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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

With much gratitude, I will “depart the pattern” as Senior Editor with this Fall Issue of The Military Psychologist (TMP) Newsletter. It has been my sincere pleasure working with the Division in this capacity for the past 4 years. A special thanks to past president, Dr. Sally Harvey, for offering me this opportunity to excel, and for the Division leadership and my co-editors in trusting me to serve in this role for so long. Welcome Dr. Tim Hoyt, who has been involved in the Division for many years and has an extensive history of scientific research publications and editorial experience, as he takes on the Senior Editor roll. His challenge is to launch the newsletter into the digital future, by heading up in-house copy editing and producing linkable, web-friendly articles for online referencing. Please also welcome Taylor Zurlinden to the editorial staff; she will be taking over the Feature Editor position. Taylor is not new to the Division 19 newsletter, as she was a prior Society Leadership Program (SLP) graduate and has authored articles published in past newsletters. The transitions will be taking place over the Fall Issue and will be permanent beginning in 2022.

In this issue, our Division President, Maurice Sipos, discusses his successes this year in his outgoing column address. We thank Dr. Sipos for his vision and focus during another socially distanced year. This Issue received more submissions than is typical; to save space, some reference lists are not included, but are available by reaching out to the corresponding author directly. In addition to our staple Feature, Trends and Spotlight on Research articles, we included a ‘perspectives’ article from Sharmane Brown, a student at the Michigan School of Psychology, that offers cultural competence when working with our LGBT clients and veterans. The Feature Article by retired Navy psychologist, Dr. Erik Schlosser, describes how he provides mental health services to service members by using ideas that incorporated language and images from clients’ experiences in the military that are helpful in explaining psychology concepts. Our Trends article shares evidence that models based on Restorative Justice are more consistent with behavioral science and mental health principles, less costly, and potentially more effective than traditional punishment-based models of military sexual assault. The Spotlight on Research article addresses a sensitive topic regarding violent extremism and how it connects to our military veterans’ transition from active duty to the civilian sector. Each article has such a unique voice and applicable information, they are sure to inform and enhance your clinical practice within military psychology.

We also have an overview of the Navy Psychology Summit 2021, and of course, our committee updates are not to be overlooked; the APA Convention Program, Continuing Education, the Division Membership Committee, Early Career Psychology (ECP), Ethics Tips, Fellows Committee updates, the Spotlight on History article and the Executive Committee 2020 passed motions. Be sure to check each one out!

One of the greatest contributions that I believe TMP has made to enhance our membership, and one that fulfilled my personal goal, was to provide others with opportunities (like I have been given) by including our Student (SAC) members in the editorial process and providing a platform for the Society Leadership Program capstone projects to be published. We have two great SLP Capstone projects included here; both of which highlight the great work our SAC members have done over the past year. We look forward to seeing these students blossom as Early Career Psychologists moving forward.

As always, we thank Pat DeLeon, past president of APA, for his comprehensive commentary of legislative action in our field as well as a very intimate window of one man’s day on 9/11 “may we never forget.” Finally, check out the Announcements section to learn of educational, employment and training opportunities specific to our work in Military Psychology.

Lastly, we thank our Division Historian, Paul Gade, for heading up the plan to digitize all prior newsletter issues and make them available at https://www.militarypsych.org/the-military-psychologist.html. 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 Div19newslettercommittee@gmail.com.

As we say in the Navy, I hope to “see you around the fleet” ; may you be well, stay clean and forever be surrounded by “blue skies”!
Dear Colleagues:

Nathaniel Hawthorne, the American novelist, once said that “Time flies over us, but leaves its shadow behind.” Hawthorne’s shadow has been judged for the beliefs he held during his time. The very idea of judging past actions and beliefs based on current standards and values can be divisive in a time that is defined by the desire to increase diversity, equity, and inclusion. This suggests we, as psychologists, have more work to do to reconcile this paradox. I am proud of our community and the way our members use their talents to tackle challenges such as these.

My presidential theme this year has been to Build a Future on the Foundation of Trust that our predecessors spent 75 years building. As we reflect on our past, we need to ensure that our values drive the decisions we make about our future. I have no doubt that the shadow of the time we spent this year will also be judged by our successors. We, in fact, spent time over the past 18 months reevaluating some of the decisions our predecessors made during their time. For example, we examined historical records to judge whether the named awards we give annually are consistent with our values as a society. We assembled a diverse task force who illuminated the shadows of the past as they reviewed the contributions the great names we use to honor present day contributions. Led by Drs. Bruce Crow and Emily Grieser, the task force did an impressive review of ALL our named awards that included a literature and document review, the opportunity for our members to opine, and a careful stakeholder analysis. As a result of their efforts, the task force recommended that the society remove Robert Yerkes as an award namesake based on his association with the eugenics movement. His legacy is not consistent with our values as a society. As a result, the Executive Committee accepted the task force’s recommendation and removed his name from the award. The decision, I think, reflects our ability to learn as an organization.

I want to thank Bill Brim and Hannah Tyler and the Convention Program Committee for another successful and extremely successful virtual Division 19 program. In addition to featuring a new platform (Remo), the Convention Planning Committee assembled a full schedule of division programming, collaborative programming, discussions, and invited presentations. As you heard from Bill during the convention, our members submitted over 100 posters and 20 individual or collaborative programs from which thirteen programs and 89 posters were selected for the convention. In addition, we broadened the programming by including two presentations selected by the APA for collaborative programs and co-listing multiple programs with other divisions. We also had a conversation hour with Division 44, Society Leadership Presentations, DEI training, and were able to honor our award’s recipients. Congratulations to all our awardees!

As a reminder, the Executive Committee voted to create 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 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. The inaugural Foundation Board of Directors was announced at during the business meeting and will include Scott Johnston (President), Eric Surface (Vice President), Paul Bartone (Trustee), Kristin Saboe (Trustee) and Ryan Landoll (Treasurer). Congratulations to our inaugural Foundation Board of Directors!

Although I am entering my final quarter as President, our remaining initiatives are continuing. I look forward to working with Eric Surface, Tatana Olson, and Bruce Crow now and into the future as we implement some of the new initiatives. Although COVID-19 changed the dynamic of my presidential year, I look forward to being able to engage with you in person again in the future. I am particularly thankful to members of the Executive Committee and to Committee Chairs and Members who continue to devote their time and talents to make the division a success. As I mentioned in the last column, 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 have served as President, and ask that you 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
Cultural competence has become a more prominent focus in the field of mental healthcare (Bhui et al. 2007) Trans- lating clinical ideas in a way that makes sense to consumers can be challenging given people’s varying life experience, including the client and clinician’s own cultural backgrounds. This is true in the field of military psychology as well. While each service member has their own individual cultural background, the military also has a culture that affects the context within which mental health services are provided.

My psychology internship and first years as a clinician occurred in the military healthcare system. After my internship, I was assigned to Halyburton Naval Hospital at Marine Corps Air Station Cherry Point, NC. As a newly minted psychologist and Naval officer, I was challenged to do both jobs within the setting of a Marine Corps (USMC) base. As I attempted to provide mental health services to service members, ideas that incorporated language and images from clients’ experiences in the military were helpful in explaining psychology concepts.

After leaving active duty in 1999, I began work in the criminal justice system. Almost 20 years later, I returned to Cherry Point as a civilian psychologist. While many things had changed during that time, certain concepts continue to be useful when communicating with clients. This article will explore some of those concepts that I have found useful when explaining the mission of mental health services to service members and military leaders.

Concepts for Clients

Standard Operating Procedures
The first concept is the idea of a standard operating procedure, or SOP. Every unit has an SOP used to conduct business on a day-to-day basis. An SOP is most useful during difficult or complex situations when it is tempting to respond to the situational characteristics without regard to the mission of the unit. When a unit or command SOP is up-to-date with current Department of Defense directives and instructions from convening authorities, it tends to solve problems instead of create them. If an SOP is outdated, it runs the risk of setting up people for failure and creating more problems than it solves. Even people who have a natural disregard for rules and regulations can admit to the usefulness of an updated SOP as a means of solving problems.

I have found the idea of an SOP to be useful in explaining a basic element of cognitive behavioral therapy to new clients, specifically, to paint a picture of how one’s core beliefs can affect one’s mood and behavior (Beck, 2011). Once the client agrees that an SOP can be useful in solving problems, and that an outdated SOP tends to create more problems than it solves, this same idea is applied to the client’s core beliefs: they have the potential to create more problems than they solve if they include inaccurate information. The concept of one’s core beliefs as a personal SOP is easily understood by most service members. While they may be hesitant to admit their own core beliefs may not be accurate and in need of updating, they can agree to the concept of a personal SOP needing periodic updating.

Semper Gumby
Another idea that has been useful in explaining a clinical concept is found in the phrase Semper Gumby. This is based on the Marine Corps motto of Semper Fidelis (“Always Faithful”). Semper Gumby generally means “Always Flexible” and is commonly used by Marines in reference to the frustrating, but inevitable, reality of situational change. No matter the operational plan, one can expect things to go differently once the plan is put into action; an attitude of flexibility can be helpful in dealing with that change. As the boxer Mike Tyson once said in response to a reporter’s question about an opponent’s fight plan, “Everyone has a plan until they get punched in the mouth.”

The clinical concept of adaptability and its use as a healthy means of dealing with situational change can be illustrated by use of the concept Semper Gumby. Service members, like most people, can be somewhat inflexible at times and can mistake flexibility as a lack of integrity, i.e., not holding true to their beliefs or principles. At times, the need for flexibility when operationalizing a plan can be applied in one’s military experience more easily than in one’s own personal experience and can then be used as a means of bridging the two.

Personal Preference and Reality
A concept related to Semper Gumby is the difference between personal preference and reality. I define personal preference as “what I want, when I want it, how I want it” and reality as “what I can have, when I can have it, how I can have it.” Once the concept of personal preference versus reality is accepted by the client, it is pointed out that the bigger the gap between the two, the more likely the client is to experience negative moods. To explain this
Dropping Your Pack

“Dropping your pack” is a term that signifies when a service member disengages from their job. This is often used to describe those who are seen as quitting or not caring anymore. This is typically used to describe people as they approach retirement and who focus more on preparing for transition to civilian life, such as attending medical appointments to take care of long neglected injuries. It has negative connotations and implies that a service member has given up on their unit.

Many of my clients are senior enlisted personnel who are preparing to retire after 20 or more years of service. It is common for them to initiate behavioral health services late in their careers for various reasons, chief among them being fear that mental health services would negatively affect their careers. Some of them feel that they are “dropping their pack” by attending behavioral health and other medical services more frequently than in the past. They also express concern over their growing awareness that they are spending more time thinking about their future as civilians instead of their previous mindset of being hard charging, ‘leave-it-all-at-the-office’ leaders. They often describe a sense of guilt that accompanies this shift in focus.

I encourage service members in these situations to view their change in attitude not as “dropping their pack” but “reorganizing” it. The reality is that they have accumulated a lot in their “packs” as a result of their service, some of which they will take with them into the civilian world, some of which they will leave behind. It is important for them to start the ‘sorting’ process before they leave Active Duty. This includes some of the negative aspects of their career including trauma material related to deployments or other negative experiences. I have found it useful to introduce the Eriksonian concept of Integrity vs Despair (Erikson, 1982) to provide a framework within which service members can understand and organize their experiences as the “reorganize their pack.”

Next Job and Sticking the Landing

As service members prepare to retire, they can feel overwhelmed at the prospect of leaving the only job they have known since graduating high school. This can be compounded when the service member is uncertain about their next career choice. Two concepts that can be helpful to service members in this context are ‘next job’ and ‘sticking the landing.’ ‘Next job’ refers to the idea that one is not required to have their future career figured out when transitioning from Active Duty. Chances are that their first job as a civilian may not be their final job. A service member’s first job after Active Duty is only required to provide the financial support needed to live a decent life. It is not a requirement that their first job be directly related to their eventual career track or that it provides an ideal amount of financial support and security. One’s first job as a civilian is merely an opportunity to enter the civilian job market. It is one’s next job -- nothing more, nothing less.

‘Sticking the landing’ refers to the end of a gymnastic routine in which a gymnast, having completed their routine, dismounts their apparatus. The dismount usually consists of twists and turns that involve losing sight of their landing spot. The dismount can include the highest degree of difficulty of their routine. These images can be useful in working with service members as they attempt to transition from active duty to civilian life. At times, they may experience a sense of loss including an inability to see where they will ‘land.’ These images can assist service members in articulating some of their fears and concerns about the transition process, including the idea that one can ‘dismount successfully’ from active duty with planning and practice.

Concepts for Commanders

Scaling the Wall

When explaining the role of mental health services in the military healthcare system to unit leaders, who may not be personal consumers of those services, I share a story told to me during my first day of internship as a Navy Psychologist. I was asked to imagine a large wall that a service member was required to scale. I was told that there were three types of people who try to scale the wall: those who will do so without assistance; those who will be unable to do so no matter how much assistance is provided; and those who will scale the wall with some degree of assistance. My job was to figure out which group the person coming to me for treatment belonged to, and for those who required some degree of assistance, to figure out how much was needed. Some of the challenges facing a provider of mental health services in the military is to discern whether the issues presented by the service mem-
ber are situational or chronic, able to be remedied, and to what extent treatment will impact their ability to perform their current assignment. Letting unit leaders know the issues we face and that we try to figure out the likelihood of our interventions being successful can help them better understand our role in the larger context of operational readiness.

I also like to let unit leaders know that, while I might be the only person in the room who planned on a career in the mental health field, we are all working in the mental health field. Most units have at least one service member who requires mental health treatment in order to stay on Active Duty. Sadly, some units have experienced the tragedy associated with suicide. The USMC has placed an emphasis on commands being aware of how their unit members are doing through the use of Force Preservation Counsels (FPC’s). As a result, the mental health status of unit members has become more formally integrated into unit operations. It has essentially been written into the ‘SOP’ of the military. While a stigma against seeking help for mental health issues remains, it has decreased since I left Active Duty in 1999. While unit leaders may have a personal preference for not wanting to deal with service members with mental health problems, in reality it is unavoidable and therefore best to acknowledge and plan for them.

Military culture can create challenges to providing mental health care. While some aspects of military culture create challenges to the delivery of mental health care, clinicians are encouraged to work within that culture by using aspects of it to provide services that impact clients positively. Clinicians in general strive to find images, concepts, and language to build rapport and assist clients in their therapeutic journey. Sometimes these images, concepts and language are related to the client’s culture. Using aspects of military culture to enhance service members’ ability to comprehend and implement therapeutic principles is possible and encouraged as we strive to treat service members in their current life situation.

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Disclaimer: This material has not been published or is under consideration for publication elsewhere.

