



PennState

CLEARINGHOUSE
FOR MILITARY FAMILY READINESS



The Mental Health Challenges of Military-Connected Children (and How the Adults in Their Lives Can Help)

April 3, 2023

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The Thrive Initiative



Thrive Initiative Program Areas			
Universal Parenting Programs			
Take Root	Sprout	Grow	Branch Out
Infants (0 to 6 months)	Preschool (3 to 5 years)	Grades K-5 (5 to 10 years)	Grades 6-12 (10 to 18 years)
Infants (6 to 12 months)			
Infants and Toddlers (1 to 3 years)			
Parenting Programs for High-Needs Populations			
Take Root Home Visitation		Grow Safe and Secure	
Infants and Toddlers (0 to 3 years)		Grades K-5 (5 to 10 years)	

Clearinghouse for Military Family Readiness at Penn State University

<https://militaryfamilies.psu.edu>



A screenshot of the Clearinghouse for Military Family Readiness website. The header features the Penn State logo and the text "A Penn State Applied Research Center". Below the header is a navigation bar with links: Home, About, Services, Programs, Projects, Resources, and Contact Us. The main content area has a large banner image of a smiling soldier and a child. Overlaid on the banner is a text box with the title "Sound Science, Strong Families, Stronger Service" and a description of the Clearinghouse's mission. Below the banner is a grid of six service areas, each with an icon and a "Learn More" link: Applied Research, Program Selection, Program Evaluation, Program Implementation, Instructional Design, and Curriculum Development. At the bottom, there is a section titled "Clearinghouse for Military Family Readiness at Penn State" with a brief description of the center and a "Live Chat" button.



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Today's Presenter



Celina Grassmyer, Ph.D.

A close-up, slightly blurred image of the American flag, showing the stars and stripes in the upper left corner of the slide.

Learning Objectives

At the end of this presentation, the learner will be able to:

1. Describe characteristics of military-connected (MC) families and children.
2. List some of the unique challenges that MC children face.
3. Recognize signs that a child may be struggling with mental health or emotional and behavioral problems.
4. Identify resources to support MC children experiencing mental health or behavioral problems, both specific for MC children and for any child.

Overview

1. Getting to know MC families
2. Unique strengths of and challenges facing MC children
3. Signs that a child is struggling
4. What adults can do to help



Getting to Know Military- Connected Families

MC Children are Everywhere

- In the US, there are approximately 900,000 school-age children with a military-connected parent (DoD, 2022)
 - Vast majority of these children attend public schools (DODEA, 2015)
 - 70% of MC families do not live on base (Clever & Segal, 2013)
- Thus, awareness of military culture, strengths, and challenges is important for all providers and school personnel



2021

Demographics

PROFILE OF THE MILITARY COMMUNITY



Department of Defense.
(2022). 2021 Demographics:
Profile of the Military
Community
<https://download.militaryonesource.mil/12038/MOS/Reports/2021-demographics-report.pdf>

MC Families are Many

- Of 2.3 million Active Duty (1.3 mil) or Selected Reserve (1.0 mil) personnel, 37.1% have at least one child (DoD, 2022)
 - 472,410 (35.4%) of Active Duty members
 - 321,480 (40.2%) of Selected Reserve members



Example of a Typical MC Family



- Father is enlisted in the army, mother is civilian
- Parents were in their mid-20s when they had their first child
- Family has 2 children, likely school aged or younger

(DoD, 2022)

MC Parents Likely to Be Young, Male, and Married

- MC parents marry and have children younger than civilian counterparts (Huebner et al, 2019)
- 82-86% of military parents are male

