Update Exceptional Family Members before negotiating orders

By Navy Personnel Command Public Affairs

There are currently 16,000 Navy families enrolled in the Exceptional Family Member Program (EFMP), but some Sailors are not updating their packages before entering their detailing window.

"Enrollment in the EFM program is mandatory for all family members with long-term medical, mental health or educational needs and is required immediately upon identification of a special need," said Cmdr. Cynthia Granby, EFMP branch head at Navy Personnel Command.

"Before a detailer can release orders, an updated EFM status is needed. The sponsor is responsible for knowing his or her EFM update timeframe and for updating the file prior to negotiating for orders. Local coordinators at the nearest Military Treatment Facility can be contacted to confirm update status and timeframe."

Family member status updates are required nine months prior to a Sailor's Projected Rotation Date, every three years, or whenever the enrolled member's need changes. Temporary enrollments (Category VI) must be updated within a year of assignment.

The EFMP is required for authorized family members who possess a physical, emotional, developmental or educational disability, or a condition that requires special medical, mental health or education services and reside with or are in the custody of a Sailor. Enrollment ensures family members' needs are identified so that Sailors are stationed where those needs can best be met.

"The program is a benefit for Sailors and commands," said Kathleen Wells, Navy EFMP manager. "It's available to help alleviate hardships on family members by ensuring their special needs are considered in the detailing process."

"EFMP remains flexible," Granby said. "Once the sponsor enrolls and family needs are identified, [the service member] will have a good chance at obtaining a career enhancing assignment."

EFMP families are classed into one of six categories. For those families who have been designated categories IV and V, the Navy has a separate program, Navy EFMP Respite Care, which provides up to 40 hours of free in-home care for exceptional family members and their siblings.

"Many family members enrolled in the program have complex needs that cannot be met using typical in-home care," said Sharon Fatheree, Navy Child and Youth Programs, Outreach program manager for Fleet and Family Readiness. "The Navy EFMP Respite Care Program is provided through the Child and Youth Programs and was designed to offer parents in-home care with specialized providers trained to meet the individual needs of the family member so parents can feel safe leaving children in in-home care to run errands, go to medical appointments or just get a change to reconnect with their spouse."

Currently Respite Care is offered at five locations: Jacksonville, Fla.; Bremerton, Wash.; San Diego; Norfolk, Va.; Naval District of Washington D.C.; and 50 independent locations in the continental U.S. Sailors interested in Respite Care can visit the National Association of Child Care Resource and Referral Agencies website at www.naccrra.org/MilitaryPrograms/navy.php for more information or to be put on the waiting list for care.

For more information about EFMP, visit their website at http: www.npc.navy.mil/CommandSupport/ExceptionalFamilyMember/ or call the NPC Customer Service Center toll-free at 1-866-827-5672.

HMC Daryhl Tolley gives HM2 Ramon Eusebio permission to process a set of permanent change of station (PCS) orders. Tolley and Eusebio are hospital corpsman detailers at NPC. In fiscal year 2009, NPC issued approximately 72,600 funded PCS orders with an average cost of $8,556 per move.

U.S. Navy photo by MC1 LaTunya Howard

Shipmates looking out for shipmates key to suicide prevention

By MC3(SW/AW) Michelle Rhonehouse, Navy Region Southwest Public Affairs

According to the American Foundation for Suicide Prevention, more than 33,000 people in the United States commit suicide every year. Suicide is the fourth leading cause of death for adults between the ages of 18 and 65.

According to Capt. Gerald D. Seely, chaplain for Navy Region Southwest, the Navy is trying to get a handle on why Sailors take their own lives and how the amount of suicides can be decreased.

Seely explained that suicide prevention is everyone's responsibility.

"It is not just the mental health advisor's, the chaplain's or the commanding officer's job to watch out for Sailors. It's fellow shipmates looking out for each other," said Seely. "These are the folks you work with day in and day out. We have to stay engaged and alert. If we can do that, we could get a real handle on this issue."

There are many warning signs that may indicate that one of your fellow Sailors is at risk for suicide. Change in behavior, personality, irritability and low energy levels could be a red flag, said Seely.

"Some of the symptoms are a direct result of stressors in someone's life. Relationships and deployments are big ones," said Seely. "It's usually not just one thing, but a combination of stressors piled on top of someone. The more stress, the more at risk a Sailor could be."

If you know one of your shipmates may be thinking about suicide or is at risk of committing suicide, the response is the acronym ACT, said Seely.

• **A**, Ask. Don't be afraid to ask the question, "Are you thinking of suicide or of harming yourself?" it is a myth that by asking the questions one gives the person at risk the idea to harm themselves. The reality is that someone who is at risk for suicide has already experienced high levels of stress, may be suffering from depression, and, as a result, may not be able to see and understand all of their options to resolving their problems. So, asking the question does not trigger the idea of suicide. Instead, it enables the person at risk know that you are concerned and that symptoms are being noticed.

• **C**, Care. Let them know you care and want to help. It takes commitment and courage sometimes to show someone you care about them and are willing to get involved. You may be met with resistance but, sometimes we must walk through this resistance in order to help. This in and of itself can be healing. Empathy for another is a powerful thing.

• **T**, Treat. Get help. There are many resources such as a chaplain, your chain of command, medical, FFSC and hospital emergency rooms.

According to Seely, Sailors need to get away from the stigma that if they are depressed or have other mental health issues, they will get in trouble.

"The military over the past few years has become better at treating mental health issues," said Seely. "There is nothing wrong with going to talk to a trained professional at one of the many facilities the military offers. There is a lot of help out there."

For more information about suicide prevention, visit www.npc.navy.mil/CommandSupport/SuicidePrevention.

The Chief asks:

"Did you know, almost everyone who commits or attempts suicide has given some clue or warning? Do not ignore suicide threats. Statements, no matter how casually or jokingly said may indicate serious suicidal feelings.

"Most suicidal people are not psychotic or insane. They may be upset, grief-stricken, depressed or despairing, but extreme distress and emotional pain are not necessarily signs of mental illness.

"Even the most severely depressed person has mixed feelings about death, wavering until the very last moment between wanting to live and wanting to die. Most suicidal people do not want death; they want the pain to stop. The impulse to end it all, however overpowering, does not last forever.

"If you think a fellow Sailor, family member or friend might be at risk for suicide, you can help by taking immediate action.

"If you didn't know, now you know." – MCC(SW/AW) Eric Hannah, CFAY Public Affairs

According to the American Foundation for Suicide Prevention, more than 33,000 people in the United States commit suicide every year. Suicide is the fourth leading cause of death for adults between the ages of 18 and 65.

Image courtesy of Naval Personnel Command