

# Supporting Military Families During the Transition to Civilian Life

## *2025 Clinical Communities Speaker Series: Cultivating the Wellbeing of Our Military Children, Youth, and Families*

Joe Geraci, PhD

US Army (Retired, Lieutenant Colonel, Infantry/Ranger)

Director, VA Transitioning Servicemember/Veteran And Suicide Prevention Center (TASC)

VA Clinical Psychologist

Adjunct Associate Professor, Teachers College, Columbia University

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# Presenter

## **Joe Geraci, PhD**

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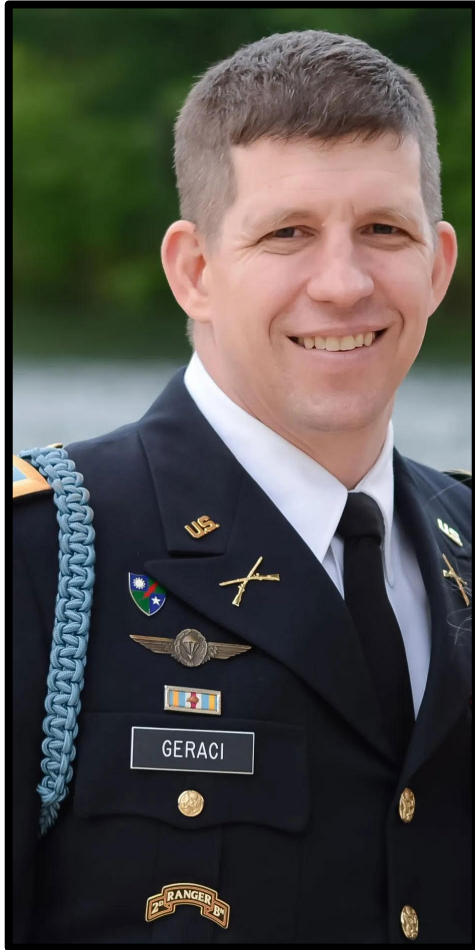
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# Joseph Geraci, PhD



Dr. Geraci retired from the U.S. Army as an Infantry Lieutenant Colonel after serving for 20 years and deploying as a combat leader with elite Special Operations/Ranger, Airborne, and Infantry units to Afghanistan four different times since 9/11.

While in uniform, he also served as an assistant professor at the US Military Academy (USMA) in the Departments of Behavioral Sciences & Leadership and Military Instruction. His last position in the U.S. Army was serving as an Infantry Battalion Commander being directly responsible for the health, welfare, and combat readiness of his Soldiers.

He is a graduate of USMA and received his doctoral degree in clinical psychology from Teachers College, Columbia University. He is an adjunct associate professor at the college and teaches military psychology to graduate students. He is a co-founder of the college's Resilience Center for Veterans and Families.

He is a licensed clinical psychologist, director of the VA's Transitioning Servicemember/Veteran And Suicide Prevention Center (TASC) and principal investigator for numerous merit grants. His work focuses on studying and developing interventions that mitigate the significant suicidal risks that our Modern Warriors (some of them being his former Soldiers) and their families face as they attempt to reintegrate back into civilian life after military service.

He leads several national VA programs, including the ***VA Veteran Sponsorship Initiative***, the ***VA National Virtual Care Clinic for Transitioning Veterans***, and the ***VA Veteran Cultural Competence Training***.

# Disclosures

- Dr. Geraci has no relevant financial or non-financial relationships to disclose relating to the content of this activity.
- The views expressed in this presentation are those of the author and do not necessarily reflect the official policy or position of the Department of Defense, the Department of Veterans Affairs nor the U.S. Government.
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- Commercial support was not received for this activity.



# Learning Objectives

At the end of this presentation, participants will be able to:

1. Define the key challenges experienced by military families during their transition to civilian life
2. Apply the Social-Ecological Model to better understand challenges experienced by military families during their transition to civilian life
3. Explain opportunities for clinicians to improve the transition process for military families

“My Soldier retired from Active Duty 10 years ago. After 23 years of ***PCS’ing to 13 duty stations*** across the globe for anywhere from six months to six years, retirement seemed like a ***new, unexplored territory: staying in one place, putting down roots, starting a new chapter***. Active Duty ended with a flurry of activity: retirement activities, out-processing, job hunting, house hunting, graduating a high school senior and transitioning to college. All in less than three months. ***When the dust settled*** and the movers dropped us off at ***our quarters— I mean our new home***—I was unprepared for all the quiet. I had watched my husband prepare for his transition to civilian life, ***but never thought about my own***. The quiet surrounding me was the ***absence of my “military family” family***, that instant network of spouses and kids who filtered in and out of our lives for 23 years. I had to ***work to find some level of commonality with neighbors***, and even speak a new language. Apparently, civilians do not speak in acronyms, shop at the PX and Commissary, and navigate around TDYs and deployments. This was not just a new chapter, ***but a whole new story***, and one that ***needs time to unfold in this new, very quiet, very still, life we are living.***”

### Military Spouse in Transition (Ref)

“...let us strive on to finish the work we are in to bind up the nation's wounds, ***to care for him (her) who shall have borne the battle and for his widow (her widower) and his (her) orphan*** ~ to do all which may achieve and cherish a just and lasting peace among ourselves and with all nations.”

Abraham Lincoln, Second Inaugural Address, March 4, 1865



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# Military Families During the Transition to Civilian Life

- About 200k Active-duty Servicemembers transition to civilian life every year=  
*About 100k Military Spouses and 40k Military Children (VA, 2018; DoD, 2018)*
- Impact on US national defense
  - o Stability during deployments (Rossiter et al., 2022)
  - o Stay within the military (Blue Star Families, 2019)
  - o Future generation of Servicemembers (Schafer, 2017)
- Most DoD, VA and community resources focused on Servicemember and not tailored to the family unit; Challenges with continuity of care (Rossiter et al., 2022)
- Lack of military cultural competence in the civilian community (Geraci et al., 2024)

# Social-Ecological Model (1 of 4)



- CDC (2025) uses a four-level social-ecological model to better understand negative behaviors and the effect of potential prevention strategies.
- Model considers the complex interplay between individual, relationship, community, and societal factors.
- It allows us to understand the various factors that put people at risk for negative behaviors
- The overlapping rings in the model illustrate how factors at one level influence factors at another level.

