

Coming Home: The Experiences and Implications of Reintegration

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Executive Summary

Coming Home: The Experiences and Implications of Reintegration

The Problem

In spite of the fact that military families have strong resiliency in the face of adversity, current literature on the aftermath of deployment reports a variety of stressors and difficulties found to be related to the reintegration period. What we don't seem to fully understand yet is how these military individuals cope and respond to each other to build resiliency in their military families during the process of reintegration. Additionally, we know very little about how the use of formal supports or programs impacts the ability to cope with reintegration stressors and the program factors that contribute to healthy and well functioning families. This study attempts to address these gaps.

The Study

The intent of this study is to better understand the processes and needs of military families during the process of reintegration. Having a better understanding of the reintegration process for military families will help to increase their resiliency and family functioning through developing and implementing more effective formal supports, such as developing and implementing more effective formal supports, such as programs, services, Specifically, we addressed the questions embedded in the results provided below. Overall, we found that military individuals and families cope well throughout the deployment cycle, supporting prior research that military families are resilient. However, the following results were significant and are noteworthy:

Results

- 1. What are the personal, family, and military demographics of service members, partners of service members, and adolescents with a military parent, and how are they related to reintegration stress and coping?**
 - a. Personal and Family Variables: Gender, age, ethnicity, marital status, length of relationship, number of children 18 or under and age of those children were not found to be significantly related to reintegration stress or coping management.
 - b. Military Experience Variables: Rank, branch, years in the military, combat duty, proximity to base, and total number of deployments were not found to be significantly related to reintegration stress or coping.
- 2. What stressors are experienced by service members and partners of service members during reintegration?**
 - a. The top stressors identified by service members were family finances, managing their emotions, reestablishing a relationship with their partner, and resurfacing of unresolved conflicts. Another stressor specific only to service members was adjusting to a civilian workplace.
 - b. The top stressors identified by partners of service members were the same that are listed by service members with the additional stressor, renegotiating household responsibilities added.
- 3. How do military family members and families coped throughout the deployment cycle, and specifically during reintegration?**
 - a. The majority of service members and partners of service members (between 71%-80%) did not agree that their family coped satisfactorily during deployment

- b.** Some adolescents reported moderate to serious/very serious problems coping with day-to-day stresses and problems during deployment (23%) and with getting along with their service member parent during deployment (15%).
- c.** Nearly one quarter (21%) of adolescents had moderate to serious/very serious problems coping with day-to-day stresses and problems during reintegration and in getting along with their returned parent.
- d.** Over one quarter (26%) of adolescents reported moderate to serious/very serious coping problems with the demands the military made of their family members.
- e.** Better coping during deployment was associated with better coping during reintegration.
- f.** When more satisfaction was either self-reported by service members or reported by partners in regards to how service members coped, significantly less reintegration stress was reported by both participant groups.
- g.** Coping with day-to-day stressors was more problematic for adolescents during deployment than during reintegration.

4. How do the following affect reintegration stress and stress management?

a. Preparation and Expectations of reintegration

- Both service members and partners reported higher reintegration stress if they reported being less prepared for reintegration.
- Both service members and partners reported higher reintegration stress if they reported that reintegration was harder than they expected.

b. Reintegration Attitudes*Service Members:*

- The less negative service members attitudes of reintegration were towards themselves and towards their families, their reintegration stress was significantly lower.
- The more negative service members attitudes were towards the personal and family domains, the greater difficulty in managing their stress during reintegration.

Adolescents:

- More problems in coping during reintegration was significantly related to the worsening of the following during reintegration: family communication, their role in the family, family responsibilities, behavior, concentration, academics, and school behavior
- More problems with getting along with their returned service member was significantly related to the worsening of the following during reintegration: family communication, their role in the family, family responsibilities, behavior, concentration, academics, school behavior, and chores and their sadness.

c. Personal and Family Relationships*Service Members and Partners:*

- As relationship satisfaction increased, reintegration stress was significantly lower.
- Reports of higher family functioning and parental satisfaction were significantly related to less reintegration stress.

Adolescents:

- The higher family functioning reported by adolescents, the better their reintegration coping skills with daily stressors and with getting along with the returned service member.

d. Physical Health and Emotional Well-being

- PTSD symptoms (not diagnosis), self-reported mental health, and perceived mental health of their partners was significantly related to managing reintegration stress for both service members and partners.
- For partners, not service members, the existence of PTSD symptoms was significantly related to reporting more reintegration stress.
- Service members' and partners' perceptions of mental health for themselves, but not their partner, was significantly related to reports of reintegration stress.
- When service members and/or partners perceive their children as being well adjusted, they had significantly less reintegration stress and could manage reintegration stress better.

e. Communication

- For service members, higher frequency and higher quality of communication during deployment was significantly related to less reintegration stress.
- For partners, only communication quality, not quantity, was significantly related to less reintegration stress.
- For adolescents, the quality of deployment communication was significantly related to coping with day-to-day stressors during reintegration and getting along with their returned parent.

- The better the family communication during the reintegration process, the better reintegration coping for service members, partners, and adolescents.

f. Readjustment to Reintegration

- Partners, but not service members, report fluctuations in reintegration difficulties over time for their service members thereby suggesting that reintegration adjustment may be an ongoing process that could fluctuate over time and is experienced differently by individual family members.
- Over one half of service members, partners, and adolescents indicate that it takes at least a few weeks if not a few months to readjust to the return of a service member. Almost one-quarter of service members and partners indicate that reintegration is most stressful between five months and over a year.
- Service members, partners, and adolescents use programs most often during reintegration; however, service members and partners desire services equally across the deployment cycle.

5. What role does programming play in the lives of military families?

Service Members and Partners:

- Service members who reported program use for themselves or their family, when compared to non-users, had served longer in the military, had experienced a greater number of deployments, reported better mental health for their partner, and were more likely to have expected that reintegration was going to be easier than it was. These differences were not found for partners.
- Service members and partners who were “program users” had higher reintegration stress than those who did not user programs.

- Service members who reported program use, when compared to non-users, reported significantly more stress in the areas of: household responsibilities, family finances, family roles, managing emotions, and reestablishing their relationships their children.
- Partners who reported program use, when compared to non-users, reported significantly more stress in the areas of reestablishing relationships with their service member, and worrying about how their children will respond to their service members once he/she returns.
- When service members reported that a program “clarified challenges for families during reintegration” they reported significantly more reintegration stress than those who did not report that a program clarified these challenges.

No other significant findings were found for service members and partners suggesting that programs are not necessarily effectively addressing reintegration issues, yet both service members and partners continue to rate programs as satisfactory and effective.

- Satisfaction and perceived effectiveness of programs was not found to be significantly related to reintegration stress.
- When programs provided service members with a sense of military pride and military connection, and offered fun activities for their children, they were significantly more likely to be satisfied and view programs as effective.
- When programs provided partners with a sense of military pride and military connection, made them not feel so alone, and offered fun activities and useful information for their children, they were significantly more likely to be satisfied and view programs as effective.

Adolescents:

- Those adolescents who reported that programs increased their military connection and military pride, helped them plan for reintegration, gave helpful information, and helped the family get along better were significantly less likely to report having problems getting along with their returned parent.
- Those adolescents who reported that programs helped them feel better about deployment and helped their family to not feel so alone were significantly less likely to have problems coping with daily stressors during reintegration.
 - The majority of adolescents found programs to be helpful because of the fun activities they provide and their ability to connect youth experiencing similar military stressors.
 - When programs were perceived as providing them an increase in military pride and military connection, helpful information, made them feel better about deployment, helped the family to not feel so alone, providing opportunities to meet others who are experiencing deployment, and clarifying challenges associated with deployment, adolescents were more satisfied and perceived programs as more effective.

Brief Summary of Conclusions and Implications

1. To best meet the needs of children and adolescents, they need to be considered within the context of their families. Involving the family in programs is a means of bolstering the family unit prior to and after deployment.

2. Program professionals must recognize that program participants are experiencing significantly more reintegration stress than non-users. An important consideration in program development is the involvement of appropriate personnel, mental health practitioners or otherwise, both in person and on-call during programming to provide services or referrals as needed.
3. Reintegration experiences change over time and are experienced differently by individual family members. Our study found that partners reported reintegration as the most manageable phase of the deployment cycle the less time the service member had been home. They are, however, more likely to report reintegration as the most difficult phase the longer the service member has been home. Reintegration services and programs need to reflect the changing needs these families experience over time, including the struggles they report up to at least one-year post return.
4. Programs need to:
 - a. Help prepare families for reintegration so that they can develop realistic expectations of the process.
 - b. Help service members develop a more positive attitude towards reintegration.
 - c. Be tailored to recognize that service members, partners, and adolescents hold different perspectives of the reintegration process and not assume that partners will experience the reintegration process the same.
 - d. *Adult and family programs.* Programs need to include information on healthy family communication, negotiating family roles, family finances, managing emotions, reestablishing relationships, dealing with unresolved conflicts, and renegotiating household responsibilities, the areas that were found to be most stressful for service

members and partners. These areas need to be explored at all stages of the deployment cycle with potential solutions sought so that families can be prepared for, and enter into, these negotiations in ways that are healthy for themselves and for their families.

- e. *Adolescent programs.* Youth programming need to focus on healthy communication, provide opportunities to meet others experiencing deployment, provide fun activities that help increase their sense of military pride and connection to the military, include ways to help them plan for reintegration, provide information they consider helpful, opportunities to help the family get along better, include ways to help them feel better about deployment and help their family does not feel so alone.

5. Programs and services, ultimately, only stand to make an impact if they garner participation. One finding of the present study was that these participants did not realize that programs were available to them, indicating a strong need for more effective marketing.
6. Lastly, programs need frequent and rigorous evaluation to determine if they are achieving the outcomes they are intending to accomplish. Evaluation will provide information on what programs are, or are not, achieving so that determinations can be made whether to continue, modify, or end programs that are not meeting their intended goals to more effectively allocate resources.

Coming Home: The Experiences and Implications of Reintegration

The Problem

Even though military families have been found to be very resilient in the face of adversity, these families experience a variety of stressors and difficulties associated with reintegration period. However, what we don't fully understand yet is how these military individuals cope and respond to each other during the process of reintegration and what can be done to encourage and promote ongoing flexibility and resilience. Additionally, we know very little about how the use of formal military supports or programs impact upon their ability to cope with reintegration stressors and what helps the family to be healthier through this process. This study attempts to address these gaps.

Introduction

Nearly one-half of all military personnel (approximately 44% of Active Duty, Guard, and Reserve) are parents, resulting in almost two million children having at least one military parent. The number of these families who are currently, or have previously, experienced the strain of wartime deployments and subsequently the reintegration process has grown tremendously in the past decade (Adler, Zamorski & Britt, 2011; Office of the Deputy Under Secretary of Defense for Military Community and Family Policy, 2009; Maholmes, 2012; Saltzman, Lester, Beardslee, Layne, Woodward, & Nash, 2011). Over the past decade, there are more than three million spouses, partners, children, and adult dependents of these military personnel who have been affected by the deployment of their loved ones (DUSD, 2010). Even if just a minority of these individuals and families are experiencing reintegration difficulties, this results in a staggering number. As large numbers of service members continue to return home from their involvement

in Overseas Contingency Operations, these individuals and families will likely experience the impact and consequences of their past deployment(s) for months or even years to come.

Military families are known for their resiliency when challenged with the pressures that accompany deployment, reintegration, and military family life in general. However, even with their resiliencies, the deployment cycle (pre-deployment, deployment, post-deployment or reintegration) with its multiple and lengthy separations, has been found to create stress for military family members. Researchers have found that this stress often spills over into domains outside of the home and affects the individual and social functioning of all family members (Adler et al., 2011; Chandra, Lara-Cinisomo, Burns, & Griffin, 2012; DePedro, Astor, Benbenishty, Estrada, Smith, & Esqueda 2011; Flake, Davis, Johnson, & Middleton, 2009; Chandra, Lara-Cinisomo, Jaycox, Tanielian, Burns, Ruder, Han, 2010; Chandra, Lara-Cinisomo, Jaycox, Tanielian, Han, Burns, & Ruder, 2011; Cozza, 2011; Chandra, Martin, Hawkins, & Richardson, 2010). Whereas previous studies assumed that the stressors and difficulties associated with deployment subsided after the service member returned home (reintegration); current research has demonstrated that the reintegration process can be an unexpectedly long and turbulent time for the family. This turbulence and stress are typically unexpected in light of the fact that most families expect and frequently experience periods of idealized closeness, particularly at the beginning of the reintegration process (Karakurt, Christiansen, Wadsworth & Weiss, 2013). However, as members must re-form into a functioning system, many find this period to be a significant threat to their families' stability (MacDermid Wadsworth, 2010). Further, given the military's increased operations tempo in the last decade of global conflict, the reintegration phase may quickly shift back into the pre-deployment phase as the service member and his or her family prepare for subsequent deployments (Doyle & Peterson, 2005).

The family dynamics created during deployment to accommodate the absence of the deployed parent are often challenged during the reintegration process when the service member returns and transitions back into the family system (Pincus, House, Christenson & Adler, 2001). This transitional period has been found to be a particularly difficult process for geographically dispersed families who are especially vulnerable to many of the stressors associated with reintegration since they reside off of, and often at a distance from, military installations that can offer vital supports (Wiens & Boss, 2006; Chandra, Martin, et al., 2010). Moreover, many of these geographically dispersed families are unfamiliar with how to access a variety of military services and supports. They straddle the military and civilian worlds and lack the general social support that can come from being a part of a geographically close military community (Boss, 2002). A deeper understanding of the reintegration process is critical to promoting individual and family resiliency (Paris, DeVoe & Acker, 2010).

Reintegration: A critical stage of deployment

Reintegration, also called reunion or post-deployment, is considered the final stage in the deployment cycle (Peebles-Kleiger & Kleiger, 1994; Pincus et al., 2001) and is characterized by the period of time directly following the return of a service member from deployment (Doyle & Peterson, 2005). The reintegration stage has been found to persist for months, or years, depending on the following: the individual service member, his or her family, their deployment context (combat vs. non-combat), the length and number of deployments experienced, and the family's community context (residence on military base or geographically dispersed) (Pincus et al., 2001; Gorbaty, 2009). Variability also exists in the way individuals and families adjust to the reintegration process but reintegration typically presents service members, partners, and children with a unique set of stressors (Pincus et al., 2001; Doyle & Peterson, 2005) that impact the

physical, emotional, cognitive, and social domains (Adler et al., 2011). Any given military family may respond and adjust differently to the same stressor. In order to better meet the needs of military families and their individual members, we need to better understand the stressors they experience as well as the factors that promote resiliency for them and their families. These factors are outlined in four sections below: Service members; Partners of Service Members; Children/Adolescents, and the Family unit as a whole.

Service Members. During re-entry to their home and civilian life following deployment, service members, (and their families) may face financial, physical, psychological, emotional, and social challenges (Gorbaty, 2009; Allen, Rhoades, Stanley & Markham, 2011). Anticipation of and the meaningfulness made around homecoming can affect the physical, emotional/cognitive, and social domains of post-deployment transition for service members (Salzman et al., 2011; Adler et al., 2011). The amount of potential stress and challenges of reintegration are mediated by factors such as fitting back into families, fitting back into the community, deployment experiences, exposure to combat, psychological issues (trauma and/or PTSD), and the service member's military status (active duty vs. guard or reserve; currently separated or still no longer in the military; i.e. MacDermid Wadsworth, 2010 & MacDermid Wadsworth, 2010). Details related to these challenges are as follows:

Fitting into their families. Service members often feel as though they no longer fit into their families due to changes that occurred during their absence (Palmer, 2008). Changes may include the normative development and maturation of their children as well as the increased competence of the partner who has taken over many of the tasks and roles that were previously completed by the service member (Amen, Jellen, Merves & Lee, 1988; Aducci, Baptist, George, Barros, Nelson & Briana, 2011; MacDermid Wadsworth, 2010).

Fitting into their community. Many service members report feeling a separation from the community/culture to which they return due to a perceived lack of respect from civilians as well as their own feelings of loss of status and self-esteem. They also report believing they are held to a higher standard than civilians and no longer fit into a previously comfortable community (Amen, Jellen, Merves & Lee, 1988; Aducci, Baptist, George, Barros, Nelson & Briana, 2011; MacDermid Wadsworth, 2010).

Cumulative deployments. The cumulative length of deployments often leads to the accumulation of emotional stress and has been found to be a significant predictor of family adjustment (Association, 2007). Families may carry unresolved issues from past deployments, including each of their own expectations and anxieties. The longer a family is without one of its members, the longer they must acclimate to that members' absence and replace many of their functions, making reintegration potentially more difficult (Lester, 2012; Tanelian, Burns, Ruder & Han, 2010; White, Thomas, Fear & Iversen, 2011).

Exposure to combat. Combat exposure has been shown to impact posttraumatic stress disorder (PTSD) symptoms, and is associated with greater risk and vulnerability to service members and their families, as compared to peacetime deployments (Cozza & Leiberman, 2007; Lincoln et al., 2008; MacLean & Elder Jr., 2007). Other studies have found that combat exposure does not have a direct effect on family relationships, but is mediated by cognitive attributions (how we explain behaviors of others), PTSD or trauma symptoms, and other comorbid issues such as alcohol abuse or depression (Monson, Taft & Fredman, 2009).

Psychological issues. Service members may experience extreme interpersonal difficulties upon their return due to low frustration tolerance, poor anger management, difficulties in coping and self-regulation, hyper-vigilance, social withdrawal, increased alcohol

use, heightened symptoms of depression, and heightened symptoms of anxiety (Bowling & Sherman, 2008). Many of these behaviors could be characterized as post-traumatic stress symptoms, despite the lack of a formal diagnosis of PTSD. Stresses can be moderated by the service members' psychological transition from a high stress and pressure-filled environment to one of less stress and pressure, his or her personal narrative around military experiences, and/or the anticipation of redeployment (Adler et al., 2011).

Rank. Lower rank has been associated with greater marital distress due to its correlation with lower pay, lower education attainment, and younger partners with less marital experience (Anderson, Johnson, Goff, Cline, Lyon & Gurss, 2011). Moreover, dropping down to one income and/or increased childcare responsibilities and expenses during deployment may place financial stress on families with limited resources (National Military Family Association, 2005).

Component. In addition to those risk factors associated with rank, guard and reserve members have been found to be at greater risk of developing PTSD symptoms than their active duty counterparts (Milliken, Auchterlonie, & Hoge, 2007; Seal, Metzler, Gima, Bertenthal, Maguen, & Marmar, 2009). Guard and Reserve families may also express a sense of isolation from their surrounding civilian communities due to their belief that civilians lack an understanding of their experience if they have not experienced the deployment of a loved one (Lapp, Taft, Tollefson, Hoepner, Moore, & Divyak, 2010). This sense of isolation sometimes experienced by the guard and reserve components is further underpinned by a lack of familiarity with military benefits and resources that are often more easily accessible to active duty members (Chandra et al., 2010). Geographically dispersed families, typically Guard or Reserve service members, may mean that families are frequently isolated from unit affiliation, which can lead to deficits in social support creating additional risks for maladjustment (Weins & Boss, 2006).

Partners of Service Members. Reactions to the return of the deployed service member can vary enormously. While some partners report difficult adjustments during reintegration and view their returning partner as different from who they knew previously, others report not having to adjust at all (Chandra et al., 2011). In fact, many cite the potential for positive effects of reintegration such as greater appreciation for one's family and personal growth. Nonetheless, typical challenges for partners include the loss of independence they gained during their service member's deployment, suppression of their own needs in deference to meeting the needs of the returned service member, and/or the loss of the social support networks formed during deployment (Chandra et al., 2011).