References


Call for a Paradigm Shift: Military Accountability Programs and Military Sexual Violence

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In September 2016, Army Lieutenant Erin Scanlon was sexually assaulted by a non-commissioned officer at a warehouse party outside Fort Bragg (Torres, 2020). She sought medical care immediately, reported the crime to both local police and the Criminal Investigation Division, and filed an unrestricted report with a Sexual Assault Response Coordinator. Despite these actions, the investigation faced delays for two years before Lieutenant Scanlon’s case was turned over to U.S. Special Operations Command for court martial proceedings. In the course of the subsequent investigation, Lieutenant Scanlon’s sexual history was scrutinized, and she was accused of withholding details of her story to cover-up a sexual relationship with another non-commissioned officer. These accusations led to an extraordinary circumstance in which her own Special Victims Counsel testified against her in the court martial of her assailant. Other witnesses testified that the incident appeared to be consensual. The accused assailant was acquitted. Lieutenant Scanlon left the Army the next year (Torres, 2020).

Over the past decade, thousands of survivors of sexual violence in the military like Lieutenant Scanlon have come forward to tell their stories and advocate for reform. These experiences have been highlighted in documentaries such as The Invisible War and on social media through the #MeToo movement. The murder of Specialist Vanessa Guillen in 2020 led to an investigation by an Independent Review Committee that highlighted several shortfalls in prevention, criminal investigation, and prosecution of sexual violence on Fort Hood (Department of the Army, 2020). More broadly, these examples highlight a widespread military culture that is permissive regarding sexual violence, as demonstrated by its ongoing prevalence (Department of Defense, 2021). Lieutenant Scanlon’s case is among the 95% of military sexual assault cases in which the perpetrator is never convicted (Department of Defense, 2020). This case also demonstrates the potential harm to sexual assault survivors through institutional betrayal, such as the length of time for the investigative process, failure to respond in a supportive manner, and secondary victimization (Platt et al., 2009). Perceived institutional betrayal of this kind increases the severity of posttraumatic stress symptoms following sexual violence (e.g., Andresen et al., 2018; Smith & Freyd, 2013). Indeed, 62% of military sexual assault survivors who participate in the criminal-legal process report that they are dissatisfied with the action taken against the perpetrator, with 69% reporting that the process was “difficult” or “very difficult” (Office of People Analytics, 2017). Lieutenant Scanlon’s story represents the experience of a white, cisgender officer, who has relative power and authority within the military. Service members from historically marginalized communities might face additional barriers as part of this process.

Because continued efforts at reform have failed to impact sexual violence prevalence and conviction rates (Department of Defense, 2020, 2021), this article proposes a new approach to address accountability for sexual violence by leveraging mental health professionals and expanding related support programs. This concept centers on establishing Military Accountability Programs based on Restorative Justice principles.

Restorative Justice Approaches

Restorative Justice is a broad term that generally involves reconciliation between a survivor, offender, and the community after harm occurs (McGlynn et al., 2012; Zehr, 2015). Conceptually, Restorative Justice focuses on taking responsibility, repairing harm, focusing on the behavior of the offender rather than the survivor, and addressing the systematic causes of such violence in society at large. Table 1 compares Criminal Justice approaches to Restorative Justice (Zehr, 2015). Restorative Justice approaches often center on facilitating a face-to-face meeting between a survivor and an offender (or “responsible person”) that may include other community stakeholders (see Naylor, 2010). These meetings typically involve acknowledgement by the responsible person that the survivor has suffered harm, a description of the offense, and its impact on the survivor. Guided by a facilitator, all involved parties work toward agreement for reparation of the harm experienced by the survivor. Reparation may include formal apology, a specific treatment plan, or service to the community.

Effectiveness of Restorative Justice Approaches

Though many indigenous groups and community organizations historically practiced Restorative Justice, institutional restorative justice practices have increased over the past two decades, recently expanding to include violent crimes. New Zealand, Belgium, Norway, and Ireland have implemented nationwide Restorative Justice practices related to sexual offenses with varying degrees of effectiveness (Keenan et al., 2016). Studies of programs based on Restorative Justice principles have shown promising results, including reductions in reported stress, reductions in endorsed symptoms of posttraumatic stress, improvements in survivor satisfaction with the process, increases in en-

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endorsed victim empathy by offenders, increased endorsement of responsibility by offenders, reduced rates of recidivism, and improved cost effectiveness (Duwe, 2018; Lloyd & Borrill, 2020; Rye et al., 2018; Sherman et al., 2015). One U.S.-based study of the RESTORE program showed that the majority of survivors were willing to engage in a Restorative Justice program, with most endorsing ideas such as “I did not feel blamed” and “I feel like justice was done” (Koss, 2014). Similarly, the implementation of Veteran Treatment Courts is a prominent example of Restorative Justice principles, with a process that is non-adversarial, focused on community reintegration, and involves numerous stakeholders in the recovery process (Baldwin & Rukus, 2015). Unlike the criminal-legal system, Restorative Justice is a set of principles (centered on the components in Table 1) that allows for flexibility according to survivor and community needs.

### Potential Implementation of Restorative Justice for Military Sexual Assault

Several military practices already align with Restorative Justice principles, including multiple options for reporting a sexual assault, the assignment of Special Victims Counsel, and disability compensation for psychological conditions resulting from military sexual assault. However, the military does not utilize a conference-based approach as an alternative to a criminal-legal process. In exploring such an alternative, existing military practices that are consistent with Restorative Justice could be expanded and incorporated into a Military Accountability Program, based on the four-stage model developed by Koss (2014). Note that specific roles could be played by a number of professionals with appropriate training, such as Special Victims Counsel, Mental Health Providers, or Sexual Assault Response Coordinators.

**Stage 1: Referral and Informed Consent.** Figure 1 shows the potential referral process and roles played by involved persons throughout. A survivor making either a restricted or unrestricted report to a Sexual Assault Response Coordinator or Victim Advocate is notified about the option to conference with the responsible person (offender) through the Military Accountability Program. If the survivor is interested in this option, then the assigned Special Victims Counsel reviews appropriate consent and enroll the survivor. The Special Victims Counsel then makes contact with the responsible person through their Trial Defense Service attorney. Once there is agreement on both sides and the conference initiates, then there is no longer the option for a court-martial process. If the survivor or the responsible person decline to participate and the report was unrestricted, then the regular process of investigation and potential court martial would resume.

**Stage 2: Conference Preparation.** During the conference preparation stage, the Special Victims Counsel reviews the format of the conference and establishes the parties that the survivor would like to attend, such as unit or family members. The Special Victims Counsel also reviews with the survivor what specific things that the survivor wants to hear or request as part of the conference. The Sexual Assault Response Coordinator or Victim Advocate may assist the survivor in preparing an impact statement or other prepared questions. At the same time, the Trial Defense Service attorney works with the responsible person to review the format of the conference, rules concerning participation (such as legal privilege\(^1\)), parties that the responsible person would like in attend-

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\(^1\) Note that Military Rule of Evidence (M.R.E.) 410 already provides protection for statements made by the Accused during plea discussions and during any judicial inquiry regarding a guilty plea (Joint Service Committee on Military Justice, 2019). An expansion of this rule to include statements made during the Military Accountability Process such as disclosing and taking responsibility for harmful behavior would protect the Responsible Person from self-incrimination during this process. Similarly, privilege afforded to communication with psychotherapists or victim advocates (M.R.E. 513 and 514) could be expanded to protect all communication between the responsible person and the Military Accountability Program team.
Stage 3: Conferencing. During conferencing, the facilitator enables statements from the survivor and the responsible person. The survivor recalls the incidents, and the responsible person reviews their behavior during the incident and their responsibility for it. The responsible person’s primary responsibility is to engage in active listening, then repeat back and summarize what they hear from the survivor. Others invited to the conference then would have the opportunity to describe how the incident has affected them, in a structured way. The survivor and responsible person then discuss the terms of a redress agreement, which may include apology, community service, or engagement in treatment by the responsible person.

Stage 4: Accountability and Reintegration. In the final stage, program personnel supervise the responsible person in completing the requirements of the redress agreement. Responsible persons in positions of responsibility may be non-punitively restricted from leadership roles while completing accountability requirements. During this time, program personnel also may review the responsible person’s progress with the survivor, if wanted. The process concludes with a final meeting in which the responsible person reviews progress with anyone from the original conference who would like to attend. Program participation then is completed.

Case Example: What could have happened?
In returning to Lieutenant Scanlon’s case, imagine how the process may have worked differently through a Military Accountability Program. When filing a restricted report of her assault, Lieutenant Scanlon learns from her Victim Advocate about the program. She works with a Special Victims Counsel who conveys her interest to engage with the program while also seeking psychological services. The Special Victims Counsel links with the Trial Defense Attorney, and the responsible person agrees to participate. He completes program consent one week later. Lieutenant Scanlon and the responsible person then prepare for the conference with their advocates and schedule a conference date. Through their advocates, Lieutenant Scanlon and the responsible person also collaborate on an accountability plan for the responsible person that includes an apology letter, substance use treatment, and no positions of responsibility in the unit until the accountability plan is completed. In this process, the criminal-legal definition and “guilt or innocence” are not the primary concerns or questions. Energies focus on clarifying and addressing the harm that occurred, and building accountability skills among the parties involved through the process. During the conference, which occurs approximately two months after the sexual assault, Lieutenant Scanlon shares her reactions to the assault and her desire for the responsible person to account for his behavior. The responsible person engages in active listening as practiced in the preparation for the conference, which includes attempting to summarize and repeat back to Lieutenant Scanlon what he heard. The

Figure 1. Potential Roles and Stages of Involvement with a Military Accountability Program
command teams for both individuals are included in the follow-up plan to provide support as the accountability plan is enacted.

Summary and Conclusion
The current process for investigation and litigation regarding sexual assault in the military focus on punishment rather than accountability, and have been associated with persistent sexual violence, low conviction rates, and mixed victim satisfaction ratings (Office of People Analytics, 2017; Department of Defense, 2020). Models based on Restorative Justice are more consistent with behavioral science and mental health principles, less costly, and potentially more effective (Duwe, 2018; Koss, 2014; Lloyd & Borrill, 2020; Rye et al., 2018; Sherman et al., 2015). This approach—operationalized through a proposed Military Accountability Program—focuses on restoring the needs of the person and community who were harmed. By adapting the current structures for survivor support and associated legal involvement, the needs of survivors, responsible persons, and the military at large can be better met, providing a path for accountability and behavior change military-wide.

Author Note
The opinions or assertions contained herein are the private views of the authors and are not to be construed as official or reflecting the official policy of the U.S. Government, the Department of Defense, the Department of the Army, or the Defense Health Agency. Correspondence concerning this article should be addressed to Dr. Maggie Baisley, maggie@reclaimjusticemovement.org.

References


Homegrown violent extremism (HVE) is a “terrorist act within the context of ideologically motivated violence or plots, perpetrated within the United States or abroad by American citizens, residents or visitors, who have embraced their legitimizing extremist ideology within the United States” (Southers, 2013, p.16). This definition of HVE encompasses a more robust behavioral component that includes actively planning or conspiring to commit a violent act, as well as engaging in various forms of violence ranging from verbal and physical assaults to stabbing people to detonating a bomb. What sets apart this act of violence is its rootedness in an ideology that can be political, religious, or cultural. People move from holding extremist ideas (cognitive radicalization) to utilizing extremist methods (violent radicalization) (Vidino, 2010).

In HVE, the ideology provides the justification to commit violence (Southers, 2013).

Systematic studies that examine the link between military service and HVE are rare, and the few studies on the topic have typically been conducted in the aftermath of an event. For example, after the 1995 Oklahoma City Bombing and 1995 Fayetteville murders of a Black couple by three white servicemembers, Curtin (1997) conducted a study to examine white extremism among active duty servicemembers. Results revealed certain common demographics such as being a young adult (18-25) and/or living in impoverished circumstances during childhood years, or being middle-aged and middle-class. When mapped onto the military career, these findings suggest that those who are in the early (i.e., young adult servicemembers) or later (i.e., middle-aged servicemembers) stages of military service are at-risk of joining extremist groups. From a different perspective, these findings imply that entering and exiting military service are vulnerable timepoints for recruitment into extremist groups.

In another study, Simi and colleagues (2013) explored the relationship between military service and far-right violence, including white supremacy violence (Simi et al., 2013). Results show that military discharge seems to be an initial pathway to far-right extremism and eventually violence. The findings show that Vietnam War veterans’ reintegration experiences into an unwelcoming civilian society created social stress (e.g., anger, anxiety), which was a gateway for recruitment into far-right extremist groups. On the other hand, veterans who received a less than honorable discharge experienced identity incongruence (i.e., rejected by the military, but warrior identity persisted), which motivated them to seek para-military extremist groups to reinforce their warrior identity.

Recent historical analyses of what is now called the modern white power movement traces its militarized roots to the leadership of (some) World War II and (mostly) Vietnam War veterans (e.g., Belew, 2018). Only recently, the Capitol Breach on January 6, 2021 further reinforced ties between white nationalist extremist and past military service. As the federal investigations are still ongoing and more arrests are forthcoming, the proportion of insurrectionists with military experience is expected to be higher given past research that showed 58% of military veterans who committed domestic terrorist acts were affiliated with right-wing extremism and took on leadership roles (Smith et al., 2011). Furthermore, preliminary findings from an ongoing study suggest that among military personnel (i.e., active duty, veterans) who were apprehended for planning or committing an HVE act, 37% primarily held Anti-Government ideologies and another 30% White Supremacy/Neo-Nazi ideologies (Castro & Atuel, 2021).

Present Study

The present study is part of a larger ongoing project that seeks to compare the HVE trajectory of military veterans and civilians. The current research leverages existing data collected on people indicted by the U.S. government for terrorism. Utilizing the American Terrorism Study, 1980-2002 (Smith & Damphousse, 2007) datasets, we posed the following research question: Are there differences in demographic characteristics (e.g., race, education) and HVE characteristics (e.g., ideology, role in group, target of terrorism) between military veterans and civilians?

Methods

The American Terrorism Study, 1980-2002 (Smith & Damphousse, 2007) databases (https://www.icpsr.umich.edu/icpsrweb/NACJD/studies/4639), housed at the University of Michigan’s Inter-university Consortium for Political and Social Research, contain court-based information on people who have been indicted of terrorism within the U.S. from 1980-2002. All datasets have omitted or masked information that can be linked directly to a particular person.

Sample

The Indictees Data (N=574) has 52 people with a military background (military group), 42 with no military background (civilian group), and 474 with unknown military background (mixed group). We recategorized the unknown military background group as a mixed group.
under the assumption that this category reflects both military personnel and civilians.

**Demographic Characteristics**

The following variables were included in the analyses: sex (e.g., male, female), race (e.g., White, African-American), age (at indictment), marital status (e.g., married, single), and educational level (e.g., less than 8th grade, GED).

**HVE Characteristics**

The following variables were included in the analyses: length of group membership (in months), type of terrorist group (e.g., left-wing, right-wing), role in group (e.g., leader, cadre), mode of recruitment in the group (e.g., prison, family), primary target (e.g., government, civilian), and state of indictment (e.g., Alabama, California).

**Statistical Analyses**

Means or frequencies of age, gender, race, and education were obtained for each of the groups (military, civilian, mixed). Proportions of HVE characteristics (e.g., type of terrorist group, role) were calculated and compared across the three groups using Chi-squared test for overall difference, as well as pairwise comparison with Bonferroni minimum P-value test (Westfall & Wolfinger 2000) that adjusts for the increased type I error rate. All statistical analyses were performed in SAS 9.4.

