



Understanding the Needs of Young Children in Military and Veteran Families

***Presented by: Catherine Mogil,
Psy.D. & Ediza Garcia, Psy.D.***

*UCLA Nathanson Family Resilience
Center*



UCLA Nathanson Family Resilience Center: Military and Veteran Initiatives

- **“Welcome Back Veterans” Center**
 - (McCormick Foundation/Major League Baseball)
- **Los Angeles County Department of Mental Health**
 - Training and implementation partnership to support family centered care and prevention for Los Angeles military and veteran families.
- **Operation Mend-FOCUS**
 - UCLA and Los Angeles Veteran and Family-Centered Resilience Services and Family Care Management within the Medical/Surgery Setting

UCLA Nathanson Family Resilience Center: Military and Veteran Initiatives

- **Project FOCUS (Families OverComing Under Stress)**
 - BUMED Implementation for Navy, USMC, Army and Air Force
- **FOCUS in Veteran's Administration**
 - Long Beach VA, Greater Los Angeles VA; VA Training Initiative
- **Community and National Partnerships**
 - USC Building Capacity in Military Connected Schools; Zero to Three; National Military Family Association Family Retreats; Uniformed Service University Health Services; Military Family Research Institute

Presentation Goals

- Increase awareness about an emerging public health need
- Describe the unique challenges for young children in military and veteran families
- Highlight the importance of a family-level approach to promote positive marital, co-parenting, and parent-child relationships for military and veteran families
- Provide suggestions for adapting best-practices to best meet the needs of military and veteran families

Military Values

Honor

Loyalty

Excellence

Commitment

Integrity

Courage

Duty

Respect

Service

Challenges of Military and Veteran Families

- Extended and repeated separations from a primary caregiver in the context of danger
- Altered family roles and responsibilities
- Increased stress on caretaking parent
- Media and communication exposure



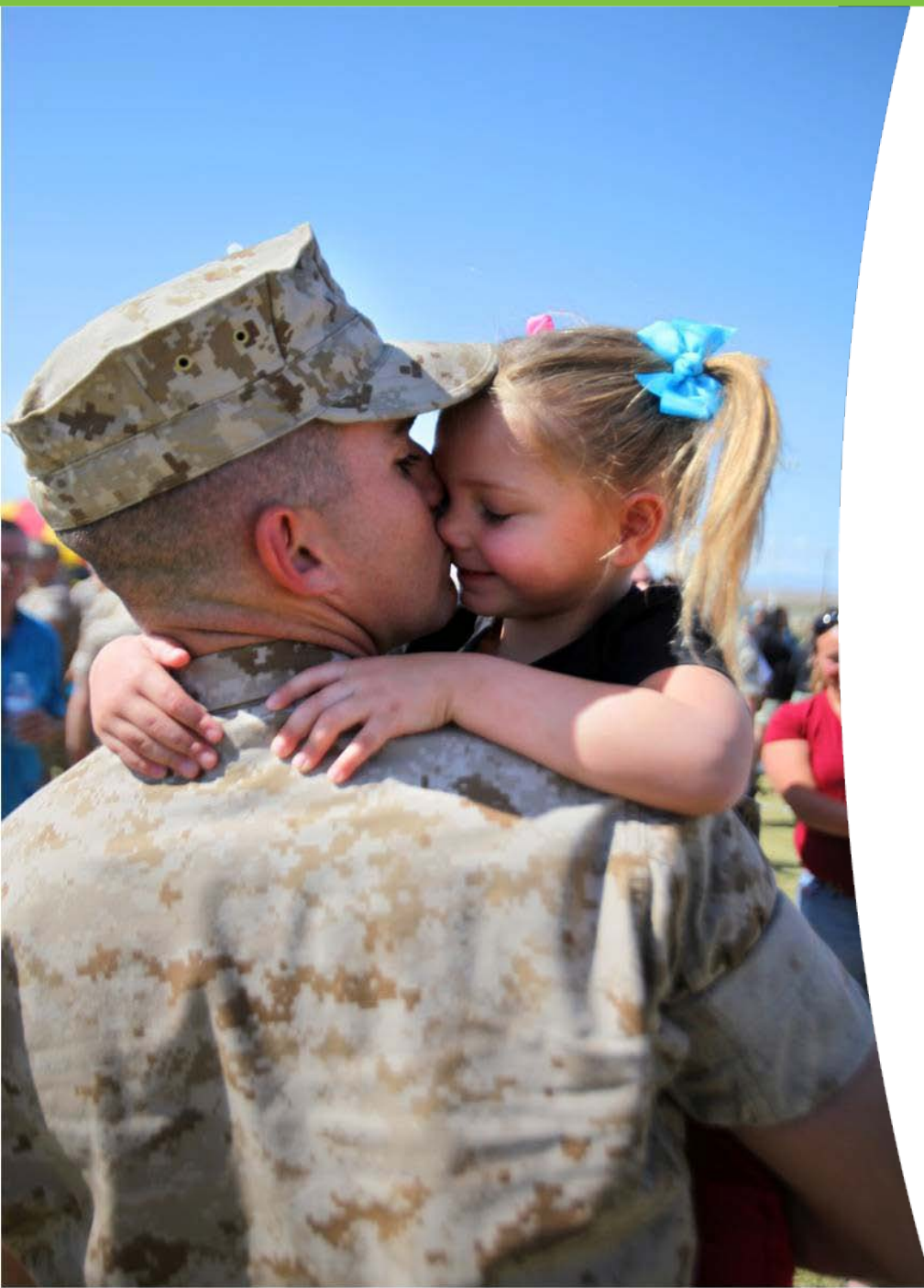
Challenges of Military and Veteran Families