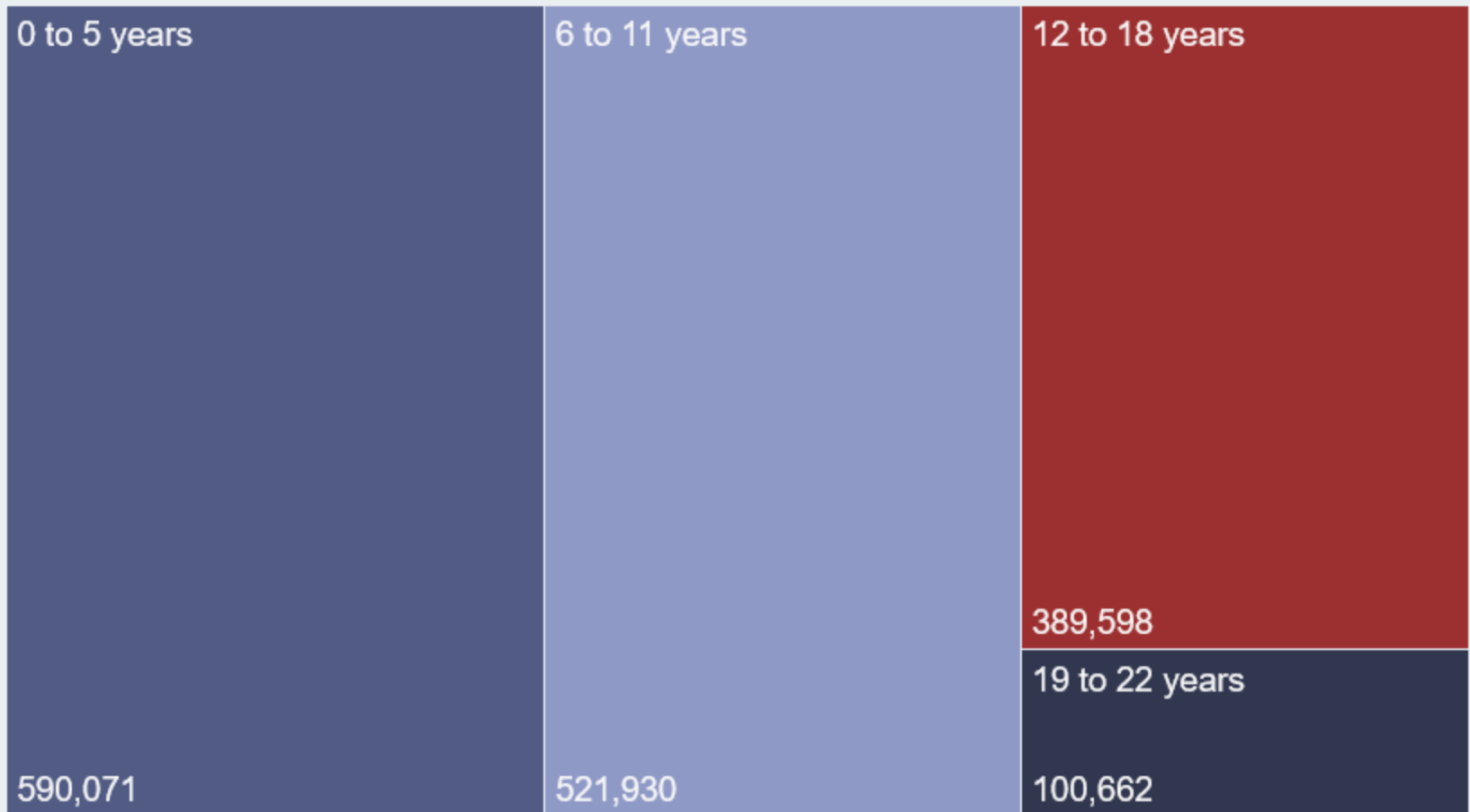
Marital Status of MC Parents



(DoD, 2022)

MC Children are Likely to Be Young

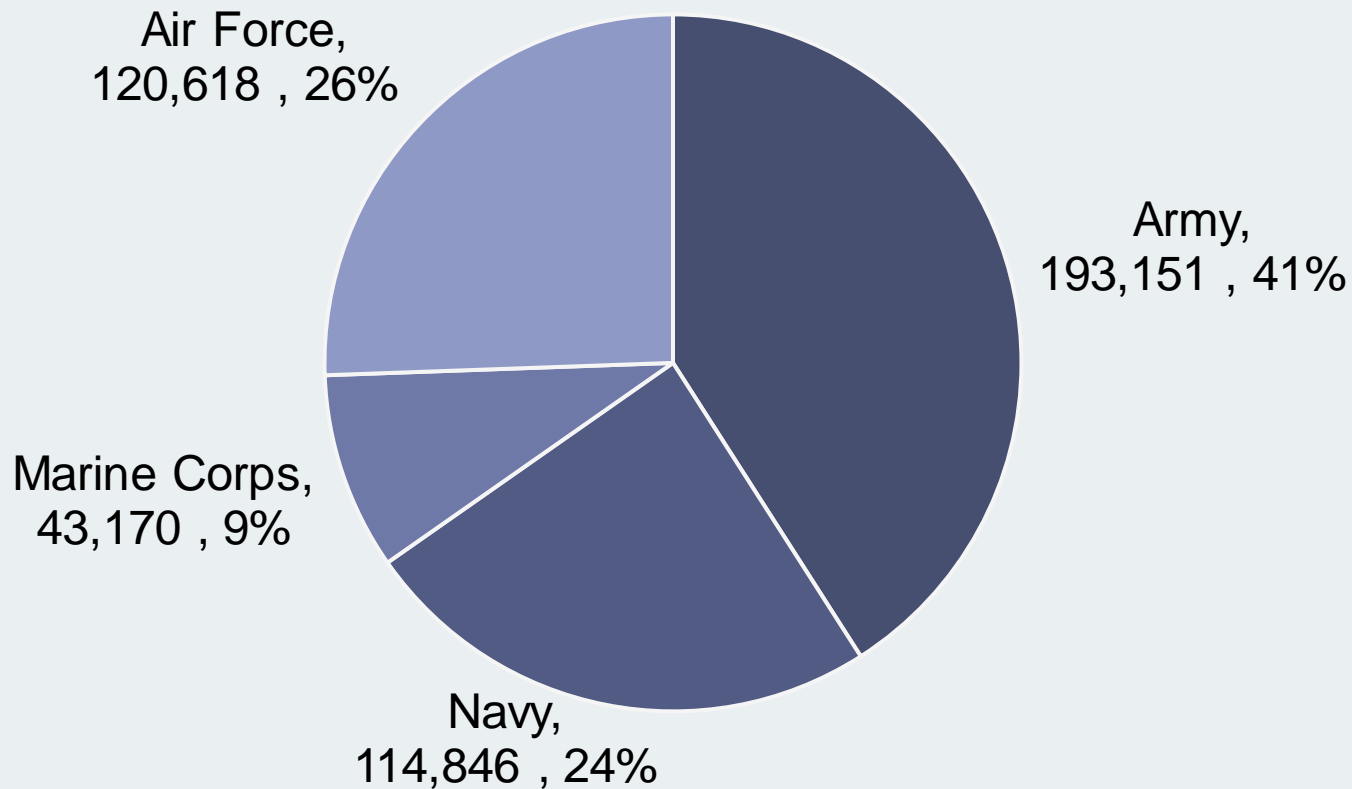
Age of DoD Force Children (N=1,602,261)