In 2001, Pincus and colleagues postulated that post-deployment (reintegration) is arguably the most important stage for the service member and his or her partner as they often must lower expectations, take time to become reacquainted with one another, and build positive communication strategies. Studies have found these and other reintegration challenges expressed by partners include their expectations not being fulfilled, fitting the deployed partner/partner back into the home routine, building communication, rebalancing child responsibilities, getting to know the deployed partner again, worrying about the next deployment, dealing with the deployed partner's mood changes, deciding who to turn to for advice, negative communications with their service member, negative beliefs regarding the value of the service member's mission, service member's exposure to combat, poor overall adjustment to the deployment, not making sense of the deployment process in general, and making inappropriate attributions of the military partner's behavior (Chandra et al., 2011, MacDermid Wadsworth, 2010). In addition, adjustment and resiliency among partners of military service members is affected by their own ability to perform multiple roles and exhibit role flexibility, having frequent and high quality

communication during deployment, the age and gender of their children (more detail provided in the Child/Adolescent section below) (Lester et al., 2010), and maintaining realistic expectations about the reintegration process (Saltzman et al., 2008; Faber, Willerton, Clymer, MacDermid & Weiss, 2008; Association, 2007; Gambardella, 2008).

Children/Adolescents of Service Members. Many children demonstrate remarkable resilience during deployment and reintegration; however, they are not excluded from the challenges of reintegration (Lester et al., 2010; Sayers, Farrow, Ross, & Oslin, 2009). When concerns do arise, children tend to focus on adjusting to fit the deployed parent back into the home routine, worrying about the next deployment, coping with the service member's mood changes, worrying about how parents are getting along, becoming reacquainted with the service member, determining who to go to for support and advice, and dealing with conflicting emotions about the service member parent's return (Chandra et al., 2011). In addition to these concerns, children and adolescents are often confused by the physical, mental and emotional changes that may have occurred in their parent as a result of their deployment. While proud of their deployed parent, many report feelings of loss, loneliness, and worry for the safety of their parent (Sayers et al., 2009). Others report confusion on not getting the increased attention they expected upon their military parent's return.

Resilience among military children is also positively correlated with increased family communication about difficult issues, even when stressors are present (Chandra et al., 2011) and an understanding of the honor and respect attached to serving one's country can also facilitate their adjustment (Houston, et al., 2009). Adjustment to reintegration may also be moderated by the age and gender of children, where in general, older children have been found to experience more difficulty adjusting to reintegration than younger children and females experience more

difficulty than males (Lester et al., 2010). Female children who experienced longer deployments of a military parent were found to be at the greatest risk for reintegration difficulties (Lester et al., 2010). However, male children may have more difficulty adjusting to reduced autonomy and increased structure when the deployed parent returns home. The different manners in which male and female children react to their military parents' return is further documented by research indicating that, when under stress, boys engage in more externalizing behaviors, whereas girls engage in more internalizing behaviors (Lester et al., 2010).

Family Adjustment During Reintegration

The family dynamics created during deployment are often challenged during the reintegration process. Mechanisms of risk to families include an incomplete understanding of the impact of deployment and combat operational stress, inaccurate developmental expectations, impaired family communication, impaired parenting practices, impaired family organization, and the lack of a guiding belief system (i.e., values or beliefs that enable a family to make sense of and/or give meaning in their circumstances or a difficult situation) (Card, et al., 2011; Saltzman, et al., 2011). However, there are a number of adaptations that can serve as protective factors and ease the family into the reintegration process including being able to have role flexibility with the ability to perform multiple roles, using active coping skills, maintaining contact during deployment through email, Skype, and letter writing, having all family members understand and maintain realistic expectations during the reintegration process, developing a shared family narrative and collaborative meaning-making, having open communication in the family, and having effective parental leadership (Carter, et al., 2011; Spera, 2009). Adjustment to reintegration often hinges on the process of family communication (Bowling & Sherman, 2008) and other research indicates that families that successfully establish the family as a safe

institution where they are free to express concerns and fears while parents respond in a way that is helpful will facilitate family cohesion and adaptability (Chapin, 2011).

Parents' response to deployment and reintegration also influences children's adjustment, specifically the degree of marital adjustment and stability and levels of parental stress (Amen et al., 1988; Mmari, Roche, Sudhinaraset, & Blum, 2009). The coping of the at-home parent is particularly relevant to child and adolescent outcomes, where perceived maternal support is associated with fewer conduct problems among children. Further, the at-home caregiver's satisfaction with military and community support has been shown to affect the adjustment of children. Children and adolescents will often look to the civilian/at-home parent to gauge appropriate behavior, attitudes, and reactions towards the returning parent and they often report keen attunement to changes in the newly returned service member parent and express concern for that parent's well-being (Chandra et al., 2011).

Support for Military Families

Although many programs and activities focus on supporting military children and adolescents throughout the deployment cycle, it is important to remember that their coping and adjustment is best understood within the context of the family. Thus, it is important to look at programs and resources available across the deployment cycle that are targeted toward all family members (Amen, Jellen, Merves, & Lee, 1988). Currently the use of reintegration programs and their outcomes are not well documented; however, the few studies that have considered programs have yielded encouraging results. The Rand Corporation (2009) found a significant correlation between service members' feelings of readiness for deployment, intentions to reenlist, and the use of programs. Furthermore, military programs geared towards children, adolescents, and families have been shown to increase communication skills and family functioning. Programs

are particularly helpful in helping them develop a sense of community and connectedness with other individuals who have experienced deployment (Wilson, Wilkum, Cherichky, MacDermid Wadsworth, & Broniarczyk, 2011). The most successful programs appear to attend to the parent-child relationship while building resiliency which can produce sustainable and long-term improvements (Lester, et al., 2012; Saltzman et al., 2011). Focusing solely on children and adolescents ignores the influence of parents and the marital relationship on the child. Therefore, it is crucial to think of children and adolescents within the context of their families if we are to provide support to military children and adolescents throughout the deployment cycle, most particularly in relation to the reintegration process.

The Study

Having a better understanding of the reintegration process for military families will help in developing and implementing more effective formal supports, such as programs, services, and resources targeted to these individuals and families to increase resiliency and family functioning. (Throughout this document we will refer to military programs, which should be inferred to represent all services, resources, and programming offered to military families.) To this end, Dr. Lydia Marek, Principle Investigator, and the team of the Family and Community Research Lab (FCR) at Virginia Tech, implemented a study at the direction of Army Child, Youth, and School Services (CYSS). The intent of this study is to better understand the processes and needs of individuals in, and of military families, during the process of reintegration. Specifically, we addressed the following questions:

1. What are the personal, family, and military demographics of service members, partners of service members, and adolescents with a military parent, and how are they related to reintegration stress and coping?

2. What stressors are experienced during reintegration by service members, partners of service members, and adolescents?
3. How do military individuals and families cope and manage stressors the deployment cycle, and specifically during reintegration?
4. Do the following affect reintegration stress and stress management?
 - a. Preparation and Expectations
 - b. Reintegration Attitudes
 - c. Personal and family Relationships
 - d. Physical Health and Emotional Well-being
 - e. Communication
5. What role does programming play in the lives of military families in mediating stressors and building their resiliency?

Methodology

Survey Development

Service member, partner, and adolescent surveys were developed through an iterative process, which focused on the research questions as established by Army CYSS. Survey development focused on descriptive demographics, the incorporation of validated and reliable scales, and the use of scales that could be used and compared across the three samples. The survey was then piloted at three events in demographically diverse areas and feedback was incorporated to alter wording, include more military specific language, and change elements on which pilot participants struggled. All changes were tested internally by the research team and found to be ready for distribution. Study approval was provided by the Virginia Tech

Institutional Review Board. Surveys and scales for each target audience are described in greater detail below.

Service Members and Partners. The service member survey consisted of 66 items and the partner survey consisted of 63 items¹. All adult participants were asked demographic questions as well as items to assess their deployment history, relationship satisfaction, military and family attitudes, family interaction experiences, their experiences before deployment and post-deployment, the perception of a select child's experience of reintegration, their feelings since the last deployment ended, family dynamics, support services and programs they used, their experiences of those services, experiences of reintegration, and the opportunity for open-ended sharing about their reunion and reintegration. In addition, seven different validated measures were included in the survey and are described later in this section. Service members exclusively filled out the post-deployment reintegration scale (PDRS). Partners were also asked about their own employment history along with the details about their partner's military involvement.

Adolescents. The adolescent survey consisted of 42 items² that included basic demographic questions and items to assess their parent's military involvement, such as parent's branch, rank, proximity to base, and service/deployment history. They were also asked questions about their family's ability to adjust following deployment, their coping, their communication level with their parent(s) during deployment, their experience before deployment and post-deployment, family dynamics, support services and programs they used, and their experience of those programs. They were able to provide open ended responses about programs they would

¹ Several of these items had multiple components resulting in a total of 370 variables for the service member survey and 348 variables for the partner survey.

² Several of these items had multiple components resulting in a total of 238 variables for the adolescent survey.

prefer to participate in, things they wish they knew when their parent was deployed, and anything further they would like to share about being the child of a service member.

Adolescents did not fill out questions related to their own mental health or their parent's mental health. They also did not complete scales and questions related to child functioning, as these were exclusive to service member and partner surveys.

Scales

The following is a description of the scales, or indexes, used in the service member, partner, and/or adolescent surveys.

Behavior Rating Index for Children (BRIC). The BRIC (Stiffman et al., 1984) was included in both the service member and partner surveys. The BRIC is only validated for children ages 7 to 18 years old and measures child well being through parent self-report of the child's behavior and conduct. Thirteen items are used, each scored on a Likert scale of 1 (rarely) to 6 (most of the time). Higher scores indicate more severe behavioral problems. Stiffman and colleagues (1984) report good internal consistency ($\alpha = .80$ to $.86$) for the scale for adult participants (i.e., parent, teacher, group leader, other observer) in their original study and test-retest reliability ranges from $r = .71$ to $.92$. Concurrent validity is good and was established via correlations with child treatment status and scores on the Child Behavior Checklist (Fischer & Corcoran, 2007).

Family Assessment Device (FAD) – General Functioning Subscale. The general functioning subscale of the FAD (Epstein, Baldwin, & Bishop, 1983) was included in all three surveys. The subscale consists of 12 items seeking to provide a comprehensive assessment of family health. Elements in the scale include problem solving, communication, roles, affective responsiveness, affective involvement, and behavior control. Participants score items using a

four point Likert scale ranging from 1 (strongly agree) to 4 (strongly disagree). A mean score above 2.0 indicates family dysfunction (Epstein et al., 1983). The larger FAD is widely used in military research and often cited as a robust measure of military family dynamics (Evans, Cowlshaw, & Hopwood, 2009; Westphal & Woodward, 2010). Epstein and colleagues (1983) report a satisfactory Cronbach's alpha reliability of .92.

Family Communication Scale (FCS). The FCS (Olson & Gorall, 2003) was included in all three surveys. Ten items are used to assess various aspects of family communication, such as listening skills, clarity, and respect. Participants score items using a five point Likert scale in which 1 stands for "strongly disagree" up to 5, which is "strongly agree." A sum of all responses yields a raw score, which is then categorized into one of five categories: very high (raw scores between 44 and 50), high (raw scores between 38-43), moderate (raw scores between 33-37), low (raw scores between 29-32), and very low (raw scores between 10 and 28) (Olson, 2010). Barnes and Olson (1982) provide evidence of construct validity with factor loadings ranging from .48 to .71. Alpha reliability is .90 and test-retest reliability is .86 (Olson, 2010).

Kansas Parental Satisfaction Scales (KPSS). The KPSS (Schumm & Hall, 1994) was included in the service member and partner surveys. The KPSS is a three-item, self-report scale that evaluates a parent's satisfaction with the behavior of their child, with their own behavior, and with their relationship with their child. The instrument uses a seven point Likert scale with response choices ranging from 1 (extremely dissatisfied) to 7 (extremely satisfied). High scores indicate high satisfaction (James et al., 1985). The authors of the KPSS report good internal consistency reliability ($\alpha = .84$) as well as good concurrent validity through its significant correlations with the Kansas Marital Satisfaction Scale and the Rosenberg Self-Esteem Scale

(James et al. 1985). Satisfactory reliability ($\alpha = .90$) was further noted in a recent study of PTSD and parental attachment among combat veterans (Cohen et al. 2011).

Mental Health Index 5 (MHI-5). The MHI-5 (Berwick et al., 1991) was included on both the service member and partner surveys. Both target audiences were asked to rate their own mental health and then the perceived mental health of their partner. The MHI-5 utilizes five items inquiring about moods to assess mental health. Participants are asked to rate the frequency of feeling nervous, calm, downhearted, happy, and discouraged on a scale of 1 (none of the time) to 6 (all of the time). There is no established cutoff score. However, several studies have recommended using scores below 19 (Kelly, Lloyd, & Fone, 2008) and 18 (Hoemans, Garssen, Westert, & Verhaak, 2004) as indicators of poor mental health. A Cronbach's alpha of .79 demonstrated internal consistency reliability.

Post-Deployment Reintegration Scale (PDRS). The PDRS (Blais, Thompson, & McCreary, 2009) was included only in the service member survey. The PDRS utilizes 36 items to measure a service member's attitudes regarding family, work, and personal life. Only the 24 items regarding family and personal life were included in the survey. The scale consists of six subscales with each domain split into a positive and negative. On negative subscales, higher scores indicate more negative attitudes and on positive subscales, higher scores indicate more positive attitudes. Blais and colleagues (2009) reported good internal consistency reliability across the six subscales that make up the PDRS with alpha scores ranging from $\alpha = .78$ to $\alpha = .89$. Construct validity is derived from evidence that more negative attitudes are related to more self-reported symptoms and stress in military service (Blais et al., 2009).

Reintegration Stressor Index (RSI). The RSI is an index that was developed by the researchers based on the current published literature on reintegration stress. Known stressors

were identified and synthesized to eliminate conceptual overlap with other scales being used. The final scale includes 12 items that describe unique facets of service member reintegration stressors, seven of which pertained also partners of service members. Participants are asked to rate each of the stressors from 1 (not at all stressful) to 7 (very stressful). Although this scale has only been used with the current sample, it yields strong reliability, at $\alpha = .92$ for service members and $\alpha = .88$ for partners.

Study Implementation

Initially Operation Military Kids (OMK) State Coordinators distributed surveys (beginning in August 2012) in their states to military service members, partners of military service members, and adolescents, with a military parent. An inclusion criterion for service members was that they experienced at least one deployment and had at least one minor child 18 years old or younger³. For partners, inclusion criteria included having a relationship with a service member that had experienced at least one full deployment cycle during their relationship and had at least one minor child 18 years old or younger. Finally, adolescent participants needed to have at least one service member parent who had experienced at least one full deployment cycle and was between the ages of 13 and 18. Print copies were provided to the coordinators to distribute as well as an electronic link to the service member and partner versions of the survey implemented through SurveyMonkey. Adolescent surveys were only distributed in person during events or youth programming due to the required completion of parental permission forms. OMK coordinators were encouraged to enlist the help and support of their state and local partners in the collection of this data. In addition to distribution by OMK coordinators and state partners, FCR lab members attended and recruited participants at Yellow Ribbon events, OMK

³ An initial attempt was made to collect data from those who had returned from their last deployment within 18 months, but such a time restriction posed numerous problems and so this last criterion was dropped.

camp, and other military sponsored events. The FCR lab also received the endorsement and support for this study from the commanding general of the 7th Infantry Division (ID) at Joint Base Lewis-McChord in Washington State and links the to service member and partner surveys were sent out to members of the 7th ID and collected via SurveyMonkey. All surveys were confidential and contained no identifying information. Completion time for surveys was approximately 30 minutes (adolescent) to 45 minutes (adult surveys). Survey collection ceased in July 2013 (total of 11 months). Completed surveys were returned to the FCRL where they were entered into the SPSS statistics software package by a lab member, cleaned for any participant or data entry error, and then stored for data analysis.

Participants

The resulting participants that are included in the study, and are reported on, are 440 service members, 370 partners, and 136 adolescents who met the study inclusion criteria⁴. As can be seen more specifically in Appendix A, surveys were returned from participants in 39 states. States with the most representation included Arizona (adolescent data), Georgia (adolescent data), Illinois (service member), Nevada (service member), Utah (partner), and Washington (service member). Additional demographics and how they pertain to reintegration are described in the results section below.

Data Analysis

Service member, partners, and adolescent samples were found to be geographically and demographically similar which allowed for comparison across groups even though the three samples were not completed or analyzed as family units. These comparisons were only made when the same scales were and are reported in the appropriate places in the results section.

⁴ Initially 849 service members and 535 partners completed the survey; however, 440 service members and 370 partners met the inclusion criteria for the study. All 136 adolescents met the inclusion criteria for the study.

Missing data were labeled with a 999 upon entry into SPSS, allowing for it to be determined whether there were patterns in the missing data indicating something more than data missing completely at random. When patterns in missing data were found those variables and cases were eliminated. Data cleaning continued to eliminate outliers, those cases found to be more than three data points away from the mean. Data analysis then focused on descriptive statistics and frequencies to develop an understanding of the sample and to describe the type of people experiencing both difficulties and successes during the deployment and reintegration process. To determine significant differences in functioning during the reintegration process, mean comparisons (t-tests and Analysis of Variance), proportion analyses (chi-squares), and predictive analyses (simple and multiple regressions) were performed on dependent variables representing reintegration stress level. These analyses are used to highlight reintegration needs and programmatic implications. The results of these analyses are incorporated along with descriptive statistics in the result sections below along with analysis and interpretation of the results, as appropriate.

Qualitative data were also collected through open-ended questions throughout the survey and at the end of the survey. Qualitative data was collected, coded, and categorized into like themes. The qualitative data was included in this multi-method study as a means of understanding the lived experience of the participants and to create a more vivid understanding of the lives of service members, their partners, and adolescent children. The qualitative data is disbursed throughout in places that it complements and expands on the quantitative findings.

Results

Demographics of Samples: Risks and Resiliency Factors

As previously described, the research outlines numerous risk and resiliency factors for military families experiencing reintegration. We have categorized the demographics of our sample into two sections (a. Personal and Family and b. Military Experiences) and examined them in relationship to reintegration stress.

Personal and Family Descriptions. Service members and partners were asked to indicate their gender, age, ethnicity, relationship status, the length of their current relationship (if applicable), and the number and ages of their children, 18 and under. Adolescents were also asked to indicate their gender, age, and ethnicity. As shown in Table 1, significant similarity exists among the samples when reporting on themselves or on their families.

Table 1. Personal and Family Demographics

	Service Members	Partners	Adolescents
Gender	92% male 9% female	4% male 96% female	52% male 48% female
Age	Mean age: 35.3 years Range: 21-55	Mean age: 35 years Range: 20-60	Mean age: 15 Range: 13-18
Ethnicity ⁵	81% Caucasian 9% Hispanic 8% African American 3% American Indian/Native American, Alaskan Native 2% Asian 1% Hawaiian/Pacific Islander 2% "Other"	87% Caucasian 9% Hispanic 5% African American 1% American Indian/Native American, Alaskan Native 1% Asian <1% Hawaiian/Pacific Islander <1% "Other"	73% Caucasian 21% Hispanic 17% African American 7% American Indian/Native American, Alaskan Native 4% Asian 2% Hawaiian/Pacific Islander

⁵ Participants were allowed to select more than one ethnicity therefore totals are more than 100%

	Service Members	Partners	Adolescents
Marital Status	80% currently married 7% separated/divorced 3% single 3% in a serious relationship 3% engaged 2% living together 3% remarried	95% currently married 1% separated/divorced 0% single <1% in a serious relationship 2% engaged 1% living together	81% currently married 15% separated/divorced 2% together/not married 2% widowed 1% not together
Length of relationship	67% at least seven years 31% between 1 and 6 years 2% less than 1 year	72% at least seven years 27% between 1 and 6 years 1% less than 1 year	
Number of children 18 or under	Average of 2	Average of 2	
Age of Children	Average of 8 years	Average of 8 years	

Military Service Experience. Table 2 provides the results of the military experiences of our sample. As one can see from that table, many similarities were reported for our sample (i.e. percentage of dual military families (9%-10%); number of deployments averaged between 2.4 and 2.8; length of last deployment (10.7 to 11.2 months). Service members, partners, and adolescents were also asked to provide information on deployment history (total number of deployments (see Figure 1), cumulative length of deployments, length of last deployment, location of last deployment, and time returned since last deployment), and proximity to closest military base/fort/installation (see Figure 2). In addition, service members and partners were asked to provide service member's rank (see Figures 3 and 4), branch and component (active duty, reserve, or guard – see Figure 5), current military status, length of military service, reenlistment plans.

