



THE MILITARY PSYCHOLOGIST

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Division 19 of the American Psychological Association

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January–December 2013

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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 **February 1**), Summer (submission deadline **June 1**), and Fall (submission deadline **October 1**). Instructions for Contributors appear on the back cover.

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Editor's Column

LTC Melba C. Stetz, Ph.D.



!Hola!

I want to start this column by inviting everyone to help me welcome over 100 new members. I likewise encourage you to read President COL Rebecca I. Porter's column regarding the bond of service that all of us in Division 19 share. Also, for those interested in news from the federal policy realm, Heather O'Beirne Kelly provides us with an update on the ongoing Department of Defense advocacy efforts of the American Psychological Association (APA).

Please take some time to read the feature article by Major Larry Wyatt that encompasses the ethical dilemma and the internal conflict experienced by Special Operations Forces medical personnel when faced with cultural diversity as a restraint to rendering medical aid. Another feature article by Michael Sapiro and Jonathan H. Rousell encourages military and Veterans Affairs psychologists to consider the impact that service members' and veterans' initial psychotic breaks have on their subsequent ability to form healthy romantic relationships. Finally, a feature article by Dr. Patrick H. DeLeon and CPT David M. Barry illustrates how the Uniformed Services University of the Health Sciences (USUHS) training model enables psychology students to communicate effectively with researchers and providers across multiple health disciplines in military and civilian contexts.

Thanks again to those that sent us these amazing articles!

Also, be sure to check out our Spotlight contributions. The Spotlight on R&D section highlights work conducted

to understand the need for mental health screening in low-income Hispanic communities as part of Operation Lone Star, while the Spotlight on Pedagogy section contains a very useful article on the elements of negotiation at West Point. There is also a call for Profiles in Military Psychology in the Spotlight on History section.

We also have some outstanding reports to share with you in this issue. The Continuing Education Committee gives us directions on how to create more opportunities to continue our education, and the Early Career Psychologists Committee proposes mentorship opportunities for both clinical and research tracks during the upcoming APA conference in Hawaii. In addition, David Barry and Jennifer Barry recap the accomplishments that were made at the midyear meeting of the Executive Committee, and they highlight student-relevant events at the upcoming APA conference. The Division 19 Program Chair Ann Landes also provides a complete summary of the programming and hospitality suite events of the upcoming APA conference. In fact, both Drs. Landes and Paniagua are inviting us all to interesting events during the conference such as preconvention workshops . . . and luaus!

Finally, remember to read the meeting minutes of the Executive Committee and the announcements on online courses, students' scholarships, and calls for proposals and participants for gender-related studies.

Looking forward to your upcoming submissions, and I'll see you in Hawaii!

President's Message

Rebecca I. Porter, Ph.D.



I struggled to write the President's message for this edition of the newsletter. Still on my mind were some of the messages from the last newsletter: fiscal constraints, sequestration, and the furlough of some of our federally employed colleagues. However, it did not seem that it would be helpful to

reiterate those themes for fear of appearing to be doing some virtual hand-wringing or, at the very least, beating a drum with which we are all very familiar. Then it struck me: All of us in Division 19—the Society of Military Psychology—share a bond that prevails over our nation's current budgetary struggles. We share the bond of service. Whether we are in uniform or not; whether we are in clinical work, research, or policy making; whether we are in the government, private sector, or academia—we share an interest in and dedication to those who serve our country. All of us in Division 19 are, in our own ways, directly or indirectly serving through our contributions to military psychology.

This message, then, is to thank you for your service. Thank you for your interest in military psychology and

for your contributions to the field. I am especially appreciative of those members in Division 19 who have decided to serve and to volunteer their time in order to keep the Division and its intent moving forward—from our student representatives to the Executive Committee (EXCOM) to the seasoned psychologists who work as voting or nonvoting members of the EXCOM. Without the volunteer time of so many highly respected and sought after professionals, military psychology might flounder. During the last 12 years of conflict, the value of military psychology has been recognized. Unfortunately, its full worth has probably yet to be appreciated. Our military men and women will continue to need our service and dedication, even as a deployed force returns home. Indeed, they will likely need us more than ever.

Whether the value and potential contributions of military psychology are at the forefront of society and in our leaders' minds, our Division works steadfastly to keep our seat at the table—to keep our field viable for when we are needed. To the members of Division 19: Thank you for your service.

Division 19 Executive Committee (EXCOM) Minutes for 2013

Rhett Graves, Ph.D.

Meeting date: February 20, 2013. Attendees (in alphabetical order): David Barry, Jennifer Barry, Paul Bartone, Arwin DeCostanza, Diane Elmore, Armando Estrada, Paul Gade, Rhett Graves, Heather O’Beirne Kelly, Ann Landes, Angela Legner, Kathryn Lindsey, Rebecca Porter, Mike Rumsey, Steve Sellman, Melba Stetz, and Kristen Wooley

Welcome/Introductions/Announcements: President **Porter** led the introductions and presided over the meeting. She requested that the President’s Report be move to the end of the meeting and that the Secretary’s Report be presented first.

Secretary’s Report: **Graves** asked the EXCOM to approve the meeting minutes from August 2, 2012. The minutes were approved. He noted that his 3-year term as Secretary was ending and asked about the election and hand-off process for the incoming Secretary. **Lindsey** briefly explained the process.

Treasurer’s Report: **Lindsey** presented the report. She reported that the health of the Division is very good and that they journal drew approximately \$86,000 in royalties. The Division saw \$119,592.46 income in 2012 with a net of \$59,687.39. She discussed having presented five ideas for funding at the last midyear meeting—two were funded last year, and three remained pending questions about execution. A Financial Planning Committee was formed to determine a process and spending plan for execution of Workshop, Fellowship, and Education and Outreach Grants. **Lindsey** quoted the following from the Financial Planning Committee Report:

We recommended that the division fund grant programs for Research, Workshops, Travel, Advocacy, and Fellowship. The EXCOM voted to approve funding for both the Travel and Research Grants Programs and requested further review of the Workshop, Advocacy, and Fellowship Grants. In addition, the EXCOM recommended modification of the name “Advocacy” to more clearly reflect the intent of the grant, which is to fund community relations

efforts supporting the science and practice of psychology. Therefore, the committee recommends changing the name to “Education and Outreach Grant Program.”

Fellows Committee: **Rumsey** delivered the report. He discussed the American Psychological Association (APA) automating the system for applying for fellow positions, with the main criteria being outstanding contributions to APA/Division 19 and three endorsements. He noted that if a candidate is already a fellow in another division, then the process is simpler—they just need an endorsement from a fellow in another division. **Porter** asked if it is possible for an individual to nominate him- or herself. **Rumsey** noted that he has written to individuals and suggested that they apply and that with three endorsements, it does not matter who nominates.

Student Affairs Committee: **D. Barry** and **J. Barry** introduced themselves as the new Division 19 Student Representatives. **D. Barry** and **J. Barry** met with **Kristen Kochanski** to plan a way ahead for the Student Affairs Committee. They anticipate 500 student members by the end of 2015 and noted that across the country there is significant interest in military psychology. Demand for resources is increasing with increasing interest. **J. Barry** noted that working to increase student interest also means they will need to meet increasing demand. She noted that to meet this demand, the Student Affairs committee is focusing on developing infrastructure and a framework to guide development, making adaptations to the website, and issues surrounding military psychology focused education. The goals for 2013 are to determine the demographics, needs, and motivations of students interested

in military psychology; to work with **DeCostanza** (Website Committee) to update the website; and to increase competition for student awards. The Student Committee created a survey, getting a 40% response rate, to identify student needs. The primary concern was financial assistance to get to the APA Annual Convention. Also, it was noted that 56 of the student members indicated an interest in serving in Division 19. Following this discussion, **J. Barry** and **Legner** discussed their interest in setting up a formal student chapter of Division 19 and having military psychology groups on campuses. They hoped this would support students in their transition to early career psychologists, through financial support, providing access to a network of mentors, and having a framework to enhance communication. **Legner** noted that at the Chicago School in Washington, DC, there are over 30 students who have an interest in military psychology. **Legner** and **D. Barry** recommended the Division establish a taskforce to conduct a feasibility study over the next year. **Estrada** commended the Student Committee members on their excellent work and clarified whether they were seeking the EXCOM's blessing to set up a formal task force. **J. Barry** clarified that the taskforce would be focused on developing a charter for a student chapter. There would be an EXCOM member on the taskforce. **Estrada** noted that the EXCOM would need to get a sense of the cost in order to ensure that it is done to standard. **Gade** asked whether we know what is involved in setting up a student chapter. **Porter** clarified by summarizing that the Student Committee is asking for EXCOM approval, and they are going to apply for the Fellowship Grant. **Porter** asked what they will do if they do not get the Fellowship. **D. Barry** said they will move ahead as best they can with resources available, that he envisions a far better product with additional funding. **Estrada** recommended that they do not hitch this idea to the Fellowship Grant—that they think independent of the Fellowship Grant. **Porter** motioned to establish the taskforce. The motion was approved. Discussion then turned to looking for an EXCOM volunteer and setting up a student-only communication vehicle, suggesting a listserv primarily for students.

The EXCOM took a break at 0955 and returned at 1006.

D. Barry and **Porter** picked up discussion concerning the student listserv. There was a motion to approve the student listserv for Division 19. **Estrada** noted that the biggest challenge will be moderating—**D. Barry**, **J. Barry**, and **Legner** nominated themselves to moderate the listserv. The motion carried to set up a student listserv for Division 19. The discussion then turned to funding student travel and research grants. **D. Barry** noted that 20 students applied for travel awards and that competition is increasing. He suggested that the EXCOM apply the same process for research grants to travel awards—only people with an approved poster are eligible for a travel award. **Porter** noted that there is a lot to be said for a competitive process and that having a rejection rate is not a bad thing and would be excellent for the health of the student program. **Porter** asked what the discriminating criterion would be; **D. Barry** noted the purpose of the travel award would be to encourage attendance, engagement, and participation in the Division. **J. Barry** noted that many Psy.D. students do not do as much research, so the travel award should encourage both leadership and research contributions to the Division. **Porter** added that it could be for a clinical contribution, research, or leadership. **D. Barry** suggested opening up the travel awards so students would be able to travel to the Washington, DC, Convention in 2014. **J. Barry** added that they could identify distinguishing criteria as part of the taskforce. **D. Barry** suggested that to fairly represent all students, there would be three research and three clinically oriented student travel awards. Discussion then turned to adding \$750 for travel to the current \$1,500 research grant. **D. Barry** noted that travel to geographically isolated places, like Hawaii, tends to be more expensive. Adding the \$750 for travel to the research grant would further encourage reporting of funded research. Other requirements could be to attend the midyear meeting to provide an after action review (AAR) and to publish a research note in the Division's newsletter. **Porter** noted that the business meeting probably would not be a good idea but that the newsletter would work well. **Rumsey** suggested the hospitality suite as another option. **Estrada** noted that the concern with the research grant is not addressing travel costs. He suggested that the grant have a particular dollar amount and then leave it to students to decide how to best use the funds. The grant does not preclude anyone from budgeting for travel. The idea is to give funds to an individual who shows promise. **Estrada** asked **D. Barry** if

he was asking for additional money, requesting an additional \$750 to be added to the research grant (with the \$750 allocated to travel), increasing the grant to \$2,250, so the addition would be in the same amount as the student travel award. **Porter** clarified that the original research grant was written with just a dollar amount and no requirement for travel. She added that to follow through on this would open up two slots among the student travel awards. **Porter** suggested that we increase the research grant by \$750 to \$2,250 but that the research grant recipient would be excluded from competing for a student travel award. She also suggested adding language regarding the requirement for travel to the APA conference. **D. Barry** added that the additional \$750 would become available only when the recipient has made plans to travel, either to the Conference or to back brief the EXCOM at the midyear. The recipient would need to show a ticket for reimbursement. **Porter** motioned to increase the research grant to \$2,250 with the final \$750 made available when the student makes plans to travel to the Conference. The motion was approved.

Member-at-Large (I) Report: Wooley introduced herself to the EXCOM and described her objectives of getting involved in opportunities for continuing education and advocacy for psychologists interested in operational psychology. She also described plans to support military psychologists who would act as consultants in the area of ethics and other skills to offer commanders. She would also like to support military psychologists in research and consultation for leaders concerning expanding the combat roles for women in the military. **Porter** recommended that she talk to **Tonia Heffner**. **Gade** suggested an additional resource from 1977 concerning Women in the Air Force, and that she contact **Janice Laurence**. **Sellman** also noted that in the mid-1990s there was a taskforce looking at women in combat; **Laurence** was a policy analyst at that time.

Fellows Committee: Rumsey delivered the report. **Rumsey** proposed to the EXCOM to name fellows on the Division 19 website. **Estrada** noted that we would need to get their permission in order to put their names on the site; it is not widely known who is/is not a fellow. There was a motion to put names of Division 19 fellows on the Division 19 website, with their permission (and depend-

ent on APA policy). The motion carried. **Gade** noted that there are many fellows who are deceased. **Rumsey** noted that once you apply to be a fellow, you are applying for recognition—he will be sure to take up the issue with APA to find out their policy. There are no restrictions on people asking to be nominated to be fellows. **DeCostanza** asked about the process to put names on the website. **Rumsey** said that he will not send the names until the required hurdles are cleared. He suggested that fellows be named in a separate category. **DeCostanza** reported that the website is limited to seven tabs, and suggested the membership tab. **Rumsey** reported on his current activities to identify promising fellow candidates and to process the applications of fellows. Two candidates had already completed applications that were approved by the fellows committee and submitted to APA. One additional fellow application had been received. **Rumsey** described the process of how fellows were approved through APA.

Hospitality Suite: Gade presented the report. **Gade** motioned to incorporate research talks into the hospitality suite for new fellows. **Estrada** suggested that following the social hour could be a time to honor fellows of the Division. Various options were discussed concerning fellows presenting at the hospitality suite, the business meeting, or social hour. The motion was that a new fellow presentation would be part of the hospitality suite program the year following becoming a fellow. Motion was approved.