(DoD, 2022)

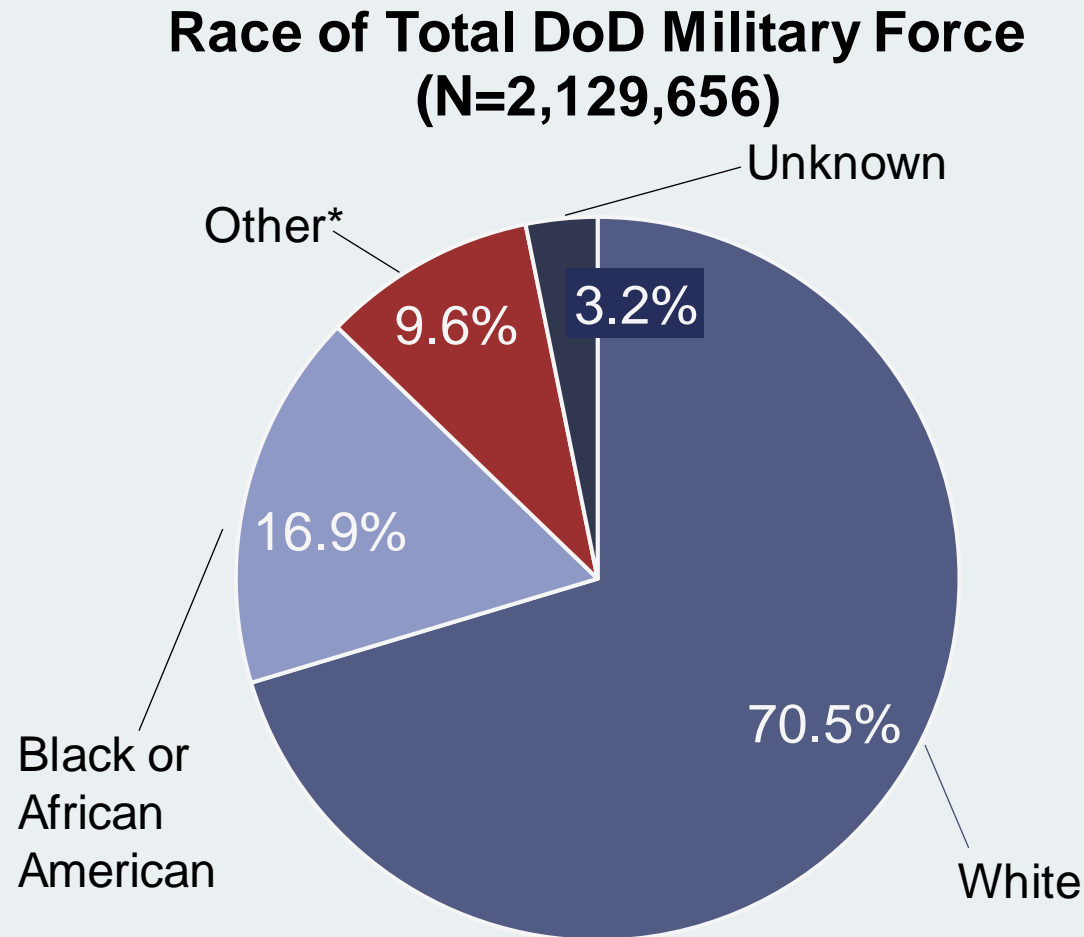
MC Families Are in Every Service Branch

Distribution of Active Duty Parents by Service Branch



(DoD, 2022)