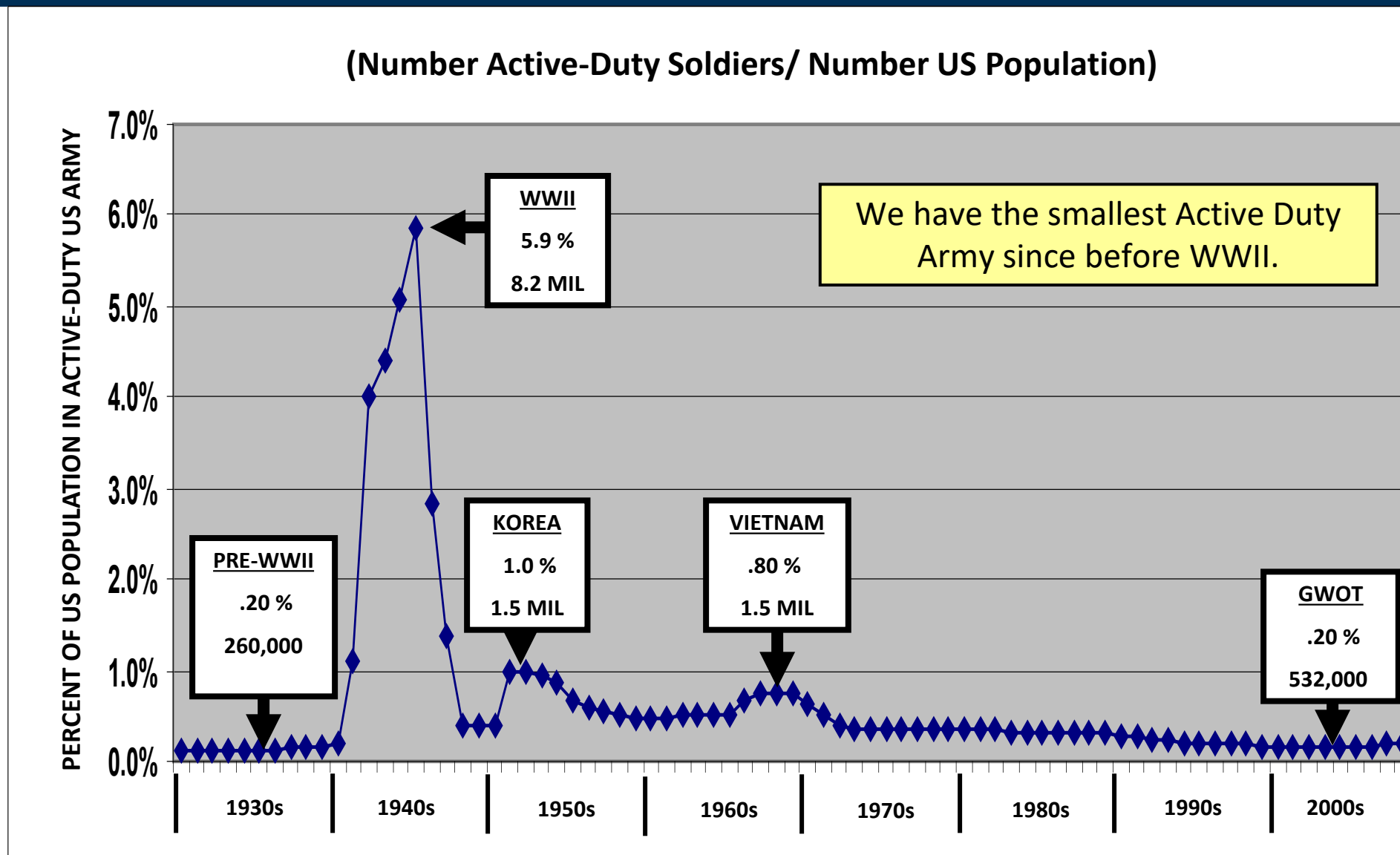


# Social-Ecological Model (2 of 4)



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# US ARMY ACTIVE-DUTY STRENGTH AS PERCENT OF TOTAL US POPULATION



(DMDC, 2008;  
US Census, 2008)



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# Social-Ecological Model (3 of 4)

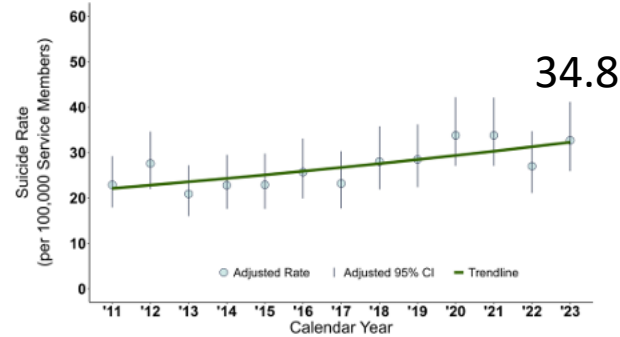


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# DoD Annual Suicide Report, 2024

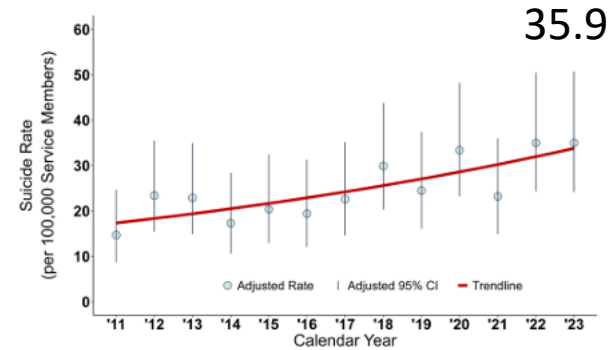
Figure 3 | Active Component Suicide Rates Over Time by Service

## Army

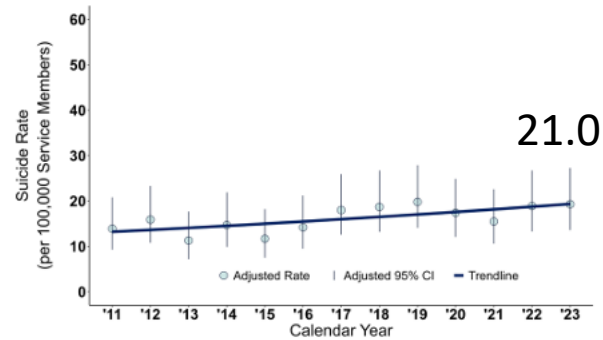


## Marine Corps

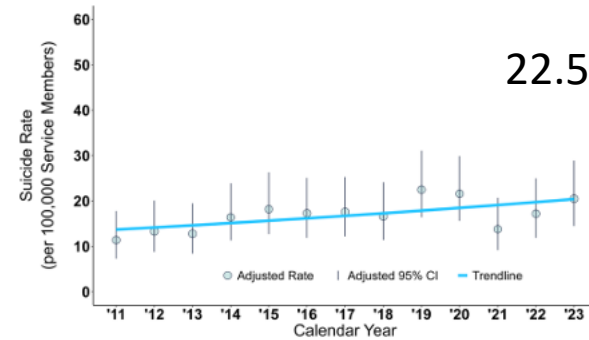
Total: 28.2/100,000



## Navy



## Air Force



**Notes:** Data sourced from AFMES (for military populations) and the Centers for Disease Control and Prevention (CDC; for U.S. population), ages 17 – 59. All rates are sex and age adjusted to account for differences within the military over time. Vertical bars around each rate indicate 95% confidence intervals.

\*Statistically significant — High confidence that this is a true difference and not due to chance.

Trend analysis was not conducted for the Space Force. Established in 2019, the Space Force had no suicides from 2020 to 2022 and two suicides in 2023. Per DoDI 6490.16, no rates are calculated when the number/count of suicide deaths is under 20.<sup>1</sup>

\*Not statistically significant — Low confidence that this is a true difference (e.g., likely due to chance or normal variation).

# Suicide Among Veterans (18 to 34 years old)

o **Suicide rate:** Veterans aged 18 to 34 years old (VA, 2023)

-More than **doubled** since 2001

-**1.65 times higher** than older veterans (35+ yo)

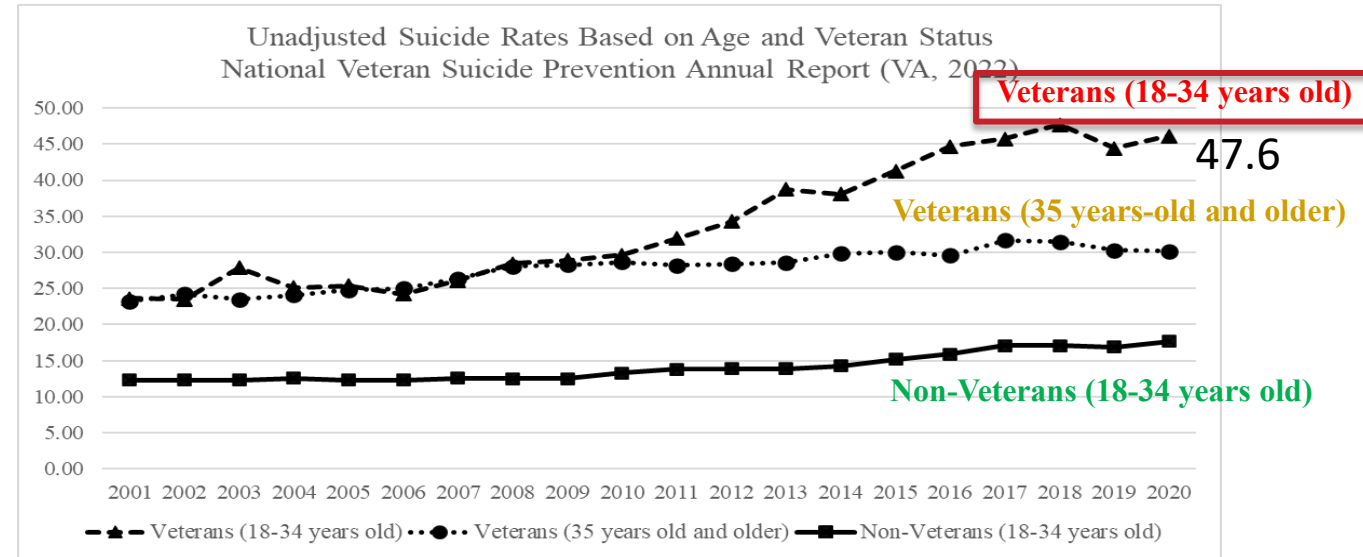
-**2.73 times higher** than non-veterans of the same age

o **Deadly Gap** (Geraci et al. 2020)

