A Shared Mission: Collaborative Strategies for Supporting Military Children with Special Needs

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CDP
Center for Deployment Psychology



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Jessica Strong, Ph.D., is a military family researcher specializing in the well-being of military and veteran families, serving as a Military Behavioral Health Child Social Worker at the Center for Deployment Psychology at the Uniformed Services University for the Health Sciences in Bethesda, MD. In this role, she supports the DoD Child Collaboration Study to identify best practices for enhancing and expanding accessibility to care for military-connected children and adolescents. Dr. Strong earned her doctoral degree in Social Work from Rutgers University in New Brunswick, NJ, her master's in social work at Fayetteville State University in Fayetteville, NC, and her bachelor's degree in social work from St. Mary's College in Notre Dame, IN.

Dr. Strong's work has focused on military families, spanning academic, nonprofit, and government sectors, underscoring her commitment to evidence-based practice and meaningful policy change. She has led and contributed to numerous publications addressing topics such as family resilience, the impacts of deployment, and the unique challenges faced by military-connected children. Prior to joining the Center for Deployment Psychology, Dr. Strong led the applied research team at Blue Star Families, designing, executing, and disseminating an extensive research portfolio on military and veteran families that advanced policy and programmatic support for military and veteran spaces, from congressional legislation to local school board policies. She also brings clinical experience in crisis counseling for youth as well as teaching and research experience as an assistant professor in social work at the University of North Carolina Wilmington.

As a military spouse and parent to military children, Dr. Strong brings both personal insight and professional expertise to her work, ensuring her research and advocacy are grounded in the lived experiences of the communities she serves.



Disclosures

Dr. Strong has no relevant financial or non-financial relationships to disclose relating to the content of this activity.

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Learning Objectives

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

- 1. Evaluate the unique challenges faced by military families with children who have special needs, particularly in the areas of relocation, deployment, and access to care.
- 2. Explain the barriers and facilitators to care for military and Veteran families, including systemic issues and stigma that impact children with special needs.
- 3. Analyze innovative solutions and resources available to support military families with special needs children, such as telehealth, peer support programs, and the efforts of organizations like the Center for Deployment Psychology.



<u>Overview</u>

- Military Families with Children Who Have Special Needs
- 2. Unique Challenges for Families
- 3. Barriers and Facilitators to Care
- 4. Innovative Solutions





DVIDS

Military Children Who Have Special Needs



<u>Preval</u>ence

23% of all youth have a disorder of mental health, emotion, development, or behavior (MEDB).

The prevalence of MEDB diagnoses and mental health care utilization has grown among military-connected youth.

1 in 5 military-connected children have special healthcare needs.



DVIDS



Military Families with Children Who Have Special Needs

51%

of active-duty
spouses with
children who live
at home report
they have at least
one child with an
impairment,
disorder, or
disability.

Children's Impairments, Disorders, and Disabilities

Active-duty spouse respondents with children who live at home (n=2462)

Text: Do you have a child with any of the following conditions?

None, my child(ren) does/do not have any of the following conditions	49%
ADHD	21%
Anxiety disorders	21%
Long-term physical conditions (medical condition, illness, or disability lasting longer than one year)	15%
Learning disability (dyslexia, auditory processing disorder, etc)	13%
Communication disorders (including speech or language impairment)	13%
Autism Spectrum Disorder	9%
Depressive Disorders	8%
Other	6%
Diagnosed behavior problem	3%



Military Family Challenges

Relocation

Family Separation

Most active-duty military families PCS every

2-3 years

38%

of active-duty families reported **time away from family** was a top concern.

81%

of active-duty spouses experienced at least one PCS move.

81%

of active-duty spouses report at least one separation in the past 18 months.



