

Deployment Resources for Service Members and Their Families

## 2006 CUSTOMER FEEDBACK INITIATIVE (CFI)

*Sponsored by the Department of Defense*

*Joint Task Force for Family Readiness Education on Deployments  
(JTF FRED)*



2006  
CUSTOMER FEEDBACK INITIATIVE

Department of Defense  
Joint Task Force for Family Readiness Education on Deployments

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Joint Task Force for Family Readiness Education on Deployments  
Member Organizations

DoD  
Military Community & Family Policy (MC&FP)  
Force Health Protection & Readiness (FHP&R)  
Reserve Affairs (RA)  
National Guard Bureau (NGB)  
European Command (EUCOM)

Army  
Center for Health Promotion & Preventive Medicine (USACHPPM)  
Family & Morale, Welfare & Recreation Command (FMWRC)

Navy  
Naval Medical Center San Diego  
Personal Development Command  
Installations Command

Air Force  
Airman, Family & Community Operations Branch (Randolph AFB)  
HQ, Airman & Family Services Division

U.S. Coast Guard

Military OneSource  
National Military Family Association (NMFA)

## EXECUTIVE SUMMARY

In 2006, members of the Joint Task Force for Family Readiness Education on Deployments and the Department of Defense (DoD) Deployment Health Risk Communication Working Group implemented a worldwide Customer Feedback Initiative (CFI) to acquire important information related to the development and dissemination of deployment-related information to Service members and their families. This CFI report provides feedback from Service members and their families, Command leaders, and family support and medical personnel answering two fundamental questions: “What kind of deployment-related information do Service members and their families need during the deployment cycle?” and “How do they prefer to receive deployment support information?”

The information for the 2006 CFI was captured during a series of focus groups consisting of representatives from all Military Services, spouses and parents of Service members. Inputs from 16 locations were evaluated, including six Army, four Air Force, four Navy/Marine Corps, and two National Guard Bureau sites. The 291 participants included Active Duty, National Guard and Reserve officers, enlisted, and family members from 42 on-site focus groups, one mail-in group, and one conference call group.

*The CFI identified five recurring deployment support needs:*

- *More deployment preparation and reintegration information and support*
- *More mental health services and emotional support materials*
- *Better communication between Commands, Service members and families*
- *Quicker and easier access to local and regional information*
- *Expanded emphasis on preventive medicine education related to deployment*

This report includes recommendations for improving the Deployment Health and Family Readiness Library, <http://deploymenthealthlibrary.fhp.osd.mil>, deployment-related information and delivery, and sustaining the feedback process. A more fully integrated support system to share deployment information, resources and success stories is essential for the well-being of deployed Service members and their families. Special outreach and training materials are required for Commanders and Commands, the National Guard, Reserve Component, and parents of deployed Service members to satisfy their unique needs.



## 2006 Customer Feedback Initiative

### Table of Contents

<b>I. Background</b>	1
<b>II. 2006 Customer Feedback Initiative</b>	2
<b>III. Methodology</b>	2
<b>IV. Findings</b>	5
<b>V. Conclusions</b>	13
<b>VI. Recommendations</b>	19
<b>VII. Appendices</b>	
<i>Appendix 1. Focus Group Questionnaire</i>	23
<i>Appendix 2. Focus Group Demographic Results</i>	26
<i>Appendix 3. Focus Group Methodology and Materials</i>	27
<i>Attachment 1. Online, Local and Regional Deployment Support Resources</i>	32
<i>Attachment 2. Equipment Needs</i>	36
<i>Attachment 3. Facilitator Assistants Contact Form</i>	37
<i>Attachment 4. Facilitator Checklist</i>	38
<i>Attachment 5. Focus Group Process and Guidance</i>	40
<i>Attachment 6. Focus Group Data Cover Sheet</i>	43
<i>Attachment 7. Ground Rules and Lessons Learned</i>	44
<i>Attachment 8. Focus Group Demographic Questionnaire</i>	45
<i>Attachment 9. JTF FRED Facilitator Tips</i>	47
<i>Attachment 10. Basic Facilitation Skills</i>	50
<i>Attachment 11. Deployment Health and Family Readiness Library     Homepage and Selected Screen-Shots</i>	51
<i>Attachment 12. Sample Content #1</i>	59
<i>Attachment 13. Sample Content #2</i>	61
<i>Appendix 4. Detailed Findings from Focus Group Feedback</i>	63
<i>Appendix 5. Acronyms, Abbreviations, and Brevity Codes</i>	78
<i>Appendix 6. Action Memo</i>	79



## I. BACKGROUND

In July 2004, the National Military Family Association (NMFA) published a report entitled *Serving the Home Front: An Analysis of Military Family Support from September 11, 2001 through March 31, 2004*. This report provided a snapshot of deployment support for Military Service members and their families from September 11, 2001, through the first eighteen months of the Global War on Terror (GWOT). In late 2004, NMFA conducted a follow-on Return and Reunion Survey on its Web site (<http://www.nmfa.org>), which indicated a need for further input from Military Service members and families regarding the effects of multiple and extended deployments.

In August 2004, a parallel effort by the Office of the Assistant Secretary of Defense (Health Affairs) (OASD [HA])/ Force Health Protection and Readiness (FHP&R) established the Deployment Health Risk Communication Working Group (DHRCWG). The purpose of the DHRCWG was to develop more consistent information across the Military Services regarding deployment-related exposures and emerging health concerns throughout the cycles of deployment. A primary task of DHRCWG is to acquire, develop and provide fact sheets, deployment support materials and links to peer-reviewed, accurate, and validated information about deployment health issues to three specific audiences: Service and family members, Commanders, and clinicians. DHRCWG subsequently established the online Department of Defense (DoD) Deployment Health Library (<http://DeploymentHealthLibrary.fhp.osd.mil>) to provide access to a collection of Service deployment health-related support materials.

Using lessons learned from NMFA's online Return and Reunion Survey, NMFA published a second report in 2005 entitled, the *National Military Family Association Report on the Cycles of Deployment Survey: An Analysis of Survey Responses from April-September 2005*. Seventy percent of respondents offered comments and personal stories regarding their deployment experiences. This report concludes "Commanders, rear detachment/rear party personnel, family center staff, chaplains, and family readiness volunteers must continually devise innovative ways to reach out to families, gauging what they need and meeting those needs. A consistent level of resources is crucial in giving them the flexibility to create the comprehensive, response support system families need in order to succeed in the face of repeated deployments."

During the spring of 2005, DHRCWG added mental health and family readiness information to its online Library at the request of the Joint Task Force for Family Readiness Education on Deployments (JTF FRED). JTF FRED member organizations include the DoD Office of Military Community and Family Policy; DoD Office of Reserve Affairs; Army, Navy, Marine Corps, Air Force, and Coast Guard family programs; United States Army Center for Health Promotion and Preventive Medicine (USACHPPM); Naval Medical Center San Diego; Military OneSource; National Guard Bureau; and the NMFA. The name of the library changed to reflect its broader focus: Deployment Health and Family Readiness Library, at <http://DeploymentHealthLibrary.fhp.osd.mil>.

During their first year of operations, JTF FRED and DHRCWG made a strong commitment to establish an ongoing dialog with Service and family members, Commanders, medical clinicians and family readiness service providers for the purpose of monitoring the evolving deployment support informational needs of these target audiences. The importance of directly asking Military members and their families what they need for help with deployment issues on an ongoing basis is well-established.

## II. 2006 CUSTOMER FEEDBACK INITIATIVE

With the help of JTF FRED member organizations, JTF FRED launched a worldwide Customer Feedback Initiative (CFI) in the summer of 2006. The main purpose of the CFI Initiative (Phase I) was to establish ongoing dialog with Service members and their families in a deployment status. This 2006 CFI Report will be used to improve the Deployment Health and Family Readiness Library, and to communicate with those who provide deployment support information and support services throughout the DoD. Phase II (proposed for 2008) will focus on establishing dialog with deploying Commanders, medical clinicians, and family readiness service providers. The CFI reports will be used to capture deployment support needs and recommendations expressed through ongoing and expanding dialogue.

## III. METHODOLOGY

Using focus group methodology and materials, the CFI Initiative (Phase I) asked Service and family members three basic questions (see full questionnaire at Appendix 1):

1. *What do Service and family members need during deployments and redeployments?*
2. *What preferences do Service and family members have for receiving deployment information and support?*
3. *What do Service and family members think about the Deployment Health and Family Readiness Library and its content?*

To answer these questions, the Military Services selected 16 focus group locations and provided on-site group facilitators to capture customer feedback data. Service and family members (291) participated in 42 focus groups worldwide. Focus group participants included males and females, E-1 through O-6 pay grades, Active Duty, National Guard and Reserve Components, spouses, and parents. Some participants served in more than one Service and/or had prior Military Service experience but were not currently in the Service.

Site locations were selected on a voluntary basis. Extensive efforts were made to include a broad range of deploying Commands to include installations across the United States, those that are forward deployed, and those from overseas Pacific and European Commands:

**6 Army locations:** *Camp Zama, Japan; the DoD Force Health Protection Conference in Albuquerque, New Mexico; Fort Jackson, South Carolina; Fort Monroe, Virginia; Fort Lewis, Washington; and Fort Bragg, North Carolina*

**4 Navy/Marine Corps locations:** *San Diego Naval Station, California; Camp Pendleton, California; Miramar Marine Corps Air Station, California; and Murphy Canyon, California*

**4 Air Force locations:** *Lakenheath Royal Air Force Base, United Kingdom; Eglin Air Force Base, Florida; Offutt Air Force Base, Nebraska; and Charleston Air Force Base, South Carolina*

**2 National Guard locations:** *Philadelphia, Pennsylvania; and Fort Belvoir, Virginia*

The focus groups demographic data (see Appendix 2) were analyzed by FHP&R. The USACHPPM and the Office of Military Community and Family Policy (MC&FP) provided a focus group questionnaire (Appendix 1) and demographics questionnaire (Attachment 8), training materials, and a focus group tool kit to help on-site facilitators recruit and capture data from focus group participants (see Appendix 3).



## IV. FINDINGS

The 2006 CFI (Phase I) findings were produced using qualitative analysis techniques. Overall, the findings confirm that the deployment support needs identified by NMFA in 2004 and 2005 remain valid. However, the findings in this report expand on what is known about deployment support needs during the Global War on Terrorism, particularly in an environment where communication technologies are rapidly converging to form new integrated and participatory social media.

Following is a summary of the focus group results in key topic areas. Results include the combined feedback from all focus group participants. The results were not analyzed by demographic categories, although some generational differences are noted. As often as possible, data was captured and reported in the participants' own words.

*"In-person contact is very important—Life is complicated. A few links is not a solution. You need information **and** personal assistance."*

### Deployment Support Needs

The Service and family members, especially those new to the Military and new to deployments, asked for information and assistance in the following areas:

- *Improved communications between the local Command, Service members, and families*
- *Family support*
- *Child care resources*
- *Deployment cycle information*
- *Emergency contact information*
- *Help dealing with the emotional aspects of deployment*
- *Financial assistance*
- *Health issues for Service members while deployed*
- *Information about Identification (ID) cards*
- *Legal assistance*
- *Medical services*
- *Mental health services*



## Communication Preferences

Military Service members and their families prefer to receive information about the deployment and status of deployed members from their Service member's local Command and in person from people they trust. They said it would be helpful if there were:

- *In-person gatherings with Command leaders, spouse leaders, and families*
- *Regular phone contacts from Command leaders and Command representatives*
- *A spouse advocate – a central referral point for spouse-related information*
- *Strong Family Readiness Groups and yellow-ribbon (installation or regional) support groups for mutual support*
- *An active Web-based message board for spouses/families/friends*
- *A Military spouse portal on the Internet*
- *Outreach contacts for parents, significant others, and National Guard and Reserve Component family members*
- *Regular visual/video contacts with deployed Service members*
- *Email to and from deployed Service members*
- *"A Family Guide for Military Deployments" brochure*
- *Community resource guides (e.g., installation, regional, Command unit and Military Service-specific deployment information)*
- *eNewsletters and hard copy newsletters*
- *Hardcopy resources sent by "snail mail" to put into "Battle Book" notebooks for reference purposes*
- *Electronic copies of support materials to email friends and family*

Service members and families want installation support personnel at base agencies to understand the importance of helping spouses and children, helping them feel welcome and not forgotten while the Service member is deployed. Many families are not connected to the Command. They need a place to "check in" on a regular basis, a place where they can feel comfortable asking for help if needed.

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*"As long as things are okay, we don't need to look at Web sites."*

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Generational differences became apparent during discussion of media preferences for receiving information. A number of older individuals said, "As long as things are Okay, we don't need to look at Web sites." Younger Service and family members prefer using the Internet and handheld devices to seek, send,

share and store information. They particularly like to have information "pushed electronically" to them. A multi-media outreach effort is needed to span the different age groups of stay-behind families.

## Comfort Using the Internet

Focus group facilitators asked participants how comfortable they were with using the Internet and found that 50percent of respondents are comfortable using the Internet; 40percent are somewhat comfortable; and 10percent are uncomfortable. The lack of comfort with the Internet appeared predominantly with older participants.

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*Spouses say, "We sites need to be recommended by someone you trust; otherwise spouses won't find out about them or give them credibility"*

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## What Makes a Web site Useful or Hard to Use?

**The Service and family members said that effective Web sites are those that have:**

- *Everything you need on one Web site, but not too much information*
- *Direct links to good resources*
- *A phone number of someone you can call if you need additional help*
- *A good search engine*
- *Content written in "plain English and plain Spanish"*

**The participants said Web sites are hard to use if:**

- *Uniform Resource Locator (URL) is too long to remember*
- *Unsure if the Web site is official and a reliable source*
- *Has firewalls and log-in requirements*
- *Has too many topics*
- *Too many words and acronyms*
- *Requires too much searching*
- *Outdated information*
- *Disorganized information*
- *Links that don't work*
- *Looks too intimidating*



### **Web site Preferences**

The Service members and their families trust their chain-of-Command Web sites as their number one source of information. They are loyal to these sites but also have additional “favorites,” including those related to medical and family support. Large commercial search engines are heavily used. With the exception of a strong preference for unit- or Command-sponsored Web sites, the Web sites are not listed in a particular order or priority.

#### **Command Sponsored Web sites:**

Garrison/Installation Web sites:

1. Fort Bragg: <http://www.bragg.army.mil>
2. Offutt Homepage: <http://www.offutt.af.mil>
3. Offutt Enlisted Spouses Club: <http://www.OffuttEnlistedSpousesClub.com/worldwide.html>
4. Army Community Services (ACS) Web sites at the garrison level

Major Command Web sites:

1. 5th Corps: <http://www.vcorps.army.mil>
2. USAREUR Blue Box (G-1 Web site): <http://www.per.hqusareur.army.mil/bluebox/resources.htm>
3. USAREUR Post Reintegration Community Resource Guide Web site: <http://www.per.hqusareur.army.mil/postreintegration>

Health Promotions Web sites:

1. USACHPPM (U.S. Army Center for Health Promotion & Preventive Medicine): <http://chppm-www.apgea.army.mil>
2. Hooah4Health: <http://www.hooah4health.com>

#### **Commercial Web sites:**

1. CNN: <http://www.cnn.com>
2. Google: <http://www.google.com>
3. Military.com (respondents noted “They push good information to you.”): <http://www.Military.com>
4. Yahoo: <http://www.yahoo.com>

#### **Family Support Web sites:**

1. AFCrossRoads: <http://www.afcrossroads.com>
2. ArmyFamiliesOnline: <http://www.ArmyFamiliesOnline.org>
3. Army MWR Web site: <http://www.armymwr.com>
4. Marine Corps Community Services (MCCS): <http://www.usmc-mccs.org>
5. MyArmyLifeToo: <http://www.MyArmyLifeToo.com>
6. Navy LIFELines: <http://www.lifelines.navy.mil>

#### **Government Web sites:**

1. Department of Veterans Affairs: <http://www.va.gov>
2. Federal Government’s Web Portal: <http://www.USA.gov>
3. U.S. and State Government Web site

#### **Large Military Web Portals:**

1. Army Knowledge Online (AKO): <http://www.army.mil/ako>
2. Defense Finance and Accounting Service (DFAS): <http://www.dfas.mil>
3. SITES (migrated to MilitaryINSTALLATIONS and Plan My Move): <http://www.Militaryinstallations.dod.mil/ismart/MHF-MI>
4. Military OneSource (a.k.a. Army OneSource): <http://www.MilitaryOneSource.com>
5. MyPAY.gov: <https://mypay.dfas.mil/mypay.aspx>

#### **Medical Web sites:**

1. Navy Medical Center San Diego: <http://www-nmcscd.med.navy.mil>
2. TRICARE: <http://www.tricare.mil>
3. TRIWEST: <http://www.tricare.mil/westTSC>

#### **Military-Related Associations:**

1. Military Officers Association of America (MOAA): <http://www.moaa.org>
2. National Military Family Association (NMFA): <http://www.nmfa.org>
3. Reserve Officers Association (ROA): <http://www.roa.org>

**Experience with the Deployment Health and Family Readiness Library**

Nearly all focus group members were viewing the Deployment Health and Family Readiness Library and sample content materials for the first time. A public awareness marketing campaign is clearly needed for the library.

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*"Awesome!" "I've been all over the site. It's great!"*

*"I printed off as much as I could from the site and put it in a book."*

*"What we really need is resources! Give us guides, handbooks, indexes, links."*

*"Very resourceful!" "Easy to use."*

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*"Too much information on one page. It's daunting to spouses."*

*"Looks like it is for professionals, not for the average family member."*

*"Scary medical information ... I thought this site was for family readiness."*

*It seems to be more for soldier readiness."*

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Detailed findings and specific recommendations from focus group participants are available in Appendix 4. This detailed information may be useful for Command leaders, action officers, and policy makers to address deployment-related concerns, and to facilitate the development of appropriate messages and communication products locally. The intention of JTF FRED and DHRCWG is to share detailed findings from this Phase I effort with those who provide deployment support, in the hope of minimizing gaps in information and integration of deployment support services throughout the DoD.