Military Personnel are Racially Diverse

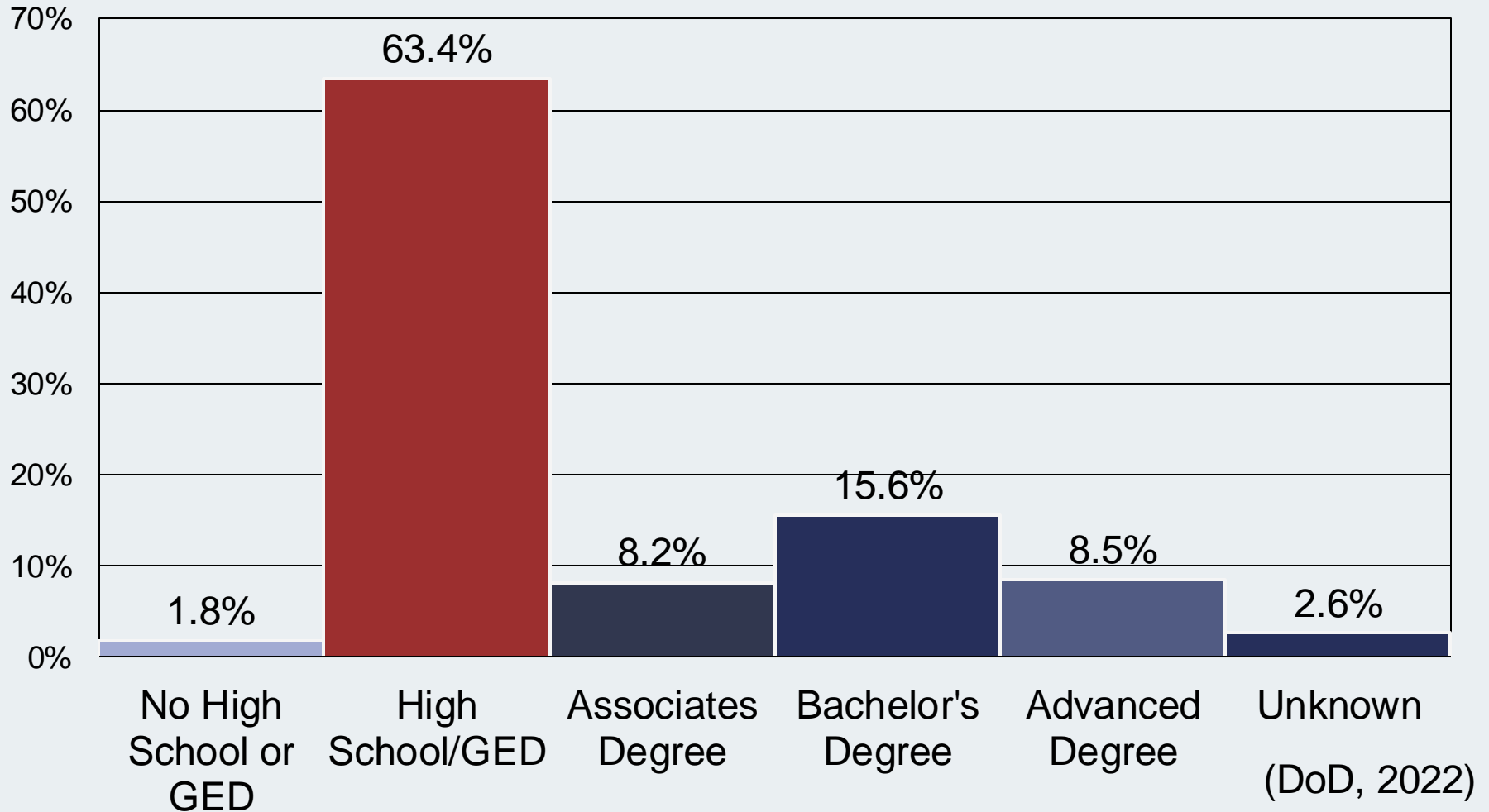


* = American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, Multi-Racial (the Army and Army Reserve do not report “multi-racial”)

(DoD, 2022)¹⁵

Military Personnel are Diverse

Education Level of Military Personnel (N=2,129,656)



MC Families are Different From Civilian Counterparts

- Military personnel are more likely than their civilian counterparts to:
 - Marry and have children younger (Huebner et al, 2019)
 - Move frequently (Huebner et al, 2019)
 - Experience multiple simultaneous stressors (Huebner et al, 2019)
 - Have a spouse who is under- or unemployed (Meadows et al, 2015; DoD, 2022)
 - Homeschool their children (Blue Star Families, 2019)

Unique strengths of and challenges facing MC children

Distinctive Military Culture

- Strong values (Redmond et al, 2015)
 - Discipline
 - Self-sacrifice
 - Cohesiveness
 - Tradition
- Camaraderie and sense of identity (Huebner et al, 2019)
 - “When one serves, we all serve” (Rossiter et al, 2015)
- Culture reported as protective against accumulating stressors (Rossiter et al, 2015)

Military Culture as Source of Strength

- In general, MC children thrive (Easterbrooks et al, 2013)
- Lower rates of mental health problems reported (Hinojosa et al, 2022)
 - Lower rates of drop out from treatment (Crockett et al, 2020)
- More support available (Bullock et al, 2022; Huebner et al, 2019)
 - Social support between MC families
 - Military-sponsored resources available



Challenges Inherent to MC Life



- Frequent moves/relocation
- Parental deployment
- Parental injury

Challenges Inherent to MC Life



- Frequent moves/relocation
- Parental deployment
- Parental injury

Frequent Moves are Common

- MC families move 2.4x more often than civilian counterparts (Nelson et al, 2016)
 - Relocate every 2-4 years
 - Typical to have attended 6-9 different schools by graduation (Rossiter et al, 2015)



Frequent Moves are Stressful

- Cause socioeconomic stress on families (Cozza et al, 2014)
- Interrupt continuity of health care and education (Huebner et al, 2019)
- Pose social challenges for children (Huebner et al, 2019)

Recent Move Linked to Distress

- Having moved in past year linked to greater risk of
 - Poor adolescent adjustment (Perreault et al, 2020)
 - ER visits, psychiatric hospitalization (Millegan et al, 2014)
- Recency of move a better predictor than frequency (Perreault et al, 2020)
- High levels of parental stress may explain link (Perreault et al, 2020)



