



Supporting Military Families Through
Research and Outreach



Supporting the Healthy Development of Strong Families

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Executive Summary

In response to a request from The Office of Family Policy, Children and Youth, within Military Community and Family Policy at the Department of Defense, the Center for Research and Outreach (Military REACH) team conducted a review of literature addressing strong family functioning. Specifically, this report defines ten key components for strong family functioning and reviews the importance of families acquiring, developing, and sustaining these ten key components. This report includes information crucial to those professionals that work with and on behalf of families to understand how various types of family structures approach the change process and the role of informal and formal networks in creating family changes. Moreover, a framework for family behavior change is provided, including information about coordinating interventions with a family's specific level of readiness to change. This report concludes with broader policy implications of this research and future considerations when supporting the healthy development of strong families.

Review of the Literature

A systematic review of the literature was conducted to identify relevant articles and reports. In order to represent the most recent literature and due to the rapid changes in social media, primarily literature that was published in the past decade was reviewed. In select instances, literature published prior to these dates was also included in order to ensure adequate coverage of literature. Articles used in this report consisted of scholarly work as well as relevant literature reviews, reports, and policy briefs dated from 2003 or later. Approximately 350 documents were critically reviewed for use within this report.

Specific information on the literature used within this report can be found in the Reference Section on page 33. An overview of the literature review is described in the key findings below.

Key Findings

Families are among the most enduring institutions in the world and understanding the key components of strong family functioning can guide programmatic and policy efforts. Research has identified nine key components that strong families typically possess: (1) communication, (2) emotion regulation, (3) family cohesion, (4) family recreation and leisure time, (5) financial management, (6) prosocial family values, (7) resilience, (8) religiosity and spirituality, and (9) routines and rituals. The tenth component is specific to strong military families and involves high levels of (10) military readiness that can sustain families through deployment, relocation, and other unique challenges. Strong families celebrate successes and learn from failures. They have clearly defined roles, yet are responsive to the changing needs, challenges, and issues that arise across a family's life cycle.



Policy Implications and Recommendations

Professionals working with and on behalf of families can support families in making and sustaining positive change. Research on the healthy development of strong families has several implications for policymakers and program providers, including:

Understanding the uniqueness of each family. Modern family structures are diverse and include their own unique constellation of factors such as culture, sexual orientation, gender, ethnicity, and family composition. Incorporating an understanding of the heterogeneity of families can assist policymakers and program providers alike. Designing programs and policies that allow for family diversity enables providers to leverage families' unique strengths and address potential obstacles that may impede change.

Development of programs and policies. The ten key components of strong families described within this report can serve as a framework for designing and implementing family programs. These key components can strengthen family policy work and increase program effectiveness when they are holistically addressed. Theories of family change can assist with program design and implementation, and these can guide the development of behavioral outcome measures for evaluation.

Utilization of formal and informal networks. Military families do not live in isolation; they need friends, extended family members, and neighbors in order to thrive. Ensuring that families have a support network available may be useful when behavior change is needed. Informal network support is valuable to the entire behavioral change process, because this support tends to help families move from the pre-contemplation stage into action-oriented stages of change. In addition to recognizing the value of informal support networks, policymakers and program professionals may want to provide clear pathways for accessing formal network supports and minimizing organizational or agency obstacles.

Conclusion

Strong families are an important part of a modern society; however, ongoing effort is required to build, develop, and sustain strong families. In order for strong families to flourish, it is important that helping professionals, providers, program administrators, and policymakers establish mechanisms to strengthen informal and formal network capacity and implement resources, programs, and interventions that fortify strong families.



Introduction

Families are faced with a variety of challenges throughout the family life cycle, both positive (e.g., birth of child) and negative (e.g., death of loved one). They also manage the day-to-day stressors that face every family such as completion of homework and household chores, monitoring finances, and meeting work deadlines. Some families navigate these challenges more effectively than others. Kuhl et al. (2014) identified and provided an overview of the nine key components that strong families typically possess: (1) communication, (2) emotion regulation, (3) family cohesion, (4) family recreation and leisure time, (5) financial management, (6) prosocial family values, (7) resilience, (8) religiosity and spirituality, and (9) routines and rituals. Strong military families also espouse high levels of military readiness that strengthen them through deployment, relocation, and other unique challenges. Strong families celebrate successes and learn from failures. They have clearly defined roles, yet are responsive to the changing needs, challenges, and issues that arise across a family's life cycle (Guilfoyle, Goebel, & Pai, 2011).

Families are among the most enduring institutions in the world and understanding the key components of strong family functioning can guide programmatic and policy efforts. They do not inherently possess all of these components; rather, families grow and change over time. Some families may be especially strong in certain domains, while they may struggle in other areas. Also, families' functioning shifts across the domains as they face developmental milestones, life challenges, and external influences. For example, a family that is typically resilient and enjoys regular family recreation and leisure time may struggle when a parent loses a job, consequently facing difficulties with financial management. This may lead to a co-parent taking on a second job, thus decreasing available time for family leisure activities. These components are inter-related and can shift over the course of a family's life cycle.

Families are among the most enduring institutions in the world and understanding the key components of strong family functioning can guide programmatic and policy efforts.

This comprehensive literature review defines ten key components for strong family functioning as these relate to families in general, in addition it utilizes examples that are specific to U.S. military families. Next, this review outlines why it is important for family units to be flexible and ready to change in order to acquire, develop, and sustain the ten key components of strong family functioning. Understanding how various types of family structures make changes is an important consideration when working with families. In addition, the role of informal and formal networks in creating family changes is discussed. Finally, a framework for family behavior change is provided. An overview of the barriers families face with regard to help-seeking is presented because making familial cultural and behavioral changes can be difficult and often presents challenges that need to be overcome.

