

A review of coping strategies, parenting programmes and psychological therapies available to military parents with children under 5

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Kritikos and DeVoe in this issue have explained the challenges facing both at home and serving parents across the deployment cycle. This article presents what is currently known about the coping strategies used by parents to support their young children and maintain a positive family environment, and the educational and clinical interventions available to them. It aims to help early years' professionals understand better what the needs of military families with young children are and how to support them.

Keywords: military families, pre-school children, parenting, deployment cycle, coping strategies

The young child's emotional, social and cognitive development is shaped by the relationship-based environment into which s/he is born. 'As a source of risk, the home may reflect an atmosphere of disorganization.....As a source of resilience and growth-promotion, it is characterized by regularized routines and both a physical and a psychological milieu that supports healthy child-caregiver interactions' (Shonkoff & Phillips, 2000:345). Military families in which either one or both parents are serving in the armed forces encounter several obstacles to providing a secure milieu for their young children, challenges that are not usually experienced by civilian families. As a consequence, the children's development may be negatively affected during these critical years when cognitive, social and psychological development are at a critical stage (Centre on the Developing Child: <https://developingchild.harvard.edu/science/key-concepts/>). The frequent relocations which military families experience make it difficult for caregiving parents to maintain a network to which they can turn for support and advice about their parenting. Lack of support, in turn, may result in mental distress which impacts on their relationship with their young (and older) children. In addition, anxiety about the safety of the serving parent may distract them from building and maintaining a secure attachment with their child.

To date, the vast majority of the research into the impact on children of growing up in a military family has been carried out in the United States. In the wake of the major deployments in Iraq and Afghanistan, there has been a strong impetus to research the impact of parental military service on the

emotional needs of military children, and to enhance service provision for them.

In the UK, there is a remarkable paucity of research into young military children. The Royal Navy Children's fund (2009) described children as the 'invisible casualties of conflict' and noted that the exact number of children growing up in military families is unknown. While the UK Armed Forces Covenant 'is a promise from the nation that those who serve or have served, and their families, are treated fairly' (<https://www.gov.uk/government/policies/armed-forces-covenant>), yet knowledge of the circumstances of military families is very limited, and research into how to support them virtually non-existent.

LITERATURE INCLUDED

There have been two recent systematic reviews of the impact of deployment on the mental health of young children in military families, both of which included sections on interventions to support parenting (Trautmann et al., 2015; Creech et al., 2014). The present article refers to these systematic reviews and to various empirical studies, but also includes insights and recommendations from discussion papers, theory-driven papers, and from military magazines. The aim in drawing all these sources together is to help early years' professionals understand 'what seems to work' for military families striving to give their children the best possible start in life. The article will discuss 'what seems to work but hasn't yet been evaluated' and, most importantly, what parents say works.

As the research to date has little to offer in relation to fathers who are the caregiving parent and to mothers who are serving (with the notable recent exception of the work by

Walsh, 2017), this article refers, for the most part, to coping strategies used by and interventions aimed at mothers who are the at home parent.

WHAT SEEMS TO WORK: PARENTING STRATEGIES

(a) Establishing and maintaining routines

There has been considerable interest amongst academics and practitioners in the importance of routines in helping children thrive and develop a strong sense of security. For example, a study by Mindell et al. (2015) found that pre-school children who have a regular bedtime routine are less likely to display poor behaviour during the day or to manifest hyperactivity and attention deficit. In the context of military families, Lieberman & Van Horn (2013), drawing on the theory and practice of mental health in infancy and early childhood, state that, 'The importance of continuity and predictability of daily routines and enforcing behavioural expectations cannot be overstated' (p289). They argue that this will mitigate the insecurity generated by the absence of the serving parent. Bedtime routines are said to be especially important, and may include time to 'tell' the deployed parent about what has happened during the day, and to 'say good night' to him or her. Osofsky and Chartrand (2013) offer similar advice in a paper that extrapolates from studies of coping strategies in families who have experienced disasters. The authors recommend that first and foremost, the parent at home should 'keep routines consistent and predictable' (p68). Special mention is made of the needs of children with autism in a paper by Lincoln and Sweeten (2013) who recommend that maintenance of routines for these children is a primary means of helping them retain a sense of security in the rapidly changing world of the military which they are ill-equipped to understand.