## V. CONCLUSIONS

Overall, focus group participants said online information is greatly needed and appreciated, but it is not enough. Service and family members need regular contact with their Command leaders and spouse care coordinators as well as each other for mutual support and mentoring. An integrated system of support in which Commands, Family Readiness Groups, service providers and Service and family members can connect for the purpose of sharing information, resources and success stories is essential for the well-being of deployed Service members and their stay-behind families. Special outreach is required for National Guard, Reserve Component, and parents of deployed Service members.

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*"This is our first deployment and at this time  
I don't know what I'll need!"*

---

A number of recurring themes regarding unmet deployment needs emerged as focus group members throughout the Military Services made similar comments, requests and recommendations. Additional details and representative quotations from group participants can be found in Appendix 4.

### **THEME 1: Need for More Deployment Preparation and Reintegration Information and Support**

Service and family members know that deployment experiences will change them as individuals, couples and families. They need information and assistance in preparing for these changes. They are concerned about re-negotiating roles and responsibilities once the Service member comes home. They need emotional support and stress management skills throughout the cycles of deployment.

Ongoing contact with the Command is essential for the well-being of Service and family members. Spouses expressed the need for a place to check in for mentoring, support and assistance when help is needed.

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*"Would prefer a centralized place for all information  
related to spouse issues and deployments."*

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Outreach to young isolated spouses, parents of Service members, significant others, child care providers of single Service member's children, and the National Guard and Reserve Component needs improvement. Outreach efforts focused toward these groups would likely increase awareness and understanding of the deployment cycle as well as enhance connectedness between Command and the deployed Service member.



Stay-behind families need up-to-date local community resource guides with points-of-contact for help when needed. Strong Family Readiness Groups, Yellow Ribbon Rooms where families can stay in touch with deployed Service members via the Internet and a Web-cam, and spouse advocates (or care coordinators) were frequently requested to help keep families engaged throughout the cycles of deployment.

**THEME 2: Need for More Mental Health Services and Emotional Support Materials**

Service members and families alike want to know if their emotions are normal and if not, when, how and where to seek help. Spouses want their Command leaders to acknowledge their pain, sacrifices, and contributions. Family members report a lack of information about mental health services for spouses, and a significant lack of support resources for children. Although respondents were generally aware of Military OneSource, they did not know what family resources were available through this site or elsewhere.

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*“Give me true stories about Service members and families who have successfully coped with deployment stress” ...  
“testimonials, real answers and solutions.”*

---

Service members and their families want confidential ways to self-assess as well as confidential assistance if needed. Some participants expressed concerns and fear about the stigma associated with seeking help, especially for Service members, despite a DoD-wide effort to de-stigmatize mental health support.

Service members and their families need more than a Web site or professional counselor. They want to talk to someone with deployment experience. They want to see and hear from those who have gone through deployments successfully. They believe testimonials and talking about real problems and real solutions will help. They need validation that they are Okay, even though they are highly stressed, angry and afraid.

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*“All information on the web is useful for the Guard and Reserve!”*

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Focus group participants from the National Guard and Reserve Component expressed a strong desire for the Command to improve the way they inform their Service members and families about deployment support and mental health services, since most of these families do not live on or near a Military base. An important suggestion from National Guard and Reserve Component members and families is to

have a “primary care manager for deployments,” similar to primary care managers for healthcare – one person dedicated to being that resource link, someone they can reach out to and receive guidance from. Several respondents called such a person a “spouse advocate” or “care coordinator.”

**THEME 3: Need for Better Communication between Commands, Service Members, and Families**

Service members and their families shared that they do not want Command leaders to assume they can handle deployments alone just because they have gone through deployments before. Since September 11, 2001, deployments are different. Deployments have become longer, more dangerous, and occur back-to-back more frequently.

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*“Every deployment is different. They do not get easier.  
You still need help even if you’ve gone through deployments before.  
As we master old issues, new ones come up.  
Don’t assume we can handle it.”*

---

Service members and families want their Command leaders to understand their pain and emotions, and to appreciate and acknowledge their contributions. They are looking to their Commands as the primary source of trusted information and support services.

Enlisted and officer families need regular communications with Command leaders, stay-behind or rear detachment personnel, Command volunteers and their Service member. They want to constantly have access to the status of Command activities, deployment schedules, and health and welfare issues for their loved ones. They also recognize the need for operational security, and want more information in that regard so they can stay connected yet still comply with necessary security parameters.

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*“Use of the Internet has made separations easier due to increased communication possibilities.”*

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Parents of Service members and significant others are frequently left out of the loop, yet these individuals are frequently the ones who take care of single Service members’ children, personal finances, taxes, and personal property. Special efforts are required to reach these individuals since their contact information is not typically on family member rosters and most do not live on or near Military bases.

Some family members showed interest in receiving the same deployment information that is given to Service members, so they can be more confident and prepared to live alone for the duration of the

deployment. Specifically, they wanted reassurance that the Service member has taken care of all the legal and financial responsibilities for the stay-behind family members.

In today's changing deployment environment, it would be of value if the Command leaders, volunteers and families had accurate emergency point-of-contact information and guidance regarding the casualty notification process so they can be prepared.

**THEME 4: Need for Quicker and Easier Access to Local and Regional Information**

General deployment information is a valuable starting place, but what families communicated as particularly valuable is local and regional information. Children of deployed Service members often need help coping with the absence of their parents, but few resources are available. Spouses do not know where to go for support information and services, specifically for children (e.g., the Naval Medical Center San Diego, CA, <http://www.nmcsd.med.navy.mil/> or the [www.MilitaryStudent.dod.mil](http://www.MilitaryStudent.dod.mil) Web site). Some were aware of Military OneSource resources [1-800-342-9647 (Continental U.S.) or 1-800-3429-6477 (Outside Continental U.S.); <http://www.MilitaryOneSource.com> ]. Spouses need individual problem solving assistance with identification cards, pay, allotments, and benefits. Spouses need help with taxes, legal matters and finances.

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*"These are the good Web sites ... but they are not enough."*

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Family members need better access to high quality medical care within the Military and civilian communities, especially specialty care, pregnancy, pre-natal, nurse advice and new parenting support. Spouses need well- and sick-baby advice, and vaccination schedule information. Several spouses said new parents get very stressed when the Service member is not there to help make decisions about a sick baby. Spouses need better access to affordable child care, especially hourly care. Many spouses have to quit their jobs due to lack of affordable child care.

**THEME 5: Need for Expanded Emphasis on Preventive Medicine Education Related to Deployment**

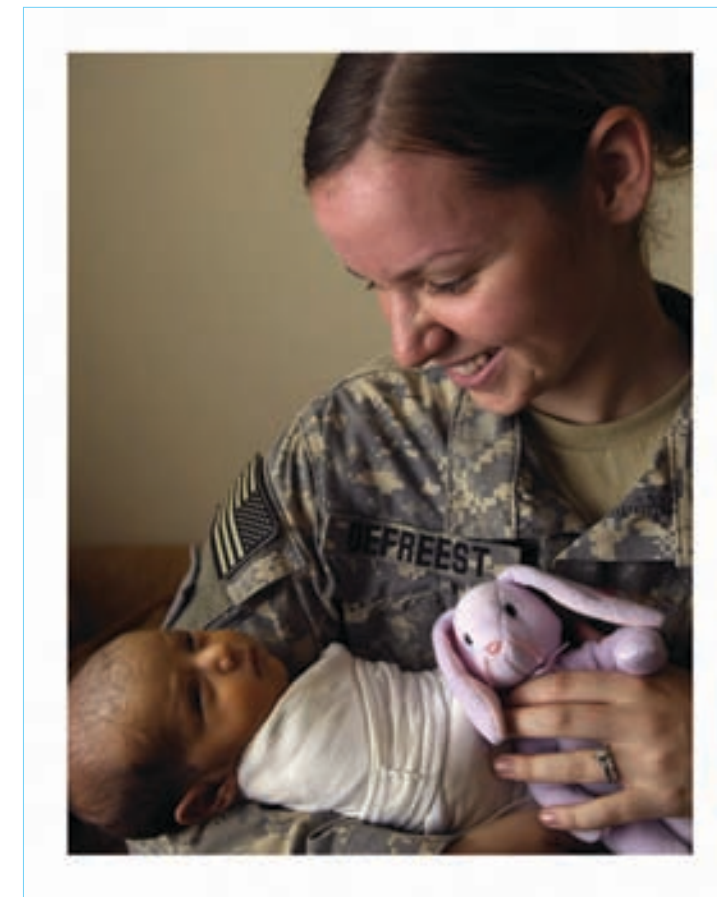
Interest in health issues increases as Service members move through the cycles of deployment. Once Service members are in theater and see stagnant water and bugs, their interest goes up. Service members and medical clinicians with deployment experience say these are the primary medical concerns of Service members deployed in 2006:

- Heat injury prevention
- DEET
- Dust

- Hand hygiene
- Side effects of vaccines (e.g., smallpox, anthrax, other Military vaccines)
- Pre- and post-deployment coping (predominantly Active Duty mothers)
- Safety issues
- Sports injuries prevention
- Sexual assault prevention and sexually transmitted diseases (Command leaders want briefings for their Service members)

Service members and clinicians say the online Deployment Health and Family Readiness Library will be especially helpful to individual augmentees who might not have access to all of the briefings by the Command units. Spouses say deployment health information is scary and they do not want their children to be exposed to this information. Many family members are not aware of the health risks of deployment but they do want their Service member to have online access to this type information.

Service and family members are aware of the safety risks of deployment and potential for severe injuries. They say Commands need to do a better job of capturing family member emergency point-of-contact information and providing casualty notification process guidance to families.



## VI. RECOMMENDATIONS

1. Share this 2006 Customer Feedback Initiative (CFI) Report widely.
  - A. Post the CFI Report on the Deployment Health and Family Readiness Library Web site for public access and promote cross-linking by Web masters serving Military audiences.
  - B. Provide copies of this report to DoD senior leadership and family support personnel providing deployment information (family readiness and health) to Service members and their families. Encourage sharing of model materials which address emerging deployment support needs.
2. Develop training materials for Commanders and Commands on preparing and supporting families before, during and after deployments.
3. Institutionalize the CFI process by continuing and expanding dialogue between partner organizations and target audiences.
  - A. Conduct Deployment Health and Family Readiness Library usability testing on an ongoing basis.
  - B. Seek regular feedback from key audience groups: Service members, families, Command leaders, medical clinicians, family readiness service providers, and relevant veterans and human service organizations.
  - C. Implement the online ForeSEE survey tool on Web sites containing family readiness and deployment support information (beyond the Deployment Health and Family Readiness Library which has already instituted this tool) to capture random sample customer feedback and continuously improve deployment information.
  - D. Embed a suggestions link into online deployment support materials that will allow users to provide feedback directly to content owners and developers.
4. Compare CFI Report findings and recommendations with current Deployment Health and Family Readiness Library Web site design, functionality and content holdings. Make needed improvements.
  - A. Identify gaps and opportunities for improvement in the Deployment Health and Family Readiness Library and its content. At a minimum, address usability issues and fill content gaps.
  - B. Enrich and improve the Deployment Health and Family Readiness Library by seeking more Command level Web site URLs, information and model materials and by developing information and marketing partnerships with Military Commands.



- C. Frequently update and add new content to the Deployment Health and Family Readiness Library.
  - D. Post "last date modified/updated" on the front page of the Library site and on DHRCWG and JTF FRED produced materials.
5. Develop a ListServ of family members from across the Military Services willing to provide ongoing feedback to JTF FRED regarding the Deployment Health and Family Readiness Library and its content holdings.
6. Implement a comprehensive marketing and communication plan that promotes integrated deployment support programs and proactively reaches out to Active Duty, National Guard and Reserve Components and their families, including parents and significant others.
- A. Incorporate social media/social networking strategies.
  - B. Work with webmasters of frequently used, customer preferred Web sites to market the Deployment Health and Family Readiness Library.



## VII. APPENDICIES

### Appendix 1. Focus Group Questionnaire (page 1 of 3)

#### JOINT TASK FORCE FOR FAMILY READINESS EDUCATION ON DEPLOYMENTS (JTF FRED) FOCUS GROUP QUESTIONNAIRE FINAL

- 0H00-  
0H05  
0H05-  
0H15  
0H15-  
0H17  
0H17-  
0H20
- 1) Introduction of facilitators
- 2) Introduction of focus group members
- 3) Introduction of focus group purpose
- 4) Orientation to the deployment cycle
- a. Provides group members with a common language
- b. Establishes facilitators in "expert" role
- 0H20-  
0H20  
0H20-  
1H05
- 5) Transition to focus group questions
- a. 1. "In your experience, what sorts of information have you needed during the deployment cycle?"
- i. Encourage focus group members to be as specific as possible
- ii. Provide examples (e.g., how to resolve pay problems, how to access medical services, how to communicate with deployed service members in an emergency)
2. "We're particularly interested in the emotional aspects of the cycles of deployment. What information do you need about the emotions surrounding deployments?"
- i. Behavioral/ mental health needs will likely have already been mentioned.
- ii. Probe for more specifics.
- iii. Stress that the index cards distributed at the beginning are for participant use to capture more information about deployment needs since we need to cover additional questions during the focus group.
- 1H05-  
1H10
- b. "How do you prefer to get deployment health and family readiness information?"
- i. Provide examples
1. Websites
2. Electronic Newsletters
3. Printed Pamphlets/Brochures
4. Printed Newsletters
- ii. "Are there any other informational formats that we have not considered?"





Appendix 1. Focus Group Questionnaire (page 2 of 3)

1H10-  
1H15 c. "On a scale of 1-3 (1 being not comfortable, 3 being completely comfortable), how comfortable are you using the Internet to get deployment and family readiness information?"

f) Briefly explain that the next part of discussion will focus on Internet use.

1H15-  
1H20 d. "What websites do you use regularly for deployment and family readiness information?"

- i. Create a list of all websites/resources mentioned
- ii. If necessary, provide examples (e.g., Military OneSource)

1H20-  
1H25 e. "What makes a website easy to use?"

- i. Use the list generated from previous question and go through each website/resource that are mentioned
- ii. For each resource discussed, cover the following questions...
  1. What did you like about the website?
  2. How easy was it to find information on the site?
  3. How well did the information on the site answer the questions that you had?

1H25-  
1H35 f. "What makes a website difficult or frustrating to use?"

- i. Provide examples if necessary (e.g., hard to find information on the site, the information on the site wasn't what you were looking for)
- ii. Use the list generated in question C to guide discussion

1H35-  
1H40 g. "Have you visited this website?" (provide screenshot of the FHP webpage from facilitator toolkit):  
<http://deploymenthealthlibrary.fhp.osd.mil/home.jsp>?

- i. If no, move to question "h."
- ii. If yes, ask "What did you think about this online library?"

Appendix 1. Focus Group Questionnaire (page 3 of 3)

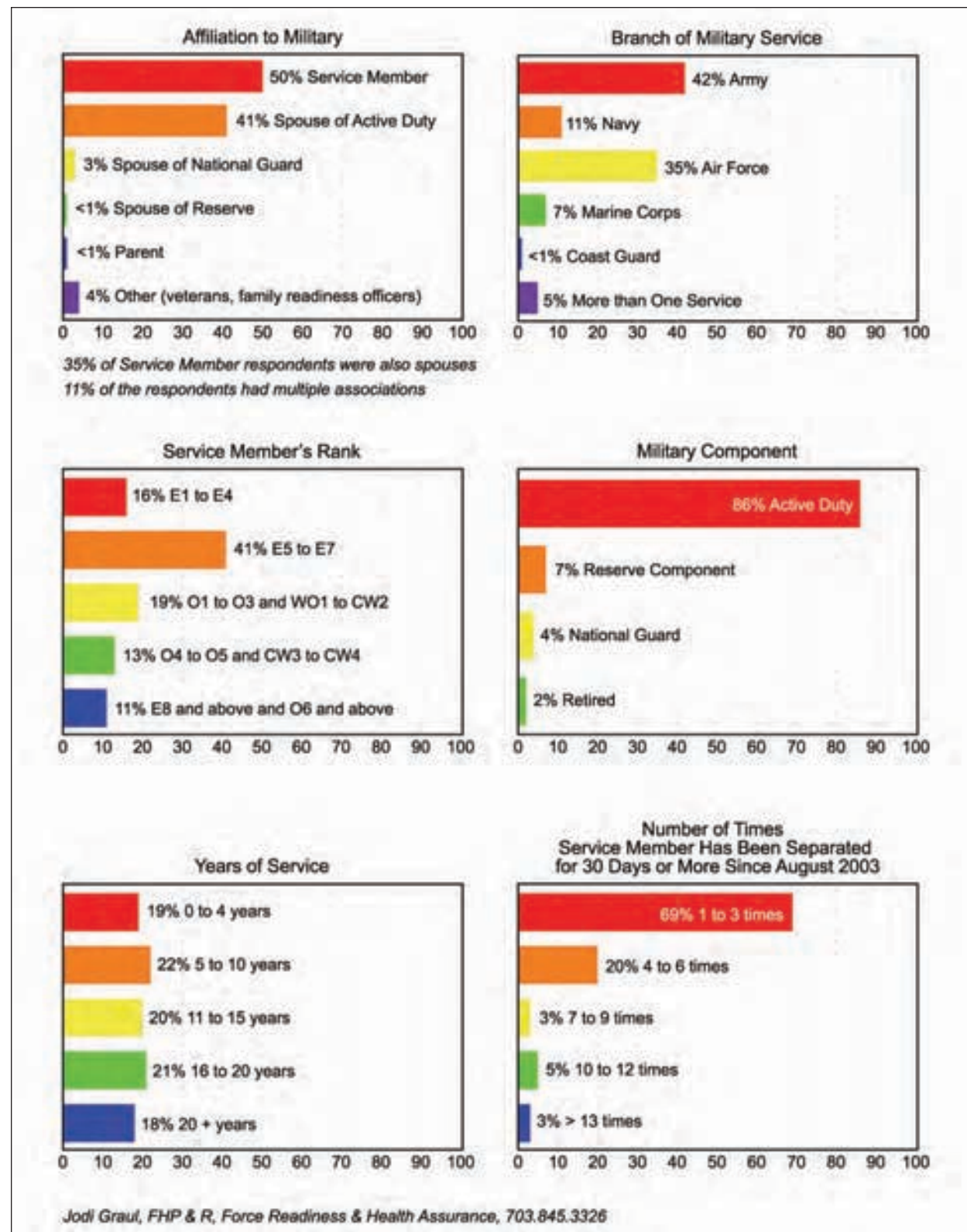
1H40-  
2H00 h. Show/ distribute 3 examples of library materials. "What do you think of these materials?"