Theoretical Underpinnings

The concept of a strong family can be conceptualized through numerous theoretical frameworks, such as positive psychology, family systems theory, and theories of inter- and intrapersonal intelligences. Theories in positive psychology explain how strong families incorporate optimism, hope, and existing assets into how they face challenges and solve problems. Family systems theory addresses the interconnectedness of individuals within the family structure, recognizing that strong families consist of



positive relationships at multiple levels. Finally, theories of inter- and intrapersonal intelligence target the individual family member's ability to promote positive group dynamics, as well as personal self-reflection about family roles, attitudes, behaviors, and cultural values. Strong families consist of individual members who develop their inter- and intrapersonal intelligences.

Historically, family research utilized a deficit model, in which the family identified problem areas and sought to correct them. However, using a positive framework can better promote overall family well-being and have more effective results when treating psychological conditions such as depression (Duckworth, Steen, & Seligman, 2005). To that end, positive psychology is the scientific study of positive and negative aspects of the human condition (Constantine, 2006; Linley, Joseph, Harrington, & Wood, 2006). Rather than focusing on pathology and negative qualities, this model takes a strength-based approach by focusing on identifying and expanding upon individuals' positive characteristics, states, and outcomes. In doing so, individuals are empowered to draw upon their character strengths to foster well-being and manage negative situations effectively (Ackerman, Kashy, Donnellan, & Conger, 2011).

Extending this theoretical framework from the individual unit of analysis to the whole family is the focus of the sub-field called family-centered positive psychology. It specifically targets issues and approaches related to families that will result in the betterment of the overall family system. This theory encourages parents, teachers, and families to work collaboratively to address a child's behavioral issue(s) across both home and school settings. By changing the focus from the child to the entire family, members are empowered to leverage both individual and relational strengths to access resources, meet needs, and accomplish family goals (Sheridan, Warnes, Cowan, Schemm, & Clarke, 2004). In this way, all members of the family are included and work together from a strengths-based approach.

While positive psychology's approach of empowering all family members to function in a positive fashion, family systems theory focuses on strengthening a single family member, with the expectation of positive implications for the rest of the family unit. Family systems theory views family relationships as inextricably connected. For example, one should not consider a child without simultaneously considering the parent-child context and the sibling relationship. From a family systems perspective, positive changes in the child can improve functioning in parent-child relationship, sibling relationships, and throughout the entire family unit (Riggs & Riggs, 2011).

In connection to family systems theory, Gardner's (1983) theory of inter- and intrapersonal intelligence describes the ability to relate to others and the capacity for self-reflection, respectively. Gardner (1983) found that people with high interpersonal intelligence are able to easily sense others' moods, empathize with them, cooperate, and work effectively as a team. Strong families consist of members who have a well-developed interpersonal intelligence. In addition, individuals with good intrapersonal intelligence have good insight related to their inner thoughts and feelings, have a keen ability to gauge their strengths and weaknesses, and can accurately predict their reactions and emotions to various situations. Possessing intrapersonal intelligence is helpful in understanding one's role and navigating successfully within the complex, ever-changing family system. Besides being competent in the domain of interpersonal intelligence, strong families include members who also have a degree of competence in intrapersonal intelligence.



Summary of Theoretical Context

In sum, families must be understood in context, including each individual, their relationships, the broader family unit, and the societal context (Bronfenbrenner, 1994). The family theories reviewed here provide a foundation from which to understand what constitutes a strong family. Positive psychology offers an understanding of the importance of positive emotions and approaches to any given situation (Constantine, 2006; Linley et al., 2006). Family systems theory highlights how each family member is interconnected (Sheridan et al., 2004). Finally, multiple intelligence theories of inter- and intrapersonal intelligence highlight how healthy families are comprised of individuals who both relate well to others and are aware of their own strengths and weaknesses (Gardner, 1983). Families exist in a complex environment where the members of the family each contribute to the overall well-being of the family. As each family unit is unique, careful and continuous assessment of family functioning is important to best meet the needs of all members.

American Families

The structures of today's American Family are much more diverse than the historically traditional family consisting of a husband, wife, and children.

Historically, the traditional American family structure consisted of a husband, wife, and children (Golding, 2006). The structures today are much more diverse. Current American family structures can include spouses or partners of diverse sexual orientations, with or without children. Modern family structures can also include single-parent, extended, or blended families that include stepparents and stepchildren (Golding, 2006). Further, family members may or may not be biologically related (e.g., adoptive parents). Due to an aging population, households are becoming increasingly

multigenerational. In the 2012 Census, approximately 5% of the population lived in a multigenerational household (usually a child and a parent living with a grandparent; Vespa, Lewis, & Kreider, 2013). American families represent a multiplicity of structures each having unique strengths and challenges.

In addition, significant variability exists across American families on a variety of key indicators, including financial stability. In 2012, the median American family household income was \$51,017. However, household income varies greatly by race (DeNavas-Walt, Proctor, & Smith, 2012). In this 2012 report, Asian-American households had the highest median household income (\$68,636), followed by European-American households (\$51,017), Hispanic households (\$39,005), and African American households (\$33,321; Vespa, Lewis, & Kreider, 2013).

In the 2012 Census report, approximately one-third (28%) of American children were reported to live in single parent homes. Fathers had more frequently become single parents as a result of divorce; in contrast, many single mothers were never married (Vespa et al., 2013). Again, this characteristic varies by race. African American and Hispanic children were more likely to be raised in single parent homes than children from European American or Asian American families (Vespa et al., 2013). This disparity mirrors the variability described above in household income, as single-parent homes are usually reliant on one income. Married couples with children under the age of 18 years constitute 63% of American families; while rates of marriage have been declining, rates of cohabitation have been steadily increasing, creating yet another non-traditional family structure (Vespa et al., 2013).