**Results**

**Demographic Characteristics**

As shown in Table 1, there were significant differences in age, gender, and marital status. With regards to age, the military group ($M = 46, SD = 10.9$) was older than the civilian ($M = 31, SD = 9.5$) and the mixed ($M = 37, SD = 10$) groups. In terms of gender, the military group was all-male compared to 87% of the civilian and 88% of the mixed groups. Regarding marital status, 48% of the military and 46% of the mixed groups were married or cohabitating with a partner compared to 29% of the civilian group. In addition, 52% of the civilian group was single compared to 13% of the military and 12% of the mixed groups.

<table>
<thead>
<tr>
<th>TABLE 1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Means (SD), Frequencies, and Percentages of Demographic Characteristics of Study Sample (N=574)</strong></td>
</tr>
<tr>
<td><strong>Factor</strong></td>
</tr>
<tr>
<td>Age (Mean (SD))</td>
</tr>
<tr>
<td>Gender</td>
</tr>
<tr>
<td>Female</td>
</tr>
<tr>
<td>Male</td>
</tr>
<tr>
<td>Other/Unknown/Missing</td>
</tr>
<tr>
<td>Race</td>
</tr>
<tr>
<td>White</td>
</tr>
<tr>
<td>Black</td>
</tr>
<tr>
<td>Hispanic</td>
</tr>
<tr>
<td>Other/Unknown/Missing</td>
</tr>
<tr>
<td>Marital Status</td>
</tr>
<tr>
<td>Married/Cohabitation</td>
</tr>
<tr>
<td>Single</td>
</tr>
<tr>
<td>Divorced/Separated/Widow</td>
</tr>
<tr>
<td>Other/Unknown/Missing</td>
</tr>
<tr>
<td>Education</td>
</tr>
<tr>
<td>High school or below</td>
</tr>
<tr>
<td>Some college</td>
</tr>
<tr>
<td>College/Post-graduate</td>
</tr>
<tr>
<td>Other/Unknown/Missing</td>
</tr>
</tbody>
</table>
No significant differences were found in race \((p=.29)\) and education \((p=.187)\).

**HVE Characteristics**

As shown in Table 2, there were significant differences in type of terrorist group, role in terrorist group, and mode of recruitment in terrorist group. Regarding type of terrorist group, 60% of the military group belonged to right-wing terrorist groups compared to 27% of the civilian and 37% of the mixed groups. Meanwhile, 73% of civilians were associated with international or other terrorist groups compared to 35% of the military and 38% of the mixed groups. In addition, 24% of the mixed group belonged to left-wing terrorist groups compared to 6% of the military group. Regarding role in a terrorist group, 48% of the military group held leadership roles in a terrorist group compared to 25% of the civilian and 25% of the mixed groups. In terms of recruitment mode, half of the sample across the three groups had missing data, hence, we interpret this set of results as significant trends. Based on available data, 17% of the military group started their own terrorist group or joined their group with

**TABLE 2**

Means (SD), Frequencies, and Percentages of Extremist Ideology and Targets of Terrorism \((N=574)\)

<table>
<thead>
<tr>
<th>Factor</th>
<th>Military (n=52)</th>
<th>Civilian (n=48)</th>
<th>Mixed (n=474)</th>
<th>(p)-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Membership in Months (Mean (SD))</td>
<td>25 (26.3)</td>
<td>29 (30.1)</td>
<td>30 (20.3)</td>
<td>0.781</td>
</tr>
<tr>
<td>Type of Terrorist Group</td>
<td></td>
<td></td>
<td></td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Right-wing</td>
<td>31 (60%)</td>
<td>13 (27%)</td>
<td>177 (37%)</td>
<td></td>
</tr>
<tr>
<td>Left-wing</td>
<td>3 (6%)</td>
<td>0 (0%)</td>
<td>115 (24%)</td>
<td></td>
</tr>
<tr>
<td>International/Other</td>
<td>18 (35%)</td>
<td>35 (73%)</td>
<td>179 (38%)</td>
<td></td>
</tr>
<tr>
<td>Unknown/Missing</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>3 (1%)</td>
<td></td>
</tr>
<tr>
<td>Role in Terrorist Group</td>
<td></td>
<td></td>
<td></td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Leader</td>
<td>25 (48%)</td>
<td>12 (25%)</td>
<td>118 (25%)</td>
<td></td>
</tr>
<tr>
<td>Cadre</td>
<td>24 (46%)</td>
<td>22 (46%)</td>
<td>283 (60%)</td>
<td></td>
</tr>
<tr>
<td>Other/Unknown/Missing</td>
<td>3 (6%)</td>
<td>14 (29%)</td>
<td>73 (15%)</td>
<td></td>
</tr>
<tr>
<td>Mode of Recruitment</td>
<td></td>
<td></td>
<td></td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Church/Prison/School</td>
<td>5 (10%)</td>
<td>9 (19%)</td>
<td>20 (4%)</td>
<td></td>
</tr>
<tr>
<td>Family/Friend</td>
<td>3 (6%)</td>
<td>13 (27%)</td>
<td>27 (6%)</td>
<td></td>
</tr>
<tr>
<td>Started or with other group</td>
<td>9 (17%)</td>
<td>5 (10%)</td>
<td>11 (2%)</td>
<td></td>
</tr>
<tr>
<td>Other/Unknown/Missing</td>
<td>35 (67%)</td>
<td>21 (44%)</td>
<td>416 (88%)</td>
<td></td>
</tr>
<tr>
<td>Primary Target</td>
<td></td>
<td></td>
<td></td>
<td>0.019</td>
</tr>
<tr>
<td>Social Group</td>
<td>13 (25%)</td>
<td>5 (10%)</td>
<td>98 (21%)</td>
<td></td>
</tr>
<tr>
<td>Government/Federal</td>
<td>19 (36%)</td>
<td>15 (31%)</td>
<td>147 (31%)</td>
<td></td>
</tr>
<tr>
<td>Military</td>
<td>3 (6%)</td>
<td>6 (13%)</td>
<td>53 (11%)</td>
<td></td>
</tr>
<tr>
<td>Other/Unspecified</td>
<td>10 (19%)</td>
<td>21 (44%)</td>
<td>108 (23%)</td>
<td></td>
</tr>
<tr>
<td>Unknown/Missing</td>
<td>7 (14%)</td>
<td>1 (2%)</td>
<td>68 (14%)</td>
<td></td>
</tr>
<tr>
<td>Region of Indictment</td>
<td></td>
<td></td>
<td></td>
<td>0.002*</td>
</tr>
<tr>
<td>Northeast</td>
<td>7 (13%)</td>
<td>17 (35%)</td>
<td>131 (28%)</td>
<td></td>
</tr>
<tr>
<td>Midwest</td>
<td>2 (4%)</td>
<td>3 (6%)</td>
<td>46 (10%)</td>
<td></td>
</tr>
<tr>
<td>South</td>
<td>26 (50%)</td>
<td>7 (15%)</td>
<td>130 (28%)</td>
<td></td>
</tr>
<tr>
<td>West</td>
<td>17 (33%)</td>
<td>21 (44%)</td>
<td>136 (29%)</td>
<td></td>
</tr>
</tbody>
</table>

Note: * Puerto Rico is excluded in the chi-square test.
another terrorist group compared to 10% of the civilian and 2% of the mixed groups. Among the civilian group, 27% were recruited by family or friends compared to 6% of the military and 6% of the mixed groups.

In addition, there were significant differences in primary target (e.g., government, civilian) of terrorism (see Table 2) While over one-third of the sample across all the groups primarily targeted government/federal officials or buildings (36% of military, 31% of civilian, and 31% of the mixed groups), 25% of the military group also targeted diverse social groups (e.g., racial/ethnic minorities, religious minorities) compared to 10% of the civilian and 21% of the mixed groups. Meanwhile, 44% of civilians had other primary targets (e.g., banks) compared to 19% of the military and 23% of the mixed groups.

Finally, there were significant differences in region of indictment. We recategorized the state of indictment according to census regions (e.g., Northeast, West) because most states had fewer than 2 incidents. In terms of regions, 50% of the military group were indicted in Southern states compared to 15% of the civilian and 27% of the mixed groups. Meanwhile, 44% of the civilian group were indicted in Western states compared to 33% of the military and 29% of the mixed groups.

No significant differences were found in length of membership in months ($p = .781$).

**Discussion**

Broadly, the results show significant differences in demographic and HVE characteristics between the military and civilian groups. Specifically, the pattern of results indicates that compared to civilians, people with a military background who commit domestic terrorist acts are more likely to be older, be male, in a domestic partnership, holding right-wing ideology, have started their own group or joined their group with another group, hold a leadership position in the group, target government officials/buildings as well as minority groups, and commit their terrorist acts in the Southern states.

While it is unclear whether the person with a military background was actively serving or not, it is safe to assume based on the mean age of the group that the vast majority or perhaps everyone in the sample are military veterans. Nevertheless, these results are equally applicable to the active force because the military-civilian transition process officially starts while the service member is on active duty, and continues beyond military service as veterans re-integrate back into civilian communities. Equally important, HVE has been shown to be a process that moves an individual through various stages of radicalization (e.g., Southers, 2013).

**Revisiting Military-Civilian Transition: The Potential Roles of Narratives and Networks**

Transitioning from military service to civilian life has not been a seamless experience for all veterans. This is because transition is not a discrete event, but a complex, and perhaps lifelong, process that compels veterans to fully participate and engage in civilian life. Emerging evidence has uncovered the day-to-day struggles some veterans face in their civilian reintegration including employment, housing, finances, and access to health care (Castro & Kintzle, 2017; Castro, Kintzle, & Hassan, 2014, 2015; Kintzle, Rasheed, & Castro, 2016). In addition, navigating through the difficulties of reintegrating back into civilian life is compounded by a need to belong to groups that provide a sense of purpose or meaning, or where one feels valued (Atuel & Castro, 2018). For as Hollingshead (1946) predicted based on his astute observations of World War II veterans’ reintegration experiences, “many veterans will be faced with the problem of developing a sense of social responsibility” (p. 447).

As applied to the present study’s results, this line of reasoning suggests that the narratives of right-wing terrorist groups could function to fill in the void left by military service. The historical pillars that have informed right-wing groups include militia movements, KKK, anti-government, and New Patriots, with each social/group movement attempting to promote a military subculture to further its violent agenda (Perliger, 2020). In alignment with these various groups’ rhetoric of anti-government and hatred towards minorities, the primary targets of terrorism among the military veteran sample in the study were government officials and buildings as well as racial/ethnic and religious minorities.

Whether or not far-right terrorist groups actively recruited military veterans or military veterans pursued membership in far-right terrorist groups is unknown in the sample. What is clear are the trends showing a higher proportion of military veterans starting their own group or joining their group with another terrorist group. This suggests that military veterans already had their own network of like-minded individuals to start with and will merge with another group to create a larger network of people. Once in a group, they are more likely to take on leadership roles, which can potentially range from ideological leadership (e.g., creating propaganda) to paramilitary training (e.g., Beliew, 2018). Finally, that half of the military veterans were indicted in the Southern states, and another quarter in the Western states reflects where most military veterans are situated – with the top three states being Texas, California, and Florida (Statista, 2019). This finding also suggests that Southern and Western states could serve as incubators of radicalization leading up to violent extremism among military veterans.

**Next Steps**

Alleviating HVE among military veterans requires coordinated efforts among the civilian, military, and veteran communities. This is because each of these communities represent the various social networks military veterans acquire during their lifetime – civilian (premilitary) to military to veteran (postmilitary) – and thus have the potential to steer military veterans away from right-wing
ideologies leading to domestic terrorism or any type of violent ideology. Of all the social networks, the argument can be made that the military is the most powerful and potent influencer in shaping and reshaping the character of active duty servicemembers and military veterans. As a value-based institution and the intermediary status between civilian and veteran, the military is at the crux and of instilling lifelong codes of honor and duty (e.g., Castro, 1999) that informs “social responsibility” (Hollingshead, 1946) beyond military service.

Limitations of the Present Study and Directions for Future Research

The current research has several limitations, which should be taken as directives for future studies. First, how each military veteran was radicalized is unknown. Considering there could be several pathways to HVE with each individual having their own unique sets of risk factors, warning signs, and triggering events (see Smith, 2018), future research should examine the HVE trajectory of military veterans to find commonalities and to identify even further the unique contribution of the military experience. Second, HVE has been considered a “low frequency, but high impact event”. This means that this type of violence is rare and enacted by a significantly tiny minority of the population. Hence, the study findings are contextualized as “outliers” within the military veteran population. Nevertheless, future research should be directed to gaining deeper insights into this subgroup of military veterans, with the goal of developing new or strengthening current policies, practices, and programs to disrupt the pathway to violent extremism. For inquiries and a complete reference list, contact the corresponding author.

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APA Convention Program Committee

William Brim, Chair

Thank you for a successful APA 2021 event and for your patience while we tried out some new formats and ideas. Keep in mind that if you registered for APA you have access to all pre-recorded content until November so be sure and check out Division 19 programming! Congratulations to everyone who won door prizes/giveaways. We've had a few delivery delays but most should have received their gifts by now. Our commemorative glass vendor has started shipping out the stemless wine glasses and coffee mugs, so look for yours soon!

We are excited for APA 2022! As of now, APA is saying that the convention will be a hybrid model with some aspects in person and some provided online pre-recorded and some online streaming. Because this is a moving target, APA is sliding back the usual call for proposal dates. We are anticipating more information in October and anticipate a proposal submission window in December/January timeframe so get your proposals ready now. Look for more information soon and if you have any feedback regarding the 2021 programming let us know at Div19ConventionChair@gmail.com.

We are looking for a Co-Chair for APA 2022! Join our team and help plan and play a part in an exciting program for 2022. Send interest to Div19ConventionChair@gmail.com.

William Brim, 2021 APA Convention Chair for Division 19 (Military Psychology)
September 2021 marks the tenth anniversary of the repeal of the “Don’t Ask, Don’t Tell” policy, which forced Active-Duty service members to remain private about their sexual identities or otherwise risk being discharged (Belkin, 2021). In meantime, the military transgender community has experienced multiple policy reversals on their ability to serve openly and much painful public debate over their fitness for duty. There are over one million veterans in the United States who identify as lesbian, gay, bisexual, or transgender (LGBT; Lange et al., 2020). Similar to other sexual and gender marginalized groups, LGBT veterans may face a number of unique barriers to care, including difficulties disclosing their sexual and/or gender identity to their provider, feeling uncomfortable or unwelcome in treatment facilities, or concerns about discrimination (Kauth et al., 2019). In fact, when compared with the general patient population at Veterans Health Administration (VHA) facilities, LGBT veterans are more likely to screen positive on measures of depression, posttraumatic stress disorder, and alcohol problems (Cochran et al., 2013).

