-19. The policy put forward was that training needed to commence on schedule with an extremely low level of acceptable risk. Policies instituted included a two-week restriction of movement, social distancing between flights, quarantining positive or suspected cases, and mandatory mask wearing at all times.

Beyond these policies, much of the decision making was left to providers. This decision in leadership providers to rapidly shift focus, change plans, and incorporate feedback as it became available. This allowed providers the opportunity to discover what treatment modalities and delivery systems proved most effective. This may be a testament to relying on the knowledge of subject matter experts to creatively adapt to untested situations when no precedent is available rather than encumbering them with unnecessary or restrictive policies.

Discussion

This case report offered a novel perspective to mental health treatment for individuals in a military training setting during a pandemic. To date, no other case report has investigated mental health treatment in a similar setting. Further value is added to this discussion by the nature of the unprecedented environmental stressors present at the time; USAFA was the first military service academy to return to the training environment and pioneered practices for safety, training, and education.

Many of the stressors observed were expected. One could categorize the majority of the stressors as being a phase

Figure 1. Systems Approach to Health Care Delivery.

Environment Policy, Regulatory Market, (insurers, research funders, etc.) Organizational Resources (Hospitals, clinics, etc.) The Care Team Frontline providers (health care providers, family members, etc.) The Individual Patient

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of life or transition stressors. While these stressors were expected, COVID-19 offered unexpected stressors such as isolation, boredom, and loneliness. Fostering social interaction was difficult due to quarantine restrictions. One of the best interventions observed that fostered social interaction was facilitating conference calls with basics' peers.

COVID-19 and BCT offered a unique environment for behavioral health support and performance optimization. While the environment was unique, many of the interventions utilized are commonly found in other settings. Delivery of interventions included a hybrid mix of face-toface interaction directly in the units and living quarters, embedded support, and traditional session structures. However, these different methods were largely tailored to the individual's status (e.g., quarantine).

The most significant finding of this case report is the demonstration of ways in which previously established interventions were implemented in a restricted environment. The most significant limitation was the lack of data gathering. Future quantitative research investigating mental health treatment during a pandemic in a military setting is needed. Despite the dearth of data, other institutions should consider the journaling component for individuals undergoing isolation restrictions. Anecdotal evidence suggested the journal prompts helped mitigate some of the effects of isolation.

Finally, this case study offers an example of the application of a systems approach to mental health care. A systems approach offers an effective delivery of mental health services in a training environment, amidst a pandemic. Each level of care requires special consideration and application of mental health services. Primary and Secondary levels of care required more traditional clinical care. Tertiary care consisted of consultation work, where providers consulted with a variety of different staff members. Quaternary care required consultation with administrators who were concerned with the climate of cadets with the added focus of the environment of BCT. Future research should investigate quantitative data regarding the effect of each intervention at each level of care.

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APA Convention Committee

William Brim, Chair

Summer is just about here which means only one thing (at least for me)... the APA Annual Convention is just around the corner! As many of you have heard already, APA 2021will be a fully virtual conference again this year and will be held 12-14 August. Last year's meeting saw record attendance for APA overall and our Division 19 programming last year saw an average 15% increase in attendance for presentations and symposia with the transition to virtual attendance. Registration for APA 2021 opens this month and will include discounted rates again this year (APA Members - \$120, Student Affiliates -\$35, Non-Members - \$190). For more information see https://convention.apa.org/

This year all divisional programming was planned from the beginning to be virtual, which means that all symposia, collaborative programs, posters and the Presidential Address will be pre-recorded and uploaded to an APA Annual Meeting website and available for viewing just before the conference opens. Like APA 2020, Division 19 is planning a full schedule of live, virtual programming which will include live "Main Room" symposia presentations with continuing education credit, Hospitality Suite programming, EX-COM Town Hall and Business Meeting and plenty of space for committee meetings. In addition, we will hold our Wine Down, Posters Up Social as well as our Awards Presentation and Social both with giveaways again this year! The Committee is also planning several unique virtual networking opportunities during the convention. Once we receive the final program schedule from APA we will release our Conference Read-Ahead and Program and will announce our registration gift for 2021! We look forward to seeing you in August.

William Brim, PsyD Chair, 2021 Convention Committee

Diversity in the Military Committee

Brandy Walker, Chair

The year is flying by at 100 miles per hour. By the time this Newsletter is released, we will be approaching the six -month mark of 2021. 'Tremendous Change' should be this year's motto as researchers, practitioners, politicians, business owners, and everyone else is diligently working to make up for lost time and exhausted resources. Diversity in the Military Committee (DMC) is also working emphatically to ensure positive change occurs within our Nation's military. Sacrifice and service are two watchwords that our military members have etched across their hearts-they do not fail at training or protecting America. The psychologists within Division 19 understand that our military environments must yield cohesion and trust amongst teams and leaders to thrive. Our efforts are simple—create an atmosphere in which all persons feel accepted and respected.

The DMC is actively growing our comittee with psychologists who want to make a difference by promoting inclusion, equality, equity, and conscious awareness. Consider joining our team or partnering with us and check out our upcoming events: a creative writing workshop on June 5th and June 26th and spoken word showcase on July 10, 2021. Our host is the talented LeJuane "El'Ja" Bowens, an Army veteran and poetic genius. Most recently, on June 10, 2021, we hosted an interactive discussion on Extremism and Racism at 6:30pm with two guest experts, civil rights activist, Mr. Chaka Lindsay also known as I am L.E.T.H.O.L and clinical psychologist, Dr. Ryan Warner, one of Division 19th's own. Zoom information will be shared on the DIV 19 Facebook page and website. We also will launch our newest series of podcasts within the next few weeks to enlighten your understanding about the experiences of LGBTQ military Service Members. Available on Spotify at https://open.spotify.com/show/5Pe9sTu7f5Re1ir10HRSyR? si=Liw2aTKgRD-JMPPshlWS8w&utm source.

Don't forget to check out the 'Beyond the Uniform' podcast series that is already available under Div 19. Society for Military Psychology

Lastly, DIV. 19 will be expanding the website to feature DMC's initiatives, resources, and upcoming events. Feel free to email us (DMC.DIV19@gmail.com) with your questions and suggestions for diversity topics. We want to hear from you! As always, tremendous thanks to the DMC team members, Erin, Tracy, Wyatt, Samantha, and our new 2022 Chair Select, Christina Hein.

Division 19 Membership Committee Updates

Kristin N. Saboe, Chair

Hello Division 19! Thank you for your continued engagement and advocacy for the outstanding people and expertise present within our division. Our membership continues to grow at a steady pace. We have seen a significant increase in membership inquiries since the launch of our new Division 19 website. This is great news because it means we have an engaged membership and many others inquiring about becoming members of Division 19.

As of May 2021, our total Division 19 membership was 1,390 strong. That is a nearly 8% increase on our total membership headcount at this time last year. One unique feature of Division 19 is its large and very active student population (N = 626; 45% of Division Membership) – this includes both undergraduate and graduate level students. This past year, this group gained a voting member seat on our Executive Committee which will ensure students have a strong voice and impact on the present and future successes of the division. We have also seen our international affiliate membership double since May 2020. We expect this growth to continue as Division 19 hosts the 2021 IMTA – IAMPS conference this Fall in Raleigh, NC. This conference will be a wonderful oppor-

tunity for military psychologists across disciplines and career stages to interact and build cross-national connections.

Administrative notes: Be sure to keep your dues up-todate to ensure you receive our quarterly journal and inclusion in all of our efforts. In addition to dues, it is important to annually check and update your information in APA's membership portal. You can check this information when you pay your dues via APA's website.

New!! In addition and independent of APA's membership portal, we invite all members to go to our new Division 19 website (www.militarypsych.org) to create a Division 19 Member Profile. Members can access the portal via "Member Login" on the home page of the new site. If you have specific questions about the website or new membership portal, you can contact our communications committee at <u>div19communications@gmail.com</u>.

The health of our division is a responsibility of all of its members. Please keep accomplishing amazing feats, staying engaged, and sharing the joys of Division 19 with prospective members.

Early Career Psychologist (ECP) Update

Jessica Ford, Chair

The ECP Committee is preparing three, 30-minute blocks of interactive events at APA 2021 in the "Division Suite." We will have a Grant Focus session in which last-years' awardees discuss their proposals and subsequent training and research experiences and will announce the call for new applications for the 2022 Cycle, which will open in November. Our second block will be dedicated to Self-Care as an ECP. Finally, we would like to have an open forum in which ECPs can discuss relevant issues, pose questions to the Chair Trio, and formulate some early thoughts on new directions for the ECP committee. We will be giving out prizes for attendance. Also, be on the lookout for some ECP committee asynchronous games during the conference!