Challenges Inherent to MC Life

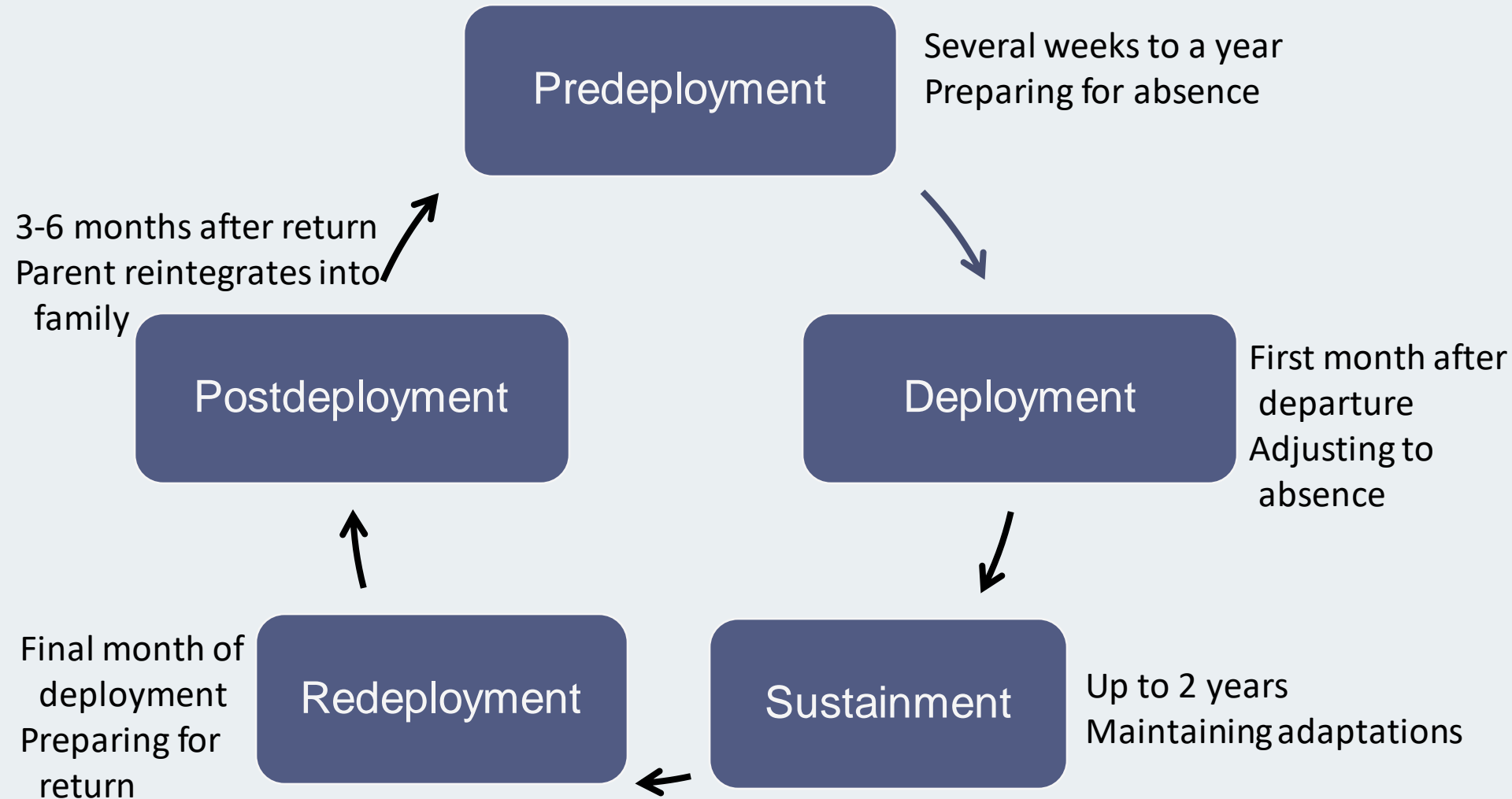


- Frequent moves/relocation
- **Parental deployment**
- Parental injury

Deployment Causes Disruption

- Parental deployment may require child to:
 - Move geographically (Huebner et al, 2019)
 - Adjust to new routine (Pincus et al, 2001)
 - Experience remaining parent's increased stress (Pincus et al, 2001)
 - Take on more responsibility (Huebner et al, 2019)
 - Worry about parent safety (Padden & Agazio, 2013)
- Risk for experiencing maltreatment increases during and after parent deployment (Saltzman et al, 2011)

Deployment Cycle (Pincus et al, 2001)



Deployment Linked to Greater Distress

- Predeployment
 - Chronic fear or worry about potential deployment (Bullock et al, 2022)
- During deployment
 - Increases in emotional and behavioral problems, including anxiety, depression, disruptive behavior, ADHD, and peer problems (Aranda et al, 2011; Gorman et al, 2010; Mustillo et al, 2015)
 - Caused or exacerbated by parental mental health problems or stress (Huebner et al, 2019)
 - Risk of child maltreatment higher while spouse is deployed (Creech et al, 2014)



Deployment Linked to Greater Distress

- Postdeployment
 - 3 of 4 families report first 3 months after return most stressful part of deployment (Pincus et al, 2001)
 - Emotional and behavioral problems linger, especially if deployment was 11+ months (Chandra & London, 2013)
 - Difficulty adjusting may be related to parental injury (Creech et al, 2014)