Similar to their civilian counterparts, military families are composed of a range of family constellations, including Service members plus their spouses or partners and any dependents. According to the U.S. Department of Defense (2013), there are more military family members (58%) than military personnel (42%). A majority, 56%, of Active Duty Service members were married, 4% divorced, and 42% never married. Also, 44% of Active Duty Service members were parents, with 5% being single parents. Among Guard and Reserve members, 47% were married, 7% divorced, and 46% never married. A significant number (43%) of Guard and Reserve members had children with 9% being single parents. Both Active Duty and Guard and Reserve parents had an average of two children.

Burland and Lundquist (2013) reported that military families differ in significant ways from civilian families. Service members tend to marry younger and have children earlier than their civilian counterparts. Dual military couples have been found to be less likely to divorce than their civilian couples. However, after leaving the military, Veterans may be at higher risk of divorcing than their non-serving peers. Two things are required in order for professionals, institutions, and organizations that work with families to recognize and assist in the development of strong families: an awareness of the diversity of family constellations, and the key skills and competencies exhibited in healthy and well-functioning families.

Military Families: Any family unit taking place within a military context. Family is the basic unit in society that can consist of two partners and dependent children, or any variance that is regarded equivalent to a traditional family structure.

Components of Strong Families

This review reveals ten key components of strong families that collectively leverage individual and relational strengths for healthy family development and the maintenance of the family equilibrium, while minimizing strife, pathology, and distress. The ten key components were identified through a review of the literature regarding family protective factors. The foundational basis for the components was initially created by combining the work of Benzies and Mychasiuk (2009), Black and Lobo (2008), and the Family Readiness System Logic Model (DoD, 2012) into a comprehensive list of possible factors that support strong families. From there, a thorough review of the literature supported the inclusion and adaptation of some factors that became the ten key components of strong families. Other factors were eliminated based on a lack of sufficient inclusion in the literature due to frequency or strength of findings.

The first nine components apply to a wide range of cultural contexts and family structures, and include: (1) communication, (2) emotion regulation, (3) family cohesion, (4) family recreation and leisure time, (5) financial management, (6) prosocial family values, (7) resilience, (8) religiosity and spirituality, and (9) routines and rituals. The tenth component, military readiness, is specific to the context of American military nuclear families consisting of both parental figures and dependent children or any variance that is regarded as an equivalent structure (Black & Lobo, 2008; DoD, 2012; Gardner, Huber, Steiner, Vazquez, & Savage, 2008; Saltzman, Lester, Beardslee, Layne, & Nash, 2011).



Communication

Communication involves family members sharing meaningful information amongst themselves. Family members communicate with one another in a variety of methods: verbal, non-verbal, written, and electronic messages (Shweder, Haidt, Horton, & Joseph, 2010). This component interacts with all of the other components of a strong family; however communication is particularly important as a mechanism for promoting family cohesion and resiliency (McGuigan, Vuchinich, & Tang, 2014). Effective communication has the potential to increase intimacy and connections among family members, while hurtful, angry communication can damage relationships.

Each family member has their own individual communication style that must be considered in the context of other family members and family cultural norms. Strong families have parents who teach and model effective communication, demonstrating open and honest sharing of feelings, and engaging in responsive listening. Children learn both by their parents' specific instructions and by observing parental interactions (Bosch, Serido, Card, Shim, & Barber, 2016; Kam, Castro, & Wang, 2015; Lucas & Buzzanell, 2012; Saltzman et al., 2011). Moreover, it is important to consider the role of positive communication as a strength in the couples' and parent-child's relationships.

Supportive communication has the potential to increase intimacy and connections among family members; yet hurtful, angry communication can damage relationships.

Couple. Open, honest communication between the couple is a cornerstone of strong family functioning, as it creates the foundation for how information is shared and provides a model for children. Good communication is marked by mutual, open sharing of thoughts and feelings as well as responsive listening and emotional support (Gottman, 2011). Couples can foster intimacy and strength in their relationship by showing respect, engaging in frequent conversations, listening and responding empathically, making important decisions together, and resolving the inevitable conflicts and changes that arise as part of everyday family life (Klein, Renshaw, & Curby, 2016; Melvin, Wenzel, & Jennings, 2015). This is particularly important to consider in military couples as the frequency of communication during deployment is reliant upon the availability to communicate, quality of the couple's relationship, and the stage of the deployment cycle (Borelli et al., 2013; Carter et al., 2011; Cigrang et al., 2014; Maguire & Parcell, 2015; Theiss & Knobloch, 2013). For example, Cigrang and colleagues (2014) found that relationship status, such as whether the relationship was perceived as good or in distress, was related to the frequency of communication among couples during deployment.

Parent-child. Strong families demonstrate positive communication between partners and effective communication between parents and children. Open and respectful communication benefits the child, parent, and the parent-child relationship (Kam et al., 2015; Wilson, Chernichky, Wilkum, & Owlett, 2014). Good communication within the family offers children a safe place to bring their joys, worries, and challenges to their parents; such intimate sharing strengthens the attachment bond and teaches the child that he or she can count on a parent to be available and responsive. Effective communication can provide a buffer against the development of negative or antisocial behaviors (Griffin & Botvin, 2014; Griffin, Samuolis, & Williams, 2011). Positive parent-child communication contributes to improvement in children's social competence, particularly in the areas of social problem-solving skills and social self-efficacy (Arroyo, Nevarez, Segrin, & Harwood, 2012; Leidy, Guerra, & Toro, 2012; Mancini,



Bowen, O'Neal, & Arnold, 2015; Richardson, Mallette, O'Neal, & Mancini, 2016). Thus, open, honest, and genuine communication is important in strong families and is especially important during times of transition for military families (Griffin, 2011; Griffin & Botvin, 2014; Kam et al., 2015; Leidy et al., 2012; Mancini et al., 2015; Richardson et al., 2016; Wilson et al., 2014).

