

Book Review

Rubin, A., Weiss, E., & Coll, J. (Eds.). (2013). *Handbook of military social work*. Hoboken, NJ: John Wiley and Sons.

Reviewed by Zachary S. Kern, MSW student
University of South Dakota

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Introduction

The Handbook of Military Social Work is edited by Allen Rubin, Eugenia L. Weiss; and Jose E. Coll and 48 additional contributors, who have a vast array of experience in either academic and/or social work practice. The publication addresses social issues concerning active duty, Reserve/National Guard members, veterans, and family members (from here on known as *the population*). There is an adage in academia that says “Publish or Perish.” This publication is an example for a new adage: “Publish and Educate”. Readers who use this book will find it informative, educational and stimulating. The book is useful for readers needing information on military and veteran issues. The field of readers can range from social workers, mental health care providers, medical care providers, staff at veterans service organizations (VSOs), educators, providers of employment or family services, clergy, short- and long-term care providers, volunteers or individuals seeking information. As a Masters in Social Work (MSW) student, disabled veteran, and former Disabled Veteran Outreach Program Specialist (DVOP), I found the book, informative, direct, and easy to retrieve and cross-reference the information and resources.

The subject material addresses current policies on caregiving to the population and addresses the need to adjust policies in the future, including women’s need for care, confidentiality, treatments and therapies for post-traumatic stress disorder

(PTSD), traumatic brain injury (TBI), substance abuse, suicide risks and preventions, homelessness, transitioning to civilian life, effect of deployments on the population, and diverse family issues. The text provides an excellent and broad introduction to issues and concerns addressing this population. Also addressed are competencies for core military social work per the Educational Policy and Accreditation Standards (EPAS) for the Council on Social Work Education (CSWE).

Book Layout

The book consists of 608 pages, broken down into 4 well-defined parts, composed of 26 chapters, including vignettes and discussion questions. The references are well organized to provide effective research on a higher level. The Appendix has a list of VSO’s and military family resources (there is a disclaimer to always research your sources). For those individuals without a military background, the Glossary of Military Terms provides a good start to understanding military terminology to understand and work with the population more effectively. We need to understand military culture just as well as other cultures in order to serve them better. The Author and Subject Indexes are worthwhile tools.

Part I

Part I contains the first five chapters, which introduce readers to military social work. Military social work started during the Civil War but did not

become recognized until World War II as a social work discipline. Military culture is addressed so caregivers can understand the population effectively. Issues such as PTSD, divorce, military sexual trauma (MST) and physical and biological needs are discussed as they specifically relate to women. Specific problems for caregivers of the population such as the predicaments that may be caused by conflicting professional codes of ethics and confidentiality versus the military's mission requirements are reviewed. The book also addresses secondary trauma to practitioners and methods for addressing it as they care for the population.

Part II

Part II consists of chapters 6 – 14, addressing interventions for the behavioral health care problems of the population. The history of PTSD and the impact of models and interventions are explored. Treatments for PTSD discussed in this section include exposure therapy in cognitive processing therapy (CPT) and virtual reality (VR). VR therapy allows caregivers effective control of the triggers for traumatic input and monitoring of the psychological responses in the clients.

In order for caregivers to understand the effectiveness of medications in treating PTSD and associated disorders, the basics of psychopharmacological interventions are discussed and how to work in a multidisciplinary treatment team providing for the client. The treatments and psychosocial impact of TBI and associated disorders on the individuals and families are reviewed. We, as caregivers, need to understand TBI to assist clients with treatment and recovery.

Historically, there has been an issue of substance abuse in the military. Substance abuse, combined with PTSD and other co-occurring disorders, make the prospects of care even more complicated. Included in this section are effective treatments, prevention programs and long-term continuous care for substance abuse victims.

Suicide is a serious problem and is addressed in the book. Social workers need to understand the factors increasing the likelihood of suicide. The three primary factors mentioned that are linked with suicide are relationship, legal and financial problems. We need to counter the suicide issue by recognizing the factors involved with the individuals and detecting individuals at risk. A program mentioned in the book that is used by the military is Total Force Fitness (TFF). It is a model that combines medical, psychological, behavioral and social fitness as protective factors in preventing suicide.

Part III

Veterans and their systems of care are addressed in Part III, which consists of chapters 15 – 17. These chapters discuss homelessness, care systems and transitions into civilian life for veterans. Care for the veterans who are homeless begins with a grassroots effort between case workers, volunteers, and the veterans themselves.

There is a beneficial introduction to the Veterans Affairs (VA) systems and procedures. The VA can be perceived as complex and cumbersome to not only the population, but also to caregivers.

Many veterans may have issues transitioning to civilian life, going from a firm, understanding, and supportive military society to the civilian world, where employment, housing, social adjustments, care, and education have to be addressed by the individuals or families without institutional support.

Part IV

Part IV, consisting of chapters 18 – 26, is an overview of the effects of military service on families and discusses the roles of social workers. These issues include a brief history of military families and social work interaction since the Revolutionary War, effects of the stages of deployment cycles on families, and the differences in family support between active duty and Reserve/National Guard.

In addition, this section discusses providing for the Exceptional Family Member Program (EFMP), loss and bereavement, the effect military service has on children, and loss of benefits for families.

The Stress Process Model for long term care and effects of on caregivers and the population using theories for stress, appraisal and coping is reviewed. Clinical practitioners can use this model to assist the population in dealing with physical, mental and psychosocial health issues associated with long term care and other stressful incidents in their lives.

The final three chapters address family centered programs for children and youth, couples therapy, empirical theories, and practices being used for the families. Military service puts a unique pressure on the population. Understanding the issues and coping tools available to deal with the stresses is paramount to assisting the population.

Recommendations

The book is well written and organized. The next publication could be updated and correlated to DSM 5 (Diagnostic and Statistical Manual of Mental Disorders 5). DSM IV was used during the writing of the first edition. The chapters are well labeled, but adding the chapter number to the pages will allow individuals quicker access to information.

The book does not address Complementary and Alternative Medicine (CAM) in conjunction with traditional western medical treatment, possibly because more empirical studies are needed. The VA is offering this treatment to veterans through Integrated Medicine. CAM treatments can consist of acupuncture, meditation, relaxation, yoga and other CAM mind-body practices (energy therapy for PTSD, Emotional Freedom Techniques (EFT), and Eye Movement Desensitization and Reprocessing (EMDR). More research definitely needs to be done about the usefulness of CAM in treatment.

Conclusion

Anyone dealing with active military, Reserve/ National Guard members, veterans, and families will find the Handbook of Military Social Work an excellent resource and tool to have in their library. Not just professionals, but laypersons and students would appreciate this book as it is an informative and appropriate publication to be used in education and practice.