

BUILDING AN INTERNATIONAL MILITARY SOCIAL WORK FOCUS:

A CALL FOR ACTION

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Times are grim and volatile in the world today. Nations, informal groups, and individuals all share the spotlight of conflict. War is imminent or occurring in different arenas of interest. The military of many countries are building in capability and mission. Joint operations are increasingly occurring and missions are blending military, peacekeeping, and community building tasks. Often, the military force is overtaxed, stressed, and confused about their role and capability. Cross cultural communication and negotiation are increasing in importance. Soldiers seem to need both the ability to use deadly force and highly skilled cultural competence. Sometimes these abilities must switch in an instant as soldiers search a house for militants, walk a patrol down narrow alleys, or face children cursing them for unclear misdeeds. Language and local custom barriers add to the confusion. These scenarios face the soldiers of many countries including the United States, Britain, Canada, Israeli, Lebanon, China, and many more. Multi-national joint forces are mixing troops from different countries on centralized missions. These diverse activities raise an interesting question: who is preparing these troops for skills of cultural competence, cross-cultural communication, community building, and personal coping?

One source of training could be military social workers, both uniformed and civilian. Many countries have some military social workers, though the size and mission of the social workers varies greatly (Daley, 1999, 2000, in press). Military social workers have traditionally worked with the military members and their families around mental health or family violence issues. I served for 18 years as a uniformed military social worker within the United States Air Force. There is an interesting paradox. On one side, there have been excellent programs developed including family advocacy, suicide awareness, assistance for families with handicapped members. Military social workers are key, though not the only, providers of mental health, substance abuse, family support, and organizational consultation programs for the military (Daley & Tracey, 2006). Uniformed military social workers are deployed to combat zones and provide a variety of roles that help the troops cope (Martin & Campbell, 1999). They know the world of the military and how to navigate a very closed society to achieve success.

However, on the other side, military social workers function within a military that is a closed society communicating beyond its own service only when needed or after a mission is accomplished. This produces an inward communication style where the military branch (Army, Navy, etc.) coordinates well within itself but not well between its branches and rarely beyond its own country. Great accomplishments are little known outside the service. This makes multi-country collaboration harder be-

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cause the activity goes counter to the preferred style. This closed society has formed as a response to media frenzies or premature exposure of military plans. The style makes sense but makes it harder to expand out of a hometown mentality and into a collaborative international partnership.

The world crises of today have the potential to expand the view of the military from single country goals to effective partnerships that better prepare soldiers, offer more coordinated support services, and reduce the clashes of culture that are rampant in the current encounters between troops and local communities. The training needs have transformed from merely being proficient with a weapon to having an acute awareness of the context of confronting a person who might be terrorist or innocent bystander. Frankly, every botched interaction produces pain and anger in the person, their family, and the larger community. Pain, anger, and poverty are ripe conditions for future terrorist recruitment. The world's military must reduce not produce the terrorist networks if this crisis on the world stage is to calm down.

So how should the preparation and implementation of these multi-national forces occur? There should be a three-pronged approach: *develop, educate, and monitor*. First, there should be forums where social work experts in cultural competence and cross-cultural communication meet and develop specific recommended standards of preparation and training curriculum. These forums could be done at established social work national conferences (NASW, CSWE), at specialty conferences frequented by military social workers (e.g. San Diego Conference on the Child or PTSD conference), or at interdisciplinary specialty conferences (e.g. Inter-University Seminar on Armed Forces and Society or the International Congress on Military Medicine). Second, there needs to be a meeting, either connected to a national conference or independent, of current military social workers from different countries. This meeting should take the recommendations of the forums and discuss how to implement them and educate the social workers and the troops themselves within the military system. Further, this meeting should serve as a discussion of how to function effectively in multi-national missions. What is the role and responsibility of a military social worker from country X who is deployed with a force composed of countries XYZ? Is the responsibility only with country X or are there core skills that transcend country and are helpful to all military? Should there be established exchange programs between countries for military social workers? Finally, there needs to be a commitment to monitor by national organizations (e.g. NASW) and international organizations (United Nations, International Federation of Social Workers) of progress in this area. External oversight is a valuable tool to help expedite changes in the military.

Currently, military social workers and experts in cultural competence seem silent about the social work potential in this vital arena. This call for action is intended to stir up attention. Social Work as a profession needs to lead. The resources, expertise, and personnel are present. What is needed is an impetus. What is needed is our commitment.

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