Military Psychology Awards Committee: Porter moved to approve funding of the standard awards (Melton, Gersoni, Nichols, Uhlener, and Yerkes) in the amount of approximately \$1,500. The motion was approved. Call for nominations was published in the Spring newsletter, with a May 30, 2013, due date.

APA Department of Defense (DOD) Update: Kelly and Elmore described their activities in the Government Relations Office at APA. They described how over the past decade military psychology has come into the spotlight; they seek to share and educate government officials and lawmakers concerning what military psychologists do. **Elmore** described the 113th Congress and what trends she sees emerging as everything is getting shuffled. She reported getting to know a lot of new people, as there are many freshmen. One of her high priorities is ensuring sup-

port for the Minerva initiative. **Kelly** has been working with Veterans Affairs (VA) and described various issues and concerns. Discussion turned to Sequestration. She described how the Whitehouse has reached out to the health disciplines, through educational/professional organizations and universities/colleges, to address military issues. The Continuing Education Office (**David Riggs**) has developed a webinar on military culture that has already reached 500–600 people, which included a primer on the VA (**Joe Rubeck**). The Continuing Education, currently being done as a webinar, is planned for a CD offering. Discussion covered major topics on the Hill in relation to the VA and DOD, such as substance abuse, suicide, and military sexual trauma. Finally, discussion ended on planning activities for the Convention.

Adjourned for lunch 1200–1300.

Military Psychology Journal: **Estrada** presented the report. A new contract with APA has been executed for the Journal, and the new submissions portal is <http://www.apa.org/pubs/journals/mil>. He reported that the first issue will be mailed soon and is awaiting the final royalties from Francis Taylor. The new journal format will be 7 × 10, and APA is providing support for the Newsletter. **Estrada** also discussed the continued expansion of the journal and the number of papers that *Military Psychology* is able to publish. In addition, there is a new team of associate editors: **Douglas Lindsey** (U.S. Air Force Academy), **Amy Adler** (Walter Reid Army Institute of Research), and **Fritz Drasgow** (University of Illinois). **Estrada** discussed his plan to continue to monitor our progress with automated submissions, to monitor the journal's expansion from 4 to 6 issues per year, to continue to increase the size of the editorial board and expand the college of reviewers, and to work with the publisher to increase the visibility of the journal both nationally and internationally. **Lindsey** inquired about when to be looking for the payouts. Discussion then moved to the details of closing out the Francis Taylor contract and executing the new contract with APA. Royalties from 2012 were \$86,096.58.

Military Psychology Website: **DeCostanza** delivered the report. She reported updating the website regularly and that if anyone has any news or events to share to contact

her. She has worked with **Morgan Banks** to add a blog to the website, but they still need a person to populate the blog. **D. Barry** thanked her for updating the Student Representatives section of the website. They discussed the student listserv and how it may accomplish many of the goals the blog was intended to accomplish. The blog was intended to address “hot topics” in military psychology. **Bartone** noted that it may be better to post research support requests and job announcements on the website. **DeCostanza** reported that this issue has come up, and they had decided not to post job announcement and research support requests on the website, mainly due to the length of time for turnaround. Modifying the website usually takes longer, and many jobs postings require a quick turnaround.

Listserv Management: **Bartone** delivered the report. **Bartone's** first action item concerned establishing the student listserv. He discussed some of the reasons this would be a good idea, including facilitating communication among military psychology students, helping to vitalize Division 19, and attracting new members. He then followed up on his progress working with **Keith Cooke** at APA to produce a list of Division members who are not currently on the listserv. The action was delayed but has now gone to APA to produce the list. He intends to send out invitations to these members to subscribe, anticipating an additional 50–100 subscribers as a result. He congratulated the Student Committee on their excellent work in bringing new subscribers to the listserv. **Porter** asked about guidelines for posting to the listserv. **Estrada** shared **Bartone's** concern that this is an announcement-only mechanism. Discussion centered on job announcements and research requests and establishing guidelines for research requests, such as a formal template. **Bartone** noted that we also receive announcements from APA and other Divisions, although these are usually forwarded to the President and EXCOM for input. One problem that has arisen is that people are responding to the entire listserv, rather than forwarding the message to only the individual for which it is intended. He recommended sending a message to the listserv concerning guidelines for use and policies.

Newsletter: **Stetz** delivered the report. She reported that the summer newsletter should be ready in a couple weeks and that she would send out reminders to members of the

listserv for contributions. **Bartone** suggested that it may be a good idea to set up an archive of newsletters on the website. He suggested posting the current issue, with a link to an archive of past issues. **DeCostanza** agreed to look into making those changes to the website. **Gade** noted that the newsletters are a great resource for historical information. **Porter** motioned to post an archive of Division 19 newsletters on the website. The motion passed.

Military Psychology History: **Gade** presented the report. He put out two spotlight columns on military psychology history and would also like to do a column that profiles famous/infamous military psychologists. He also began developing an annotated timeline of the Division. He asked the EXCOM a set of questions he would need to complete the timeline. **Estrada** suggested that we archive the meeting books, which started in 2009. **Graves** agreed to send all the meeting books to **Gade**.

Financial Planning Committee Report: **Lindsey** delivered the report. She described the outcome of the work the Financial Planning Committee conducted since last year's midyear meeting. There were five proposals put forward in the last midyear meeting. Two—the travel grant and research grant—were approved and are under execution. The Financial Planning Committee worked to determine how to best execute the remaining proposed programs. The Committee recommended that the Division fund grant programs for Research, Workshops, Advocacy, and Fellowship. The Committee discussed processes for executing Workshop, Advocacy, and Fellowship Grants, involving Early Career Psychologists (ECPs)

and Student Committees. The new structure would consist of a Member-at-Large (MAL), an ECP, and a Student Representative. Discussion among **Estrada**, **Lindsey**, and **D. Barry** centered on differentiating responsibilities between the Past-President, President, and President Elect, who would oversee the travel and research grants; the new committees of MAL, ECP, and Student Representative would oversee the remaining grants. **Estrada** suggested appointing three additional individuals to assist with the process, who may be an outside ECP, student, or MAL. Other suggestions included past grant recipients and fellows. **Lindsey** noted that, as described in the newsletter for Fall 2012, the committees would be as shown in Figure 1 below.

She suggested that MALs select the programs they are most interested in and then they stick with those over their 3-year tenure. **D. Barry** asked what would happen if a student wanted to apply, but he or she was also on the Committee. **Lindsey** said you would need to recuse yourself from the evaluation, but you would not be barred from competing. **Bartone** asked about the recommendation for the fellowship program. **Estrada** explained it as a way to provide funds to enrich the development of a worthwhile effort at the doctoral/postdoctoral level. The program is purposefully broad in scope; the intent is to be able to do that and more, to be in a position to support a variety of efforts. **Bartone** noted that it may be a challenge to write the grant announcement. **Lindsey** noted that Appendix A in the meeting book contains an initial draft of the grant announcement. **Bartone** noted that it may be a challenge to communicate to potential applicants. **Estrada** respond-

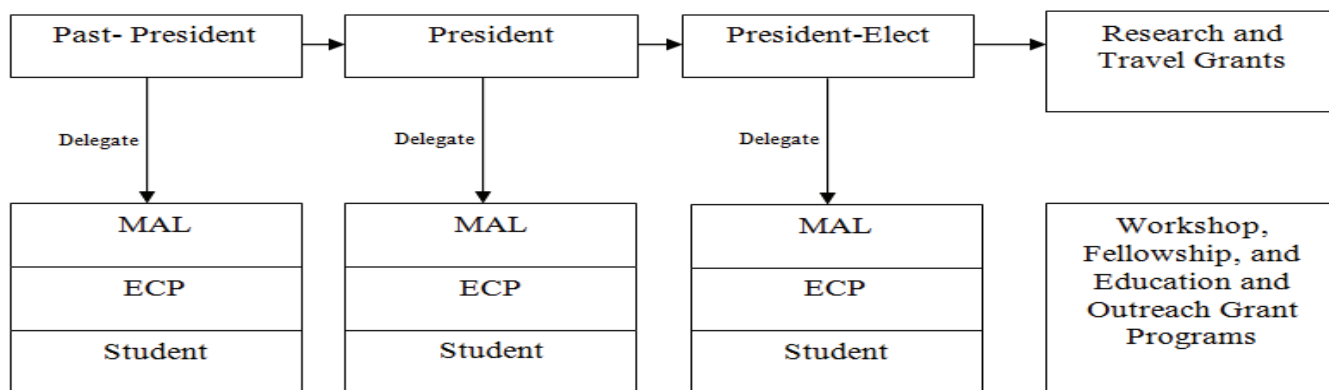


Figure 1. Division 19 committee structure.

ed that they were seeking less prescription rather than more—to see what happens; this is just to get the program started. **Porter** asked how we call for proposals. **Estrada** responded that the announcements would be made in the newsletter and on the website. **Porter** noted that it would be good to routinize the process as much as possible. **D. Barry** noted that the May 1st deadline is right around finals and that it may be helpful to divide the labor throughout the year, having two different due dates for the different types of grants. **Estrada** suggested the September/October and early spring timeframes, pointing out that the award needs to be timed so the awards can be presented at APA. **Porter** suggested half would be due in October (possibly October 31st) and half due in April (possibly April 30th). The following motion was presented: move to establish a mechanism for awards overseen by the Awards Committee with Travel and Research Grants to be overseen by the President, Past-President, and President-Elect, and Fellowship, Workshop, and Outreach Grants to be delegated to MAL, ECP, and Student Committees for each grant in amounts indicated in the proposal. The due date for Travel, Workshop, and Education/Outreach Grants is April 30th, and the due date for Research and Fellowship Grants is October 31st. The motion was approved.

Discussion then turned to the Annual Convention in Hawaii and various outside activities for Division 19 students. **Lindsey, Porter, Stetz,** and **D. Barry** discussed funding for a student activity. **Lindsey** asked **D. Barry** to submit an agenda and budget request.

President's Report: **Porter** delivered the report. She opened with a motion to approve funds for voting members of the EXCOM to travel to the midyear meeting. The motion carried. **Heffner** asked the EXCOM to open discussion concerning a 1-year increase in value for travel grants—\$750 increased to \$1,000 for 10 awardees to cover the additional cost for travel to Hawaii. **D. Barry** noted that student travel awards are \$10,000 total at \$1,000 for

each of 10 students. **Lindsey** asked that travel requests need to be submitted 1 month in advance.

The meeting adjourned at 1438.

Following the meeting, additional votes were cast through e-mail.

1. **Graves** motioned: To provide Professional Travel Awards in the amount of \$1,000 in order to offset costs associated with travel to the 2013 APA Convention in Hawaii. After the 2013 Convention, Professional Travel Awards will reset to the previous amount. (This matches the funding voted on for the student travel awards.) The motion passed.

2. **Heffner** motioned: Division 19 provide funding for the voting members of the Division, the Executive Committee, to attend the 2013 annual convention. Funding will be equal to the cost of roundtrip airfare and three nights in a hotel (not to exceed government lodging authorization). EXCOM members will receive actual cost reimbursement, lodging not to exceed government per diem rates, after providing receipts to the Treasurer. The EXCOM member must file a notice of intent to file for reimbursement NLT no later than May 31, 2013. This funding is for Fiscal Year 2013 only due to the extraordinary costs of the conference and the curtailment of government support for conference attendance. The motion passed.

3. **Freddy Paniagua** motioned: To allow any military psychologist (with an appropriately submitted proposal and expertise) to access Division 19 continuing education unit (CEU) sponsorship in order to give continuing education presentations at their commands or when they travel. (With the current budget issues and severe restrictions on travel, military psychologists are not being allowed to travel to obtain the required CEUs that they need for licensure.) The motion passed.

Welcome New Members!

Sena Garven, Ph.D.

The Society for Military Psychology welcomes the following new Members (M), Fellows (F), International and Professional Affiliates (IA), and Student Affiliates (SA) who have joined since January 1, 2013, through April 30, 2013.

Hyderhusain Abadin (M)	Kathleen Curtiss (M)	Dezarie Hutchison (SA)
Heather Ambroson (SA)	Michael D'Addona (SA)	Michael Ingerick (M)
Heidi Anderson (SA)	Jason De Leeuw (M)	Aretha Jackson (SA)
Carneseya Ardon (SA)	Christopher Diaz (SA)	Lindsey Jenkins (SA)
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Monica Atkins (SA)	Katie Dorsey (SA)	Liza Jones (SA)
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SOCIETY FOR MILITARY PSYCHOLOGY

Division 19 of the American Psychological Association

Important Student Research Grant Update!



The Society for Military Psychology (Division 19) is pleased to announce important changes to its annual **Military Psychology Student Research Grant** competition. **Student Research Grant applications will now be due on October 31st of each year** in order to help fund projects earlier and better accommodate students' schedules. The purpose of the Student Research Grant is to assist graduate and undergraduate students of psychology with costs associated with conducting research. Proposals in any area of psychology related to the advancement of military psychology will be considered.

Additionally, the Student Research Grant award was increased from \$1,500 to \$2,250, with the additional \$750 dedicated for travel funds to APA Conventions (if needed). Previously, student members who were awarded research grants also had to compete for Student Travel Awards. The additional travel funds are intended to help students attend the 2014 APA Convention in Washington, DC.

Student Research Grants will be presented to student member(s) whose research reflects excellence in military psychology. **The deadline for entries is October 31, 2013.** Instructions and application materials can be obtained at <http://www.apadivisions.org/division-19/awards/grant/index.aspx>.

We look forward to your submissions!

APA is committed to supporting military service members, veterans, and their families through training and workforce development, federal advocacy, information dissemination initiatives, and key collaborations. This section highlights some of APA's recent initiatives related to service members, veterans, and their families.

APA Update on Department of Defense (DoD) Advocacy

June may usher in a slower pace for many, but summer heats up in Washington for APA's GRO staff in more ways than temperature alone. Congress returns from recess for a busy month of tackling—and ideally moving—the bulk of its annual legislation, including the DoD's Fiscal Year (FY) 2014 authorization and appropriations bills. GRO is actively lobbying on and tracking a number of issues within these bills, including research funding levels, mental health services and suicide prevention programs, the impact of federal travel restrictions, and possible policy changes regarding military sexual assault. We also continue to be heavily involved in efforts to track effects of budget sequestration and advocate for more balanced alternatives (keep up to date on federal budget issues by checking APA's budget blog at <http://www.apa.org/about/gr/science/news/budget.aspx>).