- i. Focus on getting input on fact sheets developed by DHRCWG and/or FRED.
- ii. Probe for first impressions about overall "look," aesthetics.
- iii. Probe for likes/ dislikes about volume of information, fact sheet format, information flow and presentation, resources provided, etc.

2H00 6) Close focus group

- a) Thank focus group members for their participation
- b) "Is there anything that we should have asked you about but didn't?"
- c) Encourage the use of index cards for additional thoughts/ input
- d) Distribute Thank You packages, yours and/or CHPPM business cards, index cards for them to leave behind additional thoughts/ input
- e) Thank focus group members again for their participation

## Appendix 2. Focus Group Demographic Results



## Appendix 3. Focus Group Methodology and Materials (page 1 of 5)

APPENDIX 3  
FOCUS GROUP METHODOLOGY AND MATERIALS

I. Methodology

- Forty-two focus groups (including one mail-in group and one conference call group) were held in sixteen geographic locations worldwide. Selection of site locations and focus group facilitators was made by each military Service. Facilitator training, a standardized questionnaire, a demographic data sheet and a “toolkit” for carrying out facilitator duties was provided by the U.S. Army Center for Health Promotion and Preventive Medicine (USACHPPM) and the DoD Office of Military Community and Family Policy (MC&FP).
- Focus Group locations included:
  - 6 Army locations: Camp Zama, Japan; the Force Health Protection conference in Albuquerque, NM; Fort Jackson, SC; Fort Monroe, VA; Fort Lewis, WA; and Fort Bragg, NC.
  - 4 Navy/Marine Corps locations: San Diego Naval Station, CA; Camp Pendleton, CA; Miramar Marine Corps Air Station, CA; and Murphy Canyon, CA.
  - 4 Air Force locations: Lakenheath Royal Air Force Base, United Kingdom; Eglin Air Force Base, FL; Offutt Air Force Base, NE; and Charleston Air Force Base, SC
  - 2 National Guard locations: Philadelphia, PA; and Fort Belvoir, VA
- Total focus group participants were 291, including Active Duty, National Guard and Reserve Components, Spouses, and Parents of Service members.
- Demographic analysis was provided by DoD Force Health Protection & Readiness). See results at Appendix 2.
- Customer feedback data from all focus groups was analyzed by the Office of the Deputy Under Secretary of Defense (ODUSD), MC&FP/Educational Opportunities Directorate. Complete detailed findings are provided in Appendix 4.
- Primary Points of Contact for the data collection and analysis effort are Ms. Lori Geckle, USACHPPM/ 410-436-7709 / [Lori.Geckle@us.army.mil](mailto:Lori.Geckle@us.army.mil), and Dr. Randy Eltringham, ODUSD/MC&FP / 703-602-4949 ext 160 / [Randy.Eltringham@osd.mil](mailto:Randy.Eltringham@osd.mil).

1

- After the military Services selected their geographic site locations and focus group facilitators, phone calls were made and letters (example letter provided in Materials section) were sent out to family members in their catchments area, inviting them to participate and submit their input on a set of standardized questions.
- Family Support Centers were instrumental in reserving focus group meeting spaces, recruiting and coordinating focus group participants, arranging for child care, working with installation leaders who were responsible for scheduling pay grade/family member groups and serving as group facilitators.
- Standardized questions were asked of all focus group participants (See Questionnaire in Appendix 1). Group facilitators captured feedback data on:

Deployment support needs;

Communication/Media preferences;

Comfort level using the Internet;

What makes a website easy and hard to use;

Feedback on the online Deployment Health and Family Readiness Library and its content; and

General Recommendations.

## II. MATERIALS

### A. Facilitators Toolkit

A comprehensive Toolkit and training session was provided to the focus group facilitators to assist them in carrying out their duties.

Toolkit content:

1. Focus Group Questionnaire (Appendix 1)
2. Online, Local & Regional Deployment Support Resources (Attachment 1)
3. Equipment Needs (Attachment 2)
4. Facilitator Assistants Contact Form (Attachment 3)
5. Facilitator Checklist (Attachment 4)
6. Focus Group Process and Guidance (Attachment 5)
7. Focus Group Data Cover Sheet (Attachment 6)

8. Ground Rules and Lessons Learned (Attachment 7)
9. Focus Group Demographic Questionnaire (Attachment 8)
10. JTF FRED Facilitator Tips (Attachment 9)
11. "Basic Facilitation Skills" (published by The Human Leadership and Development Division of the American Society for Quality, the Association for Quality and Participation, the International Association of Facilitators, May 2002) (Table of Contents; Attachment 10)
12. Deployment Health and Family Readiness Library homepage and selected screen shots (Attachment 11)
13. Sample Content #1: *The New Emotional Cycles of Deployment* (Attachment 12)
14. Sample Content #2: *Service member & Family Assistance* (Attachment 13)

B. Letter to Military Service Family Members

After the military Services selected their site locations and focus group facilitators, a letter (or e-mail) was sent to all family members at each selected site, with the following content:

Dear Family Member:

Approximately two years ago, a webpage was launched that consolidates the wide variety of information about health and family readiness topics related to deployments. Contents of this webpage are overseen by two working groups that represent the interests of Service Members and families alike: 1) The Joint Task Force on Family Readiness Education on Deployments and 2) The Deployment Health Risk Communication Workgroup.

Now that this webpage has been in use for awhile, we would like for you to participate in a focus group discussion about the usefulness of this online information, and to help identify any other deployment readiness needs of military families. Your input will directly benefit families by helping identify deployment readiness information gaps and by helping to ensure that issues of greatest concern can be better addressed in a timely manner.

The focus group will be held on (DATE) at (TIME, INCLUDE BEGINNING & ENDING TIMES) at (LOCATION). Child care will be provided at no charge.

Thank you in advance for considering this invitation. Please contact (SERVICE-SPECIFIC FOCUS GROUP NAME/PHONE NUMBER/EMAIL) if you are able to participate. With your help, we will be better able to address the needs of military families. We look forward to seeing you on (DATE).

Sincerely,

Service-specific Focus Group POC  
Phone  
Email

C. Materials Provided to Focus Group Participants

Upon arrival to each site location, the focus group facilitators provided participants with an information package containing the following materials:

1. Focus Group Demographic Questionnaire
2. Deployment Health and Family Readiness Library homepage and selected screen shots
3. Sample Content #1: *The New Emotional Cycles of Deployment*
4. Sample Content #2: *Service member & Family Assistance*

### Appendix 3. Focus Group Methodology and Materials

Attachment 1. Online, Local & Regional Deployment Support Resources (page 1 of 4)

ATTACHMENT 1  
Online, Local & Regional  
Deployment Support Resources

Online Starting Places:

Deployment Health & Family Readiness Library:  
<http://deploymenthealthlibrary.fhp.osd.mil/>

Military OneSource: 1-800-342-9647 -- 24/7 Call Center  
See website for overseas phone numbers.  
[www.militaryonesource.com](http://www.militaryonesource.com)  
You name it. We can help -- 24/7!

MilitaryHOMEFRONT: [www.militaryhomefront.dod.mil](http://www.militaryhomefront.dod.mil)

CommandersPage: [www.commanderspage.dod.mil](http://www.commanderspage.dod.mil)  
Updates and resources for Flag and General Officers and their commanding officers

Local & Regional Information, Directories and Maps:

MilitaryINSTALLATIONS:  
<http://www.militaryinstallations.dod.mil/ismart/MHF-MI/>

Plan My Move:  
<http://apps.mhf.dod.mil/pls/psgprod/f?p=107:1:7485648639980925>

Use the above two online resources to get contact information and maps for your nearest military installation and resources in your surrounding local community.

Casualty Support

Chamber of Commerce/Visitors

Chapel/Chaplains

Child Care/Youth Services

Financial & Consumer Services

1

### Appendix 3. Focus Group Methodology and Materials

Attachment 1. Online, Local & Regional Deployment Support Resources (page 2 of 4)

Education

Employment

Entertainment/Food

Family Support

Legal Assistance

Licenses & Registrations

Medical/Dental/Pharmacy

Newspapers

Public Affairs

Relief Societies

Relocation, Lodging & Housing

Safety & Security

Social Services (Off-Base)/Victim Assistance


Transportation & Household Goods Shipments

Utilities

2

**Appendix 3. Focus Group Methodology and Materials**


Attachment 1. Online, Local & Regional Deployment Support Resources (page 3 of 4)



**Deployment Support Resources**  
July 2006

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<p><b>Department of Defense</b></p> <p>Deployment Health &amp; Family Readiness Library Military Spouse Employment <a href="http://deploymenthealthlibrary.hhp.osd.mil">http://deploymenthealthlibrary.hhp.osd.mil</a> <a href="http://www.milspouse.org">www.milspouse.org</a></p> <p>Military OneSource -- 24/7 Call Center: 1-800-342-9647 Military Spouse Support <a href="http://www.militaryonesource.com">www.militaryonesource.com</a> <a href="http://www.military.com/spouse">www.military.com/spouse</a></p> <p>MilitaryHOMEFRONT Reserve Affairs <a href="http://www.militaryhomefront.dod.mil">www.militaryhomefront.dod.mil</a> <a href="http://www.defenselink.mil/ra">www.defenselink.mil/ra</a></p> <p>Military Students in Transition &amp; Deployment National Guard <a href="http://www.militarystudent.org">www.militarystudent.org</a> <a href="http://www.guardfamily.org">www.guardfamily.org</a></p> <p>State Liaison DoD Schools <a href="http://www.USAMilitaryFamilies.dod.mil">www.USAMilitaryFamilies.dod.mil</a> <a href="http://www.dodsea.edu">www.dodsea.edu</a></p> <p>Defense Finance and Accounting (Pay &amp; Benefits) Relocation Assistance <a href="http://www.dfas.mil">www.dfas.mil</a> <a href="http://www.militaryinstallations.dod.mil">www.militaryinstallations.dod.mil</a> <a href="https://mypay.dfas.mil/mypay.aspx">https://mypay.dfas.mil/mypay.aspx</a> <a href="http://www.dmsc.osd.mil/sites">www.dmsc.osd.mil/sites</a></p> <p>TRICARE Severely Injured Support <a href="http://www.tricare.osd.mil">www.tricare.osd.mil</a> <a href="http://www.military.com/support">www.military.com/support</a></p>	<p><b>Military Services &amp; Partners</b></p> <p>Army Armed Services YMCA <a href="http://www.myarmylife.com">www.myarmylife.com</a> <a href="http://www.ayymca.org">www.ayymca.org</a></p> <p>Air Force USO <a href="http://www.afcrossroads.com">www.afcrossroads.com</a> <a href="http://www.uso.org">www.uso.org</a></p> <p>Navy Military Aid Societies (use this search term) <a href="http://www.lifelines.navy.mil">www.lifelines.navy.mil</a> <a href="http://www.militaryhomefront.dod.mil">www.militaryhomefront.dod.mil</a></p> <p>Marine Corps American Red Cross <a href="http://www.usmcrcc.org">www.usmcrcc.org</a> <a href="http://www.rtdcrms.org/services/afes/0,1082,0_321_00.html">www.rtdcrms.org/services/afes/0,1082,0_321_00.html</a></p> <p>Coast Guard National Military Family Association <a href="http://www.uscg.mil/mcpcsc/uscgatlcrs/staffs.htm">www.uscg.mil/mcpcsc/uscgatlcrs/staffs.htm</a> 1-800-260-0218  <a href="http://www.nmfa.org">www.nmfa.org</a></p>
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Visit the Deployment Health and Family Readiness Library: <http://deploymenthealthlibrary.hhp.osd.mil>  
A collaborative effort between the Department of Defense, the military services and military service and family member support organizational partners

**Appendix 3. Focus Group Methodology and Materials**

Attachment 1. Online, Local & Regional Deployment Support Resources (page 4 of 4)

Page 2

<p><b>Military OneSource</b> 24/7 Call Center, Tip Sheets &amp; Life Articles 1-800-342-9647 (24/7 Confidential Call Center) 1-800-342-9647 (Overseas) <a href="http://www.militaryonesource.com">www.militaryonesource.com</a></p> <p><b>USACHPPM</b> <a href="http://chppm-www.apgsa.army.mil">http://chppm-www.apgsa.army.mil</a></p> <p><b>Naval Medical Center San Diego</b> <a href="http://www.nmcad.med.navy.mil">http://www.nmcad.med.navy.mil</a></p>	<p><b>Commanders Page</b> <a href="http://www.commanderspage.dod.mil">www.commanderspage.dod.mil</a></p> <p><b>MilitaryHOMEFRONT</b> <a href="http://www.militaryhomefront.dod.mil">www.militaryhomefront.dod.mil</a></p> <p><b>DoD Reserve &amp; National Guard</b> <a href="http://www.defenselink.mil/ra">www.defenselink.mil/ra</a></p> <p><b>National Military Family Association</b> <a href="http://www.nmfa.org">www.nmfa.org</a></p>	<p><b>FirstGov.gov (See Military Personnel and Veterans section)</b> <a href="http://www.firstgov.gov/Citizen/Audiences/Military_Veterans.shtml">http://www.firstgov.gov/Citizen/Audiences/Military_Veterans.shtml</a></p>
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Visit the Deployment Health and Family Readiness Library: <http://deploymenthealthlibrary.hhp.osd.mil>  
A collaborative effort between the Department of Defense, the military services and military service and family member support organizational partners

**Appendix 3. Focus Group Methodology and Materials**

*Attachment 2. Equipment Needs*

USACHPPM/ Lori Geckle  
[Lori.Geckle@us.army.mil](mailto:Lori.Geckle@us.army.mil)

1-800-222-9698  
 410-436-7709/ DSN 584-7709

**JOINT TASK FORCE FOR FAMILY READINESS EDUCATION ON DEPLOYMENTS (JTF FRED)**  
**EQUIPMENT NEEDS**

- Laptop (to capture discussion)
- "Push package" from CHPPM/ OSD
- Extra CDs (to save notes – and in case CHPPM forgets to include one in the "push package"!)
- Facilitator toolkit CD
- Facilitator checklist
- Method to ship data back to USACHPPM
- Power source for laptop
- 1 flipchart for facilitator to note key points from group
- Markers
- Index cards for group participants (to note final thoughts not mentioned during time allotted)
- Pens/ pencils
- Participant handouts:
  - Library flyer
  - Thank You packages/ other "leave-behind" items
  - Facilitator's business cards
  - Copies of local family readiness contact listing

OSD Military & Family Policy/  
 Dr. Randy Eltringham  
[Randy.Eltringham@osd.mil](mailto:Randy.Eltringham@osd.mil)

703-602-4949 x160

**Appendix 3. Focus Group Methodology and Materials**

*Attachment 3. Facilitator Assistants Contact Form*

**JOINT TASK FORCE FOR FAMILY READINESS EDUCATION ON DEPLOYMENTS (JTF FRED)**  
**FACILITATOR ASSISTANTS**  
**Military Service (e.g. Army)**

(SITE) Focus Group Facilitators

Name	Role	E-Mail	DSN #	Commercial #	Mailing Address
	Facilitator				
	Facilitator				
	Assistant				

(SITE) Focus Group Facilitators

Name	Role	E-Mail	DSN #	Commercial #	Mailing Address
	Facilitator				
	Facilitator				
	Assistant				
	Assistant				

### Appendix 3. Focus Group Methodology and Materials

Attachment 4. Facilitator Checklist (page 1 of 2)

#### JTF FRED FOCUS GROUP FACILITATOR CHECKLIST

- Coordinate with installation POC to schedule Focus Group(s) (minimum of one per each rank group, more if possible) segregated as such:
  - Focus Group #1: E1 – E4 (lower enlisted)
  - Focus Group #2: E5 - E7 (non-commissioned officers)
  - Focus Group #3: O1 – O3 AND WO1 – CW2 (company grade officers and junior warrant officers)
  - Focus Group #4: O4 – O5 AND CW3 – CW4 (field grade officers and senior warrant officers)
  - Personal Individual Interviews and/or Focus Group #5: E8 and above AND O6 and above (interviews vs. focus group will be dependent on number of family members present onsite and site preferences)
- Coordinate with installation POC to secure meeting space(s) for Focus Group(s)
- Coordinate with installation POC to secure visual aids/ equipment to conduct Focus Group(s) (e.g., Flip-Charts, Markers, Computer Access (e.g., electrical power), etc.)
- Coordinate with installation POC to secure childcare facilities and certified childcare providers
- Coordinate with installation POC to send invitations/"Welcome Letters" to Focus Group participants
- Contact Ms. Lori Geckle at USACHPPM (410-436-7709) and provide the following information...
  - Name of Installation at which Focus Group will be conducted
  - Date(s) of Focus Group(s)
  - Time(s) of Focus Group(s)
  - Anticipated number of participants at EACH Focus Group
  - Anticipated number of children requiring child care at EACH Focus Group
  - Your mailing address AND phone number for the FED EX label/package to ship the data back to CHPPM
- Schedule Travel to/from Focus Group Installation
- Coordinate with Focus Group support POC for each location to ensure plans are synchronized.
  - Share cell/ home numbers
  - Share email addresses
  - Coordinate travel/ lodging/ rental car plans
- Reserve Lodging
- Reserve Rental Car if necessary
- Prepare Focus Group materials for transport to Installation (e.g., bookmarks, handouts, etc.)
- Contact Ms. Lori Geckle at CHPPM (410-436-7709) to coordinate receipt of return FED EX label/ package for focus group data shipment, and to request any additional last-minute items, if needed
- IF APPROPRIATE, ship Focus Group materials to Installation POC (otherwise, travel with materials)
- Make contact with site POC at each location one week prior to ensure all plans are completed/ focus group details are taken care of