Emotion Regulation

Emotion regulation refers to the ability to modulate emotional reactions to other people and stressful situations (Gottman, Coan, Carrere, & Swanson; 1998). People who regulate their emotions can cope effectively with significant challenges, and do not become easily overwhelmed or paralyzed by

Family members who regulate their emotions well can discern when it is appropriate to express emotions immediately, versus when it may be more appropriate to wait until the intensity of the situation is attenuated to address strong feelings.

emotional distress. When they encounter difficulties, they can identify and cope with strong feelings in a healthy manner. Family members with this skill can discern when it is appropriate to express emotions immediately versus when it may be more appropriate to wait until the intensity of the situation is attenuated to address strong feelings. For

example, without the ability to regulate emotions, strong feelings of anger can be expressed in an aggressive style, causing damage to both the recipient and the relationship. When the person exhibits emotion regulation and calms down and presents his or her feelings in a respectful manner, the conversation can be much more effective (Chartier, Negroni, & Hesselbrock, 2010; Gottman et al., 1998).

Couple. Gottman (1998; 2011) reported that one key predictor of divorce is emotional flooding (i.e., when one partner feels threatened and thus becomes physiologically aroused with increased heart rate, sweating, elevated blood pressure, etc.). In this flooded state, individuals who feel threatened cannot modulate their affect effectively, which often leads them to say and do things that harm their relationships. Moreover, poor emotion regulation may have additional consequences. For example, lack of emotion regulation may strengthen the link between problematic alcohol use and intimate partner aggression (Watkins, Maldonado, & DiLillo, 2014).

Couples in strong families have the ability to de-escalate their negative emotions during conflict, thus these couples are able to disengage from conflicts before they escalate and may achieve greater marital satisfaction (Bloch, Haase, & Levenson, 2014). When children are involved, the couples who are able to disengage from the conflict, and return later to resolve the issue, are modeling healthy emotion regulation and conflict-resolution skills for their children.

Parent-child. Within the parent-child relationship, emotion regulation most often manifests itself through the parents' management of their own emotions, and how each parent responds to the child's feelings. Strong families include parents who are able to understand both how and when to express emotions. This results in a parent-child relationship that is often closer and marked by less tension. In addition, this model provides children the opportunity to learn how to regulate their own emotions.

Remmes and Ehrenreich-May (2014) found that parents who used suppression to regulate their emotions had children who were less emotionally aware (i.e., difficulty labeling their own



internal emotional states). On the contrary, parents who tended to use reappraisal to manage emotions (i.e., thinking about an emotional situation in a way that makes it less intense) also tended to use emotion coaching strategies (e.g., encouragement, problem- and emotion-focused coaching) when their children exhibited negative affect.

Emotion regulation is a key component of strong families. The ability to discern when and how to express emotions can assist individual family members in building and maintaining positive familial relationships. This ability requires an acute understanding of group dynamics and family culture, as well as the ability to self-reflect about family situations and circumstances. Emotion regulation is enhanced by individuals' inter- and intrapersonal intelligence. Families benefit from each member understanding how to emote in positive ways and at appropriate times. Thus, strong families take the time to develop a shared cultural understanding about both the when and how of emotional expression and, through role modeling, teach new family members throughout the generations (DeFrain & Asay, 2007).

Deployment may play an important role in military parents' emotion regulation capacities. Exposure of one parent to combat, reintegration, and further deployment can impair parenting by negatively influencing parents' emotion regulation skills (Gewirtz & Davis, 2014; Gewirtz, McMorris, Hanson, & Davis, 2014). For example, compared with civilian mothers, deployed mothers had more difficulties in emotion regulation and parenting. These difficulties were hypothesized to be due to exposure to traumatic events that might have impaired deployed mothers' ability to de-escalate negative emotions (Xiong et al., 2013).

Family Cohesion

Family cohesion is the level of support and commitment family members have towards one another (Balistreri & Alvira-Hammond, 2016; Gonzales et al., 2012; McGuigan, Vuchinich, & Tang, 2014). This component is often reflected in supportive family involvement, family bonding, family warmth and togetherness, and family climate (Bhana & Bachoo, 2011; Mullan & Higgins, 2014; Oshri et al., 2015; Rasbash, Jenkins, O'Connor, Tackett, & Reiss, 2011). Current research supports the importance of family cohesion in couples, parent-child dyads, and sibling relationships (Aiyer, Williams, Tolan, & Wilson, 2013; Arnold, Lewis, Maximovich, Ickovics, & Kershaw, 2011; Houltberg, Houltberg, & Henry, 2012; Juang & Alvarez, 2010; Marsiglia, Parsai, & Kulis, 2009).

Family cohesion (the emotional glue that holds a family together) is enhanced by supportive family involvement.

Couple. Regardless of a couple's military status, the level of cohesion fluctuates across time and situation; committed couples strive to stay connected and share in life's joys and challenges as a team (Creech, Benzer, Liebsack, Proctor, & Taft, 2013; Frisby, Byrnes, Mansson, Booth-Butterfield, & Birmingham, 2011; Johnson & Greenman, 2006). A key component of intimate relationships is the level of connection and closeness partners feel towards each other. Relational intimacy has numerous domains, such as feeling connected via spiritual activities, physical and sexual intimacy, co-parenting, and shared leisure activities. Couples that have a strong positive relationship support one another, regularly express appreciation, communicate openly, have high levels of trust, know they can depend upon each other, and continually work at enhancing the closeness in the relationship by being responsive to each other (Asoodeh,



Khalili, Daneshpour, & Lavasani, 2010; Gadassi et al., 2016; Nicoleau, Kang, Choau, & Knudson-Martin, 2014).

Parent-child. A strong bond between the parent and child is important for family cohesion. Children are well-served when they feel a strong bond with the adults most responsible for their physical and psychological development (Shweder et al., 2010). Support from family, friends, and community are associated with military youth's psychological health and well-being, which include less anxiety, fewer depressive symptoms, greater personal well-being, and better academic performance (Lucier-Greer, Arnold, Mancini, Ford, & Bryant, 2015; Mancini et al., 2015; Richardson et al., 2016).