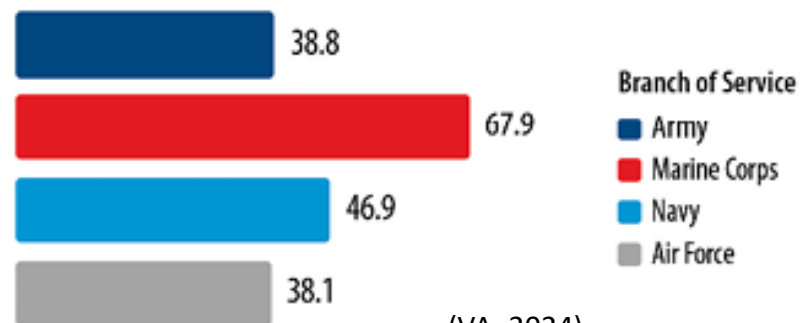
-**Highest Risk:** 3x risk in 1<sup>st</sup> year after the military (Shen et al, 2016; Ravindran et al., 2020)

o **Not using VA care**

-Only **24% of active-duty Servicemembers (SMs)** enroll in VA care during 1<sup>st</sup> year after the military (VA, 2018)

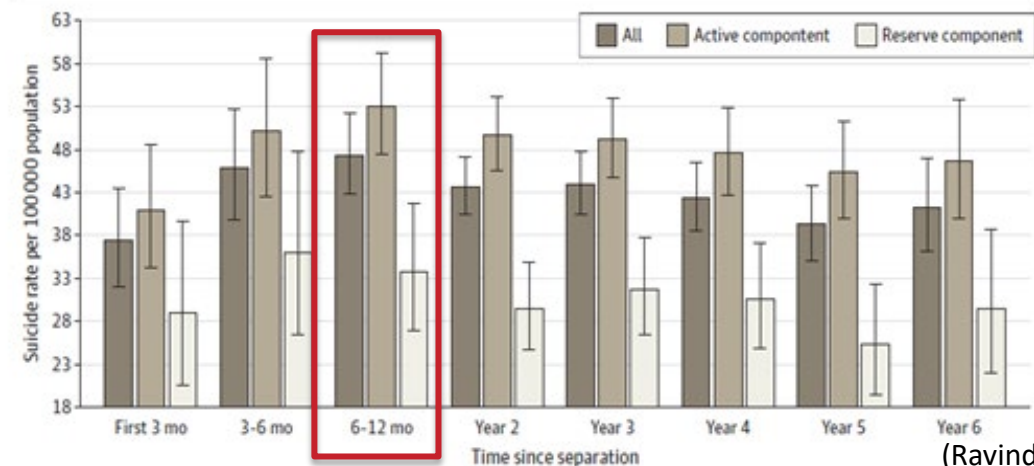


Unadjusted Suicide Rate, 12 Months Following Separation  
from Active Military Service in 2021, by Branch of Service  
(Rate per 100,000 Person-Years)



(VA, 2024)

Figure 2. Suicide Rates Conditioned on Time Since Separation by Component With 95% CIs



(Ravindran et al., 2020)



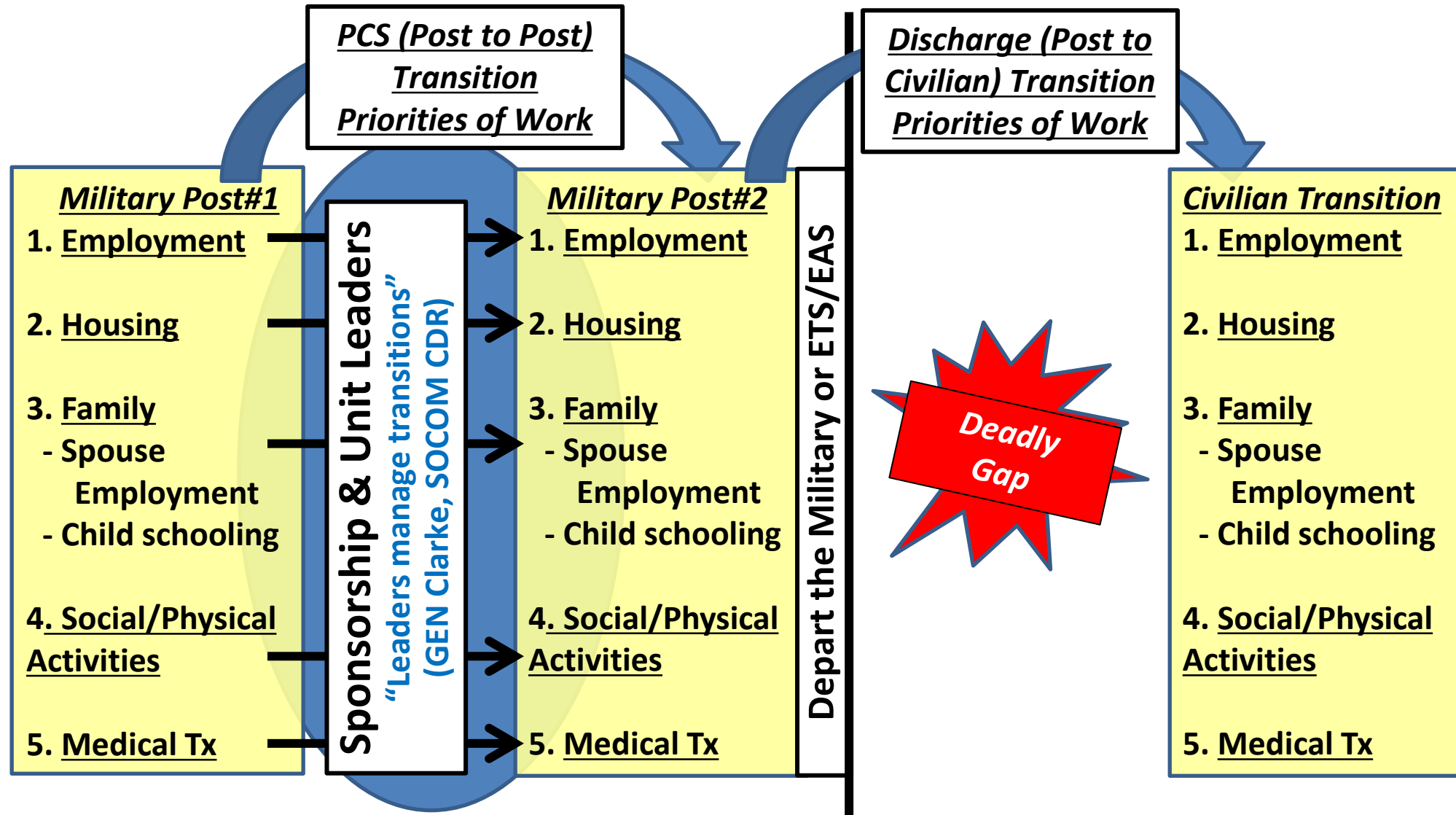
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# Problem- The Deadly Gap (Geraci et al., 2020)



# Comparing Two Veteran Transitions

## Transition as Usual

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**Veteran:** 30s y/o Asian-American, woman, single,  
10 years of military service

**Military Discharge:** September 2022

**Prescribed DoD psychotropic meds** & attended  
**7 mental health appts** in last year of military service

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### **Jul 2022 - DoD Psychiatrist Note:**

“The SM will *try to get her medication from the VA after she gets out of the Army...* The SM is *anxious about what the future holds for her*, but she is excited as well. I will write for an 8w supply of her medication today...”