### Appendix 3. Focus Group Methodology and Materials

Attachment 4. Facilitator Checklist (page 2 of 2)

- Travel to Focus Group Installation allowing ample time to prepare for Focus Group (e.g., at least 2-3 guaranteed hours onsite)
- Conduct Focus Group(s)
- Conduct After-Action Reviews with note-taker/co-facilitator immediately following EACH focus group to insure accuracy of data collected
- Prepare data package for EACH focus group to include...
  - Focus Group Notes (see Note Taker Sheet)
  - Focus Group Cover Sheet including...
    - Type of Focus Group participants (e.g., E-1 – E-4, O-1 – O3, etc.)
    - Number of participants
    - Brief description of any changes to Focus Group protocol that occurred
  - Demographic Data Sheets from Focus Group Participants
- Send all Focus Group Data Packages while onsite (preferably) to Ms. Lori Geckle at...
  - United States Army Center for Health Promotion and Preventive Medicine
  - MCBH-TS-RHR
  - 5158 Blackhawk Road
  - Aberdeen Proving Ground, MD 20906
- Return Home



### Appendix 3. Focus Group Methodology and Materials

Attachment 5. Focus Group Process and Guidance (page 1 of 3)

USACHPPM/ Lori Geckle  
[Lori.Geckle@us.army.mil](mailto:Lori.Geckle@us.army.mil)

1-800-222-9698  
410-436-7709/ DSN 584-7709

#### JOINT TASK FORCE FOR FAMILY READINESS EDUCATION ON DEPLOYMENTS (JTF FRED)

##### INTRODUCTION SUMMARY 2006

###### Administrative:

- Thank participants for coming today.
- Reassure that non-attribution will be honored.
- Distribute/collect demographic sheet/ pencils (if needed).
- Clarify that providing name/ other personal information at the bottom is optional only, and is requested only if people:
  - Are willing to review drafts of future information products
  - Are interested in follow-up information about this effort

###### Introductions:

- Introduce yourself and note taker. Include:
  - Name
  - Affiliation (e.g., military organization)
  - Area of expertise
- Provide brief background about DHRCWG/JTF FRED/ and your connection with the project:
  - In August 2004, the Deployment Health Risk Communication Workgroup (DHRCWG) was formed by the Deployment Health Support Directorate (at the DOD level). Goal is to develop more consistent information across services about real/perceived deployment health risks.
  - In the spring of 2005, mental health and family readiness needs were added, resulting in a subgroup called the Joint Task Force on Family Readiness Education on Deployments (JTF FRED). Members include Army, Navy, Air Force, as well as the National Military Family Association.
  - Because these workgroups are committed to constant improvement, a Customer Feedback Initiative, or CFI, was developed to gather feedback from Service Members/families/other stakeholders interested in deployment issues. This feedback will take be gathered several ways and is intended to focus on 3 main areas:
    - 1) Website usability and communication product content,
    - 2) Deployment processes that are working well and those that need to be improved, and
    - 3) Overall deployment readiness needs
  - Focus groups like this one are being held with families within the other services to get their opinions as well.

OSD Military & Family Policy/  
Dr. Randy Eltringham  
[Randy.Eltringham@osd.mil](mailto:Randy.Eltringham@osd.mil)

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### Appendix 3. Focus Group Methodology and Materials

Attachment 5. Focus Group Process and Guidance (page 2 of 3)

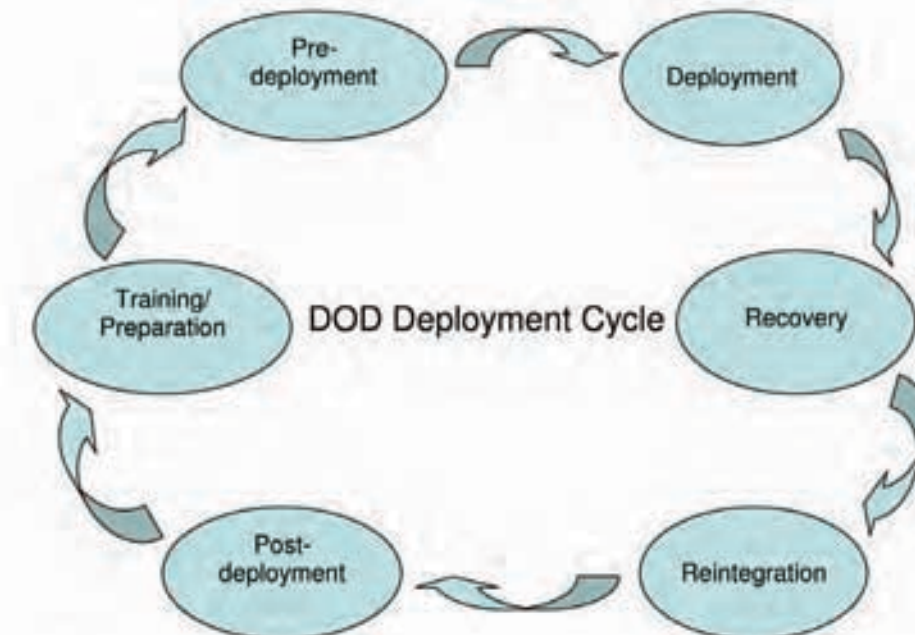
USACHPPM/ Lori Geckle  
[Lori.Geckle@us.army.mil](mailto:Lori.Geckle@us.army.mil)

1-800-222-9698  
410-436-7709/ DSN 584-7709

- Data from all focus groups will be analyzed by the Army Center for Health Promotion and Preventive Medicine (USACHPPM) (because they were able to get a small amount of money to do that).
- A short site summary outlining key trends/common elements/suggested improvements only (no attribution) will be sent back to those people at each site who marked on the demographic sheet that they would be interested in receiving a copy. In addition, a roll-up summary report consolidating data from all the focus group locations will be developed. Summary report will be provided to Ms. Ellen Embrey, Deputy Assistant Secretary of Defense for Force Health Protection and Readiness/ Director, Deployment Health Support.
  - How you became involved in the project.....
- Ask participants to introduce themselves:
  - Name (first name only would suffice)
  - Which family member(s) is/are serving in the military

###### Transition to Questions:

- Thank participants again for coming.
- Many of you may be familiar with the deployment cycle:
  - (draw this on a flipchart)



OSD Military & Family Policy/  
Dr. Randy Eltringham  
[Randy.Eltringham@osd.mil](mailto:Randy.Eltringham@osd.mil)

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**Appendix 3. Focus Group Methodology and Materials**

Attachment 5. Focus Group Process and Guidance (page 3 of 3)

USACHPPM/ Lori Geckle  
[Lori.Geckle@us.army.mil](mailto:Lori.Geckle@us.army.mil)

1-800-222-9698  
410-436-7709/ DSN 584-7709

- The deployment process across DOD works pretty much the same, but we've found that deployment terminology across the services is different. The timing and specific names of these phases are unique within each service, and the specific military culture associates certain events with each phase. The differences in these simple words and phrases are just one of the challenges the workgroups are trying to address to ensure more consistency in the deployment-related information being published. We've asked you here today for three reasons:

- 1) Get your thoughts on military family needs throughout the entire deployment cycle;
- 2) Get feedback about your communication preferences; and
- 3) Get feedback about some specific deployment products that have been developed.

(Transition to focus group questionnaire)

Question "a".....In your experience, what sorts of information have you needed during the deployment cycle? .....

- Reiterate call for volunteers to review future risk communication products and to complete question #9; stress that it is optional.
- Leave them with:
  - o Library flyer
  - o Thank You packages/ other "leave-behind" items
  - o Facilitator's business cards
  - o Copies of local family readiness contact listing

OSD Military & Family Policy/  
Dr. Randy Eltringham  
[Randy.Eltringham@osd.mil](mailto:Randy.Eltringham@osd.mil)

703-602-4949 x160

**Appendix 3. Focus Group Methodology and Materials**

Attachment 6. Focus Group Data Cover Sheet

**JOINT TASK FORCE FOR FAMILY READINESS EDUCATION ON  
DEPLOYMENTS (JTF FRED)  
FOCUS GROUP DATA COVER SHEET**

LOCATION: \_\_\_\_\_ DATE: \_\_\_\_\_

FACILITATOR : \_\_\_\_\_

1. Type of focus group: (please circle)

- a. E1 – E4
- b. E5 – E7
- c. O1 – O3 and WO1 – CW2
- d. O4 – O5 AND CW3 and CW4
- e. E8 and above AND O6 and above
- f. Personal interview with (RANK)

2. Number of participants: \_\_\_\_\_

3. Any changes to focus group protocol? Please describe:

**Appendix 3. Focus Group Methodology and Materials**

*Attachment 7. Ground Rules and Lessons Learned*

## Ground Rules & Lessons Learned

1. One speaker at a time -- no side bar conversations.
2. Agree to treat each other with respect and courtesy. Everyone's opinion and viewpoint is valid.
3. Keep focused on each question before moving on to other questions or issues.
4. Stay on time. End on time.
  - a. Participants can use index cards to provide additional input.
  - b. Participants can send email to:
    - i. Lori Geckle ([lori.geckle@us.army.mil](mailto:lori.geckle@us.army.mil))
    - ii. Randy Eltringham ([randy.eltringham@osd.mil](mailto:randy.eltringham@osd.mil))
5. All ideas and comments are welcomed and shall be recorded.
  - o Pain Points
  - o Great Ideas
  - o Brainstorm OK
  - o Brief Stories
  - o Record actual words used by participants -- Plain English
  - o Website URLs
  - o Favorite marketing materials (e.g. bookmarks, magnets, info packages, etc.)
6. Use "Bin" List to capture issues that need to be addressed later or that need follow-up or facilitator action after today's session.
  - o System-wide Issues (e.g. Legality of collecting POC info from family members)
  - o Family Support Group leaders and activities
  - o Installation Directory information

**Appendix 3. Focus Group Methodology and Materials**

*Attachment 8. Focus Group Demographic Questionnaire (page 1 of 2)*

### JOINT TASK FORCE FOR FAMILY READINESS EDUCATION ON DEPLOYMENTS (JTF FRED) FOCUS GROUP DEMOGRAPHIC QUESTIONNAIRE

LOCATION: \_\_\_\_\_ DATE: \_\_\_\_\_

Thank you for participating in today's session. Before beginning the focus group, we would like to gather some basic information about you and the service member(s) that are related to you. If you have one family member in the military service, please use the column marked "Service Member #1" to record your answers. For those of you who have more than one member in military service (e.g., two or more children, a spouse and a child, a parent and a significant other, etc.) please use the additional columns to answer each question.

1 Are you currently serving in the Armed Forces?  YES  
 NO (please skip to question 4)

2 If Yes, in what branch of service do you serve?  Army  
 Navy  
 Air Force  
 Marine Corps  
 Coast Guard

3 How long have you served in the Armed Forces (total length of service)? \_\_\_\_\_ years

4 Have you ever served in the Armed Forces?  YES  
 NO

	Service Member #1	Service Member #2	Service Member #3
5 What is your relationship to your Service Member?	<input type="radio"/> Spouse (Married how long?) _____ <input type="radio"/> Parent <input type="radio"/> Sibling <input type="radio"/> Grandparent <input type="radio"/> Significant Other <input type="radio"/> Child <input type="radio"/> Other:	<input type="radio"/> Spouse (Married how long?) _____ <input type="radio"/> Parent <input type="radio"/> Sibling <input type="radio"/> Grandparent <input type="radio"/> Significant Other <input type="radio"/> Child <input type="radio"/> Other:	<input type="radio"/> Spouse (Married how long?) _____ <input type="radio"/> Parent <input type="radio"/> Sibling <input type="radio"/> Grandparent <input type="radio"/> Significant Other <input type="radio"/> Child <input type="radio"/> Other:
6 In what branch of service does your Service Member serve?	<input type="radio"/> Army <input type="radio"/> Navy <input type="radio"/> Air Force <input type="radio"/> Marine Corps <input type="radio"/> Coast Guard	<input type="radio"/> Army <input type="radio"/> Navy <input type="radio"/> Air Force <input type="radio"/> Marine Corps <input type="radio"/> Coast Guard	<input type="radio"/> Army <input type="radio"/> Navy <input type="radio"/> Air Force <input type="radio"/> Marine Corps <input type="radio"/> Coast Guard
7 What rank is your service member?			
8 In what component does	<input type="radio"/> Active Duty <input type="radio"/> Reserve	<input type="radio"/> Active Duty <input type="radio"/> Reserve	<input type="radio"/> Active Duty <input type="radio"/> Reserve

**Appendix 3. Focus Group Methodology and Materials**

Attachment 8. Focus Group Demographic Questionnaire (page 2 of 2)

your Service Member serve?	<input type="radio"/> National Guard	<input type="radio"/> National Guard	<input type="radio"/> National Guard
9 How long has your Service Member served in the Armed Forces (total length of service)?	_____ years	_____ years	_____ years
10 In the past 3 years, how often has your Service Member been separated from you for 30 days or more?	_____ times	_____ times	_____ Times

**OPTIONAL QUESTIONS**

11 Would you be willing to periodically review and comment on new deployment support materials?  YES  NO

12 If YES, please provide us with your preferred contact information. PLEASE PRINT.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

13 Would you like to be notified when follow-up information about this effort is available?  YES  NO

14 If YES, please provide us with ONE contact preference.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**OR**

EMAIL: \_\_\_\_\_

OPEN COMMENTS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Thank you again for your time and input!*

**Appendix 3. Focus Group Methodology and Materials**

Attachment 9. JTF FRED Facilitator Tips (page 1 of 3)

<http://www.uiowa.edu/~cqi/2002BasicFacilitationPrimer.pdf>

**JTF FRED FACILITATOR TIPS**

**1. Active Listening**

- a. Facilitators need to be active participants in the focus group process without dominating that process
- b. The goal is to ensure that you have a clear understanding of what focus group participants are trying to articulate
- c. To this end, facilitators should offer short summary statements frequently throughout the focus group process
- d. This allows participants an opportunity to correct miscommunications and validates the focus group facilitators' understanding of the concerns/issues being raised
- e. Examples: "So what I'm hearing the group say is...." "If I understand you correctly, you are saying that...." "OK, if I write down "X," does that get at what you are saying?"

**2. Asking Questions**

- a. The basic questions that the facilitator will ask are outlined in the structured outline sheet
- b. When additional questions are required to elicit more information on a specific topic, these questions should be "open-ended."
- c. An open-ended question is a question that cannot logically be answered by a simple "yes/no" response.
- d. Examples: "What topic areas do you think should be better covered in the library?", "How does that group feel about the kind of information available of reunion issues?", etc.

**3. Guiding / Redirecting Focus Group Flow**

- a. Facilitators need to remain aware of the time and how far they are in the structured interview.
- b. Judgment calls will be required to determine if the facilitator should step in to redirect the conversation to a new topic or if it is best to allow the group to continue at its own, organic, pace.
- c. Making this decision involves a weighing of the relative value of the information you are getting without jumping in versus the information you could get if you did make a redirecting statement.
- d. If the facilitator decides to redirect the conversation by moving the group along to the next question on the structured outline, then care should be taken to do this in a way that doesn't stifle further participation.
  - i. No one likes to be interrupted so care is required when doing so.
  - ii. When redirecting, acknowledge that the group is currently talking about important material but that there is a limited amount of time and that the facilitator would like to move on to another topic.

## Appendix 3. Focus Group Methodology and Materials

### Attachment 9. JTF FRED Facilitator Tips (page 2 of 3)

<http://www.uiowa.edu/~cqi/2002BasicFacilitationPrimer.pdf>

- iii. If, following redirection, the group is slow to re-engage, please see tips in #2 above

#### 4. Non-Defensive Posture

- a. Occasionally, a focus group member may have very negative feelings about one or more of the topics discussed during the focus group
- b. It may be the case that facilitators have a different perspective from focus group members.
- c. It is vital to keep in mind that the facilitators' role is just that, to facilitate the discussion. The facilitator is NOT a spokesperson for the DoD or any of the services.
- d. If the facilitator engages group members in a debate about a particular program or initiative, then the facilitator will no longer be perceived as an impartial individual whose aim it is to gather information, but rather as an advocate who is more concerned with protecting the status quo than listening to focus group participants
- e. At the same time, the facilitator should correct **factually incorrect** statements about programs so as not to collude in the propagation of inaccurate material – finding a way to correct inaccurate information without being perceived as defensive requires tact and calm thought.
- f. It is frequently helpful to offer to discuss a program off-line with an individual following the focus group.

#### 5. Defusing

- a. In some rare instances, focus group participants may begin to argue amongst themselves.
- b. If this occurs, great care is required in managing the situation so that the focus group can continue.
- c. Redirecting techniques mentioned above should be used immediately and a statement concerning the emotional content of the previous discussion should also be included (thereby validating the emotions clearly present in the room).
- d. After redirecting, the facilitator should carefully monitor further communications between participants that were arguing earlier to ensure that such behavior does not begin again.
- e. If arguing continues, the facilitator may need to take a firmer stance. For example, it may be necessary for the facilitator to say something along the lines of "I understand that there have been a few heated moments during our discussion but I would like to remind all of us of the ground rules of our group, one of which is that all of our discussions should be cordial and professional. It's okay for us to disagree, but how we do it is important. If we are going to have a good discussion about deployments and how they effect families, then everyone has to feel like they can express themselves and know that they won't get yelled at."
- f. Facilitators may even want to give the group a five minute break to let tempers cool. If this is done, facilitators should engage arguing participants separately so that they don't continue their argument during the break.