The bond between parent and child starts early and for this reason research on infants and newborns has proliferated. Walsh (2015) notes that family bonding manifests differently across cultural contexts. Thus, professionals who work with and on behalf of families should note how cultural factors influence the family's interactions. For example, in some African cultures, a child is held constantly for the first 30 days and never allowed to sleep in a crib or bassinet. If the mother needs rest, other female family members will hold the baby for her (Karp, 2002). Although such manifestations of parent-child bonding are uncommon in Western cultures, the importance of respecting culturally-specific forms of parent-child bonding are essential to effective family supportive services.

For example, Leidy et al. (2012) found that within immigrant Latino families, the level of cohesion was related to four distinct factors: acculturation differences between parents and children that result in a power imbalance, parental involvement in their children's education, the presence of extended family, and discrimination against immigrants and legal status. Acculturation differences were apparent, because while almost all the parents (99%) in the study (n=282) were born outside of the United States, two-thirds of the children (67%, n=144) were born inside the United States. In situations where children were more acculturated, the parents were more dependent on the children for everyday life. Parents who engage in cultural experiences associated with their new home country are more likely to promote family cohesion (Leidy et al., 2012).

Siblings. Sibling relationships can be complex, composed of multiple dyadic and triadic relationships when present in larger families. Regardless of family size, sibling relationships function according to a different set of rules and power dynamics than can be observed in other relationships within the family (Kozłowska & Hanney, 2002). For example, a sibling dyad may have a more equal power dynamic within the family than the parent-child dyad.

Campione-Barr, Lindell, Greer, and Rose (2014) found that the extent of conflict between siblings is affected by the amount of family cohesion and the parent-child relationship. Families exhibiting a strong parent-child bond tend to experience less sibling conflict among the children. This parent-child bond can impact how siblings respond to differential treatment by their parents. Specifically, parents may treat siblings differently, and siblings often observe and feel the effects of such differential treatment. Research has shown that, children who experienced a sufficient amount of family cohesion and had a positive relationship with their parent tended to rationalize the differential treatment (Brody, 2004; Campione-Barr et al., 2014; van der Pol et al., 2015). They deemed the differential treatment necessary due to age, personality, or special



needs. In this way, children did not cause conflict with each other and continued to have strong sibling-sibling bonds. However, when a child rationalized the preferential treatment of a sibling was due to a problem in the parent-child relationship, it could cause conflict between siblings. Thus, sibling cohesion appears to be greater when they are able to see a logical reason for preferential or differential treatment received from parents. Families that have strong cohesion at other levels (e.g., parent-child) thus appear to foster bonds between siblings.

Understanding the emotional connections and power dynamics between siblings, as well as the complex interactions with other family relationships, is crucial to improve knowledge of family functioning and the ability to build strong families.

Family Recreation and Leisure Time

Strong families spend time together doing activities that do not involve work or household chores. These activities can take a variety of forms and may support other family components described herein (e.g., routines, rituals, and religiosity or spirituality). Research pertaining to recreation and leisure and families has been conducted across several countries and cultural groups and, in each case, its importance to strengthening families was affirmed (Ward & Zabriskie, 2011).

Family leisure time is positively associated with more family interactions and increased satisfaction with family life (Agate, Zabriskie, Agate, & Poff, 2009; Aslan, 2009; Driver, Brown, & Peterson, 1991). Also, families who spend recreation time together tend to communicate more effectively and have greater conflict-resolution skills (Huff, Widmer, McCoy, & Hill, 2003; Wells, Widmer, & McCoy, 2004).

Family recreation and leisure time is one way to enhance family cohesion.

Family leisure time can be divided into two different categories: core and balance (Ward & Zabriskie, 2011). Core family leisure is defined as those activities that are “common, everyday, low-cost, relatively accessible, often home-based activities that many families do frequently” (Zabriskie & McCormick, 2003, p. 168). These activities are used by families to maintain stability and include experiences like playing board games, playing outside, and watching a movie together. In contrast, balance family leisure consists of “activities that are generally less common, less frequent, more out of the ordinary, and usually not home-based thus providing novel experiences” (Zabriskie & McCormick, 2003, p. 169). These activities are used by families to provide outlets for new and unique experiences and include events like family vacations, attending sporting events, and camping.

Both core and balance family leisure involvements are associated with higher family functioning, though there are some indications that core activities may contribute more than balance activities mainly because of their home-based and everyday nature (Hornberger, Zabriskie, & Freeman, 2010). In fact, parents and youth view the two types of leisure and how these contribute to strong family functioning differently (Ward & Zabriskie, 2011). Parents tend to regard both core and balance time as vitally important to family cohesion and adaptability; however, youth tend to view core family leisure as the most important type of shared leisure time, appreciating the everyday occurrences more than the less frequent special occasions. Ward and Zabriskie (2011) noted that the difference could be due to the fact that parents understand that families must encounter change in order to adapt and grow, while children crave stability in their family patterns.



Recreation and leisure time is especially important for families facing stress and constraint, such as single-parent families and military families. Single-parent families benefit greatly from family leisure activities (Hutchinson, Afifi, & Krause, 2007). They especially value core leisure activities such as reading, eating dinner, playing games, and relaxing together because these core activities provide much-needed reassurance and consistency for both parent and child and, compared to balance activities, they are more accessible for single-parent families (Hornberger et al., 2010; Hutchinson et al., 2007). Family leisure is also important for military wives during their husbands' deployment because leisure activities keep both mother and child busy, entertained, and can divert their attention from their family member's absence (Werner & Shannon, 2013).

Couple. Leisure time is important for positive couple relationships (Asoodeh et al., 2010; Harris, Skogrand, & Hatch, 2008; Wolcott, 1999). For example, participation in a couples' adaptive sport and recreation program significantly increased the marital satisfaction of Veterans and their spouses, and the Veterans' posttraumatic stress disorder (PTSD) symptoms were also decreased (Bennett, Lundberg, Zabriskie, & Eggett, 2014).