(b) Communicating psychological presence of the absent parent

The need to keep the deployed parent 'present' in the mind and emotions of their young children is widely recognised in the literature. Video chats, e-mails, and letters can help with this (Waliski et al., 2012). Louie and DeMarni (2014), drawing on research in developmental psychology, point to the benefits of communicating psychological presence of the deployed parent through showing children pictures of their absent parent, for example, a picture of the father holding the child in his arms. If a child is born while the father is away, the authors suggest that he can send a picture of himself holding a photo of the child. The mother can then show this picture regularly to the baby and infant to accustom him or her to the idea that the person in the picture is important in their life. Video and audio-recordings which can be made before the serving parent deploys are also recommended as appropriate ways of facilitating attachment to the absent parent (Louie & DeMarni, 2014:501).

'United Through Reading' is a US programme

which videos parents in the pre-deployment period reading a story to their small child. The recording is then played daily to the child in the serving parent's absence. At home parents responding to a survey conducted for the programme said that the recordings decreased their children's anxiety and kept the deployed parent constantly in mind (Yeary et al., 2012).

'Psychological presence' can be facilitated through smell as well as by seeing or hearing the absent parent. Under 'Hints for staying connected with very young children', Yeary et al. (2012) report that a baby was calmed when given a t-shirt to cuddle worn by her serving mother. The scent of the mother on the garment soothed the child and enabled her to maintain a physical sense of her mother. It has been acknowledged that maternal odour facilitates attachment behaviours in infants (Sullivan et al., 2011). Whether the same would apply if a child were given a garment worn by his or her serving father is not known.

(c) Story-telling and family narratives

Story-telling is put forward in several papers (e.g., Baber, 2016; Barker & Berry, 2009) as a useful strategy for maintaining a sense of connectedness among the members of the military family. Prior to the serving parent being deployed, parents can tell stories to their children that focus on what everyone in the family will be doing until the deployed parent returns, and what will happen at the reunion. Story-telling is also recommended as a useful strategy by Osofsky & Chartrand (2013) whose paper is informed by the specific expertise and lived experience of the authors, the first of whom is a professor of paediatrics and psychiatry, and the second a lieutenant colonel in the US Air Force. It is further recommended for military families by the charity, Zero to Three, which aims 'to ensure that very young children benefit from the early connections that are critical to their well-being and development' (<https://www.zerotothree.org/about/about-us>).

Baber's small study (2016) of three Australian military families describes how the young children in these families took comfort from very simple narratives that were regularly repeated to them which identified where the deployed parent was travelling to, what he was doing, how long he would be away and what it would be like when he came home. Such narratives were especially helpful at times when the children were distressed. Baber concludes that, 'Educators and family workers need to be aware of how important a family narrative is in assisting children to remember, normalise and verbalise the events of deployment' (p150).

When parents' views were sought on how to support children through the deployment period (Barker & Berry, 2009), one caregiving parent advised:

"Show lots of pictures of deployed member. Lots of communication. Let them (the

children) talk when the parent calls. Always talk about the deployed parent” (p1038).

(d) Electronic communication

Electronic communication via skype and face-time are mentioned in several studies as a helpful 21st century strategy for helping children maintain contact with the absent parent. However, both researchers and military personnel express some reservations about the usefulness of these technologies and note that, as yet, little is known about their risks and benefits (Lester & Flake, 2013). Electronic communication may be helpful in alleviating worry about the deployed parent’s safety, but when such communication is interrupted or distorted as a result of poor signal strength, young children may resort to fantasy built on the partial information they have received and the potentially disturbing images they have seen, in order to fill ‘the void of limited information’ (Lincoln & Sweeten, 2011).

(e) Communication between the at-home parent and young children

At-home parents can help young children feel secure in the absence of the deployed family member by being emotionally and physically available to them, talking to them about what is happening and listening to their concerns. Play may be a particularly helpful means of helping children to explore their feelings and act out what they imagine their absent parent is experiencing. It is important that the at-home parent talks about their own feelings, too: ‘Mommy is sad because Daddy is gone. I cry when I am sad, but when I am done, I do the things I need to do’ (Osofsky & Chartrand, 2013: 68). Openness validates the emotions of all family members and gives the pre-school child a model for expressing and coping with emotions in a constructive way.

