

Putting Research to Work for Military Families



Focus:
Army

Deployment and Mental Health Diagnoses Among Children of US Army Personnel

Mansfield, A. J., Kaufman, J. S., Engel, C. C., & Gaynes, B. N. (2011). Deployment and mental health diagnoses among children of US Army personnel. *Archives of Pediatrics & Adolescent Medicine*, 165(11), 999-1005.
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SUMMARY: Medical record data were used to examine the association between deployment length and mental health diagnoses among children and adolescents of US Army Active Duty personnel who had experienced or not experienced deployment. Parental rank, time in the service, and length of deployment status were used to estimate increased risk for mental disorders (e.g., depression, anxiety) among three age groups: youth ages 5 to 8, 9 to 12, and 13 to 17 years. Gender, age, and parental deployment influence the risk of a mental health diagnosis for youth.

KEY FINDINGS:

- Among all children, 17% had at least one mental health diagnosis during the study period, including depression (6%); pediatric behavioral issues (5%); anxiety (3%); and sleep disturbances (2%).
- Among girls, the risk of a mental health diagnosis was higher for those youth who had a parent deployed for a longer period of time (i.e., more than 11 months) and the risk increased as the youths' age increased; the risk was highest for the 13 to 17 year-old age group, followed by 9 to 12 year-olds, and lowest for the five to eight year-old group.
- Effects for boys followed the same pattern as the girls in that risk increased with longer deployments and with increased age; however, the magnitude of the estimated risk surpassed those for girls.
- Overall, the largest effects among all children were observed for acute stress reaction and adjustment disorders, pediatric behavioral disorders, and depression, particularly for older children and those with parents who were deployed longer.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Develop training for professionals who work with military families to better recognize social and emotional issues in youth and refer military families to support services
- Provide education to military families experiencing extended deployments about available resources
- Offer workshops to military parents to learn how to best support their children who have difficulty coping during extended deployments

IMPLICATIONS FOR POLICIES:

Policies could:

- Continue to support programs that provide education to military youth on the impact of their parent's deployment length
- Encourage routine screenings of mental health symptoms during outpatient clinic visits to aid in identifying youth in need of additional support services
- Recommend education for professionals working with military families about the impact of deployment on children

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METHODS

- Data were collected from electronic medical records of outpatient visits from 2003-2006 via the Armed Forces Health Surveillance Center.
- Children and adolescents were eligible for the study if their caregivers were Active Duty U.S. Army personnel and had been in Active Duty service for at least 5 years.
- Statistical analyses were used to examine differences related to risks of having a mental health diagnosis among youth who had a parent deployed for 1 to 11 months, more than 11 months, or not deployed at all during the study period.

PARTICIPANTS

- Archived medical records of mental health diagnoses for children and adolescents of deployed (n = 193,058) and nondeployed (n = 113,008) Active Duty Army parents were included in the study.
- Participants were predominately male (51%) and between the ages of 5 to 17 years (78% enlisted).
- No data were provided regarding the race/ethnicity of parents or children.

LIMITATIONS

- Untested variables that may influence results (e.g., parents' mental health status) were not included in the analyses, which limits the ability to draw conclusions based on these findings.
- Aspects of children's mental health outcomes may have been missed because only archived medical records were used.
- Reliance on diagnostic codes to ascertain mental health status may provide biased results, as medical professionals may be reluctant to assign mental health diagnoses to children; this could result in underreporting of some outcomes.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Investigate multiple informants of children's experiences related to parental deployments
- Explore the effects of multiple and extended deployments and deployment length on children and adolescent's mental health
- Gather data on parents' mental health diagnoses to examine the association between parents and children's mental health among military families

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