Awareness of minority stress and the mental health needs of LGBT veterans has driven an emerging body of research on their experiences receiving care in the VHA (e.g., Sherman et al., 2014; Shipherd et al., 2018), in turn contributing to more LGBT veteran specific policy changes. In an effort to provide affirming and inclusive care to LGBT veterans, in 2016 the VHA launched a program to place LGBT Veteran Care Coordinators (VCC) in all health care facilities (Kauth & Shipherd, 2016). Valentine and colleagues (2021) list these specific roles of the LGBT VCC:

(a) monitor the environment of care and provide corrective actions as needed
(b) provide staff training and consultation to facilitate cultural competency in serving LGBT veterans
(c) participate in LGBT-related outreach and community events
(d) serve as a point person to advocate for LGBT veterans and bring about solutions to challenges relating to LGBT inclusion
(e) develop relationships with VHA Patient Advocates and other key stakeholders (e.g., facility police) to coordinate care and resolve conflicts for LGBT veterans
(f) communicate with leadership in the VHA and community organizations
(g) implement policies to ensure LGBT veterans experience appropriate care, and
(h) create a safe and affirming environment for LGBT veterans.

The establishment of LGBT VCCs is a positive step regarding the treatment and psychological well-being of LGBT veterans. Indeed, comparison of recent surveys shows that rates of LGBT veterans describing their VHA as somewhat or very welcoming has increased from 30% to 64%, with a corresponding decrease in describing VHA facilities as unwelcoming from 36% to 18% (Kauth et al. 2019; Sherman et al., 2014). Nonetheless, this initiative alone likely cannot address the individual experiences of each LGBT veteran in the VHA. Each provider and staff member should be aware of the potential barriers to care experienced by LGBT veterans to validate these experiences and reduce or eliminate negative or unhelpful encounters.

VA providers need cultural competence and historical knowledge of LGBT military issues to effectively care for LGBT veterans. Harm against already marginalized groups manifests at the institutional and interpersonal levels when leaders are not intentionally inclusive about services. Providing healthcare to LGBT veterans, particularly for trauma-informed or trauma-focused treatment, requires an understanding of intersectionality (Crenshaw, 1994). Intersectionality describes the qualitative differences in the experience of trauma among groups that are multiply marginalized (e.g., Bryant-Davis, 2019). For example, a Black Lesbian veteran will have a unique experience of the same trauma compared to a white heterosexual veteran due to contextual factors of racism, sexism, and heterosexism.

LGBT veterans and non-LGBT veterans may share several experiences common to service in the military, including combat exposure and other military-related occupational stressors. However, LGBT veterans also may have experienced significant stress and trauma related to their sexual identity and gender identity, including harassment, victimization, and violence in their military units (Mattocks et al., 2013). LGBT veterans experience similar harassment in VA health care facilities based on their identity (Shipherd et al., 2018). Livingston et al. (2019) examined ways in which trauma, in conjunction with other stressors (i.e., minority stress, experiences of microaggression), impacted LGBT veterans within military, civilian, and clinical settings. Their findings highlighted the need for evidence-based treatments to address issues that result from experiencing such combined stressors, which require an intersectional lens. Gaining
more knowledge around when discrimination occurred (i.e., while in service or following service), in what context (i.e., military or civilian), the nature of how discrimination manifests and by whom (i.e., fellow service-members, civilian citizens, health care providers) can be useful in case conceptualization and treatment planning. It was recommended that researchers conduct one-on-one interviewing with LGBT veterans to better capture the essence of these experiences (Livingston et al., 2019). Gaining more knowledge around when discrimination occurred (i.e., while in service or following service), in what context (i.e., military or civilian), the nature of how discrimination manifests and by whom (i.e., fellow service-members, civilian citizens, health care providers) can be useful in case conceptualization and treatment planning.

Sherman et al. (2014) explored LGBT veterans’ experiences, beliefs, and preferences with regard to communicating with VA health care providers. They found that at only a quarter of veterans in their sample had disclosed their sexual orientation or gender identity to their provider. Furthermore, most providers did not ask about their sexual orientation. Sherman et al. (2014) posited that improving communication between LGBT veterans and VA health care providers is likely helpful in that these veterans may feel confident that their providers are capable of providing care that is both culturally competent and patient centered. It is appropriate for a provider to ask about a veteran’s sexual or gender identity if done in a way that is affirming, doing so intentionally while explaining why they are asking. One prominent campaign the VHA includes slogans such as “Do Ask, Do Tell” to encourage such discussions. In addition to providers asking about sexual orientation and gender identity, providers should be familiar with the specific health risk factors and health disparities experienced by LGBT veterans. When working with LGBT veterans, providers should ask specific follow-up questions about the veterans’ experience of being out of the closet, their sexual behaviors and number of partners, patterns related to their sexual activity, and social support (Sherman et al., 2014). These questions provide insight into how the individual experience of LGBT veterans might impact mental health factors such as depression and alcohol use.

Similarly, Mattocks et al. (2015) explored lesbian veterans’ (N = 20) experience of perceptions, discrimination, and disclosure of sexual minority status within the VHA healthcare system. Results revealed that many lesbian veterans feared discrimination, though a relatively small portion reported direct experiences of discrimination and many recognized the VHA’s effort to make them feel welcome within the system. Although these findings demonstrate the VHA’s intentional effort to support and promote a welcoming environment for these veterans, further research and training should be conducted to include perspectives of LGBT veterans seeking care within VA facilities, particularly transgender veterans. Matza et al. (2015) assert that although LGBT related health issues are minimally addressed in professional psychology programs, quality educational resources are accessible for continuing education through several online training platforms. Being intentional about such efforts can be useful in increasing cultural competence for working with LGBT veterans (Matza et al., 2015).

At a broader level, providers can develop a deeper understanding of the varying layers of minority stress, intersectionality, and the context of LGBT veterans’ experiences. Kopacz et al. (2020) suggest that psychologists should consider minority stress as potential spiritual stress or injury. Based on this conceptualization, providers may be able to partner with chaplains in working with LGBT veterans. Many LGBT veterans are known to seek VA chaplains to discuss their sexual and gender minority status relative to their religious and or spiritual beliefs (Kopacz et al., 2020). Health educational groups also may be useful in connecting with LGBT veterans, promoting connection and self-advocacy with regard to their treatment in VA facilities (Lange et al., 2020). By attending to the factors outlined herein, providers can support personalized and patient-centered care for LGBT veterans.

For more information and a complete reference list, contact the corresponding author at: sbrown@msp.edu
The Navy mental health community held its inaugural Navy Psych Summit from 8-10 Sep 2021. The summit was a multidisciplinary virtual event focusing on Navy mental health. It was born out of the Navy clinical psychology community’s tradition of Navy Day. Navy Day is an annual gathering for clinical psychologists to receive updates on the current state of affairs in the community and participate in trainings to promote professional development.

Over 100 Navy psychologists tuned in for Navy Day on day one to learn about future directions of the community, discussed changes in policy, and participated in trainings. Capt. Melissa Lauby opened the event with welcoming remarks and an extensive update on the current state and future directions of Navy clinical psychology. Lt. Nicholas Grant provided a training on gender affirming diagnostic evaluation of transgender service members, tapping into his expertise from having worked closely with Navy Medicine East Transgender Care Team. Lt. Lyndse Anderson hosted a panel of Force Mental Health providers for a discussion on operational psychology. Panel members included Capt. Tara Smith, Capt. Scott Johnston, Capt. Joseph Bonvie, Cmdr. Robert Lippy, Cmdr. Lisseth Thomas, Cmdr. Keisha Blair, and Lt. Cmdr. Anthony Romero. Panelists graciously shared their personal experiences and thoughts about preparing for force psychology roles. The NCCOSC team – Capt. Paul Sargent, Dr. Eileen Delaney, and Mr. Gabriel Téllez – presented the Navy Expanded Operational Stress Control (E-OSC) initiative and enlightened attendees regarding how E-OSC is being rolled out to empower service members to prevent stress injuries and build psychological resilience. Lt. Laura Corey and Lt. Julia Garza provided insights gleaned from developing and implementing a standardized screening process in which behavioral health technicians (BHTs) were utilized as healthcare extenders to accommodate increased demand for services with limited resources. The late afternoon focused on mentorship for junior psychologists, with Capt. Joseph Bonvie, Capt. Scott Johnston, and Cmdr. Matt Keener providing a live mock review of other clinician’s service records to provide tips to excel in a promotion board. To wrap up the day, Lt. Cmdr. Kristin Landsinger and Lt. Samantha Giangrande organized and led a speed mentoring session, matching junior psychologists with their senior counterparts to make meaningful connections in a fun way.

While Navy Day for clinical psychologists is exclusive to those in the community, other Navy mental health professionals were invited to additional clinical trainings that were provided this year. This portion of the event was arranged in collaboration with the Navy Social Work community. The event attracted an estimated of 250 attendees from a range of professions, including psychologists, social workers, psychiatrists, BHTs /corpsmen, nurses, and counselors. The training program this year featured Warrior Toughness, a performance psychology initiative in the Navy. Additionally, multiple seminars on clinical topics were presented by experts from the Center for Deployment Psychology (CDP).

On the second day of the summit, we learned about the Navy Warrior Toughness initiative. The Warrior Toughness initiative aims to increase sailors’ ability to perform under pressure and to withstand devastating impact by training their mind, body, and soul. Three esteemed speakers each presented on the unique aspects of the whole person approach embedded in the Warrior Toughness initiative, giving an overview of how one would train mental, physical, and spiritual toughness. Senior Chief Petty Officer Corbin Cornelison provided an overview of the Warrior Toughness program and his perspective on how one builds toughness utilizing the warrior mindset, which is guided by Navy values and the commitment to those values. Chaplain Merlin Stephon discussed the spiritual aspect of toughness, focusing on one’s identity (or soul) and purpose in getting through adversity. Lastly, Lt. Cmdr. Kathleen Saul shared a psychologist’s perspective on behaviors that can promote toughness, such as mindfulness, and the implementation and outcomes of the Warrior Toughness program at a recruit training command. The presentations were interactive and generated meaningful discussions among attendees and presenters.

On the third day of the summit, experts from the CDP trained us on a range of clinical topics relevant to the military population. The training was divided into Generalist and Trauma tracks, allowing attendees to choose their preferred training. In the Generalist track, Dr. Marjorie Weinstock presented on intimate partner violence, Dr. Carin Lefkowitz presented on common sleep disorders in the military, and Dr. Jeffrey Mann presented on suicide with military-connected patients. In the Trauma track, Dr. Kelly Chrestman presented on trauma and posttraumatic stress disorder (PTSD) in the military and Dr. Paula Domenici presented on moral injury. Attendees were provided with state-of-the-art information on the topics. The presenters were interactive and knowledgeable, addressing comments and questions from the attendees. Additionally, expertly curated handouts where provide to the audience with resources and references that would bolster their clinical practice.
While the presentations and training were incredibly informative and useful, the summit was a success largely due to the community who came to support it. Despite “Zoom fatigue,” a common phenomenon during pandemic times due to required virtual engagements at home, Navy mental health providers came together to train and stay connected with each other albeit virtually. Special thanks to everyone who made the summit a success: the Navy clinical psychology planning committee (Cmdr. Lisseth Thomas, Lt. Cmdr. James Larsen, Lt. Cmdr. Kristin Landsinger, Lt. Cmdr. Phil Dang, Lt. Gretchen Kirk, Lt. Keen Seong Liew, Lt. Mikaela Pitcan, and Lt. Samantha Giangrande), the Navy social work planning committee (Lt. Eric Henderson, Lt. j.g. Ryan Lennon, and colleagues), Navy mental health providers, the presenters, and the attendees.

We look forward to the next year’s summit! Go Navy!

Continuing Education Committee
William Brim, Chair

The Division 19 CEC is actively supporting several Continuing Education (CE) offerings and we are stress-testing a new procedure for requesting Div19 APA CE for a program you are offering. We are discussing bringing additional CE programming to Division 19 on a regular basis so look for requests for content you’d be interested in having the division offer. We are looking into potentially getting approval for home study APA CE in order to offer more CE for things such as recorded webinars or reading for example. We are also considering the benefit of having New York CE sponsor approval so we will be reaching out soon to survey members who are licensed in NY State. For more information, please contact William Brim at Division19CEC@gmail.com

Division Membership Committee
Kristin N. Saboe, Chair

Division 19 continues to boast highly engaged members and increasing membership numbers year on year. As of September 2021, we have 1,557 members in total. We are unique in that the majority of our division’s members are students (46%) or early career. This presents our division tremendous growth opportunities and a need to ensure we keep members engaged throughout their careers to maximize participation at all career stages.

We encourage all of our current members to renew their membership now for 2022! As reminder to all of our current and future members, the first year of membership is free. Don’t forget to renew after the first year however. You can renew or complete your annual membership application and fees through APA’s membership login portal. You do not have to be a member of APA to maintain Division 19 membership. https://www.apa.org/about/division

Early Career Psychologist (ECP) Committee Update
Jessica Ford, Chair

Thank you to everyone who participated in the Early Career Psychologist APA Conference Open Forum and signed up for LISTSERV! Please sign up if you haven’t already! To sign up for the listserv, please choose one of the following three ways:

1. Send an email to listserv@lists.apa.org and put the following in the body of the email, nothing else in the body and nothing in the subject line: Subscribe div19ecp
2. Click on this link and complete the form: https://lists.apa.org/CGI-BIN/wa.exe?SUBED1=DIV19ECP&A=1
3. Go to the listserv site, http://lists.apa.org/cgi-bin/wa.exe

Then, find ‘div19ecp’ in the list, and then click on the menu icon (the stack of three short lines) to the right side of the screen and click on subscribe.
The Early Career Psychologists Committee of Division 19 Professional Development Application Cycle will be opening this fall with a deadline for applications of 11/15/21. For more information about how to apply Development Grants - The Society for Military Psychology https://www.militarypsych.org/ecp-professional-development-grants/

We will also be seeking applications for our chair-select position. We currently lead with a trio of chairs (past, current, and select). The chair-select position is an amazing opportunity to help grow the ECP committee and provides the opportunity to lead first as a chair-select while learning more about the committee before coming into your chair year. Interested candidates should send information about your vision for the ECP committee along with a CV to: militarypsychECP@gmail.com and jessica.ford@va.gov

Development of Professional Practice Guidelines for Operational Psychology
Mark Staal, Chair Ethics Committee

Putting pen-to-paper for this newsletter submission on September 11, 2021 has been a powerful reminder for me of the work that has been done, the sacrifices that have been made, and the work that lies ahead of us. Part of that work rests in our efforts to grow, mature, and expand the ability of psychologists to contribute to national security, defense, and public safety. The following “Ethics Tip” provides a brief overview and update concerning the development of professional practice guidelines for operational psychology.

