Parent-Child Relationship Quality and Family Transmission of Parent Posttraumatic Stress Disorder Symptoms and Child Externalizing and Internalizing Symptoms Following Fathers Exposure to Combat Trauma


SUMMARY: The effects of parent combat exposure and posttraumatic stress disorder (PTSD) symptoms can impact families long after deployment. Relationships between family members’ emotion regulation, parents’ PTSD symptoms, child internalizing and externalizing symptoms, and family interaction behaviors were examined. Parents and children reciprocally impact one another’s trajectories of well-being and adjustment, both positively and negatively, across time during the years following parent deployment.

KEY FINDINGS:
- Fathers’ and mothers’ higher levels of PTSD symptoms predicted greater internalizing and externalizing symptoms among their children one year later.
- Children’s greater internalizing symptoms predicted higher PTSD among mothers, whereas greater externalizing symptoms predicted higher PTSD among fathers one year later.
- Parents’ positive engagement with their child was related to fewer child internalizing symptoms, and parent coercive behavior when interacting was related to greater externalizing symptoms.

IMPLICATIONS FOR PROGRAMS:
Programs could:
- Provide workshops to educate military parents about ways to discuss deployment and PTSD with their children
- Disseminate information to school staff and parents about symptoms and difficulties children may have following a parental deployment
- Offer parent-child classes to teach healthy interaction skills to all military families

IMPLICATIONS FOR POLICIES:
Policies could:
- Encourage programs that help military families to adjust and communicate post-deployment long-term, even several years after a family experiences deployment
- Recommend professional development courses for teachers and other school staff about the impact of parent deployment on child internalizing and externalizing symptoms
- Promote the integration of a family systems perspective when providing education and skills in existing programs for military families

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METHODS
- Male National Guard and Reserve members deployed during OEF/OIF/OND and their partners and 4-13 year old children, were recruited via presentations, mail, flyers, and family events.
- Family members completed measures of emotion regulation, PTSD symptoms, and child internalizing and externalizing symptoms at baseline and one- and two-year follow-up; interaction behaviors were also coded.
- Relationships between family members’ emotion regulation, parents’ PTSD symptoms, child internalizing and externalizing symptoms, and family interaction behaviors were examined.

PARTICIPANTS
- The 552 participants included 184 male National Guard or Reserve Service members (M = 37.2 years, SD = 6.5), their intimate female partners (M = 35.6, SD = 6.0), and their children (53% female; M = 8.3, SD = 2.4).
- Service members were primarily White (85%), married (94%), Army National Guard or Reserve members (73%), and enlisted or warrant officers (76%).
- On average, Service members had been deployed two times, with 24 total deployment months.

LIMITATIONS
- Deployed fathers in the current sample were National Guard or Reserve members and older than most deployed OEF/OIF/OND Service members, potentially limiting generalizability.
- Given the wide age range of children, there were large developmental differences across these participants that were not measured and may have impacted results.
- Families that dropped out of the study (22% at one-year follow-up; 31% at two-year follow-up) may have differed from those who remained in the study.

AVENUES FOR FUTURE RESEARCH
Future research could:
- Investigate the impact of child emotional development on adjustment following parent deployment
- Explore whether families who participate in military family post-deployment education programs report better parent and child outcomes at one- and two-year follow-ups
- Examine family interactions and well-being among families where children have been diagnosed with internalizing or externalizing disorders prior to parent deployment

ASSESSING RESEARCH THAT WORKS

Design

Methods

Limitations

For more information about the Assessing Research that Works rating scale visit:
https://reachmilitaryfamilies.umn.edu/content/assessing-research-that-works