Adolescents were asked which parent served in the military and if they had dual military status, they were then asked to focus on the one that most recently returned from a deployment for the purpose of the survey.) As seen in Figures 2 to 5, the majority of service members in our sample were reported as enlisted, either in the Guard or Reserves of their respective branch, and only 5-6% lived on a military base with approximately another 30% living within 20 miles. The

Army National Guard was most represented by all three samples followed by Active Duty Army. Lastly, when asked whether the service member's last deployment was in a combat zone, 75% of service members, 73% of partners, and 51% of adolescents reported they were.

Table 2. Military Service Experiences Reported by Service Members, Partners, and Adolescents

	Service Members	Partners	Adolescents
Status	98% currently serve	95% currently serve	
Which parent serves			93% - father 20% - mother (9% - both) ⁶
Length of service	Average of 13.3 years Range: 2 to 36 years	Average of 14 years Range: 2 to 33 years	
Reenlistment plans	59% plan to reenlist 24% unsure 17% do not plan to reenlist	62% plan to reenlist 26% unsure 12% do not plan to reenlist	
Dual-military	9% (20% of these were dual deployed)	10% (4% of these were dual deployed)	9%
Total # of deployments	Average: 2.4 Range: 1 to 16	Average: 2.7 Range: 1 to 16	Average: 2.8 Range: 1 to 6
Cumulative length of deployments	Average: 24 months Range: 4 months to 7 years	Average: 25 months Range: 3 months to 8 years	Mean: 28.7 months Range: 2 months to 5.5 years
Length of last deployment	Average: 11.2 months	Average: 11.3 months	Average: 11.2 months
Unit type	41% combat support 27% combat arms 17% combat service support 15% other		
Location	92% last deployed to Afghanistan, Kuwait, or Iraq	92% last deployed to Afghanistan, Kuwait, or Iraq	66% last deployed to Afghanistan, Kuwait, or Iraq

⁶ Mother/Father categories are not mutually exclusive and as a result of accounting for participants who identified both parents as affiliated with the military, percentages add up to over 100.

	Service Members	Partners	Adolescents
Time back since last deployment	56% home 3 months or less 31% home 4-12 months 14% home more than 1 year	43% home 3 months or less 28% home 4-12 months 29% home more than 1 year	25% home 3 months or less 42% home 4-12 months 33% more than one year
Expect future deployment	43% unsure 28% yes 29% no	47% unsure 27% yes 27% unsure	36% unsure 43% yes 21% no

Figure 1. Number of Deployments Reported by Service Members, Partners, and Adolescents

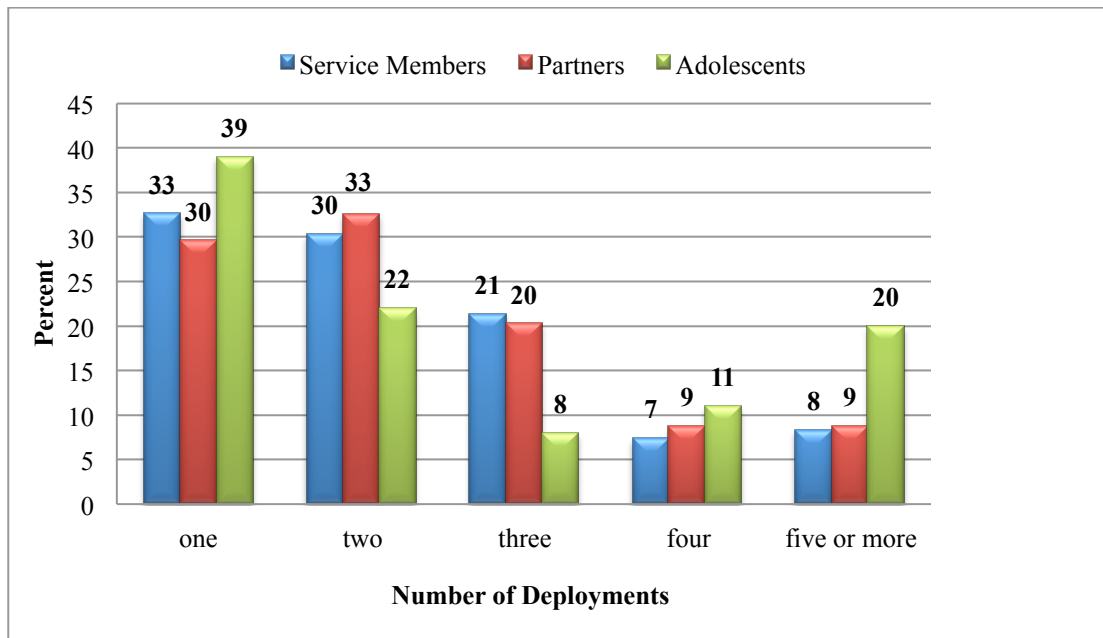


Figure 2. Distance to the Nearest Military Base/Fort/Installation Reported by Service Members and Partners

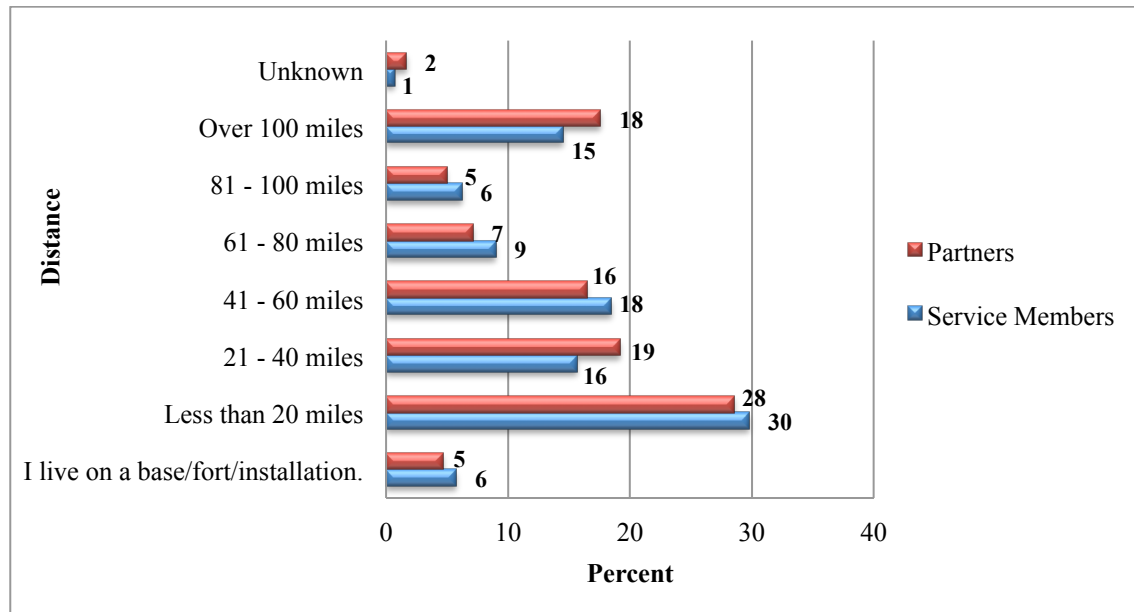


Figure 3. Rank Reported by Service Members and Partners

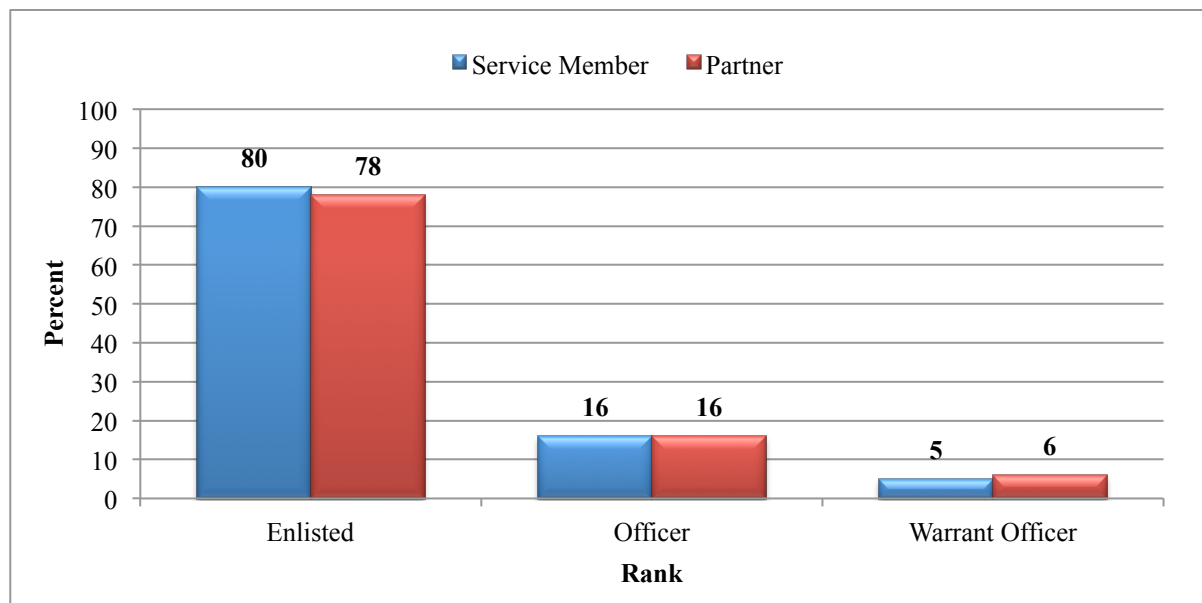
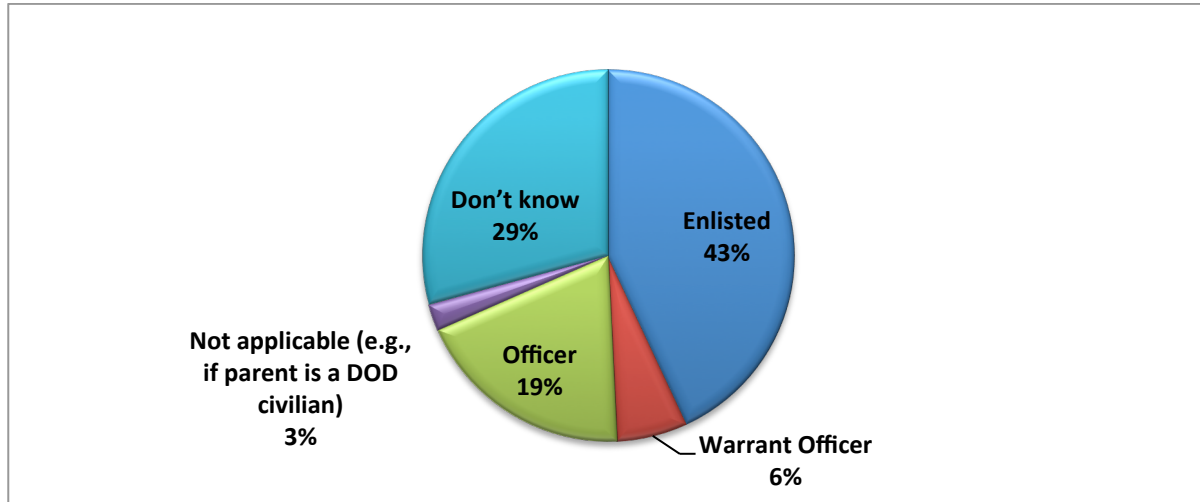
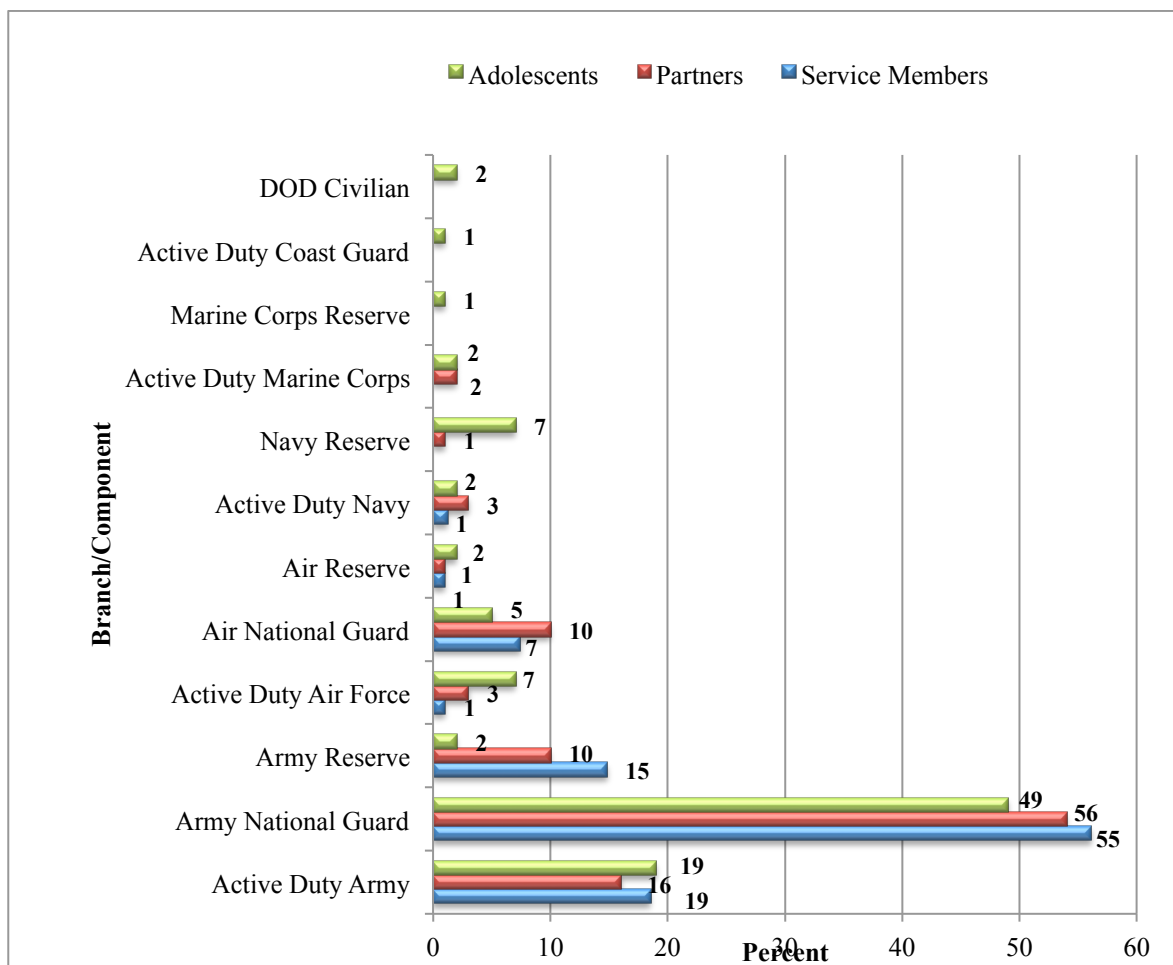


Figure 4. Service Member Rank Reported by Adolescents**Figure 5. Service Members, Partners, and Adolescents Reporting Branch/Component**

Analysis. A regression analysis of all personal and family demographic variables and select military service experience variables provided by service members and partners (rank - enlisted or not), branch (active versus guard/reserve), number of years in the military, combat duty, proximity to base, and total number of deployments) was conducted to determine their ability to predicting reintegration stress. In addition, a regression analysis of rank (enlisted or not), branch (active versus guard/reserve), number of years in the military, and combat duty was conducted on the adolescent data to determine the effect of military experiences upon managing reintegration stress and getting along with parents.

Finding.

- No regressions were statistically significant^{7,8} indicating that no relationship was found between any demographic variables in predicting reintegration stress for service members, partners, or adolescents.

Reintegration Stressor

Results are organized and reported as follows. Reintegration stressors, Coping during the deployment cycle, Preparation and expectations for reintegration, Reintegration attitudes, Relationships (partner relationship satisfaction, family functioning and satisfaction, and parental satisfaction); Physical and emotional well being (including mental health and children well-being), and Communication. These factors will be described and then examined to determine their relationship, if any, with the level of, and management of, stress during the deployment cycle but, most specifically, during reintegration.

Reintegration Stressors. Reintegration stressors for service members and partners were assessed using the Reintegration Stressor Index (RSI) which contained 12 items for service members and seven by partners (service members completed an additional five items based on

⁷ $R^2=.013$; $F(6,217)=.487$, $p=.82$

⁸ Coping: $R^2=.158$, $F(8,57)=1.34$, $p=.245$, Adjusted $R^2=.040$; Getting Along: $R^2=.127$, $F(8,59)=1.07$, $p=.394$, Adjusted $R^2=.009$

stressors that pertained only to them and not to their partner). Each stressor was rated on a scale from 1 (not at all stressful) to 7 (very stressful). As can be seen in Table 3, the top stressors, with a mean of at least 3.0, for service members and partners are: family finances, managing their emotions, family finances, reestablishing a relationship with their partner, and the resurfacing of unresolved conflicts. In addition, partners also reported a mean of 3.3 for renegotiating household responsibilities. When asked how they would have rated these stressors before the last deployment, the majority of service members would rate them the same (50%), followed by 39% who would have rated them more positively and 11% who would have felt more negatively. In contrast, partners reported an equal distribution (45% each) between those that reported they would have rated them the same and those that would have been rated more positively before the last deployment. Only 10% reported that they would have been more negative before the last deployment.

Table 3. Service Members' Reintegration Stressors

Reintegration Stressors	Service Member Mean	Partner Mean
Family finances.	3.5	3.7
Managing my emotions.	3.4	3.7
Re-establishing a relationship with my partner.	3.2	3.5
Resurfacing of unresolved conflicts.	3.0	3.6
Renegotiating household responsibilities.	2.9	3.3
Figuring out my role in the house.	2.9	2.8
How children respond to service member.	2.9	2.9
Adjusting to a civilian workplace	3.0	
Re-establishing a relationship with my children.	2.9	
Finding civilian employment	2.8	
Feeling like an outsider in my home.	2.7	
Adjusting to a local community neighborhood	2.6	

Some qualitative data helps us to better understand the difficulties some partners expressed on reintegration.

[Reintegration has been] a journey, we have changed, my husband has changed we are becoming a strong family.

Challenging in getting Dad and the children to have fun together more often.

Coping During the Deployment Cycle.

Service Members and Partners. Research has shown that having an incomplete understanding of the impact of deployment and combat operational stress can negatively affect family functioning and affect the ability to cope with reintegration stressors. Therefore, service members and partners were asked how satisfied they were with their own and their families' coping during their last deployment. As can be seen in Table 4, satisfaction in the way they or their family coped was only reported by approximately one quarter of each sample.

Table 4. Percent “agree” or “strongly agree” Coping During Deployment

	Service Member	Partner
Satisfied with how they coped	20%	28%
Satisfied with how well the family coped	22%	28%

Analysis. A regression analysis of partners' and service members' satisfaction with their own coping and that of their families was conducted.

Findings:

- Partners reported more satisfaction with how well they and their family coped than did the service members.
- When more satisfaction was reported with how service members coped, significantly less reintegration stress was reported.

Adolescents. Youth's coping was assessed by asking how much of a problem they had with day-to-day stresses and getting along with their deployed parent during deployment and then, how much of a problem they had with day-to-day stresses and getting along with their returned parent during reintegration. Each item was rated on a scale from 1 (not a problem) to 5 (very serious problem). Additionally, they were asked how well they coped the demands the

military makes of family members. As can be seen in Table 5, over half of the adolescents indicated no problems in reintegration stressors; however, 23% reported moderate to very serious problems coping during deployment with day-to-day stresses and 21% reported moderate to very serious problems coping with day-to-day stresses and getting along with their returned parent during reintegration.

Table 5. Adolescents Coping During Deployment and Reintegration

Coping with....	No problems	Slight problems	Moderate problems	Serious/Very Serious problems
Day to day stresses and problems during deployment	39%	38%	17%	6%
Day to day stresses and problems since SM returned	53%	27%	16%	5%
Getting along with SM parent during deployment	59%	26%	14%	1%
Getting along with SM parent since their return	58%	21%	13%	8%
Demands military makes of family members	48%	26%	21%	5%

Analysis. A regression analyses of adolescent coping was conducted using their reported coping during deployment, getting along during deployment, and the demand the military makes on family members in relationship to how they impact adolescent coping and their relationship with their parent who has returned, during reintegration.