As appropriations season gets underway for FY 2014, GRO is watching both the Administration and Congress pursue what may be overly optimistic spending levels to say the least, given the sequester now in effect and the ongoing spending caps mandated by the 2011 debt limit law. To a large degree, all parties are acting as if the sequester will not exist in FY 2014, although its spending caps are enshrined in current law. The President sent Congress a FY 2014 budget request for DoD alone that was \$52 billion above what the spending caps would legally allow (and as pointed out by Congressional Quarterly, by an amount bigger than the entire budget of the State Department).

Responses from Congressional leaders of the defense-related committees have varied. Senator Carl Levin (D-MI), Chairman of the Senate Armed Services Committee, said, "We have three budgets—House, Senate, White House—all of which assume no sequestration, but none of them in a way which is credible." Levin and his committee's Republican ranking member, Senator James Inhofe (R-OK), have formally requested that DoD specify exactly how it would reduce its budget request by \$52 billion to meet the spending cap, presumably to force a more realistic discussion of the sequester's effects on the Pentagon.

On the House side, Chairman of the House Appropriations Defense Subcommittee Bill Young (R-FL) said, "I do not see any path opening up to deal with sequestration. The Appropriations Committee position is—we are not going to deal with sequestration." The House is scheduled to start moving both the defense authorization and appropriations bills this week.

In terms of support for research, GRO staff and our defense research coalition colleagues estimate that the President's FY 2014 budget request would result in a slight decrease of \$74 million (or 0.6%) to the overall DoD Science and Technology (S&T) account. Army, Navy, and Air Force military service labs all would see cuts to their S&T programs overall, though in each case the fundamental 6.1 level accounts would increase (Army by 6.8%, Navy by 4.2%, and Air Force by 6.3%). DoD's defense-wide research agencies would get increased funding in FY 2014 across 6.1, 6.2, and 6.3 levels, and the *Defense Advanced Research Projects Agency* is slated for a slight (1.8%) agency-wide increase, increasing from \$2.81 billion to \$2.87 billion in FY 2014. DoD's medical research budget

would take a substantial cut in the Administration's 2014 budget, falling from \$1.27 billion to \$730 million (a 42.7% decrease).

Within these overall S&T accounts it is unclear at this point how human-centered, behavioral research programs specifically would fare in each of the military laboratories, defense-wide agencies, and medical research programs under the President's FY 2014 request. We assume that in the current budget environment, behavioral research accounts in the S&T line could expect to see level funding or, in some cases, very small increases at best. Within the medical research programs, DoD is standing up large projects related to mental health (in particular, posttraumatic stress disorder and suicide), which could increase the proportion of those accounts dedicated to human-centered science.

As many Division 19 members are all too aware, DoD furloughs have begun, although we have learned about some exemptions put in place to cancel furloughs for DoD psychologists providing direct clinical care. Separate restrictions on federal employee travel continue to

have real, and sometimes dramatic, effects on research, training, and clinical care within DoD and the Department of Veterans Affairs (VA). GRO continues to lead efforts on Capitol Hill and with the White House to remove these restrictions and to allow both DoD and VA more appropriate flexibility in supervising psychologists and other professionals.

Finally, this year's defense authorization bill likely will contain language and possibly sweeping policy changes to DoD programs related to sexual assault prevention, treatment, and prosecution. GRO staff are monitoring House and Senate hearings on these issues and are tracking any language related to trauma research and services.

I look forward to seeing Division 19 members in Hawaii, especially in light of APA President Don Bersoff's special convention track focusing on military personnel and veterans. Please continue to use me as a resource—I am happy to share relevant news from the federal policy realm and am equally eager to hear from you about the opportunities and challenges you are seeing on the front lines of DoD psychology.



MILITARY PSYCHOLOGY

*A Journal of the Society for Military Psychology
Division 19 of the American Psychological Association*



The American Psychological Association will begin publishing *Military Psychology* in 2013.

Division 19 members will continue to receive the journal as part of their membership. Articles published in *Military Psychology* will also be available through PsycARTICLES®, the most used full-text database in psychology and one of the most popular databases in all scholarly disciplines and fields. PsycARTICLES is available to a global audience of nearly 3,200 institutions and 60 million potential users.

All new and previously published *Military Psychology* issues are available to subscribers at <http://apa.org/pubs/journals/mil>.

Prospective contributors and subscribers can learn more by visiting <http://www.apa.org/pubs/journals/mil>.

We look forward to your submissions!

21st Century Special Operations Force Medicine Meets Iraqi Culture

By Major Larry Wyatt

Medical professional's obligation to uphold the Hippocratic Oath can intersect with local social taboos, often resulting in ethical conflicts. Comprehending foreign customs and culture can be difficult, can be excruciatingly complex, and is further strained in a combat environment. As a Special Forces (SF) Physician Assistant (PA), I have stood at these moral crossroads when cultural restrictions prevented me from touching an exsanguinating patient. This situation both mystified and infuriated me and raised ethical considerations that have confused me for years. Soldiers have engrained experiences from combat; many are tragic, and some are more positive.

An experience of mine describes this clash of 21st century medicine with Iraqi culture, and is one of my most confusing clinical experiences. Although bleeding and in shock, an Iraqi woman would not allow two of my SF medic (18 Delta [18D]) colleagues or me to touch her in order to render postnatal medical care. She had been bleeding for approximately 6–8 hr. The ethical dilemma and circumstances surrounding the medical situation caused me to repeatedly reevaluate and reassess my moral stance, cultural differences, ethical ramifications, and medical decisions. Therefore, I see it as necessary to describe this encompassing ethical dilemma and the associated cultural competencies, moral obligations, and medical responsibility inherent in the Hippocratic Oath. Additionally, I describe the internal conflicts we experienced as a band of Iraqi village women—presumably defending their culture—refused our efforts to render aid.

In the winter of 2008, during a mission in the Hamrin Mountains, SF soldiers captured several targets for questioning. Tensions are typically high when conducting such operations, as security is always balanced with the desire to minimize negative local perception of our actions. During this operation, our Sergeant Major yelled “Doc, a woman is having a baby in one of those huts!” We recognized the opportunity to render assistance. Upon arrival at the small mud hut home, I found two of my

18D colleagues distraught: They were caught in an ethical and emotional conundrum in which they were unable to make a positive impact on the clinical outcome of a postnatal Iraqi woman.

This woman had had been bleeding continuously since giving birth 6–8 hr prior. She had not been able to feed her obviously hungry and crying baby since delivery. The other village women, to include the presumed matriarch, would not allow us to help her. The interpreter told us that if the women allowed us to place our hands on her to control bleeding, upon his release from questioning, her husband would kill her. The cultural taboo against another man touching someone else's wife was strong enough to prevent us delivering care, even at expense to her life.

At its core, this Western, Hippocratic ideal of “first, do no harm” morphed into “do nothing and the patient dies.” Through our interpreter, we were able to convince the matriarch that intravenous infusion would be of great benefit if she would allow us to help stop the bleeding first. Two 18D colleagues and I pooled our resources of Kerlix bandages together and told the interpreter to explain to the matriarch what had to be done. Soon after that conversation, we were forced out of the hut so the women could stop the bleeding.

Upon reentering the hut, we noted that approximately half of the Kerlix bandages had been used to clean the already pooled blood off the floor, and we could only hope that the other half had been used for what they were originally intended. The 18Ds established intravenous access, and they infused two bags of fluid that had an immediate impact on her blood pressure and overall clinical status. Throughout the entire process, the temperament of the village women was very unsettling. We left instructions with the matriarch and the rest of the Kerlix bandages. The patient's blood pressure was stable and much better than when we initially arrived. She was sitting up and conversing with the matriarch and the other village women when

we left. We had also found out that this was her fourth child.

As a Special Operations Forces (SOF) clinician and soldier, I still think about that woman. I wonder whether she and her infant survived the immediate postnatal and postpartum period. More pressing is wondering if her husband exercised his cultural “right” to punish her, and if we did the right thing. Ethical decisions versus customs and cultures of another country are how I delineate the decisions made that day. Although certainly debatable, in ethically justifying our actions in my own mind, I thought of “consequentialism in which rightness is based on the consequences of an act rather than the act itself” (“Consequentialism,” n.d.). Our intentions were of the highest order, to save her life.

In reflection on our Hippocratic and moral obligations, I wonder if our restraint to not render aid where we knew it was warranted was ethically appropriate. Most SOF clinical providers, especially 18Ds, have experienced morally ambiguous and traumatic situations when treating combat casualties. During my experience as a SOF PA, I have placed emergency airways; have treated numerous burns, shrapnel, and traumatic brain injuries; have sewn hundreds of sutures; and have treated high-velocity missile injuries during many tours in Iraq. However, those traumatic situations were the direct result from war, not a noncombatant postnatal woman bleeding out on the floor of her mud home in the mountains of Iraq, who refused treatment from fear that her husband would kill her (because of their culture). The Hippocratic Oath states, “I will remember that I remain a member of society with special obligations to all my fellow human beings, those of sound mind and body as well as the infirm” (“Hippocratic Oath,” n.d.). I took this Oath 15 years ago when I became an 18D and again as a SOF PA. The meaning continuously resonates within me and made me take a hard look at the decision I made that day in attempting to help another human being.

Part of me wanted to push past the matriarch and the other Iraqi women to get to my patient and help her, regardless of what the second and third order effects would be. However, the patient also refused care as the interpreter tried to convince her that we were there to help her.

“Most especially must I tread with care in matters of life and death. If it is given to me to save a life, all thanks. But it may also be within my power to take a life; this awesome responsibility must be faced with great humbleness and awareness of my own frailty” (“Hippocratic Oath,” n.d.). Helping too much could have cost the woman her life at the hands of her own husband. Not helping at all could have cost the woman her life by exsanguination. Did we do enough?

The disturbed feeling of helplessness and internal conflict in treating the bleeding Iraqi woman was reduced as my attention became focused on the newborn baby. For reasons unknown to us, the matriarch would not allow 18Ds or me to see the newborn baby. My concern was when the baby would be fed, especially if the mother did not survive. Through the interpreter, I explained to the matriarch that if we could get the bleeding mother to breastfeed, this could stimulate uterine contractions and thereby decrease or possibly stop the bleeding. I kept trying to make an accurate assessment of the amount of blood loss in the blankets and on the floor from the bleeding woman, but the matriarch was adamant about keeping my men and me at bay.

The mother refused to breastfeed her newborn baby. This was a new problem to address. The quickest resolution to the problem that was easily attainable was the old world “wet nurse” concept. Through the interpreter, I asked the matriarch if there was a new mother in the village. She understood the idea and sent for her immediately. The young new mother arrived and agreed to feed the newborn baby. The internal conflict and feeling of helplessness was somewhat subdued by knowing that my 18D colleagues and I had made some impact on the immediate needs of the newborn baby. Our perseverance paid off and allowed for this simple but viable option. Although their customs initially rendered our medical training useless, our critical and creative thinking and diplomacy allowed some level of care delivery.

As a result of 11 years of continuous war, military medicine has experienced incredible technological advancements in trauma management. The constant influx of new products and advanced training has dramatically improved patient survivability from point of injury to a higher eche-

lon of medical care. However, some challenges cannot be addressed through technology or medical training alone. Sometimes, even cultural awareness and a broad spectrum of interpersonal skills are not enough. SF soldiers are our nation's military ambassadors. We are linguistically and culturally diverse in our specific areas of operation, and we have many skills sets, five primary functions, and multiple other special duties. We take pride in our cultural sensitivity and ability to work by, with, and through foreign customs, but we still face great challenges regarding gender-specific cultural restrictions.

In conclusion, retrospectively, after analyzing this scenario multiple times and conducting my own internal after action review, the only idea that continuously presents itself as a viable option is that having a female provider/medic available could have negated all of this. The difficulty is foreseeing this type of problem occurring. A female medic assigned to a company-sized SOF mission in an Arab nation could be a great benefit, not only in helping American Forces win the hearts and minds but, even more importantly, in helping save a human life.

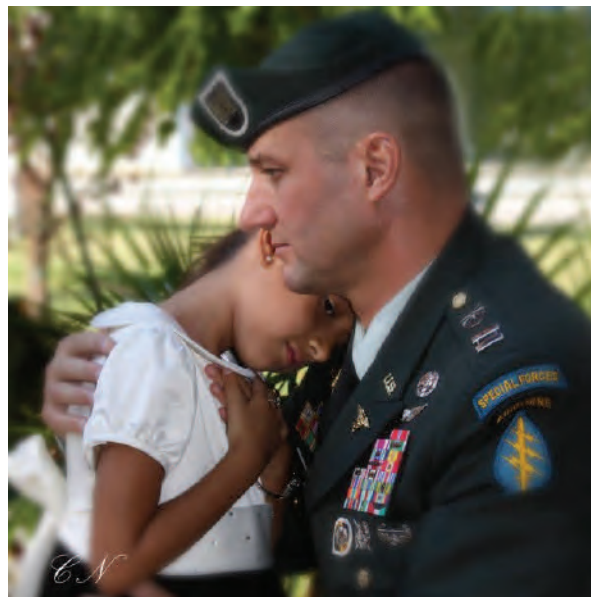
My own professional medical judgment to render aid to another human being was brought into question in this situation. Our medical judgment had to take the customs and culture of a tribal village in the Hamrin Mountains of Iraq into consideration or take the risk that our actions would result in the murder of a mother, further damaging any future relationship. The SF community has to take customs and culture into consideration, and it is not our position to question them. As military ambassadors, the SF community must work creatively within the limitations set forth by the culture in which we are immersed. Our limitations were apparent within the cultural differences that day: between what we expect to be the norms of our society and what the matriarch and Iraqi village women knew to be their own ways.

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About the Author



Mourning the loss and memory of our fallen brothers in arms, I am not holding my daughter "Jade" up; she is holding me up!