---

### **Sep 2022 - Veteran calls local VAMC:**

VA call center/admin enters note from her call, “*This is my first appointment after getting out of active duty and need to continue getting medication...Please have someone call me to make my first appointment.*”

**No follow-up from local VAMC**

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DoD STARRS analysis shows that about 1% of Servicemembers will have a suicide attempt within the first-year post-military discharge (Kearns et al., 2023)



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# Precision Medicine

- ***Most medical treatments*** are designed for the ***"average patient"*** as a one-size-fits-all-approach, which may be successful for some patients but not for others.
- Precision medicine is an innovative approach to ***tailoring disease prevention and treatment*** that takes into account ***differences in people's genes, environments, and lifestyles***.
- **Goal**= ***"target the right treatments to the right patients at the right time"*** (FDA, 2025).

You wouldn't wear  
just any pair of glasses —  
your prescription is  
tailored to your vision.

Precision medicine is health care tailored even more uniquely to you.

#PrecisionMedicine

wh.gov/PMI

# VA Veteran Sponsorship Initiative

- The VA **Veteran Sponsorship Initiative (VSI)** is an innovative, *evidence-based* program (*reintegration difficulties* and *social support*) designed to reduce suicide risk factors for Servicemembers going through the military-to-civilian transition.
  - Under VSI, Servicemembers are paired 1:1 with VA-trained, volunteer, *community-based peers who are managed by vetted VHA community partners (e.g., Onward Ops)* who support them during the transition
  - VSI connects Servicemembers to VA healthcare and benefits **as well as community services** *based on suicide risk-level*
- 
- **Jointly funded by:**
    - VISN 17 Heart of Texas Network
    - VISN 17 Center of Excellence for Research on Returning War Veterans
    - VISN 2 MIRECC
    - Bronx VAMC
    - VHA National Center for Healthcare Advancement And Partnerships (2021-2025)
    - VHA Office of Research & Development QUERI Grant #1 (n=630; 2021-2025)
    - VHA Office of Research & Development QUERI Grant #2 (n=12,000; 2025-2028)
    - Suicide Prevention Research Impact Network Grant (VA HSR/CSR; 2023)
    - VHA Office of Suicide Prevention Demonstration Project (2024)



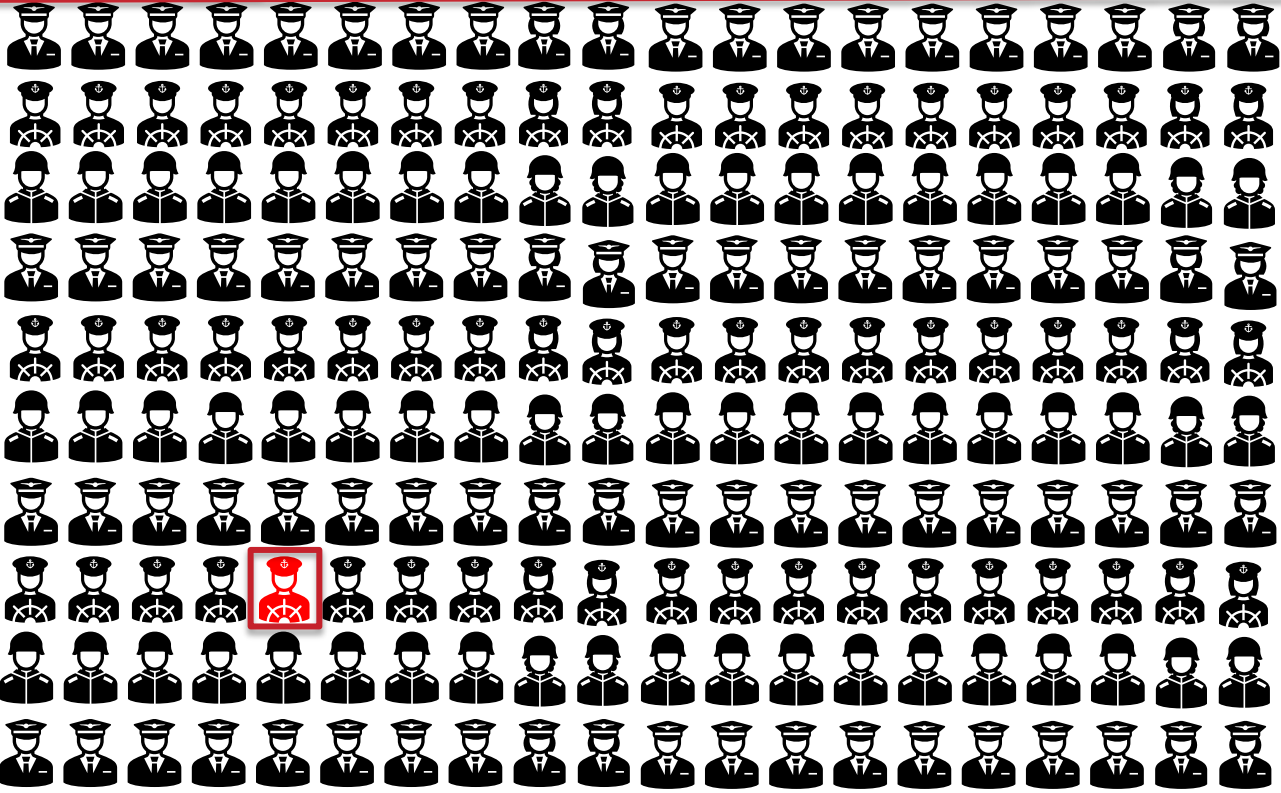
With the *DoD STARRS Practical Risk Calculator for Suicide Behavior*, we can now categorize based on suicide risk level.

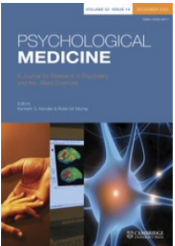
**-30% of Servicemembers with highest predicted risk account for 93% of medically serious suicide attempts within the first year post-military discharge**

n=90



n=210






Psychological Medicine

### A practical risk calculator for suicidal behavior among transitioning U.S. Army soldiers: results from the Study to Assess Risk and Resilience in Servicemembers-Longitudinal Study (STARRS-LS)

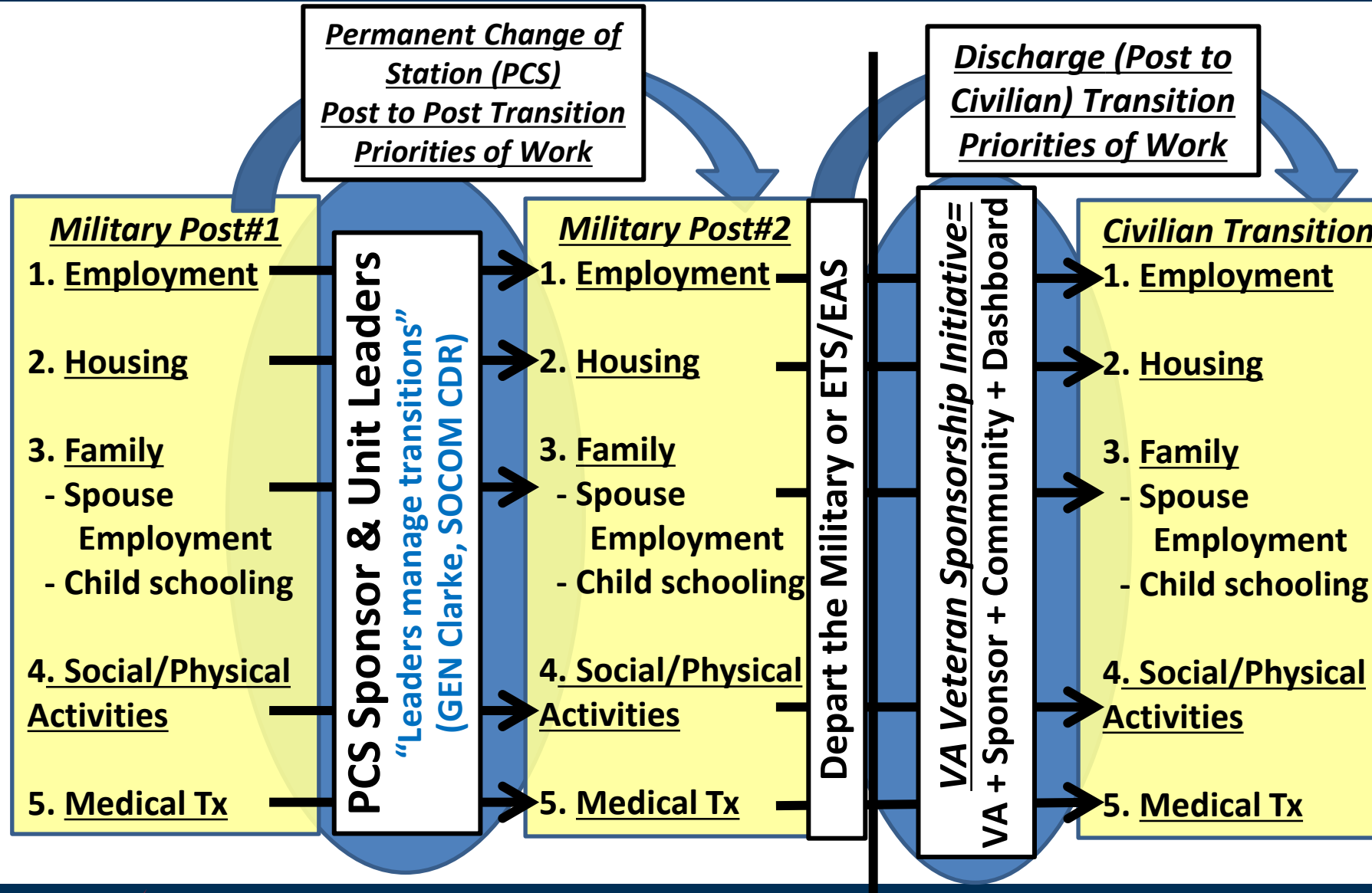
Published online by Cambridge University Press: 09 March 2023

