Perseverance and Progress: Career Counseling for Military Personnel With Traumatic Brain Injury

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Abstract

The push for increased access of counselors to military personnel requires clinicians to be aware of issues common within this population. One emerging issue is military personnel who have suffered a traumatic brain injury (TBI), the signature wound of the recent conflicts in Afghanistan and Iraq. Career counseling offers a useful intervention to assist in their rehabilitation. Given the potential issues this injury presents to career development, creating a framework to enhance the ability of service members and veterans with TBI to effectively navigate a career choice is essential to addressing their needs. This article will discuss a strength-based approach, which utilizes aspects of cognitive-behavioral therapy, to assist military personnel with traumatic brain injury in their career development.

Keywords: career development, cognitive-behavioral and strengths-based therapy, military, traumatic brain injury

Traumatic brain injury (TBI) is considered the signature wound of the recent conflicts in Iraq and Afghanistan with an increase in the incidence in comparison to previous conflicts (Bagalman, 2011). For those suffering a TBI engaging in work has
been indicated as beneficial in enhancing their recovery. Work can address non-vocational areas such as depression and reduce the likeliness of substance abuse which emphasizes the potential impact of career counseling for this population (Fraser & Clemmons, 2000; Keyser-Marcus et al., 2002; Wehman, Targett, West, & Kregel, 2005). While career counseling has been demonstrated as an effective intervention for those who have suffered a TBI, it is imperative to consider effective approaches to career counseling to guide practice. Examining the process of career decision-making and problem-solving to empower military personnel and veterans is a key component of assisting this population with creating a meaningful employment future.

**Employment Issues with Returning Veterans**

According to the U.S. Congress Joint Economic Committee (2012), many of the 2.5 million veterans who returned from active duty since September 2011, have difficulty finding employment. Recent statistics from March 2013 report a 9.9% unemployment rate for this population, as compared with an average 7.7% unemployment rate for nonveterans (U.S. Bureau of Labor Statistics, 2013a; U.S. Bureau of Labor Statistics, 2013b). The U.S. Congress Joint Economic Committee (2012) noted the importance of “improving job training and employment programs for our county’s veterans.” Such programs would ideally address the specific career concerns of this population. While veterans face many of the same career transition challenges as the civilian workforce such as child care, developing networks, financial concerns and mobility, veterans must also address the unique challenge of translating self- and occupational knowledge acquired in the military to the civilian workforce, often without previous civilian employment (Clemens & Milsom, 2008).

Other issues include a lack of job search training, lack of preparation and/or military to civilian transition time, and culture shock upon reentry (Mian, 2011). Ruh, Spicer, and Vaughan (2009) reported that approximately 17% of the veterans who served in Operation Enduring Freedom or Operation Iraqi Freedom have a service connected disability, while the Bureau of Labor Statistics noted that of the veterans who served during the Gulf War Era II, nearly 3 in 10 [712, 000] reported having a service-connected disability (U.S. Bureau of Labor Statistics, 2013a).

**Traumatic Brain Injury in Military**

Over 2 million service members have been deployed to Iraq and Afghanistan since September 11, 2001, of those approximately 250,000 have been diagnosed with various levels of TBI (Defense and Veterans Brain Injury Center, [DVBIC], 2012a). The numbers reported by DVBIC include all TBI incidents where U.S. forces are located as well as both deployment and non-deployment related injuries. Mild traumatic brain injury diagnoses constitute the most growth, increasing from 10,000 in 2005 to just below 25,000 in 2011 (DVBIC, 2012a). For military personnel, 84% of TBI incidents are caused by crashes in military and privately owned vehicles, falls, sports, and military training (DVBIC, 2012a). Blasts are the leading cause of TBI for active duty military in war zones (Champion, Holcolmbl, & Young, 2009). Champion et al. (2009) suggested that the easily identified survivable
injuries from explosions are “dominated by penetrating fragment wounds” (p. 1470). Warden (2006) cautioned that closed brain injuries occur more commonly in war zones.

TBI results in cognitive, emotional, and physical changes in the person who experienced the injury. Cognitive symptoms include concentration problems, temporary gaps in memory, attention problems, difficulty finding words, and slowed thinking (Defense and Veteran Brain Injury Center, 2012b). Emotional symptoms that are most common include irritability, anxiety, depression, mood swings, and overall inability to cope (Alderman, 2003; Defense and Veteran Brain Injury Center, 2012c; Hiott & Labbate, 2002; Kreutzer, Sell, & Gourley, 2001). Lastly, physical symptoms include headache, sleep disturbance, dizziness, balance problems, nausea/vomiting, fatigue, visual disturbances, sensitivity to light, and ringing in the ears (Defense and Veteran Brain Injury Center, 2012b).