Major Larry Wyatt is a Special Operations Forces Physician Assistant with 10 years of experience. Prior to Command and General Staff College he served as the 5th Group Dive Medical Officer and is an Aeronautical Physician Assistant. He has a bachelor's degree in health science and a master's degree in physician assistant studies. Major Wyatt has more than 4 years of combat deployments into Iraq and multiple deployments throughout Central and South America as a prior Special Forces Medic (18D).

Acknowledgment

Dr. Eric Morrison—Director, National Center for Research and Practice in Military and Veteran Psychology, The Chicago School of Professional Psychology—was the editor of this article.

Struggling With Schizophrenia and Sexuality: Connecting Veterans' First Psychotic Breaks While Deployed to Issues With Sexual Intimacy

By Michael Sapiro and Jonathan H. Rousell

In working with veterans with schizophrenia at a Veterans Affairs (VA) treatment center for veterans with severe mental illnesses, we have observed salient patterns in several cases that suggest a connection between sexual experiences in veterans' narratives of their initial psychotic breaks and ongoing struggles with sex and sexuality. Veterans with schizophrenia report being both terrified of and long for intimate relationships. Those who connect their first psychotic break to sexual experiences while deployed seem to have particular difficulty integrating sex, love, and emotional intimacy into their lives following the onset of schizophrenia. Such individuals report seeing intimate contact with others as threatening, while they simultaneously desire sexual contact and meaningful romantic relationships. The purpose of this article is to encourage military and VA psychologists to consider the impact that service members' and veterans' initial psychotic breaks have on their subsequent ability to form healthy romantic relationships. We focus on the pragmatic implications that schizophrenia has for our military personnel and veterans in relation to their sexual identity formation. In addition, "intimacy" is an inherently subjective and complex term to define. For the purposes of this article, we use it to connote the physical and emotional components involved in sexual contact and relationships.

Psychotic breaks most commonly appear in men between 15 and 24 years of age and in women between 25 and 34 years of age. It is not uncommon for people to enlist in military service at 18 years of age. These years correspond with crucial developmental stages in which young adults are moving away from home for the first time to enter military service. They are exposed to a variety of stressors, including the opportunity for sexual experiences, either with other service members or in the communities surrounding their areas of training and deployment. The military serves as a culturally sanctioned institution in which young men and women gain experience in a variety of ways, including job and career training but also

in terms of socialization due to living in close quarters with their peers and bonding through the common experiences encountered in military service. Developmentally, young adults leaving home experience greater freedom to explore their sexuality. Experimenting with sexuality is a principle task for young adults, and it coincides with joining the military where others surrounding them are struggling with the same developmental tasks. Concerns about sex, sexual identity, and emotional intimacy in romantic relationships are common at this time when young people are still in a process of adult identity formation.

One veteran who developed schizophrenia during his deployment reported, "I saw three prostitutes four times [overseas], and before I knew it someone was telling me to see a psychiatrist. Then I found myself in an army mental hospital back in the U.S." He continued, "I thought that if I could get somebody to kiss me, I could get somebody to love me. So I followed this girl around [the area I was deployed], kind of like, skirt-chasing, I guess . . . but now I'm not sure if she was real or not." The experience of this first break, including hallucinations and delusions related to guilt and paranoia about his sexual behavior overseas, continue to affect his functioning and ability to incorporate sexuality into his current life.

If anxieties around sexual intimacy are not addressed in contemporary military culture, there is the possibility of increased psychological breakdowns partially resulting from intra- and interpersonal conflicts related to sex and sexuality. Whether you are forced to have a sexual experience (through military sexual trauma) or it is actively sought out because of social expectations (peer pressure to visit brothels), the emotional overwhelm brought on by the experience is possibly the trigger that tips the scale and induces the psychotic break. "Every time the boys pulled me into town and set me in front of a woman, I wanted to scream, my brain was itching and I got hot feet. I wanted to show them I was a man, but it was wrong for my belief. Now I am paying for this." On his morning runs, this vet-

eran sees devils sitting in the trees taunting him for his past behavior, which he correlates with his experiences with prostitutes overseas.

Given that psychotic breaks can occur after any type of extreme stressor, we are attempting to portray how having a break subsequent to or in response to a sexual experience while deployed is *qualitatively* different than other stressors. We consider sexuality in itself to be relevant for the veteran's identity and coherence in his or her conceptualization and treatment. The sexual nature of the trigger is not simply a part of the historical narrative but rather is seen by the veterans themselves as an important aspect in how they relate to their psychotic symptoms and their ambivalence regarding sexuality.

We have observed that the context in which the initial psychotic break takes place remains an important aspect of psychotic symptoms in military personnel and veterans with schizophrenia. In particular, anxieties related to sexual intimacy and sexual identity, which are normal for adolescents and young adults, become especially pronounced and can act as triggers in those individuals predisposed to schizophrenia. These anxieties continue to affect the content of the delusions that these individuals experience later in life. Memories of the intolerable anxiety aroused by sexual experiences just prior to the psychotic break can become fused with the eruption of psychotic symptoms during that time. These memories impact the individual's daily life decades later in the form of repetitive paranoid fantasies about this initial sexual contact. The same veteran who reported wanting to scream while in the brothels reports, "I saw so many women in different ports that I can no longer have sex with my wife. I see their faces when she leans in to kiss me. I can't help thinking about them." While he continues to take antipsychotic medication and sees a therapist weekly, these delusions impact his ability to sustain an intimate relationship with his wife.

The individual, who, for a variety of reasons, is unable to deal with overwhelming anxiety related to his or her sexual identity or experience may become fragmented and disintegrated during the crucial developmental stage at which many young people enter military service. Schizophrenia, with its neurobiological and genetic influences,

also becomes a reaction to the pain of rejection and feelings of extreme shame and guilt around sexual intimacy. The act of sex itself is scary for those who lack the coherence of a unified self. The feeling of closeness and intimacy (both emotional and physical), involved in sexual intercourse, requires a certain amount of psychological resources in order to preserve one's identity in such close contact with another.

We are not arguing that sexual experiences *cause* schizophrenia or psychotic breaks. The physical and emotional overstimulation associated with intimacy can trigger breaks or the emergence of schizophrenia as would any other intense stressor. Traumatic and psychotic responses can occur from any perceived or actual stressor. However, for schizophrenic veterans who are stuck in the delusions of their first break, sexuality issues can be obstacles for living a values-driven life. One veteran, looking back over 40 years of struggling with schizophrenia, said, "I think I would feel better about dying if I had children. I never had a wife or children." The ability to express feelings of loss in terms of what he feels his illness has cost him signified a new way of talking about sexuality and schizophrenia. This was an opportunity to move beyond the delusions and into a realistic exploration of difficult emotions. The following is another example of how a context-based and acceptance approach to understanding the role of sexuality within the context of schizophrenia can be clinically helpful.

With one veteran, weekly sessions guided by this approach have allowed for a process of integration to occur around his conflicting self-identities. These include his sense of being deformed by his schizophrenia and his desire for sexual contact and love. With him, this approach required a certain level of long-term care, extensive rapport building, and consistent weekly sessions to establish the trust necessary to discuss such intimate details. The work has drawn together his need for closeness and acceptance during his childhood and adolescence, the terrifying account of his psychotic break while deployed overseas, the content of his ongoing paranoid delusions, and his current desires for intimacy. In recent sessions, this veteran has been able to directly confront and incorporate a relationship to his schizophrenia in a way that allows him greater self-awareness. He has also attained a more

nonjudgmental attitude toward his illness that relieves some of his internalized stigma. This, in turn, allows his desire for greater intimacy to be communicated, as his associations to sex threaten him less. After one poignant session in which this veteran expressed remorse for not having engaged in sexual relationships since his break, he returned the following week asking, for the first time, to learn more about schizophrenia without his usual defensiveness, disdain, and cynicism about his illness.

This constitutes a new direction in terms of moving beyond the stigma and shame around his illness that had been intertwined with his ambivalence around his sexuality. Although there is more work to be done with this veteran and other individuals who express an overt connection between their schizophrenia and sexuality, we suggest that actively engaging in dialogue about these interrelated issues can begin a process of positive change.

Recommendations

What relationship do we want our veterans to have with their sexual memories as it impacts their current relationships? How can we help patients accept the trigger event and be able to reinvest in their sexual identity, not in spite of, but alongside living with schizophrenia? We recommend that it is increasingly important to directly address issues of sexuality among young recruits, particularly in the context of the repeal of “Don’t Ask, Don’t Tell” and with the proposed inclusion of female service members in combat operations. Military psychologists might educate military personnel to recognize the importance and relevance of these experiences in patients’ ongoing psychotic symptoms. Clinicians at the VA may also address veterans’ continued anxiety around issues of emotional and sexual intimacy and the ambivalence that arises when contemplating the prospect of entering into intimate relationships.

We have found it helpful not to hesitate or avoid talking about sexuality with those veterans who struggle with schizophrenia. Ignoring the context in which the psychotic break emerged can neglect the whole picture that the patients presents, leading to misunderstandings and misrepresentations of the client’s concerns. We can help patients name the variety of stressors that were involved

during their first break, including those mentioned above regarding the challenges of being newly deployed and enlisted. Normalizing these stressors and educating the patient about the psychological implications that schizophrenia has for developing relationships are important aspects of the treatment. Finally, we suggest helping the patients connect their fears, guilt, shame, and excitement about their initial sexual experience to their current challenges connecting intimately with others.

Through clinical observations with veterans with schizophrenia from various eras who had their first psychotic break while in the military, we have seen a striking pattern of delusional and paranoid content related to sexual experiences that accompanied the first psychotic break. By examining the experiences of veterans who have lived with schizophrenia for decades, we are hoping to improve the military’s ability to attend to these issues so that preventative measures and subsequent care can be provided with new recruits and veterans alike.

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Jonathan H. Rousell, M.A., is completing his PsyD degree at the Wright Institute. He holds a master’s degree in clinical psychology and a bachelor’s degree in East Asian studies and History. He is currently completing his 3rd year of clinical training at the VA Department, where he provides psychological services to veterans with a diverse range of presenting concerns, including combat-related PTSD, severe mental illnesses, and various psychosocial issues. His research interests include cross-cultural expressions of psychopathology, the intersections between psychology and other academic disciplines, and contemporary applications of psychodynamic theory and practice.

Leading the Way in Unchartered Waters

By Patrick H. DeLeon, Ph.D., J.D., M.P.H., and CPT David M. Barry, M.S.

Legislative advancements in the 1990s paved the way for military psychologists to obtain prescription privileges (RxP). Recent advancements in state assemblies have added momentum for civilian psychologists to also acquire similar prescription privileges. Since my “retirement” in January 2012 (<http://www.apa.org/monitor/2012/01/deleon.aspx>), I have had the privilege of serving on the faculty of the medical and nursing schools at the Uniformed Services University of the Health Sciences (USUHS), the nation’s only federal health sciences university. I believe the unique training environment and curriculum offered by the USUHS Department of Medical and Clinical Psychology can serve as a model for training future prescribing psychologists.

Prior to USUHS, I served with the late U.S. Senator Daniel K. Inouye (D-HI) for 38+ years, retiring as his Chief of Staff. One of our most interesting initiatives was the directive by the conferees on the Fiscal Year 1989 Appropriations bill that the Department of Defense (DoD) establish a “demonstration pilot training project under which military psychologists may be trained and authorized to issue appropriate psychotropic medications under certain circumstances.” Morgan Sammons and John Sexton (both U.S. Navy) were the first to graduate from DoD psychopharmacology training program at the June 17, 1994, ceremony held at Walter Reed Army Medical Center, attended by then APA President Bob Resnick. These two trailblazing colleagues unequivocally demonstrated that psychologists can learn to safely and cost-effectively provide high-quality psychopharmacological care. Several prescribing psychologists have since followed in Sammons and Sexton’s footsteps. Military psychologists should be proud of their historical accomplishment, and they should be prepared to affirmatively assist other colleagues in obtaining this important clinical responsibility within the DoD, Veterans Affairs, and throughout the civilian sector. The political climate demands it.

During the past year, prescribing psychologists have

made significant progress in two of our larger states. In New Jersey, Robert McGrath, psychology professor at Fairleigh Dickinson University and former president of Division 55 (Pharmacotherapy), reports: “The New Jersey RxP bill passed our Assembly on April 29, 2013, despite strong opposition from several of the medical societies. Though they fielded five lobbyists on the day of the vote, they had no argument against the bill other than the usual claims that the training is insufficient and patients would be ‘harmed,’ without presenting a shred of data to support their position. Next we move on to the Senate. It’s a remarkably expensive undertaking, and we can use any help we can get.”

In Illinois, Beth Rom-Rymer, President of the Illinois Psychological Association and former president of Division 55, reports: “We have had a remarkable 14 months. On March 6, 2012, the Illinois State Senate Public Health Committee passed our RxP bill out of Committee by a vote of 6–4. With our lobbyists, we made the critical decision to spend the next 12 months educating our psychologists and legislators around the state on RxP issues; training Illinois psychologists in becoming effective advocates for RxP; and reaching out to mental health associations, social service organizations, law enforcement agencies, hospitals, mental health centers, physician groups, etc. to educate about, and advocate for, RxP. We have been very fortunate to work with strongly committed and dedicated legislative chief sponsors, including the Senate President pro Tem Don Harmon. On March 12, 2013, our RxP legislation passed out of the Senate Public Health Committee by the unanimous vote of 8–0 with one abstention. On April 25th, we overwhelmingly passed out of the Senate by a vote of 37–10 with 4 abstentions. On May 7th, our Senate bill was placed in the House Executive Committee. Over the next several days, we were continually conferring with our lobbyists over the advisability of calling our bill. We made the strategic decision that we wanted to take more time to work with our Representatives so that the vote would reflect an informed understanding of the is-

sues. We will be working very closely, over the next several months, with our legislators and all of our third party groups around the state. We are very fortunate that although this legislative session has concluded on May 31st, we are in the 1st year of a 2-year sequence. We are, therefore, able to build on all of our terrific accomplishments, to date, and focus on the House. We are also in productive discussions with the Governor's Office. We are looking toward achieving passage during our next legislative session in the spring of 2014."