Findings.

- Adolescents reported significantly⁹ more difficulty coping with day-to-day stressors during deployment than during reintegration
- No statistically significant differences were noted for “getting along with their parent” during deployment and during reintegration¹⁰.
- Better coping during deployment was associated with better coping during reintegration¹¹

⁹ $t(120)=3.04$, $p < .01$ (mean deployment=2.00, $sd=.99$; mean reintegration=1.76, $sd=.97$)

¹⁰ $R^2=.365$; $F(3,113)=21.61$, $p<.001$, Adjusted $R^2=.35$, Beta Weights: CopingDeployment=.08, GettingAlongDeployment=.43***, MilitaryDemands=.20*

¹¹ $R^2=.518$; $F(3,113)=40.46$, $p<.001$, Adjusted $R^2=.51$, Beta Weights: CopingDeployment=.43***, GettingAlongDeployment=.31***, MilitaryDemands=.14

- The demands of the military were not associated with coping with day-to-day stressors or getting along with their returned parent.

Preparation and Expectations for Reintegration

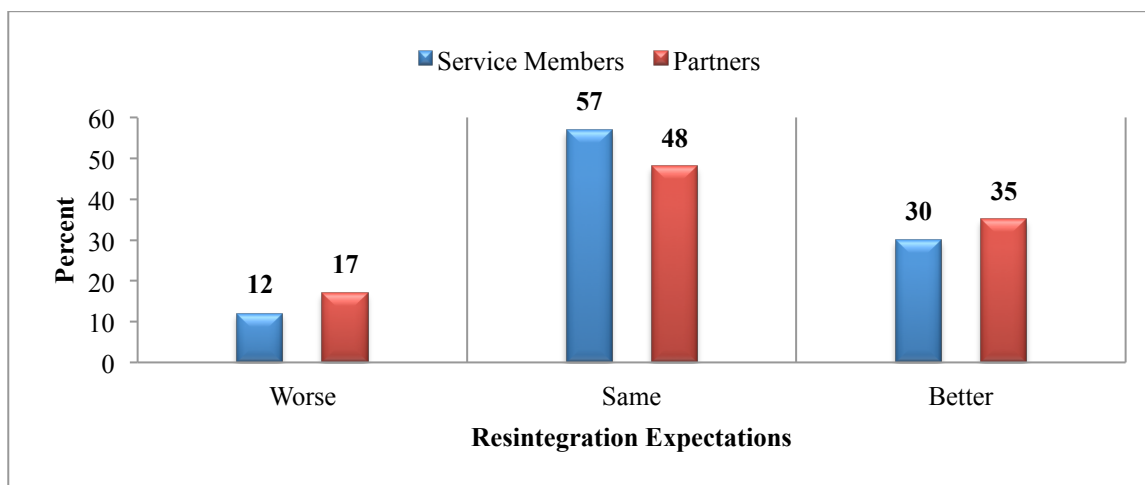
One of the greatest challenges found for reintegrating families is renegotiating family roles (Huebner & Mancini, 2010). Service members sometimes encounter the often-unexpected difficulty of fitting into a home routine that has likely changed a great deal since his or her initial departure. The at-home parent and children assume new responsibilities during the deployment(s) so that when service members' returns, expectations may not be met. Typical expectations among family members are that things will either return to its pre-deployment state, remain the way it came to be during deployment, or will be somewhere in between. Inaccurate expectations and communication around this restructuring is a frequent source of conflict and stress for reintegrating families (Booth, Segal & Bell, 2007). Being prepared for these familial changes and having realistic expectations for reintegration may be critical in coping with reintegration stressors.

Preparedness. Being prepared for these familial changes and having realistic expectations for reintegration may be critical in coping with reintegration stressors. To assess how prepared service members and partners believed the service member was to return to the partner relationship and reassume their role as a parent, they were asked four questions. As seen in Table 6, only about one-third of service members felt very prepared to return to their role as partner and parent. Partners reported that their service member was very prepared to return to their role as a partner (53%) and as a parent (49%) with greater frequency than service members.

Table 6. Service Member's Preparedness to Resume Home Roles

Participant	Service member prepared to resume....	Very Prepared	Moderately Prepared	Slightly or Not at all Prepared
Service Member	partner relationship	39%	41%	20%
Service Member	role as parent	38%	44%	18%
Partner	partner relationship	53%	36%	12%
Partner	role as parent	49%	37%	14%

Expectations. Service members and partners were asked to assess their expectations of the reintegration process and to compare that to what actually occurred for them. As can be seen in Figure 6, most service members' (57%) expectations were about the same as what they experienced, with an additional 30% finding it easier and 12% finding it more difficult. Partners had their expectations met less frequently with 48% finding it to be what they expected, 35% finding it easier than expected, and 17% finding the process harder than they expected.

Figure 6. Service Members and Partners Expectations for Reintegration.

Qualitative data provided more information on how expectations were and were not matched with the reality of reintegration.

Pretty much what I expected it to be. Not awful, not a piece of cake either. This last reintegration was loads easier than the [re]integration after 18 months.

This is just a part of our life. We have been doing it for a lot of years and look forward to having it all behind us in the future

As I expected it to be, a small window of adjustment as my husband "rejoins" our family

While others found it more difficult:

Challenging and difficult, more than I thought it would be. I always considered us to have a strong marriage until reintegration and there were times when I either wanted him to go back on deployment or just end things, which was really hard for both of us to deal with. If we weren't so resilient it would have been a failure.

Tough, 3 deployments, training, and train up time [have] taken a real toll on our family. We need three years or more before [our] next deployment.

Not Prepared for Difficulty

VERY TOUGH! Would have been very helpful if my family and I had knowledge of what to expect upon my re-deployment home!!!

Analysis. A regression analysis of family preparation for and expectations of reintegration was conducted to determine their ability to explain the range of reintegration stress experienced (as measured by the RSI) by service members and partners.

Qualitative data was examined related to preparation and expectations and reintegration stress.

Findings.

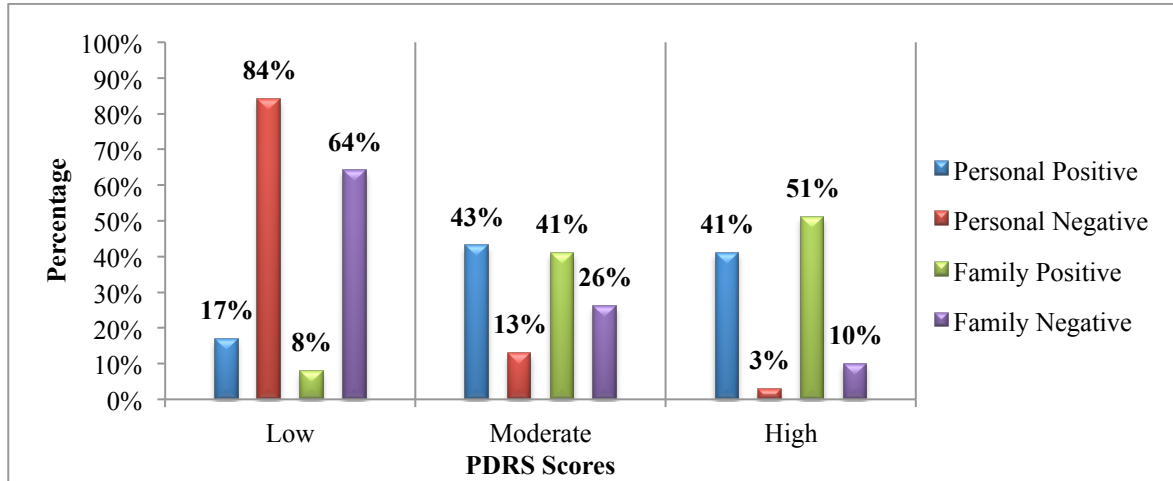
- Preparation and accurate expectations prior to reintegration significantly predicted 32% of the variance in reintegration stress for service members¹² and 21% for partners¹³ meaning that both service members and partners reported higher reintegration stress if they were less prepared for reintegration and if they expected reintegration to be easier than it actually was.
- Qualitative data, for both service members and partners, supported this same outcome. If participants expected the reintegration process to be easier than it was, they reported greater levels of stress.

¹² $R^2=.323$; $F(2,338)=80.57$, $p<.001$; Adjusted $R^2=.319$; Beta Weights: Family Prep= .523***, Expectation= -.156***

¹³ $R^2=.218$; $F(2,266)=68.53$, $p<.001$; Adjusted $R^2=.212$; Beta Weights: Family Prep= .342***, Expectation= -.244***

Reintegration Attitudes

Service Members. Using the Post-Deployment Reintegration Scale (PDRS), the positive and/or negative attitudes of service members towards their families and personal lives during reintegration were assessed. The positive and negative items of the PDRS are designed to capture either the conflicting or consistent attitudes of service members across multiple life domains. The personal domain is meant to assess service members' attitudes regarding "integrating one's personal [reintegration] experiences into an overarching view of the world" (Blais et al., 2009) while the family domain assesses the service member's sentiments, experiences and attitudes specifically toward their family. As seen in Figure 7, service members mostly reported feeling positive toward their personal and family reintegration experiences. While over half (60%) scored low to moderate on the "personal positive" subscale, only 3% scored high on the "personal negative" subscale. This indicates that while service members may be experiencing stressors during reintegration; they only moderately impact positive attitudes. Service members' positive outlook is further supported by over half (51%) of service members scoring high on the "family positive" subscale. In addition, the majority scored low to moderate on the "family negative" scale indicating that service members mostly hold positive attitudes toward their families during reintegration with 10% holding more negative views.

Figure 7. Service Members' Scores on PDRS

Analysis. A simple regression analysis of service members' post deployment attitudes and their reintegration stress was conducted.

Findings.

- The majority of service members have moderate to high positive and low negative personal interpretations (97%) of their deployment during the reintegration process that may transfer to positive attitudes within the family domain (92%).
- Personal positive reintegration attitudes may not always serve as a protective factor as to how reintegration is processed at the family level.
- Reflections on the deployment experience within the personal domain significantly predicted 26% of the variance in reintegration stress¹⁴ and reflections on the deployment experience within the family domain significantly predicted 34% of the variance in reintegration stress¹⁵.
- Importantly, analyses of individual predictor variables revealed that positive attitudes, but not negative, in both domains made significant contributions to predicting reintegration stress.
- Overall, greater negative processing of the deployment experience within both the personal and family domains is associated with greater difficulty in coping with stress during reintegration; however, the reverse is not true for positive processing of the deployment experience.

Adolescents. Reintegration attitudes for adolescents were assessed through their reflections of life changes from deployment through the reintegration process. Adolescents were

¹⁴ $R^2 = .264$; $F(2, 368) = 66.16$, $p < .001$; Adjusted $R^2 = .260$; Beta Weights: Personal Positive = .009, Personal negative = .514***

¹⁵ $R^2 = .340$; $F(2, 368) = 94.76$, $p < .001$; Adjusted $R^2 = .336$; Beta Weights: Family positive = -.048, Family negative = .568***

provided a listing of stressors associated with the reintegration process and asked how things have changed since their deployed parent returned. As Table 7 shows, most items are reported as staying the same (48-59%), but some changes have occurred that are either better now or became worse since reintegration with family communication and their chores becoming worse for 13% and 12% respectively, and their academic performance and behavior at school becoming more positive for 44% of adolescent participants.

Table 7. Adolescents' Experience of Change Since Last Deployment

	Became More Positive	Same	Became Worse
Family Communication	39%	48%	13%
Role in Family	39%	52%	8%
Family Responsibilities	40%	54%	6%
My Chores	33%	55%	12%
My Behavior	38%	51%	11%
My Ability to Concentrate	31%	59%	11%
My Sadness	38%	50%	12%
My Academic Performance	44%	48%	8%
My Behavior at School	44%	53%	4%

Analysis. An Analyses of Variance (ANOVAs) was conducted to determine if changes in adolescent's experiences since their parent's last deployment impacted their mean ratings of their ability to cope with day to day stressors and getting along with their parents during reintegration.

Findings.

- Family communication, their role in the family, family responsibilities, behavior, concentration, academics, and school behavior were all found to be significantly related to reintegration coping¹⁶ with the perceived worsening of these since deployment being associated with more problems in coping with day to day stresses.
- Family communication, their role in the family, family responsibilities, behavior, concentration, academics, school behavior, and chores and sadness were all found to

¹⁶ Family Communication F (2, 116)=5.89, p < .01; Role in Family F (2, 116)=14.84, P< .001; Family Responsibilities F (2, 116)=5.39, p<.01; Behavior F(2,116)=9.91, p<.001; Concentration F(2,117)=10.02, p<.001; Academics F(2,117)=5.60, p<.01; School Behavior F(2,117)=5.49, p<.01

be significantly related to reintegration coping¹⁷ with the perceived worsening of these since deployment being associated with not getting along with their parent during reintegration¹⁸.

- Further analyses revealed that those who reported a worsening in these post-deployment experiences had significantly more coping¹⁹ and parent relationship²⁰ problems than those who remained the same or improved.

Relationships

Service members return home to a variety of relationships, including their partner, their children, and their family as a whole. To better understand the changes that occurred during the reintegration process, partner relationship satisfaction, family satisfaction, family functioning, and parental satisfaction were all assessed and are reported below.

Partner relationship satisfaction. To assess current relationship satisfaction, service members and partners were asked how satisfied they were with their marital/partner relationship. In addition, they were asked if changes had occurred in their relationship satisfaction since prior to the last deployment. As seen in Table 8, two-thirds of service members and partners reported high levels of relationship satisfaction and there was congruence between reports of these two samples. However, about one-third of each group reported that their relationship has suffered since the last deployment, most likely due to deployment related stressors.

¹⁷ Family Communication F (2, 116)=5.89, p < .01; Role in Family F (2, 116)=14.84, P< .001; Family Responsibilities F (2, 116)=5.39, p<.01; Behavior F(2,116)=9.91, p<.001; Concentration F(2,117)=10.02, p<.001; Academics F(2,117)=5.60, p<.01; School Behavior F(2,117)=5.49, p<.01

¹⁸ Family Communication F (2, 116)=11.03, p < .001; Role in Family F (2, 116)=17.42, p < .001; Family Responsibilities F(2, 116)=8.12, p<.001; Chores F(2,117)=5.12, p< .01; Behavior F (2,116)=24.47, p<.001; Concentration F(2,117)=9.88, p<.001; Sadness F(2,116)=3.57, p<.05; Academics F(2,117)=10.07, p<.001; School Behavior F (2,117)=11.39, p<.001

¹⁹ Family Communication: better=1.71, sd=1.02, same=1.61, sd=.80, worse=2.50, sd=1.15; Role in Family: better=1.55, sd=.83, same=1.64, sd=.85, worse=3.20, sd=1.03; Family Responsibilities: better=1.79, sd=.98, same=1.59, sd=.85, worse=2.75, sd=1.28; Behavior: better=1.72, sd=1.01, same=1.60, sd=.79, worse=2.91, sd=1.14; Concentration: better=1.72, sd=1.03, same=1.60, sd=.82, worse=2.91, sd=.94; Academics: better=1.67, sd=.93, same=1.71, sd=.93, worse=3.00, sd=1.10; School Behavior: better=1.64, sd=.98, same=1.76, sd=.88, worse=3.25, sd=1.26

²⁰ Family Communication: better=1.53, sd=.88, same=1.62, sd=.96, worse=2.81, sd=1.28; Role in Family: better=1.55, sd=.83, same=1.62, sd=.97, worse=3.40, sd=1.17; Family Responsibilities: better=1.66, sd=.92, same=1.64, sd=1.02, worse=3.12, sd=1.36; Chores: better=1.70, sd=.97, same=1.59, sd=.97, worse=1.75, sd=1.32; Behavior: better=1.52, sd=.88, same=1.59, sd=.89, worse=3.54, sd=1.04; Concentration: better=1.56, sd=.97, same=1.65, sd=.96, worse=3.00, sd=1.18; Sadness: better=1.60, sd=.15, same=1.72, sd=.95, worse=2.46, sd=1.51; Academics: better=1.69, sd=.94, same=1.63, sd=1.00, worse=3.50, sd=1.22; School Behavior: better=1.59, sd=.96, same=1.74, sd=.97, worse=4.00, sd=1.15

Table 8. Current and Prior Deployment Relationship Satisfaction

	Very Satisfied	Somewhat Satisfied	Somewhat/Very Dissatisfied
Current for Service Members	67%	20%	8%
Current for Partners	67%	22%	6%
	More positive before deployment	Same	Less positive before deployment
Before Deployment for Service Members	37%	54%	10%
Before Deployment for Partners	32%	56%	12%

One partner identifies the problem this way:

Reintegration is fine if you have communication during deployments. Issue is lack of resources during deployments. . . Problems happen during deployments.

Analysis. A simple regression analysis of relationship satisfaction and reintegration stress was conducted for service members and for partners.

Findings.

- Relationship satisfaction significantly predicted 5% of the variance in perceived reintegration stress for service members²¹ and 20% for partners²² indicating that the more satisfied they are with their relationship, the lower their reintegration stress.

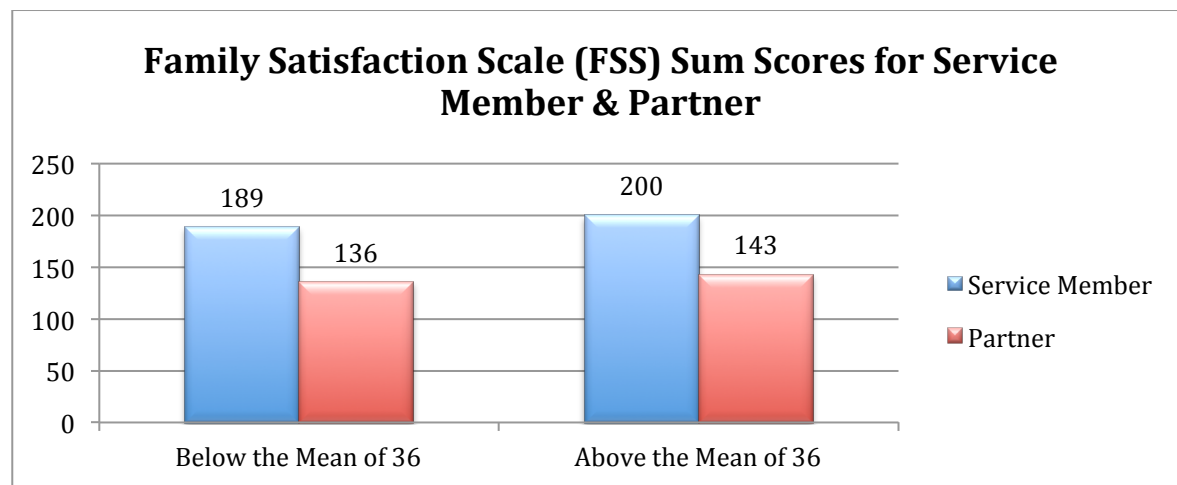
Family Satisfaction. Participants were asked to assess their current satisfaction with their family using the Family Satisfaction Scale (FSS). Service member and partner scale scores indicate that a little more than half of service members and partners (53%) and almost half of the of adolescents (47%) report high levels of family satisfaction; while the rest of the sample reported average to low levels of satisfaction. When asked how they would have rated their

²¹ $R^2=.048$; $F(1,345)=17.47$, $p<.001$; Adjusted $R^2=.05$; Beta=.22***

²² $R^2=.207$; $F(1,271)=70.65$, $p<.001$; Adjusted $R^2=.20$; Beta=.46***

satisfaction before the last deployment, the majority would have responded the same (SM=64%; P=68%; Y=68%). However, almost one-quarter of all three groups (25%, 24%, 24%, respectively) were more satisfied before the last deployment. Figure 8 indicates that individuals who scored above the mean score of 36 were considered to be more satisfied due to their higher scale score and those who scored below the mean, one hundred and eight-nine service members and one hundred and thirty six partners scored below the mean indicating lower levels of satisfaction.