Because of the complexities of TBI and its treatment, the transition and recovery process for returning service members and veterans can be challenging. It is important for practitioners to remember that recovery is different for each person with all levels of TBI (Defense and Veteran Brain Injury Center, 2012b). With many incidences of TBI, people recover and the symptoms “usually begin to improve within hours and typically resolve completely within days to weeks” (Defense and Veteran Brain Injury Center, 2012b, para 7). However, the recovery time for those with more severe TBI can be a lifelong journey including both inpatient and outpatient care leading to long term disability (Selassie et al., 2003).

Despite indications in the general population of a significant decrease in post-TBI injury employment, little is known about the overall employment rate for service members and veterans with TBI. One study of the employment rate of 2,500 individuals who suffered a traumatic brain injury found a decrease of 35% in employment pre-injury (59%) to post injury (24% ; O'Neil-Pirozzi, Corrigan, & Hammond, 2004). The high rate of unemployment for veterans, coupled with employment issues for those who have suffered a traumatic brain injury, creates a significant potential for veterans with TBI to be at risk for career development issues. As previously stated, career counseling seems to offer a method for addressing the needs of veterans with TBI. It is important to consider a framework in which to provide this assistance with a continual consideration of the potential complex aspects associated with this experience.

Cognitive and Strength-Based Approaches

When working with military service members and veterans who have suffered a TBI, the focus on the associated beliefs and thoughts related to career development concerns, coupled with attention to abilities and strengths, appears to provide a growth-oriented approach. The constructivist aspects of cognitive counseling approaches are useful because they recognize humans create meaning from experiences (Alford & Beck, 1997). This focus on individual meaning making both related to the injury and to the degree it affects the career development of the injured appears pertinent within this context. Research indicating that those who suffer a TBI and are working show an improvement in other non-vocational areas such as reduced levels of depression, reduced likelihood of substance abuse, and other secondary deleterious factors (Wehman et al., 2005) further illustrated the important of focusing on beliefs and thoughts associated with
the process. Basic aspects of each approach will assist the reader in understanding the structure of this method of addressing career concerns of service members and veterans with a TBI.

**Cognitive Approaches**

Cognitive counseling approaches focus on the thoughts and beliefs associated with a given situation. A model offered by Ellis (1962) offers an A-B-C framework in which an activating event (A) elicits an associated belief (B) resulting in consequence (C) such as a behavior or feeling. In relation to service members and veterans who have suffered a TBI, they are at risk for developing dysfunctional beliefs related to their functionality and ability to be successful in their career development. A counselor operating from this approach focuses primarily on the beliefs associated with experiences collaborating with clients to develop more accurate and functional thoughts for positive development.

People who suffer a TBI may develop thoughts and beliefs associated with their experience. Lingering concerns associated with cognitive, physical, and emotional functionality associated with a TBI may significantly affect one’s view of both their ability to gain employment and pursuit of a meaningful post-injury career. Utilizing cognitive-focused interventions can assist in addressing dysfunctional beliefs and thoughts of the client to positively impact the process of career decision-making and problem-solving.

Specifically related to career counseling, a cognitive approach that provides a useful configuration of elements of a career choice for military service members and veterans with TBI is Cognitive Information Processing (CIP; Sampson, Reardon, Peterson, & Lenz, 2004). The focus of CIP is to empower individuals to become effective decision makers and problem solvers. The structure of the intervention with its focus on the knowledge domains of self and options, the process of decision-making, and the associated thoughts an individual may be having related to this process appears to offer a structure in which to work with this population on their career development. This cognitive approach has also been researched in relation to assisting military personnel with their career decision-making and problem-solving (Bullock, Braud, Andrews, & Phillips, 2009; Clemens & Milson, 2008). Cognitive approaches accompanied with strength-based counseling provide a framework to address the career concerns of service members and veterans who have suffered a TBI.

**Strength-Based Counseling**

Strength-based counseling focuses on individual strength and individual, community, and societal factors that make life worth living (Seligman & Csikszentmihalyi, 2000). Given that the focus of treatment for those who have suffered a TBI is often on limitations, discussing motivation towards desirable experiences and goals may change the dynamic of treatment, especially in the area of career development. Instilling a sense of hope while formulating a vision for the future can provide a future-oriented focus in the career counseling of service members and veterans with TBI.