- Community level stress/loss
- Impact of combat exposure on returning parent
- Possible parental mental health problems, physical injury, or loss



Deployment and Reintegration Stress in At Home Spouses

- Caretaking burden for spouse
- Increased loneliness and isolation
- Limited social support and resources
- Limited co-parenting
- Concerns about danger
- Anxiety and depression
- Relational dissatisfaction, conflict, reduced trust and intimacy



Reminders of Loss

**26-year-old Soldier
father, 7 months post-
reunion. One of his
buddies died in his arms
during a fire fight:**

*“...if my daughter falls asleep
when I hold her, and suddenly
her head falls, I can’t describe
what it does to me... I
immediately wake her up... I am
convinced at that moment that
she is dead...”*



Reminders of Separation

**28 yr old Marine mother,
1 month post-reunion after
2 deployments in 2 years**

"..It's the craziest thing.. For the first few weeks after I came back, every morning, my 5-year-old would stop me at the door and hang onto my leg and wouldn't let me leave. I had to change out of my uniform and get into civilian clothes before she would let me leave the house. Even now, I have to sneak out of the house with my uniform in a paper bag and change on the way to the Base."

Relevance of Systemic Approaches to Military and Veteran Families

- Stress reverberates across the family – both spouse and service member psychological health outcomes are related to child stress
- Family context may be protective or increase risk.



Relevance of Systemic Approaches to Military and Veteran Families

- Stress Accumulates
- Families who have experienced greater amounts of stress are at greater risk both individually and as a whole