## Appendix 3. Focus Group Methodology and Materials

### Attachment 9. JTF FRED Facilitator Tips (page 3 of 3)

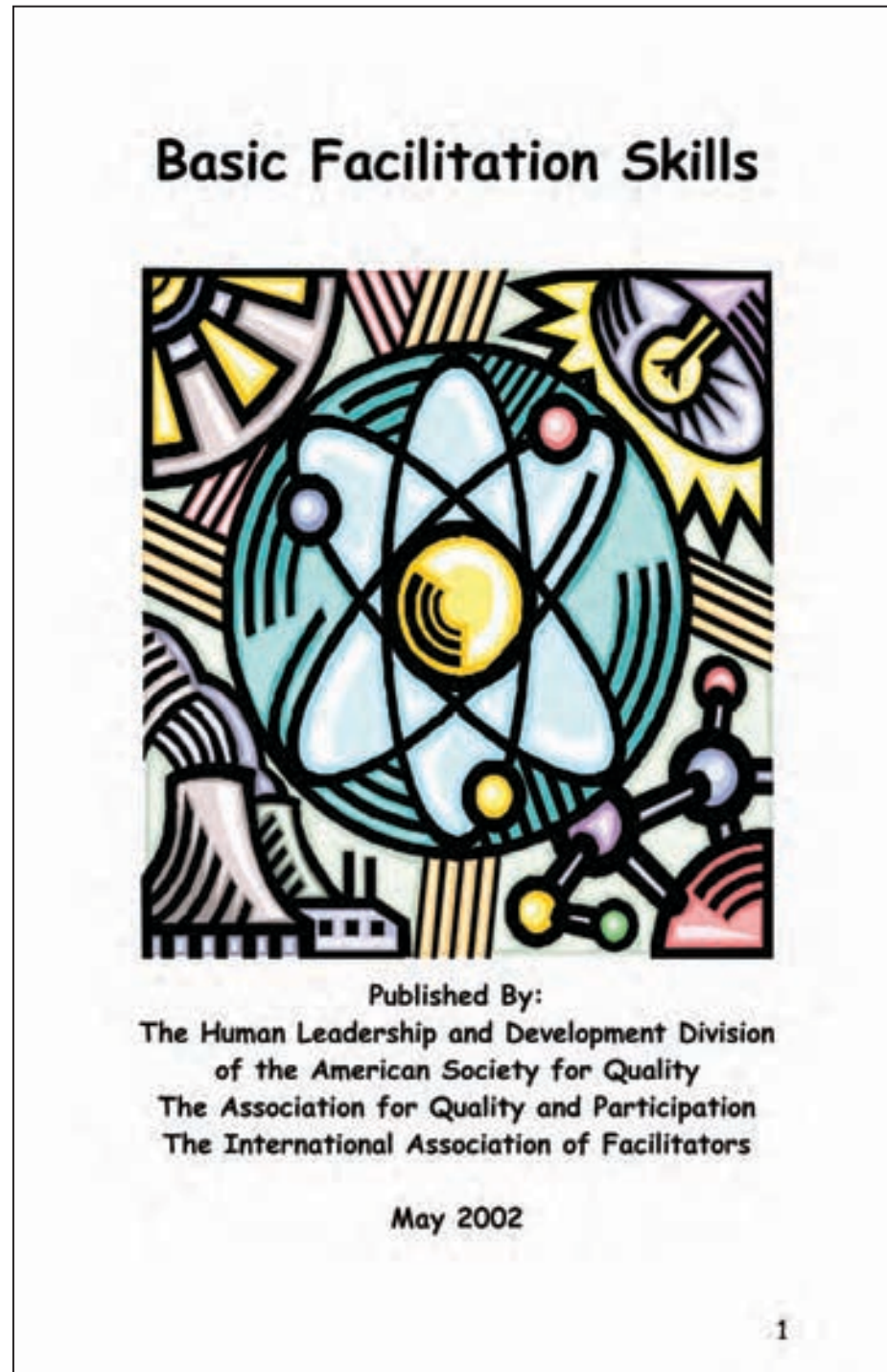
<http://www.uiowa.edu/~cqi/2002BasicFacilitationPrimer.pdf>

#### 6. Coping with Immediate Needs

- a. Although not expected, some of the discussions during the focus groups may trigger individual emotional reactions (e.g., sadness, anxiety, etc) from one or more participants.
- b. If this occurs, facilitators should speak with the individual following the group and make sure that s/he is ok.
- c. In the event that such an emotional reaction is so pronounced that it interferes with the focus group process, the note-taker should ask the individual to step outside with him/her.
- d. Facilitators should have local referral sources ready-to-hand in the event that more professional assistance is required.

Appendix 3. Focus Group Methodology and Materials

Attachment 10. Basic Facilitation Skills



Appendix 3. Focus Group Methodology and Materials

Attachment 11. Deployment Health and Family Readiness Library Homepage and Selected Screen-Shots (page 1 of 8)



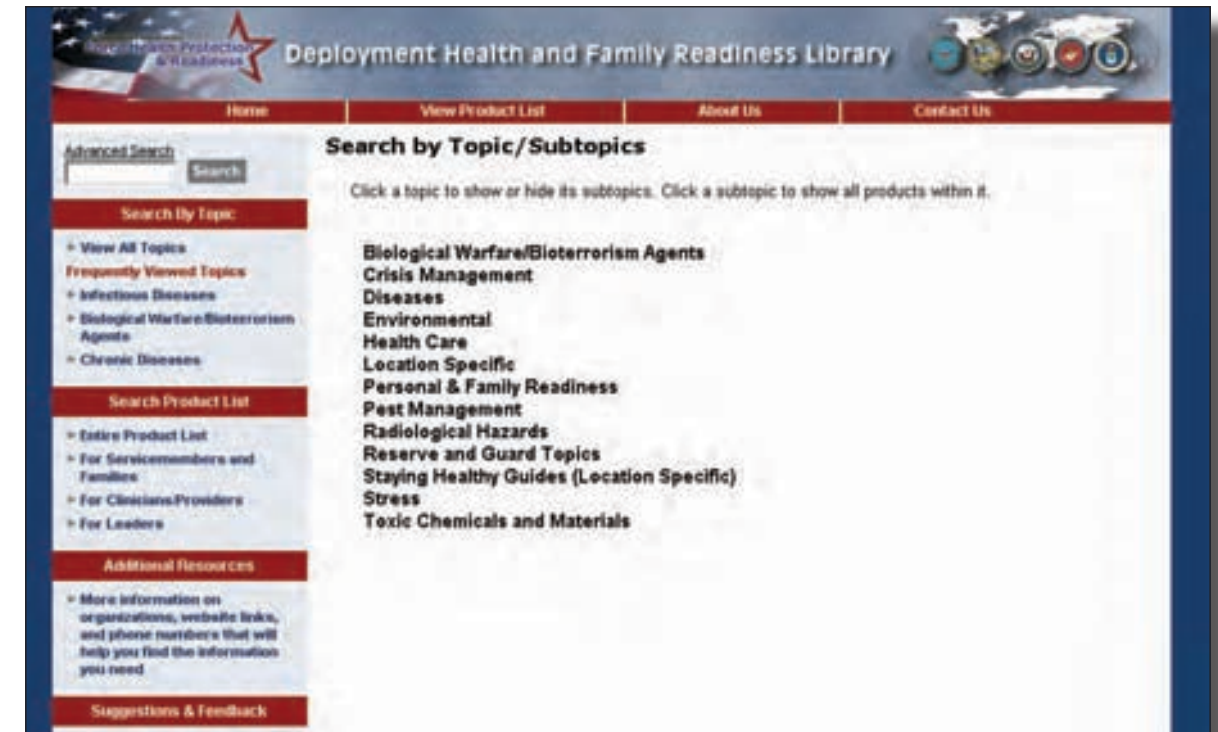
Appendix 3. Focus Group Methodology and Materials

Attachment 11. Deployment Health and Family Readiness Library Homepage and Selected Screen-Shots (page 2 of 8)



Appendix 3. Focus Group Methodology and Materials

Attachment 11. Deployment Health and Family Readiness Library Homepage and Selected Screen-Shots (page 3 of 8)



Appendix 3. Focus Group Methodology and Materials

Attachment 11. Deployment Health and Family Readiness Library Homepage and Selected Screen-Shots (page 4 of 8)



Appendix 3. Focus Group Methodology and Materials

Attachment 11. Deployment Health and Family Readiness Library Homepage and Selected Screen-Shots (page 5 of 8)





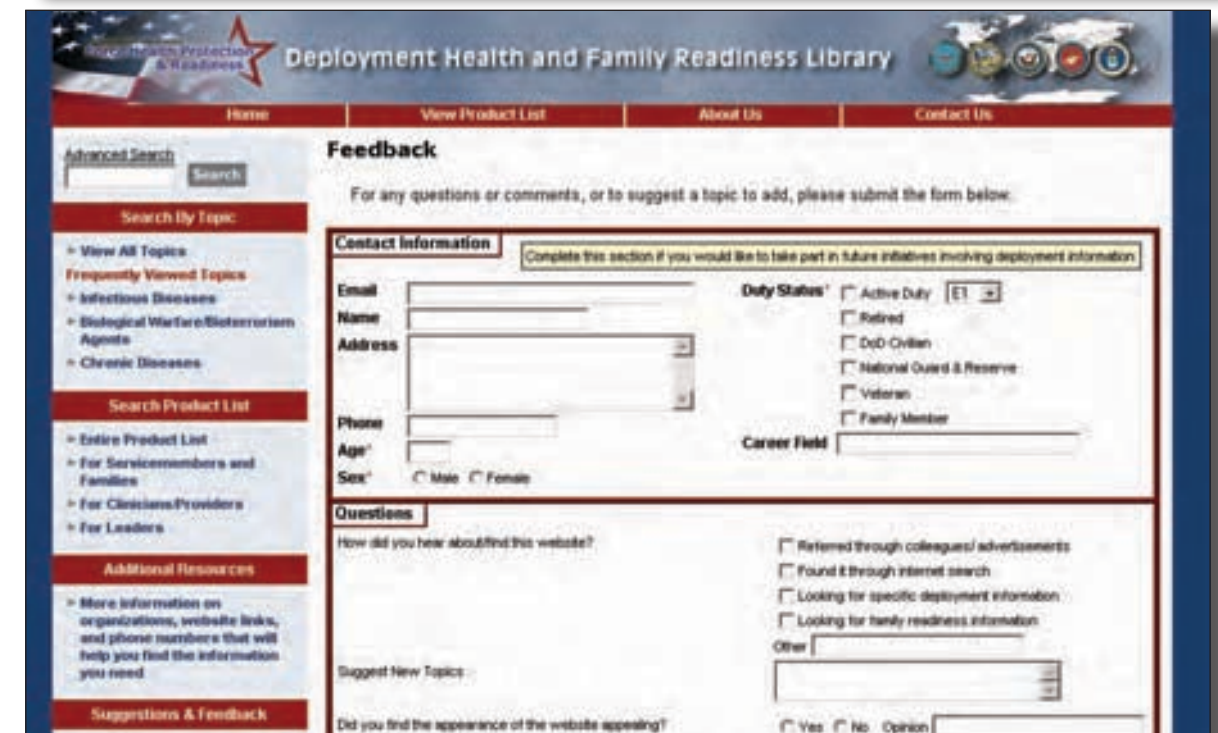
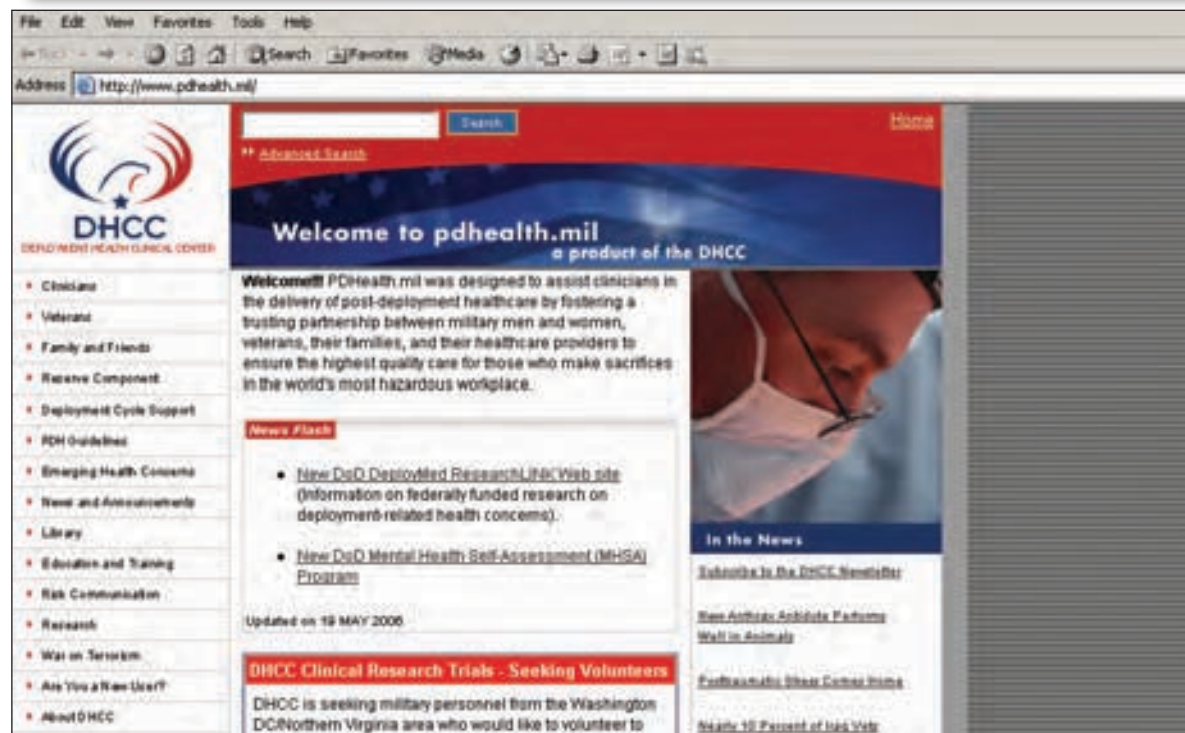
Appendix 3. Focus Group Methodology and Materials

Attachment 11. Deployment Health and Family Readiness Library Homepage and Selected Screen-Shots (page 6 of 8)



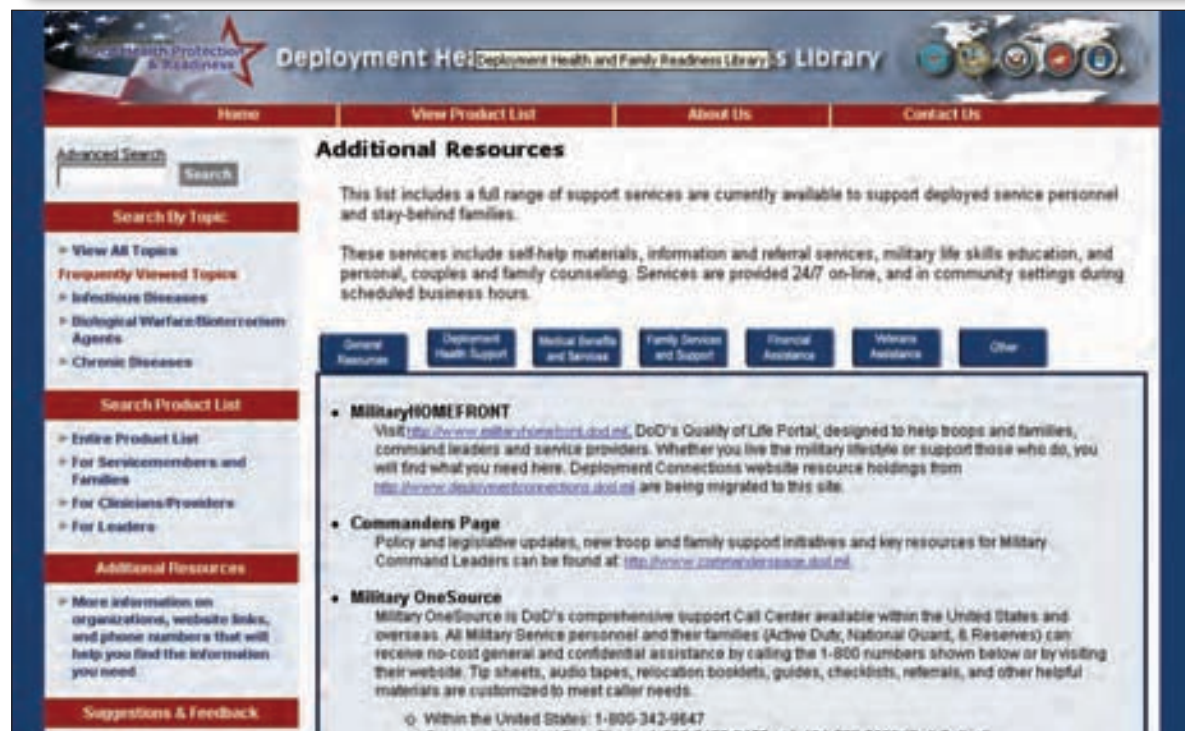
Appendix 3. Focus Group Methodology and Materials

Attachment 11. Deployment Health and Family Readiness Library Homepage and Selected Screen-Shots (page 7 of 8)