A Brief History Lesson
For better or for worse, world conflict and threats to national security have historically acted as developmental accelerants for many areas within psychology (e.g., clinical psychology following the trauma of WW-II). Operational psychology is no exception. Psychologists’ contributions to such areas have a long and distinguished history dating back to the efforts of the Office of Strategic Services (OSS) during WW-II (if not before). The OSS was initially tasked to develop strategic intelligence, carry out unconventional warfare, espionage, propaganda, and other subversive efforts to undermine our nation’s adversaries during the war. However, OSS leadership recognized quickly that their agents struggled managing the demands of their overseas assignments (e.g., stress, austerity, cultural issues). After observing the British “assessment center” model of selection (patterned after German Wehrmacht Officer selection), plans were launched to design a similar program of assessment and selection to address these concerns. As many readers will note, the development and execution of this program is well chronicled in the Assessment of Men (OSS, 1948). Despite imperfections in the program, the OSS model of assessment was a watershed initiative in the history of psychology, and specifically in the history of operational psychology. Many programs to this day enlist the lessons learned in assessment center suitability methods established by OSS psychologists.

An Introduction to Operational Psychology
For those who might be less familiar with operational psychology or its practices, let me briefly provide an overview. Operational psychologists provide a variety of services. Their work often includes the assessment of personnel for high-risk positions, consultation to investigations and crisis negotiations, and support to military or intelligence operations. Operational practitioner consensus has converged on the following as a definition of operational psychology:

“the application of psychological science to the operational activities conducted in support of national security, national defense, and public safety.” (Staal & Harvey, 2019)

Operational psychology services typically occur through a consultative relationship that enables clients to understand, develop, and/or influence individuals, groups, or organizations more effectively. Their objectives often consider a range of impacts from operational to strategic ends (Staal & DeVries, 2018; Staal & Stephenson, 2013).

Unfortunately, controversy around the practice of operational psychology surfaced with respect to national security interrogation and detention operations. Horrible abuse of detainees in overseas detention facilities (where no psychologists were present) and the misconduct of two contractors was quickly conflated with the appropriate use of psychologists as members of a behavioral science consultation team (Staal & Harvey, 2019). To address these concerns and allegations of their complicity, the APA launched an Independent Review (IR). What became known as “The Hoffman Report” concluded that there was collusion between APA leadership and Department of Defense officials (to include senior psychologists) concerning interrogation policies (APA, 2015). Following the release of the IR, Division 19 objected to this characterization and published their own rebuttal (Harvey et al., 2015). Amid this exchange, the APA Council of Representatives issued a policy that prohibited APA members from providing support to national securi-
ty interrogations. Disagreement over these events and outcomes has remained (Arrigo, Eidelson, & Bennett, 2012; Soldz, Arrigo, & Olson, 2016; Staal & Greene, 2015; Staal, 2018), highlighting the ongoing need for further guidance for operational practitioners.

**Development of Operational Psychology Practice Guidelines**

Due to the maturity of the operational practice community and misinformation (as seen above), it became clear that there was a need for targeted guidance and practice standards. It was out of this spirit that efforts to develop professional practice guidelines for operational psychology were launched. The goal of the guidelines is to maintain and improve the quality of operational psychology services, to standardize and enhance the professional delivery of such services, and to encourage the practice and continued development of operational psychology – while respecting the applicable rights of persons affected by such services. The APA’s *Ethical Principles of Psychologists and Code of Conduct* (EPPCC; APA, 2017), acts as a practice framework for these guidelines (as they do for all such guidelines).

During the 2017 APA convention, a group of senior operational psychologists met to discuss the formation of an APA Task Force and the drafting of professional practice guidelines for operational psychology. Over the next several months General Applied Psychology divisions within the APA, national boards, and national security and defense agencies were identified (based on the operational psychology constituencies resident within each). Letters to each entity’s leadership (e.g., division presidents) were sent out requesting a nomination from within their ranks to represent their respective divisions, boards, and agencies on the TF - seeking the development of practice guidelines. Once the TF membership was assembled, a welcome letter was sent to each with amplifying information about the TF, its purpose, proposed business rules for meetings, and drop box links for sharing relevant documents, policies, and research literature. The OPPPG TF held their first working group meeting in February of 2018 (see Figure 1 below). Workflow has continued, uninterrupted and is on-going as of the writing of this newsletter submission. We are anticipated a second round of public comment before the close of 2021. It is our hope and anticipation to realize a Council of Representatives (CoR) vote for endorsement during 2022.

I encourage all of you to participate in the public comment period. If anyone has specific questions about the guidelines or the TF, I would be happy to address them as able.

![Figure 1 - Operational Psychology Professional Practice Guidelines Task Force (OPPPG TF) Task Flow](image-url)
<table>
<thead>
<tr>
<th>Motion</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approve minutes from OCT 2019</td>
<td>Passed</td>
</tr>
<tr>
<td>Approve the “Passed Motion List” updated to include 2019 motions</td>
<td>Passed</td>
</tr>
<tr>
<td>Consider a bylaw change to grant a student representative voting privileges on the EXCOM.</td>
<td>Passed</td>
</tr>
<tr>
<td>Approve the 2020 budget as presented during the MYM to include the History Committee’s request for funding of $1,2000 (previously authorized but not spent) to hire an archiving service for important Division documents. Proposed a recurring line item for Adobe Connect and or Zoom (SAC to explore and present comparison of costs later)</td>
<td>Passed</td>
</tr>
<tr>
<td>Approve funding of $5,000 for the Convention Program Committee to promote attendance and engagement in the 2020 virtual convention. Funds will be used to purchase beer glasses and prizes for drawings.</td>
<td>Passed</td>
</tr>
<tr>
<td>Approval to move forward with development and production of a Diversity podcast series of 12 episodes.</td>
<td>Passed</td>
</tr>
<tr>
<td>Approve funding of 252 for the Communications Committee to pay for a podcast hosting platform, which includes hosting, automated distribution, and analytics.</td>
<td>Passed</td>
</tr>
<tr>
<td>Approve the MYM Minutes from February 27, 2020.</td>
<td>Passed</td>
</tr>
<tr>
<td>Vote on the proposed motion to extend voting privileges on bylaw changes to the EXCOM to a student member.</td>
<td>Passed</td>
</tr>
<tr>
<td>Approve the Named Awards Task Force charter as written.</td>
<td>Passed</td>
</tr>
<tr>
<td>Approve the SLP budget for $13,150 starting in OCT 2020.</td>
<td>Passed</td>
</tr>
<tr>
<td>Motion to approve $10K for podcast recording.</td>
<td>Passed</td>
</tr>
<tr>
<td>Approve June 2020 Meeting Minutes.</td>
<td>Passed</td>
</tr>
<tr>
<td>To approve the ADHOC Society for Leadership Committee to a standing committee. Verbiage not provided to EXCOM.</td>
<td>Deferred</td>
</tr>
<tr>
<td>Approve SLP from ad hoc to a standing committee. Proposed bylaw changes presented and agreed upon by EXCOM. This would require a bylaw change vote next year at the annual business meeting.</td>
<td>Passed</td>
</tr>
<tr>
<td>Approve the July 7th Meeting Minutes.</td>
<td>Passed</td>
</tr>
<tr>
<td>Appoint Thomas Britt, editor of the Journal for Military Psychology, for an appointment of 5 years. Term to begin 1 January.</td>
<td>Passed</td>
</tr>
</tbody>
</table>
Two new Fellows candidates approved by the Division 19 Fellows Committee were also approved by the APA Fellows Committee. A final APA decision on each is expected in October. One existing APA Fellow (i.e., a Fellow in at least one other APA division), was approved as a Division 19 Fellow by Division 19. In the case of existing Fellows, no further approval is needed. Congratulations, Freddy!

I would like to acknowledge the contributions of current committee members, who are (in alphabetical order): Nate Ainspan, Paul Gade, and Carrie Kennedy. Thanks to departing members Armando Estrada and Kathryn Lindsey for their contributions as well.

Applications for new and existing Fellow status are now open. Anyone interested should contact Mike Rumsey for information. His email address is: miker1998@aol.com

Introduction
Coaching has been used for several decades and has grown in popularity. There are a variety of coaching options available to name a few: executive, personal, teams, career, performance, leadership, group, wellness, relationship, and life coaching (Cameron, Dromerick, Ahn, & Dromerick, 2019; Greene, 2019; Kets de Vries, 2005; Sforzo et al., 2018). Benefits of coaching include: skill development (e.g., communication, assertiveness, active listening; Funary, Fieder, & Schoneboom, 2015), increased self-efficacy (Cameron et al., 2019), increased self-confidence, individual goal setting and attainment, and connection to life purpose (Lefdahl-Davis, Huffman, Stancil, & Alayan, 2018), emotional intelligence (Barlow & Banks, 2014; Grant, 2007; Tschannen-Moran & Carter, 2016), workplace performance, job satisfaction, and well-being (Burt & Talati, 2017; Grover & Furnham, 2017) and performance enhancement (Chan & Mallett, 2011; Greene, 2019; Kaiser, 2019; Wilson, 2007). According to the International Coaching Federation (ICF), coaching has been defined as “partnering with clients in a thought-provoking and creative process that inspires them to maximize their personal and professional potential (What is Coaching?, 2021).

This capstone project will address coaching as applied to Division 19 (Div19) membership and as applied to a military population. While there is a plethora of specialty coaching options available, this capstone will specifically address executive/leadership coaching. Coaching offers a range of benefits that may specifically benefit Div19 members and the populations Div19 serves. Leadership coaching includes one-on-one conversations with executives, managers, and leaders regarding work-related concerns with the focus of improving leadership effectiveness (Ely et al., 2008).

While coaching research has increased in the past two decades, one of the limitations of coaching literature has been a lack of rigorous study methods (e.g., randomized control trial studies, pre- post studies, lack of a control group). This is further compounded by the fact that outcomes and goals often differ from individual to individual and from session to session, which makes it difficult to measure outcomes and effectiveness. The research is still relatively nascent as there are issues and gaps in the literature (Grover & Furnham, 2017).

One such gap is the limited research available using coaching with a military population. Below highlights several of the available studies for coaching with a military population. Bowles, Cunningham, Gabriel, & Picano (2007) conducted a study in a population of individuals involved in U.S. Army recruiting. Participants were 30 middle managers and 29 executive managers. The amount of time coached varied based on individualized needs of participants and participants individualized goals, but occurred over a 12-month period. Experienced, but un-coached former leaders served as
the control group. Results indicated that coached individuals out-performed un-coached participants and both groups experienced growth in achievement of self-set goals and improvement on some recruiter-lead... (Bowles et al., 2007).

Research has also been conducted in the U.K. in a sample of soldiers in training (Wagstaff, Arthur, & Hardy, 2018). The purpose of the study was to test a model of coaching and examine the extent to which leaders use coaching behaviors in a military setting, and to develop and validate a measure of coaching behaviors. The model focused on five behaviors of high-performance coaches and the researchers developed a 28-item Military Coaching Behavior Scale. Results indicated that predictive validity for two dependent variables (satisfaction and resilience). This instrument may be beneficial for individuals receiving coaching as it gives the coach behavioral feedback (Wagstaff et al., 2018).

The therapeutic relationship is one of the best predictors of therapy outcomes (Miller, Hubble, & Chow, 2020). It is no surprise that relationships also play a role in coaching. Research conducted with 74 client-coach pairs at a military service academy examined the mediating role of the client-coach relationship on coaching outcomes. Results indicated relationship processes of trust, rapport, and commitment positively predicted coaching outcomes (Boyce, Jackson, & Neal, 2008).

Coaching also offers benefits to individuals transitioning to the civilian sector. A qualitative study (Zarecky, 2014) was conducted with a strengths-focused coach approach. For the six participants, coaching occurred over a four to six week period. Results indicated strengths coaching was beneficial in helping transitioning military individuals explore and reconcile their perceived military identity with their authentic identity. Exploration and coaching on participants strengths provided individuals with a vocabulary and language, which helped bridge the gap between military and civilian cultures and communicate strengths to potential employers (Zarecky, 2014). Informal research has also been conducted on veterans transitioning to the civilian workforce, which highlights the potential benefits of career coaching for transitioning service members (see Troutman & Gagnon, 2014).

Research has also been conducted with sick, injured, and wounded military personnel. Results highlighted the importance of storytelling and exploring emotions within coaching, and not conforming to a singular narrative script of success (Douglas & Carless, 2017). The previous handful of studies highlights the limited number of research articles available regarding coaching in a military population. Given the role Div19 serves, Div19 members could assist in filling the literature gap through leading and completing research projects. Several overview articles have also been written discussing coaching elite performers and making the comparison to military special operations (for further reading see Greene, 2019 and Kaiser, 2019).

In recent years, executive and leadership coaching has gained popularity within the military, which has resulted in the development of new coaching initiatives. In 2020, a Navy psychologist developed an initiative called My-Navy Coaching, which focuses on peer-to-peer coaching opportunities to Sailors in leadership positions (MyNavy Coaching, 2020). In 2021, the Air Force offered airmen an opportunity for Air Force paid coaching via BetterUp. BetterUp is a website that connects individuals to certified coaches. In recent months, the Air Force sent out an announcement asking for applications from certified coaches to create a network of coaching cadre across the enterprise. Psychologists (may of who are Div19 members) are at the forefront of these changes. This offers a unique opportunity for Div19 members to not only lead, but have vast and long-lasting impacts from the programs that are developed and the changes that are occurring.

Executive and leadership coaching offers several potential benefits to Division 19 membership. Whether members are graduate students working on completing their degree or active duty (AD) service members, the potential benefits of coaching are vast. For students, executive and leadership coaching may be beneficial to help prepare individuals for leadership roles postgraduation, and possibly leadership roles within Div19. For AD coaches, a large portion of their work is executive, leadership, and peak performance coaching. Coaches are facilitating development of current and future military leaders; individuals who are leading squadrons, battalions, and other organizations across the military to achieve the mission. The purpose of this capstone is to identify ways that Div19 might further support its membership and the populations it serves. Two surveys were developed to further understand Div19 members awareness, interest, and use of coaching.

**Purpose of the Survey**

Given the potential benefits of coaching within the military and Div19, this author developed two surveys to assess Div19 members’ attitudes, beliefs, and training experiences regarding executive and leadership coaching. One survey was for non-coaches and was used to identify the beliefs, attitudes, and gauge interest in coaching training. The second survey was for certified coaches and was used to ascertain current coaching practices and to identify ways Div19 might support these individuals. There were five questions for non-coaches and six questions for coaches. The survey took a voluntary sampling approach. The author posted the surveys on Facebook and Twitter to recruit more participants. See Appendix A for survey questions.
Survey Results
Survey results are separated by non-coaches and coaches. There were 21 complete responses for the non-coaches survey and nine complete responses for the coaches survey.

Non-coaches Results
1. Are you trained in executive and leadership coaching?

In the non-coaching survey, three individuals (14.3%) responded, “yes.” Eighteen individuals (85.7%) reported that they are not coaches.

2. How useful do you think executive and leadership coaching is to a military population?

Nearly 62% of respondents answered “Extremely or Very Important” with only 4.8% indicating “Not important at all”.

3. How familiar are you with the best practices of executive and leadership coaching in a military population?

Only four participants indicated being very to extremely familiar with coaching while 18 participants indicated a range of moderately familiar, slightly familiar, to not familiar at all with coaching (six participants for each category, respectively).

4. What are your beliefs/attitudes towards executive and leadership coaching?

The responses to this question highlights a range of beliefs and attitudes towards coaching. However, over 76% of individuals indicated coaching will be moderately to extremely helpful.