The ECP Committee has a new listserv: DIV19ECP@lists.apa.org. Please subscribe as we build our list. We are hoping this will become a forum for discussion among ECPs about a broad range of issues pertinent to those early in their career as military psychologists.

Raising the Ethical Bar

Mark Staal, Chair, Ethics Committee

Alexa and Wikipedia have largely replaced Webster and the Encyclopedia Britannica as our "go-to" when it comes to knowledge and information. However, something none of them can do (yet) is tell us when we should or should not seek higher ethical ground in our personal and professional decision making. The Div19 Ethics Committee is determined to assist our members in this process...at least until our moral compass' are fully automated by a social media platform!

 $\Theta \Theta \sigma$ [ethos] – a custom or habit, the characteristic conduct of an individual (pertaining to one's moral character or nature) - is the root from which we derive "ethics." Humankind's search for "right" decision making is not new and in fact, has been explored by history's greatest thinkers. Socrates and Aristotle taught us that awareness or education about the truth would naturally guide humans toward right thinking and right action. In contrast, the Sumerians posited that ethical living was found in maximizing pleasure and minimizing pain or suffering. The Stoics (Epictetus and Marcus Aurelius) argued that we must unencumber our mind of all material or worldly things to live virtuously (ethically) while the Epicureans sought a balance between Sumerian hedonism and the virtue ethics of the Stoics. Mohists posited a consequentialist philosophy charging us to seek the greatest good for the many, while the Utilitarianists (John Stuart Mill) battled the Deontologists (Immanuel Kant) over whether the outcome of an action or the intention of its actor was more important.

Most of us are familiar with the APA's Ethics Code and its applied framework. The code is built around what are known as "virtue ethics" and "principle ethics." Virtue ethics are aspirational or idealistic in character. They are exemplars of behavior and decision making that reflect the highest standard and as such are beyond what we might think of as an obligation for basic conduct. These are embodied in the APA's Ethics Code as "Principles." In contrast, principle ethics are a set of ethical obligations that reflect a minimum standard of acceptable behavior and decision making. These are embodied in the APA's ethics code as the "Standards."

In the end, how one chooses to live (and make ethical decisions) comes down to personal choice (and in the case of the APA Ethics Code, professional obligation). In this brief expose on ethical decision making, we will examine three commonly relied upon frameworks to organize our thinking (a consequentialist approach, a deontological or duty approach, and a virtue approach). All three can be found in the APA Ethics Code to varying degrees.

The Consequentialist framework focuses on the future effects of our actions. When adopting this approach, we ask about what outcomes are desirable in each situation and consider ethical conduct to be whatever will achieve the best outcome. On the positive side, this approach is pragmatic, it focuses on the results of our actions, and it seeks the greatest good for the many. However, it is not without its detractors. It can be hard to predict the outcome of our actions (expectations about what would be best for the many), it adopts an "ends justify the means" approach that is unacceptable for some, and it allows for unethical decisions to be made along the road of good intentions toward achieving the greater good.

The Deontological or Duty framework focuses on obligations we have in each situation (what we must and mustnot do). Our ethical conduct is defined by doing one's duty or "doing the right thing." Just as with the consequentialist approach, deontology has many attractive features to consider. It creates a system of rules that has consistent expectations for all people (applies to everyone in each situation), this parity encourages treating everyone with equal dignity and respect, and it focuses on following moral rules or duty regardless of the outcome (which accommodates bad outcomes when resulting from ethical actions). Unfortunately, the duty approach can appear cold and impersonal, it may require actions that are known to produce harm (yet be in keeping with a particular moral rule), it does not provide a way to determine which duty to follow when we are presented with competing demands (two or more "right" actions), and it can be rigid in applying the notion of duty - a line is drawn in the sand regardless of circumstances (what lawyers might call a bright-line vs. balancing approach).

Our last approach to consider is the Virtue framework which tries to identify virtuous character traits and use them to define ethical behavior. When applying a Virtue approach, we ask ourselves, what would a virtuous person do in this situation? We are concerned with what kind of person we should be and what our actions say about our character. In support of the Virtue approach, we find that it is particularly useful in situations that ask what sort of person one should be, and it allows for a wide range of behaviors to be considered ethical - there may be different types of good character and many paths to developing it. However, this same approach can make resolution of dilemmas difficult (there can be more disagreement about virtuous traits than ethical actions) because the framework looks at character, it is less clear in identifying what actions to take in each situation, and, because it emphasizes the emulation of virtuous actors, it

can reinforce cultural norms as the standard of ethical behavior.

All three approaches have their place and possess the potential to aid us in our ethical decision making. Moreover, coming to dilemmas or decision-points from only one angle restricts our vision and may channelize our thinking about issues. In short, adopting a multi-dimensional approach to analyzing our personal and professional decisions is useful and the combination of consequentialism, deontology, and virtue are one such framework to help us all in making better ethical decisions.

A chart detailing the framework and its component parts for further review and application is below. Thanks for your time and investment in raising the ethical bar!

	Consequentialist	Deontology/Duty	Virtue
Deliberative process	What kind of outcomes should I produce (or try to produce)?	What are my obligations in this situation, and what are the things I should never do?	What kind of person should I be (or try to be), and what will my actions show about my character?
Focus	Directs attention to the future effects of an action, for all people who will be directly or indirectly affected by the action.	Directs attention to the duties that exist prior to the situation and determines obligations.	Attempts to discern character traits (virtues and vices) that are, or could be, motivating the people involved in the situation.
Definition of Ethical Conduct	Ethical conduct is the action that will achieve the best consequences.	Ethical conduct involves always doing the right thing: never failing to do one's duty.	Ethical conduct is whatever a fully virtuous person would do in the circumstances.
Motivational Goal	Aim is to produce the greatest good for the many.	Aim is to perform the right action.	Aim is to develop one's character.

Angela Legner, Secretary

Meeting date: September 17, 2020

Meeting Location: Virtual via Zoom

Attendees: Surface*, Sipos*, Legner*, Landoll*, Kennedy*, Blais*, Grieser, Bowles*, Johnston*, Crow*, Bartone*, Rahill, Paniagua, Tyler, Shortland, Saboe, Bannar

Note: Those individuals listed above who hold an EXCOM position as official voting members are designated with an asterisk.

President's Report: President Eric Surface reported that he is launching the IMTA committee in October 2020. The committee will start planning for the 2021 IMTA conference including identifying sponsors. He stated that he will send out an announcement for more volunteers to assist with the IMTA planning and assured the EXCOM that he still plans to host the IMTA in Raleigh at the same hotel with the same rates (already negotiated). He stated that he needed to confirm with American that airline rates would remain the same for next year's IMTA attendees. He also mentioned his intention to submit a proposal to the EXCOM to host one of the social events at IMTA next year and would discuss a final dollar amount at one of the future EXCOM meetings; may be ~ \$2500. Other proposed events; the re-constitution of the Fellows Committee, now appointed to Michael Rumsey as the Fellows Chair, and send out a call to solicit for nominations of future fellows as well as requesting EXCOM consider submitting nominations to the fellows committee.

Foundation Task Force Report: Presented by Scott Johnston; highlighted the Task Force (TF) Charter previously established earlier in the year, as well as the members of the TF, Ryan Landoll, Bruce Crow, Deirdre Knapp, Amanda Berg. They had meetings every week for the past month. Goals of the TF: To endow some of the Society's money in order to provide yearly grants and awards; decrease the operating budget of the Society by shifting some of the grant and award expenses from the Society to the Foundation; develop a vehicle to support charitable giving; increase impact from investments; and increase independent management of investments. Dr. Johnston then discussed proposed plans to establish the foundation to include member composition (5-7 board members to include Division Presidential trio, two trustees, and Society Treasurer), and proposed that the initial board would be appointed by the Society's President. He reported on possible objectives/functions to include coordinating with the Society's Awards Committee; produce an annual report; manage a website. He projected that

there would be a small administrative cost associated with the operation of the TF for marketing, etc. He shared that the TF members created a Mission/Vision/ Values for the TF that closely follows the Society's Mission/Vision/Values and talked about what the foundation might look like.