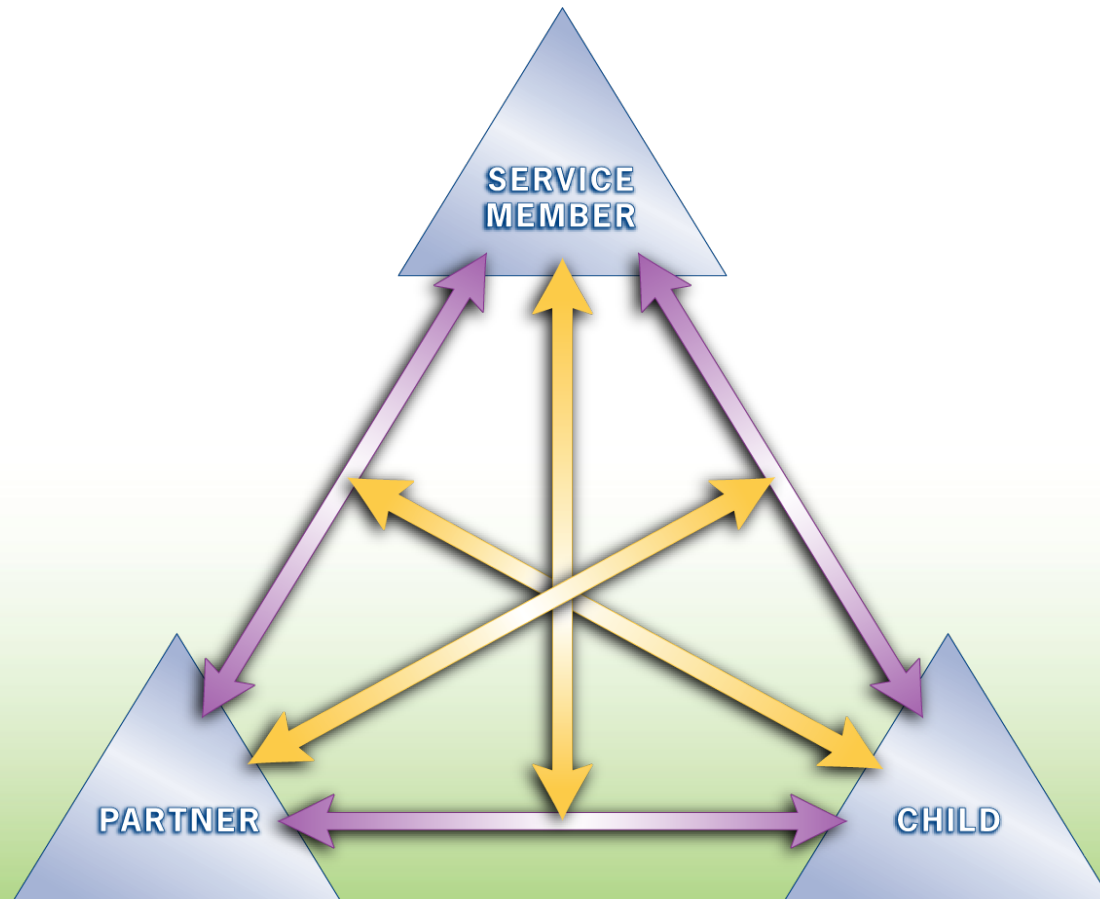
Relevance of Systemic Approaches to Military and Veteran Families

- Support for the role of family centered interventions for reducing risk and promoting resilience in service members, spouses and children.



Systemic Model to Inform Services and Care for Military & Veteran Families

MacDermid-Wadsworth and Lester, et al, in press



What Stands in the Way?

- Systemic approaches have merit because stress reverberates
 - But we design research, programs and policies as though they do not have merit
- Family centered prevention and care have merit because they improve a broad range of outcomes for individuals and families
 - Ones that last over time
- Family centered approaches will be more effective if they can reinforce existing systems of care

