

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 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, 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)
  - Attendance is open to any AFSC at any location when the downrange commander (G-Series or first O6 in the chain of command) wishes to nominate
  - DTC was to be a “third location” (removed from the AOR and OCONUS). It was assigned to the 86 AW, 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
- Strength-based approach and peak performance mentality to assist redeployers; provides tools and skills needed for successfully bridging 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 homefront 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, two Mental Health Technicians, and a Knowledge Operations NCO
  - Additional staff support is provided by 182-day deployment tasking's (LRO, TMO, PERSCO, lodging, 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 1.5K redeployers annually with a maximum of 200 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 1 January 2018, 11,411 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 that DTC participants reported lower levels of depressive and posttraumatic stress symptoms and lower levels of relationship conflicts following return from deployment, as compared to weighted control groups.
  - 93% of 2017 attendees (n = 1,215) indicated that the DTC was a worthwhile experience. 74% of participants noted that they are more likely to accessing helping resources based on program attendance. 86% felt they received helpful guidance to facilitate a smooth transition/reintegration with family/friends. 92% indicated that they were able to sleep, rest, and restore their energies while at the Center.

RECOMMENDATION: None; for information only