Communications Report: Presented by Katt Rahill on behalf of Jeremy Jinkerson. She reported that their mandate this year has been to enhance the breadth of the outward media presence, and improving real-time communication across consolidated media platforms, along with targeted communication to specific interest groups within the Society. The committee's priority this year was to redesign the website. Web redesign is currently in process. We are working with K Business Solutions to develop the new website. Rahill previously sent out three initial designs to the EXCOM for feedback on the best design for the website. The second priority for the committee was to consolidate communication of Division 19 listservs through FB and Twitter. Last, website will include a new membership directory to serve as a primary means of targeting communication with our membership and their relevant interests. Jeremy Jinkerson has been diligently working on podcast development, which have three in process currently. Communications Committee is requesting \$10K for podcast publishing. There are now 1.5K FB users and 1.7K Twitter followers; this is a substantial increase from the past.

CE Committee Report: Chair, Freddy Paniagua presented that he submitted a renewal application to reauthorize Division 19 to approve continuing education programs to the APA-Office of CE Sponsor Approval (CESA).

COR Report: Blais presented on the last COR meeting, which took place during the APA annual convention. Blais reported that the EXCOM should have received a written update via email. She shared that the new business item that was put forward by COR Blais and Kennedy concerning removing the Hoffman Report from the APA website. We received information as of 15 SEPT 20 that this item is to be rejected by the council. It went to 2 different panels. The first panel indicated the motion that was put forward did not adequately address what has changed since this was initially brought to the floor of council 2 years ago; essentially there were no new arguments to put forth. The second panel argued that the request is more appropriate to be brought to the Board of Directors. This is something that Council should not be discussing due to an active litigation in progress. Not within CORs jurisdiction. Harvey has offered to continue to pursue this business item.



AUGUST 12-14

As you've come to expect, APA's conventions are the premier psychological events of the year — and this year will be no exception.

APA 2021 is your chance to be inspired, connect with others, and leave with information you can use to improve how you work and shape the field of psychology.



APA Convention Committee Report: Chair Tyler gave a recap of the Convention programming that took place via Zoom in August. She shared plans for Dr. Bill Brim, the incoming program chair, to send out an official call for 2021 Division program proposals. She stated to look for the call via the listserv and social media. Planning would commence this fall-winter for the 2021 APA convention. She then shared that there was a total of 390 members who registered and attended Division 19 live programming. 95 of those individuals were not affiliated with the Division. 395 attendees were awarded CEs. 200 individuals who registered early received Div19 official pint glasses in the mail. Of those who attended, 57 requested to join the Div19 Discussion Listserv; 63 requested to join the Div19 Announcement Listserv; 69 registrants requested Div19 membership information.

ECP Committee Report: Presented by Chair, Neil Shortland, centered on gaining the attention and engagement of the ECPs considering that most ECPs are already overcommitted. The committee had two goals this year, (1) to increase engagement of ECPs in Division 19 and provide them with ECP resources, and (2) the Division to act as a forum for ECPs. The committee undertook a series of activities to include the new chair, Jessica Ford, to find ways to engage the current ECPs including sending out polls to capture ECP input. They held a virtual event on 9am on the Friday during the convention with over 35 ECPs, that was reported as a success. The second thing that they have done is more strategic, which in-

volved re-structuring the professional development grant. This year they changed the advertisement dates for the grants to coincide with APA Convention Programming deadlines. The benefit of this is to be able to promote this grant while at APA, taken advantage of the momentum of the convention collaboration and networking. Another objective that the committee focused on this year was the introduction of "special topics" for the ECP grant application submissions to allow ECPs to gain support in topics that are directly relevant to Division 19, with topics focused on COVID 19 and Diversity. He also highlighted the committee's future, which include exploring the possibility/feasibility of launching an ECP-only discussion listserv to provide targeted communication among the ECPs.

Membership Committee Report: Chair, Kristen Saboe presented. APA continues to adjust to their new membership portal and there are some technical issues with obtaining updated membership numbers for the Division. Current total numbers are up to 1500 members. This is a steady increase. She briefly highlighted all of the ways that they have traditionally recruited members in the past including recruiting at the APA Conventions. Convention attendance has traditionally been the most successful forum for recruiting members. Good numbers in terms of Division growth. Student affiliates are up to 250 this currently; full membership is up by 20 members. Great gains overall. Encouraged keeping members engaged not just focusing on recruitment of new members.

Awards Committee and SLP Reports: Presented by Past President Stephen Bowles. He introduced the current SLP student selectees who were in attendance during the meeting. He expressed his gratitude for Surface's support in the program, for keeping it as an AD Hoc committee. Sipos and he established the SLP a few years ago utilizing their affiliations with the War Colleges. He also expressed his appreciation for current and past members who served as mentors including Castro, Britt, Grieser, Johnston, Hoyt, Shortland, Landoll, and others. There have been 14 graduates of the program. He emphasized the importance of having a student leadership development program. He proposed with the success of the program, he wanted to formalize this program and establish a budget. Maurice Sipos added that the program has led to positive outcomes overall. He has also received a lot of great feedback from Division members.

Student Affairs Committee Report, presented by Ethan Bannar. The SAC is continuing to push forward their many initiatives. He started out with expressing gratitude for the Division voting to approve a Student Member at Large. They are also looking forward to supporting the Division's podcast series. He and Keen, another SAC member, are spearheading the Introduction to Military Psychology podcast. He stated that he may be reaching out to individual EXCOM members for support and input for the podcast. He reported that they will soon be looking for a new SAC Chair. He, Landoll and Jordan Navarro have finalized the student initiative fund. He emphasized that overall, the SAC is doing well, and student membership continues to grow. He ended his presentation and invited comment from the EXCOM.

Secretary Report. Chair, Angela Legner provided update. The new bylaws amendment for the Student Member at Large has been added to the existing bylaws document and sent to Keith Cook at APA Division Services for APA record. A copy of the amended bylaws was also sent to the Katt Rahill for inclusion on the new Division website. Eric Surface requested that the new bylaws be sent to the EXCOM as well. Angela Legner closed with requesting assistance with updating the EXCOM Contact List, which was previously sent to the EXCOM for input, and asked that any new chairs be added to the list.

Action Items:

Motion put for by President Bowles.

1). To approve the ADHOC Society for Leadership Committee to a formal Committee. If approved this will be voted on at the next business meeting with an amendment to the bylaws as well. Surface requested that verbiage be included for EXCOM review prior to a formal vote. Landoll concurred. Johnston inquired about how many members in the committee. Surface reiterated the need to have formal verbiage before a vote. Based on the feedback from members, Bowles agreed to revisit the motion and provide verbiage at the next EXCOM meeting, which will most likely be held in October. Motion was removed. 2). Motion to approve the SLP budget for \$13,150 starting in OCT 2020 (budget request submitted). Surface seconded. Motion passed unanimously.

3). Motion to approve \$10K for podcast recording, which was put forth by the COMMs Committee. Motion passed unanimously.

4.) Approve June 2020 Meeting Minutes. Johnston seconded. Motion passed unanimously.

Meeting date: 19 October 2020

Meeting Location: Virtual via Zoom

Attendees: Surface*, Sipos*, Johnston*, Landoll*, Legner*, Crow*, Bartone*, Bowles*, Harvey, Staal, Gade, Kelley, Ford

Note: Those individuals listed above who hold an EX-COM position as official voting members are designated with an asterisk.

Treasurer Landoll presented the Treasurer report. He stated that the financial strength is "great." He stated that he believes there is a good budgeting process in place now but wants to work with APA accounting to streamline the process. APA is still slow with the coding. He mentioned that an attachment with the budget and expenditures has already been sent out to the EXCOM for review. He highlighted that this year due to the pandemic the Division did not spend nearly as much on travel awards and convention programming.

Named Awards Task Force update, presented by Chair, Bruce Crow. Crow emphasized that this was a Presidential task force initiative chartered by Presidents Surface and Sipos to complete a review of the current Division awards and make recommendations to the Presidents and EXCOM as to whether award names should remain or be replaced. In August of this year, Crow put out a call for applicants to recruit members for the review committee via the Division Listserv. The aim was to recruit a 9member committee to include himself, Emily Grieser, a member appointed by the Diversity Committee, members selected to include early mid and late career members as well. Two calls for applicants went out. He stated that he has an appointee from the Diversity Committee, two ECP applicants, four student applicants, two open positions for mid-career, two late careers.

Communications Committee update: Legner presented updates on behalf of the Communications Committee Chair, Jeremy Jinkerson. Per Jinkerson, the podcasts "Beyond the Uniform: Difficult Discussion on Diversity in the Military" has four episodes and is currently in audio production. Second podcast, "Introduction to Military Psychology" is leaving pre-production and 'greenlit' for recording. Shows expected to launch as early as January 2021.