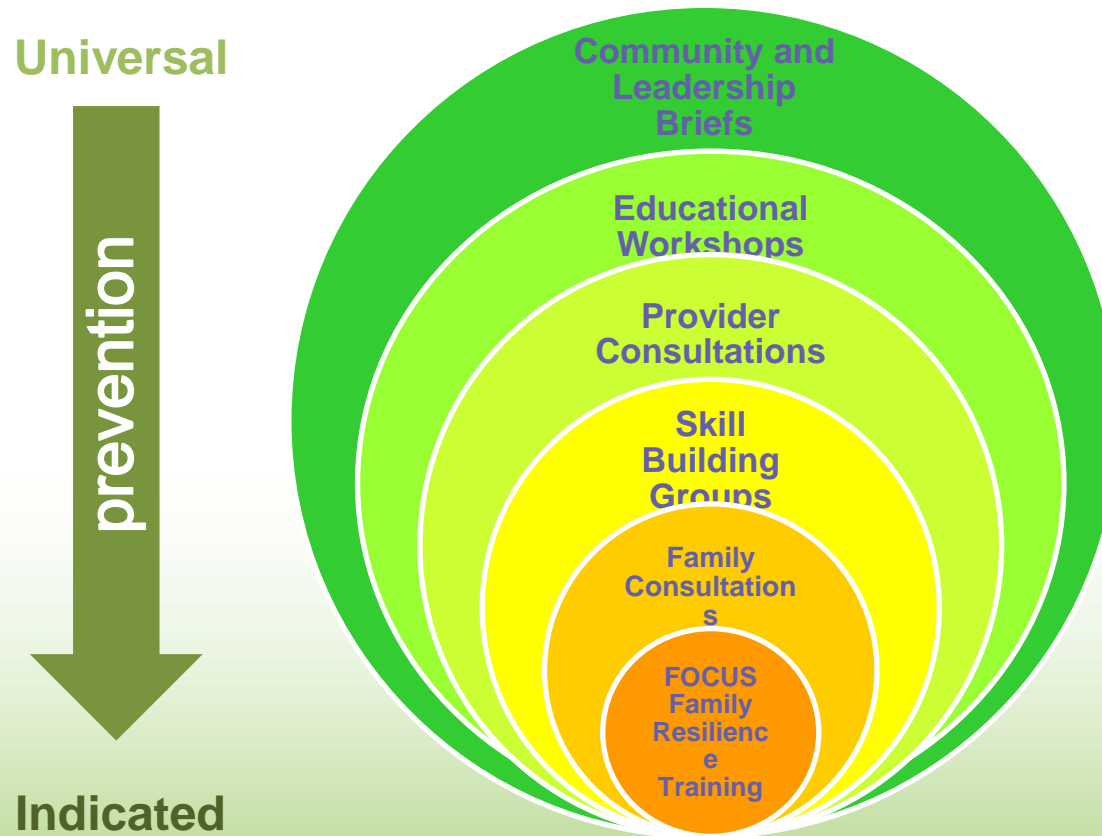
Mechanisms of Resilience for Families

- Providing psychoeducation and developmental guidance
- Developing shared family narratives
- Supporting open and effective communication
- Supporting effective and coordinated parent leadership
- Enhancing selected family resiliency skills



Project FOCUS Suite of Services

Public Health Strategy for Implementation

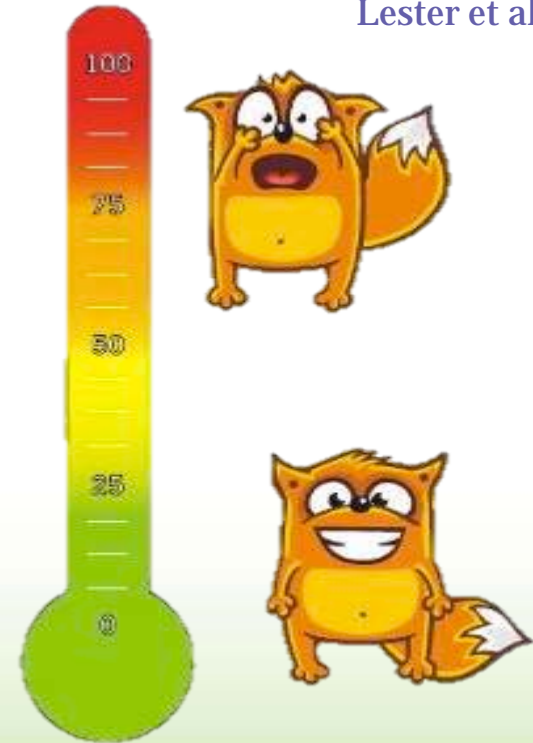


FOCUS Family Resiliency Training

Core Components

Lester et al, 2011

- **Family real time check-up**
 - Customizes services to family needs
- **Family level education**
 - Combat Operational Stress Continuum
 - Developmental guidance
- **Family deployment timeline**
 - Link skills to family (and child) experience
 - Develop shared family meaning
 - Bridge estrangements
 - Co-parenting



