



Providing a View From the Front Line: How Deployment Effects Reservists

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Who are the Reserves?

- **1.1 million men and women** from the Army, Air Force, Navy and Coast Guard Reserve, the Army National Guard and Army Air Guard
- **Gender:** 888,892 Males; 192,453 Females
- **Race:**
 - White: 817,843
 - Black: 152,802
 - AI/NA: 0,979
 - A: 29,382
 - NH/PI: 5457
 - UNK: 12,918
 - O: 51,984
- **Ethnicity:**
 - A 33,176
 - H 102,659
 - NA 11,160
 - O 499,876
 - NONE 410,153
 - UNK 24,341
- **Average age:** 38 years old

Data Source: Defense Manpower Data Center



How Long Have They Been Deployed?

- Percentage Deployed¹

– Army National Guard:	46%
– Army Reserve:	55%
– Navy Reserve:	25%
– Marine Corps Reserve:	39%
– Air National Guard:	13%
– Air Force Reserve:	22%
– Coast Guard Reserve:	0.2%

- Average length of deployment since 2001^{*2}

– Army NG and Reserve:	414 days or 14 months
– Navy Reserve,	324 days or 11 months
– Marine Corps Reserve:	356 days or 12 months
– The Air National Guard & Reserve:	248 days or 8 months

*Note: since January 2007 Deployments have been limited to 12 months

1. Reserve Components Common Personnel Data System
2. Defense Manpower Data Center



Who Are The Families?

- **Reservists**
 - **Married: ~50%¹**
 - **Dependents: 1,618,041²**
- **Location**
 - **Most live in communities far from military installations**
 - **Communities have little understanding of, and experience, with the military**

1. Defense Enrollment Eligibility Reporting System /Reserve Components Common Personnel Data System

2. Defense Manpower Data Center



Effects of Chronic Deployment

- **Multiple deployments and returns can amplify family problems and stress strained relationships and financial resources.**
- **Even a single deployment can create problems with civilian employers. Deployment often leads to an increase in substance dependence and abuse.¹**
- **No direct link between deployment and suicide has been found.²**

1. Jacobson, I.G., et al (2008). Alcohol use and alcohol-related problems before and after military combat deployment. *JAMA*, 300(6), 663-675.
2. Kang, & Bullman (2008). Risk of suicide among US veterans after returning from the Iraq or Afghanistan war zones. *JAMA*, 300 (6), 652-653.



Substance Abuse in the Reserve Component (RC)

- **Tobacco:**
 - General smoking rates: 8-9 % across all Reserve Components
 - Higher rates of heavy smoking in ARNG, USMCR and USAR¹
- **Alcohol:**
 - Lower daily alcohol consumption rates in USAFR, ANG and USNR than ARNG, USAR and USMCR¹
- **Illegal Substances:**
 - Highest Rates in ARNG
 - Lowest in USNR
 - All illegal drug users are outprocessed from the RC¹

¹DoD Survey of Health Related Behaviors Among Guard and Reserve Force, 2007 by RTI International



Stress and the RC

- **Source:**
 - **Family**
 - **Civilian employment**
 - **Reserve employment**
- **Result:**
 - **36% reported military work demands interfere with family life;**
 - **Highest level of family-work conflict: USMCR**
 - **Lowest level of family-work conflict: ANG¹**
 - **History of SH/SA leads to poorer physical and mental**
 - **Health: depression, PTSD & somatic symptoms²**

¹DoD Survey of Health Related Behaviors Among Guard and Reserve Force, 2007 by RTI International

² Street, et al., (2008). Sexual harassment and assault experienced by reservists during military service: Prevalence and health correlates, *Jnl Rehab Rsch & Dev*, 45 (3), 409-420.



Women and Stress in the RC

- DoD Survey Indications
 - Women reported significantly **more stress than men**¹
 - 25% reported a **'great deal' of stress** related to being a female in a male-dominated, combat-oriented environment¹
 - More than 50% of females and 37% of males reported some type of physical or sexual harassment or abuse^{1, 2}

¹DoD Survey of Health Related Behaviors Among Guard and Reserve Force, 2007 by RTI International

²Street, et al., (2008). Sexual harassment and assault experienced by reservists during Military service: Prevalence and health correlates, *Jnl Rehab Rsch & Dev*, 45 (3), 409-420.



Women and Stress in the RC

- Most studies on women are descriptive & observational, clustered in areas related to PTSD:
 - Stress of military life
 - Health & performance
 - Health services research
 - Psychiatric conditions⁴
- There is much less research on evaluation of treatment or prevention programs⁴

⁴ Goldzweig, et al. (2006). The state of women veterans' health research: Results of a systematic Literature review. *J Gen Intern Med* 21, S82-92.



Children of Deployed RC Members

- **Little research on children of deployed RC**
- **400,000 DOD adolescent family members**
- **Number of school-age children of RC-deployed personnel unknown**
- **Evidence indicates the Gulf War (1990-1991) families were still experiencing difficulties one year after reunion²**

¹ DOD, (2007). *2005 Demographics Report*. Arlington, Va: Office of the Deputy Under Secretary of Defense (Military Community and Family Policy)

² Peebles-Kleiger & Kleiger (1994). Re-integration stress for Desert Storm families: Wartime deployments and family trauma. *Jnl of Traumatic Stress*, 7, 173-194.



What We Don't Know

- **Effective ways to reduce tobacco and alcohol use in RC**
- **Effective ways to teach gender-appropriate stress-reduction behaviors in RC**
- **If there are varying responses to deployment by gender and component**
- **Effective ways to help families and children cope with deployment**
- **Ways to provide effective services to a geographically-dispersed force**



Conclusion

Reserve Component vs. Active Duty

- The Reserves are now an operational force comprised of 82% men and 18% women.¹
- The Reserves are an ethnically diverse force.
- RC Members are unique in that they juggle a civilian career in addition to military career and family-which *may* mean greater stress prior to and after deployment.
- RC Members may have unique needs yet to be identified within the paradigm of being an operational force.



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