Parent-child. The parent-child relationship can also be greatly impacted by recreation and leisure time. Presence of family leisure activities has been associated with adolescent well-being (Offer, 2013). Adolescents had greater positive affect and lower stress when they ate meals together with both parents; interestingly, similar associations were found for eating meals with the father only, but not for eating meals with the mother only (Offer, 2013). Similar results have been found in other studies as well (e.g., Buswell, Zabriskie, Lundberg, & Hawkins, 2012; Harrington, 2006). Further, these studies highlighted the role of father involvement in children's psychological well-being and family functioning.

Financial Management

Strong families work hard to minimize negative stress and to cope effectively (Graber, Pichon, & Carabine, 2015). In this way, they strive to create a family culture that operates from a healthy, mutually-supportive foundation. Stress in family relationships, including couple and marital relationships, often revolves around finances (Dew, 2016; Ponnet, Wouters, Goedeme, & Mortelmans, 2013). More specifically, financial matters related to the level of family debt can be a primary source of conflict within a family.

Strong families use healthy communication and coping skills related to financial issues and work together to avoid accruing large amounts of debt (Carlson, Britt, & Goff, 2015; Prawitz, Kalkowski, & Cohart, 2013; Sheridan, Sjuts, & Coutts, 2013). Strong couples also work together to build up family assets (Dew, 2016). The larger the amount of financial assets available to a family, the less likely they are to divorce (Dew, 2016). Thus, avoiding debt and building financial stability within the family can lead to greater relationship stability.

Finances can be a source of stress in families, and differences in decision-making about money can create conflict in couples. Strong families talk openly and work together to manage finances, striving to maintain some reserves for potential unexpected crises.

While financial matters generally are discussed and resolved between the adult members of the family, research shows that parents are children's primary source of financial education (Drever et al., 2015). Involving youth in financial discussions, in appropriate ways, can be an avenue for families to teach



children the responsible attitudes and behaviors that can prepare them for long-term financial health. In this way, parents also benefit from role modeling the behaviors and attitudes they are teaching their children (Totenhagen et al., 2013).

Totenhagen and colleagues' 2013 report on youth financial readiness highlighted nine topics that youth often learn about in their families that include: budgeting and saving, investing, credit knowledge, financing and debt, taxes, insurance, banking and financial services, goal-setting and decision-making, and fraud and identity theft. In addition, parents can teach even very young children some foundational financial skills, including an understanding of numbers, money, good decision-making, and the fair exchange of money for labor. Strong families work to develop responsible habits in their children, which could empower them with effective tools to use in their future family units.

Most families have difficulty talking about financial matters and these discussions may increase stress, anxiety, and conflict between couples. However, couples who communicate openly and work together can manage stressful or unexpected financial matters as a team (e.g., the couple has some reserves to manage unanticipated expenses such as car maintenance; Sheridan et al., 2013). In addition, both parents and children benefit from a family culture that includes financial discussions and the development of healthy financial habits. Overall, Griffith (2015) notes that military families who received support from their unit chain-of-command and other available financial support reported less financial difficulties and an increase in overall well-being.

Prosocial Family Values

Parents teach their children about family norms and values both verbally and nonverbally. How families spend their time, treat each other, help others, and work together when challenges arise communicates individual and family values (Lewis, Jones, & Barrett, 2008). Strong families tend to communicate prosocial family values including positive behaviors and how to be a productive part of society (Agaibi & Wilson, 2005; Black & Lobo 2008).

Prosocial family values can help prevent children and especially adolescents from engaging in negative or antisocial behavior.

Every family's value system is shaped by the cultures in which they live and interact. For example, Knight, Carlo, Basilio, and Jacobson (2015) found that the endorsement of familism values by Mexican American youth led to higher level of perspective taking and prosocial moral reasoning, which in turn predicted higher prosocial tendencies. Professionals working with families must appreciate the family's uniqueness, while simultaneously promoting prosocial values that research has found to be helpful to family functioning.

Research has found that prosocial family norms and values can act as a protective factor against children engaging in negative or antisocial behaviors (e.g., risky behavior, sexual activity, smoking, substance use), particularly during adolescence and among minority youth (DiClemente et al., 2001; Gonzales et al., 2012; Kumpfer & Alvarado, 2003; Li, Stanton, & Feigelman, 2000; Telzer, Gonzales, & Fuligni, 2014). For instance, Telzer and colleagues (2014) found that family obligation values (e.g., children's feeling that they should assist with chores and spend time with family) were protective and related to lower level of youth substance use, probably because adolescents would be less likely to associate with deviant peers and more likely to communicate with parents.



Prosocial family values are often delivered from parents to children through parental guidance and role-modeling. Parental communication about expectations and values are associated with adolescents' empathy and prosocial behaviors (Mesurado et al., 2014), and it is a powerful influence when children are making social decisions on whether to engage in risk-taking activities (Griffin et al., 2011). In addition, parents who model prosocial behaviors tend to have children who are more likely to give and volunteer, and less likely to smoke, drink alcohol, or use other drugs (Griffin et al., 2011; Ottoni-Wilhelm, Estell, & Perdue, 2014).

Prosocial family values provide the basis for many campaigns related to risky behaviors (Barr et al., 2012). For example, public awareness campaigns regarding distracted driving or sexual behavior explicitly request parental assistance in both communicating prosocial family norms and then creating appropriate consequences for children when they engage in risky behaviors (Griffin et al., 2011; Hawkins, Catalano, & Miller, 1992). Adults who communicate prosocial family values are not only more likely to have children who do not engage in risky behaviors, but they are simultaneously strengthening two other components: family cohesion and communication (Lochman & van den Steenhoven, 2002). It is worth noting that the quality of the parent-child relationship is a key factor in predicting children's prosocial behaviors. Children who are securely attached stay close to their parents while still feeling respected as separate individuals; these children are most likely to endorse their parents' prosocial values (Telzer et al., 2014; Yoo, Feng, & Day, 2013).

