Understanding, Treating, and Strengthening Military Families With Systemic Therapy: Readiness and Repercussions of the “Long War”

A review of

Families Under Fire: Systemic Therapy With Military Families
by R. Blaine Everson and Charles R. Figley (Eds.)

Reviewed by
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As our nation approaches 10 years at war, there is no doubt that increasing numbers of our military and their family members have had to bear the stress and strain of that prolonged conflict. It’s important to be aware, as the editors of Families Under Fire: Systemic Therapy With Military Families note in their introduction, that seldom has there been as much attention paid to the impact of war on the family members of military personnel. The editors appropriately (and importantly) caution those interested in treating military members and
their families that they must take the time to understand the context for wars and the impact of multiple deployments on both the military member and the family.

**Clash of “Cultures”**

The power of paradigms is that they may let us view various issues within the context of those elements within an environmental system that then help to give expression to a problem. A systems-focused paradigm offers a powerful lens through which one can gain greater clarity in viewing the multiple contexts within which a military member and his or her family must operate. These multiple contexts within the family include the usual absence of their immediate extended family, the “military family” of other military families with whom they share a common bond, the military base culture, the branch of service culture, and the culture to which the military members may deploy to and from: all of which serve to influence, in both known and unknown ways, the military members and their families.

It is often said that the military recruits the military member but “retains” the family. This captures how the family is often the linchpin around which the well-being of the service member revolves. Understanding the nature of the military culture and potential applications of family systems therapy to military members and their families is the primary focus of this book. While the focus of the various selections is on military families, it is clear that the enhanced understanding and insights apply equally well to other families facing separations, “reintegrations,” and transitions (e.g., retirements, job changes).

The editors of *Families Under Fire*, Blaine Everson and Charles Figley, relate that the purpose of their book is:

> to provide a set of guidelines for providing clinical mental health services to service members and their families from a wide variety of systems-based frameworks, including cognitive–behavioral family therapy, structural–strategic approaches, family-of-origin therapy, emotionally focused couple therapy, and family systems-based psychiatric practice. (p. xxiii)

To achieve this end, they have arrayed an impressive collection of contributors with extensive experience in systems approaches who address five major themes: (a) introduction of family systems theory and practice, (b) Applications of family systems-based therapy to military families in general, (c) Identifying the cultural differences between branches within the military and the application of family therapy within that context, (d) Applying systems-based therapy to unique and special populations (e.g., posttraumatic stress disorder [PTSD], secondary trauma), and (e) suggestions for further research and practice.
Charles Figley is well known for his many contributions in this important area. He has made foundational contributions that have shaped our understanding of the impact of an earlier war (i.e., Vietnam) and how to mitigate the effects of war on those who experience it with his seminal book *Stress Disorders Among Vietnam Veterans: Theory, Research and Treatment* (Figley, 1978; see also Figley & Leventman, 1980). More recently, he teamed with Navy psychiatrist William Nash in their tour de force, *Combat Stress Injury: Theory, Research, and Management* (Figley & Nash, 2007). Figley is also the founding editor of the *Journal of Traumatic Stress* and the founding president of the International Society for Traumatic Stress Studies. Blaine Everson brings his extensive experience as a marriage and family therapist dealing with military families and their readjustment issues, along with the family-level processes associated with recovery from emotional trauma.

The first chapter, by Everson and Camp, provides a review of the major systems-based approaches, along with the relevance and application of the basic concepts and techniques within the context of military members and their families. This chapter provides a number of examples that help to achieve the editors’ goal of helping practitioners recognize how a “systemic” view is applicable whether treatment is provided in a “veteran’s clinic, a community agency, or in private practice” (p. xxii). For those who may find it helpful, an appendix also offers a developmental overview and brief history focused on the application of family systems therapy.

The book is organized through three main sections, with chapters arrayed to address issues within each section. The first section sets the conceptual basis for why and how family systems theory is valuable for looking at military family members’ problems within the context of the culture in which they live and across the dynamic created by frequent deployments leading to integration and reintegration issues. It offers a very good introduction to family systems theory and practice along with a discussion of how these approaches are extended to military families and the issues they must confront. In addition, with the stress transitions model, we see the importance of understanding the unique demands placed on military members and how these might play out both within the family and within the systems therapy model.