Rahill is making progress on new website. She is currently working on obtaining information to develop the mem-

The Military Psychologist

bership and donation pages. Will provide updates on progress within the next 2-3 weeks.

Ethics Committee. Staal presented. He provided a draft to the EXCOM for review. He shared that the current APA has 5 ethics principles (e.g., Integrity, Beneficence, etc.). The APA proposed draft that has 8 principles that includes both current and new proposed principles. He highlighted two important issues with the draft. The first was the language of the draft. He operationally defined Principles (aspirational) versus Standards (enforceable). The second issue was the focus on Human Rights, and Social Justice. He believes that the current principles already address these. He encouraged that the focus be on the science of psychology and its ethical application. He noted that the Ethics Code should be non-prescriptive in nature. He cautioned that the proposed changes are leaning more towards a prescriptive social justice focus instead of a focus on the professional practice of psychology. Staal, asked for questions and feedback from the EXCOM. He asked for permission to share his draft and comments to other Divisions. EXCOM agreed.

History Committee Report: Gade presented. He received a couple of bankers boxes from Hummro that need archived, but this will not happen until sometime in 2021. He added that he continues to receive documents from members that he is in the process of digitizing for the Division archive. He has documents dating back to the 50s and 60s. He has turned over these documents to the APA archivist. He further mentioned planning to ensure that there is a digital archive of past Division's newsletters (especially from a historical perspective) housed on the new website. He is working with the Comms Committee on this. He shared that the Society's Wiki page is on hold for now pending financial questions or concerns. He is in the process of exploring options with the Comms Committee. He then shared that he was pleased to report that he has added 5 new members to the History Committee following a recent recruiting call. He now has more members on the committee than he has ever (now 7 members in total). He announced that he plans to retire as the Historian and will be stepping down next year once a new chair has been identified. However, he will continue to provide history spotlight articles to the Newsletter. He concluded his presentation.

Summit Report: Sipos shared that the event was hugely successful. There was a record turnout of 380 attendees. Kelly added that she presented on Friday of the Summit and there were 88 people on the call.

Action Items:

1). Approve SLP from ad hoc to a standing committee. Sipos presented the verbiage of the SLP Committee as a standing committee (referenced the meeting book for written verbiage). This would require a bylaw change vote next year at the annual business meeting. Gade suggested having staggering terms of members on this committee.

Motion passed unanimously.

2). Motion to approve the July 7th Meeting Minutes. Landoll seconded. Motion approved unanimously.

Meeting concluded.

Meeting date: 22 DEC 2020

Meeting Location: Virtual via Zoom

Attendees: Surface, * Sipos, * Bowles, * Crow, * Johnston, * Blais, * Landoll, * Legner, * Olson, Kelly, Estrada, Saboe, Jinkerson,

Welcome/Introductions/Announcements: President Surface brought the meeting to order. He first acknowledged the current editor, Armando Estrada, for his exceptional service to the Division. He then introduced Michelle Kelly to discuss the editor selection process and results.

Editor Selection Committee. Kelly presented on the selection process including introducing the members involved. Briefly discussed the rating process and the criteria that she and the committee members utilized to rate each of the applicants. There were initially four applicants, two of which were international. However, the international applicants had missing information from their applications. The final two applicants were strong.

Motion:

Appoint Thomas Britt, editor of the Journal for Military Psychology, for an appointment of 5 years. Term to begin 1 January.

Motion approved unanimously.

Johnston provided a brief update concerning the foundation task force.

Sipos presented on his goals/vision for his Presidential year.

Crow provided an update on the Awards Names Task Force. He reported that they now have an 11- member committee, which include members from every career category. First planned review would be the Yerkes Award to take place in 2021.

Bowles reiterated that they have an awardee that was selected to receive the Yerkes Award.

Jinkerson offered an update on the ABPP for Military Psychology Committee/initiative,

Jinkerson asked the EXCOM if there was a way to support their initiative, whether it be an Ambassador; he wanted some guidance on how to proceed.

Final comments were made, and meeting concluded.

Society for Military Psychology

Passed 2021 Budget

Projected Income:

Dues	\$20,000
Royalties	<u>\$65,000</u>
Total	\$85,000

Proposed Expenses:

OPR	Item	Justification	2020 Budget	2020 Actual	2021 Proposed
President	Discretionary Fund	Existed 6+ yrs, as needed	1800	0	1800
	Travel Fund	Represent div business, as needed	1200	0	1200
	Pres Citations Awds	Postage and associated costs	400	1523	400
	Challenge Coin	50 remain from 200 initial order	950	0	950
	Knowledge Mgmt Sys	Improved governance	0	0	2520
				TOTAL	6870
Treasurer	Financial Operations	Standard finance fees	250	97	150
	Division Svcs	Utilized for mbrship/listserv/awds	2200	2200	1400
	EXCOM Travel Awards	Average from past 2 yrs	5000	1975	5000
	Budget Admin	Unanticipated expenses in budgetary process	3000	300	2000
				TOTAL	8550
Newsltr	Newsltr Printing	3 issues annually @ 4K/issue	12000	0	300
				TOTAL	300
Awards	Plaque Printing		2500	0	3600
	Member Travel Awd	Single supt for APA Convention	750	0	750
	Research Grants	2-4 awards @ up to \$5000	7500	11250	10000
	Award Mgmt Sys	Streamline process for review for all grants, awards, submissions	0	0	1500
	·			TOTAL	15850

OPR	Item	Justification	2020 Budget	2020 Actual	2021 Proposed
Comms	Website Redesign	Ensure compliance, professional image	13830	2250	7000
		Domain Registration	20	0	0
		Photography	1000	0	0
	Podcast	Equipment & Audio Support	10000	1119.66	1400
	Wikipedia Page	Jt effort with History Cmte, honor 75 th anniversary of Division 19	0	0	2000
			-	TOTAL	10400
CE	CE Granting Renewal	Allows D19 to grant CEs	550	550	310
			•	TOTAL	310
SAC	Student Website		100	0	100
	Research Grants	2 student grants	4500	6000	4500
	Travel Awards	8 travel awds to APA convention	6000	0	6000
	Chapter of Yr Awd		300	0	300
	Student Initiative Fund	Use of previous allocation to supt additional chapter initiatives	3000	0	3000
			•	TOTAL	13900
ECP	Professional Development Grants	3 professional development awds	7500	3550	7500
	ECP Convention Suite Prgm	Materials to support a virtual social hour during APA convention	0	0	300
			•	TOTAL	7800
Convention	Social Catering	Higher attendance	45000	5431	15000
	Hospitality Suite + Catering	Division programming for non-members in DC	6300	0	6000
	A/V Supt		1100	0	1000
	EXCOM Catering		2200	702	1500
	Marketing Materials	Registration promotional item – based on last year	800	0	5000
	Poster Hr Social	Repeat of Wine Down Posters	3500	0	1200
	3D Virtual Platform	For networking, socials, poster session	0	0	5000
	Zoom Small Business	Large conference add-on, available for division use	0	0	800
				TOTAL	35500

OPR	Item	Justification	2020 Budget	2020 Actual	2021 Proposed
Internat'l	Travel Awards	Support int'l engagement in mil psych; 2500 for awds in 6 month incremements	5000	0	5000
				TOTAL	5000
SLP	Student Travel Awds	\$1000 for 8 SLP participants	6000	0	8000
	SkillScope	Ldr Assessment for 8 SLP participants	1260	1260	1680
	EQI	Ldr Assessment for 8 SLP participants	540	540	800
	John Fennig Grp Process	Group process at mid and end pt	600	0	600
	Books and materials		1000	75.60	1000
	Zoom	Conferencing	150	150	150
				TOTAL	12230
Summit	Coffee/Bev/Snacks	Networking	800	0	3750
	Parking Supt	Volunteer Engagement	200	0	600
	Admin Supt and Cost	Set-up/onsite supt	500	0	1000
	CE support	60 hours CE admin supt	0	0	900
			<u> </u>	TOTAL	6250
IMTA	Sponsoring Event	Sponsorship of Social Event	800	0	7000
	Travel Awd	Onsite supt	1200	0	TBD*
	•			TOTAL	7000
Historian	Hoffman Oral History	Previously approved, interviews and transcription	1500	0	1500
				TOTAL	1500

OPR	Item	Justification	2020 Budget	2020 Actual	2021 Proposed
Diversity	Formal CE Diversity Training	Annual ed for EXCOM on DEI	0	0	2000
	Quarterly Webinars	Honorarium for speakers (x4)	0	0	4000
	Art Expression Event	Two art expression enhances to enhance diversity awareness	0	0	1800
				TOTAL	7800
RSS	Admin Support		0	0	1200
				TOTAL	1200

*will be made by separate motion later

Total Projected Expenses:	\$126,260
Net Projected Operations	
Income:	\$85,000
Expenses:	<u>\$140,160</u>
Net:	(\$55,160)

Division 19 Treasurer Report

Emerging from the Pandemic: Division 19 well poised financially

Division 19 members, I want to start by wishing you and your loved ones well during these difficult times. When I last shared our financial report with you, we were beginning to pivot many of our activities virtually in light of the COVID-19 pandemic. This provided an opportunity to consolidate some of our division finances, as some of our larger expenses (Convention, Travel Awards, etc.) were not used.