Figure 8. Family Satisfaction Scale (FSS) Sum Scores for Service Members and Partners

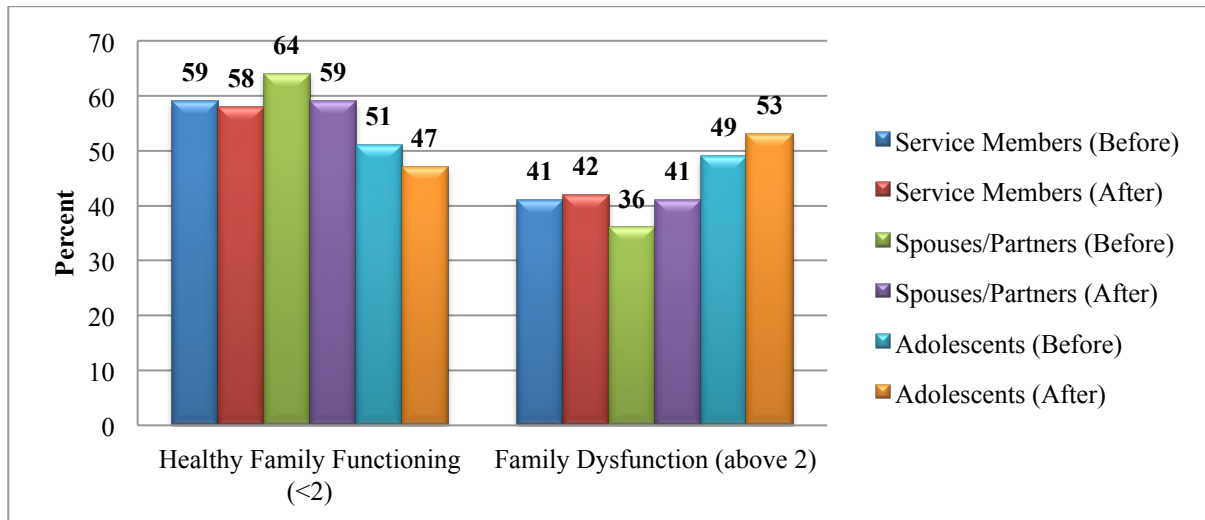


Analysis and finding. A multiple regression was run on the Family Satisfaction Scale (FSS) and the other scales utilized in this study: FAD (after), KPS, FACES, and FCS. Family satisfaction, as measured by the FSS was not a significant predictor of parental satisfaction, family communication, family adjustment, and family functioning.

Family Functioning. The Family Assessment Device (FAD) was used to assess how well families perceived they were functioning, both currently and prior to their last deployment. A cutoff score of 2 or more has been used to indicate family dysfunction. Service members current mean score was a 1.8, partners a 1.8, and adolescents a 2.0 (see Figure 9). These group

differences were not found to be significant and scores were very similar when asked how they would have responded prior to their last deployment (1.8, 1.7, 2.0, respectively). Figure 9 shows the percentages of service members and partners who scored above and below the cutoff score on the FAD, before and after deployment.

Figure 9. Service member and Partners Scores on FAD Before and After Deployment



Analysis: A multiple regression analysis using family functioning and parental satisfaction as predictor variables.

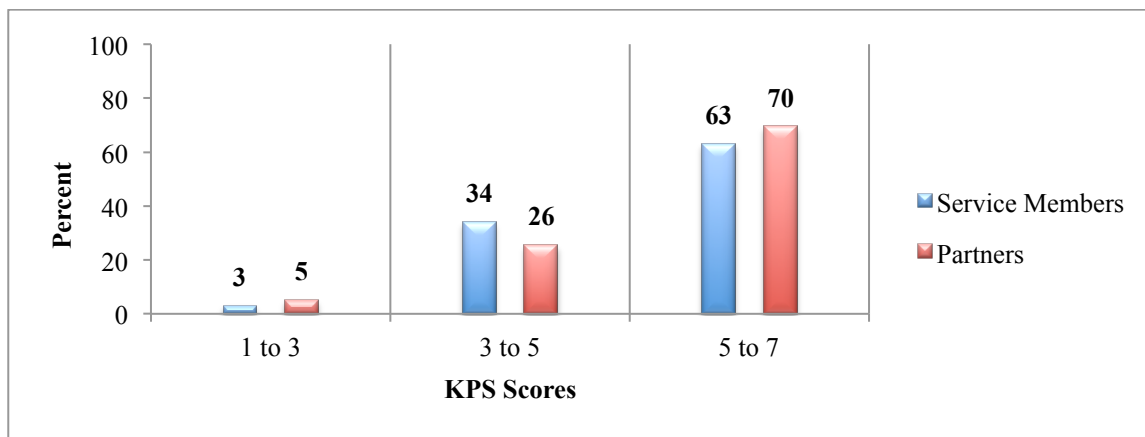
Findings.

- Family functioning scores between before deployment and currently were not statistically different.

Parental Satisfaction. Using the Kansas Parenting Satisfaction Scale (KPSS) to assess parental satisfaction, both service members and partners reported mean scores of 5.4 (range from 1 to 7 with higher scores indicating higher satisfaction). Figure 9 reports the distribution of these scores with the majority of both groups scoring in the near to or above the mean. Even though only 1-3% scored very low on the KPSS, these are the service members and partners who are suffering the most with their satisfaction as a parent. When asked how they would have rated their parental satisfaction before the last deployment, the majority of both groups would have

responded the same (service member=62% and partner=65%); however more than one-quarter of both groups (29%, 27%, respectively) would have reported more satisfaction before the last deployment.

Figure 10: Service Member and Partner Scores on the KPS scale



Analysis. A regression analysis examining Family Functioning (using FAD) and Parental Satisfaction (using KPS) as predictor variables for reintegration stress for service members and partners was conducted. To assess this relationship for adolescents, a regression analysis of Family Functioning (using FAD) as a predictor variable for coping with stressors and getting along with parents was conducted.

Findings.

- Greater family functioning and parental satisfaction were significantly related to less reintegration stress (reported by service members -32%²³ and partners - 37%²⁴) meaning that the better family and levels of parental satisfaction are, less reintegration stress is reported.
- Family functioning for adolescents significantly predicted 11% of the variance for coping with daily stressors during reintegration²⁵ and 24% of the variance for “getting along with the returned parent during reintegration²⁶ meaning that those who reported higher family functioning also had better coping skills with daily stressors during

²³ $R^2=.319$; $F(2,345)=80.82$, $p<.001$, Adjusted $R^2=.315$, Beta Weights: FAD= .440***, KPS= -.226***

²⁴ $R^2=.371$; $F(2,261)=76.98$, $p<.001$, Adjusted $R^2=.366$, Beta Weights: FAD= .565***, KPS= -.114*

²⁵ $R^2=.122$; $F(1,103)=14.37$, $p<.003$; adjusted $R^2=.114$

²⁶ $R^2=.243$; $F(1,103)=33.14$, $p<.001$; Adjusted $R^2=.236$

reintegration and were able to get along better with their returned service member parent.

Physical and Emotional Well Being

Service members and partners were asked if the service member sustained any physical injuries which required hospitalization during their last deployment, the extent to which these injuries currently interfere with their daily life, their emotional well being and mental health (including post-traumatic stress disorder symptoms, diagnoses, and the extent to which those PTSD symptoms interfere with daily functioning). They were also asked to complete a Mental Health Index for themselves and for their partner. Finally, both service members and partners were asked to report on the well being of a selected child (ages 7 to 18 years) as assessed through the BRIC scale.

Combat physical injuries. Eight percent (8%) of service members and six percent (6%) of partners either self-reported or reported combat related physical injuries of their service member that required hospitalization during their most recent deployment. When asked about the extent to which their combat-related injury interfered with daily life, partners and service members varied in their responses (see Table 9). Only 4% of service members reported that their physical injury does not at all interfere with their daily life while the partners sample reported more than four times this number (18%) indicating that service members and partners may not have the same perspective or understanding of this. This could be because service members may not be sharing the extent of their difficulties or perhaps partners are just underestimating the degree to which their service member continues to have difficulties.

Table 9. Extent Physical Injuries interferes with Daily Life

	Quite a bit/A lot	A little bit/Moderately	Not at all
Service Member	38%	58%	4%
Partner	46%	36%	18%

Emotional well being and mental health. Mental health, or the emotional well being, of service members and partners was assessed through questions related to trauma and post-traumatic stress symptoms or diagnosis and the Mental Health Index 5 (MHI-5) which assesses for anxiety and depression. When asked about PTSD, 15% of service members and 16% of partners reported a current diagnosis as a result of combat related military service. Additionally, over one quarter of service members (27%) and almost one-third (32%) of partners reported that the service member is experiencing symptoms of PTSD, absent of an official diagnosis. This brings the reporting to a total of 42% of service members and 48% of partner's reporting either a PTSD diagnosis or symptomology. If the service member was diagnosed with PTSD, or is experiencing symptoms, both service member and partners were asked to what extent these symptoms interfere with their daily life. Responses from the two groups differed and are reported in Table 10.

Table 10. Extent PTSD Interferes with Daily Life

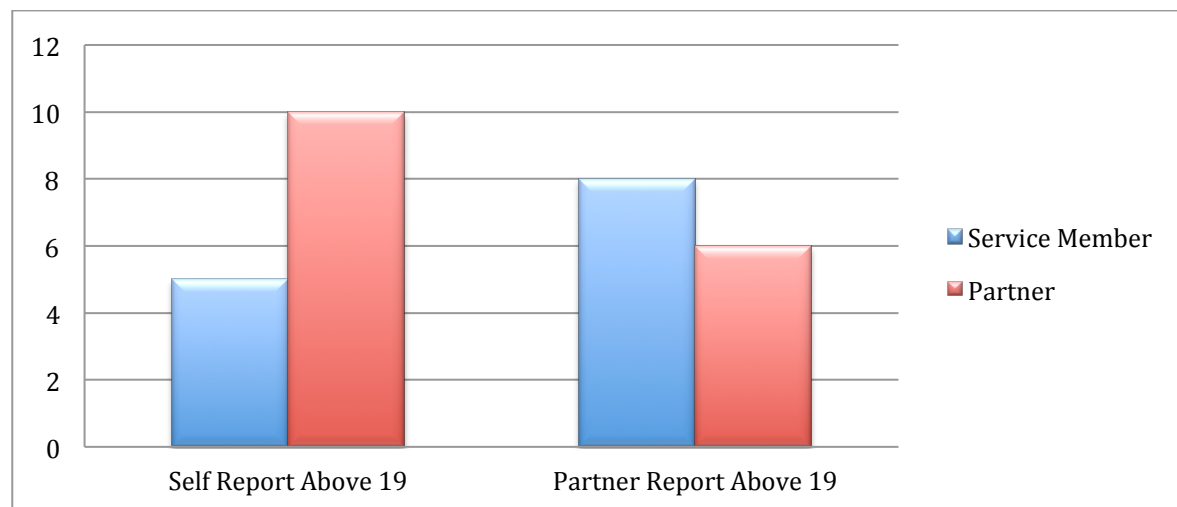
	Quite a bit/A lot	A little bit/Moderately	Not at all
Service Member	22%	70%	8%
Partner	12%	88%	0%

These differences in perceptions is important since research has shown that when there is a mismatch in perceptions of the severity of PTSD symptoms between service member and partners, partners report more depressive symptoms (Gorbaty, 2009). While no partner reported that PTSD did not interfere with daily life at all, a small number of service members (8%) reported this. This disparity may exist because the partners are not aware of their service member's emotional pain, are trying to block it out, or perhaps the service members are trying to hide the extent to which symptoms are problematic or think that they are managing to not have it interfere with their lives. One partner describes the challenges of a PTSD diagnosis this way:

He has always been a bit of a loner but it has gotten worse since the two deployments. Even though he has been diagnosed with this condition, I am totally in the dark about it. Is there a reason why he is behaving this way, or does he really just not care and want to end this marriage?

Using the MHI-5 Index (Figure, 11), the mean score reported by service members was 7.0 for themselves and 7.3 for partners and partners reported a mean of 7.4 for their service member and a 7.9 for themselves. A score above 19 indicates a common mental disorder of anxiety and depression; therefore only 1% of service members and 4% of partners had self-reported scores that indicated these disorders.

Figure 11: Mental Health Index-5 (MHI) Sum Scores for Service Members and Partners



Analysis. To determine the extent that mental health affects managing reintegration stressors, a multiple regression analysis using predictor variables of PTSD symptoms, self-reported mental health, and perceived mental health of partners was conducted.

Findings.

- These predictor variables accounted for 32% of the variance in reintegration stressors for service members²⁷ and 37% for partners²⁸ indicating that PTSD symptoms; self-

²⁷ $R^2=.336$; $F(3,112)=18.91$, $p<.001$, Adjusted $R^2=.32$, Beta Weights: $MHI_{self}=.42^{***}$, $MHI_{sp}=.12$, $PTSD\ SX=.16$

²⁸ $R^2=.379$; $F(3,128)=20.06$, $p<.001$, Adjusted $R^2=.37$, Beta Weights: $MHI_{self}=.41^{***}$, $MHI_{sp}=.13$, $PTSD\ SX=.24^{**}$

reported mental health; and perceived mental health of partners explain the range of the stressors that service members and their partners' experience meaning that the more positive mental health reported, the better service members and partners can cope with reintegration stress.

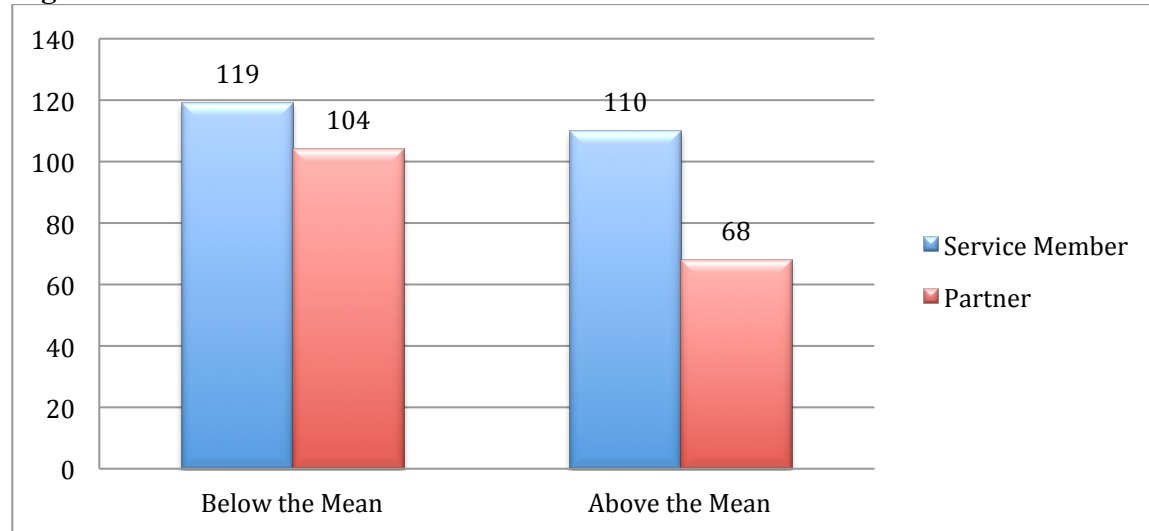
- For partners, the existence of PTSD symptoms (but not a diagnosis of PTSD) was significantly related to reports of more reintegration stress. This was not found for service members.
- Perceptions of partner mental health for both service members and partners did not significantly contribute to predicting reintegration stress.

Child Well-Being. Parents were asked to choose one of their children, between the ages of 7 and 18, to focus on when completing the Behavior Rating Index for Children (BRIC) to assess child well being. [If they had more than one child that fell into this age range, they were asked to pick the one with the most recent birthday.] The child chosen by both service member and partners ranged in age from seven to 18 with a mean age of age of 12 for both service members and for partners. The average age of this child was eight and nine, respectively, when they experienced their first deployment. Both groups selected an equal number of boys and girls. Scale scores could range from 10 to 50 and the higher the score on the BRIC the more problems are indicated. The mean score reported by service members and partners was 24.7 and 24.1, respectively (see Figure 12). Service members reported higher scores (poorer children's functioning) 8% more often than did partners. Importantly, when asked how they would have rated their child's behavior prior to the last deployment, the majority of both groups would have responded the same (SM=67%; P=59%), but about one-quarter (24%) of service members and one-third (32%) of partners would have rated their child's behavior more positively before the last deployment.

Analysis. A simple regression analysis of the BRIC scale scores was conducted in relation to predicting reintegration stressor.

Findings.

- BRIC scale scores significantly predicted 21%²⁹ of the variance in reintegration stressors for service members and 23%³⁰ for partners, which indicates that when parents perceive their children as better adjusted report better management of reintegration stress and vice versa.

Figure 12. BRIC Scores Above and Below mean for Service Members and Partners**Communication**

As stated earlier, renegotiating family roles is a great challenge for reintegrating families and lack of communication around this restructuring is a frequent source of conflict and stress (Booth, Segal & Bell, 2007; Chandra et al., 2011). However, having frequent and satisfying communication during deployment has been found to serve as a buffer against communication stressors upon reintegration (Chandra et al., 2011; MacDermid Wadsworth, 2006). Furthermore, children and adolescents benefit greatly from communication about difficult issues regarding their parent's deployment (Lester, et al., 2010), suggesting that satisfactory and honest communication benefits the parent-child relationship. Therefore, building strong communication habits is of paramount importance for military families (Pincus, 2001).

²⁹ $R^2 = .223$; $F(1, 224) = 64.19$, $p < .001$, Adjusted $R^2 = .21$, Beta = .47***

³⁰ $R^2 = .235$; $F(1, 178) = 54.75$, $p < .001$, Adjusted $R^2 = .23$, Beta = .49***

Frequency and quality of communication during deployment. We found that most participants reported communication during the last experienced deployment. In fact, the vast majority of service members (92%), partners (94%), and adolescents (66%) reported communicating during deployment at least once a week. Only a small percentage (less than 5%) of all surveyed reported no communication during the deployment. Furthermore, communication during deployment was reported as positive to very positive for the majority of service members (83%), partners (84%), and adolescents (78%). About two-thirds (66%) of service members and partners reported no change in the quality of their communication between prior to the last deployment and since reintegration. However, 23% of service members reported a decrease in communication quality following deployment while another 11% claimed communication quality had increased. Twenty-five (25%) percent of partners reported that communication had decreased in quality since prior to the last deployment with 8% reporting more positive communication now. Over 78% of surveyed adolescents rated their communication with their deployed parent as positive; 21% reported it was neither positive nor negative, while 2% claimed it was negative. Thirty nine percent (39%) of adolescents reported that communication had improved, 48% reported no change, and 13% reported it had worsened since their parent returned home. Qualitative responses also focused on the quality of communication during deployment with one partner suggesting incorporating communication instruction within deployment-related programs, stating:

Service members have such a military mindset, I think they forget how to talk to loved ones, or how to open up about what is on their mind.

Another participant echoed this sentiment by stating they needed support to “*communicate better about various issues.*” Several participants indicated a lack of preparation about the impact of

deployment on communication with one adolescent reporting that they would have liked to be informed that they would not have communication with their parent during deployment. Another complained about the poor conditions to communicate with their parent, “*communicating with my dad was sometimes pretty hard; Skype didn't always work and phone calls were expensive*”. According to their qualitative data, both service members and partners identified access to technology to communicate during deployment as particularly helpful in easing their reintegration experiences. In fact, several participants credited good communication pre-deployment and during deployment as the key to their successful reintegration.

...having gone through it before [and] the communication during the deployment helped prepare us for the reunion/reintegration

Our solid relationship before the deployment and the fact that we were able to communicate so frequently [was most helpful during reintegration].

Analysis. Regression analysis was conducted to determine if the quantity and quality of communication during deployment impacted current reintegration stress for service members, partners, and adolescents.

Findings.