Challenges Inherent to MC Life



- Frequent moves/relocation
- Parental deployment
- **Parental injury**

Parental Injury Disrupts Quality Care

- Risk for child mental health problems increased following parental injury (e.g., TBI, PTSD; Hisle-Gorman et al, 2019)
 - Injury doubled (x2) the risk of adolescent suicidal ideation, mood and anxiety disorders (Hisle-Gorman & Susi, 2021)
 - Risk quadrupled (x4) for alcohol and substance abuse disorders (Hisle-Gorman & Susi, 2021)



Parental Injury Disrupts Quality Care

- MC parents more likely to experience injuries than civilians, particularly PTSD and/or TBI (Hisle-Gorman et al, 2019)
 - Risks to child heightened following injury regardless of military connected status
- Injury may hurt parental functioning, increase family stress (Hisle-Gorman et al, 2019)



Signs That A Child Is Struggling

Expect A Child To Struggle

“It is **reasonable** to assume that a sudden negative change in a child’s behavior or mood is a **predictable** response [to a significant stressor].”

Pincus et al, 2001

Common Reactions to Significant Change

Young children (1-6 years old)

- Behavior is impacted more by primary caregiver's response to the change than the change itself (Aisenberg, 2001)
- May exhibit stronger emotional reactions (Mongillo et al, 2009)
 - Crying more often, extra clingy
 - Develop new fears; frequent nightmares; acting out fears in play or drawings
- Complain of increased stomachaches or headaches (Mongillo et al, 2009)
- Regress to earlier stages of development (e.g., bed wetting, thumb sucking; Mongillo et al, 2009)

Common Reactions to Significant Change

School-aged children (6-12 years old)

- Difficulty regulating emotions (NCTSN, 2008b)
- Trouble at school – decreased academic performance, withdrawal from peers, school refusal (Schwartz & Proctor, 2000; Cooney et al, 2011)
- Ask questions about death, dying, or other difficult subjects related to change (NCTSN, 2008b)
- Complain of increased stomach aches or headaches (NCTSN, 2008b)
- Regressed behavior (NCTSN, 2008b)

Common Reactions to Significant Change

Adolescents (13-18 years old)

- Increased anxiety about safety of self and others (NCTSN, 2008c)
- Withdrawal from social activities (NCTSN, 2008c)
- Increased irritability (Lansford et al, 2002)
- Angry outbursts and aggression (Lansford et al, 2002)
- Decrease in academic achievement (NCTSN, 2008c)
- Increase in rule-breaking: skipping school, taking risks, substance use or abuse (NCTSN, 2008c; Lansford et al, 2002)
- Feeling overwhelmed; brief thoughts of death or suicide (NCTSN, 2008c)

Expect A Child To Struggle

“It is **reasonable** to assume that a sudden negative change in a child’s behavior or mood is a **predictable** response [to a significant stressor].”

Pincus et al, 2001

So how do we know to intervene?

Signs Additional Help is Needed

The 3 D's:

- Duration
- Distress
- Dysfunction



Signs Additional Help is Needed

- Duration (Ollendick & Vasey, 1999)
 - Unwanted changes are persistent – more than a few weeks



Signs Additional Help is Needed

- Distress (Goodman et al, 2000)
 - Emotions or behaviors are upsetting to the child or their family



Signs Additional Help is Needed

- Dysfunction (Goodman et al, 2000)
 - Changes in behavior interfere with ability to meet developmentally appropriate expectations (e.g., at school, at home, with friends)



Signs Additional Help is Needed



The 3 D's:

- Duration
 - Distress
 - Dysfunction
-
- Above and beyond what's normative developmental changes (Rathus & Miller, 2014)
 - intensity, frequency, and/or duration

What Adults Can Do to Help

Parents Provide Support by Being Warm

- Provide extra attention and one-on-one time (Bullock et al, 2022)
- Be affectionate (especially with younger children; Pincus et al, 2001)
- Show additional patience (Pincus et al, 2001)



Parents Provide Support by Being Consistent

- Maintain routines and expectations (Huebner et al, 2019)
- Set limits (Pincus et al, 2001; Huebner et al, 2019)



Parents Support by Being Open

- Communication within families is protective against cumulative stressors (Creech et al, 2014; Flores & Barroso, 2017)
 - Address risky behaviors (e.g., drug use; Pincus et al, 2001)
 - Talk about family changes (Creech et al, 2014)



Parents Support by Being Open

- Recommendations for parent-child communication (Schaefer & DiGeronimo, 1999; Flores & Barroso, 2017)
 - Parents should initiate the conversation
 - Be explicit about concerns
 - Normalize behavior or problem
 - Avoid shame, which discourages child participation
 - Share own experience
 - Maintain a positive tone to encourage further discussion
 - Invite questions from child

Parents Support by Modeling Emotion Regulation Skills

- Stay calm (Black & Preble, 2016)
 - Modeling emotion regulation skills teaches these skills to children (Hajal & Paley, 2020)
 - Do what you need to do to stay calm (Black & Preble, 2016)