As such, I am pleased to share that our division's financial strength remains strong. If you recall, my platform for this term as your treasurer has been the pillars of **financial transparency, financial responsibility,** and **financial creativity.** I am pleased to share that with the passing of our second annual budget which you will see below, we have committed to **financial transparency** to our membership. This puts us on a path for **financial responsibility**. In 2020, we ran a **net positive** budget. This year, although we are projected to spend some of our reserves, we have a better understanding of our intentional investment in key areas. You'll note several expenses are related to infrastructure improvements – our improved website, a piloting of both knowledge management and award systems to enhance the member experience and continuity of operations.

As such, it is important that we begin to pivot to **financial creativity**. I want to commend the **Communications Committee** for leading the way in exploring both new ways to engage members via our Podcast Network, as well as potential new revenue streams. I also want to thank **Dr. Scott Johnston** for chairing a task force dedicated to exploring the establishment of a military psychology foundation that may serve as a source of endowments for our awards. I invite you to join me in reviewing our 2021 budget, passed by the Executive Committee earlier this year at our Mid-year Meeting. Here are some highlights:

- 1) Our expenses remain focused on **you**, the member. Investment in research and professional development grants have been expanded, as well as experiences like our convention. Infrastructure improvements are one-time investments geared towards improving the member experience.
- 2) You will note again this year we are projected to spend about \$50,000 against our reserves. This was the same as last year – and we ended up with a **net income** of nearly \$50,000. Our reserves are around \$500,000 and have weathered the Coronavirus well because of their distribution in longerterm yields. In addition, we continue to keep our revenue projections are conservative – our journal royalties increased 12% last year! Finally, many of our convention expenses will be once again deferred with the movement to a virtual convention. As a result, the projected use of our savings is likely to be *considerably lower*.
- 3) As part of our investment in you, we are also showing our commitment to diversity, equity, and inclusion, along with supporting our leadership pipeline by supporting students, ECPs, and our Society Leadership Program. I am proud to share with you a budget that reflects our division values.

As always, you can always reach me at <u>rlandoll@alumni.unc.edu</u>. Honored to serve as your Division Treasurer and welcome your feedback,

Ryan Landoll

Student Affairs Committee (SAC) Update

Athena Jones, Interim Chair

As we wrap up another academic year, it is important that we acknowledge the incredible resilience and dedication displayed by our student members. Despite the unprecedented year, we buckled down and propelled forward towards amazing accomplishments. Congratulations to those students who have completed their degree requirements and those headed off to internship!

To those graduating, congratulations on reaching this crowning achievement. We encourage you to consider

remaining involved with the incredible programs and resources provided by Division 19 early career psychology network. For questions about how to stay engaged after graduation, please email the current Early Career Psychologist (ECP) Committee Chair, Jessica Ford at Jessica.Ford@va.gov.

Importantly, as you reflect on your accomplishments and adaptability this year, we want to highlight the extremely meaningful work that you do. From providing clinical services, to conducting influential research, you are each serving to further the field of psychology, and we want to thank you for your hard work, commitment, and engagement every day. As well as, encouraging you to remember take time for your own self-care!

In February, the Student Affairs Committee joined other Division 19 leaders at the annual midyear meeting. Many members conveyed their excitement and support for our student members, and I am excited to share some of the updates that occurred during that meeting, as well as some exciting news more recently.

First, in order to address the wide variety of interests and specialties of our student members, we continue to join forces with Divisions 18 and 38 (Psychologists in public service, and Health Psychology) to provide interdivision webinars. We have had great turnouts for these webinars so far and covered topics such as traumatic brain injury, as well as a panel discussing difficulties in the supervisory relationship. Be on the lookout for updates in our newsletter and on our social media platforms (@Division 19 students) for upcoming webinars.

Next, this quarter we also had our first recipient of the Student Initiative Fund. We awarded \$450 to a student applicant from Drexel university. This fund is to support psychology students' engagement at the individual, local, and campus chapter levels. Specifically, students and campus chapters can apply for funding for activities, research or grassroots efforts to further the science, practice, and advocacy of military psychology. Applications for this fund will be reviewed on a rolling basis. There is not a deadline for submissions. Once funds are allocated not to exceed \$3,000 per fiscal year, no additional funds will be awarded. You can find further information on our networking platforms and find application materials on our website under the "funding page." https://www.division19 students.org/funding.html

Finally, the 2021 APA Convention, scheduled for August 12-14, is again going to be virtual. APA and Division 19 are committed to providing a meaningful virtual experience with speakers, collaboration opportunities, and unique ways to be engaged as a student. We do not have all the details at this time, but we are dedicated to making APA a great experience for you this year. Please stay tuned as we work to develop a great program for students.

I'd like to congratulate Cody Boland and Kristy Cuthbert for being awarded the 2021 Division 19 Student Research Grant. These students received a \$1500 research grant and have been invited to present their research during the APA virtual conference. Thank you both for your contributions to research in military psychology! For students planning to attend the APA virtual conference, please look out for the Division 19 programming schedule to find out more about these and other exciting presentations. Check out our website, social media pages, and listserv announcements in the weeks leading up to the convention for the most up-to-date information regarding panels, social events, and convention logistics!

Our leadership team are students as well and we understand the added stress that COVID-19 has caused on students, institutions, and psychology providers in our communities. If you have ideas as to how we can help and continue to improve our engagement in the division, please do not hesitate to reach out to us at our committee email div19studentrep@gmail.com. We are stronger together and we look forward to seeing many of you at the 2021 Virtual APA Convention!

V/r

Athena Jones, M.A.

atjones@students.llu.edu

Interim Chair, Student Affairs Committee, Society for Military Psychology

Commentary: I see trees so green, red roses too

Pat DeLeon, past APA president

USPHS COA: One of the most positive attributes of the pandemic has been the increasingly sophisticated utilization of virtual technology to provide access to exciting educational opportunities, including those impacting our nation's public health. Captain Jacqueline Rychnovsky, USN (ret.) served as U.S. Senator Daniel K. Inouye's Department of Defense Nurse Congressional Science Fellow in 2009-2010, and is currently Executive Director of the Commissioned Officers Association (COA) of the U.S. Public Health Service. Their May Gathering of over 110 members featured RADM (ret.) Kenneth Moritsugu who insightfully focused upon the Core Values of the USPHS - Leadership, Service, Integrity, and Excellence. These are central to fulfilling the USPHS mission to protect, promote, and advance the public health and safety of our nation and should be of uttermost importance to every Commissioned Corps officer and public service health care provider. His vision for officers to be visual, ever-present, and dedicated to their Agency's underlying mission represents the essence of public service. Ken is a former member of the Uniformed Services University (USU) Board of Regents, and his daughter Erica, who has served on the U.S. Senate staff, was recently appointed Deputy Assistant to President Biden and Asian American and Pacific Islander Senior Liaison. Public service is the Gift That Keeps On Giving.

BUSHMASTER – A Unique Learning Experience: Perhaps the most interesting educational experiences at the USU are the annual Bushmaster training exercises. Traditionally, in their third year of training, psychology graduate students who are in the military track participate in Operation Bushmaster, a four-day simulated field experience. Here they train with students from the Psychiatric Mental Health Nurse Practitioner Program. They collaboratively establish and operate a Combat and Operational Stress Control clinic and conduct behavioral health unit needs assessments of simulated medical units. One of the expressed faculty objectives is to provide students with the opportunity to learn similarities and differences between the ways these two professions approach assessing and treating behavioral health difficulties in a "real-life" environment where they are likely to work together during their military careers. This year, due to the pandemic, the mental health students participated within the university's Simulation Center, with live role-playing uniformed firstyear medical students.