Resilience

Resilience relates to families' ability to adapt to change. Some common challenges that families face include parenting children from birth to adulthood, caring for an aging family member, or adjusting to parental deployment (Henry, Morris, & Harrist, 2015; Wilson et al., 2014). Strong families are able to maintain relative equilibrium as they manage both the more common day-to-day challenges and those that are more unique to each family's experience (Bhana & Bachoo, 2011; Boon, Cottrell, King, Stevenson, & Millar, 2012; Rosenberg et al., 2014; Walsh, 2015; Wright & Masten, 2015). Researchers have identified a number of family characteristics that promote resilience during change (Bermudez, 2012; Bhana & Bachoo, 2011; Rosenberg et al., 2014; Walsh, 2015). These characteristics overlap with other characteristics of strong families reviewed in this brief, including effective communication, problem-solving skills, as well as valuing family time. Families that maintain the belief that strength is centered in relationships and that it is normal to feel distress in response to change and challenge also tend to weather change more readily. This is also true for families who maintain a positive outlook despite distress. These families are able to accept things that cannot be changed, while maintaining routines and rituals that build continuity and stability in spite of change and challenge. In addition, families that are resilient to change generally have adequate social and economic resources.

These resilience-promoting characteristics can be seen throughout the family system. Healthy couples are able to be flexible and adapt as a team to new circumstances in the event of transitions or change, such as a military deployment or a permanent change in duty station (Asoodeh et al., 2010; Gottman, 2011; Melvin et al., 2015; Owen, Manthos, & Quirk, 2013). Within the parent-child relationship, healthy parents encourage children's adaptive responses to change, are responsive to children's distress, and access needed social and economic resources that enable the family to maintain an equilibrium (Drever et al., 2015; Gewirtz & Youssef, 2016; Wilson et al., 2014; Wilson, Wilkum, Chernicky, MacDermid Wadsworth, & Broniarczyk, 2011). Resilience is vital for individuals and families to be able to deal with inevitable changes that will happen. This is also true for military families who face various changes and



transitions (Parcell & Maguire, 2014). Strong families will strive to be resilient in adapting to everyday changes and not just when extreme situations or traumas occur.

Religiosity and Spirituality

Families that engage in religious or spiritual activities are promoting healthy development. Although no universal definition exists for these two terms, Moberg and Brusek's (1978) research continues to be widely cited by scholars who study the impact of religion and spirituality on individuals. Moberg and Brusek (1978) stated that spiritual well-being was comprised of two dimensions. The first dimension is one's relationship with a higher power within a system of religious beliefs (i.e., religiosity). The second dimension is one's sense of meaning and purpose in life, apart from any specific religious framework (i.e., spirituality).

Couple. Religiosity and spirituality provide a context from which couples can view marriage and parenting as an important institution that deserves their attention. This can lead to better family interactions and cohesion, while decreasing the risk of divorce, marital conflict, infidelity, domestic violence, and child physical abuse (Olson, Marshall, Goddard, & Schramm, 2015). It can also increase marital satisfaction and positive parenting practices by providing a common language and foundation for a shared family culture (Mahoney, 2010). Couples who have a shared sense of spirituality often use this component as a foundation for leisure time activities and communication (Agate, Zabriskie, & Egget, 2007; Asoodeh, et. al, 2010; Wolcott, 1999). Moreover, religious beliefs and practices such as shared religious views (homogamy), prayer for spousal well-being, and forgiveness can buffer against risk factors in marriage, including parental divorce, high stress, and premarital cohabitation (Olson et al., 2015).

Parent-Child. Parental involvement in formal religious organizations is a predictor for positive parent-youth relationships (Brody, Stoneman, Flor, & McCrary, 1994). Parental involvement in a religious organization increases parental supervisory, affective, and disciplinary practices within the relationship (Mahoney, 2010). These positive effects between parent and child may be related to the framework that religion and spirituality provide that reinforces familial structures, providing a common understanding for the parents and the children (Mattis & Jagers, 2001). Youth who attend religious services with their parents are more likely to have greater psychological well-being throughout adolescence, and the more often pre-adolescents attend religious services, the more well-being they experience because of better parent-child relationship (Petts, 2014).

In addition, having an active religious or spiritual life decreases negative behaviors in adolescents (e.g., substance abuse, early sexual involvement, delinquent behavior, etc.) and negative interactions between parents and children (Mattis & Jagers, 2001). For example, researchers found that religiousness might have been a protective factor that prevented teenagers from using drugs, alcohol, and cigarettes in the presence of harsh parenting, and it might also have prevented adolescents with poor self-control from using illicit substances (Kim-Spoon, Farley, Holmes, & Longo, 2014).

Religion is important for military families in particular. One study at a military medical center revealed that, compared to civilians, this sample of military medical center patients were more likely to believe in God, attend religious services once a week or more, and endorse a Christian religious affiliation



(McLaughlin, McLaughlin, & Van Slyke, 2010). One possible reason that military personnel and their families were found to be more religious than civilians in the study might be that they needed religion as a coping method to deal with the stress and uncertainties associated with deployment (McLaughlin et al., 2010).

Routines and Rituals

Families have both routines (regular, everyday activities such as mealtimes) and rituals (specialized activities around specific events, such as a Bar Mitzvah or family reunion). These routines and rituals play an important role in increasing predictability in family life, providing opportunities for regular communication, and strengthening the cohesion in relationships through the celebration of life events (Walsh, 2015).