Parents Provide Support by Practicing Self-Care

- Practice self-care (Hajal & Paley, 2020)
 - Taking care of one's self physically and emotionally (Miller et al, 2019)
 - Sleep hygiene
 - Exercise
 - Engaging in pleasurable activity
 - Social support
 - Getting help
 - Planning
 - Acceptance
 - Lowering Expectations
 - Emotion regulation



Support from Civilian Providers

- Seek cultural competency (Creech et al, 2014; Huebner et al, 2019)
 - VA Community Provider Toolkit -
<https://www.mentalhealth.va.gov/communityproviders/index.asp>
 - Online courses through Center for Deployment Psychology -
<https://deploymentpsych.org/>



Support from Civilian Providers

- Perform routine screeners:
 - Identify military connected status during intake (Chandra & London, 2013)
 - Assess for ongoing distress and emotional/behavioral problems before, during, and after deployment (Creech et al, 2014; Huebner et al, 2010)
 - Screen for maltreatment, adolescent substance use (Creech et al, 2014)



Support from Civilian Providers

- Work with families to strengthen positive communication skills (Creech et al, 2014)
 - E.g. interventions: Project FOCUS; Strong Families, Strong Forces (Creech et al, 2014)



Community Based Resources

- Families OverComing Under Stress (FOCUS; Lester et al, 2012)
<https://focusproject.org/focus-world>
 - Promote resiliency among active duty MC families (parents and children, ages 3-17) who experienced a recent deployment
 - 8 sessions long, with parent-only, child-only, and family sessions
 - Positive outcomes found posttreatment and at 4-6 mo follow up (Lester et al, 2012; Lester et al, 2013)



Screenshot captured 3/16/2023 from <https://focusproject.org/focus-world>

Community Based Resources

- After Deployment: Adaptive Parenting Tools (ADAPT; Gewirtz et al, 2018)

<https://www.adaptparenting.org/>

- Improve parents' strategies and understanding to manage children's behavior in the face of deployment stress
- 14-week group intervention for Guard and Reserve families with at least one deployment and one child (ages 5-12)
- Significantly improved parenting skills 1 year after treatment compared to TAU (Gewirtz et al, 2018)



Screenshot captured 3/21/2023 from <https://www.adaptparenting.org/>

Community Based Resources

- Sesame Street for Military Families, including Sesame Workshop's Talk, Listen, Connect initiative (Cohen et al, 2014)
<https://sesamestreetformilitaryfamilies.org/>
 - Sesame Street characters model age-appropriate conversations and coping strategies for MC children
 - Media Kits available on 14 topics ranging from birthdays to grief



Screenshot captured 3/16/2023 from <https://sesamestreetformilitaryfamilies.org/>

DoD Resources

- Military OneSource

<https://www.militaryonesource.mil/education-employment/for-children-youth/>

- Database of information, resources, and confidential help for service members and military families



MILITARY
ONE SOURCE

Screenshot captured 3/16/2023 from
<https://www.militaryonesource.mil/education-employment/for-children-youth/>

DoD Resources

- Military Kids Connect

<https://militarykidsconnect.health.mil/>

- Provide age-appropriate information to children experience any of the challenges of military life
- Videos, activities, and links to more resources for parents

WELCOME TO MKC!



DoD Resources

- National Military Family Association's Operation Purple Camps
<https://www.militaryfamily.org/programs/operation-purple/operation-purple-camp/#>
 - Free week-long camp for military connected children
 - Camps range in age range from 6-17 years old



Your Questions

Q & A



New Online Mental Health Resource



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thrive About Programs Modules For Parents For Professionals Contact

Adolescent Mental Health: Parenting to Wellness

Good mental health is critical for adolescents to become happy and productive adults. This supplemental parent-education module offers support to parents and caregivers of adolescents who experience mental health challenges.

Now Available →

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thrive About Programs Modules For Parents For Professionals Contact

Supplemental Modules

The supplemental modules listed below identify specific topics that may be beneficial to meet your family goals. The intent of the supplemental modules is to build on information and strategies discussed in the four universal Thrive parenting programs – Take Root, Sprout, Grow, Branch Out. Therefore, by participating in the age-appropriate Thrive parenting program before engaging with any of the supplemental modules, you will reap the most benefits.

Browse the modules listed below, then tap the module button to begin when you are ready. Each module will take approximately 2 hours to complete.

<p>adolescent mental health Parenting to Wellness</p> <p>A supplemental parent-education module that is designed to offer support to parents and caregivers of adolescents who experience mental health challenges.</p> <p>Log In or Register</p>	<p>copingarenting Coordinated, Cooperative, United.</p> <p>A supplemental parent-education module designed to offer support to parents and caregivers as they coparent their children alongside other adults.</p> <p>Log In or Register</p>	<p>exceptional families Embracing Differences, Flourishing Together</p> <p>A supplemental parent-education module designed to offer support to parents and caregivers of children with a disability.</p> <p>Log In or Register</p>
<p>grandfamilies PROSPERING with 10- to 14-Year-Olds</p> <p>A supplemental parent-education module designed for grandparents who are full-time caregivers of children between the ages of 10 and 14 years old.</p> <p>Log In or Register</p>	<p>parental absence Parenting Through Family Separation</p> <p>A supplemental parent-education module that is designed to offer support to parents and caregivers who experience family separation.</p> <p>Log In or Register</p>	

<https://thrive.psu.edu>

No-Cost, Online Resources



Resourceful Parents. Resilient Children. Ready Families.