Jaclyn C. Kearns, Emily R. Edwards, Erin P. Finley, Joseph C. Geraci, Sarah M. Gildea, Marianne Goodman, Irving Hwang, Chris J. Kennedy, Andrew J. King, Alex Luedtke, Brian P. Marx, Maria V. Petukhova, Nancy A. Sampson, Richard W. Seim, Ian H. Stanley, Murray B. Stein, Robert J. Ursano and Ronald C. Kessler 

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# Bridging the Gap: Veteran Sponsorship Initiative



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# Comparing Two Veteran Transitions, continued

## Transition as Usual



**Veteran:** 30s y/o Asian-American, woman, single, 10 years of military service

**Military Discharge:** September 2022

**Prescribed DoD psychotropic meds** & attended **7 mental health appts** in last year of military service

### **Jul 2022 - DoD Psychiatrist Note:**

*“The SM will **try to get her medication from the VA after she gets out of the Army...**The SM is **anxious about what the future holds for her**, but she is excited as well. I will write for an 8w supply of her medication today...”*

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VA call center/admin enters note from her call, *“**This is my first appointment after getting out of active duty and need to continue getting medication...Please have someone call me to make my first appointment.**”*

**No follow-up from local VAMC**

## Veteran Sponsorship Initiative



**Veteran:** 20s y/o African-American, man, married, one child (newborn); 5 years of military service, two deployments

**Military Discharge:** December 2022

**Prescribed DoD psychotropic meds** & attended **10 mental health appts** in last year of military service

**Paired with VA-trained Onward Ops Peer Sponsor in military- helped with finding new job/housing**



**Early-Dec 2022 - VA Psych Clinical Intake:** *“We were able to get him **VA enrolled...**SM very **concerned about not having psych med refills**, which have stabilized him since April 2022. Currently **negative for depression/suicide...starting new job.**”*

**Virtual VA PC consult submitted**

**Mid-Dec 2022 – VA National Virtual Care Clinic for Transitioning Veterans:** Initial VA PC visit & mailed medication.

**Traveling Veteran Consult submitted to Veteran’s local VAMC (PC/MH follow-up confirmed)**

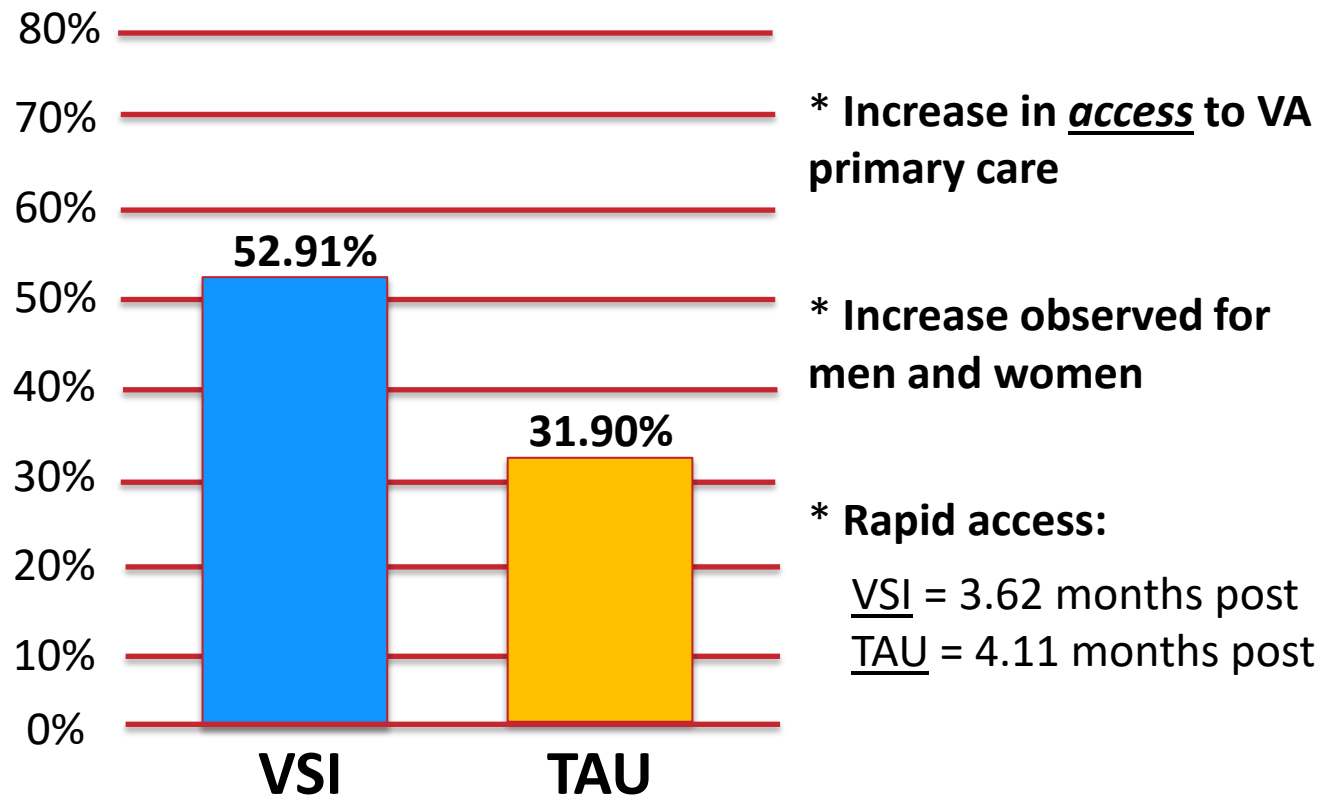
**With VSI, Veteran is enrolled and seen by VA PCP < 90 days from military discharge**

- Proactive Approach - Earlier than VA receives electronic DD 214

# VA Veteran Sponsorship Initiative (VSI) Pilot Study Results (*Preliminary*)

(VA VSI, n=550 vs. Transition As Usual (TAU), n=812)