- Service members who reported deployment communication accounted for 11% of the variance in their reintegration stressors³¹ indicating that both greater amounts of, and higher quality of, deployment communication contributed to fewer reintegration stressors for them.
- For partners, 7% of the variance in reintegration stressors was accounted for by deployment communication³² however, unlike service members, only communication quality, and not quantity, contributed to fewer reintegration stressors.
- For adolescents 5% of the variance in coping³³ and 8% of the variance in getting along with parents was accounted for by the quality, but not the quantity of, deployment communication.

³¹ $R^2=.114$; $F(2,359)=23.16$, $p<.001$; Adjusted $R^2=.11$; Beta Weights: quantity=-.122*, quality=.290***

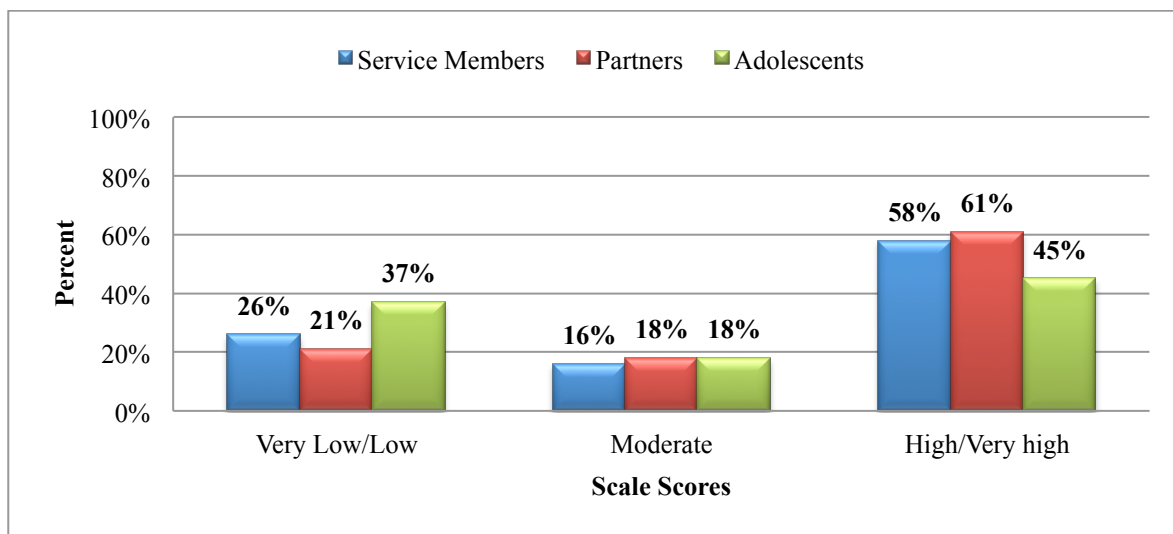
³² $R^2=.078$; $F(2,262)=11.06$, $p<.001$; Adjusted $R^2=.07$; Beta Weights: quantity=-.013, quality=.275***

³³ $R^2=.070$; $F(2,91)=2.55$, $p<.05$; Adjusted $R^2=.05$; Beta Weights: quantity=.051, quality=.270**

- Further support for the importance of the quality of communication was found when participants qualitatively commented on communication issues. Most comments focused on the quality of the communication as well as the technology required for deployment communication.

Current Family Communication. Current family communication was assessed using the Family Communication Scale (FCS). Service members, partners, and adolescents in our samples reported very similar scores (37, 38, and 34, respectively) indicating moderate or high levels of satisfaction with their current communication. However, poor communication also exists for many of these families with 26% percent of service members, 21% of partners, and 37% of adolescents scoring either low or very low on the FCS (see Figure 13).

Figure 13. Participants' Scores on Family Communication Scale



Analysis. Regression analysis was conducted to determine if current family communication impacts reintegration stress for service members, partners, and adolescents.

Findings.

- Current family communication accounted for 20% of the variance in service member reintegration stressors³⁴ and 25% of the variance for partners³⁵ indicating that better current communication is associated with lower reintegration stress.

³⁴ $R^2 = .204$; $F(1,366) = 93.57$, $p < .001$; Adjusted $R^2 = .20$; Beta = $-.45^{***}$

³⁵ $R^2 = .257$; $F(1,271) = 93.60$, $p < .001$; Adjusted $R^2 = .25$; Beta Weights = $-.51^{***}$

- For adolescents 4% of the variance in coping with daily stressors³⁶ and 7% of the variance in getting along with the parent who returned accounted for by current family communication³⁷ also indicating that the better their current family communication is, the better reintegration coping is for adolescents and the better they get along with their returned service member.

Programming, Services, and Support

All service members and partners were asked to respond to questions on formal support programs used for themselves or a member of their family and adolescents were asked to focus on which programs they themselves used. For all “program users” meaning that either the participant, or a member of their family, used any of these programs, further questions focused on: type and frequency of programs used, characteristics of program users and non-users, when formal supports are needed, utilized, and desired, awareness and accessibility of programs, satisfaction with and perceived effectiveness of programs, and informal and formal supports. Types of and frequency of programs used. There were a total of 40 military programs listed on the surveys and all participants were asked to check which were used by themselves and/or a member of their family. These programs were divided into Adult/Family programs and Adolescents programs and then Adult/Family programs were further grouped into four categories: Yellow Ribbon Programs³⁸, Family Camps, Military Support/Resources, and Intervention Services for the purpose of reporting. Adolescents’ programs were further grouped into five categories: Military Life Skill Building-Support, Academic Support, Leadership, Camps, and General Skill Building. [See Appendix B and C for a complete listing of all programs subsumed under these groupings.]

³⁶ $R^2=.048$; $F(1,106)=5.32$, $p<.05$; Adjusted $R^2= .04$; Beta=.22*

³⁷ $R^2=.082$; $F(1,107)=9.57$, $p<.01$; Adjusted $R^2= .07$; Beta=.29**

³⁸ It should be noted that Yellow Ribbon programs have mandatory participation for all branches of the military and that many surveys were collected at these events; therefore there is a disproportionate number of service members and spouses/partners who selected having participated at a Yellow Ribbon event compared to other programs.)

Service Members. Sixty-one percent (61%) of service members reported that they, or someone in their family, participated in at least one of these programs. Yellow Ribbon programs were most frequently utilized (as could be expected since data was collected at some of these events), followed by Military Support/Resources, Intervention Services, and then Family Camps (see Table 11). The children of service members were reported to have most often participated in Camps, followed by Military Life Skill Building-Support, General Skill Building, Academic Support and then Leadership programs.

Table 11. Use of Military Program Services by those with Children 18 or Younger

Program-Service Group	Service Member	Partner	Adolescents
A/F Yellow Ribbon	74%	69%	49%
A/F Military Support-Resources	57%	54%	20%
A/F Intervention Services	35%	45%	22%
A/F Family Camps	5%	7%	10%
Y/ Camps	11%	17%	58%
Y/Military Life Skill Building/Support	49%	53%	48%
Y/Leadership	7%	13%	46%
Y/Academic Support	3%	10%	14%
Y/ General Skill Building	2%	4%	7%

Partners. Sixty percent (60%) of partners reported they or someone in their family used at least one of the listed programs. Yellow Ribbon programs were participated in most often (as could be expected since data was collected at some of these events), followed by Military Support/Resources, Intervention Services, and Family Camps. Partners who reported child/adolescent programs being used reported the most participation in Adolescents Military Life Skill Building-Support programming, followed by Camps, Leadership programs, Academic Support, and then General Skill Building programs or services (See Table 12 above). Adolescents.

Adolescents. Sixty-six percent (66%) of adolescent participants reported participating in at least one program. Camps were the most frequently reported utilized programs where 58% of program users stated they had participated in this kind of program (see Table 11 above). Nearly one half of program users attended A/F Yellow Ribbon programming (49%), and almost half (48%) reported attending a Adolescents Military Life Skill Building/Support program or a Leadership program (46%). Participants wrote of specific programs that they participated in to help cope with the challenges of deployment and reintegration:

My child has benefited from Yellow Ribbon greatly and has gotten to know other children.

The Strong Bonds weekend, because we actually had to talk to each other and participate vs. just picking up a brochure.

Characteristics of Program Users and Non-Users. Since there was a large number of participants who reported no program use, (39% of service members, 40% of partners, and 34% of adolescents) which was somewhat unexpected in that some data was collected at many activities and events, we wanted to know how program users and non-users were similar and/or differed on a number of characteristics.

Analysis. T-tests and Chi-Square analyses were conducted examining PTSD symptoms and diagnoses, time in the military, number of deployments, reintegration expectations, mental health, family functioning (FAD), and parental satisfaction in relation to users and non-users. In addition, mean comparisons were conducted to determine differences in reintegration stress (RSI) for program users and non-users. For adolescents these same t-tests were conducted for time in the military, number of deployments, family functioning (FAD), and coping with stress and getting along with parents during reintegration.

Findings.

- For service members, statistically significant differences between program users and non-users were found for time in the military, number of deployments, and partner mental health³⁹ meaning that service members who reported program use, when compared to non-users, had statistically significant differences in the following areas. Users:
 - served longer in the military
 - had experienced a greater number of deployments
 - reported better mental health for their partner
 - were more likely to have expected that reintegration was going to be easier than it was⁴⁰
- For partners, no statistically significant differences were found between program users and non-users for any of these variables.
- Mean comparisons of program users and non-users found that program users, as reported by service members and partners, partners, reported significantly more reintegration stress than did program non-users⁴¹.
- More specifically, comparisons across each of the 12 Reintegration Stressor Index items found that service members who reported program use, when compared to non-users, reported significantly more stress in the areas of:
 - household responsibilities
 - family finances
 - family roles
 - managing their emotions
 - reestablishing their relationships their children⁴².
- For partners, when comparing program users to non-users, had significantly more stress in the areas of:
 - reestablishing relationships with their service member
 - worrying about how their children will respond to their service members once he/she returns⁴³.
 - For adolescents there were no statistically significant differences between program users and non-users for any of these examined variables.

³⁹ Time in the Military: $t(423)=3.40, p<.001$, users=14.26, $sd=7.42$, nonusers=11.80, $sd=7.06$; Number of Deployments: $t(430)=1.99, p<.05$, users=2.58, $sd=1.78$, nonusers=2.23, $sd=1.83$; Spouse Mental Health: $t(378)=3.24, p<.001$, users=8.15, $sd=4.80$, nonusers=6.48, $sd=4.72$

⁴⁰ Chi Square Analysis, 17% program users versus 4% non-program users, $\eta^2=.24$, medium effect size

⁴¹ $t(372)=2.74, p<.01$, user=3.20, $sd=1.36$, nonuser=2.76, $sd=1.44$

⁴² Household Responsibilities: $t(370)=2.12, p<.05$, users=3.03, $sd=1.78$, nonusers=2.59, $sd=1.75$; Family Finances: $t(369)=2.24, p<.05$, users=3.65, $sd=2.00$, nonusers=3.14, $sd=1.89$; Family Roles: $t(369)=2.49, p<.05$, users=3.01, $sd=1.78$, nonusers=2.50, $sd=1.67$; Managing Emotions: $t(370)=3.22, p<.001$, users=3.58, $sd=1.91$, nonusers=2.90, $sd=1.71$; Reestablishing Child Relationship: $t(370)=2.22, p<.05$, users=3.05, $sd=1.79$, nonusers=2.60, $sd=1.64$

⁴³ Reestablishing Spouse Relationship: $t(273)=2.12, p<.05$, users=3.58, $sd=2.07$, nonusers=2.92, $sd=1.95$; Worrying about how Children will Respond to Service Member: $t(271)=3.34, p<.001$, users=3.05, $sd=1.82$, nonusers=2.15, $sd=1.55$

When Formal Supports are Needed, Utilized, and Desired

To determine when in the deployment cycle services or formal supports may be necessary, service members, partners, and adolescents were asked which phases were the most difficult and the most manageable for themselves, their partner, and their children. More specific to reintegration needs, service members, partners, and adolescents were asked how long it took for them to readjust and service members and partners were asked when they experienced the most reintegration stress. These findings are cross referenced with actual reports of when the target audiences actually utilized programs and where in the deployment cycle they would like more services, programs, and resources.

Reintegration Adjustment. Specific to readjustment time for reintegration, one third to almost half of the participants reported that they adjusted to reintegration right away suggesting no need for additional services. However, over half of the participants indicated that they took weeks, a few months, more than one year, and others are still adjusting (see Table 12.)

Table 12. Readjustment

How long did it take to adjust to being a family?	Adjusted right away	Took a few weeks to a few months	Still adjusting	No longer together
Service member perspective	33%	46%	17%	4%
Partner perspective	33%	40%	26%	2%
Adolescent perspective	45%	40%	8%	7%

Qualitative data supports that some families needed time to adjust to reintegration. One partner described it as “*Difficult at first, then found some peace*” and another wrote “*Challenging at first and now wonderful!!*” Others report that it is still difficult, even after numerous deployments:

Hard for me and my wife. You would think after three deployments we would have it down but there are still issues after the 1st month (honey moon period) is over.

Another participant reported the ups and downs of the reintegration process:

Interesting. The first few months were great to be together again but it seems like the more time went by, eventually things started coming up. He seemed to develop issues or finally bring them to the surface of the hardship of the deployment and coming back into the civilian world. I think things like a good pay to support the family over there was hard to leave and come home to struggling financially, people getting laid off or pay cuts at work, etc.

Consistent with the family adjustment findings, reports on the most stressful time since the service member returned indicated that about half of service members and partners had the most difficulty during the first month; however, the other half indicated that difficulties persisted for at least two months to well over one year (see Table 13). However, 15% of both the service member and partner samples reported no stress at all since their return.

Table 13. Most Stressful Time Since Return

	First month	Between 2-4 months	Between 5-11 months	One year or more later
Service Member Perspective	49%	31%	9%	11%
Partner Perspective	52%	29%	8%	12%

Analysis. In order to make sure that the length of time since they returned did not confound results of the cycle of reintegration stress, chi-square analyses were conducted.

Findings.

- Partners whose service member had been home a shorter time were significantly more likely to rank reintegration as the easiest phase of deployment for themselves, their children, and their service member.
- However, the longer their service member had been home, the more likely they were to report that reintegration was the most difficult phase of the deployment cycle for their service member, but not for themselves or their children suggesting that reintegration adjustment may be an ongoing process that could fluctuate over time and is experienced differently by individual family members.

Difficulty and Manageability of Deployment Cycle. When asked what were the most difficult and the most manageable stages of the deployment cycle, service members, partners, and adolescents indicated the following (see Tables 14 and 15). In looking at these three stages, the following can be noted:

- ***Pre-Deployment:*** All three samples under-recognized the difficulty, and overestimated the manageability, of this phase for each other.
- ***Deployment:*** All three samples rated this stage as the most difficult for all three groups; however, the percentages that viewed this stage as the most difficult or manageable differed.
 - Partners and adolescents overestimated the difficulty of this phase for service members.
 - Both service members and partners underestimate the manageability of it compared to adolescent reports.
 - Both service members and partners underestimated the manageability of it for each other.
- ***Reintegration:*** All three samples tend to under-recognize the difficulty of this phase for each other.
 - Adolescents reported this period as more manageable than either service members or partners reported for themselves.
 - Both service members and partners view this phase as less manageable for themselves as compared to reports by the others.

Table 14. Most Difficult Phase of Deployment

	Pre-Deployment	Deployment	Reintegration
Reported by SM			
Most Difficult for SM	28%	48%	24%
Most Difficult for Partner	14%	74%	12%
Most Difficult for Children	10%	76%	14%
Reported by Partner			
Most Difficult for Partner (self)	27%	54%	19%
Most Difficult for Service Member	12%	61%	27%
Most Difficult for Children	7%	74%	19%
Reported by Adolescents			
Most Difficult for SM	18%	55%	27%
Most Difficult for Partner	17%	60%	23%
Most Difficult for Adolescent (self)	23%	51%	26%

Table 15. Most Manageable Phase of Deployment

	Pre-Deployment	Deployment	Reintegration
Reported by SM			
Most Manageable for SM (self)	19%	40%	41%
Most Manageable for Partner	24%	18%	58%
Most Manageable for Children	25%	16%	59%
Reported by Partner			
Most Manageable for Partner (self)	27%	26%	47%
Most Manageable for SM	33%	21%	46%
Most Manageable for Children	28%	15%	57%
Reported by Adolescents			
Most Manageable for Adolescent (self)	12%	27%	61%
Most Manageable for SM	24%	25%	51%
Most Manageable for Partner	16%	26%	58%

When Formal Supports are Utilized and Desired

As seen in Table 16, formal supports were accessed across all three phases of the deployment cycle by approximately half of program users in each target audience. While all three samples considered deployment the most difficult phase of the deployment cycle, programs were more frequently accessed during reintegration than during deployment. Interestingly, service members, but not partners, were more likely to attend programs during reintegration if they thought reintegration was going to be easier than what they experienced. The least accessed, and perhaps most needed, programs were offered during pre-deployment. When asked to indicate when they would like to have more programs and services offered to them and their families, service members and partners reported a relatively uniform interest in these supports across all stages of the deployment cycle.

Table 16. When Formal Supports are Utilized and Desired

Perspective	Pre-Deployment		Deployment		Post-Deployment	
	Used	Desired	Used	Desired	Used	Desired
Service Member	49	41	63	48	77	55
Partner	66	46	77	54	84	53
Adolescent	59		60		77	

Programming Needs. When asked what more formal support service members and partners would like available to them during the process of reintegration, they reported wanting changes in military offerings as well as changes in how these supports are offered and made available to them. Specific programming needs reported include services that focus on providing: marital support (including couples retreats, marriage enrichment programming, and couples counseling), and more dedicated family time and family programming. When participants wanted changes to help them deal with reintegration, they wanted increased efficiency and effectiveness in getting support as well as having better communication about what is available to them. Partners, in

particular, reported wanting one website where all available resources could be located. Below are some participant suggestions regarding what would be helpful in designing future programs:

A weekend of fun for spouses and have children entertained. Then some fun with the whole family together somewhere. A counselor asking questions on how things were going and specifically asking questions to see how things are going. Sometimes there is so much going on you don't know where to start to explain to a counselor.

Single soldiers don't get the support they need / Someone to pick me up, or at least meet me, at the airport.

It would be awesome if there were some way for spouses to have work off when they returned to give us time together.

A law that allows spouses to attend redeploy ceremony and pick up their spouse upon arrival from deployment without retribution from an employer, NO MATTER length of employment at said company or small business. My husband almost had to take a taxi home.

I make heavy use of websites because they're available 24/7 from home. An easy-to-use website resource specifically for reunion and reintegration issues would be great.

Somewhere to ask for help with stress that doesn't ruin the soldiers career. and yes, they say they are out there, but wrong....they get flagged as a problem if they ask for help.

Actual help using the programs. For example, don't tell me about post 911 GI bill sign me up

Awareness and Accessibility of Programs

Program users. When asked how they became aware of the programs they attended, one half of service members reported becoming aware of programs through their partner (23%) or by attending another activity (27%). Another one half of service members found out about programs through a combination of email (16%), website (13%), or other means/don't remember (24%). Greater numbers of partners reported hearing about programs overall. Thirty-seven percent (37%) of these program users were reached via email or their partner, 30% were reached

by friends, and 30% reported hearing about programs by attending another program or activity. Some (15%) partners reported being contacted directly, and another 12% found out about services through a website. The majority of adolescents (71%) found out about programs and services through their parents. Over one quarter, 26%, were notified through friends or an adult in the community, and 20% found out by attending another program. These findings indicate that military programmers largely recruit through word of mouth (e.g., information given to service member or their partner) and/or through participation in other program. This type of recruitment may result in limited audiences who experience multiple services either because they attend other programs or know others who do.

Non-Users. Conversely, when service members and partners who did not access programs were asked why they did not participant, they largely noted a lack of awareness about them and accessibility issues to them. Service members most frequently reported they did not feel they were necessary (20%), followed by lack of knowledge about the programs (14%), inconvenient time or location (12%), lack of interest (12%), and lack of time (12%). Partners most frequently reported not knowing about programs (12%), followed by feeling they were not necessary (7%), lack of time (5%), and lack of interest (4%). Adolescents who report not utilizing programs or services, similar to partners, most often cited not knowing about them as the main reason for not using programs or services (16%). Another 10% of adolescents reported not having time to attend programs. These findings suggest the need to market programs more broadly, examine and find solutions to barriers to participation, and document and disseminate positive findings of program participation. Methods to provide strategic, universal, and unified information, perhaps on portals, are needed so that military families are aware of all the resources and services available to them and can learn how they can access them.