WHAT SEEMS TO WORK: MANUALISED PROGRAMMES

O’Grady et al. (2015) examined the extent to which parents of very young children in military families sought help when they perceived a problem with their child. Most of the caregiving parents who participated in the web-based questionnaire said that they had taken action in the past to learn about perceived developmental problems in their children either by seeking out information on the internet or by consulting a family member. The study indicated considerable willingness in this particular sample of parents to get help in order to safeguard their children’s wellbeing.

Various manualised programmes have now been developed, and some tested, that aim to educate parents about the normal reactions of young children to the stresses of the deployment cycle, and to help them develop skills to manage their children’s anxiety. DeVoe et al. (2016) conclude that there is a place for both universal and targeted

programmes for military families. Gorman et al. (2010) note that both interventions that have been tested, and those yet to be subjected to rigorous evaluation, all adopt a family-centred, rather than child-centred, approach on the basis that it is the quality of functioning of families that determines whether children are likely to have developmental problems.

‘Strong Families Strong Forces’ (SFSF) is a home-based reintegration programme for military families with a child under six, developed and implemented in New England by researchers at Boston University (currently being evaluated via a randomised control trial). It aims to help parents gain insight into their own, their partner’s and their children’s experiences of deployment and reintegration. The programme consists of eight modules: ‘Your Child & You’, ‘Becoming a Military Family’, ‘Your Deployment Cycle’, ‘Your Child’s Deployment Experience’, ‘Catching Up with Your Child’, ‘Catching Up with Yourself & Your Partner’, ‘Parenting and Co-Parenting’, and ‘Saying Goodbye and Moving Forward’. The first randomized trial of SFSF, reported by DeVoe et al. (2016), found that military parents who took part in the programme suffered less stress, anxiety and depression than parents allocated to a waiting list, and became better able to hold their young children’s feelings in mind (mind-mindedness) and demonstrate sensitive parenting.

FOCUS-EC (Families Overcoming Under Stress – for Early Childhood) uses a tele-health platform to deliver parent-child sessions through a trauma-informed narrative approach. The programme, developed by researchers at the University of California Los Angeles (Lester et al., 2011), teaches resilience skills and aims to enhance the parent-child relationship by increasing parents’ understanding of their children’s development and of the mental health challenges posed by the deployment cycle for the whole family. This programme is described as being ‘grounded in theory and research on family resilience’ (Mogil et al., 2015). Early findings from an ongoing evaluation of the programme are promising in terms of reduced stress and acting out in young children.

STRoNG Military Families (Support to Restore, Repair, Nurture and Grow) is a 10 week, group intervention for military families with young children. It aims to enhance parents’ understanding of their children’s needs and of the parenting skills that nurture a strong relationship with them (Walsh et al., 2014). The most recent reference to this programme in the literature (Rosenblum & Muzik, 2014) describes it as in the process of being evaluated.

LIMITATIONS OF CURRENT MANUALISED PROGRAMMES

Understanding how to scale-up these programmes is limited in that they have been mainly accessed by White military families where it is the father who is deployed. Little is known about the

challenges of parenting young children in non-White military families and what kind of psycho-educational interventions would best meet their needs. Nilsson et al. (2015) highlight a lack of programmes for families where it is the mother who is serving, with the 30 women in their qualitative study reporting that services are geared towards families where the deployed member is male, a point also made by the women in the study by Walsh (2017). Finally, there is a lack of longitudinal studies that examine the impact of parenting interventions in the year or years following take-up.

WHAT SEEMS TO WORK: THERAPEUTIC INTERVENTIONS

(a) Filial therapy

Filial therapy has been trialled in non-military contexts with children between the ages of 3 and 10 who come from families that face chronic disruptions and ongoing difficult circumstances. A paper by Chawla and Solinas-Saunders (2011) considers its use within the context of military families. The therapy aims, through the medium of parent-infant play that takes place in a specially designated place in the home at the same hour each day or week, to give the child a sense of security and predictability which has been disturbed by the deployment of the serving parent.

