FAMILY PHYSICIANS WORKING WITH
MILITARY FAMILIES

THE MILITARY COMMUNITY HAS DEFENDED CANADA’S VALUES, INTERESTS AND SOVEREIGNTY AT HOME AND ABROAD. SERVICE MEMBERS’ FAMILIES PROUDLY CONTRIBUTE ON THE HOME FRONT AND ARE THE STRENGTH BEHIND THE UNIFORM.
FAMILY PHYSICIANS WORKING WITH MILITARY FAMILIES

The military community in Canada is defined by its dedication to defending Canada’s values, interests and sovereignty at home and abroad. Service members’ families proudly contribute on the home front and are the strength behind the uniform. However, frequent geographic relocations and work-related long-term or frequent separations can challenge even the healthiest of families. Military families also face the additional stress of having a loved one sent to high-risk environments that could lead to illness, injury, disability or death.

As a family physician, you know the importance of establishing a relationship of trust and caring with your patients. Having a basic level of military family literacy will provide you with an understanding of the unique experiences lived by military families. The compassionate and patient-centred care you deliver can mitigate an individual family’s stress and anxiety and strengthen the resilience of the entire military community.

DID YOU KNOW?

PRIMARY CARE

- In Canada the families of active military members do not receive medical care through the military. They access services through the provincial and territorial health care systems.
- Military families often find it difficult to secure a family physician as a result of multiple relocations across the country.
- Without a family physician, families face lengthy wait times for referrals, prescription refills and other specialist care. Families can miss periodic health assessments, routine screenings, immunizations and preventive care.

CARE BY OTHER SPECIALISTS

- For families who have children with special needs, the challenge of not having a family physician has extreme consequences for timely diagnoses, referrals to other specialized care and educational supports.
- The families of military members with physical and/or mental illnesses may have to deal with changing behaviours and intense relationship dynamics. Family members are also often the primary informal caregivers, which can lead to negative physical and mental health consequences for them as well as the ill/injured military member.
- In rural, isolated or semi-isolated locations—which is where half of Canadian military communities are located—specialist care, if available at all, may be hours away.
of military families in Canada live off base in neighbourhoods across the country (Dunn, Urban & Wang, 2011)

of Canadian Armed Forces spouses find it extremely difficult to re-establish medical services after relocation (CAFFRT, 2016)

of military spouses surveyed reported that they don’t have a family physician for themselves, and 17% did not have a family physician for their children (compared with the Canadian average of 15.5% without family doctors) (Wang, Aitken & CAFFRT, 2016)

of military spouses did not receive needed health care in the past year primarily due to long wait times (Wang, Aitken & CAFFRT, 2016)

military members report symptoms of at least one mental health disorder (Pearson, Zamorski & Janz, 2014)

approximate number of military personnel who retire from the Canadian Armed Forces each year and require a family physician to take care of their health care needs from the point of their release (Director Research Personnel Generation, 2011)

of these members are released each year for medical reasons, most due to permanent employment limitations from a physical nature and about 40% are released due to employment limitations from a mental health illness (Manser, 2015)

of military spouses reported their physical and mental health to be good, very good or excellent (Wang, Aitken & CAFFRT, 2016)

MILITARY FAMILIES AT-A-GLANCE

• Military populations are at risk of mental health issues because of factors associated with deployment, combat exposure and periods of transition. (Canadian Forces Health Services Group (CFHSG), 2013)

• Studies have demonstrated that the overall prevalence of one or more mental illnesses in the Canadian Armed Forces is similar to that in the general population, including the level of alcohol dependence. For reasons that are not yet fully understood, however, military personnel have almost twice the risk of depression as their civilian counterparts. (CFHSG, 2013)

• Learn about the Military Family Services programs and supports by going to www.familyforce.ca or the 24/7 Family Information Line at 1-800-866-4546, and be prepared to refer patients when needed.