Satisfaction with and Perceived Effectiveness of Programs. Targeted audiences may be more likely to use a program if the program addresses their perceived needs. Therefore, service members, partners, and adolescents who used programs were asked to rate their level of satisfaction with and perceived effectiveness of programs. In addition they were asked to identify if they experienced important outcomes as a result of their participation (see Table 17 for a list of these outcomes). Participants were encouraged to identify all answers that were applicable to them.

Table 17. Helpfulness of Military Programs for Service Members, Partners, and Adolescents

How were programs helpful?	Service Members	Partners	Adolescents
Made me feel proud and connected to the military	23%	45%	56%
Met others experiencing deployment	19%	45%	61%
Learned more about deployment experience	16%	34%	44%
Clarified challenges family and I face during deployment and separation	21%	34%	34%
Clarified challenges family and I face during reunion and reintegration	21%	29%	25%
Taught me family communication is important throughout	23%	33%	34%
Helped me put a plan together for reintegration	30%	39%	17%
Helped me feel better about deployment	10%	17%	42%
Helped family members not feel so alone	21%	28%	34%
Provided children with fun activities	23%	46%	54%
Provided children with helpful information	14%	31%	44%
Helped family get along better	9%	15%	14%

Service Members. A large majority (91%) of service members report being ‘somewhat’ or ‘to a great extent’ satisfied with the quality of programs and services. Eighty-eight percent (88%) of service members felt programs were ‘somewhat’ or ‘to a great extent’ effective in

meeting the needs of themselves and family members who utilized programs. An examination of individual positive program outcomes indicated that nearly one third (30%) of service members report programs ‘gave advice on what little things I can do to help my family’. Another 23% reported ‘it taught me that family communication is important before, during, and after deployment’, or ‘provided fun activities for my children.’ Finally, programs and services were identified as helpful by 23% of service members because they ‘made [him] feel proud and connected to the military’.

Partners. A large majority (95%) of partners were ‘somewhat’ or ‘to a great extent’ satisfied with services and programs. Ninety-one percent (91%) of partners reported programs were ‘somewhat’ or ‘to a great extent’ effective in meeting the needs of themselves and family members who utilized programs. An examination of individual positive program outcomes indicated that the top three helpful aspects of programs reported were ‘providing children with fun activities’ (46%), ‘meeting others who are experiencing deployment’ (45%), and ‘making me feel proud and connected to the military’ (45%). Similar to service members, 39% of partners reported programs ‘gave advice on what little things I can do to help my family’. Thirty-four percent (34%) reported they ‘learned more about the deployment experience’, which they found helpful.

Adolescents. Adolescents were asked how much they liked programs as an evaluative measure of programs and services. Over half (54%) of adolescent program users reported liking programs and services ‘very much,’ while 42% rated programming as “okay” and 6% as “not very much.” Adolescent participants were asked how helpful they felt programs had been for them, in addition to in what ways they had been helpful. The majority of participants felt that programs were either “very helpful” (36%) or “somewhat helpful” (55%) compared to the 9%

that found programming to be “not very helpful.” Regression analyses were conducted for perceived program effectiveness⁴⁴ on coping with day to day stresses and getting along with returned parent during reintegration and were not found to be statistically significant⁴⁵. An examination of individual positive program outcomes indicated that nearly two-thirds (61%) of adolescent program users identified ‘meeting others experiencing deployment’ as a positive aspect of programs or services. Fifty-six percent and 54%, respectively, cite the benefits of feeling ‘proud and connected to the military’, and ‘providing fun activities’ as being particularly helpful.

Analysis. To determine if the specific program outcomes were related to changes in reintegration stress, mean coping and getting along with parent ratings were compared for each of the items.

Findings.

- Significant findings were found for those adolescents who reported that programs increased their military connection and pride⁴⁶, helped them plan for reintegration,⁴⁷ gave helpful information⁴⁸, and helped the family get along better⁴⁹ meaning that adolescents who experienced these program outcomes were less likely to have problems with returned parent during reintegration.

⁴⁴ The initial regression included both satisfaction and effectiveness; however, the two items correlated at $r=.81$ and posed serious multicollinearity issues. Because of the great overlap in the two items, satisfaction was removed.

⁴⁵ Coping: $R^2=.005$; $F(1,80)=.371$, $p=.544$; Adjusted $R^2=-.008$; Getting Along with Parent: $R^2=.002$; $F(1,80)=.124$, $p=.726$; Adjusted $R^2=-.011$

⁴⁶ $t(58)=-2.51$, $p<.05$, made me feel proud and connected to the military= 1.49 , $sd=.78$, did not= 2.10 , $sd=1.35$

⁴⁷ $t(41)=-2.33$, $p<.05$, helped them plan for reintegration= 1.35 , $sd=.70$, did not= 1.87 , $sd=1.17$

⁴⁸ $t(84)=-2.13$, $p<.05$, gave useful information= 1.52 , $sd=.93$, did not= 2.02 , $sd=1.24$

⁴⁹ $t(26)=-2.68$, $p<.05$, helped the family get along better= 1.25 , $sd=.62$, did not= 1.85 , $sd=1.15$

- Significant findings for coping with day-to-day stress during reintegration were found for those who participated in programs that helped them feel better about deployment⁵⁰ and helped the family to not feel so alone⁵¹ with those adolescents who experienced those program outcomes being less likely to have problems coping with stress during reintegration.

Analysis. A regression analysis using program satisfaction and perceived effectiveness of programs as predictor variables⁵² for reintegration stress was conducted for service members and for partners. In order to determine if various program outcomes were related to reintegration stress, mean Reintegration Stressor Index scores were compared for each of the items. For adolescents, regression analyses were conducted for perceived program effectiveness⁵³ on coping and getting along with their returned parent during reintegration. To determine if the specific program outcomes were related to reintegration stress, mean coping and getting along with parent ratings were compared for each of the items. Lastly, to determine what service members, partners, and adolescents' value in military programming, correlations⁵⁴ were conducted among ratings of satisfaction and perceived effectiveness and positive program outcomes (see Table 18), including reintegration preparation and expectations.

Findings:

Service Members.

- There was one statistically significant difference found for service member's program outcomes and reintegration stress and in an unexpected direction. When service members reported that a program "clarified challenges for families during reintegration" they reported significantly more reintegration stress than those who did not report that a program clarified these challenges⁵⁵.

⁵⁰ $t(84)=-2.15$, $p < .05$, helped them feel better about deployment= 1.47 , $sd=.70$, did not= 1.92 , $sd=1.10$

⁵¹ $t(84)=-2.14$, $p < .05$, helped family to not feel so alone= 1.41 , $sd=.69$, did not= 1.88 , $sd=1.05$

⁵² The initial regression included both satisfaction and effectiveness; however, the two items correlated at $r=.81$ and posed serious multicollinearity issues. Because of the great overlap in the two items, satisfaction was removed.

⁵³ The initial regression included both satisfaction and effectiveness; however, the two items correlated at $r=.81$ and posed serious multicollinearity issues. Because of the great overlap in the two items, satisfaction was removed.

⁵⁴ While many of these correlations were statistically significant, only those that were determined to be a medium to large effect size were included in the findings.

⁵⁵ $t(265)=3.42$, $p < .001$; clarified the challenges my family and I might face during reintegration= 3.74 , $sd=1.27$. did not clarify= 3.05 , $sd=1.35$

- Satisfaction and perceived effectiveness of programs was not found to be statistically significant⁵⁶ in reducing or increasing reintegration stress for service members
- In looking at perceived outcomes for service members, satisfaction and effectiveness ratings were significantly related to programs that provided them with a sense of pride and connection with the military⁵⁷ or provided fun activities for the children⁵⁸.
- No other significant findings were found suggesting that programs are not necessarily effectively addressing reintegration issues for service members, yet service members continue to rate programs as satisfactory and effective.

Partners

- Satisfaction and perceived effectiveness ratings were significantly related to programs that provided them with a sense of pride and connection with the military⁵⁹, made them not feel so alone⁶⁰ and provided children with useful information⁶¹ and fun activities⁶².
- There were no statistically significant differences found for any of the outcome items for or for partners⁶³. Once again suggesting that programs are not necessarily effectively addressing reintegration issues for partners, yet they continue to rate the programs as satisfactory and effective.

Adolescents

- Perceived effectiveness of programs and coping with stress and getting along with parents during reintegration were not found to be statistically significant⁶⁴.
- Significant findings were found for those who reported that programs increased their military connection and pride⁶⁵, helped them plan for reintegration⁶⁶, gave helpful information⁶⁷, and helped the family get along better⁶⁸ meaning that adolescents who experienced these program outcomes were less likely to have problems with returned parent during reintegration.
- Significant findings for coping with stress during reintegration were found for those who participated in programs that helped them feel better about deployment⁶⁹ and helped the family to not feel so alone⁷⁰ with those adolescents who experienced those program outcomes being less likely to have problems coping with day-to-day stress during reintegration.

⁵⁶ $R^2=.005$; $F(1,228)=1.15$, $p=.285$; Adjusted $R^2=.001$

⁵⁷ Spearman's rho satisfaction=.32, $p<.001$; effectiveness=.34, $p<.001$

⁵⁸ Spearman's rho satisfaction=.28, $p<.001$

⁵⁹ Spearman's rho satisfaction=.34, $p<.001$; effectiveness=.27, $p<.001$

⁶⁰ Spearman's rho satisfaction=.29, $p<.001$; effectiveness=.38, $p<.001$

⁶¹ Spearman's rho satisfaction=.36, $p<.001$; effectiveness=.32, $p<.001$

⁶² Spearman's rho satisfaction=.44, $p<.001$; effectiveness=.40, $p<.001$

⁶³ The initial regression included both satisfaction and effectiveness; however, the two items correlated at $r=.79$ and posed serious multicollinearity issues. Because of the great overlap in the two items, satisfaction was removed.

⁶⁴ Coping: $R^2=.005$; $F(1,80)=.371$, $p=.544$; Adjusted $R^2=-.008$; Getting Along with Parent: $R^2=.002$; $F(1,80)=.124$, $p=.726$; Adjusted $R^2=-.011$

⁶⁵ $t(58)=-2.51$, $p<.05$, made me feel proud and connected to the military=1.49, $sd=.78$, did not=2.10, $sd=1.35$

⁶⁶ $t(41)=-2.33$, $p<.05$, helped them plan for reintegration=1.35, $sd=.70$, did not=1.87, $sd=1.17$

⁶⁷ $t(84)=-2.13$, $p<.05$, gave useful information=1.52, $sd=.93$, did not=2.02, $sd=1.24$

⁶⁸ $t(26)=-2.68$, $p<.05$, helped the family get along better=1.25, $sd=.62$, did not=1.85, $sd=1.15$

⁶⁹ $t(84)=-2.15$, $p<.05$, helped them feel better about deployment=1.47, $sd=.70$, did not=1.92, $sd=1.10$

⁷⁰ $t(84)=-2.14$, $p<.05$, helped family to not feel so alone=1.41, $sd=.69$, did not=1.88, $sd=1.05$

- Adolescent satisfaction and perceived effectiveness ratings were significantly related to the outcomes of experiencing military pride and connection⁷¹, receiving helpful information⁷², making them feel better about deployment⁷³, helping the family to not feel so alone,⁷⁴ meeting others who are experiencing deployment⁷⁵, and clarifying challenges associated with deployment⁷⁶.

Informal and Formal Supports. The majority (94%) of service members, partners, and adolescents reported one of the four kinds of informal supports (family, friends, coworkers, and neighbors) as the most helpful type of support or resource for their family. However, 48% of service members, and 43% of partners reported that a formal support (faith based organizations, community based programs, and military sponsored programs) ranked in their top three sources of support. Interestingly, 77% of adolescents cited a formal source of support as one of the top three they would turn to in a time of need, specifically, a military sponsored program or service. As indicated earlier, the three target audiences who use programs do so across the deployment cycle and desire more offerings. For those who do not use programs, nearly half of service members (48%) and over two thirds of partners (69%) report being motivated to utilize programs at some point in the future, suggesting that program non-users are failing to make use of resources for a reason other than lack of need.

Discussion and Implications for Programming

Major findings were presented and contextualized in the results section, therefore this discussion section will focus on the implications of those findings for programming as well as suggestions on how to best meet the needs of reintegrating military families. One important consideration to keep in mind is the population intended to be served. Although military families

⁷¹ Spearman rho satisfaction=.31, $p<.01$; effectiveness=.39, $p<.001$

⁷² Spearman rho satisfaction=.33, $p<.001$; effectiveness=.43, $p<.001$

⁷³ Spearman rho satisfaction=.29, $p<.01$; effectiveness=.38, $p<.001$

⁷⁴ Spearman rho effectiveness=.31, $p<.01$

⁷⁵ Spearman rho satisfaction=.36, $p<.001$; effectiveness=.31, $p<.01$

⁷⁶ Spearman rho effectiveness=.28, $p<.01$

continue to be very resilient and adapt to the demands the military makes for service members and their families, it is important to recognize that this is not true of all military families. There are more than three million spouses, partners, children, and adult dependents of these military personnel who have been affected by the deployment of their loved ones (DUSD, 2010). If less than 10% of them are experiencing difficulties, this still results in a staggering potential for at least 300,000 individuals to have been effected within the past decade alone. Given that we now know that the effects of reintegration linger for months, if not years, it is critical that the needs of these families are met so that they can lead healthy, functional lives individually and as a family. It is clear that service members and their families are in need of services and programs throughout the deployment cycle and specifically that education and communication is critical during the pre-deployment and deployment phases while developing the necessary coping skills and supports that are increasingly necessary during the reintegration phase.

Focus on the Family. To best meet the needs of children and adolescents, they need to be considered within the context of their families. Involving the family in programs is a means of bolstering the family unit prior to and after deployment. This study further supports prior research that different family members experience reintegration challenges differently and have their own unique struggles. However, these individuals are embedded within families where one member's experience of reintegration impacts other family members' experiences. For example, parents with lower parental satisfaction report increased reintegration stress, which in turn affects their spouse and children. Given this, parents and children need to have more positive time together to build on their existing relationships. Effective programming must begin to address the family aspects of reintegration at all levels, beginning in the pre-deployment phase. Effective

programming must begin to address the family aspects of reintegration at all levels, beginning in the pre-deployment phase. Programs should include age-appropriate activities for children and adults in like-groups so that couples are provided the time to bond as a couple while allowing the family the opportunity to interact, engage, and learn together. Further, a systemic aspect of programming should include activities focused on the entire family.

Matching program resources with specific participant needs. When considering the needs of service members and their families for programming, it is important to remember that any attendee may be experiencing PTSD symptomology or other traumas, whether or not they have been formally diagnosed. Our study found that many service members and their partners reported that many service members were experiencing PTSD symptoms without an official diagnosis; that these symptoms interfered with their daily life; and that those without the diagnosis but with the symptomology, did not cope as well and experienced more stress during reintegration than those with a diagnosis. This is likely due to the access a diagnosis may give these families to a like community, to information and resources for coping, and receiving the knowledge that there are others who are experiencing similar symptoms and feelings but are overcoming them. Program professionals must recognize that program participants are experiencing significantly more reintegration stress than non-users. An important consideration in program development is the involvement of appropriate personnel, mental health practitioners or otherwise, both in person and on-call during programming to provide services or referrals as needed.

What reintegration programs need to include:

1. Reintegration experiences change over time and are experienced differently by individual family members. Our study found that partners reported reintegration as the most

manageable phase of the deployment cycle the less time the service member had been home. They are, however, more likely to report reintegration as the most difficult phase the longer the service member has been home. Reintegration services and programs need to reflect the changing needs these families experience over time, including the struggles they report up to at least one-year post return. Programs offer key opportunities to intervene in the experiences of service members and their families during all stages of deployment. These programs should not only educate but also provide options for managing stresses that the individuals and the family as a whole might be, or probably will, experience. While prevention programs are often less costly overall and prevent or alleviate the stress service members and their families may face, they must be implemented prior to, and during, deployment. Whether programs are provided prior to or during deployment (prevention) or during reintegration (intervention), these programs will be most successful in helping families reduce reintegration stress and report healthier functioning when they include a focus on clarifying information about the ambiguous reintegration process, allow families to be more prepared for reintegration, and help families develop more realistic expectations about reintegration. Specifically, services need to help prepare families for reintegration so that they can develop realistic expectations of the process. When the expectations of reintegration were harder than expected, families experienced a more difficult reintegration process which was associated with more reintegration stress and dysfunction. Providing psycho-educational prevention programs can help families identify realistic challenges that reintegration will present. These programs will increase a family's preparedness for future challenges. As an intervention, potential disappointments and unmet expectations can be discussed and solutions sought to reduce reintegration stress.

2. Services need to help service members develop a more positive attitude towards reintegration. When service members reported better attitudes, they also reported less reintegration stress. Programming can focus on this at all three phases but is most critical during the pre-reintegration period.

3. Military leadership should recognize that service members with less military experience and partners with more military experience report more reintegration stress. This discrepancy may be due to service members expecting the reintegration process to be easier earlier on but find it is difficult and therefore, making it more stressful over time. Conversely, partners might expect the process to become easier to manage over time and if they find this not to be true, they experience more stress. Therefore, programs must be tailored to recognize these different perspectives and not assume that partners will experience the reintegration process the same.

4. Programs should include information on areas that appear to cause the most stress to families during reintegration. These areas need to be explored at all stages of the deployment cycle with potential solutions sought so that families can be prepared for, and enter into, these negotiations in ways that are healthy for themselves and for their families. These include: negotiating household responsibilities, negotiating family roles, dealing with family finances, learning how to manage emotions, and learn how to reestablish relationships.

5. Effective communication is also a critical element for healthy reintegration. Healthy communication should be taught during all phases in the deployment cycle. We found that frequent and high quality communication during deployment was associated with less reintegration stress for service members while adolescents and partners who reported high quality communication (but not frequency) during this period also reported lower reintegration

stress. Additionally, we found that in all three groups in our study, the lower the quality of communication during deployment, the more difficulty families had in coping with reintegration stressors. Helping families develop good communication skills before service members return home will build resiliency in these families which will help them navigate the reintegration process more smoothly

6. Programs that successfully met the following 8 components were either considered youth to be the most helpful, helped them get along better with their returning parent, and/or helped them cope better with day to day reintegration stressors. Programs need to effectively provide the following as program outcomes for youth by offering:

- Opportunities to meet others experiencing deployment
- Activities that increase their sense of military pride and connection to the military increased
- Fun activities
- Ways to help them plan for reintegration
- Helpful information
- Opportunities to help the family get along better
- Ways to help them feel better about deployment
- Ways so that their family does not feel so alone

7. In addition, when youth reported that the following areas worsened since reintegration, they also reported more difficulty coping with day to day stressors and reported more difficulty in getting along with their returned parent during reintegration. Therefore, families need to make sure that these do not worsen or adolescents during reintegration and programs can target these to help these families, and adolescents in particular. Therefore, programs should focus on ways to help youth so that these areas do not decline between deployment and reintegration.

- Family communication
- Their role in the family
- Family responsibilities
- Their own behavior

- Ability to concentrate
- Academics
- School behavior
- Chores

8. We also suggest that programming be introduced in a variety of ways to effectively achieve these above-stated goals. Behavioral and concentration issues could be addressed through school affiliated programs, which would be particularly beneficial considering our finding that youth who reported decreased academic performance during reintegration also struggled with family relationships and coping. The combination of family roles, responsibilities, and communication suggests a systemic approach to programming, where parents and youth are all included in the planned activity.

Program Satisfaction and Perceived Effectiveness. Ratings of satisfaction and effectiveness of programs by service members and partners were not found to be related to the critical outcomes of feeling more prepared for, or developing realistic expectations for, reintegration. These findings suggest that programs may not be effectively addressing the key factors for healthy reintegration but families are still satisfied with them, particularly if programs are viewed as increasing their sense of pride and connection to the military and provide fun activities for their children. This finding can be used as a key piece in marketing programs to families.