USU Director of Clinical Training for the Clinical Psychology Program, Jeffrey Goodie (CAPT. USPHS): "We have been growing and refining the combined psychology graduate student and mental health nurse practitioner student Bushmaster experience over the last six years. In the past, only a few psychology graduate students participated; now, all third-year military track students participate as a requirement of their military psychology course. We have even had our civilian track students volunteer to participate. Although COVID-19 restrictions prevented us from being at Fort Indiantown Gap with the fourth-year medical students and limited our ability to conduct behavioral health unit needs assessments, which was done virtually, we were able to add new elements, including a mass casualty exercise (MASCAL). During the MASCAL behavioral health students practiced providing support to patients in distress, intervening with medical providers freezing due to the stress of the situation, and providing manpower support. Bushmaster not only allows psychology and nursing students to understand each other's roles, but it also gives medical students an opportunity to observe how behavioral health services and consultation would be delivered in deployed settings. Overall, Bushmaster offers a unique opportunity for psychology, nursing, and medical faculty to collaborate on developing an interprofessional exercise that prepares students for their future deployment roles."

Graduate student Paul Ross (1st Lt., USAF): "My first experience at Bushmaster was an exceptional learning one during which I enjoyed the valuable opportunity to set up and operate a behavioral clinic with fellow psychologists and nurse practitioners. Despite COVID restrictions, USU was able to offer a simulated environment that mirrored a deployed setting. My biggest takeaway from this experience was the value and knowledge of nurse practitioners. They are incredible in their ability to provide therapeutic care and additionally, prescribe essential psychotropics. Their prescription privileges served as a force multiplier and increased our ability to return simulated patients back to the fight."

National Academy of Medicine (NAM): Major Christy Velasquez Mitchell, USAF, NC (USU graduate nursing student): "The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity report was released by NAM just in time to conclude 2020's celebration of the International Year of the Nurse and the Nurse Midwife and observance of National Nurses Week. As I reflect upon how the COVID-19 pandemic has transformed nursing within the past year, not only did the pandemic reveal the significant and harsh challenges of communities facing inequities in health and healthcare, but I realize that it also thrust the strength, knowledge, and commitment of our nation's nursing force to the forefront of healthcare professionals. Nurses have been active throughout history, so it is imperative to ask: 'How can nurses seize the moment and play a pivotal role in leading and promoting health equity over the next decade?'

"The first key recommendation of the NAM report is to overcome practice barriers for all APRNs. Despite some progress in expanding full practice authority, there are still 27 states that do not allow full scope-of-practice to nurse practitioners (NPs). As a result of limited access to care during the pandemic, specific populations faced harsher consequences. This resulted in several states experiencing secondary effects of delayed access to care. Some states took immediate action and lessened scope-of-practice restrictions increasing autonomy for NPs. In return, the improved delivery of care by NPs helped vulnerable populations. Committee members noted: 'During COVID-19, states that granted independent practice saw no changes in rates of medical errors in populations cared by NPs.' This clearly indicates that NPs *can* provide 'trusted care anytime and anywhere.'

"To ensure that nurses can serve anywhere, the second key recommendation asserts nursing education be associated with culturally competent care and practiced on all levels in the community. A prime example of where I see this practice is at USU. Michelle Binder, USAF psychiatric nurse practitioner and USU graduate, shared stories with me about her clinical rotation as a NP student in American Samoa. Her clinical journey there allowed her to practice nursing competencies in an austere environment and deliver invaluable healthcare. From her stories, I learned the numerous challenges in providing healthcare in an isolated region in the Pacific and the value of understanding the different social needs of the Samoan culture and community. It was evident that community-based practice in the nursing curriculum prepares nurses to tackle and understand health equity. Nurses will be ready to adapt to future challenges and be community advocates through this particular NAM recommendation.

"Finally, I learned the nursing community will need continued support over the next ten years to achieve health equity for all. Committee Co-Chair Mary Wakefield recommended that supporting nurses be done collectively and collaboratively across all organizations. Investments in developing nursing Ph.D. level faculty and research cells will have long-term benefits. Each step taken to remove barriers to full practice authority and elevated leadership positions, as well as empowering nurses to achieve advanced education and diversified clinical experiences, moves us closer to fulfilling the promise of a healthier nation for all."

The National Academies of Sciences, Engineering, and Medicine (NASEM): Along with seniority frequently comes the opportunity to be engaged in visionary activities. This year, I am honored to serve as co-chair with Zohray Talib of the NASEM Global Forum on Innovation in Health Professional Education. We have been exploring the Grand Challenges and Lessons Learned presented during the COVID-19 Pandemic through a series of virtual workshops and conferences. For example, how do we prepare for the next crisis in health professions education when we clearly don't know what that crisis will be? How do we address long standing challenges that perhaps reached a tipping point during the pandemic? What have we collectively learned about the challenges and opportunities in experiential learning, testing, communication, and faculty development? How can we see through the Lens of the Student populations of the various professions?

What should their role be during a national crisis? What have each of the disciplines learned in establishing clinical learning sites? What could have been different and what must we consciously strive to continue, once the pandemic has hopefully passed?

It is evident that educational systems that had emergency planning, institutional support, and infrastructure in place were more easily able to pivot to online learning and telehealth, while those who had strong, longstanding relationships with health systems and state and local governments were better able to continue to offer clinical education opportunities for students. These characteristics allowed systems to quickly adapt to the realities of the pandemic education and practice environment, to adopt new curricular models, and to create a supportive environment for learning. How do we plan <u>now</u> for the future by learning from the present? Several of the national educational leaders sharing their vision include Catherine Grus, APA Chief Education Officer; Sylvia Trent-Adams, former HHS Principal Deputy Assistant Secretary for Health; and Suzanne Miyamoto, CEO of the American Academy of Nursing.

PSYPACT: Alex Siegel, Director of Professional Affairs, ASPPB: "This has been a very active legislative year for PSYPACT (Psychology Interjurisdictional Compact) where at least 18 states have proposed PSYPACT legislation. Since my last update several months ago where there were 15 states which had adopted PSYPACT, seven additional jurisdictions have enacted PSYPACT and 10 states are currently considering their legislation. The 15 states which have adopted the compact are Arizona, Colorado, Delaware, Georgia, Illinois, Missouri, Nebraska, Nevada, New Hampshire, North Carolina, Oklahoma, Pennsylvania, Texas, Utah, and Virginia. The seven jurisdictions which have most recently enacted PSYPACT are the District of Columbia, Alabama (effective June 1, 2021), Arkansas (effective end of July, 2021), Kentucky (effective June 29, 2021), Ohio (effective July 26, 2021), West Virginia (effective July 6, 2021) and Tennessee (May 11, 2021, effectively immediately). There are around 6,000 psychologists who have applied for an authorization to practice under PSYPACT. For more information check https://psypact.site-ym.com."

Dedicated Visionaries: In August, 1978, APA President-Elect Nick Cummings, Russ Bent, Joan Willens, and Clarence Martin (AAP) testified before the U.S. Finance Committee on Proposals To Expand Coverage of Mental Health Under Medicare-Medicaid. Senator Alan Cranston's introduction: "I am particularly delighted to have this opportunity to introduce Dr. Joan Willens. Dr. Willens is a leader in the field of psychology and has worked with your committee and with the Department of Health, Education, and Welfare, in developing the demonstration project in Colorado that is evaluating the effect of covering psychologists as independent providers under Medicare. She has been a valued health-care advisor to me throughout my service in the Senate and I know her testimony will be very helpful.... Mr. Chairman, although psychologists cannot treat patients with drugs, they can provide the counseling services which frequently are all that is needed to help individuals make necessary adjustments for continued functioning in society. Under current Medicare law, as you know, psychologists can be reimbursed only for diagnostic tests when a patient is referred to them by a physician. This procedure places the psychologist, a reputable professional, in a secondary and inappropriately subordinate position, and seriously underutilizes the skills of a valuable member of the health care professions. I hope your committee will study this issue carefully and will conclude that psychologists should be recognized as independent providers."

Nick: "Mr. Chairman, the mental health needs of our elderly are not being met under the present Medicare system. There are far more elderly in public mental hospitals than should be. There are many others in nursing homes or under home health programs who are being kept overly medicated and untreated. In fact, the overmedication of the elderly is approaching a national disaster in our society.... Persons in emotional distress are significantly higher users of both inpatient and outpatient medical services. In fact, we learned in the late 1940's at Kaiser-Permanente that 60 percent of all the doctors' visits had nothing physically wrong with them, but were suffering from emotional distress.... In summarizing our 16 years of prepaid mental health experience at Kaiser-Permanente, we concluded that there is no basis for the fear that an increased access to mental health services will financially endanger the system. It is not the number of referrals received that will drive up costs, but the manner in which services are delivered that determines optimal cost and therapeutic effectiveness."