(b) Parent-Child Interaction Therapy (PCIT)

Parent-Child Interaction Therapy (PCIT) is recommended by Pemberton et al. (2013) as appropriate for military families that include pre-school children. It is a manualised parent-training intervention offered to parent-child dyads in two phases. In the first phase, the PCIT therapist helps the parent to interact with the child through positive attention, avoiding criticism. In the second phase, the parent is helped to apply consistent discipline to address anti-social behaviours.

WHAT SEEMS TO WORK: MEDIA-BASED INITIATIVES

'Talk, Listen, Connect', a multi-phase initiative to help young children during deployment, features characters from the popular US puppet show, 'Sesame Street', in a video, storybooks and worksheets that describe the experience of being separated from a parent for a lengthy period. Evaluation of the initiative suggests that toddlers and pre-school children who watched the videos and read the supporting material were less likely to have behavioural difficulties. Caregivers found material relating to the injury or death of a deployed parent very helpful when such tragedies occurred (Military Family Research Institute, 2013).

WHAT SEEMS TO WORK: PEER-TO-PEER SUPPORT

In a study of US Air Force (USAF) families, participants consistently reported a high level

SUMMARY: Coping strategies found helpful by non-deployed parents when caring for very young children

- Maintaining daily routines to protect children from stress and to protect parents' own mental health (Lieberman & Van Horn, 2013:289; Osofsky & Chartrand, 2013:65)
- Maintaining family communication before, during and after deployment via social media, skype and phone calls (Creech et al., 2014:461; Lieberman & Van Horn, 2013:285-6; Osofsky & Chartrand, 2013:65; Yearly et al., 2012:5)
- 'Bridges of connection can be built by making drawings, creating a family movie, taking photos of happy moments, and recording stories and songs that can be used at night-time or when the child is particularly sad to bring the deployed parent closer' (Lieberman & Van Horn, 2013:289)
- 'Telling stories' about the deployed parent to help young children develop a family narrative that includes the absent parent and normalises the events of deployment (Baber, 2016)
- Enforcing behavioural expectations (Lieberman & Van Horn, 2013:289)
- Remembering the importance of everyday interactions such as cuddling the infant when s/he is distressed, playing games together, laughing and having fun to strengthen relationships and enhance resilience (Walsh et al., 2014:42)
- Understanding that young children's behaviour may be a manifestation of fear of abandonment, of losing the love of the absent parent and anger at the parent for having gone (Lieberman & Van Horn, 2013:288)
- Listening to the child talking about his/her feelings; parents sharing their own feelings e.g. 'Mommy is sad because Daddy is gone' (Osofsky & Chartrand, 2013:65)
- Keeping the child socially engaged at playgroups etc. (Barker & Berry, 2009:1038)
- Asking for help (Barker & Berry, 2009:1038)

of trust in information provided by other USAF members (Lee et al., 2013). Waliski et al. (2012) suggest that peer-to-peer outreach programmes may be a key method of supporting military mothers of young children. Walsh et al. (2014) have noted that fathers also are keen to share with peers their experiences of reuniting with their young children following deployment. Military families that include a young child with a disability may benefit especially from parent-to-parent support groups (Taylor et al., 2005). In one of the few papers considering the experiences of mothers who are the deployed member of their families, Nilsson et al. (2015) note that their interviewees wanted semi-structured support groups of relevance to women returning from deployment that would include tools for reconnecting with their children and managing problematic behaviours (p127).

CONCLUSION: LIMITATIONS OF CURRENT UNDERSTANDING AND NEED FOR RESEARCH

The information presented in this article is based primarily on research from the United States. There is a yawning hole in the British literature that urgently needs to be filled to ensure the wellbeing of young children in British military families in relation to the deployment cycle.

There are many coping strategies, therapies and parenting interventions already in use in military families with young children that have not been evaluated; nor has research been carried out into how best to inform parents about the resources available to them. Lincoln and Sweeten (2011:82) recommend that the military should inform professionals and educators more effectively about the resources and programmes that are available and how these can be accessed by families.

The case for identifying the challenges of being a parent of a pre-school child in military families within a UK context, and for designing, evaluating and disseminating parenting interventions, both formal and informal, is incontrovertible. More empirical research, clinical case studies and anecdotal evidence from parents are required in order to develop best practice guidelines for professionals in supporting military families that include very young children.

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