Referrals and other services. Programs and services are a great place for service members and their families to learn about other resources available to them. These services and resources should be front and center with people who have used them and benefitted from them being available to speak. Also making sure that the needs and suggestions of the service members and their families are being listened to and bringing in a wider range of services is critical to address their needs. For example, this study highlighted a request by service members

for a couple reunion weekend and services that focused on allowing them fun cheap activities to do with their family.

Marketing

Programs and services, ultimately, only stand to make an impact if they garner participation. One finding of the present study was that many participants did not realize that programs were available to them, possibly due to lack of marketing. Program marketing is crucial in raising awareness of the availability of programs, as well as peaking participant interest in programs. Mandatory programs offer an excellent opportunity to market future services and programs but service members and their families need to see programs as beneficial and a unique offering to them as a military family if they are to be most effective. Marketing should be done through list-serves, Facebook groups and other social medial accounts, chain of command, word of mouth on and off base, as well as large-scale marketing campaigns, especially in areas with high military concentrations. Therefore, program marketing to the civilian and military communities to make them aware of available programs is an essential and crucial step in increasing program use. Providing detailed descriptions of programming will help ensure that individuals seeking particular services are able to find the appropriate services. In any case, effective marketing efforts and strategies must be developed and implemented to reach and include military families in these services.

Evaluation

Lastly, programs need frequent and rigorous evaluation to determine if they are achieving the outcomes they are intending to accomplish. Evaluation will provide information on what programs are, or are not, achieving so that determinations can be made whether to continue, modify, or end programs that are not meeting their intended goals. This would allow resources

to be better spent to meet the needs of military families. In addition, more information is needed as to why specific services are underutilized to allow for further development and appropriate implementation of programs to effectively target the needs of military families.

Conclusion

Overall, programming to address reintegration issues needs to be systemic, ongoing, and accessible. Military family members and the family unit as a whole, that have the opportunities to learn and grow from their deployment experiences, renegotiate family dynamics, and affirm relationship bonding will cope better with reintegration stressors. Programming can help support these needs by providing education, skill building, and services throughout the deployment cycle and within an environment that is comfortable, supportive, and at times simply diversionary. Most importantly military programs need to encourage a sense of connection and pride for the service and sacrifices military families make for their country. While this does may not reduce reintegration stressors, per se, this serves to create larger meaning and satisfaction with their military affiliation and with formal military supports. All of the above recommendations are suggested with a sense of urgency as we continue to face unrest in the Middle East and uncertainty in the United States role in addressing these issues with military action. While service members and their families are highly resilient in the face of adversity, they are not limitless. It is imperative that strategically planned infrastructures to support military families are developed that are tied to key military family needs. Lastly, we need to know that the programs and services we provide for our military families are achieving the outcomes these families need. This can only be accomplished through evaluation so that necessary adaptations can be made.

References

- Aducci, C. J., Baptist, J. A., Jayashree, G., Barros, P., & Goff, B. (2011). The recipe for being a good military wife: How military wives managed OIF/OEF deployment. *Journal of Feminist Family Therapy, 23*, 231-249.
- Adler, A. B., Zamorski, M., & Britt, T. W. (2011). The psychology of transition: Adapting to home after deployment. In Adler, A. B., Bliese, P. D., & Castro, C. A. (Eds.), *Deployment psychology*. Washington, DC: American Psychological Association.
- Allen, E. S., Rhoades, G. K., Stanley, S. M., & Markman, H. J. (2011). On the home front: Stress for recently deployed army couples. *Family Process, 50*, 235-247.
- Amen, D., Jellen, L., Merves, E., & Lee, R. (1988). Minimizing the impact of deployment separation on military children: Stages, current preventive efforts, and system recommendations. *Military Medicine, 153*, 441-446.
- Anderson, J., Johnson, M., Goff, B., Cline, L., & Gurss, S. (2011). Factors that differentiate distressed and nondistressed marriages in army soldiers. *Marriage & Family Review, 47*, 459-473.
- Association, A. P. (2007). The psychological needs of U.S. Military service members and their families: A preliminary report.
- Barnes, H., & Olson, D. H. (1982). Parent-adolescent communication. In D. H. Olson, H. I. McCubbin, H. Barnes, A. Larsen, M. Muxen, & M. Wilson (Eds.), *Family inventories* (pp. 33-46). St. Paul, MN: Family Social Science, University of Minnesota.
- Berwick, D. M., Murphy, J. M., Goldman, P. A., Ware, J. E., Barsky, A. J., & Weinstein, M. C. (1991). Performance of a five-item mental health screening test. *Medical Care, 29*, 169-176.

- Booth, B., Segal, M., Bell, D. (2007). *What we know about army families: 2007 update*. Fairfax, VA: ICF International.
- Boss, P. (2002). *Family stress management: A contextual approach*. Thousand Oaks, CA: Sage Publications
- Blais, A. R., Thompson, M. M., & McCreary, D. R. (2009). The development and validation of the army post-deployment reintegration scale. *Military Psychology, 21*, 365-386.
- Bowling, U. B., & Sherman, M. D. (2008). Welcoming them home: Supporting service members and their families in navigating the tasks of reintegration. *Professional Psychology: Research and Practice, National child traumatic stress network, 39*, 451-458.
- Card, N. A., Bosch, L., Casper, D. M., Wiggs, C. B., Hawkins, S. A., Schlomer, G. L., & Borden, L.M. (2011). A meta-analytic review of internalizing, externalizing, and academic adjustment among children of deployed military service members. *Journal of Family Psychology, 2*, 508-520.
- Carter, S., Loew, B., Allen, E., Stanley, S., Rhoades, G., & Markman, H. (2011). Relationships between soldiers' PTSD symptoms and spousal communication during deployment. *Journal of Trauma Stress, 24*, 352-355.
- Chandra, A., Lara-Cinisomo, Burns, R., & Griffin, B. (2012). *Assessing Operation Purpose: A program evaluation of summer camps for military youth*. Santa Monica, CA: RAND Corporation. Retrieved from <http://www.dtic.mil/cgi-bin/GetTRDoc?AD=ADA564273>
- Chandra, A., Lara-Cinisomo, S., Jaycox, L. H., Tanielian, T., Burns, R., Ruder, T., & Han, B. (2010). Children on the homefront: The Experience of children from military families. *Pediatrics, 125*(1), 16-25.

- Chandra, A., Lara-Cinisomo, S., Jaycox, L. H., Tanielian, T., Han, B., Burns, R. M., & Ruder, T. (2011). *Views from the homefront: The experiences of youth and spouses from military families*. Santa Monica, CA: RAND Corporation.
- Chandra, A., Martin, L.T., Hawkins, S.A. & Richardson, A. (2010). The impact of parental deployment on child social and emotional functioning: Perspectives of school staff. *Journal of Adolescent Health, 46*, 218-223.
- Chapin, M. (2011). Family resilience and the fortunes of war. *Social Work in Health Care, 50*, 527-542.
- Cozza, S. J. (2011). Meeting the wartime needs of military children and adolescents. In Ruzek, J., Schnurr, P., Vasterling, J. & Friedman, M. (Eds.) *Caring for veterans with deployment-related stress disorders* (pp. 171-190). Washington, DC.: American Psychological Association.
- Cozza, S. J., & Lieberman, A. F. (2007). The young military child: Our modern Telemachus. *Zero to Three Journal, 27*(6), 27-33.
- De Pedro, K., Astor, R.A., Benbenishty, R, Estrada, J.N., Smith, G.A., & Esqueda, M.C. (2011). The children of military service members: Challenges, resources, and future educational research. *Review of Educational Research, 81*, 566-618.
- Doyle, M. E., & Peterson, K. A. (2005). Re-entry and reintegration: Returning home after combat. *Psychiatry Quarterly, 76*, 361-370.
- Epstein, N. B., Baldwin, L. M., & Bishop, D. S. (1983). The McMaster family assessment device. *Journal of Marital and Family Therapy, 9*, 171-180.
- Evans, L., Cowlshaw, S., & Hopwood, M. (2009). Family functioning predicts outcomes for veterans in treatment for chronic posttraumatic stress disorder. *Journal of Family*

- Psychology*, 23, 531-539.
- Flake, E., Davis, B., Johnson, P. & Middleton, L. (2009). *Journal of Developmental & Behavioral Pediatrics*, 30, 271-278.
- Gorbaty, L. R. (2009). *Family reintegration of reserve service members following a wartime deployment: A qualitative exploration of wives' experience*. (Doctoral dissertation). Retrieved from ProQuest Dissertations and Theses.
- Gorbaty, L. R. (2009). *Family reintegration of reserve service members following a wartime deployment: A qualitative exploration of wives' experience*. (Doctoral dissertation). Retrieved from ProQuest Dissertations and Theses.
- Hoemans, N., Garssen, A., Westert, G., & Verhaak, P. (2004). Measuring mental health of the Dutch population: a comparison of the GHQ-12 and the MHI-5. *Health and Quality of Life Outcomes*, 2, 23-29.
- Houston, J., Pfefferbaum, B., Sherman, M., Melson, A., Jeon-Slaughter, H, Brand, M., & Jarman, Y. (2009). Children of deployed National Guard troops: Perception of parental deployment to Operation Iraqi Freedom. *Psychiatric Annals*, 39, 805-811.
- Mmari, K., Roche, K., Sudhinaraset, M., & Blum, R. (2009). When a parent goes off to war: exploring the issues faced by adolescents and their families. *Youth & Society*, 45, 455-475.
- James, D. E., Schumm, W. R., Kennedy, C. E., Grigsby, C. C., Sheckman, K. L., & Nichols, C. W. (1985). Characteristics of the Kansas parental satisfaction scale among two samples of married parents. *Psychological Reports*, 57, 163-169.
- Karakurt, G., Christiansen, A., McDermid Wadsworth, S., & Weiss, H. (2013). Romantic relationships following wartime deployment. *Journal of Family Issues*.

- Kelly, M., Dunstan, F., Lloyd, K., & Fone, D. (2008) Evaluating cutpoints for the MHI-5 and MCS using the GHQ-12: a comparison of five different methods. *BMC Psychiatry*, 8.
- Lapp, C. A., Taft, L.B., Tollefson, T., Hoepner, A., Moore, K., & Divyak, K. (2010). Stress and coping on the home front: Guard and reserve spouses searching for a new normal. *Journal of Family Nursing*, 16, 45-67.
- Lester, P., Peterson, K., Reeves, J., Knauss, L., Glover, D., Mogil, C., Duan, N., Saltzman, W., Pynoos, R., Wilt, K., & Beardslee, W. (2010). The long war and parental combat deployment effects on military children and at-home spouses. *Journal of the American Academy of Child & Adolescent Psychiatry*, 49, 310-320.
- Lester, P. (2012). War and military children and families: Translating prevention science into practice. *Journal of the American Academy of Child & Adolescent Psychiatry*, 51, 3-5.
- Lester, P., Saltzman, W. R., Woodward, K., Glover, D., Leskin, G. A., Bursch, B. Beardslee, W. (2012). Evaluation of a family-centered prevention intervention for military children and families facing wartime deployments. *American Journal of Public Health*, 102, 48-54.
- Lincoln, A., Swift, E., & Shorteno-Fraser, M. (2008). Psychological adjustment and treatment of children and families with parents deployed in military combat. *Journal of Clinical Psychology*, 64, 984-992.
- MacLean, A., & Elder Jr, G. H. (2007). Military service in the life course. *Sociology*, 33, 175-196.
- Maholmes, V. (2012). Adjustment of children and youth in military families: Toward developmental understandings. *Child Development Perspectives*, 6, 5430-435.
- MacDermid Wadsworth, S. M. (2010), Family Risk and Resilience in the Context of War and

- Terrorism. *Journal of Marriage and Family*, 72: 537–556. doi: 10.1111/j.1741-3737.2010.00717.x
- Milliken, C.S., Auchterlonie J.L., & Hoge, C.W. (2007). Longitudinal Assessment of Mental Health Problems Among Active and Reserve Component Soldiers Returning From the Iraq War. *Journal of the American Medical Association*, 298(18):2141-2148.
- Monson, C. M., Taft, C. T., & Fredman, S. J. (2009). Military-related PTSD and intimate relationships: From description to theory driven research and intervention development. *Clinical Psychology Review*, 29, 707–714.
- National Military Family Association. (2005). Report on the cycles of deployment. Alexandria, VA: NMFA. Retrieved from <http://www.militaryfamily.org/assets/pdf/NMFACyclesofDeployment9.pdf>
- Office of the Deputy Under Secretary of Defense (2010). Profile of the military community: DoD 2010 demographics. Retrieved from <http://www.militaryhomefront.dod.mil>
- Office of the Deputy Under Secretary of Defense for Military Community and Family Policy. (2009). Final report from the national leadership summit on military families. Retrieved from <http://prhome.defense.gov/RFM/MCFP/Reports.aspx>
- Olson, D. H. & Gorall, D. M. (2003). Circumplex model of marital and family systems. In F. Walsh (Ed.) *Normal Family Processes* (pp. 514-547). New York, NY: Guilford.
- Olson, D. H. (1995). *Family Satisfaction Scale*. Minneapolis, MN: Life Innovations.
- Palmer, C. (2008). A Theory of risk and resilience factors in military families. *Military Psychology*, 20, 205-217.
- Paris, R., DeVoe, E. R., Ross, A.M., & Acker, M. (2010). When a parent goes to war: Effects of parental deployment on very young children and implications for intervention. *American*

- Journal of Orthopsychiatry*, 80(4), 610-618.
- Peebles-Kleiger, M. J., & Kleiger, J. H. (1994). Re-integration stress for desert storm families: Wartime deployments and family trauma. *Journal of Traumatic Stress*, 7, 173-194.
- Pincus, S. H., House, R., Christenson, J., & Adler, L. E. (2001). The emotional cycle of deployment: A military family perspective. *U.S. Army Medical Department Journal*, 2, 21-29.
- Rand Corporation. (2009). Family readiness and coping during deployments. Key issues for National Guard and Reserve. *Rand Corporation*. Retrieved from <http://www.rand.org/news/press/2009/02/11.html>
- Saltzman, W. R., Lester, P., Beardslee, W. R., Layne, C. M., Woodward, K., & Nash, W. P. (2011). Mechanisms of risk and resilience in military families: Theoretical and empirical basis of a family-focused resilience enhancement program. *Clinical Child and Family Psychology Review*, 14, 213-230.
- Sayers, S. L., Farrow, V. A., Ross, J., Oslin, D. (2009). Family problems among recently returned military veterans referred for a mental health evaluation. *Journal of Clinical Psychiatry*, 70, 163-170.
- Schumm, W. R., & Hall, J. (1994). Kansas parental satisfaction scale (KPS). In J. Fischer & K. Corcoran (Eds.), *Measures for clinical practice: A sourcebook* (pp. 345-346). New York, NY: The Free Press.
- Seal, K. H., Metzler, T. J., Gima, K. S., Bertenthal, D., Maguen, S., & Marmar, C. R. (2009). Trends and risk factors for mental health diagnoses among Iraq and Afghanistan veterans using department of veterans affairs health care, 2002-2008. *American Journal of Public Health*, 99, 1651-1658.

- Spera, C. (2009). Spouses' ability to cope with deployment and adjust to Air Force family demands identification of risk and protective factors. *Armed Forces & Society*, 35, 286-306.
- Stiffman, A. R., Orme, J., Evans, D., Feldman, R., & Keeney, P. (1984). A brief measure of children's behavior problems: The Behavior Rating Index for Children. *Measurement and Evaluation in Counseling and Development*, 17(2), 83-90.
- Weins, T. W. & Boss, P. (2006). Maintaining family resiliency before, during and after military separation. In Castro, C.A., Adler, A.B. & Britt, C.A. (Eds), *Military Life: The psychology of serving in peace and combat [Four Volumes]*. Bridgeport, CT: Praeger Security International.
- Westphal, R. J., & Woodward, K. R. (2010). Family fitness. *Military Medicine*, 175, 97-102.
- Wilson, S. R., Wilkum, K., Chernichky, S. M., MacDermid Wadsworth, S. M., & Broniarczyk, K. M. (2011). Passport toward success: Description and evaluation of a program designed to help children and families reconnect after a military deployment. *Journal of Applied Communication Research*, 39, 223-249.
- White, C. J., de, B., H. Thomas, Fear, N. T., & Iversen, A. C. (2011). The impact of deployment to Iraq or Afghanistan on military children: A review of the literature. *International Review of Psychiatry*, 23, 210-21

Appendix A: Survey Participants by State

State	Service Members		Spouse/Partners		Adolescents	
	n	%	n	%	n	%
1. Alabama	19	4	11	3	2	2
2. Alaska	4	1	7	2	0	0
3. Arizona	11	3	3	1	28	21
4. Arkansas	0	0	9	2	1	1
5. Colorado	0	0	2	1	0	0
6. Connecticut	2	1	1	<1	6	4
7. Delaware	0	0	2	1	0	0
8. Georgia	19	4	17	5	29	21
9. Hawaii	1	<1	9	2	2	2
10. Illinois	53	12	32	9	0	0
11. Iowa	6	1	5	1	0	0
12. Kansas	37	8	22	6	5	4
13. Kentucky	0	0	1	<1	0	0
14. Louisiana	10	2	9	2	0	0
15. Maine	1	<1	1	<1	0	0
16. Massachusetts	21	5	22	6	1	1
17. Michigan	3	1	3	1	3	2
18. Mississippi	1	<1	0	0	0	0
19. Montana	1	<1	2	1	8	6
20. Nevada	54	12	22	6	6	4
21. New Jersey	2	1	2	1	0	0
22. New Mexico	0	0	1	<1	3	2
23. New York	0	0	4	1	3	2
24. North Carolina	7	2	4	1	3	2
25. North Dakota	31	7	31	8	2	2
26. Ohio	15	3	11	3	5	4
27. Oklahoma	4	1	3	1	0	0
28. Oregon	8	2	9	2	0	0
29. Pennsylvania	1	<1	1	<1	0	0
30. Rhode Island	3	1	4	1	2	2
31. South Carolina	0	0	0	0	7	5
32. Tennessee	6	1	28	8	8	6
33. Texas	12	3	17	5	7	5
34. Utah	39	9	46	12	3	2
35. Vermont	5	1	3	1	2	2

State	Service Members		Spouse/Partners		Adolescents	
	n	%	n	%	n	%
36. Virginia	0	0	8	2	0	0
37. Washington	60	14	14	4	0	0
38. Wisconsin	2	1	0	0	0	0
39. Wyoming	2	1	3	1	0	0
Unknown	0	0	1	<1	0	0
Total	440	100	370	100	136	100

Appendix B: Adult/Family Programs

1. Yellow Ribbon Programs

- Yellow Ribbon During Deployment
- Yellow Ribbon Post-Deployment 30 days
- Yellow Ribbon Post-Deployment 60 days
- Yellow Ribbon Post-Deployment 90 days

2. Family Camps

3. Military Support/Resources

- Army One Source
- Employer Support of Guard & Reserve
- Personal Financial Counselor
- Resilience Training (formerly Battlemind)
- Unit Family Readiness Group

4. Intervention Services

- Chaplains
- Families Overcoming Under Stress
- Family Assistance Center
- Military & Family Life Consultant
- Strategic Outreach to Families of all Reservists
- Strong Bonds

Appendix C: Adolescents Programs

1. Military Life Skill Building/Support

- Experience OMK
- National Guard Kids at Events
- National Guard Adolescents Resilience Academy/Training
- Operation: Military Kids Boots Off
- Operation: Military Kids Boots On

2. Academic Support

- SchoolQuest
- Student Online Achievement Resources
- Student to Student
- Tutor.com

3. Leadership

- Army Reserve Teen Panel
- Army Teen Panel
- National Guard Adolescents Council/Teen Panel
- National Guard Adolescents Leadership Symposiums
- Operation: Military Kids Speak Out for Military Kids
- Adolescents Leadership Education and Development Camps

4. Camps

- Army Reserve Enrichment Camps
- National Guard Leadership Camps
- School Break Camps
- Weekend Camps

5. General Skill Building

- Babysitting Training
- Backpack Journalist Workshops