Separations and Deployments

- Stress and emotional impact
- Challenges in maintaining routines and consistency
- Difficulties with reintegration





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Relocation Challenges

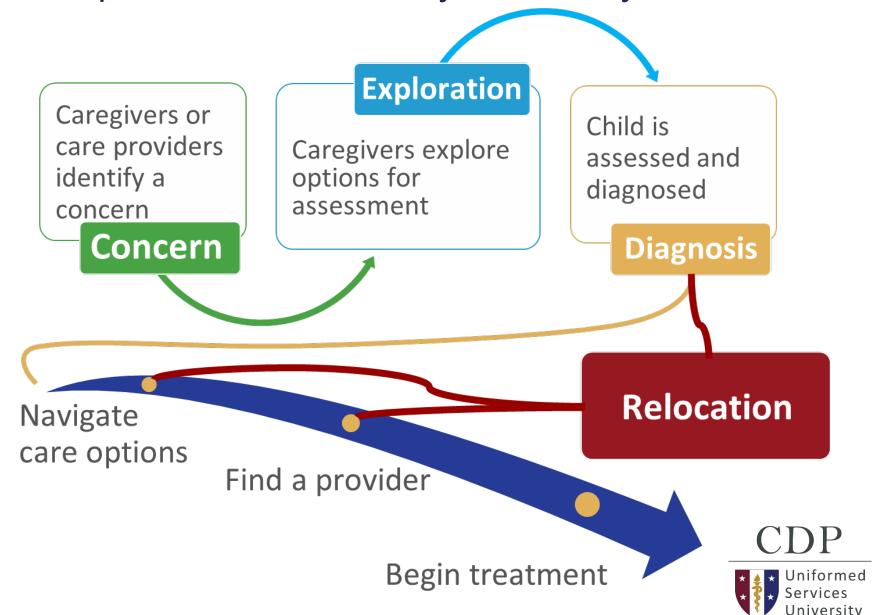
- Social Network Disruptions
 - Loss of emotional/tangible support
- Children's Education Disruptions
 - Curriculum Variation
 - Graduation Requirements
 - Special Education Services
- Healthcare Disruptions
 - Finding providers
 - Navigating new healthcare systems
 - Maintaining continuity of care



DVIDS



The Special Needs Journey for Military Families

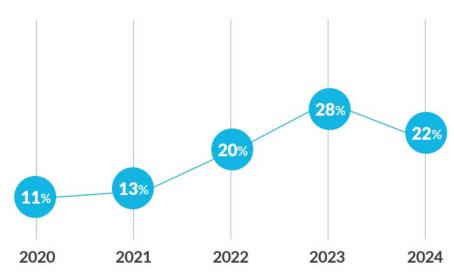


Health Care Access

- "Health Care Access" is an increasing concern for military families.
- Families report decreasing access to care and "ghost networks", especially for mental health care.
- Long wait times and inaccurate provider directories exacerbate the problem.

Figure 1: Access to Military/VA Health Care Reported as a Top Issue of Concern

Active-duty family respondents



Question text: Please select at least five military life issues that most concern you.

(Blue Star Families, 2025)





Barriers and Facilitators to Care

Barriers

- Limited continuity of care
- Relocations
- Lack of trained providers

The **top reason** active-duty families report for their child **not** receiving mental health care, when they would like them to, is the **lack of available providers.**

(Blue Star Families, 2022)

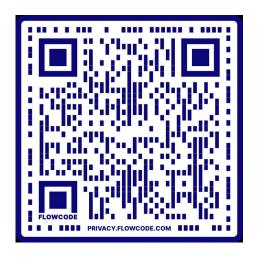
Facilitators

- Strong family support
- Mental health literacy
- Supportive school environments
- Access to programs, such as Exceptional Family Member Program (EFMP)



Center for Deployment Psychology (CDP)