## VA Primary Care Use (10 months post-Military)



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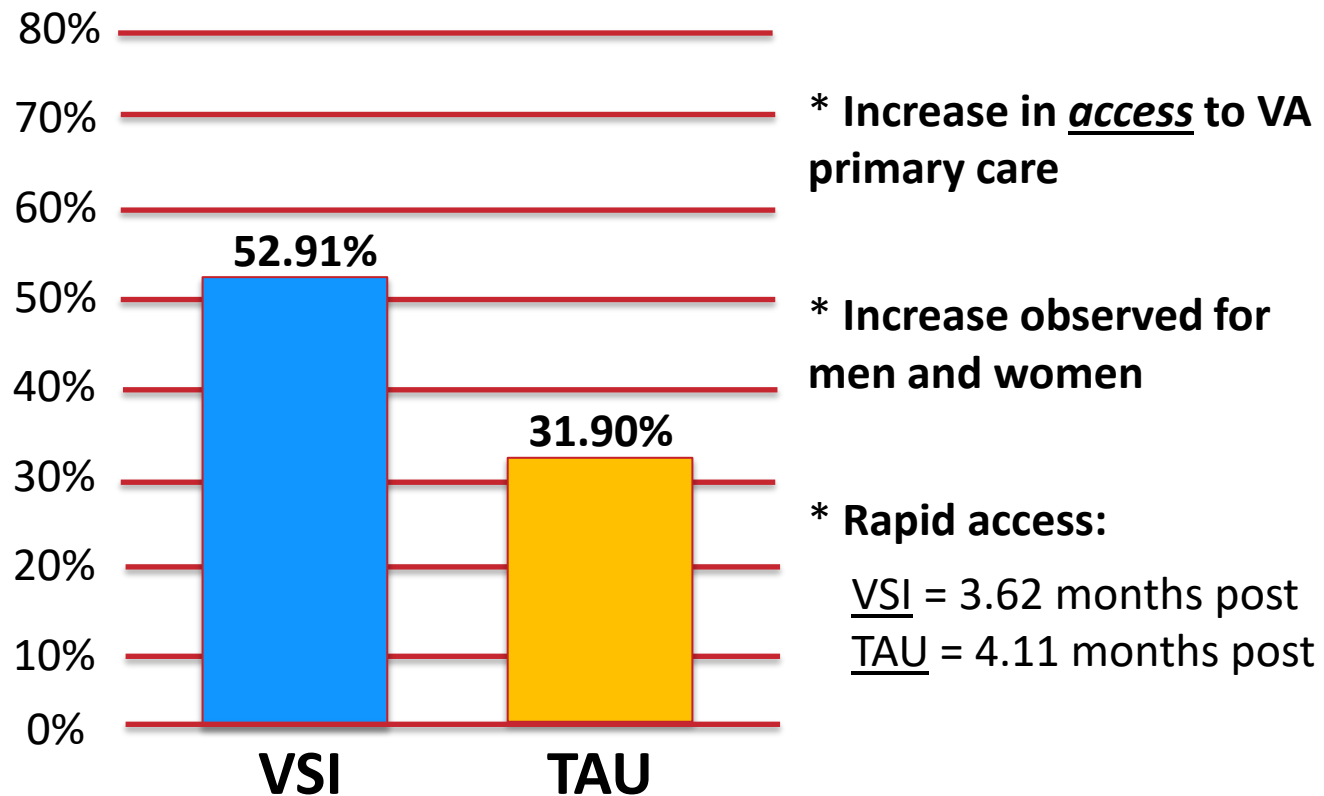


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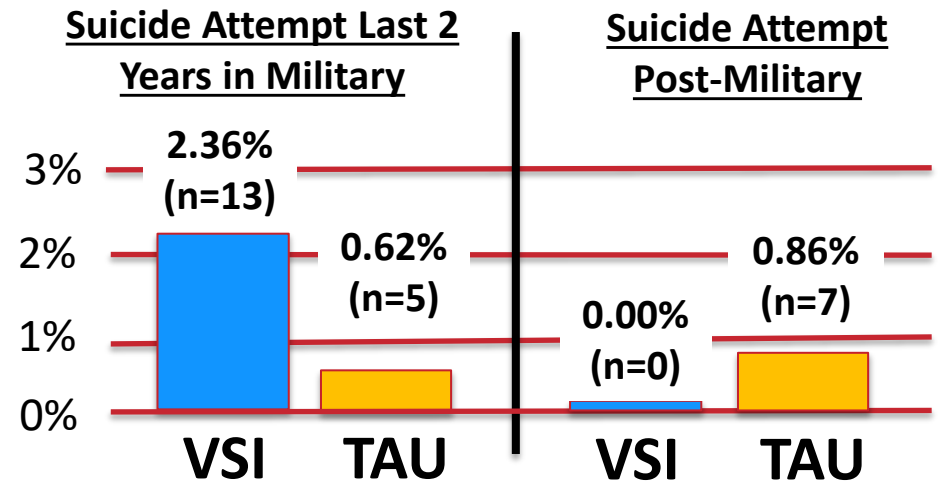
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(VA VSI, n=550 vs. Transition As Usual (TAU), n=812)

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## Suicide Attempt Requiring Medical Care (10 months post-Military)



\* Reduction in suicide attempts

\* Profile of 7 TAU TSMVs w/ Suicide Attempt Post-Military

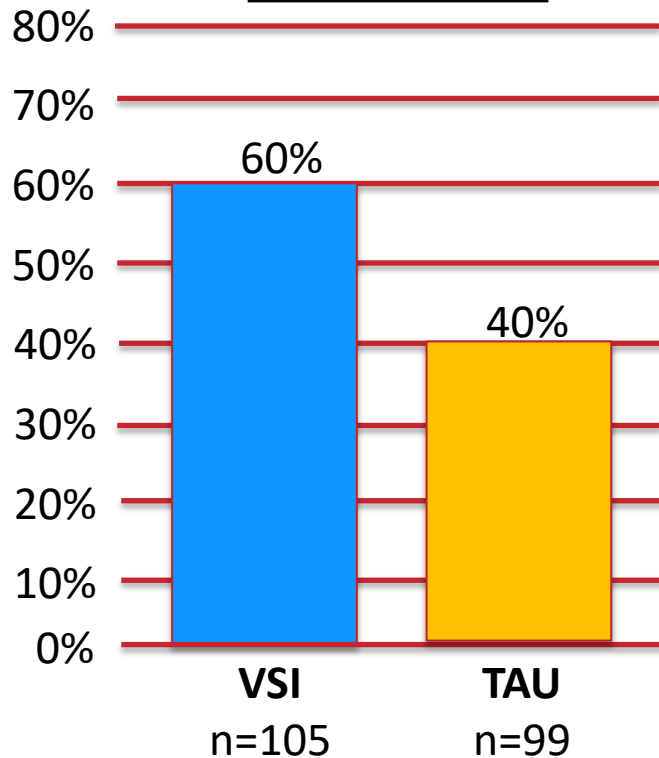
- All males and enlisted; **24.66 years old**
- Suicide attempt: **5.61 months** post-military
- No "warm handover"** identified in DoD/VA HER
- Only **1 of 7** had **VHA mental health care** prior to attempt
- Only **1 of 7** had **suicide attempt within last 2 years military**
- 6 of 7** identified by DoD STARRS practical risk calculator before military discharge

# VSI Feasibility Study Results (*Preliminary*)

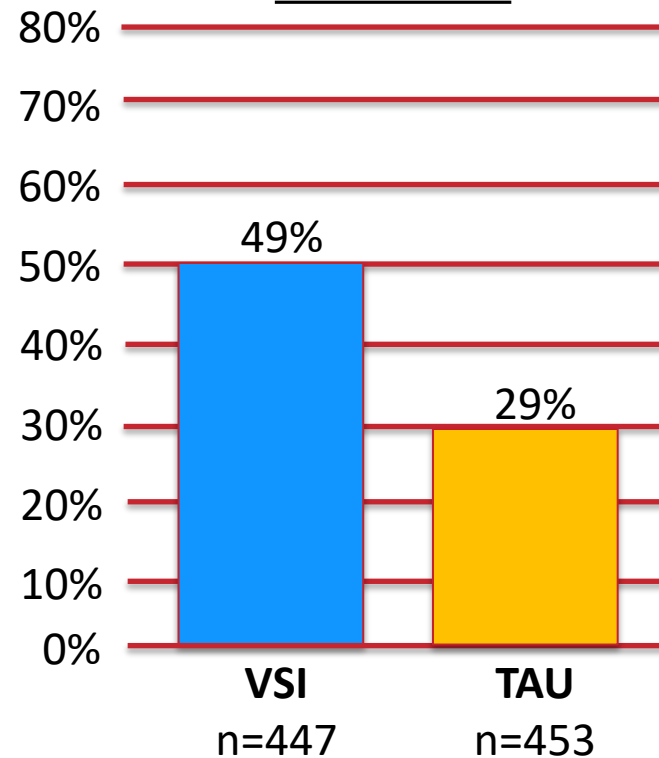
## VSI (n=550) vs. Transition as Usual (TAU; n=812)