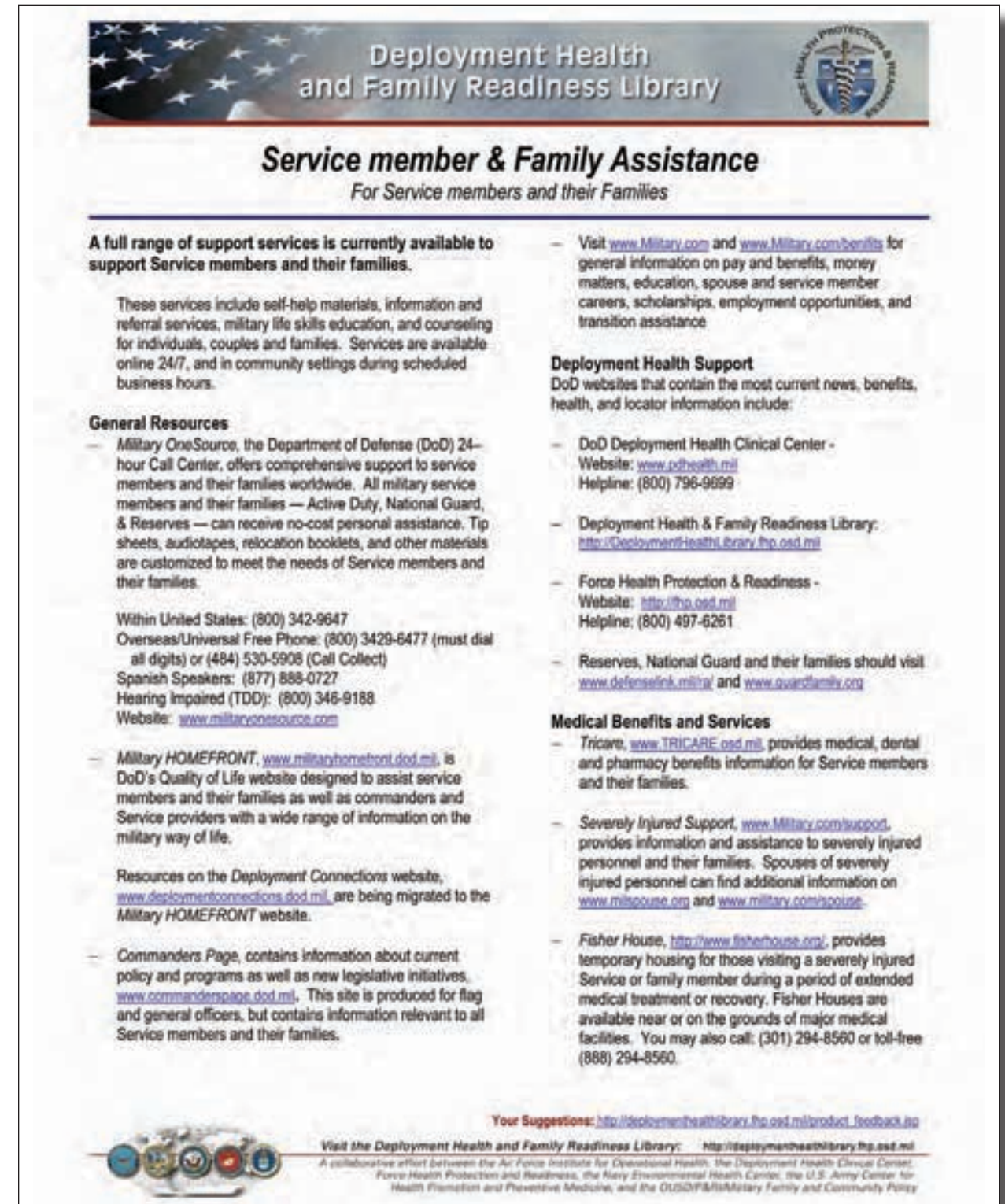
Appendix 3. Focus Group Methodology and Materials

Attachment 11. Deployment Health and Family Readiness Library Homepage and Selected Screen-Shots (page 8 of 8)



Appendix 3. Focus Group Methodology and Materials

Attachment 12. Sample Content #1 (page 1 of 2)



Appendix 3. Focus Group Methodology and Materials

Attachment 12. Sample Content #1 (page 2 of 2)

Service member & Family Assistance  
July 14, 2006  
Page 2

**Family Services and Support**

- Family Support information for each Military Service is available at the following websites:
  - Army Community Services: <http://www.myarmylife100.com/>
  - Navy Fleet and Family Support: [www.flso.navy.mil/](http://www.flso.navy.mil/) and [www.lifelines.navy.mil/](http://www.lifelines.navy.mil/)
  - Marine Corps Community Services: [www.umcc-mccs.org/](http://www.umcc-mccs.org/)
  - Air Force Family Support: [www.afcrossroads.com/](http://www.afcrossroads.com/)
  - National Guard Bureau State Family Programs: [www.guardfamily.org](http://www.guardfamily.org) and [www.guardfamilyyouth.org](http://www.guardfamilyyouth.org)
- American Red Cross, <http://www.redcross.org/where/where.html>, assist families needing to contact service members overseas in the even of an emergency.
- Military Personnel Locators can be found at: [www.firstgov.gov/Topics/Locators.shtml](http://www.firstgov.gov/Topics/Locators.shtml)
- DoD SITES, contains Military Base Information for more than 350 duty locations, including points of contact for local military and civilian support service providers for all Military Services. This information is especially helpful during times of relocation and transition. Visit: [www.dmdc.osd.mil/sites](http://www.dmdc.osd.mil/sites), [www.militaryinstallations.dod.mil](http://www.militaryinstallations.dod.mil), & [www.dodtransportal.dod.mil](http://www.dodtransportal.dod.mil)
- Military Spouses, Families, and Children specific websites include:
  - Spouse Employment, Educational Opportunities and general information: [www.milspouse.org](http://www.milspouse.org) and [www.military.com/topouse](http://www.military.com/topouse)
  - Military Children in Transition and Deployment: [www.militarystudent.org](http://www.militarystudent.org)
  - DoD Children and Youth: [www.milco-dodgov.org/MCY/](http://www.milco-dodgov.org/MCY/)
  - National Military Family Association - Features family support news, surveys, camps for kids, discounts, hotlinks, fact sheets, and the latest family support legislation. Visit: [www.nmfa.org](http://www.nmfa.org)
  - National Guard Family Team Building: [www.nftb.org](http://www.nftb.org)

**Financial Assistance**

- Military Service Relief Societies provide budget counseling, emergency financial aid, scholarships, and other support services.
  - Air Force Aid Society: [www.afas.org](http://www.afas.org)
  - Army Emergency Relief: [www.aerha.org](http://www.aerha.org)
  - Navy-Marine Corps Relief Society: [www.nmcrs.org](http://www.nmcrs.org)
  - National Guard OnLine Community: [www.guardfamily.org](http://www.guardfamily.org)
- DFAS MyPay, sponsored by the Defense Finance and Accounting Service, can help with pay and benefits problems. Customer Service: (888) 332-7411. Website: <https://mypay.dfas.mil/mypay.aspx>

**Other Important Information**

- Armed Services YMCA, [www.asymca.org](http://www.asymca.org), and USO, [www.uso.org/](http://www.uso.org/), provide information about mailing materials to deployed service members, childcare at military medical facilities, and morale boosting activities.
- Learn what your State Government Officials are doing to support military personnel and their families: [www.USA4MilitaryFamilies.org](http://www.USA4MilitaryFamilies.org)
- DefenseLINK provides excellent resources that support deploying personnel and their families, including a comprehensive list of DoD websites: [www.DefenseLINK.mil](http://www.DefenseLINK.mil).
- Deployment News is found at: [www.defendamerica.mil/profiles.html](http://www.defendamerica.mil/profiles.html)
- America Supports You, describes local groups around the country are doing to take care of military personnel and their families both online and in their communities. Visit: [www.americasupportsyou.mil](http://www.americasupportsyou.mil)

**Where Do I Get More Information?**

<p><b>DoD Force Health Protection &amp; Readiness (FHP &amp; R)</b> Phone: (800) 407-6261 <a href="http://fhpr.osd.mil">http://fhpr.osd.mil</a></p>	<p><b>U.S. Army Center for Health Promotion and Preventive Medicine (USACHPPM)</b> Phone: (800) 222-9688 <a href="http://chppm-www.apcsa.army.mil">http://chppm-www.apcsa.army.mil</a></p>	<p><b>Air Force Institute for Operational Health (AFIOH)</b> Phone: (888) 232-3764 <a href="http://www.brooks.af.mil/afioh/">http://www.brooks.af.mil/afioh/</a></p>
<p><b>DoD Deployment Health Clinical Center (DHCC)</b> Phone: (866) 559-1627 <a href="http://www.pdhealth.mil/">http://www.pdhealth.mil/</a></p>	<p><b>Navy Environmental Health Center (NEHC)</b> Phone: (757) 953-0700 <a href="http://www.nehc.med.navy.mil/">http://www.nehc.med.navy.mil/</a></p>	<p><b>Military Community and Family Policy (MC&amp;FP)</b> Phone: (800) 342-9647 <a href="http://www.militarycommunity.com">http://www.militarycommunity.com</a></p>

Your Suggestions: [http://deploymenthealthlibrary.thp.osd.mil/product\\_feedback.asp](http://deploymenthealthlibrary.thp.osd.mil/product_feedback.asp)  
Visit the Deployment Health and Family Readiness Library: <http://deploymenthealthlibrary.thp.osd.mil>


A collaborative effort between the Air Force Institute for Operational Health, the Deployment Health Clinical Center, Force Health Protection and Readiness, the Navy Environmental Health Center, the U.S. Army Center for Health Promotion and Preventive Medicine, and the OUSDPMR/Military Family and Community Policy

Appendix 3. Focus Group Methodology and Materials

Attachment 13. Sample Content #2 (page 1 of 2)

**Deployment Health and Family Readiness Library**  
FRED

**New Emotional Cycles of Deployment**  
For Service members and their Families



As our country's operational commitments have increased throughout the world, military families are now often faced with deployments in more rapid succession. In many situations, it is unknown when the deployment will end, increasing the anxiety and uncertainty for military families. Whereas the previous emotional cycles of deployment may have allowed for a period between deployments of 18 months to 2 years, some military families are now facing another deployment of the service member within 9-12 months of the member's return. Some of the military services describe 5 stages of the emotional cycles of deployment, while others describe 7 stages; however, the changes in spouses' behavior and emotions during the stages are similar. Learning about the feelings that you may experience, as well as the resources that are available to you, can help you maintain a strong military family team.

**What are the stages of the "New" Emotional Cycles of Deployment?** Although the actual stages haven't changed, the change in the timing of the various stages and nature of the deployments can cause increased turmoil and stress for the military family. The "new" stages are:  
 Stage 1 – Anticipation of Departure  
 Stage 2 – Detachment and Withdrawal  
 Stage 3 – Emotional Disorganization  
 Stage 4 – Recovery and Stabilization  
 Stage 5 – Anticipation of Return  
 Stage 6 – Return Adjustment and Renegotiation  
 Stage 7 – Reintegration and Stabilization

**Stage 1- Anticipation of Departure:** In this stage, spouses may alternately feel denial and anticipation of loss. As reality sinks in, tempers may flare as couples attempt to take care of all the items on a family pre-deployment checklist, while striving to make time

for "memorable" moments. In the new emotional cycles of deployment, Stage 1 may begin again before a couple or family has even had time to renegotiate a shared vision of who they are after the changes from the last deployment.

**Stage 2 – Detachment and Withdrawal:** In this stage, service members become more and more psychologically prepared for deployment, focusing on the mission and their unit. Bonding with their fellow service members is essential to unit cohesion, but this may create emotional distance within the marriage. Sadness and anger occur as couples attempt to protect themselves from the hurt of separation. In the new emotional cycles of deployment, as this stage happens more often and more frequently, marital problems may escalate. When a husband or wife must repeatedly create emotional "distance", they may gradually shut down their emotions. It may seem easier to just feel "numb" rather than sad, but the lack of emotional connection to your spouse can lead to difficulties in a marriage.

**Stage 3- Emotional Disorganization:** With back to back deployments, one might think that this stage of adjusting to new responsibilities and being alone would get easier. Although a military spouse may be familiar with the routine, (s)he may also be experiencing "burn-out" and fatigue from the last deployment, and feel overwhelmed at starting this stage again.

**Stage 4- Recovery and Stabilization:** Here spouses realize they are fundamentally resilient and able to cope with the deployment. They develop increased confidence and a positive outlook. With back to back deployments, however, spouses may find it hard to muster the emotional strength required, but many resources are available to provide needed support.

**Stage 5- Anticipation of Return:** This is generally a happy and hectic time spent preparing for the return of the service member. Spouses, children and parents of the service member need to talk about realistic plans and expectations for the return and reunion.

**Stage 6 – Return Adjustment and Renegotiation:** Couples and families must reset their expectations and renegotiate their roles during this stage. The key to successful

Your Suggestions: [http://deploymenthealthlibrary.thp.osd.mil/product\\_feedback.asp](http://deploymenthealthlibrary.thp.osd.mil/product_feedback.asp)  
Visit the Deployment Health and Family Readiness Library: <http://deploymenthealthlibrary.thp.osd.mil>

A collaborative effort between the Department of Defense, the military services and military service and family member support organizational partners

Appendix 3. Focus Group Methodology and Materials

Attachment 13. Sample Content #2 (page 2 of 2)

July 2006  
Page 2

adjustment and renegotiation is open communication. Families also need to be prepared to deal with the effects of combat stress on the returning service member. Such stress and trauma can be difficult to deal with. Troops with combat stress are often irritable, guarded, and want to be alone. Some may use increased alcohol or drugs in a failed attempt to "numb" the emotional pain they are experiencing. Attempts at renegotiation may result in increasing marital arguments.

**Stage 7- Reintegration and Stabilization:** This stage can take up to 6 months as the couple and family stabilize their relationships anew. As noted with Stage 6, the presence of combat stress can severely disrupt the stabilization process. Reintegration and stabilization can hit more roadblocks when a family must make a Permanent Change of Station (PCS) move immediately upon the return of the service member. Back to back deployments create stress as families stabilize only to begin Stage 1 once again.

**Where can families find help?**  
 -Your military service Family Support Center on the installation offers groups, classes, and counseling for a variety of issues. National Guard and Reserve families can contact their state or regional Family Assistance Center for assistance.

- Military OneSource, DoD's 24/7 Call Center (1-800-342-9647, [www.militaryonesource.com](http://www.militaryonesource.com)) provides access to six (6) free private counseling sessions per problem per person with a provider in your local area for issues such as coping with deployment, reintegration, and marital and family problems.

-Local Military healthcare facilities

- TRICARE: [www.tricare.osd.mil](http://www.tricare.osd.mil)

- Online, mental health screening tools (anonymous self-assessments for depression, alcohol disorder, post-traumatic stress disorder (PTSD), generalized anxiety disorder, and bipolar disorder) are available online at [www.MilitaryMentalHealth.org](http://www.MilitaryMentalHealth.org).

Individuals can print the results of their assessments to take with them to a health care provider. Results and resources are listed at the end of every assessment tool. Information on TRICARE providers, Veterans' Centers and Military OneSource is also listed.

**FACTS TO REMEMBER:**

- The emotions you experience during the cycles of deployment are a normal reaction to an abnormal situation unique to the military
- If your service member experiences combat stress, it can interfere with your ability to reintegrate as a couple- seek help early rather than later
- You don't have to go it alone! Use the many resources available to you

**FEATURED RESOURCES AND DOWNLOADS:**

Article on "The Emotional Cycles of Deployment - A Military Family Perspective:"  
<http://www.hoosh4health.com/deployment/familymatters/emotionalcycle.htm>

Resources and links specific to National Guard families:  
<http://www.guardfamily.org/>

Life Articles on deployment and return, including articles specific to Reserve families:  
<http://www.militaryonesource.com/skins/MOS/home.aspx>

Multiple articles on issues related to the cycles of deployment:  
[http://www.lifelines.navy.mil/pls/tcr/vplpage1.SNAPP3.SNSDETAIL.LFT?count\\_id=25.60.500.390.120.0.0.0.0&section\\_id=25.60.0.0.0.0.0.0.0](http://www.lifelines.navy.mil/pls/tcr/vplpage1.SNAPP3.SNSDETAIL.LFT?count_id=25.60.500.390.120.0.0.0.0&section_id=25.60.0.0.0.0.0.0.0)

Source: Jennifer Morse, M.D., Navy CAPT (Ret), San Diego, CA

**Additional Sources of Information and Assistance**

<p><b>Military OneSource</b> 24/7 Call Center, Tip Sheets &amp; Life Articles 1-800-342-9647 (24/7 Confidential Call Center) 1-800-3429-6477(Overseas) <a href="http://www.militaryonesource.com">www.militaryonesource.com</a></p> <p><b>USACHPPM</b> <a href="http://chppm-www.aogsa.army.mil">http://chppm-www.aogsa.army.mil</a></p> <p><b>Naval Medical Center San Diego</b> <a href="http://www.nmcsl.med.navy.mil">http://www.nmcsl.med.navy.mil</a></p>	<p><b>Commanders Page</b> <a href="http://www.commanderspage.dod.mil">www.commanderspage.dod.mil</a></p> <p><b>MilitaryHOMEFRONT</b> <a href="http://www.militaryhomefront.dod.mil">www.militaryhomefront.dod.mil</a></p> <p><b>DoD Reserve &amp; National Guard</b> <a href="http://www.defenselink.mil/ga">www.defenselink.mil/ga</a> <a href="http://www.guardfamily.org">www.guardfamily.org</a></p>	<p><b>FirstGov.gov (See Military Personnel and Veterans section)</b> <a href="http://www.firstgov.gov/Citizen/Audiences/Military_Veterans.shtml">http://www.firstgov.gov/Citizen/Audiences/Military_Veterans.shtml</a></p> <p><b>Deployment Health &amp; Family Readiness Library</b> <a href="http://deploymenthealthlibrary.hq.osd.mil">http://deploymenthealthlibrary.hq.osd.mil</a></p> <p><b>Military Students in Transition &amp; Deployment</b> <a href="http://www.militarystudent.org">www.militarystudent.org</a></p> <p><b>National Military Family Association</b> <a href="http://www.nmfa.org">www.nmfa.org</a></p>
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Your Suggestions: [http://deploymenthealthlibrary.hq.osd.mil/product\\_feedback.jsp](http://deploymenthealthlibrary.hq.osd.mil/product_feedback.jsp)  
 Visit the Deployment Health and Family Readiness Library: <http://deploymenthealthlibrary.hq.osd.mil>

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Appendix 4. Detailed Findings from Focus Group Feedback (page 1 of 15)

**DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK**

**Child Care Resources:**

"How do I go about finding good child care, especially part-time?"