Legislative advancements in the past 30 years have made RxP for psychologists a reality (<http://www.apa.org/monitor/oct03/rxp.aspx>). It is essential for doctoral programs in psychology to prepare students to take advantage of these hard-earned privileges. Students and faculty around the country can look to USUHS's psychology training programs (<http://www.usuhs.edu/mps/>) as a model for this type of training.

Established in 1972, the mission of USUHS is to "train, educate and prepare uniformed services health professionals, officers and leaders to directly support the Military Health System, the National Security and National Defense Strategies of the United States, and the readiness of America's Armed Forces" (<http://www.usuhs.edu/aboutusu.html>). USUHS trains psychologists, nurses, physicians, dentists, biomedical researchers, and public health specialists in a joint environment comprised of Army, Navy, Air Force, and civilian students and faculty. As part of their core curriculum, medical students, nursing students, and graduate students take courses within their departments and with each other, acquiring and incorporating knowledge from adjacent health disciplines while enhancing their own.

Located within the School of Medicine at USUHS, the Medical and Clinical Psychology Department provides an outstanding doctoral education for tomorrow's military and civilian clinical and research psychologists. Each year, students from Army, Navy, Air Force, and civilian backgrounds are accepted into the program. Students learn how to design methodologically rigorous research projects and conduct ethical, evidence-based psychotherapy. In addition to their core research and clinical curriculum, students take pharmacology, pathophysiology, and

neuroscience, among other courses, to enhance their clinical skills and their application of psychological principles to a variety of health conditions.

Importantly, the USUHS training model enables psychology students to communicate effectively with researchers and providers across multiple health disciplines in military and civilian contexts. Throughout their training, medical and clinical psychology students focus on working with military populations and researching military-relevant health problems, such as traumatic brain injury, suicide, and substance abuse. Due to its proximity to Walter Reed National Military Medical Center, the National Institutes of Health, and the APA headquarters, students are able to interface and network with leaders in military-relevant health, research, and policy. Overall, the Department of Medical and Clinical Psychology at USUHS prepares its students to think critically about mental health concerns facing the nation's military, to work effectively in interdisciplinary environments, and to influence policy at the highest echelons of government.

Military psychology has played a critical role in the advancement of RxP for psychologists. As more and more psychologists advocate for and obtain RxP privileges, I expect military psychologists to continue to play a leading role in the field. Training psychologists alongside medical and nursing students can prepare future generations of clinicians to assume the challenges of RxP responsibilities.

Note: All uses of the pronoun "I" in this article represent the first author's perspective.

About the Authors: Patrick H. DeLeon is the 2013 recipient of the American Psychological Foundation's Gold Medal Award for Life Achievement in the Practice of Psychology. He served as APA president in 2000 and was on the APA's Council of Representatives and Board of Directors. During his 38-year tenure on the U.S. Senate staff, DeLeon helped to shape psychology's federal legislative presence. Presently, DeLeon is on the faculty of the USUHS and the University of Hawaii.

Army Captain David M. Barry is a rising 4th year Clinical Psychology Ph.D. candidate at USUHS who is currently serving as the Division 19 Student Affairs Chair.

Spotlight on Research and Development (R&D)

Krista Ratwani, Ph.D.

Welcome to the Spotlight on R&D column! This column showcases research activities and projects underway in many of the R&D Laboratories within the U.S. Department of Defense, partnering organizations, and the academic and practitioner community in military psychology. Research featured in the column includes a wide variety of studies and programs, ranging from preliminary findings on single studies to more substantive summaries of programmatic efforts on targeted research topics. Research described in the column is inclusive of all disciplines relevant to military psychology—spanning the entire spectrum of psychology, including clinical and experimental as well as basic and applied. If you would like your work to be showcased in this column, please contact Krista Ratwani at kratwani@aptima.com or 202-552-6127.

This edition of the newsletter highlights work conducted to understand the need for mental health screening as part of Operation Lone Star (OLS). OLS, conducted for 2 weeks each year, provides free medical clinics and other health-related services for all who arrive. It is conducted by the Texas Military Forces, in conjunction with the Texas Department of State Health Services and local county health services. Understanding the need for mental health screening as part of this exercise is necessary to ensure that the highest quality care is provided.

Mental Health Screening at Temporary Military Health Clinics in Low-Income Hispanic Communities Within the Rio Grande Valley of Texas

COL Robert Morecook, Ph.D.
COL James L. Greenstone, Ed.D., J.D.
LTC J. Ray Hays, Ph.D., J.D.

Research Overview

Behavioral and mental health problems are not always considered in temporary medical clinics, and instruments are not readily available to provide medical practitioners in those settings with information relevant to mental health conditions. This study provided preliminary data on the utility of the Mini Mental Screen in temporary military medical clinics in the Texas Rio Grande Valley. This instrument was administered to individuals who may have behavioral or mental health problems. In a sample of mostly Hispanic patients ($N = 75$) seen at a temporary military medical clinic, 12% were at significant risk of mental health problems, with an additional 9% at moderate risk using published cutoff scores for the risk of such problems. The results for each patient were

provided to a medical practitioner who further evaluated the risk, treated the problem, or made a referral. When asked, three of four medical practitioners found that screening data were helpful in their work with patients. One practitioner was concerned that the screening instrument might have too high a false positive rate to be useful. Cultural issues of openness about mental health and behavioral problems need to be considered in such settings.

Problem to Solve

For 2 weeks each year in the Texas Rio Grande Valley, Texas Military Forces, in conjunction with the Texas Department of State Health Services and local county health services, provide free medical clinics and other health-

related services on a walk-in basis in eight locations for all who arrive. This service is designated as Operation Lone Star (OLS), and its primary goal is to provide a full range of medical services to the indigent population on the southern border of Texas. These services include medical and behavioral health care, the latter of which has often been ignored or marginalized. OLS is also a training mission for Texas Military Forces, as it provides training in the organization and operation of medical clinics after disaster situations such as hurricanes. This exercise is one of the primary mandates for the Texas State Guard, which is one of the three branches of the Texas Military Forces.

OLS medical clinics have not always provided behavioral health or mental health services, and the actual need for such services in these clinics is not well understood. Before 2010, mental health services were sometimes available at OLS on a referral basis from clinic physicians and were occasionally used. At OLS in 2008, preliminary data were collected by the authors that suggested that mental health services were warranted and should be regularly provided as part of the general medical services offered at OLS. However, additional data were needed to further understand how the quality of the overall health services provided by OLS clinics could be improved.

Solution and Approach

As a follow-up to the work conducted in 2008, in 2010, a convenience sample of clinic patients was screened using the Modified Mini Screen (MMS), which was developed by the New York State Office of Alcoholism and Substance Abuse Services (2001). That screening was conducted to determine whether or not mental health screening and mental health services should be provided at OLS as a regular part of the clinics. All adults who arrived one afternoon and those arriving the following morning were selected and asked to answer the MMS items while they waited to see a physician or nurse practitioner. All patients were told that the results of the screen would be provided to the medical practitioner so the patient could then be provided with the best medical care during his or her visit. All but two persons completed the questionnaires and returned them to the examiner ($N = 75$). The screens were scored, and the results were placed with the

patient's medical chart generated at the clinic.

The MMS is a 22-item pencil and paper instrument that takes about 15 min to answer and screens for mental health problems in three areas: mood disorders, anxiety disorders, and psychotic disorders. The MMS is available in two languages: English and Spanish. The items are based in a straightforward manner on *Diagnostic and Statistical Manual of Mental Disorders* (4th ed., text rev.; *DSM-IV-TR*; American Psychiatric Association, 2000) diagnoses. Many patients at OLS clinics speak little or no English, and having an instrument that was available in both languages was an advantage of the MMS. In fact, 68 of the 75 patients decided to complete the Spanish version of the MMS.

The MMS was scored according to the guidelines in the manual. The manual recommends that persons receiving 6–9 points be considered as having a moderate likelihood of having a mental illness and that persons receiving a score of 10 points or higher be considered as having a high likelihood of having a mental illness. In addition, several individual items deserved special attention due to their importance. Item 4 was inspected by the behavioral health researcher and physician because it indicates the possibility of suicide. Items 14 and 15 were inspected together for the presence of posttraumatic stress disorder. Because the wording of many items is based straightforwardly on *DSM-IV-TR* diagnostic criteria, the examiner occasionally suggested additional diagnoses to the medical clinician on a rule-out basis.

There were four physicians or nurse practitioners who saw patients in the clinic after screenings were performed for various physical medical conditions. Just prior to the patient's visit to the medical clinician, the results of the each patient's MMS protocol were provided for inclusion in the diagnostic interview. The screener provided an English translation of the protocol along with mental health diagnoses for the medical clinician to consider and rule out.

Findings

Of the 75 completed forms, nine (12% of the total) had scores of 10 or greater, suggesting the patient was at high risk for a mental illness. Seven (9.3% of the total) had

scores between 6 and 9, suggesting a moderate risk that the patient suffered from a mental illness. Of the 59 protocols in the low-risk category, one scored positive on suicide risk, and five more appeared worthy of follow-up assessment because of endorsement of items suggesting the presence of mood disorders, panic attacks, or psychotic features for those patients. On 10 (13.3%) of the protocols, patients endorsed Item 4 (“In the past month, did you ever think that you would be better off dead, or wish that you were dead?”), suggesting a possible suicide risk. Altogether, 22 protocols were identified as either elevated or risky, suggesting that 29.3% of the total number of patients surveyed should receive a further mental health assessment.

Implications

At the conclusion of the study, the four medical practitioners in the clinic were interviewed regarding the utility of the MMS as a screening instrument for use during OLS. One clinician found the hypotheses generated very useful and firmly endorsed its use. Two others were positive about its usefulness. Furthermore, one of those clinicians approached the screener during the study and asked that an adolescent be given the instrument, despite the lack of normative data for adolescents, thus showing further confidence in this type of screening. The remaining clinician stated that the instrument generated many false positives and that patients routinely denied items that they had just previously endorsed.

Given the opinion of the screening held by this last clinician, the screener later discovered that the clinician was seeing more than twice as many patients per treatment day as other clinicians and thus may have not built the rapport necessary for full disclosure of mental health issues. A Hispanic health provider who was on site provided additional insight, indicating that Hispanics, especially men, are often unwilling to discuss mental health issues with health providers. Such information suggested the need for greater patience and cultural sensitivity by clinicians when interviewing for mental health problems in this population.

Results of the MMS screening procedure were shared with Brian R. Smith, M.D., M.P.H., who was both the

Incident Commander of OLS and the local Public Health Authority. On the basis of the procedure used and the results obtained, Dr. Smith expressed a clear desire that mental health screening be continued as part of OLS in future years, either using the MMS or similar mental health instrument. Further, he stated that mental health personnel should be provided for follow-up interviews to the screenings as an adjunct to medical clinicians. Including the MMS and a diagnosis of mental health during OLS is important because those presenting for physical problems may also be experiencing emotional distress as well. Additionally, there may be a relationship between the medical reason for which they presented and emotional and behavioral health issues that they also may be experiencing. Physical symptoms may be one half of the overall personal equation; mental health is the other half. Therefore, as suggested by this research, it is important that clinics assess both physical and mental health to determine the overall health of patients. The MMS provides a viable option for assessing the latter in an efficient manner while providing valuable information to health care professionals.

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Notes

Data collection occurred during Operation Lone Star

2010, an annual training exercise of the Texas Department of State Health Services, the Texas Military Forces, including the Texas State Guard, the Texas Army National Guard, and the Texas Air National Guard, along with local health groups in the Rio Grande Valley of Texas.

This research was originally published by Morecook, Greenstone, and Hays (2011) in the *International Journal of Emergency Mental Health* (complete reference provided in the reference list).

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SOCIETY FOR MILITARY PSYCHOLOGY

Division 19 of the American Psychological Association

Division 19 Annual Award Recipients



The Division 19 Awards Committee (Tonia S. Heffner, Rebecca I. Porter, and Kathryn T. Lindsey) is pleased to announce the recipients of the 2013 Division 19 Awards.

The **Arthur W. Melton Early Achievement Award**, which recognizes early career achievements in military psychology made within 5–10 years of entry into the field, has been awarded to **Dr. Greg M. Reger**.

The **Charles S. Gersoni Military Psychology Award**, which recognizes excellence in military psychology in research, service, product development, and/or administration by an individual or group, has been awarded to **Dr. Peter Hancock**.

The **John C. Flanagan Lifetime Achievement Award**, which recognizes career-long achievements in military psychology, has been awarded to **Dr. Robert Bray**.

The **Julius E. Uhlener Award**, which recognizes outstanding contributions in research on military selection and recruitment, has been awarded to **LT COL Mark Staal**.

The **Robert M. Yerkes Award**, which recognizes outstanding contributions to military psychology by a nonpsychologist, has been awarded to **LTG John F. Mulholland**.

The **Robert S. Nichols Award**, which recognizes excellence in service by uniformed clinical psychologists to military personnel and their families, has been awarded to **Dr. (LT COL) James A. Young**.

Congratulations!

Spotlight on History

Paul A. Gade, Ph.D.

Welcome to the Spotlight on History! This column showcases stories on the history of military psychology. Accounts presented in the column are inclusive of all areas of military psychology. If you would like share a historical account in this column, please contact Paul Gade, Ph.D., at paul.gade39@gmail.com.

Profiles in Military Psychology

Paul A. Gade, Ph.D.

George Washington University

I mentioned the idea of providing *Profiles* of military psychologists in the last Spotlight on History article; I am now formally initiating *Profiles in Military Psychology* as a regular feature of this column. I had hoped to have the first profile on line for this issue, but it was not to be, so the first profile will appear in the next issue of the newsletter. As part of this effort, I have invited three people to contribute *Profile* articles. What I am looking for is profiles of military psychologists and/or those who do not necessarily identify themselves as military psychologist but nonetheless have made substantial contributions to military psychology research, practice, and/or clinical practice. I would especially like to highlight the accomplishments of psychologist, members of the Society or not, who have made significant contributions to military psychology. More specifically, here is some of what I envision a *Profile* would contain:

1. A picture of the person, if possible.
2. A brief description of when, how, and to what extent the person became involved in military psychology. For example, did the person work as a military psychologist during a war? Was he or she actually in the military? Was the person involved in military psychology for a career or just for a short period of time? And so on.
3. A brief account of what, when, where, and how the

person made contributions to military psychology.