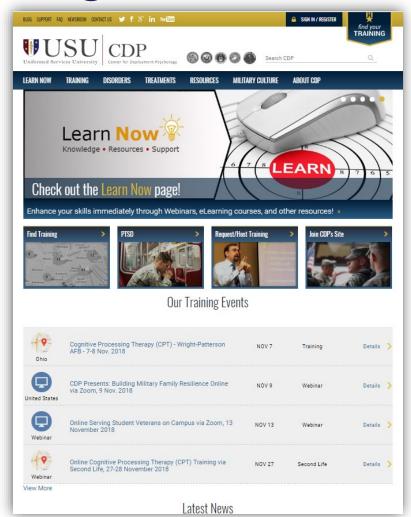
- Center of Uniformed Services
 University
- Military Behavioral Health
 - Training & Education
 - Convening of experts
 - Disseminating best practices and research
- DoD Child Collaboration Study





deploymentpsych.org

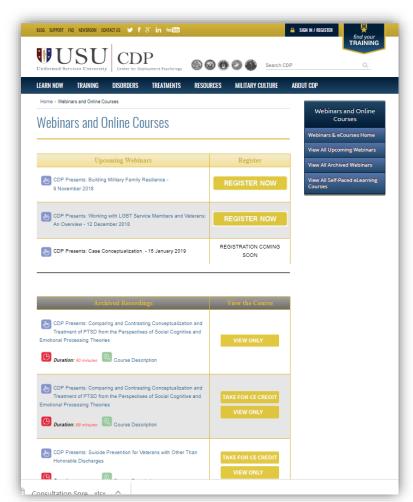
- Descriptions and schedules of upcoming training events
- Blog updated daily with a range of relevant content
- Articles by subject matter experts related to deployment psychology, including Post Traumatic Stress Disorder (PTSD), suicide prevention, depression, and insomnia
- Other resources and information for behavioral health providers
- Links to CDP's Facebook page and Twitter feed





Other Learning Opportunities

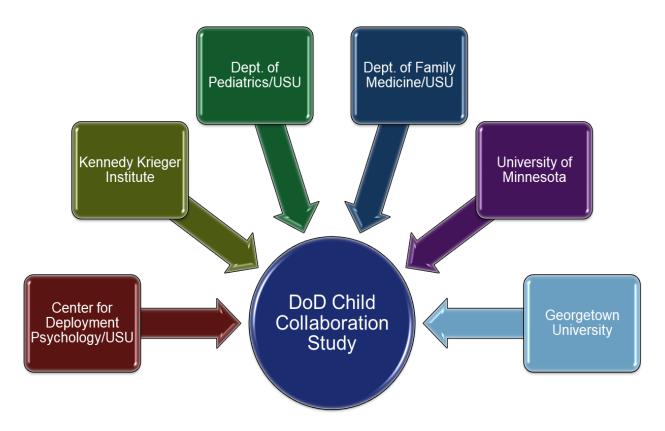
- CDP Presents Monthly Webinar Series
 - Live and archived
 - CEs free for live, small fee for ondemand CEs
 - View archived webinars free for no CEs
- On-demand Courses
 - Military Children
 - Military Culture
 - Deployment Cycle
 - Intro to Prolonged Exposure (PE) and Cognitive Processing Therapy (CPT)
 - ...and more!





DoD Child Collaboration Study

Partnerships- 2023



Project ECH®

Extension for Community Healthcare Outcomes

- Kennedy Krieger: Military, civilian providers (interdisciplinary),
 MEDB early childhood (birth to 8).
- University of Minnesota: Community providers

 (interdisciplinary) supporting children with MEDB in early childhood and school age, special focus on geographically dispersed populations (early childhood-school age).
- Georgetown University
 - Pediatric Provider Environmental influences on Child Health Outcomes (ECHO)- focus on age 9-21, military/civilian Primary Care Providers (PCPs)
 - School-based clinician ECHO- Mental Health provider/counselors, teachers, admin



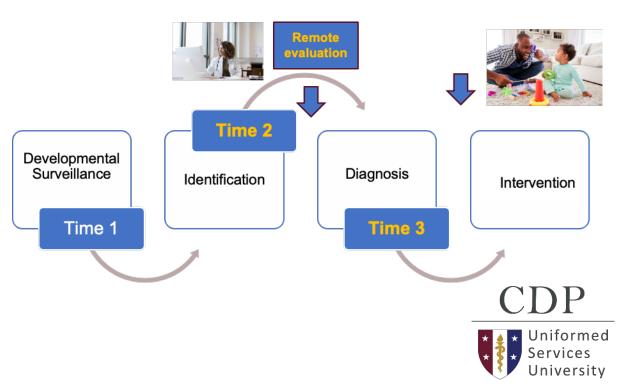




Bridges2Families: Caregiver Training and Telehealth Platform

- Early Intervention recommended for children with autism and related Behavioral Health (BH) needs,
- Extensive barriers to BH access = lengthy wait times of 9-18+ months,
- Supplemental support models of synchronous caregiver coaching and training delivered remotely to families in their homes via telehealth leads to improved timing of initial access to care.