Hourly drop-in child care at the Child Development Center or in Family Home Care homes is needed so spouses can perform their expanding duties and responsibilities [especially true for employed spouses].

Due to lack of affordable childcare, some employed spouses had to quit their jobs.

**Communication with Families:**

Families need Family Readiness Group information. They asked, "Where's my group?" They want to "belong" to their Command unit and Military community. More outreach is needed, especially to the National Guard and Reserve Component, parents of Service members, significant others, and those who are caring for the children of deployed single Service members.

A lot of people do not rely on Family Readiness Groups and usually are not included on contact lists because they are extended family members or friends, rather than spouses. An alternative to support and information that is typically delivered through Family Readiness Groups is needed. Some recommended an installation or regional Yellow Ribbon room where support and resources would be available for anyone who has a deployed Service member, regardless of Command unit or Military Service affiliation. It was suggested that Military related organizations might be able to help.

Families state repeatedly they "want more information about the status of my Service member from the Command." This requires improved communications between the Command, families, and deployed Service members throughout the cycles of deployment.

Families are looking for quicker, easier ways to find, contact and stay in touch with loved ones. They need to know about the full range of communication options available to them.

Families would appreciate consistency of available communication services, both for themselves and for their deployed Service members. They want basic communication options to include visual communications such as video teleconferencing (VTCs), videophones, and Internet capability with video files. Some requested pod casts and push technologies (i.e., Really Simple Syndication [RSS] newsfeeds, e-mail alerts), especially needed for remote locations and isolated groups.

Families want to know more about operational security. They want to stay in touch with Service members who are deployed-- especially in combat zones. If they understand more about the security issues involved in discussions of duty location and Command mission (with those who do not have a need to know), they can improve the safety and security of their loved ones.

Families complain of poor chain of Command information flow, especially if there is not a strong Family Readiness Groups in their Command or on their installation. This is of particular concern to families that live off base, and for National Guard and Reserve Component families who are geographically separated.

Family members recommend that the best way to find Command unit activity information is to read the Command's Family Readiness Groups eNewsletters. Spouses and parents of Service members look forward to weekly and monthly information updates online, via e-mail and in hardcopy.

Regular communication between Command units, spouse care coordinators, and family members would provide a greater sense of security, especially for young spouses and families. "It would be nice if there was someone

DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK

to just check in with and know assistance could be available if needed."

Spouses have an increased level of sensitivity to daily issues during the Service member's absence. "My husband has been gone for six months. It would have been nice if someone would have called and asked if I needed help, lawn mowing, baby sitting, repairs..."

Spouses want their Command leaders to understand and acknowledge their pain, sacrifices and contributions. They are tired, stressed, and afraid because of the dangers facing deployed Service members.

Families frequently request deployment schedule information, and ask: "Does the clock really start ticking when they leave?" Families want to know how to deal with the frustration of not knowing the return date of their Service member.

Families are discouraged because they know that once their Service member comes home, it won't be long before the next deployment begins.

Family support marketing and information sharing with geographically dispersed families is a problem, especially for spouses whose Service member is not deployed with an entire unit, such as individual mobilization augmentees embedded with units that are not part of their regular Command.

Pre-deployment information briefed to Service members needs to be briefed to families. Spouses worry that important legal and financial details have not been attended to prior to deployment, leaving stay-behind families unprepared to handle what may lay ahead.

Senior spouses are needed to mentor junior spouses, particularly during times of Military separations.

Single parents who are required to activate Family Care Plans oftentimes leave their children with extended family members who are usually not living on or near a Military base. Communication and information from the Command needs to reach this group, as well as the children who are left behind.

Reserve centers need to do a better job of informing their Service members and families about available deployment support. Families and Service members suggested that they provide a "primary care manager for deployments" similar to current primary care managers for healthcare -- one person dedicated to being that resource link, someone with a face they can reach out to and get guidance from." This is a particularly critical issue for National Guard and Reserve Component Service and family members who usually are not living near a Military base.

**Deployment Cycle Information & Family Support:**

Pre-deployment preparation and post-deployment reintegration are major concerns. Many Military families are very young, and need to know basic information such as "What is a deployment?" "What can I expect in each stage of a deployment?" "Where's my group?" and "Who can I call for help?"

While families need and appreciate general advice and information from the national level, what they really want is local community resources. "We need local information and Military Service specific resource guides ... especially for newcomers." Families repeatedly requested contact phone numbers -- they want a live human being to talk to. They asked for standardized deployment support information with local and regional addresses and phone numbers. They like Military OneSource because of the 1-800 call center that combines a human being with local Military and civilian community information.

DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK

Mental health support resources and family support programs are seen as very poorly advertised. Most families are not aware of them.

Despite their age and experience with deployments, Command leaders and deployment support Service providers should not assume stay behind families can cope. Deployments since the terrorist attacks on September 11, 2001, are significantly different than in the past and are having a cumulative effect on families.

Available help throughout the deployment cycle is needed. Easy access to medical, spiritual and mental health resources are requested.

The *Army Battle Book* is a great resource, and its use should be promoted on an ongoing basis, not just when deploying.

Many family members do not have a Military background themselves and many don't understand Military jargon. They ask, "Acronyms -- what do they mean?" They are turned off when communications look and sound too much like the Military. They say, "This information is not for me. It's for my husband."

Foreign-born spouses lack familiarity with American culture, structure, and language. They are asking that deployment support information be made available in Spanish, French and Japanese.

Families need stress management and coping skills. They also need social support, connections and activities during deployment.

A pre-deployment checklist "just for spouses and family members" was repeatedly requested.

Assistance when a family member is hospitalized is needed.

Resources to help with problem solving are needed so families don't get overwhelmed.

Families want to know "Who is supposed to take care of spouses whose Service member is on a remote assignment?"

Information on counseling for children, counseling for Military members, reunion information, and life after the Military was requested by many spouses.

**Emergency Contact Information and Emergency Situations:**

Information on policies, procedures, benefits, and entitlements is needed before casualties occur. Families need to understand and honor their loved one's wishes if they are killed or severely injured. They are not sure how or when to talk to their spouses about these issues.

Families need to have better access to the Red Cross. Improved casualty notification processes are needed. General Red Cross contact information:

American Red Cross National Headquarters  
2025 E Street, NW  
Washington, DC 20006  
Phone: (202) 303-4498  
Donation Hotlines: 1-800-REDCROSS (1-800-733-2767) / 1-800-257-7575 (Español)

Web site: <http://www.redcross.org/>

Knowledge of available help for non-casualty problems is needed. This includes information on who to call when a family crisis occurs.

Command and spouse leaders both complain that they can't reach stay behind families in true emergencies. Emergency contact data is frequently missing. Families need a point of contact list, prepared by their Command or installation, organized by topics for quick reference in emergency situations.

DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK

Young spouses want to know who to contact if they have a sick baby and no transportation, or problems with utilities. They say having a sick baby and no spouse to help make decisions is a very scary experience. A nurse advice line would be very helpful as would more information on pregnancy, pre-natal care, child birth, vaccine schedules for babies, child development and parenting.

**Emotional Aspects of Deployment:**

Families are asking, "Who can we talk to? There's no one to talk to." Commands need to clearly communicate with family members about family support programs that are available to them during their loved ones' deployment.

Family support programs and leaders need to provide validation of the experiences and feelings of Service members and their families throughout the cycles of deployment: Validation that it's alright to be mad; validation that couples tend to fight right before deployment and this is not unusual. Families need help in learning what to do when anger flares, especially during pre-deployment.

Deployment preparation and reintegration classes are needed, to include learning how life will be different following deployments, and relearning and renegotiating roles within the family.

Families are upset during times of deployment and find it hard to process any information as deployments draw near.

More resources are needed to help children cope with deployment. Young parents expressed the need for more information on how to support children of all ages, especially emotionally.

Families are asking for testimonials from those who have successfully gone through deployments: "Every deployment is different. They do not get easier. You still need help even

if you've gone through deployments before. As we master old issues, new ones come up. Don't assume we can handle it."

"When Service members come home from deployment, we are not truly happy because we all know they will leave again. They are only stopping by home for a few months."

Families need ideas regarding who can help with daily household chores and transportation issues. They need emotional help when sources of assistance aren't available when they really need them.

Families need ideas on how to better handle stress during the deployment, including feelings of not being connected to the Command unit or family support group.

Families have problems dealing with anger and depression during deployments. Contacts with mental health, spiritual support, and family support are needed.

Information is needed regarding the emotional effects of deployment on Military members and their relationship with children during and after a long deployment.

Families need to know what helping agencies provide short- and long-term counseling. They need information on Veterans Administration programs and benefits for continued mental health counseling.

**Financial Assistance:**

Financial issues are a major concern for spouses when the member is deployed, including how to meet duplicate expenses of maintaining two households while the member is away on a deployment.

Families and Service members need help in understanding Military pay, benefits, the importance of savings plans, and how to contribute to Military savings plans.

DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK

Access to pay information is needed, especially for parents handling single Service members' finances. Army Knowledge Online is great, but it is hard to reauthorize access to this system every 90 days.

Other financial management issues include establishing and solving problems with allotments; planning for and adjusting to pay changes; and solving big money problems such as mortgages, foreclosures, and excessive debt.

Families report a lack of personal and family financial awareness. They want solution-based counseling services and educational programs. They specifically requested Leave and Earnings Statement (LES) information, help with taxes, and help with Service members' banking accounts (access, passwords, checkbook).

Families require better financial information on the member's entitlements while deployed. For example, Family Separation Allowance is not paid until the member returns in most cases. A Reservist's spouse said "There is a lot of confusion over what applies to the spouse when the member is gone for 45 day, 90 day, 179 day deployments, remotes, etc."

**Health Issues During Deployments:**

The longer Service members are deployed, the more health and safety concerns they and their families have.

When a Service member hears the term "deployment health," they think of environmental, occupation and physical health concerns. When a Military spouse hears this term, they think "Where's the TRICARE information?"

Family members state that information about deployment health issues for the deployed Service member is very scary. Many were unaware of deployment health risks until they saw content within the Deployment Health and

Family Readiness Library. They are worried that this information will scare their children.

Some spouses state that they would prefer getting their deployment health information in person from a medical professional and not from a Web site. They do think it is a good idea for the Service member to have access to this information online.

Service members are concerned about a variety of health issues during their deployments, particularly vaccinations for various exposures and diseases. They want to know what vaccinations are being given, why they are being given, and what possible side effects to watch for. They and their families want to know if they can spread these diseases when the deployed Service member returns home.

Service members asked "What are the likely environmental exposures in the area of my deployment, and what health effects will I experience?"

Safety issues are always a major concern for deployed Service members and family members.

**Identification Cards:**

Young families need to know why identification (ID) Cards are necessary, where to get one, and available assistance if they should get lost, stolen or damaged.

Service and family members need help checking Defense Enrollment Eligibility Reporting System (DEERS) for correct information about dependents.

**Legal Assistance:**

Families need to know what legal documents are needed, why they are needed, and who can help them if they get lost, stolen or expire.

DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK

Families report that there is a lack of information on the purpose and limitations of various types of Powers of Attorney and wills. This information should be online. They also say that legal assistance officers seem resistant to providing the Powers of Attorney that spouses and Service members are requesting.

Powers of Attorney and wills need to be done prior to departure or at an Ombudsman Day or during a day-long Deployment Preparation Program.

Families want to know when legal and financial documents expire, and what help is available if they do.

According to Military spouses, too many Judge Advocate Generals (JAGs) or Military Service lawyers are deployed, leaving inadequate legal assistance services for stay behind families.

Legal advice for single parents is needed. Often ex-spouses file in court when the Service member parent is deployed.

**Medical Services:**

During deployments, health is not usually the number one concern for Service members or their families; but health is a big concern following deployments because of potential deployment-related injuries, exposures, and disease outbreaks, as well as medication side effects.

Nurse help lines, similar to those used in the private sector, would be beneficial for Service and family members with health concerns.

Prenatal, pregnancy and new parent information is needed by many young Service members and spouses.

TRICARE is a complex system. Help is needed with access to TRICARE medical information and appointments, especially if families live more than 50 miles from medical

treatment facilities (MTFs). Access to health care problems also occurs when Service members and families transfer from one TRICARE region to another.

Some spouses mentioned they were unsure of how to access medical care through the installation clinic, how to utilize specialists through TRICARE, and how to use TRICARE when medical care is needed on a weekend.

Specialty care is hard to get, especially for National Guard & Reserve Component families.

Local and regional TRICARE point of contact information is needed.

Establishing and maintaining connections between TRICARE and a family's Primary Care Manager is difficult.

Families have difficulty getting through on phone systems to medical facilities.

Families feel that too many medical providers are deployed, leaving inadequate specialty care for stay behind families. Families need help finding medical and dental specialists.

Young spouses and families need to know where Military medical clinics are located.

**Mental Health Services:**

Families ask "What has my Service member gone through and how will we deal with it upon return? How will I know if my Service member is okay and if not, what resources are available?"

Families need better, more confidential ways of finding out if they or their Service member have problems and what to do about them. They need help overcoming the fear and stigma of seeking mental health services.

DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK

Families want local and regional community resources. They need tips and support groups for adults and children.

Chaplains could be more pro-active and engaged in community outreach to help Service and family members connect with counseling services but their messages *MUST* have a positive spin to decrease the negative stigma of counseling. Use terms like support and relationship stressors. Ensure confidentiality. Referrals to Military OneSource are a great first step in the connection process.

Families and Service members need to know how to access mental health information and counseling services. Officer and enlisted Service members, spouses and family members all need counseling services, not just young enlisted. A full range of mental health services is needed.

Few resources are available for children.

Military members and their families want a "Survival Skills" class for spouses and family members. Some Service and family members feel that "There's no one to talk to," and "Deployment feels like a divorce when you get left."

Families anticipate increased mental health effects of repeated and extended deployments. When Service members return, they are already working up for the next deployment. The impact takes its toll on personal and family relationships. Service members feel guilty and do not know how to make it better. Children are isolated in order to protect them from the roller coaster of deployment anxiety. Service members feel there is plenty of support for them in the field, but worry about who is there for the family at home.

**Command Sponsored or Unit Related Meetings:**

Families prefer to receive information from Command sponsored activities, unit related meetings, and via in-person contacts such as Pre-

Deployment Programs, Spouse Program Briefings, Family Member Training Programs, and Family Readiness Groups.

Navy personnel feel very strongly that personal contacts by phone are an important part of the communication mix.

Strong, active Family Readiness Groups and liaisons are desired by all Military Services. For individuals who live close to a Military base, Yellow Ribbon Rooms are a highly desirable gathering place. They bring together anyone with a deployed Service member for mutual support, and are typically located in base libraries, education or community centers, and family support centers.

"In-person contact is very important -- Life is complicated. A few links is not a solution. You need information and personal assistance."

**Outreach:**

Respondents stressed the need to reach parents and significant others -- they are out of the loop and don't receive important information presented on base by deploying Commands.

National Guard and Reserve Component family members and Service member parents are more likely to read traditional hardcopy "snail mail" than e-mail. They say "If I have time, I will go to the Internet." Younger Service and family members live on the Internet and depend on handheld devices to communicate and provide mutual support. They use modern telecommunication devices to seek, send and save information. A multi-media outreach effort is needed to span different preferences of the age groups of stay-behind families.

While top level, standardized deployment support information is very helpful, families need installation, regional, Command unit and comprehensive Military Service-specific

DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK

information. This combination makes the perfect package.

Family Readiness Groups are a key distributor of trusted, Command related information, but far too many families and caregivers of Military children left behind are not connected to them.

Command leaders need to ask families to choose their preferred communication methods.

**Preferred Communication Methods:**

Families say a mix of communication methods are needed to keep them informed throughout the cycles of deployment:

Essential, as a baseline for effective communications, is family gatherings with Command leaders and Command volunteers who want to share as much information as possible and to answer questions. For example, hearing from the Commanding Officer, Command Master Chief or Sergeant Major, the Command Chaplain; meeting the leaders of the Marine Corps' Key Volunteer Network, Navy Ombudsmen Team, Family Readiness Groups, and other spouse leaders; meeting representatives from helping organizations and Military associations (e.g. Relief & Aid Societies, Red Cross, Hospital/Clinic, Legal Office, etc.).

Hardcopy "Snail Mail" (e.g. Family Grams from the Command Master Chief or a Family Readiness Group Newsletter) is highly desired by Service and family members. Families want to receive these communiqués weekly if possible. Older family members particularly want something they can hold in their hands.

E-mail!! Command leaders, spouses and deployed Service members have become dependent upon daily e-mails to stay connected and provide latest updates on the status of the deployed Command and its personnel. E-mails are eagerly awaited, expected and cause distress when they do not arrive. Some family members

say "Weekly e-mails from the Command are better than having to search through Web sites."

Traditional methods of information sharing are still desired, including "very appealing" pamphlets and flyers. For example, Service members and families still want a standardized deployment information package with Frequently Asked Questions (FAQs), a Command and Community Resource List, and Links to online resources. Spouses especially like to print these materials and place them in Family Readiness "Battle Books" or reference notebooks. Electronic copies of these materials, when available, are being forwarded to extended family and friends to maximize distribution of key and essential deployment support information.

Comprehensive, Military specific, Community Resource Guides are needed. Such guides include both Military and civilian information specific to the community in which family members live. Both on and off base information is requested.

Large displays at commissaries, exchanges and teen centers are good resources and morale boosters.

Broadcast media, particularly Armed Forces Network broadcasts (overseas), is an efficient and valuable way of transmitting non-classified deployment support information for Service members and families. Some family members are asking for locally produced TV shows in the "Oprah-style" that would have guest speakers from deploying Commands who could focus on available deployment support resources for stay-behind families. They want to "see" Command leaders helping Service members and families.

The Army is augmenting the Internet Media with promotional incentives like flash drives (memory sticks) which Commands, Service and family members can use to download

DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK

deployment support audio-video-text resources. Some respondents suggested that such files can be pushed to iPods and other handheld devices for reuse and further distribution. New social media opportunities need to be explored.