4. A description of what the military and the social-historical context were like during the time the person's contributions were made
5. A description of what short- and long-term impacts those contributions have had on military psychology, psychological science, and on the military itself.

What I do not want is for these profiles to have the look and feel of an obituary that eulogizes the individual in all aspects of his or her life, but rather these profiles should provide an objective description and appraisal of the person's important contributions to military psychology that current military psychologists should know about and appreciate. I am especially interested in the unique contributions people have made that most of us do not know about that would surprise us.

Three such individuals I have already asked people to write about are Ray Christal, Sam Stouffer (a sociologist but a major contributor to military psychology), and Meredith Crawford. I hope to have those *Profiles* in the column very soon. I welcome your ideas for *Profiles* and any *Profiles* you might want to contribute. Please contact me for more information and for help in preparing any articles you might want to submit to the Spotlight on History column.

Spotlight on Pedagogy

Steve Truhon, Ph.D.

Welcome to the Spotlight on Pedagogy! This section showcases educational activities associated with the teaching of military psychology. Activities showcased will be inclusive of all disciplines relevant to teaching of military psychology—spanning the entire spectrum of psychology, including undergraduate and graduate. If you would like share to showcase any pedagogical activities, contact Stephen Truhon, Ph.D., at truhons@apsu.edu.

Negotiation Education at West Point

Major Neil A. Hollenbeck

United States Military Academy

Soldiers negotiate. If reading that creates some cognitive dissonance for you, then you are like most people. In a typical mental model of military interactions, one receives orders from superiors, gives orders to subordinates, and—if called upon to influence the enemies of his country—applies expertise unique to the military profession. Leader education at the United States Military Academy (West Point) prepares graduates to think broadly about how they influence others—to develop and draw from a leadership repertoire that allows them to choose leader behaviors appropriate to the particular situation and those being led. But the West Point experience has not always prepared future officers to think as broadly about *whom* they must be prepared to influence.

A new officer graduates having spent years considering how she will influence the soldiers she will lead as a platoon leader. She soon discovers accomplishing the mission and taking care of soldiers requires her to spend only some of her time influencing those over whom she has formal authority. The rest of the time is spent collaborating with and influencing people over whom she has no authority: her company executive officer, the company training sergeant, other platoon leaders, people on the battalion staff, civilian range operations personnel, and so forth. When she later becomes a company executive officer or is assigned to staff, she experiences a simultaneous narrowing of the scope of her formal authority and

expansion of the network of people with whom she must cooperate to accomplish missions.

A military leader is likely to negotiate, even if usually not explicitly, in any situation where success requires the acquiescence, cooperation, or approval of those he cannot control. The wars in Afghanistan and Iraq demonstrated to the U.S. Army that leaders operating on the stability end of the spectrum of conflict—waging counterinsurgency, in those cases—must be able to negotiate effectively. An Army platoon leader negotiates combined patrol configurations and routes with an Iraqi Army counterpart who has different interests and a different perception of the battlefield situation. A company commander negotiates with village militia over the deployment of security checkpoints that affect both the security of his outpost and the village he is charged to secure. A battalion commander facilitates rapprochement and mediates between representatives of the national government and local leaders in an area the U.S. Army recently returned to government control.

As a consequence, negotiation has appeared in curricula at West Point and the U.S. Army Command and General Staff College. But we negotiate every day, even among soldiers within our own organizations. When an officer makes a request of another, refers to a published order or policy, inquires as to interests (“Can you tell me what

your commander doesn't like about this?"), or suggests creative solutions to thorny, interunit problems, he is using elements of negotiation. But he is not likely to think of the interaction as a negotiation because the connotation of the word, for most of us, calls to mind something more explicit, transactional, and adversarial. He can be more effective if his education helps him recognize the full range of interactions that involve negotiation, understand its elements, and negotiate purposively.

To that end, in 2006, West Point's Department of Behavioral Sciences and Leadership introduced an elective course called Negotiation for Leaders. In 2011, for the first time, the Department added introductory negotiation content to Military Leadership, a required course most cadets take during their junior year. In the courses, cadets are introduced to principled negotiation—an approach to negotiation developed by Harvard Professor Roger Fisher and his colleague, Dr. William Ury (Fisher & Ury, 1981/2011).

During World War II, as a young officer in the U.S. Army Air Force, Fisher served as a B-17 aircrew meteorologist and later worked in Paris on the Marshall Plan. He devoted the rest of his life to work in fields related to international conflict. In 1979, Fisher founded the Harvard Negotiation Project, which exists today within the Program on Negotiation—a university consortium among Harvard, the Massachusetts Institute of Technology, and Tufts. Principled negotiation involves clear distinction between parties' positions and interests, careful consideration of alternatives to agreement, effective communication, collaboration to create options for mutual gain, legitimization of options through use of objective criteria, appropriate delineation of commitments, and mitigation of relationship issues early but apart from substance. The theory provides practitioners with a single, seven-element framework for systematic analysis of negotiation situations (Fisher & Ertel, 1995). The framework is adapted to guide thinking in different ways during each stage of a negotiation process, from planning, to execution, to review.

Negotiation is regarded as a practical discipline and is most often taught in professional schools of law, management, and public policy. *Principled negotiation* has its

roots in the field of conflict resolution. Fisher and Ury drew on their expertise in international law and anthropology, respectively. But negotiations are human interactions, and the forces at work during negotiation belong to the behavioral sciences. Accordingly, cadets studying negotiation at West Point learn to understand themselves, as negotiators, and the dynamics of a negotiation through psychological lenses. For example, in *Negotiation for Leaders*, cadets apply concepts such as Chris Argyris's Double Loop Learning and the Ladder of Inference (Argyris, 1982). In the last few decades, negotiation phenomena have also become better understood through application of psychological concepts with implications for negotiation, including Festinger's theory of cognitive dissonance, partisan bias and cognitive distortion, and psychological safety, to name only a few (Hughes, Weiss, Kliman, & Chagnick, 2008). Negotiation is a field that sits comfortably on the boundary between theory and practice. Unlike most institutions, West Point's management, sociology, and psychology programs are housed in the same academic department. We can take advantage of the way that structure positions us to take an interdisciplinary approach to both development and application of theory.

In the past 30 years, pedagogical techniques around principled negotiation have become extremely well developed. Those techniques were brought to West Point in 2005 by adjunct Department of Behavioral Science and Leadership faculty member, Jeff Weiss (J.D.). Weiss, cofounder of the negotiation consulting firm Vantage Partners LLC, first worked on the Harvard Negotiation Project in 1988 and has taught and consulted in the field since that time. Motivated to serve in the post-9/11 world, he found a mission in volunteering to help develop and teach the West Point curriculum. Within the Department and with support from West Point's Network Science Center, the West Point Leadership Center, and the Army Research Institute, the effort has flourished.

In 2009, as a result of feedback from deployed graduates who had taken Negotiation for Leaders, the Department established the West Point Negotiation Project (WPNP)—a faculty effort to enhance the ability of military leaders to negotiate by more deeply and broadly engaging cadets, providing operational units access to negotiation training and tools, and serving as a catalyst for efforts to improve

negotiation training across the U.S. military. The WPNP has taken cadets far beyond the classroom, allowing them to access negotiation experts, attend conferences, conduct research, participate in summer internships, and assist with training seminars for military personnel, including members of provincial reconstruction teams mobilizing for deployment to Afghanistan, Navy SEALs, Army Special Forces, and Army civil affairs soldiers.

In 2010, Jeff Weiss and Major Aram Donigian co-authored the *Harvard Business Review* article “Extreme Negotiations” (with Jonathan Hughes) and received the Apgar Award for Excellence in Teaching for their creation of a role-playing, multiparty negotiation simulation that still serves as the capstone exercise for cadets enrolled in Negotiation for Leaders. One year later, Major Donigian deployed to Afghanistan as part of the International Security Assistance Force anti-corruption task force, where he has put negotiation skills to work in support of the task force mission. In that role, Major Donigian received assistance from Jeff Weiss, West Point cadets, and other WPNP collaborators.

Since 2010, the WPNP has hosted the annual West Point Negotiation Workshop, bringing cadets from West Point, the Army Reserve Officer Training Corps, Canadian Royal Military Academy, and other U.S. military service academies together with negotiation experts from military, law-enforcement, nonprofit, and academic domains. The workshop is primarily an educational seminar, with blocks of interactive instruction and hands on, role-playing exercises. One of the most powerful portions of the workshop is a panel discussion where cadets hear from recently graduated junior officers who have used their negotiation skills while deployed.

The workshop also serves as a military negotiation colloquium. Following the 2012 workshop, participants from the array of institutions concerned with improving the negotiation skills of military leaders remained at West Point to share ideas about better-integrating negotiation training into the U.S. Army’s officer and noncommissioned officer professional development system. The round table discussion, hosted by the WPNP, included attendees from the U.S. Army War College, Command and General Staff College, Training and Doctrine Com-

mand Culture Center, Army Research Institute, Air Force Negotiation Center for Excellence, U.S. Army Logistics University, Seattle University, and Tufts University.

Our senior military leaders are now making important decisions about force structure and training as we posture for the future. We do not know what missions we will be called upon to accomplish or, when called upon, what resources will be at our disposal. We know that we will do well to make ourselves ready for challenge in conditions of uncertainty by investing heavily in leader development. We can be more powerful, as an organization, with leaders at all levels who are capable of negotiating effectively in any context. Those leaders would also make us stronger and healthier internally. West Point is providing one example of how we can teach negotiation. To have the greatest impact, negotiation education and training should be embedded at all levels of our officer and noncommissioned officer leader development systems, so that leaders’ understanding and abilities can grow as they grow.

About the author: Major Neil A. Hollenbeck is an instructor in the Department of Behavioral Sciences and Leadership at the United States Military Academy, where he is also codirector of the West Point Negotiation Project. Before his current assignment, he served as an infantry platoon leader and company commander in the 82nd Airborne and 3rd Infantry Divisions, leading soldiers in Iraq during four separate deployments between 2004 and 2010. He earned an M.B.A. at Duke University and a B.S. at the United States Military Academy.

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Continuing Education Committee Report

Freddy Paniagua, Ph.D., and Carrie H. Kennedy, Ph.D.

Continuing Education Committee (in alphabetical order): **Carrie H. Kennedy** and **Freddy Paniagua**

The Division Continuing Education (CE) Committee was created in the summer of 2010. This committee was originally chaired by Brad Johnson, Ph.D.; other members included John Ashburn, W. Brad Johnson, Carrie H. Kennedy, Freddy Paniagua, Randy Reese, and Morgan Sammons. The committee is currently co-chaired by Drs. Kennedy and Paniagua and is actively recruiting for new members. Interested individuals should contact Dr. Paniagua (faguapan@aol.com) or Dr. Kennedy (carriehillkennedy@gmail.com).

The main objectives of the CE Committee of Division 19 include the following:

1. The development of high-quality CE opportunities in association with the American Psychological Association (APA) Convention. The CE Committee has met this objective annually, including the APA Office of CE in Psychology approval of a preconvention workshop scheduled at the 2013 APA Convention in Honolulu. The title of this workshop is "Virtual Reality and Biofeedback to Improve Behavioral Health Clinical Research," and it will be presented by LTC Melba C. Stetz, Ph.D., Raymond A. Folen, Ph.D., Chelsea L. Sousa, M.S., and Chris M. Enomoto, M.B.A. This preconvention workshop will be held on Tuesday, July 30, in Honolulu, Hawaii.

2. Develop high-quality CE opportunities in association with APA-accredited providers of CE. This involves the development of partnership with existing providers of

professional CE programs. The CE Committee encourages members of Division 19 to provide ideas concerning ways to implement this objective.

3. Facilitate the development of CE opportunities for psychologists who are having problems fulfilling CE requirements for the renewal of their licenses because of sequestration and severe restrictions on military psychologists traveling to conferences. The problem of obtaining timely and relevant continuing education in the military is no longer faced only by overseas or deployed psychologists; it is adversely affecting all clinical military psychologists. In order to facilitate the implementation of this objective, the CE committee has created a mechanism for military psychologists who have expertise in various topics to be able to offer CE programs at their commands in conjunction with Division 19. A new section related to proposing CE programs has been included on the Division 19 website detailing the mechanism for the submission of CE programs by military psychologists. The intention is to provide this service free of charge for military psychologists. All CE proposals must include the following: (1) the Division 19 Application Form, (2) the Division 19 Program Evaluation Form, (3) the Division 19 Documentation of Attendance Form, and (4) the speaker's curriculum vitae. These forms and the process to submit CE programs associated with this objective are available at <http://www.apadivisions.org/division-19/students-careers/continuing-education/index.aspx>.

Early Career Psychologists Committee Report

Jessica Gallus, Ph.D.

Early Career Psychologists Committee (in alphabetical order): Arwen DeCostanza, Dave England, Jessica Gallus, Rhett Graves, Kristen Kochanski, Greg Matos, and Krista Ratwani

The Early Career Psychologists Committee discusses and identifies activities, projects, and programs that promote the engagement and participation of early career professionals.

As the annual American Psychological Association (APA) convention gets closer, we wanted to let you know about a number of opportunities for Division 19 early career psychologists (ECPs) to engage with peers and the broader Division 19 community. Below are a few of the applicable Division 19 events that will be hosted at the APA convention:

- This year, we will have a mentor/mentee program geared toward ECPs and graduate students. As part of this program, ECPs will have the opportunity to provide mentorship to graduate students and will also be able to meet with more senior military psychologists as part of a mentoring session.
- Mentors/mentees will be available for ECPs interested in a
 - ◆ Clinical track (August 1st, 3 p.m.–4 p.m.) or
 - ◆ Research track (August 1st, 4 p.m.–5 p.m.).

- If you are interested in being a mentor or mentee, please contact Dr. Ann Landes at div19prog@gmail.com.

- ECPs will also have the chance to meet and mingle with Division 19 presenters and authors at the Hospitality Suite After Party on August 1st from 5 p.m. to 7 p.m.