VA Primary Care Use (10 months post-military discharge)

Women TSMVs



Men TSMVs



## VSI TSMVs: VA National Virtual Care Clinic for Transitioning Veterans (n=151)

Diagnosis/Action	Men TSMVs (n=120)	Women TSMVs (n=31)	$\chi^2$
Musculo-skeletal	35.83%	45.16%	.91
Depression	27.50%	38.71%	1.48
Anxiety	25.00%	45.16%	4.85*
Migraines	12.50%	25.81%	3.38
Military Sexual Trauma	2.50%	45.16%	44.88***
Psych Meds	24.17%	35.48%	1.62
MH referral	40.00%	74.19%	11.56***

\*p<.05, \*\*p<.01, \*\*\*p<.001



# Social-Ecological Model (4 of 4)



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# Military Families' Stressful Reintegration, Family Climate, and Their Adolescents' Psychosocial Health (O'Neal et al., 2020)

-Active-Duty military families (n=238) with one Servicemember and one civilian parent

-Path analysis model with data from multiple family members examining associations between (a) Parents' perceptions of their family reintegration post-military deployment, (b) Their adolescents' perceptions of family climate, and (3) Adolescents' psychosocial health

## Family Climate and Interactions (*Child Report*)

### Parenting Quality

*(Child Rating Servicemember-Parent)*

"Your parent tells you that you are doing a good job"  
(1= Never; 4= Always)

### Parenting Quality

*(Child Rating non-Military Parent)*

"Your parent tells you that you are doing a good job"  
(1= Never; 4= Always)

### Inter-Parental Conflict

"How often have your parents verbally fought in front of you?"  
(1= Never; 5= Very Often)

### Family Cohesion

"My family members are supportive of each other during difficult times."  
(1= Strongly Disagree; 5= Strongly Agree)

## Adolescent Psychosocial Outcomes (*Child Report*)

### Anxiety

"People tell me I worry too much"  
(1= Not like me; 3= A lot like me)

### Depressive Symptoms

"I was bothered by things that usually don't bother me"  
(1= Not at all; 4= A lot)

### Self-Efficacy

"When I make plans, I am certain I can make them work"  
(1= Not like me; 3= A lot like me)

### Personal Well-Being

"How have you felt about...  
Your life as a whole" and "Getting along with people you know"  
(1= Very Sad; 4= Very Happy)

+ = Positive & significant relationship  
- = Negative & significant relationship

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# Military Families' Stressful Reintegration, Family Climate, and Their Adolescents' Psychosocial Health (O'Neal et al., 2020)

-Active-Duty military families (n=238) with one Servicemember and one civilian parent

-Path analysis model with data from multiple family members examining associations between (a) Parents' perceptions of their family reintegration post-military deployment, (b) Their adolescents' perceptions of family climate, and (3) Adolescents' psychosocial health

## Family Reintegration (Reported by Parents)

### Stressful Family Integration

(Rated by Servicemember- Parent)

"There has been tension (strain) in my family relationships"

1=Not at All; 3 (Very True)

### Stressful Family Integration

(Rated by non-Military Spouse- Parent)

"There has been tension (strain) in my family relationships"

1=Not at All; 3 (Very True)

+ = Positive & significant relationship  
- = Negative & significant relationship

## Family Climate and Interactions (Child Report)

### Parenting Quality

(Child Rating Servicemember-Parent)

"Your parent tells you that you are doing a good job"

(1= Never; 4= Always)

### Parenting Quality

(Child Rating non-Military Parent)

"Your parent tells you that you are doing a good job"

(1= Never; 4= Always)

### Inter-Parental Conflict

"How often have your parents verbally fought in front of you?"

(1= Never; 5= Very Often)

### Family Cohesion

"My family members are supportive of each other during difficult times."

(1= Strongly Disagree; 5= Strongly Agree)

## Adolescent Psychosocial Outcomes (Child Report)

### Anxiety

"People tell me I worry too much"

(1= Not like me; 3= A lot like me)

### Depressive Symptoms

"I was bothered by things that usually don't bother me"

(1= Not at all; 4= A lot)

### Self-Efficacy

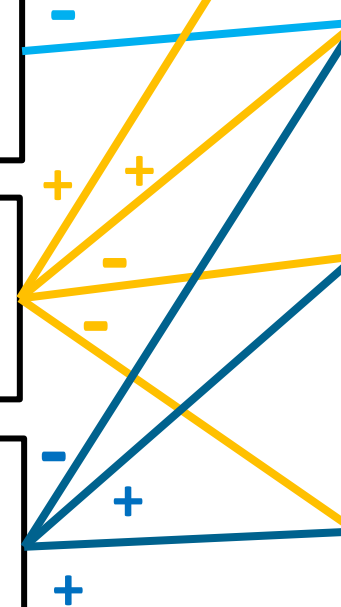
"When I make plans, I am certain I can make them work"

(1= Not like me; 3= A lot like me)

### Personal Well-Being

"How have you felt about... Your life as a whole" and "Getting along with people you know"

(1= Very Sad; 4= Very Happy)





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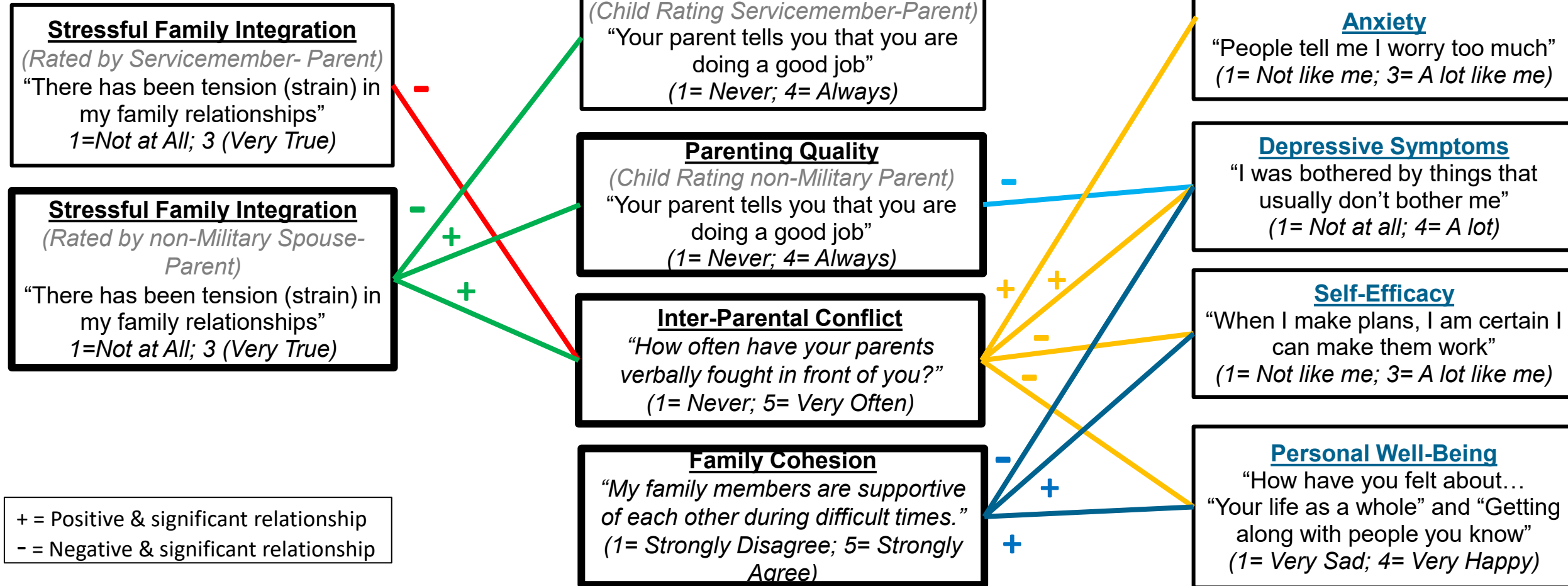
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## Family Reintegration (Reported by Parents)