Section II consists of eight chapters, all of which serve to offer insights into some of the unique aspects of the military branch cultures and the specific treatment challenges that clinicians may encounter when providing systemic treatment approaches with selected groups within the branch-specific cultural challenges. The need to understand the military culture is critical for clinicians who want to help military members and their families with the problems they are confronting within the context of the military system.

Thus, Figley and Everson’s book goes far in helping to explain these various contexts and cultural dynamics. For example, these chapters offer insightful and very helpful descriptions of structural strategic approaches with both Army and Navy couples as they confront relationship issues (with each other and with their children) as they navigate through the tumultuous cycles of deployment and reintegration (i.e., reunion). Everson and
Herzog’s chapter, “Structural Approaches with Army Couples,” does a great job of identifying the “multiple issues operating at multiple levels of various systems” (p. 77).

To fully appreciate what military families are asked to adapt to, one need only consider the fact that over two million children (with over 40 percent younger than five years) of military members have experienced the absence of one or both of their parents due to deployments to Iraq and/or Afghanistan (see also American Psychological Association, Presidential Task Force on Military Deployment Services for Youth, Families, and Service Members, 2007; U.S. Department of Defense Task Force on Mental Health, 2007). Increasingly there is recognition (a) that childhood distress is closely linked to parental distress; and (b) of the importance for a close interface with primary care providers, who often are the first to see childhood stress, anxiety, or behavior problems (Davis, 2010; see also Chartrand, Frank, White, & Shope, 2008; Mansfield et al., 2010).

Indeed, the dynamic forces unleashed as the families and the military members attempt to understand and then respond to the extrafamilial and intrafamilial adaptations demanded by these deployment cycles are critical for clinicians to understand if they are to be successful in working with military families. This is especially true for adolescents, as they are negotiating their life-span developmental issues related to autonomy and independence at the same time that the family dynamics may necessitate greater dependence and need for their help (see, e.g., Everson, Herzog, & Haigler, Chapter 4). With increasing numbers of women deploying, another extraordinarily insightful and helpful chapter addresses some of the unique challenges posed by deployment of Air Force women (e.g., deployment stress, gender inequality, and the impact on their families).

Several chapters within this book emphasize the importance of recognizing that each of the branches of the military offers both common and unique cultures—an important dynamic that, if unknown and/or unrecognized, can create significant challenges for compliance and success with treatment. The chapters on systemic therapy with families of Marines, Air Force, and Army couples offer clinicians many valuable insights into these important military culture dynamics. Army soldiers have borne the brunt of the ground combat, which is closely associated with systems of combat stress and PTSD.

Studies have consistently revealed that the prevalence rates for PTSD in military members after returning from combat ranges from 10 percent to over 30 percent, with multiple deployments increasing prevalence (Hoge, Auchterlonie, & Milliken, 2006; Hoge et al., 2004), along with symptoms actually worsening even 12 months after return (Thomas et al., 2010) and wives being affected (see Mansfield et al., 2010). These studies reinforce the importance of the chapter that explains the use of emotionally focused therapy with military families, along with another chapter that delves into secondary traumatic stress and how it relates to and becomes manifested within the family.

Systemic therapies offer a powerful way to both view and, more important, better understand the dynamics within the military family, between the military member and his or her service, and between the family and the military culture. The final section focuses on
applying systems approaches to the members of the military and their families as they attempt to readjust following often-multiple deployments.

Given the foundation of success in identifying the beneficial application of the family systems-based model to service members and their families, the final chapter offers a call to action to improve access and availability of qualified clinicians offering a more systems-based approach. To that end, Figley and Everson offer important “cover” for “families under fire” by identifying the various threats posed by the various systems and the opportunities to address those threats with more systems-based modalities. Our military members, their families, and the clinicians who seek to help them will all benefit from this important contribution.

References


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