

Child Mental Health Symptoms Following Parental Deployment: The Impact of Parental Posttraumatic Stress Disorder Symptoms, Marital Distress, and General Aggression

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SUMMARY: Marital distress, aggression, and posttraumatic stress disorder (PTSD) symptoms are commonly linked in research. However, less often is the consideration of the impact on children, and specifically, their increased mental health symptoms. This study examined child mental health symptoms after a parent returns from deployment and suggests that general parental aggression (e.g., threatening, fighting, damaging property) is a key mechanism in children's mental health.

KEY FINDINGS:

- Military parents who had recently returned from deployment, demonstrated PTSD symptoms, and acted aggressively had children with greater mental health concerns.
- Parental PTSD symptoms impacted children's mental health independent of marital distress.
- Parental aggression may be a mechanism through which parental PTSD symptoms and marital distress affect children's mental health.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Educate Service members and their spouses on the impact of general aggression on their children's mental health
- Offer classes for Service members returning from combat deployments regarding PTSD, general aggression, marital distress, and their impact on children's mental health
- Offer pre- and post-deployment anger management workshops for Service members

IMPLICATIONS FOR POLICIES:

Policies could:

- Promote reintegration programs that include emotion regulation components
- Recommend the development of programs that support military families through the deployment process
- Encourage training for professionals who work with military families to consider the overall family dynamics, including effects on children, when there is marital distress, PTSD symptoms, or parental aggression

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METHODS

- This study was part of a larger study that involved 974 Soldiers in a brigade combat team. A subset of the participants, 169 Soldiers, were included in this study, with the inclusion criteria being that Soldiers had at least one child (age 3 to 17 years) at home.
- Surveys were collected via large groups of Soldiers who completed them in approximately 1 hour.
- Soldiers provided data about parental PTSD symptoms, child mental health symptoms, marital distress, and general aggression.
- The data were examined to explore possible links between PTSD, child symptoms, marital distress, and aggression.

PARTICIPANTS

- Participants were Active Duty Soldiers, with the following ranks: junior enlisted (29%), non-commissioned officers (62%), and officers/warrant officers (9%).
- Ninety-seven percent were male, 95% married, with one child (48%), two children (33%), or three or more children (17%).
- Sixty-two percent of the participants had been on more than one deployment, and the average number of years in the military were 8.91 (SD = 5.43).

LIMITATIONS

- The sample was composed mostly of fathers, therefore the findings may not be generalizable to female Soldiers who are mothers.
- Aggression was not categorized by types of aggression and anger was not examined separately. Therefore, it is difficult to determine what exact behaviors most increased child mental health symptoms.
- Data were not gathered about martial distress and general aggression prior to the deployment; without this information there is no clear evidence of the direction of effects.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Examine specific types of anger and aggression to discover if they impact child mental health symptoms differently
- Develop long-term studies that follow military families through the deployment cycle to provide a clearer picture of the relationships among marital distress, PTSD symptoms, parental aggression, and child mental health symptoms
- Conduct a similar study with female Soldiers who are mothers to determine whether their responses are similar to or different from male Soldiers who are fathers



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