## Family Climate and Interactions (Child Report)

## Adolescent Psychosocial Outcomes (Child Report)





## A Family Perspective





LTC Todd Clark  
KIA- June 8, 2013



LTC Jaimie Leonard  
KIA- June 8, 2013



MAJ Thomas Bostick  
KIA- July 27, 2007

Photos-J. Geraci



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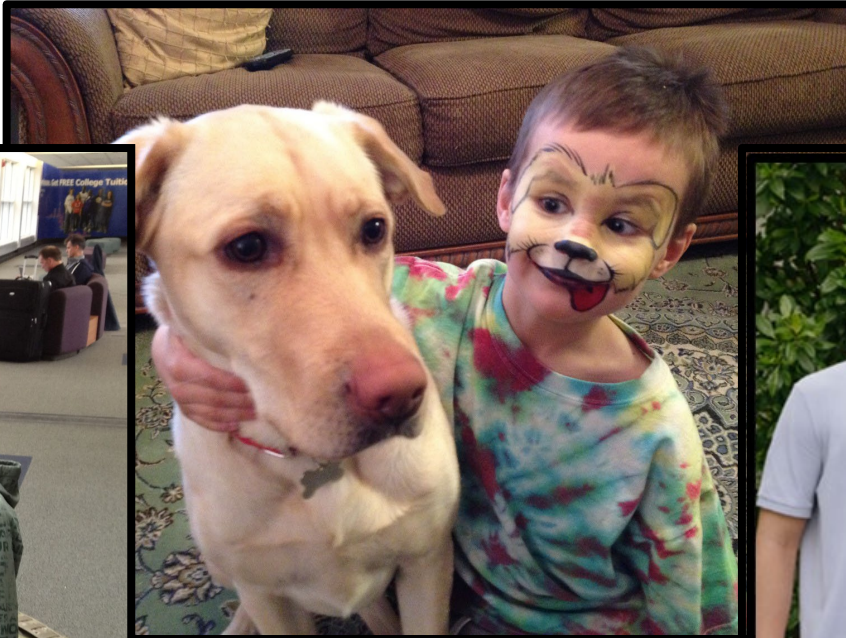
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# Key Takeaways

- “Identified Patient”= Military Family Unit, Military Community & Civilian Society
- Continuity of Care
- Predictive Analytics
- ***Resources:***
  - Military OneSource (DoD, 2025)
  - inTransition (DHA, 2025)
  - VA Post-9/11 Military2VA (M2VA) Case Management Program (VA, 2025)
  - Onward Ops (2025)
  - Veteran Spouse Network (2025)

# References (1 of 3)

- Blue Star Families and Institute for Veterans and Military Families. Military family lifestyle survey: comprehensive report. Syracuse, NY. <https://bluestarfam.org/wp-content/uploads/2020/03/BSF-2019-Survey-Comprehensive-Report-Digital-rev200305.pdf>
- Centers for Disease Control and Prevention. (2025). About violence prevention. <https://www.cdc.gov/violence-prevention/about/index.html>
- Department of Defense. (2018). 2018 demographics: Profile of the military community Alexandria, VA, 2018. <http://download.militaryonesource.mil/12038/MOS/Reports/2018-demographics-report.pdf>
- Department of Defense. (2008). DoD Personnel, Workforce Reports and Publications. <https://dwp.dmdc.osd.mil/dwp/app/dod-data-reports/workforce-reports>
- Department of Defense. (2024). Annual suicide report. [https://www.dspo.mil/Portals/113/2024/documents/annual\\_report/ARSM\\_CY23\\_final\\_508c.pdf](https://www.dspo.mil/Portals/113/2024/documents/annual_report/ARSM_CY23_final_508c.pdf)
- Department of Defense. (2025). Military Onesource. <https://www.militaryonesource.mil/>
- Food and Drug Administration. (2025). Precision medicine. <https://www.fda.gov/medical-devices/in-vitro-diagnostics/precision-medicine>
- Geraci, J. C., Edwards, E. R., May, D., Halliday, T., Smith-Isabell, N., El-Meouchy, P., & Goodman, M. (2024). Veteran cultural competence training: Initial effectiveness and national-level implementation. *Psychiatric Services*, 75(1), 32–39. <https://doi.org/10.1176/appi.ps.202100437>
- Geraci, J., Murray, C., Kapil-Pair, K., Herrera, S., Sokol, Y., & Cary, J. (2020). The modern-day Odysseus: how mental health providers can better reintegrate modern warriors and mitigate suicide risk. *Journal of Clinical Psychology*. 76(5):878–95. <https://doi.org/10.1002/jclp.22923>.
- Geraci, J. C., Dichiara, A., Greene, A., Gromatsky, M., Finley, E. P., Kilby, D., Frankfurt, S., Edwards, E. R., Solomon Kurz, A., Sokol, Y., Sullivan, S. R., Mobbs, M., Seim, R. W., & Goodman, M. (2023). Supporting servicemembers and veterans during their transition to civilian life using certified sponsors: A three-arm randomized controlled trial. *Psychological Services*, 20(Suppl 2), 248–259. <https://doi.org/10.1037/ser0000764>





# References (2 of 3)

Defense Health Agency. (2025). inTransition. <https://www.health.mil/Military-Health-Topics/Centers-of-Excellence/Psychological-Health-Center-of-Excellence/inTransition>

Kearns, J. C., Edwards, E. R., Finley, E. P., Geraci, J. C., Gildea, S. M., Goodman, M., & Kessler, R. C. (2023). A practical risk calculator for suicidal behavior among transitioning U.S. Army soldiers: results from the Study to Assess Risk and Resilience in Servicemembers-Longitudinal Study (STARRS-LS). *Psychological Medicine*, 53(15), 7096–7105.

doi:10.1017/S0033291723000491

O’Neal C. W., & Mancini, J. A. (2021). Military families’ stressful reintegration, family climate, and their adolescents’ psychological health. *Journal of Marriage and Family*, 83, 375–393. DOI:

<https://doi.org/10.1111/jomf.12711>

Onward Ops (2025). Onward Ops. <https://onwardops.org/>

Ravindran, C., Morley, S., Stephens, B., Stanley, I., Reger, M. (2020). Association of suicide risk with transition to civilian life among US Military service members. *JAMA Network Open*.

3(9):e2016261. doi:10.1001/jamanetworkopen.2020.16261

Rossiter, A. G., & Ling, C. G. (2022). Building resilience in US military families: why it matters. *British Medical Journal Military Health*, 168(1), 91–94. [https://doi.org/10.1136/bmjmilitary-2020-](https://doi.org/10.1136/bmjmilitary-2020-001735)

[001735](https://doi.org/10.1136/bmjmilitary-2020-001735)

Schafer, A. (2017). The warrior caste: America increasingly relies on a small group of multigenerational military families to fight its wars. That’s a problem, *Slate*.

Shen, Y., Cunha, J., Williams, T. (2016). Time-varying associations of suicide with deployments, mental health conditions, and stressful life events among current and former US military

personnel: a retrospective multivariate analysis. *Lancet Psychiatry*. 3(11):1039–48. [https://doi.org/10.1016/S2215-0366\(16\)30304-2](https://doi.org/10.1016/S2215-0366(16)30304-2)

# References (3 of 3)

United States Census. (2008). US Population. <https://www.census.gov/topics/population.html>

Veterans Affairs. (2018). Veterans Affairs. The military to civilian transition. Washington, DC. <https://benefits.va.gov/TRANSITION/docs/mct-report-2018.pdf>

Veterans Affairs. (2023). Annual Suicide Report. [https://www.mentalhealth.va.gov/suicide\\_prevention/data.asp](https://www.mentalhealth.va.gov/suicide_prevention/data.asp)

Veterans Affairs. (2025). VA Post-9/11 Military2VA (M2VA) Case Management Program. [https://www.va.gov/POST911VETERANS/Post\\_911\\_M2VA\\_CM\\_Program.asp](https://www.va.gov/POST911VETERANS/Post_911_M2VA_CM_Program.asp)

Veteran Spouse Network. (2025). Veteran Spouse Network. <https://veteranspousenetwork.org/>



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# Questions?

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2. On the main event page, select the “Get Started” tab (located in the menu below the event title on desktop and at the bottom of the page on mobile devices). Note: This tab will not appear unless you are registered and logged in to your account.
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