

BULLET BACKGROUND PAPER  
ON  
THE DEPLOYMENT TRANSITION CENTER

PURPOSE

Provide historical background on the Air Force Deployment Transition Center (DTC), curriculum, scope, impact on service members and growth/expansion.

BACKGROUND

- In early 2010, CSAF directed the creation of the DTC to address increasing negative personal and family impacts attributed to continued deployment operations and repeated combat exposures
  - Attendance was restricted to line remarked deployment orders based on outside the wire and/or high-risk mission sets (e.g., EOD, SF, and Convoy Ops)
    - Expansions have occurred to include TACP (2011), Joint Service: USMC & Personnel Recovery (2011); Navy EOD (2012); Medics (2012); Air Advisors (2014); OSI (2017); Pararescue (2018)
  - Attendance is open to any AFSC at any location when the downrange commander (G-Series or first O-6 in the chain of command) wishes to nominate
  - The DTC was to be a “third location” (removed from the AOR and CONUS). It was assigned to the 86 Airlift Wing, Ramstein Germany, and stood up on 1 July 2010 under 86 MSG/Detachment 1
    - Ramstein was strategically chosen for its world-class support services and central location for inter-theater airlift and mobility
  - AF/A1S has responsibility and oversight for DTC curriculum, policy, and funding

PROGRAM DESCRIPTION

- The DTC provides post-deployment decompression and reintegration education to redeployers en-route to their home stations
- Consists of strength-based approach and peak performance mentality to assist redeployers; provides tools and skills needed for successful bridge from deployment to the home-front based on researched/proven methodologies
- Attendees identified via: 1) line-remarked on deployment order based on mission set, tasking or

career field; 2) commander-nominated during deployment based on change in mission, significant event, exposure to trauma, or home-front stressors

- The program is four total days based around facilitator-guided, participant-focused small group discussions; days one and four are dedicated to arrival and departure respectively
- Attendees have the opportunity to relax and talk about their deployment experience in an informal small group environment (not therapy or a medical/mental health program)
- The DTC has had two successful pilot projects to address unique 'deployment' stressors associated with "Deployed-in-Place" missions (693d ISRG at Ramstein) and "Rapid Redeployment Cycling" (435th CRG at Ramstein).

### STAFF

- DTC staffing has flexed since inception due to mission needs and throughput
  - Current permanent party includes a Program Director, Superintendent, two Mental Health Technicians, and a Knowledge Operator
  - Additional staff support is provided by 182-day deployment taskings (LRO, TMO, PERSCO, lodging, communications, logistics planner, mental health technicians, master resiliency trainers and mission-set managers), 65-day deployed support for AEF pivot surges, and 86 AW augmentees.
- Support facilitators are intended to come from the same career field as the redeployers they are working with and are expected to have deployment experience

### RESULTS

- The DTC supports approximately 2-3K redeployers annually with a maximum of 15 per class; both annual throughput and class sizes change depending on a multitude of variables (i.e., theater of war, missions, line remarked/designated mission set or AFSCs, etc.)
- As of 16 Apr 2020, 17,323 redeployers have transitioned through the DTC, including AD and Guard/Reserve component Airmen, Marines, and Sailors (specifically USMC/Navy EOD, Personnel Retrieval and Processing teams), and civilians
  - A 2011 study of DTC participants was released in Military Psychology, 2016, vol.28, No.2. Key findings indicate DTC participants reported lower levels of depression, post-traumatic stress symptoms and lower levels of relationship conflicts following return from deployment, as compared to weighted control groups.
  - 90% of 2019 attendees (n = 3,099) indicated the DTC was a worthwhile experience. 69% of participants noted they are more likely to accessing helping resources based on program attendance. 83% felt they received helpful guidance to facilitate a smooth transition/reintegration

with family/friends. 86% indicated they were able to sleep, rest, and restore their energies while at the Center.

RECOMMENDATION:

None – For information only