5. Are you interested in executive and leadership coaching certification/familiarization?

Over 71% of participants (15 individuals) expressed an interested in certification or familiarization with coaching. Five individuals indicated they are not interested. One individual was unsure and choose other, writing in, “maybe.”

Coaches Results
1. In your experience, how has professional/leadership coaching most benefited the military population?

Overall, coaches responses highlighted a number of benefits for coaching service members. Most coaches mentioned personal and professional development and goals. One coach stated, “significant benefits to unit in terms of professional and personal satisfaction, alignment of goals with organization’s goal, and organizational performance. Higher pass rates in military courses with hundreds of thousands of dollars in direct cost savings to unit.” One coach mentioned, “It’s a great way to promote wellness without having to wait for pathology to emerge!” Coaches also mentioned leadership skills, development, effectiveness, and how helpful coaching has been to address stigma and has made meeting with the “psych more palatable.”

2. Where were you trained?

Coaches reported that they were trained at: the College of Executive Coaching’s program (two individuals), Brown University/ACT Leadership, Hudson Institute of Coaching (Leadership Coaching Program), through a non-military APA accredited internship program, and a SOCOM coaching program. In addition, one participant reported that s/he was in the process of completing training, but did not specify which program s/he is completing.

3. What type of certification do you have?

Coaches were on a spectrum from “no certification yet,” to ICF certified. This range included board certified, Associate Certified Coach (ACC) level (100 hours of coaching), and being close to attaining Professional Certified Coach (PCC) level (500 hours of coaching).

4. What are some challenges with integrating coaching as a military psychologist?

Coaches described several challenges. Coaches mentioned differentiating his/her coaching role from behavioral health and that coaching is sometimes misunderstood, “not seen as a legitimate field by colleagues,” or misperceived by peers as a form of clinical/patient care. One challenge is demonstrating the value and return on investment to the unit/commander and getting a commander’s buy in. One coach discussed the challenge of being the only coach in the organization and the struggle of “trying to provide coaching and other services to the entire footprint.”

5. What are some ways Div 19 could support executive and personal coaches (e.g., Continuing Coach Education Units, etc.)?

Coaches had several suggestions for ways Div19 might support coaches. A popular response was providing continuing education credits. Two coaches mentioned increasing awareness of coaching through providing professional development opportunities around coaching as a resource to service members. One coach suggested having some type of forum or a targeted conference/activities so coaches can meet, network, and discuss special topics in coaching.

6. What is your current work setting?

Participants work in a range of settings. Six individuals are currently located in an embedded setting. Other participants indicated private practice, outpatient clinic, and academic/private practice settings (one each, respectively).
Discussion and Recommendations

The purpose of this survey was to gain a better understanding of Div19 members' attitudes, beliefs, understanding, interest, and use of executive and leadership coaching. From the responses, non-coaches are interested in learning more information and have positive views of coaching and positive beliefs about how coaching may be helpful. Coaches described the barriers they face and explored ways that Div19 might further support coaches who are actively providing support to military service members. Given the literature gap, the rising use of coaching, and the role military psychologists play (i.e., coaches, developing coaching programs, etc.), there are a number of ways Div19 could offer support.

From the survey responses, there are several opportunities for Div19 to support non-coaches and coaches. Fifteen non-coaches (71.4%) said they would be interested in executive and leadership coaching certification/familiarization. Five coaches suggested providing continuing education and networking opportunities. This could be addressed via providing continuing education opportunities, providing informational sessions for coaching (i.e., what coaching is, the benefits of coaching, the challenges of using coaching in a military setting, etc.) or through providing networking opportunities (i.e., a space for coaches to connect and consult each other). A targeted conference, activities or a special topics forum would increase awareness of coaching and provide a space for coaches to network.

The coaching field is relatively new and the number of available research articles addressing coaching with a military population is limited. This provides ample opportunity for Div19 to pursue research projects to facilitate filling the literature gap. Div19 is also filling a gap by providing executive and leadership coaching services to Div19 members and military service members. One way this is already occurring is through the Society Leadership Program. Junior Div19 members apply to the highly competitive leadership program. Once selected, candidates complete assessments and receive feedback and reports on their assessment results. This is an opportunity to not only work on personal development, but to also develop as a leader with the intent of one day filling a leadership role within the division.

A clear limitation of the results is the small number of responses (n=24). There are several factors that may have played a role in this. First, there were two surveys, and it is possible that participants may have been confused about which survey to fill out (i.e., the non-coach or coach survey). Second, survey links were sent via Div19 communication emails and included with other non-study information where survey links were further down in the body of the emails. Finally, also in those group emails, the surveys were placed under “recruiting research participants” along with five to seven other research listings where the number of recruiting options may have led participants to pick other research opportunities.

Conclusion

This project addressed executive and leadership coaching in Div19 and the military. In recent years, executive and leadership coaching in the military has grown and will likely continue to grow as services provide opportunities for professional and personal development. Coaching also offers a non-stigmatized way to interact and help service members. Recommendations to Div19 include providing continuing education opportunities, providing informational sessions to increase awareness of coaching (i.e., coaching uses and benefits), providing networking opportunities to coaches, and initiating and supporting research projects to fill the literature gap. As coaching continues to grow, identifying ways Div19 can support both Div19 members and service members will continue to be imperative.

For questions or a complete reference list, contact the corresponding author, Marie Black, at: mxs4762@ego.thechicagoschool.edu.

Appendix A: Survey Results

Non-coaches:

1. How useful do you think executive coaching is to a military population?
2. Are you trained in executive and leadership coaching? Yes/No
3. How familiar are you with the best practices of professional coaching in a military population?
4. What are your beliefs/attitudes towards executive coaching?
5. Are you interested in executive coaching certification/familiarization?

Coaches:

1. In your experience, how has professional/leadership coaching most benefited the military population?
2. Where were you trained?
3. What type of certification do you have?
4. How can the division support you as a coach?
5. What are some challenges with integrating coaching as a military psychologist?
6. Describe your current work setting: outpatient clinic, embedded, hospital, academic setting, private practice, VA, mixed (two or more), other: please specify.
For mental health professionals working in military contexts, understanding service members and veterans requires not just an examination of that individual but also the systems that the individual is engrained within (e.g., Bowles et al., 2017; Trego & Wilson, 2021). Service members exist within a number of hierarchical or social-ecological systems that differ according to their directness or scope of influence. One of the more immediate systems of influence includes the family system, and an important component of the family system that mental health professionals may need to consider in their work are children (which refers to all youth 0 to 18 years of age). Across the Department of Defense (DoD; 2019), greater than one-third of individuals identify as caregivers of at least one child, and estimates suggest that a larger percentage of veterans are caregivers and continue to be caregivers into and past middle adulthood (e.g., Department of Veterans Affairs, 2010).

Beyond simply the prevalence of children in military populations, it is important for mental health professionals working in these settings to consider children within the family system and thus child psychology because of the scope of influence these factors have on a military caregiver’s wellbeing across a number of domains (e.g., physical health, behavioral health, social functioning, work performance; Fingerman & Bermann, 2000). For example, stressors associated with family life and children have been linked with a greater risk for lower job performance (e.g., loss productivity) and higher reported mental health symptoms (e.g., depression, anxiety) for service members, compared to those with no or low family stress (e.g., Bray et al., 2001; Hourani et al., 2006). Moreover, another reason why there is a need to consider child psychology within the military context is that the relation between children and caregiver wellbeing is not unidirectional. That is, there are a number of factors associated with a caregivers’ service in the military (e.g., deployment, frequent relocation) that may increase a child’s risk for mental health concerns and poor functioning across a number of other domains (e.g., Nicosia et al., 2017; Wiens & Boss, 2006). While evidence appears to suggest that the majority of children in military families demonstrate resilience when faced with these challenges, a notable proportion of children experiencing these events can show maladjustment (e.g., American Psychological Association, 2007).

Taken together, the research on service members, veterans, and their families demonstrates the interconnectedness between the wellbeing of the military caregiver and their child, all of which further connect with a caregiver’s ability to perform in their position and “complete the mission.” Thus, it appears indispensable that mental health professionals working with service members and veterans have a sufficient understanding of child psychology, in addition to their expertise in adult psychology. However, it is unclear to what degree individuals in these positions have such experience or expertise in child psychology. For one, there is often concern about limited exposure to theories and research within child or developmental psychology for individuals who may primarily work with adults. Although not unique to mental health professionals working in military contexts, across the field of adult psychology barriers to training (e.g., funding or financial costs, time) can limit obtaining useful information and experience in the area of child psychology (Forehand & Sullivan, 2017; Zalewski et al., 2017). Further, there is also a general lack of integrative treatment approaches for adults and research more generally on the topic of how to address caregiving concerns or child mental health concerns in the context of adult psychology and psychotherapy (Zalewski et al., 2017). While child psychology tends to have a stronger focus on caregivers given the need for caregivers to take part in treatment, compared to adult treatments’ focus on children, this can put mental health professionals working with adults who are caregivers at a disadvantage with regard to being able to serve their adult patient to the best of their ability.

Current Project
As a leading organization in military psychology, Division 19 is uniquely positioned to help address possible barriers in the area of child psychology for its membership in a way that supports clinical and research focused mental health professionals. However, it is unclear where the membership currently stands regarding training and experiences related to child psychology, as well as possible interest in this area. Thus, the current project sought to provide direction for Division 19 in addressing possible issues or gaps in knowledge associated with child and family wellbeing in the context of military psychology by examining members’ educational experiences and attitudes toward child psychology, and interest in possible future education in child psychology.

Methods
The current project was conducted as part of a program evaluation project specifically for the Division 19 Society Leadership Program. To be eligible for par-
participation, individuals were required to be a current member of Division 19. No other inclusion or exclusion criteria were used. In May 2021, a call for participation and survey link was sent to the Division 19 membership through the Division 19 primary and student-only listservs. The survey consisted of five sections: a) demographics (e.g., age, ethnicity), b) General professional experiences (e.g., highest degree, work setting), c) Child psychology specific experiences (e.g., pervious trainings and coursework, experiences working with various age groups, working with caregivers), and d) Interest in future trainings on child psychology (e.g., symposium, webinar).

Results
The current project included 13 members. Based on the approximate total number of members in Division 19 through Spring 2021, this suggests there was an overall response rate of less than 1%. As a result of the project’s sample size, the data analyses for this project are purely descriptive in nature. Among those members who participated, the majority identified as female (69.2%) and White (53.8%), as well as holding a Ph.D. (46.2%). A full list of demographic information can be found in Table 1. Among the members who completed the survey, the average number of years of mental health experience (e.g., conducting therapy and performing assessments) was 9.62 years ($SD = 5.75$). The majority of members also reported their current employment to be a military treatment facility (46.2%) or a university setting (15.4%).

Responses from member’s self-reported experiences in clinical work and research with various ages can be found in Table 2. There were similar patterns of perceived expertise across clinical (i.e., providing therapy, consultation, and assessment) and research work. For both clinical and research work, the highest proportion of members believed they had significant or lots of experience was with populations who were in young adulthood and middle adulthood. With regard to ages ranges where members believed they had almost none or no experience, the highest proportions were for the age ranges of babies/infants and children. For members who provided clinical services to adults, close to two-thirds of their clients or patients were caregivers of a child or minor dependent ($M_{percent} = 63.28$, $SD = 15.78$, range: 50% - 90%). Further, on average, issues with a child were the primary presenting concern or negatively contributed to the primary presenting concern in treatment approximately one-third of the time ($M_{percent} = 33.38$, $SD = 29.84$, range: 5% - 80%). Regarding previous trainings or experiences in child psychology, all but one member reported having three or more trainings/experiences related specifically to children psychology. The most common form of training or experience was graduate coursework (80%), followed by graduate training practicum experience (70%), and attending a continuing education class/workshop/training (60%).

Lastly, members responded to four questions about their interest in training opportunities through Division 19 in adult and child evidence-based practice (EBP). The highest mean percentage of rated interest was a symposium ($M_{percent} = 66.47$, $SD = 35.49$, range: 10-100) or webinar ($M_{percent} = 31.75$, $SD = 35.49$, range: 9-100), and then a symposium in child EBP ($M_{percent} = 27.13$, $SD = 24.19$, range: 5-80).

Discussion
The family system, and more specifically children within the family system, can have a significant influence on the wellbeing of service members and veterans (e.g., Bowles et al., 2017). Further, even in adult focused contexts, having a stronger understanding of child psychology may help mental health professionals better serve their adult patients. However, it is not always the case that mental health professionals receive needed training or exposure to areas of child psychology (e.g., Zalewski et al., 2017). One of the primary functions of Division 19 is to support its membership in ways that seek to improve the lives of individuals associated with the armed forces and DoD, and one option to work toward achieving this goal may be to better educate, support, and advocate for child psychology within the division. The current project sought to explore this possibility by examining Division 19 membership’s experiences and attitudes related to child psychology through a division climate survey. Unfortunately, as a result of low participation in the survey among Division 19 members and associates, it would be inaccurate to draw any strong conclusions about the educational experiences in child psychology and interest in possible trainings in child psychology among Division 19 members. However, various trends observed in the data among those who participated could help provide some (but minimal) insight into the membership.

Initial evidence suggests that members tend to have more clinical and research expertise working with adult populations, as compared to populations younger than 18 years of age. This is not too surprising given the areas of focus within the division. One possible concern, at least among those who participated, was a lack of experience or expertise related to babies and infants. If this pattern is generalizable to the entire membership, this could be a notable gap in expertise and experience that Division 19 may need to address given the importance of this age range to overall child development, as well as concerns in this age range negatively contributing to service member and family functioning. For example, the identified age range of children younger than three is a critical period for early identification and intervention for children with a neurocognitive or developmental disorder (e.g., autism spectrum disorder). Further, military families with a child who may have a developmental disorder and disability often experience more mental health concerns and difficulty adapting to the military.
lifestyle, compared to families without a child with these concerns (e.g., Russo & Fallon, 2015). Thus, ensuring there are experts within the division for this age range could be important for helping to promote early childhood intervention or assessment programs, educating membership on services or supports for these concerns (e.g., Exceptional Family Member Program), or conducting research on how to better support these families.

Although there was more experience reported for adults, there was a notable amount of previous trainings in child psychology reported by members in the survey. All but one member reported having at least three different types of training in the area of child psychology. Further, most of the trainings or experiences reported tended to be more formal types of experiences, such as graduate coursework or practicum, as opposed to less formal training types like self-directed readings. Lastly, some trends observed in the data regarding interest in future training on child psychology suggest there is some but minimal overall interest. This was demonstrated by a mean interest score for both a webinar and symposium on child EBP being greater than 25 (scale: 0-100). However, no members reported no interest in such a training. Yet, it is worth noting that there was more reported interest for training in adult EBP as compared to child EBP.

Recommendations for Division 19 for Child and Adolescent Psychology

Given some of the initial insights from the climate survey, in addition to a more general review of Division 19’s current resources and procedures, there are several recommendations on how to increase knowledge, awareness, and education of ideas and concepts related to child psychology in military families, within the larger umbrella of military psychology.