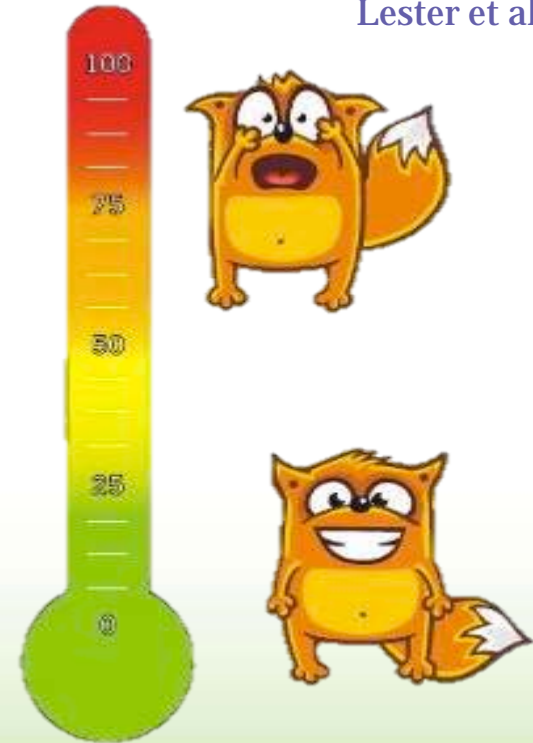
FOCUS Family Resiliency Training

Core Components

- **Family level resiliency skills across the deployment cycle**

- Emotional regulation
- Problem solving
- Communication
- Goal setting
- Managing deployment reminders

Lester et al, 2011



FOCUS – Early Childhood Family Resilience Training

Parents Only



Parents & Child



Parents Only



Sessions 1 & 2

Sessions 3 & 4

Session 5

Goals for FOCUS for Early Childhood

Help parents understand the parenting role, coparenting relationship, and the internal world of the child in the context of the deployment narrative

Understand the developmental needs of their child and what to expect as the child grows