• Add military health care topics, such as signs and symptoms of operational illness, to your continuing professional development plans. There will be sessions on these topics at Family Medicine Forum, which is the largest annual family medicine conference in Canada, and other venues to help you learn more.

GENERAL AWARENESS AND KNOWLEDGE

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CONTINUITY OF CARE

- Advise your patients to keep copies of their medical records so they can self-manage their continuity of care.
- When providing well baby/well child care, use standardized forms such as the Rourke Record to ensure you are getting a complete picture of the child's development. Give the accompanying parent copies of the record and growth charts.
- If you have a military family patient in your practice who is being relocated, help them find a new family doctor in their new location. Refer them to the local Military Family Resource Centre for assistance.

MILITARY FAMILIES IN YOUR PRACTICE

- Consider opening your practice to fast track access for military family members who may be new to your community.
- When a new patient calls, have your reception staff ask whether they have any military affiliation, such as, “Are you a family member of someone serving with the military?”
- Have your staff book adequate time to do the intake history, which may be complicated by frequent moves.
- Consider using a new patient questionnaire to capture information unique to military families.
FOR MORE INFORMATION

Canadian Institute for Military and Veterans Health Research - https://cimvhr.ca/
Canadian Mental Health Association (CMHA) – http://www.cmha.ca/mental_health/post-traumatic-stress-disorder/
College of Family Physicians of Canada - http://www.cfp.ca/Home/
Military Family Services - www.familyforce.ca
Operational Stress Injury Social Support (OSISS) - www.osiss.ca
Vanier Institute of the Family - http://vanierinstitute.ca/
Veterans Affairs Canada – http://www.veterans.gc.ca/

SUBJECT MATTER EXPERT REVIEWERS
Colonel Marc Bilodeau – CAF Family Physician, Canadian Forces Health Services
Dr. Cyd Courchesne – Chief Medical Officer, Veterans Affairs Canada
Dr. Heidi Cramm – Interim Co-Scientific Director, Canadian Institute of Military and Veteran Health Research
Dr. Cathy MacLean – Family Physician, College of Family Physicians of Canada
Russell Mann – Senior Consultant, Vanier Institute of the Family
Lynda Manner – Lead Manager Strategic Program Development, Military Family Services
Gunina Mierer –Director, Program and Practice Support, College of Family Physicians of Canada
Dr. Alla Skomorovsky – Defence Scientist, Director General Military Personnel Research and Analysis
Nora Spinks – CEO, The Vanier Institute of the Family
Todd Stride – Senior Manager Community Engagement Military Family Services
Occupational Medicine Program Committee of the Communities of Practice in Family Medicine
Patient Medical Home Steering Committee, College of Family Physicians of Canada

WITH THANKS AND ACKNOWLEDGEMENT
Military Family Research Institute at Purdue University – Dr. Shelley MacDermid-Wadsworth, Director

THE CFPC: THE VOICE OF FAMILY MEDICINE IN CANADA

Representing more than 35,000 members across the country, the College of Family Physicians of Canada (CFPC) is the professional organization responsible for establishing standards for the training, certification and lifelong education of family physicians and for advocating on behalf of the specialty of family medicine, family physicians and their patients. The CFPC accredits postgraduate family medicine training in Canada’s 17 medical schools.

ABOUT THE CANADIAN MILITARY AND VETERAN FAMILIES LEADERSHIP CIRCLE

The Leadership Circle includes leaders from businesses and community, Department of National Defence, Veterans Affairs Canada, Military Family Services, Military Family Resource Centres and military and Veteran families. Members have an interest in the partner-based Canadian Military and Veteran Families Leadership Circle to share information, mobilize knowledge, foster relationships and form collaborations. The Working with Military and Veteran Families in Canada series equips professionals and informs communities so they can equitably serve military members, Veterans and their families. Each publication in the series is customized to various professionals and practitioners in the community.

RESEARCH REFERENCES


ADDITIONAL REFERENCES USED TO INFORM THIS DOCUMENT