Child Focused APA Symposium. One recommendation for Division 19 is to sponsor or manage a symposium that presents research on the functioning or wellbeing of children in military families. It is specifically recommended that this type of symposium be held at the APA Convention, compared to other conference opportunities through Division 19 (e.g., Regional Symposia Series), since there is a larger number of attendees and greater number of interests among attendees at the annual convention. Given some of the initial findings on interest in such opportunities being minimal from the current project’s survey, it is suggested that such a symposium occur every two to three years. For example, it might be possible to create a “division goal” or goal of the Division 19 APA planning committee to have at least one child (or family more generally) focused symposium every few years. It may also be an option to collaborate with another child or family focused APA division to help increase the amount of possible submissions and attendees to the symposium, such as Division 37, Division 53, or Division 54.

Child Focused Division 19 Podcast Episodes. Among the many ways in which Division 19 helps spread awareness of emerging research, improving leadership skills, and other areas related to military psychology, is through the recently created Military Psychology Podcast Network. A podcast on children in military families (or a closely related topic) may provide an optimal means of sharing information in this area to Division 19 membership because it would be assessable at any time, it would be more widely accessible through its publication on several different podcast platforms, and cost less money to access for members. This is in contrast to other methods of disseminating research information, such as conference presentations, which may occur once during a conference and cost money for members to attend. Further, a podcast would also be accessible to individuals beyond Division 19 who might be interested in learning more about military psychology and specifically children in military families. Based on current trends with the podcast (e.g., number of episodes published, topics), it is recommended that at least two episodes of the podcast each year be focused on a topic related to children in military families (or military families more broadly). The podcast could invite professionals in the field of clinical psychology and other related disciplines (e.g., education, social work) for greater exposure to a variety of research topics or theories in child psychology. If possible, it could also be beneficial to the listenership for the conversations to include not only basic-science information but also practical and/or clinical suggestions on how mental health professionals (both uniformed and non-uniformed) could support children and adolescents in military families.

New or Modified Division 19 Awards. Another recommendation that may help promote awareness for emerging research that is focused on better supporting the wellbeing of children in military families is the creation of a Division 19 award in this area. As compared to other mechanisms of promoting research (e.g., grants), an award mechanism may be less resource demanding. Additionally, there already exists a widely used infrastructure within Division 19 for award mechanisms (e.g., online submission portal). Further, previous research has shown that reward based forms of leadership may help promote various aspects of adoption of EBP (e.g., Aarons, 2006). These is one currently active award related to the recognition of service to family members of military personnel, the Robert S. Nichols Award. However, this award is limited in scope to uniformed clinical psychologists, and the award is broadly defined as “excellence in service.” Further, while it may be that members working in the area of child psychology could apply for other general research awards (e.g., Charles S. Gersoni Award), these awards would likely be very competitive given the scope of research interests within Division 19. Thus, considering the structure and possible limitations of already established awards, it is recommended that Division 19 create a new award that recognizes an “individual who has made a significant contribution to the field of military psychology regarding the understanding or wellbeing of, services for, or policies related to children in military families.” Given such
a description or award scope, this would likely more appealing to greater number of Division 19 members, and this would capture both basic and applied research, as well as other non-research efforts in the area of child psychology.

**Think Tank on Child Psychology.** Over the years, Division 19 has created several Think Tanks that seek to promote research, educate members more broadly on various topics, as well as engage in advocacy efforts. Although the Think Tanks were created for improving the lives of service members, veterans, and their families, there has been much less efforts on the family portion of this goal. Thus, it is recommended that Division 19 create a Children and the Military Family Think Tank directly related to issues associated with child psychology in the context of military psychology. Possible aims of the Children and the Military Family Think Tank could include: Working on dissemination of information to division membership on emerging research related to children in military families, developing training opportunities for the division membership on child and adolescent psychology within the military context, communicating with other child and family focused divisions within APA (e.g., Division 53, Division 37), and engaging in advocacy efforts for better access to services for children in military families.

Full report and reference list of the Society Leadership Capstone project available upon request. Please email austenmcguire@ku.edu for more information.

**Disclaimer:** The author declares that they have no conflict of interest. The contents, views, or opinions expressed in this newsletter are those of the authors and do not necessarily reflect official policy or position of Uniformed Services University, the Department of Defense (DoD), or Departments of the Army, Navy, or Air Force.

### TABLE 1

**Sample Descriptive Information**

<table>
<thead>
<tr>
<th>Demographic Information</th>
<th>Mean (SD)/Percentage</th>
<th>Min-Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>35.39 (5.28)</td>
<td>29-45</td>
</tr>
<tr>
<td>Gender (% female)</td>
<td>69.2%</td>
<td></td>
</tr>
<tr>
<td>Ethnicity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asian</td>
<td>7.7%</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>53.8%</td>
<td></td>
</tr>
<tr>
<td>Multiracial</td>
<td>38.5%</td>
<td></td>
</tr>
<tr>
<td>Div. 19 Member Type</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full Member</td>
<td>76.9%</td>
<td></td>
</tr>
<tr>
<td>Fellow/Affiliate</td>
<td>23.1%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Professional Experiences</th>
<th>Mean (SD)/Percentage</th>
<th>Min-Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highest Degree</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.A./M.S.</td>
<td>23.1%</td>
<td></td>
</tr>
<tr>
<td>Ph.D.</td>
<td>46.2%</td>
<td></td>
</tr>
<tr>
<td>Psy.D.</td>
<td>30.1%</td>
<td></td>
</tr>
<tr>
<td>Year Degree Obtained</td>
<td></td>
<td>2002-2019</td>
</tr>
<tr>
<td>ABPP Certification</td>
<td>23.1%</td>
<td></td>
</tr>
<tr>
<td>Years Providing MHS</td>
<td>9.62 (5.75)</td>
<td></td>
</tr>
<tr>
<td>% Work Time Devoted</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinical Work</td>
<td>39.5%</td>
<td></td>
</tr>
<tr>
<td>Teaching</td>
<td>15.9%</td>
<td></td>
</tr>
<tr>
<td>Research</td>
<td>14.6%</td>
<td></td>
</tr>
<tr>
<td>Administration</td>
<td>32.5%</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>4.3%</td>
<td></td>
</tr>
</tbody>
</table>

N = 13. MHS = Mental health services

### TABLE 2

**Ratings of experience by age group in clinical and research work**

<table>
<thead>
<tr>
<th>Age Groups</th>
<th>Clinical Work Experience</th>
<th>Research Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Significant/ A lot</td>
<td>Some/ Minimal</td>
</tr>
<tr>
<td>Babies/Infants (0 to 2 years)</td>
<td>0.0%</td>
<td>9.1%</td>
</tr>
<tr>
<td>Children (3 to 12 years)</td>
<td>27.3%</td>
<td>18.2%</td>
</tr>
<tr>
<td>Adolescents (13 to 18 years)</td>
<td>18.2%</td>
<td>63.6%</td>
</tr>
<tr>
<td>Young Adults (19 to 25 years)</td>
<td>81.8%</td>
<td>9.1%</td>
</tr>
<tr>
<td>Middle Adults (26 to 64 years)</td>
<td>72.7%</td>
<td>18.2%</td>
</tr>
<tr>
<td>Older Adults (65 years or older)</td>
<td>18.2%</td>
<td>45.5%</td>
</tr>
</tbody>
</table>

N = 13
Spotlight on History
Paul A. Gade, Chair

For this issue of the Spotlight on History, I have prepared a draft updated Division 19/Society for Military Psychology history timeline. The first and only timeline for our Society’s history appeared in the History of Division 19 that Art Drucker and I wrote 21 years ago for the APA series on Unification through division: Histories of the divisions of the American Psychological Association (Gade and Drucker, 2000). We are in the process of revising and updating our Society’s history, and this timeline, when complete, will be a critical structural component for that revision.

This timeline is a work in progress, mainly due to the COVID-19 pandemic and panic. I know everything gets blamed on this pandemic, but it is indeed the cause in this case. The APA archives where all of our newsletters are now stored have been closed since March of 2020. Without access to past newsletters, the information in the current timeline is based on my memory and what meager resources I have found and is most assuredly incomplete.

As the past historian and archivist for our Society, I have learned that the quintessential resource for what has gone on in our Division/Society is our newsletters. Our newsletters are where our Division/Society activities are well documented, especially in the minutes of our annual and mid-year meetings. Without access to our past newsletters, we are flying blind with respect to our history. Fortunately, I have some early newsletters in my possession. However, Marty Wiskoff and I turned over our stash of old newsletters to the APA Archives in 2016, and there they sit, inaccessible. APA only possesses digitized newsletters for our Society from 2003 to 2006 in their files. This situation points to an important project that our Society needs to undertake: digitizing all of our past undigitized newsletters. I plan to pursue this with our Society leadership.

I hope to accomplish three things by publishing this incomplete timeline; first, to bring forward the significant events that I know about in our history to help celebrate our 75th year as an operating division of APA. Second, to solicit comments and contributions from our members about important events that I have left out. And third, I want to begin the process of annotating our timeline with in-text source material related to the entries in our timeline so folks can find more detail about these significant historical events. My email is paulgade39@gmail.com. Send me corrections, additions, and most of all, let me know what you think about the timeline and how it should be structured.

Reference

### Society for Military Psychology (Division 19) History of Significant Events

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1945</td>
<td>Division 19 grandfathered in as one of the five AAAP Sections admitted to the new APA. APA canceled the 1945 APA convention due to wartime travel restrictions. Division 19 officer elections were not official until the 1946 annual convention.</td>
</tr>
<tr>
<td>1946</td>
<td>Division 19 was officially operational at the APA annual convention in Philadelphia. John G. Jenkins is formally elected the first President (Chairman). [See The Military Psychologist, 33 (3), Fall, 2018, for a profile of John Jenkins.]</td>
</tr>
<tr>
<td>1969</td>
<td>Division 8 challenges the Council to decide whether a division of military psychology is consistent with APA's philosophy of promoting human welfare.</td>
</tr>
<tr>
<td>1971</td>
<td>First recorded Division 19 newsletter is published. J. Daniel Lyons is the first editor.</td>
</tr>
<tr>
<td>1974</td>
<td>Military Psychology Award Established. The first award was given to Robert Levit, David Alden, Jean Erickson, and Berton Beaton in 1975.</td>
</tr>
<tr>
<td>1978</td>
<td>Division logo established, first appears on the masthead of the newsletter in Spring, 1979 issue.</td>
</tr>
<tr>
<td>Year</td>
<td>Event</td>
</tr>
<tr>
<td>------</td>
<td>-------</td>
</tr>
<tr>
<td>1986</td>
<td>Division journal <em>Military Psychology</em> established. Martin Wiskoff is its founding editor.</td>
</tr>
<tr>
<td>1987</td>
<td>Contract with Lawrence Erlbaum Associates to publish <em>Military Psychology</em> is signed.</td>
</tr>
<tr>
<td>1987</td>
<td>Robert M. Yerkes Award established. The Honorable Craig Alderman, Deputy Under Secretary for Defense, is the first recipient.</td>
</tr>
<tr>
<td>1989</td>
<td>First quarterly issue of <em>Military Psychology</em> journal is published.</td>
</tr>
<tr>
<td>1993</td>
<td>At Division 44's and APA's Committee on Lesbian and Gay Concerns, request's APA Council implement a ban on DoD advertising in APA publications and meetings and they vote to do it. [See <em>The Military Psychologist</em>, Fall 2012, Vol. 27(2), pp. 21-25.]</td>
</tr>
<tr>
<td>1995</td>
<td>DoD Psychopharmacology Demonstration project implemented.</td>
</tr>
<tr>
<td>1996</td>
<td><em>Military Psychology</em> journal turns its first profit.</td>
</tr>
<tr>
<td>1999</td>
<td>The Division renames the following awards: Lifetime Achievement Award renamed the John C. Flanagan Award in honor of its first recipient, John C. Flanagan; the Military Psychology Award renamed the Charles S. Gersoni Award; the Early Career Achievement Award renamed the Arthur W. Melton Award. [See <em>The Military Psychologist</em>, Spring 2021, Vol 36 (1), pp. 15-16.]</td>
</tr>
<tr>
<td>2000</td>
<td>The history of Division 19 is published in Volume V of APA’s <em>Unification Through Division</em> history series.</td>
</tr>
<tr>
<td>2003</td>
<td>APA President, Bob Sternberg, creates the Division 19 and Division 44 joint Task Force on Sexual Orientation and Military Service.</td>
</tr>
<tr>
<td>2004</td>
<td>Division 19 and Division 44 Joint Task Force recommends that APA Council remove the advertising ban, which an APA Council vote removes.</td>
</tr>
<tr>
<td>2010</td>
<td>Division 19 name change to the <em>Society for Military Psychology</em> proposed by Executive Committee and membership vote in August and approved by APA in November. [See <em>The Military Psychologist</em> Winter/Spring 2005, Vol. 21(1), p. 29.]</td>
</tr>
<tr>
<td>2010</td>
<td>Robert S. Nichols Award was established to honor outstanding service by uniformed military clinical psychologists.</td>
</tr>
<tr>
<td>2011</td>
<td>The Julius E. Uhlaner Award was founded. The award is presented periodically to scientists who make significant contributions to selection and recruiting research.</td>
</tr>
<tr>
<td>2021</td>
<td>The executive committee removed Robert M. Yerkes' name from the award for contributions to military psychology by a non-psychologist(s)</td>
</tr>
</tbody>
</table>
Commentary: “You say yes, I say no. You say stop and I say go”
By Pat DeLeon

To Enact Substantive Change, Vision and Persistence are Necessary: Steve Ragusea: “While working on my doctorate at Baylor University, 43 years ago, I wrote a paper arguing that psychologists could competently prescribe a limited range of psychoactive drugs with a little additional training. I was admonished by one of my professors for what he considered to be naïve thinking. Over the last four decades many of us have advocated for prescribing psychologists and have been rewarded by seeing RxP become a reality. Indeed, after 25 years of experience we know, without any doubt, that psychologists can and do safely and effectively prescribe psychoactive medications. It is now legally accepted practice in Louisiana, New Mexico, Iowa, Idaho, Illinois, on Indian reservations, and in the military. Indeed, the Harvard Library Office for Scholarly Communication recently published an article entitled: Comparing Psychopharmacological Prescriber Training Models via Examination of Content-Based Knowledge (Ryan Cooper, 2020).

“Based on content specific examination, the author’s research yielded the following finding: ‘Psychiatrists performed the best, followed by prescribing psychologists, then psychiatric nurse practitioners. There was no statistical difference in the performance of these three groups. Non-psychiatric physicians and non-psychiatric nurses – who ironically write 80-90% of psychiatric prescriptions – performed worse than the first three groups, and non-psychiatric nurses performed significantly worse.’ The debate is over. Psychologists can safely and effectively prescribe psychopharmaceutical drugs. Let us embrace this reality and move enabling legislation and implementation through every state legislature! It will be good for psychology, good for psychologists; and more importantly, good for the patients we serve.”