Joan: "Mr. Chairman and members of the subcommittee, approximately 3 years ago the staff of the Senate Finance Committee conducted an experiment in Colorado to answer its concerns about including psychologists as independent providers under Medicare. Some of those concerns were very basic, and others quite complex. But we have attempted to respond to your questions in the $1\frac{1}{2}$ years that the study has been underway. Let me briefly go over several of the questions that were raised in how psychology serves as one model in how our profession can function under Medicare. Question No. 1: Who is a psychologist? In the first evaluation, Stanford Research Institute who was the independent evaluators of the experiment stated that this process has operated successfully. Question No. 2: What should psychologists be doing, and how can you be assured that they doing quality work? In

Colorado, we developed lists of covered and excluded services which have a general, national acceptance by the profession. Fringe and controversial therapies were excluded. Again, Stanford Research Institutes states that this is working. Question No. 3: Can psychologists establish proper medical collaboration when needed? One of the major components of clinical psychological training is in the area of diagnosis. We have been trained to consult, collaborate and refer, when necessary, the most appropriate health care providers. Psychology is also concerned about the issue of medication for the elderly, from several standpoints."

Senator Matsunaga: "I feel a lot better after listening to your testimony and the tests which you spoke of, I think, tend to prove for even for physical illnesses, a little psychiatric or psychological treatment would definitely shorten the period of physical illness. I want to congratulate you on the excellence of your presentation." Senator Laxalt: "I might say that personally I have found it somewhat mystifying as to why this question has not previously been included. From the standpoint of my own experiences, in my own State, particularly in the area of care for the elderly, I think that this profession has performed a badly needed service, and they have performed it well."

Steady Progress: Ken Jones recently shared the notice published in the *Federal Register* in November, 2020: 'The Department of Veterans Affairs (VA) is issuing this interim final rule to confirm that its health care professionals may practice their health care profession consistent with the scope and requirements of their VA employment, notwithstanding any State license, registration, certification, or other requirements that unduly interfere with their practice. Specifically, this rulemaking confirms VA's current practice of allowing VA health care professionals to deliver health care services in a State other than the health care professional's State of licensure, registration, certification, or other State requirement, thereby enhancing beneficiaries' access to critical VA health care services. This rulemaking also confirms VA's authority to establish national standards of practice for health care professionals which will standardize a health care professional's practice in all VA medical facilities." Substantive change *does take time*. "They'll learn much more than I'll ever know" (What a wonderful world - Louis Armstrong).

Aloha,

Pat DeLeon, former APA President – Division 19 – May, 2021

Announcement Requests

Please submit any announcement requests for volunteer opportunities, research participant requests, training opportunities, or other requests to the Announcements Section Editor, Grace Seamon-Lahiff at seamon@cua.edu

General

Join Division 19 on social media!

- Facebook group: APA Division 19 Military Psychology
- Twitter: @APADiv19, @Div19students
- LinkedIn group for ECPs: APA Division 19 Military Psychology - Early Career Psychologists

Military Psychology Podcast Network Update

Division 19 is proud to announce the launch of the Military Psychology Podcast Network! This network will feature topics including: diversity in the military, behavioral health in the military and veteran populations, human factors research, and specialty areas including operation and aviation psychology, fitness for duty, and military ethics. The first four episodes of the network's show *Beyond the Uniform* can be found here https://podcasts.apple.com/us/ podcast/military-psychology-podcast-network/

id1553694252, or wherever you choose to stream your podcasts.

Awards

The Division 19 platform for award nominations and for research grant applications is now live. The deadline for awards nominations is extended to 20 June at 23:59 ET. You can access the platform at https://division19.awardsplatform.com. The following awards are available for nominations:

- Division 19 Presidential Citation/Special Recognition
- John C. Flanagan Lifetime Achievement Award
- Julius E. Uhlaner Award
- Charles S. Gersoni Award
- Arthur W. Melton Early Career Achievement Award
- Military Psychology Distinguished Mentor Award
- Outstanding Contributions to Military Psychology by a Non-Psychologist Award
- Robert S. Nichols Award
- Member/Affiliate Member Travel Award

To submit an award nomination or an application, you will need to set up an account at https:// division19.awardsplatform.com and follow the instruc-

tions. Descriptions of the awards and the requirements for nominations or applications are on the site. Please contact Chair, Eric Surface if you have questions. Email: esurface@alpssols.com

Upcoming Conferences

San Antonio Combat PTSD Conference

The 6th annual San Antonio Combat PTSD Conference will be held on October 20-21, 2021 with a series of preconference workshops taking place on October 19th. This conference will be held virtually. Registration has not yet opened for this year's conference, however, interested parties can sign up for email updates at: https:// www.combatptsdconference.com/

International Society for Traumatic Stress Studies (ISTSS) Annual Meeting

The 37th annual meeting for ISTSS will be held virtually on November 2nd -5th, with a pre-meeting institute on the 1st. This year's meeting will focus on the systemic and contextual factors that impact trauma and traumatic stress. As in previous years, this conference will offer a military track. For more information please visit: https://istss.org/ am21/home.aspx

APA Technology, Mind, and Society Virtual Conference

This year the APA Technology, Mind, and Society Conference will be held virtually on November 3rd -5th. As always, this conference will feature research and discussions focused on the use of technology for better mental and physical health outcomes. Conference information can be found here: https://tms.apa.org

International Military Testing Association (IMTA)

62nd Annual conference is 25-28 OCT, 2021 in Raleigh, NC. There is a main conference with business meetings, workshops, opening reception on 25 OCT (Monday) and optional excursions on 29 OCT (Friday). Check out registration and details at www.imta.info/home.aspx

Call for Papers

The following journals are accepting manuscripts and have not stipulated any submission deadlines for 2021. For the full list of journals currently accepting manuscripts please visit https://www.apa.org/pubs/journals/resources/calls-for-papers

- Consulting Psychology Journal: Practice and Research
- Experimental and Clinical Psychopharmacology

- Families, Systems, and Health
 - ° Specifically requesting book and media reviews
- Group Dynamics: Theory, Research, and Practice
 - Specifically requesting evidence based case studies and practice reviews.
- Journal of Neuroscience, Psychology, and Economics
- Journal of Threat Assessment and Management
- Motivation Science
- Practice Innovations
- Professional Psychology: Research and Practice
- Stigma and Health
 - Specifically requesting research related to stigmatization and COVID-19

Graduate Student Resources

For those interested in obtaining a doctoral internship in military psychology, please refer to the Division 19 student webpage to view the division's internship preparation guides

https://www.division19students.org/internship-preparation-tips.html

Postdoctoral Fellowship Opportunity at the VISN 17 Center of Excellence for Research on Returning War Veterans

Dr. Karl Slaikeu, Workplace Violence Prevention Program Coordinator (WVPPC) for the Central Texas Veterans Health Care System (CTVHCS), is leading an exciting set of projects to optimize the organization's workplace violence prevention efforts. Alongside the institution's use of letters of concern and behavioral flags to influence behavior, these projects will focus on violence prevention through early and collaborative problemsolving with three sets of parties: Reporters, Experiencers, and Disrupters (as identified in the Disruptive Behavior Reporting System; DBRS). The first pilot project will implement a novel response strategy and collect data to track outcomes and overall effectiveness that will inform additional modifications of these project for sharing with other centers nationally. Through this project, fellows will gain research, administrative, and clinical experience in support of violence prevention and program development within the VA system. In collaboration with Dr. Karl Slaikeu, fellows will (1) aid in the development and implementation of violence prevention pilot projects, (2) contribute to data processing and analysis, (3) develop administrative and leadership skills, (4) publish and present findings, and (5) utilize advanced technology for educational activities and clinical service delivery. Opportunities for grant writing will be available depending on fellow's training goals

For more details and application information, please visit: https://www.mirecc.va.gov/visn17/fellowship.asp

Postdoctoral fellowship at the Salt Lake City VA

The VA healthcare system in Salt Lake City Utah is currently accepting applications for 2021-2022 fellows who are interested in a fellowship which emphasizes PTSD treatment. For more

information please visit https://www.saltlakecity.va.gov/ forms/2021_SLC_VA_PTSD_Fellowship.pdf

Self-Paced Courses and Webinars

SAMHSA Military Mental Health Webinar Series

For the last four years SAMHSA has been hosting military and veteran mental health webinars. A list of archived webinars can be found at: https://www.samhsa.gov/smvfta-center/resources/webinars