Spouses say "Web sites need to be recommended by someone you trust otherwise spouses won't find out about them" or give them credibility.

**General Recommendations for Communication Managers:**

Focus group participants have the following recommendations for deployment support Internet and multi-media communication managers:

Use true stories about Service members and families who have successfully coped with stress. Include testimonials, real answers and solutions. Post a problem and note "Here's what worked, or we tried this and it did not work for these reasons."

Have an active message board for spouses/family/friends to communicate with others in the same situation.

"We need a comprehensive all-in-one Family Guide for Military deployments brochure to hand out at every deployment briefing which will effectively market the Deployment Health and Family Readiness Library among other key resources."

"Why don't we have a Military person assigned as the Ombudsman versus a volunteer civilian wife? This person could provide continual support on a regular basis to support all deployments."

"We need a central referral point for spouse-related information, for example a spouse advocate or spouse care coordinator would be very helpful. This person would have all the information and resources pertaining to families,

and would be particularly available to assist and advocate for spouses while a member is away for Military reasons." A spouse advocate could help with TRICARE and Medical Clinic issues; financial entitlement problems and questions; and assistance with unique problems.

Many spouses are new and young. Many don't know what to expect during a deployment and don't know what deployment health is.

A base-wide support group for spouses of deployed or remote members might be helpful for those whose Command unit does not have an active spouse support network or for those spouses of remote members who fall between the cracks.

There is a big difference in the degree of deployment support received, which seems to be contingent upon the Command unit of assignment and the personality of Command unit leadership. High quality standardized materials and Military specific guides would help in such situations.

Within security parameters, increase the amount of information Service members and families receive on what the member can expect while deployed to a certain location. For example, information could cover available means of communications (Internet, videophone, phones); what and how to send care packages; possible health concerns; and support services available to members on site such as recreation, access to personal supplies, legal services for those forgotten Powers of Attorney, etc..

Support personnel at base agencies need to understand the importance of helping spouses and children and making them feel welcome and not forgotten when the Military member is deployed. Many are not connected to the Command. They need a place to "check in with" on a regular basis, a place where they could feel comfortable asking for help if needed.



DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK

The possibility of a "Spouse Portal containing all things family" and Military spouse related information should be developed. The linkage of all of these pertinent sites would make Internet access to key resources easier.

There is a need for base-wide support groups for spouses of deployed and remote members. Such support groups might be helpful for those whose Command unit doesn't have an active spouse support network, or for those spouses dealing with the Service member being on a remote assignment who may fall between the cracks.

Establish a program for deployed spouses, similar to the New Parent Support Program, where spouses could voluntarily participate to get information on deployment issues such as Powers of Attorney, security issues, care package instructions, emotional support, and troubleshooting for specific unique circumstances.

Establish support groups for spouses of deployed members similar to the Army's Family Readiness Groups or Navy Ombudsman Program.

Right Start Program: Increase the amount of spouse-related information, and provide information in writing, for example copies of slides, Web sites, and phone numbers.

3. Comfort Level with the Internet

Most respondents are comfortable (50percent). Many are somewhat comfortable (40percent). Few are uncomfortable (10percent). Lack of comfort with the Internet seems to be generational.

4. Preferred Web sites

**Summary Findings:** Service members and families want to get connected and stay connected to Command Web sites because they trust them as their number one source of

information. Focus group participants provided their favorite or most frequently used Web sites beyond Command and Military installation Web sites. The Web sites are listed by type of Web site for the convenience of internal communication managers and marketing professionals. General comments from focus group participants about use of Web sites appear to be generational in nature.

➤ Command-sponsored Web sites:

Garrison/Installation Web sites:

Fort Bragg: <http://www.bragg.army.mil>

Offutt Homepage: <http://www.offutt.af.mil>

Offutt Enlisted Spouses Club  
<http://www.OffuttEnlistedSpousesClub.com/worldwide.html>

Army Community Services (ACS) Web sites at the garrison level

Major Command Web sites:

5th Corps: <http://www.5corps.army.mil>

USAREUR Blue Box (G-1 Web site):  
<http://www.pcr.hq.usareur.army.mil/bluebox/resources.htm>

USAREUR Post Reintegration Community Resource Guide Web site:  
<http://www.pcr.hq.usareur.army.mil/postreintegration>

Health Promotions Web sites:

USACHPPM (U.S. Army Center for Health Promotion & Preventive Medicine):  
<http://chppm-www.apgea.army.mil>

Hooah4Health:  
<http://www.hooah4health.com>

DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK

➤ Commercial Web sites:

CNN: <http://www.cnn.com>

Google: <http://www.google.com>

Military.com (respondents noted "They push good information to you."):  
<http://www.Military.com>

Yahoo: <http://www.yahoo.com>

➤ Family Support Web sites:

AFCrossRoads:  
<http://www.afcrossroads.com>

ArmyFamiliesOnline:  
<http://www.ArmyFamiliesOnline.org>

Army MWR Web site:  
<http://www.armymwr.com>

Marine Corps Community Services (MCCS): <http://www.usmc-mccs.org>

MyArmyLifeToo:  
<http://www.MyArmyLifeToo.com>

Navy LIFELines:  
<http://www.lifelines.navy.mil>

➤ Government Web sites:

Department of Veterans Affairs:  
<http://www.va.gov>

Federal Government's Web Portal:  
<http://www.USA.gov>

U.S. and State Government Web site

➤ Large Military Web Portals:

Army Knowledge Online (AKO):  
<http://www.army.mil/ako>

Defense Finance and Accounting Service (DFAS): <http://www.dfas.mil>

SITES (migrated to MilitaryINSTALLATIONS and Plan My Move):  
<http://www.Militaryinstallations.dod.mil/isman/MHF-MI>

Military OneSource (a.k.a. Army OneSource):  
<http://www.MilitaryOneSource.com>

MyPAY.gov:  
<https://mypay.dfas.mil/mypay.aspx>

➤ Medical Web sites:

Navy Medical Center San Diego:  
<http://www.nmcsf.med.navy.mil>

TRICARE: <http://www.tricare.mil>

TRIWEST:  
<http://www.tricare.mil/westTSC>

➤ Military-Related Associations:

Military Officers Association of America (MOAA): <http://www.moaa.org>

National Military Family Association (NMFA): <http://www.nmfa.org>

Reserve Officers Association (ROA):  
<http://www.roa.org>

5. What makes a Web site useful?

The following responses were given by the focus group participants:

"Everything you need is on one Web site."

"The site links to all other key Web sites."

"Good links to helpful resources."

DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK	
"Having direct links from your topics."	"Firewalls" -- Firewalls are a significant issue for family members.
"Resources for the disabled."	"Blocks to home computers, e.g. https secure sites are useless to families."
"Not too much information."	"Too many topics."
"A brief clip of the article on the front page, invites you to scan and read more."	"Text too hard to understand."
"Good keywords."	"High resolution graphics."
"Good search engine."	"No way to get back to the beginning."
"Attractive."	"Too many words."
"Multi-lingual, Spanish, Japanese, and French."	"Too much searching."
"Need 'Plain English' AND 'Plain Spanish', especially for National Guard and Reserve Component."	"Too many acronyms."
"A way to call or e-mail someone if you need extra help or information."	"Turned off when things are 'too Military'-- just help me!"
"Fast."	"Disorganized content."
"Links between online information and people who can help you, for example, the Military OneSource Web site and their 1-800 Call Center."	"Subjects not relevant to user needs."
"Links opening to a new window so you don't lose where you are and what you've got."	"Links don't work."
"Pop-ups on Web sites for new programs or resources, draws your attention."	"Outdated information."
"Pull down menus."	"So much info out there it's hard to keep up with it all."
"Side boxes on right and left."	"Too much information all on one Web site -- it's overwhelming."
<b>6. What makes a Web site hard to use?</b>	"Too many Web sites with the same information."
"URL too long to remember."	"Some Portable Document Format (PDF) files are a problem, especially if you have to change the font size."
"Unsure if the Web site is 'official' and a reliable source."	"Registration and log-on processes that are too difficult."
	"Web sites are becoming intimidating."

DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK	
<b>7. Have you visited the Deployment Health and Family Readiness Library?</b>	"Too text heavy, not enough pictures."
Zero to one third of each focus group had visited the online Deployment Health and Family Readiness Library.	"Topics not apparent."
<b>8. Feedback on the Deployment Health and Family Readiness Library Web site</b>	"Too much information and too many sections on the front page."
<b>Overall comments:</b>	<b>What's Missing:</b>
"Awesome!"	"Need more resources for children."
"I've been all over the site. It's great!"	"Give us local and regional resources."
"I printed off as much as I could from the site and put it in a book."	"Maps with mouse-over capability."
"What we really need is resources! Give us guides, handbooks, indexes, links."	"Military Service Specific Comprehensive Guides."
"Easy to use."	"Health link makes spouses think about TRICARE, but where is the TRICARE information?"
"Helpful resources -- very resourceful!"	<b>Recommended Improvements:</b>
"Especially liked the links to the Reserve Component, Military OneSource, DFAS and Department of Veterans Affairs Web sites."	Want a shorter name for the Web site -- one you can remember.
"I found it great to have information on the hazards and conditions our deployed Service members will encounter and not just spouse support information. It is great to have a Web site with such a great range of information."	Want a "Plain English" menu of topics.
"Too much information on one page. It's daunting to spouses."	Content needs to state when it was last updated.
"Looks like it is for professionals, not for the average family member."	Everything needs to be printer friendly.
"Scary medical information. I thought this site was for family readiness. It seems to be more for soldier readiness."	"Call it 'Deployment One Stop' to benefit from other 'one stop' resources."
"Most spouses do not think in Military terms and are turned off by overly Military Web sites."	For the feedback function, don't just link to e-mail. Give a list of communication and contact options.
	"Might want to make Library content items more like USA Today --shorter and more scannable."
	"It's a catch-22. These are complex issues. Your fact sheets seem too text-bookish, too sterile for our younger Service members. Interactive videos might be better."

DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK	
<p>"Put 'Teachable Moments' tab in the clinician's section." This comment came from drill sergeants.</p> <p>Consider allowing the user to drill down to Military Service-specific information, perhaps by Military Seal Icons.</p> <p>Navy had specific recommendations for the Library's front page: Navy respondents liked the four target audience boxes and "Frequently Viewed Topics."</p> <p>Navy recommendations for the middle section, on the Library homepage are:</p> <p>Points of Contact</p> <p>Deployment Help/Support (issues, questions) FAQs (put on the top of the page)</p> <p>Deployment Cycle (put on the front page)</p> <p>Links to Unit Commands: "How to get into my Command Unit's Web site" (recommended by many Service members)</p> <p>Pictures with category names</p> <p>Resources for managers and leaders</p> <p>Links to health care resources</p> <p>Articles and resources direct link to MyPay.gov (<a href="https://mypay.dfas.mil/mypay.aspx">https://mypay.dfas.mil/mypay.aspx</a>)</p> <p><b>Questions from Focus Group Participants:</b></p> <p>"What are you doing for people who do not have access to the Internet?"</p> <p>"Why are you mixing groups of people on the same Web site? Too much!"</p> <p>"Why do we need this resource? Seems like a duplication of Web site resources. Redundant."</p> <p>"There are better Web sites for what I need."</p>	<p>"Where is the base and local information?"</p> <p>"Why is there a limit on the number of free counseling sessions?" (Referring to Military OneSource)</p> <p><b>9. Feedback on Sample Library Fact Sheets</b></p> <p>"Good! Not too busy."</p> <p>"Too much text, not enough pictures."</p> <p>"Good colors, good text size. Add more color in body of text so things will stand out."</p> <p>Enlarge Web site URLs to make them easier to read. Web site listings in resource box are too small.</p> <p><b>Format:</b></p> <p>Add Icons for better recognition, e.g., logo of Red Cross, Military OneSource.</p> <p>Add larger sub-headings.</p> <p>Add a Do's and Don'ts section as a summary.</p> <p>"Flow things in chronological order. For example, Leishmaniasis: What is it?</p> <p>How did I get it? What should I do about it? Can it spread to my family members?"</p> <p>Emotional Cycles of Deployment Fact Sheet:</p> <p>"I really liked it, but printing it was very slow."</p> <p>"Spouses would read this one!"</p> <p>"Too wordy, boring and busy. Could it be broken down into bullets?"</p> <p>Respondents really liked the Service members Assistance Fact Sheet.</p> <p>"Liked the one sentence description telling the reader what to expect from each resource along</p>

DETAILED FINDINGS FROM FOCUS GROUP FEEDBACK
<p>with a phone number and URL...all in one short blurb."</p> <p>Like having the Web site and a phone number on the same sheet.</p> <p>Like the Courage to Care resource and format.</p> <p>Disease oriented fact sheets are "scary" and "don't fit unless you have the disease."</p> <p>Don't want too much "Military language."</p>

## Appendix 5. Acronyms, Abbreviations, and Brevity Codes

### Acronyms, Abbreviations, and Brevity Codes

For additional Joint Acronyms and Abbreviations, check:  
[http://www.dtic.mil/doctrine/sel/doddict/acronym\\_index.html](http://www.dtic.mil/doctrine/sel/doddict/acronym_index.html)

**AKO** – Army Knowledge Online  
**CFI** – Customer Feedback Initiative  
**CONUS** – Continental United States  
**DHRCWG** – Deployment Health Risk Communication Working Group  
**DoD** – Department of Defense  
**FAQ** – Frequently Asked Questions  
**FHP & R** – Force Health Protection & Readiness, Office of the Under Secretary of Defense for Health Affairs  
**FRG** – Family Readiness Group  
**JTF FRED** – Joint Task Force for Family Readiness Education on Deployments  
**MC & FP** – Office of Military Community & Family Policy, Office of the Assistant Secretary of Defense (Personnel and Readiness)  
**MCCS** – Marine Corps Community Services  
**MTF** – Medical Treatment Facilities  
**MWR** – Moral Welfare and Recreation  
**NMFA** – National Military Family Association  
**OCONUS** – Outside the Continental United States  
**POC** – Point of Contact  
**ROA** – Reserve Officers Association  
**USACHPPM** – United States Army Center for Health Promotion & Preventive Medicine  
**USAREUR** – United States Army European Command

## Appendix 6. Action Memo (page 1 of 3)



### THE ASSISTANT SECRETARY OF DEFENSE

1200 DEFENSE PENTAGON  
WASHINGTON, DC 20301-1200

HEALTH AFFAIRS

ACTION MEMO

NOV 28 2007

FOR: UNDER SECRETARY OF DEFENSE (PERSONNEL & READINESS)

FROM: S. Ward Casscells, MD, ASD (Health Affairs)

SUBJECT: Deployment Health and Family Readiness Customer Feedback Initiative Report

- The memorandum at TAB A requests that the Assistant Secretary of Defense (Reserve Affairs) and the Services transmit the 2006 Deployment Health and Family Readiness Customer Feedback Initiative (CFI) Report (TAB B) to medical and family service organizations and command leaders.
- CFI Report provides Department of Defense (DoD) senior leaders and family support personnel with direct feedback on Service and family member information needs (family readiness and health) during the deployment cycle.
- CFI suggests five major areas for improving deployment health and family readiness support:
  - More deployment preparation and reintegration information and support;
  - More mental health services and emotional support materials;
  - Better communication between commands, Service members, and families;
  - Quicker and easier access to local and regional information; and
  - Expanded emphasis on preventive medicine education related to deployment
- The report includes recommendations for improving the Deployment Health and Family Readiness Library (DHRFL) Web site and for sustaining the CFI process to ensure delivery of timely and high quality deployment-related information. Improvements to the DoD DHFRL Web site are underway.

RECOMMENDATION: That USD (P&R) sign the memorandum at TAB A.

COORDINATION: TAB C

Attachments:  
As stated

Prepared by: Ms. Jodi Graul, FHP&R, (703) 845-3326, Livelink # 136969, 136970



PERSONNEL AND  
READINESS

UNDER SECRETARY OF DEFENSE  
4000 DEFENSE PENTAGON  
WASHINGTON, DC 20301-4000

DEC 19 2007

MEMORANDUM FOR ASSISTANT SECRETARY OF DEFENSE (RESERVE  
AFFAIRS)  
ASSISTANT SECRETARIES OF THE SERVICES (M&RA)

SUBJECT: Deployment Health and Family Readiness Customer Feedback Initiative  
Report

Please forward the attached 2006 Deployment Health and Family Readiness Customer Feedback Initiative Report to your support organizations involved in the communication and dissemination of deployment health and family readiness information. This report was assembled to guide the efforts of the Department of Defense Deployment Health Risk Communication Working Group and the Joint Task Force for Family Education on Deployments, which develop products for the Web-based Deployment Health and Family Readiness Library (<http://deploymenthealthlibrary.fhp.osd.mil>). The library is proving to be a valuable resource for Service members, families, health care providers, and leaders.

This report provides feedback on Service members' and their families' health and family readiness information needs throughout the deployment cycle. The report identifies major areas for improving deployment-related information and dissemination as well as guidelines for sustaining the feedback process to ensure delivery of timely and high quality deployment-related information. We will post the report for public access on the library web site (<http://deploymenthealthlibrary.fhp.osd.mil>).

My point of contact is Dr. Michael Kilpatrick, Deputy Director for Force Health Protection and Readiness, at [Michael.Kilpatrick@tma.osd.mil](mailto:Michael.Kilpatrick@tma.osd.mil) or (703) 578-8510.

  
David S. C. Chu

Attachment:  
As stated

cc:  
Director, Joint Staff  
Commandant of the Marine Corps

Deployment Health and Family Readiness Customer Feedback Initiative Report

COORDINATION

DASD (FHP&R)	Ms. Ellen Embrey	Concur, October 12, 2007
CoS (HA)	COL Thom Kurmel	November 26, 2007
PDASD (HA)	Dr. Stephen Jones	November 27, 2007
DUSD (MC&FP)	Ms. Leslye Arsht <i>for</i>	<u>Dec 10, 2007</u>
PDUSD (P&R)	Mr. Michael Dominguez	_____