Department of Defense (DOD) Initiatives: Within the military and USPHS prescribing psychologists serve all across the globe and especially in times of crisis. Accordingly, we definitely appreciate the vision and persistence of Capt. Carrie Kennedy in fostering psychopharmacological training for interested Navy colleagues. Navy psychologists Kristen Kochanski, who recently became the 9th Licensed Prescribing Psychologist in Illinois, and Marcus VanSickle, are both graduates of the Uniformed Service University (USU) and received their RxP training while on active duty. They obtained their advanced training at the Chicago School of Professional Psychology and Fairleigh Dickinson University, respectively. Beth Rom-Rymer, who was key to enacting the Illinois RxP legislation, notes: “We, in Illinois, are so very proud to welcome Kristen into our steadily growing community of prescribers!” The Navy is continuing to expand this program, recently generating a second opportunity for a psychologist to complete the postdoctoral training at the University of Idaho starting in fall 2022, further demonstrating the identified benefit and value of pharmacologically trained psychologists.

Naval Base Guam: An example of the legislative and policy significance of embracing incremental steps in the maturation of the profession is the reality that after considerable effort by Mamie Balajadia, Executive Director of the Guam Psychological Association, in December, 1998, during the last hours of their session, the Guam legislature overrode a Governor’s veto and thereby authorized prescriptive authority for psychologists under a collaborative practice agreement. To date, there has not been a psychologist who has completed the credentialing process; although several have tried. Given the strategic military and humanitarian mission of DOD throughout the Pacific Basin region, it would be highly significant if one of the already credentialed DOD prescribing psychologists were to formally apply for this authority in their current clinical capacity.

The DOD Fiscal Year 2022 Authorization Act (H.R. 4350): September is Suicide Prevention Awareness Month and the Office of the Chaplin, in partnership with the Student Wellness Advisory Board, is taking the lead in hosting a series of weekly mental wellness presentations and recognizing World Suicide Prevention Day (September 10th) at USU. In this year’s DOD reauthorization legislation, the House of Representatives has proposed that DOD initiate several interesting studies and programs, with reports to be developed for the Congress: (Section 545) would establish a clearinghouse of evidence-based practices to prevent sexual assault and other harmful behaviors among members of the Armed Forces and military families, including sexual assault, harassment, substance abuse, workplace violence, and suicide. Another (Section 559H), proposes studying relevant training and education available for active duty members regarding social reform and unhealthy behaviors highlighting sexual assault and harassment, extremism, domestic violence; diversity, equity and inclusion; military equal opportunity, suicide prevention, and substance abuse. Further, Section 592 addresses Healthy Eating Within DOD, urging the development of an implementation plan to improve access to healthy food on military installations.

The DOD Fiscal Year 2022 Appropriations Act (H.R. 4432): “The Committee remains concerned about the shortage of current and prospective mental health care professionals for servicemembers and their families, including social workers, clinical psychologists, and psychiatrists.” The Committee requested a formal briefing on beneficiaries’ demand for behavioral health services, including those provided through telehealth, as well what would be the necessary funding to adequately recruit and retain needed personnel. Similar to their colleagues on
The authorization committee, concern was raised regarding the availability of healthy nutrition for military service members and their families. “The Committee is concerned that 71 percent of Americans between the ages of 17 to 34 are ineligible for military service due to obesity, mental and other physical health conditions, or substance abuse.” A report was requested, in consultation with the Departments of Agriculture and Health and Human Services, on ways to contribute to informing physical fitness or nutritional standards for children and young adults across the nation. The Committee is concerned by the alarming rate of food insecurity faced by military families which the pandemic has magnified. Recent data from the Census Bureau found hunger among National Guardsmen and reservists to be more than double the national rate. Accordingly, the Committee urged a Healthy Base pilot initiative where pilot sites at two installations per Service should partner with the local community to improve the food environment and encourage smart eating. The goal of each pilot should be to develop and test appropriate business models that increase the availability, affordability, and acceptability of health performance foods. Clearly, both House Committees are proposing that the Department initiate a prevention-oriented approach, and one conceptualized through a population-oriented (i.e., public health) lens, in order to support the health and well-being of current and future service members and their families. This should be of considerable interest to all of the behavioral sciences.

9/11 – Never To Be Forgotten: For over two decades, Senator Inouye was fortunate to sponsor the DOD Nurse Congressional Fellowship program. In 2001, Doug Jackson served as our Army Congressional Nurse Fellow. “This is a letter I wrote my daughter on 12 September, 2001. Good morning. I hope this day finds you well and in good spirits. Well yesterday as you know was a defining point in our country’s history and hopefully a day that will never be forgotten. The political atmosphere in Washington DC appears to be less political in its rhetoric and more united, coming together in a sense as to how they are going to confront our current dilemma. Mom probably told you I was at the Pentagon about one hour before it was struck by the airliner. After arriving to work we saw the world trade center attack then shortly after the Pentagon was struck by an airliner. We were told in Senator Inouye’s office that we needed to evacuate the Senate Hart building because of report there may be another airliner attack. Unfortunately everyone else in Washington DC was released at the same time so we entered into the streets that were jam-packed with traffic, there was very little movement of traffic.

“I was able to catch a ride back towards the Pentagon with the office manager Beverly. I felt that I needed to go to the Pentagon and provide any medical assistance that I could. Because the roads were closed there was a tremendous amount of confusion as to how to get out of Washington DC. When we got closer to the Potomac River I decided to get out of the car and walk to the Pentagon and report in. The building was still on fire when I arrived and there was much confusion. I was busy all day helping set up triage spots to care for injuries. We were instructed to evacuate the area couple of times during our set up because of bomb threats but eventually we established our treatment areas. Most of the day was spent waiting for victims. Unfortunately we had only a few patients because if a person was not able to get out of the building shortly after the attack there was no way to get into the building because of all the fires and smoke. In spite of this problem we stood by. As the day went on and more and more Medical support arrived slowly over the day in the area where I was stationed. I think they were from Fort Belvoir. I was released from the duty station where I was at the Pentagon at about 10:30 PM. I did not have a car or ride because I had parked at the train station in Springfield and the metro station was shut down earlier in the day. After a walk, in a while I was able to flag a taxi down and got a ride home.

“Today Washington DC seems very quiet, very little traffic, everyone in the federal system is supposed to go back to work. Schools in Virginia are closed so your brothers and sisters have the day off. In Senator Inouye’s office everyone is back to work focused on this and I feel there is a strong bond between the Leaders in the Senate and the rest of the government as to where we will go from here. Love Dad.” The Senator intentionally never became involved in the DOD Nurse Congressional Fellowship selection process; he expected that the three chief nurses would send him their best, as they consistently did. “You say goodbye and I say hello” (The Beatles). Aloha,

Pat DeLeon, former APA President – Division 19 – September, 2021
Announcements
Grace Seamon-Lahiff

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

Division 19 Fellows Committee Update
- Congratulations to Nate Ainspan for being selected as the new chair of the Fellows Committee!
- Applications for new and existing Fellow status are now open. Anyone interested should contact Nate for information at nate@ainspan.com

Division 19 Early Career Psychologist Committee Updates
- The ECP Committee of Division 19 Professional Development Application Cycle will be opening this fall with a deadline for applications of November 15, 2021. For more information about how to apply see Professional Development Grants - The Society for Military Psychology.
- The ECP is also seeking applications for Chair-Select to serve on the committee alongside the past and current committee chairs. Interested candidates should send their CV and their vision for the future of the ECP committee to: militarypsychECP@gmail.com and jessica.ford@va.gov.

Join Division 19 on social media!
- Facebook group: APA Division 19 – Military Psychology
- Twitter: @APADiv19
- LinkedIn group for ECPs: APA Division 19 - Military Psychology - Early Career Psychologists

Military Psychology Podcast Network Update
Division 19 is proud to host the Military Psychology Podcast Network! This network features 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 shows Beyond the Uniform and Intro to Military Psychology can be found here https://podcasts.apple.com/us/podcast/military-psychology-podcast-network/id1553694252, or wherever you choose to stream your podcasts.

Upcoming Conferences

International Society for Traumatic Stress Studies (ISTSS) Annual Meeting
The 37th annual meeting for ISTSS will be held virtually on November 2-5, 2021 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 3-5, 2021. 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 Applied Psychology Symposium (IAMPS)
Updated Conference Date
The 62nd International Military Testing Association Conference will be hosted by Division 19 this year in Raleigh North Carolina from March 7-11, 2022. For more information on proposals, travel, and conference topics, please visit http://www.imta.info/Conference/Conference_Home.aspx

Call for Papers
The following journals are accepting manuscripts and making request for special papers for 2022 For the full list of journals currently accepting manuscripts please visit https://www.apa.org/pubs/journals/resources/calls-for-papers
- Behavioral Neuroscience
- Canadian Journal of Experimental Psychology
- Families, Systems, and Health
- Group Dynamics: Theory, Research, and Practice

Graduate Student Resources

Division 19 Online National Chapter
Division 19 student affairs committee is excited to introduce our national online campus chapter! The goal of this virtual chapter is to connect all students who are interested in military psychology. We also hope an online chapter will provide student affiliates from smaller campuses and communities the opportunity to connect with like-minded peers regardless of whether or not their institution has an officially sponsored chapter. The online chapter will func-
tion similarly to the traditional brick-and-mortar chapters with regular chapter meetings scheduled. During meetings you can look forward to psychology-related group discussions, journal reviews, webinars, and collegial deliberation. Additionally, there are opportunities for students to take on leadership roles.

Direct Division 19 national online campus chapter inquiries to Jacob Scholl (jacob.e.scholl@biola.edu) and Damin Hadorn-Papke (dh1620@mynsu.nova.edu)

**Student Initiative Fund**

This quarter Division 19 has awarded $1,450 to students seeking to advance the field of military psychology. The Student Initiative fund exists to support psychology students’ engagement at the individual, local, and campus chapter levels. 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.** For more information and application materials please visit https://www.division19students.org/funding.html

**Ralph H. Johnson VA Internships and Fellowship Opportunities**

The Ralph H. Johnson VA in Charleston SC, has opened applications for their internship program and two post-doctoral fellowships focused on Couples and Family Psychology and Co-morbid PTSD treatment and research. Deadlines for these opportunities begin in October and extend through December 15th. More information can be found at: https://www.charleston.va.gov/careers/trainees/psychology.asp

**Connect with Division 19 Students on Social Media!**

- Email div19studentrep@gmail.com
- Facebook @Division19Students
- Instagram @Division19Students

**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/smvf-ta-center/resources/webinars

**VA’s PTSD Consultation Program**

Beginning in September 2021, the National Center for PTSD has launched a lecture series for providers committed to serving the military community. The list of upcoming webinars and lectures can be found here: https://www.ptsd.va.gov/professional/consult/lecture_series.asp

**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://mgheme.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-recruitment-announcements.html

**Veteran Service Organization Spotlight**

**Cohen’s Veteran Network**

Cohen’s Veterans Network is a non-profit organization committed to providing Service Members, Veterans, and their families empirically based mental health treatment at free or reduced costs. To learn more about clinic locations and client referrals, please visit: https://www.cohenveteransnetwork.org/backtobetter/

**Additional Military Special Interest Groups and Organizations to Explore**

- The ISTSS Military Special Interest group https://istss.org/membership/for-members/special-interest-groups-(1)
- The ISTSS Moral Injury Special Interest Group https://istss.org/membership/for-members/special-interest-groups-(1)
- The Association for Contextual Behavioral Science Military Special Interest Group https://contextualscience.org/act_for_military_sig
- APA Division 18, the Division for Veterans Affairs Psychologists https://www.apadivisions.org/division-18/sections/veterans
Due Date: October 31, 2021

Overview
The *Military Psychology* Early Career Reviewer Program is an effort which aims to both mentor early-career researchers in military psychology and increase the pool of possible reviewers for the journal. We invite emerging researchers in military psychology to apply to serve a two-year term as mentored reviewers for the journal *Military Psychology*. We also invite established researchers in military psychology to serve as mentors for emerging researchers for their appointment to the review board for the two-year period. The candidate commits to providing up to 4 reviews each year; the mentor commits to co-authoring and co-reviewing to ensure high quality reviews. The candidate will serve as the reviewer of record in the online review system.

Purpose
The *Military Psychology* Early Career Reviewer Program aims to 1) provide a mentored training experience to early career military psychologists; 2) increase the pool and pipeline of quality reviewers for *Military Psychology*; 3) promote greater connection between the journal and both international military psychologists and the Society for Military Psychology of APA; and 4) promote greater visibility of the journal among early career scholars interested in military psychology. The overarching goal is to foster appreciation for, and enhanced understanding of and participation in, the peer-review process among early career scholars in the field of military psychology.

Recognition/Benefits
The early-career reviewers and their mentors will be acknowledged on the *Military Psychology* web page, as well as at the next annual meeting of the American Psychological Association, during the Division 19 awards ceremony. The early-career reviewers will have their name published in the journal as a member of the editorial board.

Eligibility of Early Career Candidates
Eligible mentees are advanced doctoral candidates (i.e., doctoral students approved for candidacy), postdoctoral scholars, or those just starting a faculty appointment (within two years of graduation) with an interest in developing expertise in military psychology. Candidates should have research interests and expertise in an area of psychology and related fields related to the performance, health, and wellbeing of military personnel, veterans, and their family members. The candidate will illustrate their fit with the aims of this program within their cover letter and CV submitted as part of the application process. The expectation is for regular communication between the candidate and mentor regarding the review of manuscripts submitted to the journal.

Eligibility and Expectations of Mentors
Mentors are more established military psychologists with at least 8 years post-doctorate research experience in the field of military psychology. Although current members of the editorial board are encouraged to apply to be mentors to their more junior colleagues, the program is not limited to members of the board. Mentors are required to agree in writing through an email to the Editor-in-Chief of *Military Psychology* (twbritt@clemson.edu) that they will serve as a co-reviewer with a candidate for a two-year editorial term. This includes, but is not limited to, reading and discussing the original manuscript with the candidate and providing edits/comments on drafts of the review prior to submission through the journal’s online editorial review portal. It is the expectation of the journal that the mentor is co-reviewing the manuscript with the candidate.

Application Process for Early Career Candidates and Mentors
- **Early Career Applicants** complete a packet including the following:
  - Two-page cover letter describing expertise of the candidate related to military psychology and why this is an important opportunity to advance the candidate’s career, skills, and/or expertise related to military psychology research.
  - CV of the candidate clearly indicating that mentee is eligible (i.e., currently holds a doctorate or will be a doctoral candidate by the date of applications deadline).
  - Send these materials as attachments to twbritt@clemson.edu.
- **Mentors** send an email in writing to twbritt@clemson.edu indicating they agree to serve as a mentor of an early career applicant for a two-year term, attaching a copy of their Vita to the email message.
- **Applicants** will be paired with **Mentors** based on their similarity of research interests in the field of Military Psychology

Timeline:
- The applications are due **October 31, 2021**.
- Applicants will be notified via email of the results of the selection in late-November.
- Public acknowledgement occurs on the *Military Psychology* web site upon selection and at the following APA conference in August of 2022.
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.