

U.S. DEPARTMENT OF DEFENSE (DOD)

Family Advocacy Program, Office of the Assistant Secretary of Defense (FAP)

IMPACT OF TRAUMA

Trauma is an important issue for the increasing number of women who make up the Armed Services and who deploy in supportive roles with their male counterparts. It is relevant to both civilian and active duty female spouses who experience trauma as a result of domestic abuse or intimate partner violence (IPV). Women are now 20 percent of new recruits, 14 percent of the military as a whole, and 18 percent of the National Guard and Reserve. While women represent only 8 percent of veterans, their risk factors are rising disproportionately to their numbers <http://www.dol.gov/wb/trauma/>. Additional statistics on women in the military, information about the impact of trauma, and sources for further information can be found in the first Federal Partners Report on Women and Trauma <http://nicic.gov/Library/025082>. Two recent studies also address the impact of combat exposure on women in the military (see additional resources).

How a Trauma-Informed Approach Can Make a Difference

The Family Advocacy Program (FAP) provides services that promote relationship, health and family wellness as well as offers prevention, early identification and intervention services to victims and offenders of child abuse and domestic abuse in military families. For many women, trauma experiences start early in life and can have longstanding mental, psychological and social consequences. Validated research on the effects of trauma on lifespan development, especially on relationship patterns and skills, health, and socio-economic positioning, suggest that all FAP staff would benefit from core knowledge and competencies in trauma-informed approaches in both prevention and intervention services. Research has also demonstrated that offender behaviors, like victim behaviors, sometimes represent maladaptive responses to earlier trauma. Incorporating trauma-informed practices will assist FAP providers in delivering more sensitive and effective services for both victims and offenders.



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Major Accomplishments 2010-2013

FAP is revising its current program policies and will include trauma-informed care as a core knowledge competency for all providers, including clinicians and victim advocates, who provide services to victims and offenders in domestic abuse and intimate partner violence cases. Training for FAP staff, beginning with the Services' Headquarters FAP managers, began in April, 2013.

FAP partnered with the Battered Women's Justice Project <http://www.bwjp.org/> in the development of web-based training for civilian victim advocates and attorneys on IPV within the military. Specific topics have included the DOD response to IPV, military justice and IPV, and IPV and combat-related PTSD. Feedback suggests that this training is filling a gap within the civilian community concerning domestic violence and IPV in military families, trauma responses to combat experiences, and the impact of trauma on individuals and on family relationships.

New Directions and Collaborations

FAP partnered with Health and Human Services' Centers for Disease Control (CDC) and the Department of Justice (DOJ) to compare the prevalence of IPV among active duty women and female spouses of active duty men to that of women in the general public. This technical report from CDC will establish a prevalence baseline that will inform policy and resource decisions. These comparisons will be useful in helping DOD determine the need for universal IPV screening by medical practitioners and for training on trauma-informed practices for providers serving women.

Additional Resources

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http://www.militaryonesource.mil/phases-military-leadership?content_id=266712

Luxton, D.D., Skopp, N.A., & Maguen, S. (2010) Gender differences in depression and PTSD symptoms following combat exposure. *Depression and Anxiety*, 27, 1027-1033.

Maguen, S., Luxton, D.D., Skopp, N.A., & Madden, E. (2012) Gender differences in traumatic experiences and mental health in soldiers redeployed from Iraq and Afghanistan. *Journal of Psychiatric Research*, 46, 311-316.

National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, (2010 Summary Report), National Intimate Partner Violence and Sexual Violence Survey (NISVIS).