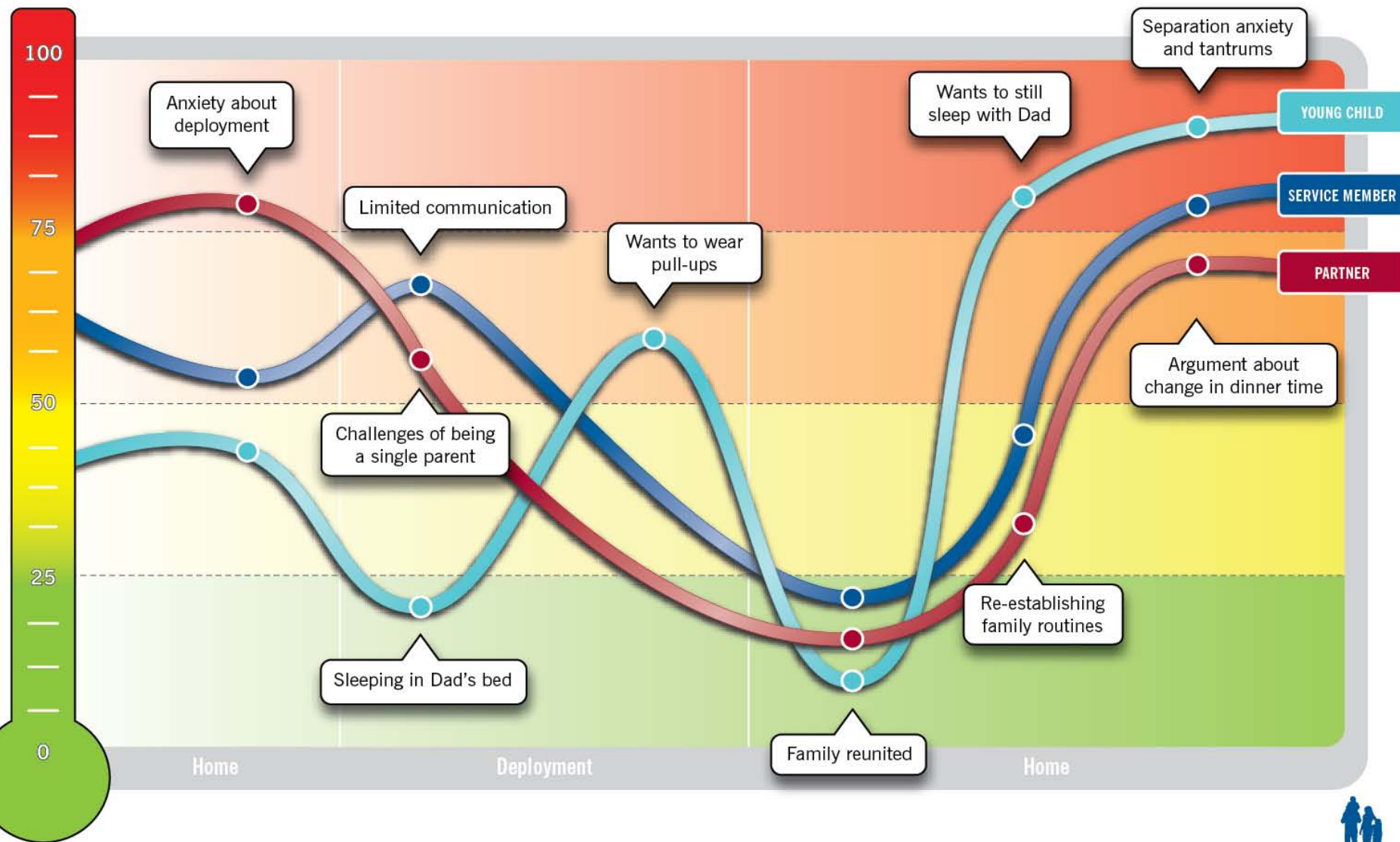
Enhance the parent-child relationship

Teach the parent how to play

Help the parent to have enjoyable family experiences

Prepare for future separations and coparenting at a distance

Early Childhood Family Timeline

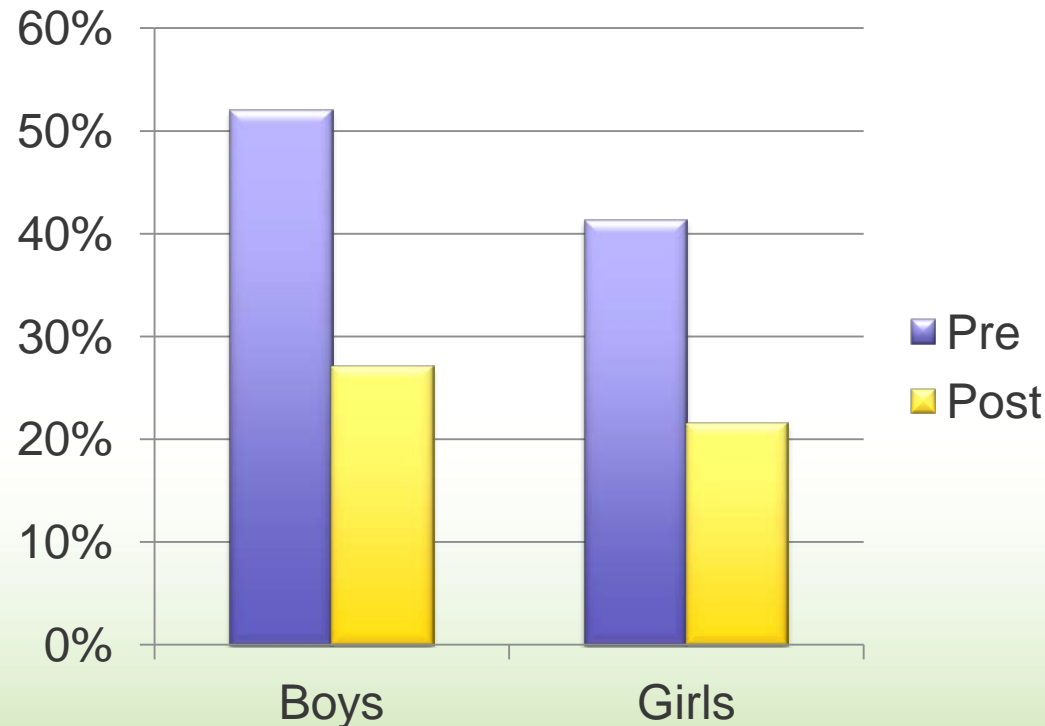


Mapping Communication Hot Spots

WORKSHEET

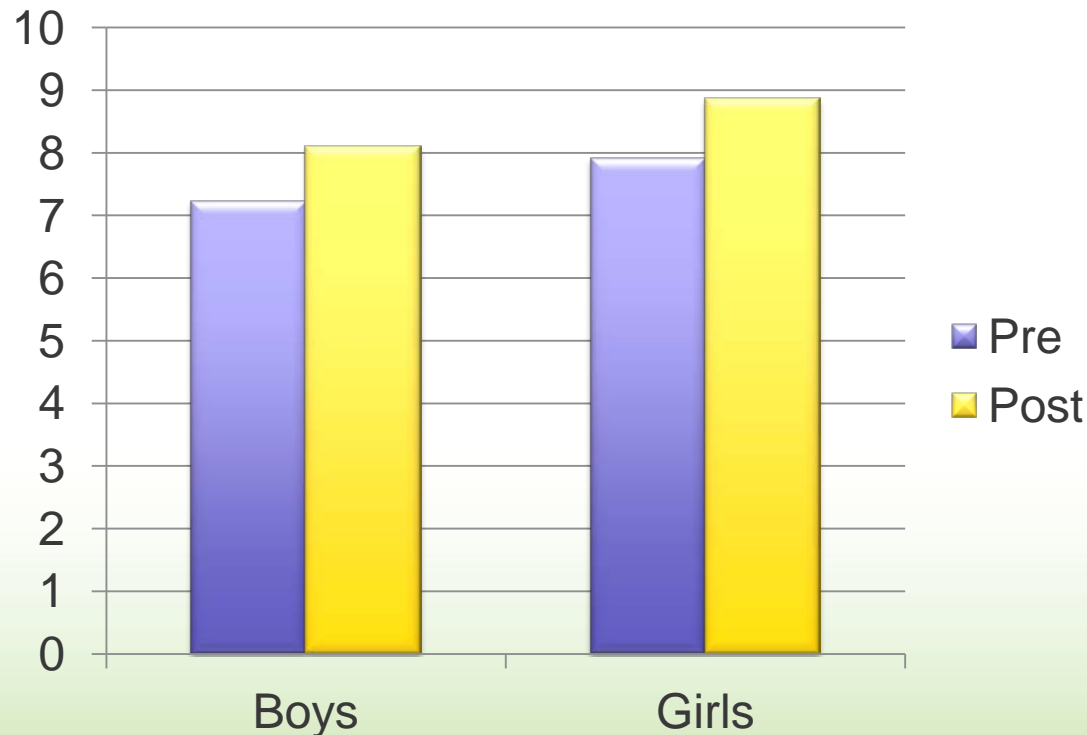
	Partner 1	Partner 2	Strategies
100	I want to eat dinner as a family.	A SET ROUTINE IS IMPORTANT FOR OUR CHILD'S DEVELOPMENT	<ul style="list-style-type: none"> - We have dinner together 2 nights a week. - SATURDAY FAMILY DINNERS
75	Quality time with the kids is most important, and I'm too tired for much else.	NOT ENOUGH 1-ON-1 TIME	<ul style="list-style-type: none"> - Date night each month - HAVE GRANDMA SPEND MORE TIME WITH KIDS
50	Our toddler needs emotional support and comforting when he cries.	CHILDREN NEED DISCIPLINE TO BE STRONG FOR LIFE'S CHALLENGES	<ul style="list-style-type: none"> - Set down a plan for co-parenting
25			

Child Psychological Symptoms



Children showed a reduction in total problems ($p < .001$)
Based on baseline vs. post intervention SDQ medium difficulty
N = 225 boys and 167 girls