The Jefferson Center's Coping with Coronavirus Series The Jefferson Center hosted a webinar on military mental health concerns in the wake of the pandemic. The recording of this webinar can be found here: https:// www.jcmh.org/coping-with-coronavirus-webinar-seriesmental-health-in-the-military/

Division 19 Webinar Series

Offering a range of topics from acquiring a VA internship to navigating the health systems for each branch of service, Division 19 has prepared a series of how-to webinars to assist early career psychologists navigate the field of military psychology. Those webinars can be found here: https://www.division19students.org/webinar-series.html

Center for Deployment Psychology Online Courses

The CDP provides interactive web-based training to educate professionals working with Service Members, Veterans, and their families for FREE (CE credit available for cost). Highly Recommended: Military Culture: Core Competencies for Healthcare Professionals https:// deploymentpsych.org/training

Massachusetts General Hospital Psychiatry Academy MGH offers 30+ FREE on-demand sessions related to treating veterans and their families. Topics include Military Culture, Trauma, Treatment, and Military Family Challenges. https://mghcme.org/calendar

Research Participation Opportunities

If you would like to explore Division 19's ongoing research studies in need of participants please visit: http:// www.division19students.org/research-recruitmentannouncements.html

Veteran Service Organization Spotlight

America's Warrior Partnership

According to their website, "America's Warrior Partnership is the connection that brings local veteran-centric nonprofits together through coordination and collaboration, ensuring consistent information is obtained, relevant services are provided, and national resources are utilized.". In addition to hosting an annual conference for all veteran and active duty service organizations, America's Warrior Partnership is a research partner of Operation Deep Dive and recently launched a technology platform to encourage data driven decisions in the veteran non-profit space. To learn more, please visit: https://www.americaswarriorpartnership.org/

Additional Military Special Interest Groups and Organizations to Explore

The ISTSS Military Special Interest group

https://istss.org/membership/for-members/special-interestgroups-(1)

The ISTSS Moral Injury Special Interest Group

https://istss.org/membership/for-members/special-interestgroups-(1)

DoD/VA Programs and Veteran and Military Service Organizations

The Real Warriors Campaign (RWC) RWC is the Defense Department's official multimedia public awareness initiative designed to decrease the stigma surrounding psychological health among service members, veterans and their families. RWC is situated within the Defense Health Agency's J-9 Directorate, in the Psychological Health Center of Excellence (PHCoE). RWC began in 2009 following a congressional mandate for the Defense Department to reduce barriers to care identified in the 2007 Mental Health Task Force Report, and to promote educational information about mental health to the military community. RWC raises awareness about the signs and symptoms of invisible wounds and the positive outcomes of seeking care. Website: https://www.realwarriors.net/ Psychological Health Resource Center: 866-966-1020

Lone Star Warriors Outdoors (LWSO) Based in Tyler, Texas, Lone Star Warriors Outdoors has the goal to help combat injured warriors to heal/cope with PTSD and help to prevent veteran suicide. LSWO got started in 2011 after its founder personally battled with thoughts of suicide. As the LSWO founder said, "After attending a hunt with another organization who wanted to thank Warriors, I realized there was much more that can be accomplished with a hunt or fishing trip or some outdoor adventure. My goal was to have a 3 day/2-night minimum where the warriors spent time together getting to know each other. We do not allow family members even if they are caregivers. We use that time to bond and talk like with did with our brothers and sisters in combat." POC: Chris Gil, Founder LSWO chris@lonestarwarriorsoutdoors.org Website: https://lonestarwarriorsoutdoors.org/

Mission: At Ease is a small private organization that provides amazing outdoor experiences to our nation's finest. At Mission: At Ease, they take disabled combat veterans on hunting and fishing adventures and use these adventures as a catalyst to work on the mental and social growth

The Association for Contextual Behavioral Science Military Special Interest Group

https://contextualscience.org/act_for_military_sig

Australasian Society for Traumatic Stress Studies

https://www.astss.org.au/

APA Division 18, the division for Veterans Affairs Psychologists

https://www.apadivisions.org/division-18/sections/ veterans

of our attendees. As the founder of Mission: At Ease said, "Through this process, we hope to identify areas for each veteran that we as an organization can make a positive impact on their lives. These impacts may range from getting them to reconnect to the world they have with withdrawn from to giving them a safe outlet to ask for help." POC: TW Howell; <u>twhowell@howelllandandcattle.com</u> Website: <u>https://www.facebook.com/Mission-At-Ease-357939794572364/</u>

Military Family Research Institute The Military Family Research Institute was founded in 2000 at Purdue University's Center for Families in order to improve military families' quality of life. Although it began as a purely research-based endeavor, the Institute has expanded to include programs and outreach. MFRI aids military families in the areas of education, community support, employment, and external relations such as policymaking. By providing their research to organizations and lawmakers, the Institute uses its findings to make an impact. **POC:** Shelley MacDermid Wadsworth, M.B.A., Ph.D., **Director;**shelley@purdue.edu Website: https://www.mfri.purdue.edu/

Military Child Education Coalition The Military Child Education Coalition is a nonprofit organization whose goal is to support our nation's military children. Their mission is simple: to help the military child attend college, find employment, and succeed in life. Military children's' education can be disrupted by many factors, such as deployment, transition, and separation. MCEC works with a plethora of organizations in order to help the military child, such as colleges, public and private schools, and businesses. They also work closely with individuals in the military family. Through students and parent programs as well as professional development, the Military Child Education Coalition supports the military child in every aspect of their educational lives. **POC: Rebecca Porter, Ph.D., Director and CEO** Website: <u>https://www.militarychild.org/</u>

INSTRUCTIONS FOR CONTRIBUTORS TO THE MILITARY PSYCHOLOGIST NEWSLETTER

Please read carefully before sending a submission.

The Military Psychologist encourages submission of news, reports, and noncommercial information that (1) advances the science and practice of psychology within military organizations; (2) fosters professional development of psychologists and other professionals interested in the psychological study of the military through education, research, and training; and (3) supports efforts to disseminate and apply scientific knowledge and state of the art advances in areas relevant to military psychology. Preference is given to submission that have broad appeal to Division 19 members and are written to be understood by a diverse range of readers. *The Military Psychologist* is published three times per year: Spring (submission deadline **January 20**), Summer (submission deadline **May 20**), and Fall (submission deadline **September 20**).

Preparation and Submission of Feature Articles and Spotlight Contributions. All items prepared for submission should be directly submitted to the TMP email: Div19newslettercommittee@gmail.com Questions about which section your submission best fits, please reach out to the section editors directly for guidance: Feature Articles (Tim Hoyt: timothy.v.hoyt.civ@mail.mil), Trends Articles (Bri Shumaker: briannashumaker@gmail.com), Spotlight on Research Articles (Christine Hein: chein9@gmail.com), and Spotlight on History (Paul Gade: paul.gade39@gmail.com). For example, Feature Articles highlight the interests of most Division 19 members; Spotlight on Research Submissions are original, quantitative studies more succinct in nature than other scholarly articles that, if longer, please consider submitting to the Division 19 Journal, *Military Psychology*, at the email address military.psychology.journal@gmail.com.

Articles, including references, must be in electronic form (word compatible), **must not exceed 3,000 words**, and should be prepared in accordance with the seventh edition of *Publication Manual of the American Psychological Association* (APA-7). All graphics (including color and black-and-white photos) should be sized close to finish print size, at least 300 dpi resolution, and saved in TIF or EPS formats. Submissions should include a title, author(s) name, telephone number, and email address of corresponding author to whom communications about the manuscript should be directed. Submissions should include a statement that the material has not been published or is under consideration for publication elsewhere. It will be assumed that the listed authors have approved the manuscript.

Preparation of **Announcements.** Items for the Announcements section should be succinct and brief. Calls and announcements (up to 300 words) should include a brief description, contact information, and deadlines. Digital photos are welcome. All announcements should be sent to the Announcements Section editor, Grace Seamon (seamon@cua.edu).

Review and Selection. Every submission is reviewed and evaluated by the Section Editor, the Editor in Chief, and American Psychological Association (APA) editorial staff for compliance to the overall guidelines of APA and the newsletter. In some cases, the Editor in Chief may also ask members of the Editorial Board or Executive Committee to review the submissions. Submissions well in advance of issue deadlines are appreciated and necessary for unsolicited manuscripts. However, the Editor in Chief and the Section Editors reserve the right to determine the appropriate issue to publish an accepted submission. All items published in *The Military Psychologist* are copyrighted by the Society for Military Psychology. American Psychological Association The Military Psychologist Division 19 750 First Street, NE Washington, DC 20002-4242 Non-profit Org. U.S. POSTAGE PAID



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