A model for strength-based counseling has been proposed based on an extensive review of the literature on this approach (Smith, 2006). This model offers several propositions emphasizing individualized assets, adaptation to environment, capacity for
growth and change, and the development of strength through challenges. Hallmarks of
counseling from this perspective involve encouragement, honoring of efforts and
struggles, discussion of healing through adversity, and accounting for organized elements
such as race, class, gender, and context within the counseling interaction. An adapted
combination of these characteristics constitutes this approach to counseling.

Due to the apparent struggle many with TBI face in engaging in positive career
development post-injury, the focus on growth through adversity, assets and strengths, and
consideration of the context within which an individual operates seems to provide a
useful framework in which to engage in the career counseling of military service
members and veterans with this injury. The strength-based approach coupled with the
cognitive framework provides a structure for addressing their career development.

**Strength-Based Cognitive Counseling**

Strength-based cognitive counseling combines previously discussed elements of
strength-based and cognitive approaches to addressing career development needs of those
who have suffered a TBI within the military. The outlined counseling stages focus on the
continuum of recovery from a TBI, assessing assets and strengths, processing abilities,
talents, interests, and skills, and creating an integrated future related to the service
member or veteran’s career development. The following stages suggest a manner in
which to engage with individuals who have suffered a TBI in relation to their addressing
of career development concerns.

**Stage 1: Establish Therapeutic Alliance**

In this stage, the counselor establishes the working alliance with a specific focus
on the branch, rank, and experiences related to the client’s military background. The
counselor will convey a strong desire to understand the individual's meaning associated
with cultural context of the military. The counselor uses this information to develop a
foundation from which to address career development concerns.

**Stage 2: Determine the Nature of the Injury and Anticipated Recovery**

The counselor will discuss the client’s functionality focusing on her/his beliefs
and thoughts associated with her/his identity pre- and post-injury. This stage involves
examining the associated thoughts and beliefs related to the injury, and identifying and
reframing problematic beliefs and thoughts that may hinder effective career decision-
making and problem-solving. In addition to the nature of the injury, the counselor
emphasizes the continuum of recovery emphasizing the potential for growth post-injury.

**Stage 3: Determine Abilities and Talents**

This stage provides the opportunity to focus specifically on the abilities and
talents of the client. A hallmark of this phase is the focus on abilities, and the shifting of
emphasis to the potential for positive growth related to career development despite the
injury. Instilling hope for career development goal attainment is an underlying theme of
this stage.
Stage 4: Determine Career Interests and Skills

Building on the previous stage, the fourth stage continues to focus on abilities, specifically examining the client’s interests and skills. Various career assessments such as the Self-Directed Search Form R (SDS; Holland, 1994) and various transferable skills inventories can structure the discussion, grounding the conversation in results from assessments.

Stage 5: Creation of Integrated Future

Synthesizing the work to this point, an integrated future is constructed accounting for the nature and recovery from the injury highlighting abilities, interests, and skills uncovered during the process of counseling. The integrated future is oriented towards possibilities that lie ahead as opposed to the limitations in functionality related to the injury.

Combining elements of cognitive approaches with strength-based counseling offers some potential benefits in addressing the career development needs of military service members who have suffered a TBI. Addressing the associated beliefs and thoughts related to career decision-making and problem-solving, providing encouragement while emphasizing strengths and abilities are hallmarks of this approach.

Concluding Remarks

The recent conflicts in Iraq and Afghanistan have presented significant challenges for those who have served. Many who have suffered various service-related afflictions such as traumatic brain injuries are left to reorganize their lives, determining what lies ahead for them post-injury. Counselors focusing on career development can address the needs of this population by considering the context in which they operate and elements such as an alteration in vocational identity and the degree to which they are limited in their consideration of potential opportunities.

Cognitive counseling approaches coupled with strength-based counseling provides a framework in which to address the complex career development needs of this population. The use of strength-based cognitive counseling to support positive career development and growth has the potential to assist this population in constructing an integrated career future. Counselors working with these individuals are well positioned to assist military service members who have suffered a TBI. Though this type of injury can alter one’s career aspirations, providing career counseling that encourages growth and focuses on abilities and strengths can positively impact these brave men and women. Providing hope for the future can dramatically alter the outlook for these individuals and contribute to the creation of a meaningful and fulfilling future.

References


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