For more details on these or other Division 19 ECP-related activities, please contact us! We would like your input, so please do not hesitate to contact us with ideas for the APA convention or to improve your overall experience as an ECP.

Dr. Jessica Gallus
Dr. Rhett Graves
U.S. Army Research Institute
E-mail: jessica.gallus@gmail.com

Dr. Krista Ratwani
Aptima, Inc.
1726 M. Street, NW (Suite 900)
Washington, DC 20036
E-mail: kratwani@aptima.com

Graduate Students Committee Report

David Barry and Jennifer Barry

Division 19 Student Members,

We hope you are enjoying your summer thus far! We have been working hard to bring you resources and opportunities to enhance your interests and professional development within the field of military psychology. We have lots of wonderful news to share with you, so grab a frosty beverage and pull up a lawn chair . . .

Recap—Midyear Meeting

For those of you who are relatively unfamiliar with our governance process, the Division 19 Executive Committee (i.e., EXCOM) meets twice each year, once at the American Psychological Association (APA) Convention and once at the midyear meeting, which takes place during the spring of each year. In February, the Human Resources Research Organization hosted the midyear meeting at their beautiful office suite overlooking the Potomac River in downtown Alexandria, Virginia. The minutes of that meeting (and all meetings, for that matter) are recorded and published in this newsletter, and we encourage you all to read them and stay informed of potential changes and discussions regarding the future of our division! Because these records are so meticulously kept, we would like to quickly summarize what we were able to accomplish:

Student Travel Award

For *this year only*, the Student Travel Award amount was increased from \$750 to \$1,000 to offset the higher cost of travel to and from Hawaii.

In order to recognize all of the ways that student members can demonstrate excellence, we have expanded the award's eligibility requirements. *Effective Spring 2014, Student Travel Awards to APA Conventions will be made available to all Division 19 student members who demonstrate outstanding commitment to advancing the science*

and practice of military psychology. Previously, the award was only available to students who were presenting posters at the APA Convention. As such, Division 19 will now offer the Student Travel Award to students who demonstrate military psychology excellence in one or more of the following domains: clinical work, leadership, research, and volunteer/service activities. The next round of Student Travel Award applications will be due on April 30, 2014.

The 2014 award amount will revert to \$750 in order to help fund travel to the APA Convention in Washington, DC.

Student Research Grant

Student Research Grant applications will NOW BE DUE on October 31st of each year in order to help fund your projects earlier and better accommodate students' schedules (i.e., not have grants due during traditional Finals periods). *This means that the next deadline for Student Research Grants is October 31, 2013!*

The Student Research Grant amount was increased to \$2,250, with the additional \$750 dedicated for travel funds to APA Conventions (if needed). Previously, students who were awarded the research grants had to apply separately for student travel awards. We hope that the additional funds will increase the number of applicants and will help student research grant recipients attend APA Conventions.

“Division 19 Student Chapter Program” Task Force

As many of you recall, previous issues of this newsletter highlighted *military psychology clubs and interest groups that have been formed at different universities* by Division 19 student members (e.g., the Military Psychology Student Association at The Chicago School of Professional Psychology [Washington, DC] and the Military Psychology Interest Group at the American School of Professional Psychology [Washington, DC]). Based on our survey

results, it was apparent that many of you would like to assume a leadership role for military psychology at your schools. As such, we requested and were approved to *establish a task force to implement a nationwide Division 19 Student Chapter program* similar to student chapter programs in Division 17 and Division 40.

The mission of the task force is to *develop and implement a sustainable Military Psychology Student Chapter Program for graduate and undergraduate psychology programs throughout the country in order to support the mission of Division 19 and the field of military psychology.*

The task force consists of the following members: COL Rebecca Porter (Division 19 President), CPT David Barry (Uniformed Services University, MD), Jennifer Barry (American School of Professional Psychology, Washington, DC), Angela Legner (The Chicago School of Professional Psychology, Washington, DC), Jessica Modrell (George Fox University, OR), and Whitney Bliss (Palo Alto University, CA). The task force was assembled to consider a wide-range of student issues at various levels of graduate and undergraduate training. *We value everyone's input, so please e-mail us with your questions, ideas, and concerns!*

We plan to present the task force's recommendations at the 2013 APA Convention. In the meantime, be sure you have joined the Student Listserv (see below) so you can receive updates on the task force's progress.

Division 19 Student Listserv

The EXCOM approved the *creation of a Division 19 Student Member-only listserv* in order to facilitate student-relevant communication between its members. We did our best to migrate all student member e-mails to the listserv automatically, but we know there are some e-mails that have yet to be added.

If you periodically receive e-mails from [DIV19STUDENT], then you are on the list. If not, please e-mail us at div19studentrep@gmail.com to be added to the student listserv.

Dissertation Recruitment

There are now *formal methods to systematically disseminate your dissertation recruitment requests* via the Division 19 modes of communication. Please e-mail us for more information.

Website Updates

With the hard work and terrific assistance of Dr. Arwen DeCostanza, the Division 19 webpage's Student Section has been updated and is constantly improving! Please check the webpage periodically for updates, especially with the upcoming student awards. We are currently working on *adding/updating information that will help prepare you for military-relevant internship applications.*

Also, if you are looking for outstanding clinical training resources for service member populations and their families, we encourage you to go to <http://connected.giveanhour.org/> and sign up for their *free* training account. Go to "Groups" and join the "Got Your 6-Student Training Ground" group. You will now have access to a wealth of up-to-date information and knowledge assembled from multiple resources across the web.

As always, don't forget to *join us* on the "APA Division 19–Military Psychology" *Facebook Group* page!

APA Convention

Next up, we want to thank all of the student members who are attending the 2013 APA Convention in Hawaii. For those who are coming, be sure to come to the Division 19 Hospitality Suite for the following student-relevant events:

1. Thursday, August 1
 - a. Mentoring Café: Meet other researchers and clinicians in the field of military psychology for mentorship and networking opportunities!
 - b. Time: 3:00–5:00 p.m.
2. Saturday, August 3
 - a. Workshop: Preparing for Military-Relevant Internship/Postdoctoral

Applications and Interviews

b. Time: 3:00–4:00 p.m.

3. Saturday, August 3

- a. Workshop: Combat Psychology, with featured speaker Major Brien O’Leary, Tripler Army Medical Center Clinical Psychology Internship Program Director and former 173rd Airborne Brigade Psychologist
- b. Time: 4:00–5:30 p.m.

We want to especially thank Dr. Ann Landes for all of her hard work toward the outstanding APA 2013 programming and to Dr. Deanna Beech for assisting student members with lodging in Hawaii!

2013 Division 19 Student Award Recipients

We would also like to thank all the student members who applied to the 2013 Division 19 student awards. There were more applications this year than ever before, which is a testament to the quality of our growing student membership. We would like to recognize the following Division 19 student award recipients:

\$1,000 Student Travel Award

- Lauren F. Albinson, *Forest Institute of Professional Psychology*
- Ashley M. Griffith, *Iowa State University*
- Stephanie E. V. Brown, *Seattle Pacific University*
- Catherine M. Caska, *University of Utah*
- Matthew S. Jackson, *Ball State University*
- Kathryn J. Holloway, *California School of Professional Psychology*
- Wendy J. Rasmussen, *University of Iowa*
- Ryan N. Reed, *University of South Dakota*
- Nehad K. Sandozi, *Ball State University*
- Michael P. Sapiro, *JFK University*

\$1,500 Student Research Grant

- David E. Scheinfeld, *University of Texas*
- Christian G. Somoza, *University of Colorado–Denver*

Congrats and GREAT JOB!!!

Closing Notes

We want everyone to know and appreciate what amazing opportunities there are for student members to become more involved in our division. We are incredibly lucky to have an EXCOM that truly values and supports our student members’ opinions, goals, and overall experience. *There are leadership positions, funding opportunities, mentorship experiences, and more accessible information and professional development resources on the horizon.* More importantly, however, are the lasting relationships you will build with other students and members of the division. We are hoping to build a community network of student members that grows into a robust, career-long affiliation with Division 19. Please send us ideas and suggestions on ways we can make your Division 19 student membership more rewarding and beneficial.

On a final note, we are looking forward to a great time with many of you in Hawaii! To those who cannot make it, you will be with us in spirit, and we hope to see you in Washington, DC, for the 2014 APA Convention. Until next time, ALOHA!

Sincerely,



David Barry
Division 19 Student Affairs Chair
div19studentrep@gmail.com



Jennifer Barry
Division 19 Student Affairs Chair-
Select
div19studentrep@gmail.com

American Psychological Association (APA) Program Chair Report

Ann Landes, Ph.D., Division 19 Program Chair

DIVISION 19 PLANS FOR HAWAII 2013

Another exciting convention will soon be underway, and I do hope that you will be attending! We have a wonderful lineup of presentations, posters, meetings, and networking opportunities. Though it may be difficult to maintain your focus in Hawaii, I am confident that you will want to attend several, if not all, of the events described on the following pages.

Working closely with Division 19 Student Representatives, we will be offering for the first time the “Mentoring Café”: Session 1 for clinical and Session 2 for research. A session is also scheduled for preparing for internship and postdoctoral applications and interviews. Both events, as well as the 2nd annual after party and a workshop to be presented by Major O’Leary on Combat Psychology, are scheduled in the hospitality suite (specific location not yet determined by the American Psychological Association [APA]). And of course, we encourage you to attend the excellent pre-convention workshop, business meeting, presidential address, and social hour. Oh! And how could I forget: There is a group luau planned (see details below).

To increase a sense of community within our membership and bolster its presence at the convention, we have purchased ribbons that identify our Division. These will be made available in the hospitality suite, Division 19 meetings, and social hour. Let’s wear them with pride!

I look forward to seeing everyone and thank you again for making my work with Division 19 so truly rewarding. I will e-mail more details as they come along regarding the hospitality suite location and any changes (if any) to the programming.

If you have any questions, I can be reached by e-mail at div19prog@gmail.com.

Warmly,

Ann Landes, Ph.D.

Division 19 Program Chair

DIVISION 19—SOCIETY FOR MILITARY PSYCHOLOGY: APA 2013 SUMMARY OF PROGRAMMING AND HOSPITALITY SUITE EVENTS

Pre-convention Workshop: Virtual Reality and Biofeedback to Improve Behavioral Health Clinical Research Protocols

Tuesday, July 30, 2013

8:00 a.m.–11:50 a.m.

Level: Intermediate

Continuing Education Credits: 4

Enrollment Limit: 25

Description

This workshop is part of our special featured theme track dedicated to Technology in Psychology Practice, Education, Science, and Research.

Psychologists must not only employ the right psychological technique but also the right technology to help address psychological issues with their patients. In this intermediate workshop, the presenters will discuss with the audience experiences they have encountered with technology while running clinical and research protocols with the military.

Learning Objectives

1. Highlight the history of psychological research studies that incorporate technology,
2. Identify the technology (hardware systems and soft-

ware programs) that is used the most during psychological sessions,

3. Discuss the advantages and disadvantages of the integration of technology in psychological research and clinical sessions, and
4. Review ethical considerations and potential adverse events related to this modality (e.g., cybersickness).

Instructors:

Melba C. Stetz, Ph.D., Raymond A. Folen, Ph.D., Chelsea L. Sousa, M.S., and Chris M. Enomoto, M.B.A., Tripler Army Medical Center, Honolulu, Hawaii

Convention Programming

Symposium: Novel Psychotherapeutic Approaches for Treatment of Military-Related Psychological Trauma

7/31, Wednesday, 9:00 a.m.–9:50 a.m.

Convention Center, Room 321A

Symposium: Veterans' Use of Mental Health Care—Mechanisms of and Barriers to Utilization

7/31, Wednesday, 10:00 a.m.–10:50 a.m.

Convention Center, Room 303B

Symposium: Improving Community-Based Service Systems Structures to Reintegrate Returning Wounded Warriors

7/31, Wednesday, 11:00 a.m.–12:50 p.m.

Convention Center, Room 302A

Executive Committee Meeting

8/1, Thursday, 8:00 a.m.–9:50 a.m.

Hilton Hawaiian Village Beach Resort, Kahili Suite II

Poster Session I

8/1, Thursday, 10:00 a.m.–10:50 a.m.

Convention Center, Kamehameha Exhibit Hall

Poster Session II

8/1, Thursday, 11:00 a.m.–11:50 a.m.

Convention Center, Kamehameha Exhibit Hall

Mentoring Café—Open Only to Division 19 Members

8/1, Thursday, 3 p.m.–5 p.m.

3 p.m.–4 p.m. Clinical Track

4 p.m.–5 p.m. Research Track

Hospitality Suite

After Party—Meet the Presenters of Division 19 Programming for APA 2013

8/1, Thursday, 5 p.m.–7 p.m.

Hospitality Suite

Symposium: Deployment Stress and Military Families' Health—A Focus on Health-Risk Behaviors and Physiology

8/2, Friday, 8:00 a.m.–9:50 a.m.

Convention Center, Room 303A

Symposium: Cognitive and Motivational Measures for Predicting Soldier Performance

8/2, Friday, 9:00 a.m.–9:50 a.m.

Convention Center, Room 322B

Paper Session: Supporting Our Military Families and Children: Psychology's Role During Reintegration

8/2, Friday, 1:00 p.m.–1:50 p.m.

Convention Center, Room 307A

Business Meeting

8/2, Friday, 2:00 p.m.–2:50 p.m.

Hilton Hawaiian Village Beach Resort, South Pacific Ballroom I

Presidential Address

8/2, Friday, 3:00 p.m.–3:50 p.m.

Hilton Hawaiian Village Beach Resort, South Pacific Ballroom I

Division 19 Social Hour

8/2, Friday, 4:00 p.m.–5:50 p.m.

Hilton Hawaiian Village Beach Resort, South Pacific Ballroom I

Luau With Division 19 Members—Reservations Needed

8/2, Friday, Following the Social Hour

Paper Session: Differences in Self-Learning Strategies During Career Progression Among Army Noncommissioned Officers

8/3, Saturday, 8:00 a.m.–8:50 a.m.