Programs for parents and caregivers to learn and practice effective strategies for raising healthy children.

[Learn More →](#)

Parenting Programs for Parents and Caregivers of Children 0-18 Years

The Thrive Initiative is a suite of evidence-informed parenting programs that are designed to empower parents and caregivers as they nurture children from birth until 18 years of age. The initiative includes a series of face-to-face and online parenting programs and a range of online resources and interactive learning modules to meet the families where they are.

The Thrive Initiative is divided into developmentally age-appropriate areas and consists of four universal parenting programs and two targeted parenting programs. The four universal Thrive Initiative programs are available in online format and immediate access to programming is granted to parents and caregivers. The universal face-to-face and targeted programs are delivered by professionals in an in-person format.

The programs are owned by the Federal Government, and the online universal programs are available at no cost to military and civilian families.

take root
ages 0-3 years

sprout
ages 3-5 years

grow
ages 5-10 years

branch out
ages 10-18 years

take root
home visitation

grow
safe and secure

Are you ready to Thrive?

[Register Today!](#)

Resources for Professionals

These resources are intended to provide support to professionals who work with children, youth, and families. Some of our resources require your email address before you can access the download link. We are collecting your information so that we may gauge which resources professionals are downloading for use and so we can continue to provide useful resources.

Professional Resources

- Professional Resources
- Likely Modules
- Feedback
- Training Modules

Digital Empowerment

[Download](#)

Professional Resource

[Download](#)

Branch Out (10-18 years)

Communicating with Adolescents and Teens

Setting Boundaries and Expectations

Parent Resources

Breathe to Thrive
Mindful Strategies for You and Your Child

[Download](#)

Cooking to Thrive
Healthy Eating and Recipes

[Download](#)

Moving to Thrive
Physical Activity and Playtime Guide

[Download](#)

Resources for Parents and Caregivers of Children 10-18 Years Old

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Protect Your Child from Online Predators and Grooming

Talking Tips to Protect Your Child from Online Predators and Grooming

Additional resources, skills, and strategies for parents are available at no cost through the online Thrive Initiative programming. Visit the Thrive website <https://thrive.psu.edu>, and sign up today!

How to Address and Change Self-Image Issues?

Changing the way we think and feel can be hard, but it can be done. Try using the following activity alone or as a family.

- List 10 things you love about yourself!
- List 5-10 skills you possess.
- List 5 achievements of which you are proud.
- List 3 occasions where you overcame adversity.
- List 5 people whom you have helped you.
- List 20 things you appreciate about your life.

The Importance of Positive Self-Image

Appreciation involves understanding how you have benefited from the good things that have happened to you in your life, realizing these things can make it easier for you to feel grateful and positive about yourself and your life.

How can the value of self-image be incorporated into your family life?

Create a Sense of Belonging to Your Family

This is an important feeling you can instill in your child to help them build a healthy self-image. To create this important sense of belonging, try using simple inclusive statements like, "We are the [family name] family". This helps even very young children understand that they have a safe place in their family.

Invite Values into Your Family

Make value declarations to reinforce the sense of family's most important values. These actions can boost your child's sense of self.

Turn your...

Discuss privacy and information safety.

Teach your child about privacy and what that means. Discuss the risks that come with sharing information, and consider your own safety.

<https://thrive.psu.edu>

Office Hours



**PennState**
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Open Office Hours

Learn how to tackle real-world problems and challenges through monthly collaborative learning sessions.

Examples of session topics include:



Learn how to start collecting data.



Discover how to find a training or program.



Evaluate whether a training or program is effective.



Request information on topics of your choice.

What topics or questions do you have that we can help with? **We want to know!**



Get real-time guidance and resources from researchers and implementation specialists at the Clearinghouse for Military Family Readiness at **no cost to you**.

Open to anyone supporting military families, attend one or all of these monthly 30- to -45 minute microlearning sessions over **Teams**.

Session 1:
Monday,
February 27th
at 1500

Session 2:
Monday,
March 27th
at 1500

Session 3:
Monday,
April 24th
at 1500

Sign up here: <https://militaryfamilies.psu.edu/open-office-hours/>

For More Information Contact Us at:

 clearinghouse@psu.edu  militaryfamilies.psu.edu  1-877-382-9185

<https://militaryfamilies.psu.edu/open-office-hours/>

Presentation Survey



**Share Your Feedback!
We Value Your Response!**



<https://bit.ly/3mO3jyq>

Evaluate Today's Presentation

Continuing Education Credits



**1
HOUR
OF
CEUS**

The Clearinghouse for Military Family Readiness at Penn State is approved by the American Psychological Association to sponsor one hour of continuing education for participation in today's training.

- Attendance has been tracked.
- Certificates of completion will be sent to those who indicated a desire to receive credits at registration.
- For more information, contact Kristi Brawley: kkb18@psu.edu.

One Hour of Credit



Resiliency: Building a Snow Fence



May 10, 2023, at 12 pm EST
Daniel Perkins, Ph.D.

<https://bit.ly/3le0PZH>

Presentation Three



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Thank You



Contact Us



thrive.psu.edu



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1.814.865.7412

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