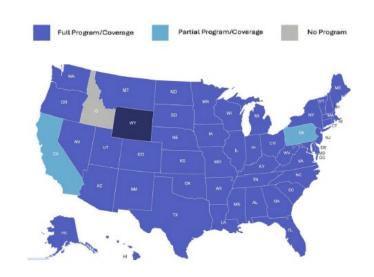




Child Psychiatry Access Program (CPAP

Pediatric Mental Health Care Access Programs (PMHCAs)

- Developed in response to severe provider shortage
- Goal = expand capacity of PCPs to manage Mental Health by providing indirect (curbside) consultation, resource/referral assistance, trainings
- Don't specifically track military kids, little training
- Military primary care physicians may lack awareness and utilization of CPAPs
 - Currently surveying state CPAPs
 - Goal to create trainings for PCPs, CPAP consultants & care coordinators to improve service to military kids



Digital Parenting Platform

Available anywhere, anytime (nearly)

Self-paced

Lower cost

STEP 2

digital platform

Create

digital

Convert to

STEP 1

format

STEP 3

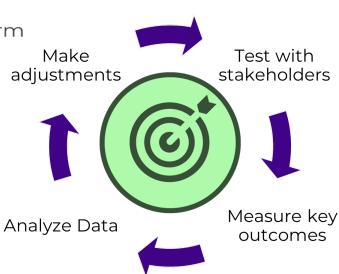
Establish a feedback

loop

Disseminate to families in need

STEP 4







<u>Takeaways</u>

- Military families with children who have special needs face unique challenges related to relocation, deployment, and healthcare access, which often disrupt continuity of care and education.
- 2. Barriers to care include provider shortages, stigma, and digital literacy issues, while facilitators involve family support, mental health literacy, and community-based resources.
- 3. Innovative solutions like telehealth, peer support programs, and training initiatives aim to improve access and quality of care for military-connected children and their families.



Resources

Organization	What They Do	Website
Center for Deployment Psychology/ Uniformed Services University (USU)	Convene the Collaboratory, provide live and asynchronous trainings for providers who treat military families.	www.deploymentpsych.org
Military OneSource	Central online resource for military families on a number of topics, and offers 24/7 support.	militaryonesource.mil
Exceptional Family Member Program (EFMP)	Provides support for military families with special needs.	militaryonesource.mil/speci al-needs/efmp/
Military Child Education Coalition (MCEC)	Provides programming and advocates for quality education and support for military-connected children.	https://militarychild.org/
Partners in Promise	Advocates to protect the rights of military children in special education.	https://thepromiseact.org/



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QUESTIONS?





How to Obtain CE/CME Credits



2025 APR CCSS: Cultivating the Wellbeing of our Military Children, Youth and Families

Credits are awarded by session. To claim CE/CME credit for the session(s) you attend, complete the course evaluation and posttest for each session by **11:59 PM ET on Thursday**, **May 8**, **2025**.

- 1. Visit the main event page at https://www.dhaj7-cepo.com/content/military-children-and-families-2025 to register for the live event or to log in to your account if already registered.
- 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.
- 3. Under the "Get Started" tab, scroll down to a session you attended and select "Claim credit."
- 4. Proceed to take the evaluation and posttest to obtain your certificate after the session has ended.

All completed courses and certificates are available in <u>your account</u>. Refer to your <u>Pending Activities</u> for sessions you have yet to complete. You must complete the required course items by <u>Thursday</u>, <u>May 8</u> to receive credit.

Questions? Email DHA J7, CEPO at dha.ncr.i7.mbx.cepo-cms-support@health.mil.

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