Convention Center, Room 308B

Symposium: Apps, Telehealth, Virtual Reality—Addressing Mental Health Needs of Service Women and Men and Veterans

8/3, Saturday, 10:00 a.m.–11:50 a.m.

Convention Center, Room 304B

Hospitality Suite Workshop: Preparing for Internship and Postdoctoral Applications and Interviews—Open Only to Division 19 Members

8/3, Saturday, 3 p.m.–4 p.m.

Hospitality Suite

Hospitality Suite Workshop: Combat Psychology

Speaker: Major O’Leary

8/3, Saturday, 4 p.m.–5:30 p.m.

Hospitality Suite

Symposium: Status of Behavioral Health Among Active Duty Personnel and the Expanding Network of Supports That Serve Them

8/4, Sunday, 9:00 a.m.–9:50 a.m.

Convention Center, Room 302A

Symposium: Fighting Stigma on the Front Lines—Development of a Group-Based Intervention for Enlisted Leadership to Increase Treatment Seeking for Posttraumatic Stress Disorder (PTSD) Among Soldiers

8/4, Sunday, 10:00 a.m.–10:50 a.m.

Convention Center, Room 303B

Symposium: Addressing Clinical and Policy Issues Related to Lesbian, Gay, Bisexual, and Transgender (LGBT) Service Members

8/4, Sunday, 11:00 a.m.–12:50 p.m.

Convention Center, Room 302B



SOCIETY FOR MILITARY PSYCHOLOGY

Division 19 of the American Psychological Association

Division 19 Annual Awards



The Society for Military Psychology is soliciting nominations for (1) The **Arthur W. Melton Early Achievement Award**, which recognizes early career achievements in military psychology made within 5–10 years of entry into the field; (2) The **Charles S. Gersoni Military Psychology Award**, which recognizes excellence in military psychology in the areas of research, service, product development, and/or administration made by an individual and/or group; (3) The **John C. Flanagan Lifetime Achievement Award**, which recognizes career-long achievements in military psychology; (4) The **Robert S. Nichols Award**, which recognizes excellence in service by uniformed clinical psychologists to military personnel and their families; (5) The **Julius E. Uhlaner Award**, which recognizes outstanding contributions in research on military selection and recruitment; and (6) The **Robert M. Yerkes Award**, which recognizes outstanding contributions to military psychology by a nonpsychologist. Achievements in any of these areas must clearly reflect advancement of the profession of military psychology, improved effectiveness of military psychology systems, or service on behalf of the welfare of military personnel and their families. A nomination package must include (1) a nomination letter describing the qualification of the nominee in no more than 2–3 pages, and (2) a current resume/vita of the nominee. Submit nominations to Rebecca I. Porter (rebecca.porter@amedd.army.mil) in PDF format no later than **May 30, 2014, midnight (EST)**. Please list the name of the nominee and the award on the subject line of your e-mail (e.g., Jane Smith, Robert M. Yerkes Award). Winners will be notified prior to June 30, 2014, and awards will be presented at the Division 19 Business Meeting at the 2014 APA Convention.

We look forward to your submissions!

Announcements

Eric Surface, Ph.D.

The American Psychological Association (APA) Invites Applications for a New Position: *Director of Integrated Health Care*

As part of APA's strategic plan, a new position as Director of Integrated Health Care has been created to develop and implement an overall framework and strategy to promote the engagement of psychologists in providing integrated mental and behavioral health services in primary care and other health care settings. The individual will apply knowledge gained from the research literature, professional networking, and program site visits to identify effective service delivery models for psychologists in integrated health care. Attention will be directed to the wide range in employment status, services rendered, work settings, and funding streams. This position will involve ongoing outreach to primary care and related health organizations, policymakers, and other stakeholders to enhance collaboration and partnerships on programmatic and policy initiatives related to integrated health care. The individual will assist in the coordination of APA's new Center for Psychology and Health and serve as a point of contact for APA's work with other organizations on matters related to integrated health care. The individual will also contribute to the development of resource materials, member surveys of psychologist practitioners, and a database of psychologists working in integrated care. This new position will be administratively housed in APA's Executive Office in Washington, DC, and will also work closely with senior staff in APA's Education, Practice, Public Interest, and Science Directorates and other offices, and with resource/consultation groups of APA member experts.

CRITERIA: The qualifications for this position include a doctorate in psychology, state licensure, and at least 5 years of postdoctoral clinical experience in integrated health care. Other requirements include the following: experience networking and collaborating with other health professions; excellent interpersonal, oral, and writ-

ten communication skills; and knowledge of Microsoft Word, Excel, PowerPoint, and Outlook. Familiarity with the work of APA and other health associations is preferred. Qualified candidates should apply online through APA's Candidate Space portal. Candidates must complete the online application and attach a resume and cover letter for the position. Incomplete applications will not be considered. *APA is an equal employment opportunity/affirmative action employer, M/F/V/DV.*

Now Enrolling: Military Continuing Education Course Evaluation

University of Southern California's Center for Innovation and Research on Veterans and Military Families is conducting a study that evaluates the effectiveness of online continuing education courses to increase knowledge, skill, and confidence related to working with military populations. As a study participant, you will be eligible to receive our online continuing education courses **free of charge**, up to **\$90 in gift cards**, and a **certificate of completion** for each course.

The courses include the following:

1. Military Culture;
2. Clinical Practice With Service Members, Veterans, and Military Families; and
3. Motivational Interviewing With Military Populations.

Licensed behavioral health providers who are accepting new clients are eligible to participate in the study and to receive the courses. Participants must be able to complete the courses in a 1-month period. For more information, please visit <http://cir.usc.edu/cestudy> or contact **Dr. Sherrie Wilcox** at SLWilcox@USC.edu. To participate in the study, visit https://uscsocialwork.qualtrics.com/SE/?SID=SV_2h6YtZKXpJoAuxf.

Announcing Division 47, Section 2, Performance Psychology

In March 2013, Division 47 established Section 2, Performance Psychology. Its purpose is to bring together those interested in research, teaching, and practice related to the psychological aspects of optimal performance. This includes, but is not limited to, the psychological aspects of performers such as athletes, performing artists, business leaders, and professionals in high risk occupations. Members of this community of psychology professionals will work toward developing collective definitions and models regarding training and practice in performance psychology while developing the field more broadly and intentionally.

An initial Steering Committee for the Section has been established by three Division 47 members: Dr. Kate Hays (Chair), Dr. Elena Estanol, and Mr. Eric Bean. They invite you to become part of this new community by first joining Division 47 (<http://www.apadivisions.org/division-47/membership>) and then becoming a member of the Performance Psychology section. By joining, not only will you receive the Division's journal—*Sport, Exercise, and Performance Psychology*—but you will be able to be an active participant in the Performance Psychology listserv, which is an excellent forum for sharing ideas with like-minded professionals and helping to define this emerging area. For more information on the Section, please feel free to contact Dr. Hays (drhays@theperformingedge.com) or the Section's listserv manager, Dr. Donald Knight (dknigh1@gmail.com). We look forward to having you become part of the conversation.

Request for Participants: Male Gender Role Stressor Inventory Study

LT A. Graham Sterling is recruiting military and civilian men 18 years of age and older for his dissertation research study. Participation should take just 25–30 min to share your experience of stress as a man; please follow the link for a more detailed description of the survey (<http://edu.surveymz.com/s3/1147247/Study-on-Stress-and-Men>). Participants can elect to participate in a very brief (less than 5-min) follow-up survey. The title of this

study is Psychometric Properties and Factor Structure of the Male Gender Role Stressor Inventory. The purpose of this research is to validate a questionnaire, the Male Gender Role Stress Inventory, which asks questions about the stresses experienced by men in the military and in the civilian sector. LT A. Graham Sterling is the principal investigator of this study and is a clinical psychology Ph.D. student at the Uniformed Services University of the Health Sciences (USUHS). He is conducting this research under the supervision of his academic advisor, Dr. Marjan Holloway, a licensed clinical psychologist and tenured professor at the USUHS. The USUHS Internal Review Board, which may be contacted at (301) 295-3303, approved this study on April 12, 2013 (Project Number 385728-4). Email LT A. Graham Sterling (Arlie.Sterling@usuhs.edu) if you have questions about the study or about participating.

Request for Proposals: The Scott and Paul Pearsall Scholarship

The American Psychological Foundation (APF) has announced that applications are open for the Scott and Paul Pearsall Scholarship. The Scott and Paul Pearsall Scholarship supports graduate work that seeks to increase the public's understanding of the psychological pain and stigma experienced by adults who live with physical disabilities, such as cerebral palsy. Proposals with a clear plan for disseminating findings through media are given preference.

APF supports original, innovative research and projects. Although APF favors unique, independent work, the Foundation does fund derivative projects that are part of larger studies.

The scholarships goals are as follows: (1) encourages talented students to orient their careers to understanding the psychological effect of stigma on people with disabilities; (2) develops strategies to improve the public's understanding of the psychological pain and stigma felt by individuals with physical disability in order to reduce harmful misconceptions; and (3) encourages dissemination of findings to the public, expressly through media. The award amount is one \$10,000 scholarship.

APF does not allow institutional indirect costs or overhead costs. Applicants may use grant monies for direct adminis-

trative costs of their proposed project. More information is available online. Submit a completed application online at <http://forms.apa.org/apf/grants/> by **October 1, 2013**. *Please be advised that APF does not provide feedback to applicants on their proposals.* Please contact Samantha Edington, Senior Program Coordinator, at sedington@apa.org with questions.

Request for Participants: Male Military Spouses: The Impact of Military Involvement, Gender Roles, and Coping Style on Deployment-Related Distress

Researchers at University of La Verne are requesting participants in a study of male military spouses. Sandra Diaz, a doctoral candidate in the Department of Psychology, under the supervision of Dr. Rocio Rosales Meza, is conducting the study. The purpose of this dissertation study is to investigate male spouse's distress in response to the deployment of their military spouse. The questions included within this survey will ask the military spouse to provide his opinions, feelings, and experiences. There is minimal risk to those participating. The study is looking for **MALE** participants, 18 years of age and older, who are spouses of female service members. *For the purposes of this study, spouse can refer to those who are legally married or to couples who are living together, and participants may be civilian or in the military.* This study is not open to female participants. The study should take about 20–30 min. Participants will have the opportunity to be entered in a raffle to win 1 of 20 \$10 Visa gift cards. This study was approved by the University of La Verne Institutional Review Board on December 23, 2012. A link to the survey is provided at the end of this announcement. Please feel free to invite people you know who may fit the criteria for this study by passing along the link. Thank you very much for your time and consideration. If you have any questions, please feel free to con-

tact the principal investigator, Sandra Diaz, at (909) 267-5238 (E-mail: sandra.perez@laverne.edu) or the faculty advisor, Dr. Rocio Rosales Meza, at (909) 593-3511, Extension 4043 (E-mail: rrosales@laverne.edu). Follow this link to the Survey: https://lavernepsych.us.qualtrics.com/SE/?SID=SV_54pYMYRsGpDMF0h.

Request for Participants: Study Exploring How Transgender-Identified Service Members Negotiate Their Military Service and Identity Process

L. R. Eleazer, University of Louisville, is conducting a research project that explores how transgender-identified service members (including, but not limited to, transmen, transwomen, and genderqueer individuals) negotiate their military service and identity process. To qualify for the study, the participant must be over 18 years of age; be actively serving in any branch or component of the U.S. military; and identify as transgender, gender nonconforming, genderqueer, transsexual, and so forth. Participation in this study consists of taking part in a recorded telephone interview that will last approximately 1–1.50 hr as well as a demographic questionnaire. All interviewers are transgender, genderqueer, or competent trained allies. Interview calls will come from a private office on the University of Louisville campus. Because of the sensitive nature of this research topic, we are taking additional security measures. Researchers are committed to protecting the privacy and anonymity of participants. If you are interested in being a part of this study, have any questions, or have specific concerns about confidentiality, please contact L. R. Eleazer or Dr. Stephanie Budge at transmilitaryresearch@gmail.com or by phone at (502) 852-0627. For your privacy, all e-mail traffic should be transmitted via a civilian e-mail address that does not disclose your name or affiliation with any school, business, or agency.

Division 19 Membership Application Form

Name: _____

Mailing address: _____

City, state, postal code, country: _____

Work phone: _____ Home phone: _____

Fax: _____ Email address: _____

APA membership number/category (if applicable): _____

Member Associate Fellow Life Status

Student Affiliate International Affiliate No Membership in APA

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INSTRUCTIONS FOR CONTRIBUTORS TO *THE MILITARY PSYCHOLOGIST* NEWSLETTER

Please read carefully before sending a submission.

The Military Psychologist encourages submissions 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 submissions 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 **February 1**), Summer (submission deadline **June 1**), and Fall (submission deadline **October 1**).

Preparation and Submission of Feature Articles and Spotlight Contributions. To inquire about potential contributions, authors may correspond via e-mail with the **Editor in Chief LTC Melba C. Stetz** (melba.stetz@us.army.mil; mcstetz@yahoo.com) or any of the Section Editors: **Feature Articles** (Nathan Ainspan: Division19newsletter@ainspan.com), **Spotlight on Research** (Krista Langkamer-Ratwani: kratwani@aptima.com), **Spotlight on History** (Paul Gade: paul.gade39@gmail.com), and **Spotlight on Pedagogy** (Steve Truhon: truhons@apsu.edu). All items should be submitted in electronic form (Word compatible), not to exceed 3,000 words, and prepared in accordance with the most current edition of the *Publication Manual of the American Psychological Association*. All graphics (including color or black and white photos) should be sized close to finish print size, at least 300 dpi resolution, and saved in TIF or EPS formats. Submission should include a title, author(s) name, telephone number, and e-mail address of the 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 Eric Surface (esurface@swa-consulting.com).

Review and Selection. Every submission is reviewed and evaluated by both the Section Editor and Editor in Chief for conformity to the overall guidelines and suitability for *The Military Psychologist*. In some cases, the Editor in Chief may ask members of the Editorial Board or Executive Committee to review the submission. Submissions well in advance of issue deadlines are appreciated and necessary for unsolicited manuscripts. However, the Editor in Chief and the Section Editor(s) 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*.

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