Child Psychological Symptoms

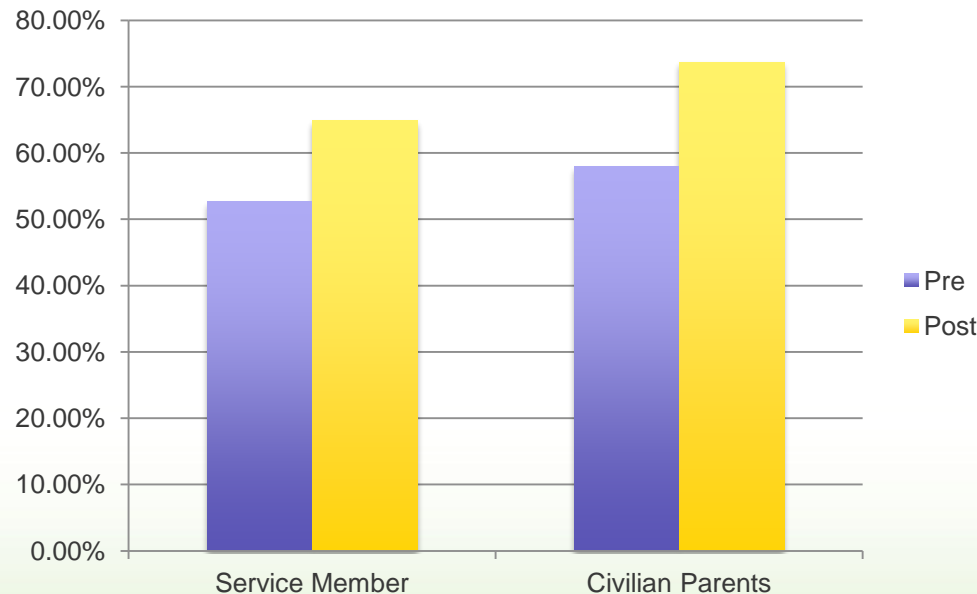


Children showed an increase in prosocial behaviors ($p < .001$)

Based on baseline vs. post intervention SDQ medium difficulty

N = 225 boys and 167 girls

Family Functioning

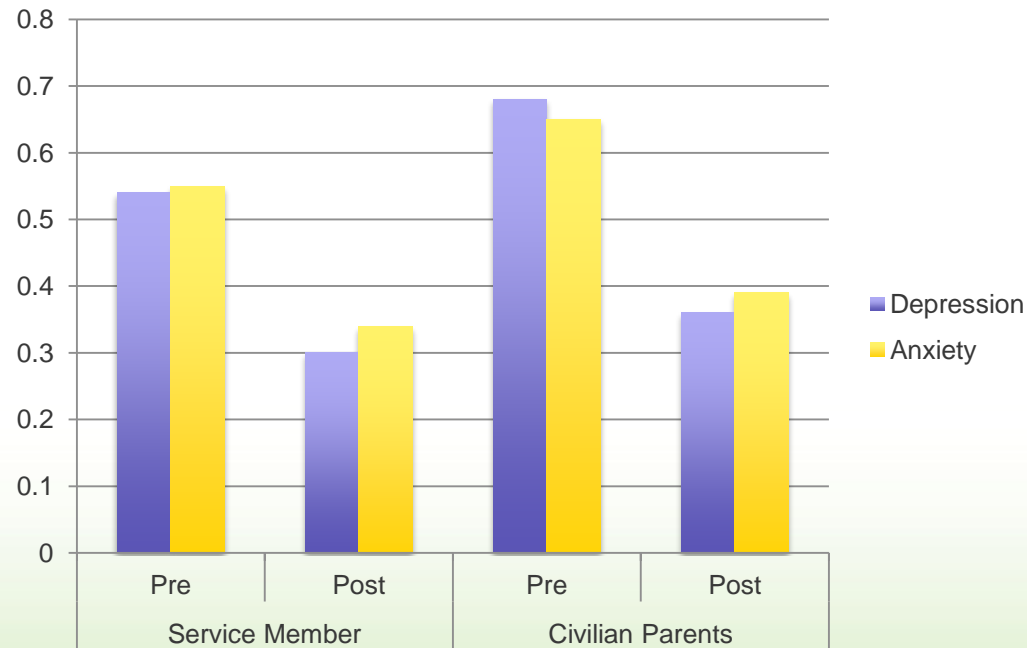


Both service member and civilian parents reported improvements in their family's functioning, including more effective problem solving, communication, affective responsiveness, and behavior control ($p < .001$)

Based on baseline vs. post intervention healthy FAD means

N = 205 service members and 373 civilian parents

Parent Psychological Health



Both service members and spouses reported significant reductions in depression ($p < .001$) and anxiety ($p < .001$)

Based on baseline vs. post intervention BSI means

N = 174 service members and 383 civilian parents

Lessons Learned for Dissemination of Family Centered Prevention and Care

- Family resilience programs must be modular, portable, and scalable to reach military and veteran communities
- Family centered services should be customized for unique family, service status and community needs, while still maintaining the fidelity to evidence based practices

Lessons Learned for Dissemination of Family Centered Prevention and Care

- Innovative technology strategies play a key role supporting expanded services for military and veteran families.
- Systematic training, supervision and evaluation are needed to ensure the quality of all services.
- Partnered community approaches, community engagement, and local flexibility are central to strengthening community systems



cmogil@mednet.ucla.edu

edigarcia@mednet.ucla.edu

<http://nfrc.ucla.edu>