

Multi-Dimensional Model (MDM)

Family Reintegration and Combat Stress Reaction

Andrea Van Gorder, MSBS and Ric Jerez, Ph.D.

A two front battle is created when service members deploy. The first battle-front is the service members deploying to an intense, high-paced environment. Troops live in a vigilant, reactive state because the nature of deployments is the uncertainty of where threat lies. Survival depends upon the quick reaction and constant



vigilance of the environment. A car parked on the side of the road represents the chaos of a potential explosion and life-threatening injury or death. The second battle-front is the family left behind fighting to stay connected and close to their service member. The family is at home waiting with the uncertainty of when the phone will ring wondering when they will hear the voice of their partner or parent. In addition, when contact is made, the family hears mortar rounds and gunfire in the background. When the service member returns, they bring the heightened vigilance that served them well in theater. The quick response that meant survival has now leads to conflict and crying at home. The troop's survival reaction at home and the associated emotions is

called combat stress reaction and can lead to Post-Traumatic Stress Disorder (PTSD).

When service members suffer PTSD so do their families. The service member will see, hear or think about something that will trigger a response that was useful during deployment and they act as if they were in the deployed environment. The family experiences the combat reaction yet do not have the combat context. In turn the family reacts in a way that the service member does not understand and the service member strives to protect his or her family to the best of their training. This may consist of parameter guard, yelling at the family to get inside the house, staying up all night, and more. The family does not know what to do with this behavior and will react as civilians do, including yelling, crying, feeling frozen, wanting to run, and more. In turn service members increase their response and this begins a vicious cycle.

Open Arms Behavioral Health has developed a multi-faceted intensive therapy model to address post-deployment integration, combat stress reaction (CSR), Adjustment Disorder, Acute Stress Disorder and PTSD. The program is a family and community based model that focuses on transitioning service members and their family members from the intense high-paced deployment to an integrated functional family. The intensive program starts with a comprehensive assessment that leads to an individualized program tailored to each family's goals. The duration of the program will vary based on the family's need. The therapy team will spend more time with the family initially using a variety of treatment options. Over time, the team will reduce the amount of time spent to promote family autonomy.

This program meets service members and their families where they are. The multi-dimensional program integrates individual, marital, family, with occupational and community options shifting the community of fighting and surviving to a community of healing.