Routines are a component of strong families that impact couples, parents and children, and siblings in a similar fashion. Irrespective of the specific dyad, routines can work towards creating a positive family culture (Black & Lobo, 2008; Foster, O' Brien, & Korhonen, 2012). For example, couples may start a routine of reading the Sunday newspaper together or attending weekly religious services. Parents and children may develop daily routines that provide a pathway for strengthening their bond (e.g., a bedtime routine). Finally, siblings may choose to develop routines together that can strengthen their relationship, such as joining a club or having a regular movie night. The overarching goal of routine is to provide family members structure and comfort and act as a buffer against times of stress (Meadows, Griffin, Karney, & Pollak, 2016; Walsh, 2015).

Family rituals and routines can support positive family interactions and protect against adversity.

Similarly, developing a set of family rituals can be a way to have specific times for the family to be positive and celebratory of its individual members. These rituals can be long-honored traditions based on numerous contexts including cultural, religious, or civic holidays. However, they can also be created specifically for the family in relation to particular events, such as when a child gets a driver's license, celebrates a special birthday, or graduates from high school. For military families, Crow and colleagues (2016) reflected on the importance of maintaining and recreating family rituals and routines throughout all transitions of military life, such as the reintegration of a deployed parent.

While many families benefit from routines and rituals, they also can serve as a very strong protective factor for disadvantaged immigrant families (Masten & Monn, 2015; Smokowski, Rose, & Bacallao, 2008). Smokowski and colleagues (2008) found in a sample of recent Latino immigrants to the United States that routines and rituals were a particularly important factor to counteract the negative stresses associated with moving to a new country. Further, adolescents, whose families continued culture-of-origin routines and rituals, experienced more positive development as measured by familism, adaptability, and reduced parent-adolescent conflict than their peers whose families did not maintain cultural routines and rituals.

Family routines and rituals serve an important role, as the routines and rituals provide structure and predictability, as well as protect against other negative life experiences. Strong families have developed appropriate routines and rituals that serve as a means for strengthening family cohesion and encouraging open communication.



Military Readiness

This component of strong families is particular to the context of the American military. Saltzman et al. (2011) used the term military readiness to refer to the abilities of military families to acclimate to the military life cycle, including notification of deployment, absence of the Service member(s), and reintegration of the Service member(s) into the family unit. Military deployment is an important issue for families, both for Active Duty as well as Reserve and National Guard Service members whose experiences involve some distinct differences (Burland & Lundquist, 2013). Some Service members have been greatly impacted by a high operational tempo, repeated deployments to dangerous combat zones, high exposure to potentially traumatic events, and short time periods between deployments (Huebner, Mancini, Wilcox, Grass, & Grass; 2007). For some young families, the Service member may have been away for much of his or her children's lives. Research is beginning to document the impacts of these deployments on the entire family system (Creech, Hadley, & Borsari, 2014).

Couple. Deployment separation is often perceived as a stressful life event, and it is usually associated with higher spousal stress; therefore, effective coping strategies are needed to increase marital satisfaction. Optimistic (i.e., positively thinking about the situation) and confrontive (i.e., addressing the situation and positively solving problems) coping styles are associated with less spousal stress during deployment (Padden, Connors, & Agazio, 2011). In addition, military wives who experienced a previous deployment separation or were raised in military families experienced less stress than military wives with no separation experience (either through deployment or being raised in a military family). This difference is probably due to enhanced abilities to handle the situation and solve problems, and their expectations were more realistic (Padden et al., 2011). Online communication and social media may also be an effective tool for maintaining romantic relationships during deployment (Rea, Behnke, Huff, & Allen, 2015).

Strong families are particularly relevant to military readiness, in which military families are regularly challenged to weather notifications of deployment, absence of one or more family members due to deployment, and reintegration into the family unit upon return from deployment.

Reintegration after deployment is also an important stage for military couples as they readjust to their roles and renegotiate their daily routines. Although limiting self-disclosure and acting aggressively may be protective and adaptive measures that help Service members complete their missions, during the reintegration stage, the key to a healthy relationship is to have open and calm everyday conversations (Theiss & Knobloch, 2013).

Parent-child. Military parents often believe that their children are too young to understand deployment. However, even small children may benefit greatly from adequate preparation for the upcoming deployment (Paris, DeVoe, Ross, & Acker, 2010). Pre-deployment child-focused preparation strategies include: attachment-focused (e.g., Service member records a video or the family takes pictures of the Service member holding children), information-focused (e.g., read books about deployment, or look at a map to identify where Service member would be during deployment), and paying it forward (e.g., Service member increases fun activities with children or increases caregiver duties). Preparing young children for the upcoming deployment lowered the parental stress during reintegration, and it also made it easier for the at-home caregiver to



include the deployed parent in the child's daily life (Louie & Cromer, 2014). Therefore, families need information about how to prepare their children in age-appropriate ways for the deployment.

Military families may face other unique situations attributable to military culture. For example, these families may experience a move due to the Service member's relocation. Relocations are especially challenging for school-age children and adolescents as they must adapt to new school environments and, at the same time, establish their own identity and self-concept (Milburn & Lightfoot, 2013). Therefore, it is important for military children to develop some coping strategies to help them adjust to the new school environment, such as being more social and outgoing and developing better communication skills. For military families that experience multiple relocations, it is critical to consider how to build, maintain, and enhance strong family components within a military culture.

Assessing Family Structures

Beyond understanding the theoretical frameworks and key components that influence strong family functioning, it is also important to consider the heterogeneity of family units. Each family is unique, and incorporating an understanding of the range of family environments can be useful. Professionals who work with and on behalf of families can consider the functioning of a specific family, including both their unique strengths and potential obstacles that may impede change or growth.

Although the family structure has evolved dramatically over the past few decades with many more children growing up in single-parent households (Child Trends, 2015), the family social climate is more important than its structure in shaping overall well-being (Phillips, 2012). Moos and Moos (1976) offer a framework within which to understand a family's social environment using the following six broad categories, which are presented below in the order originally described by the authors. It is important to note that although families may exhibit elements of multiple orientations, most families have a dominant orientation.

Expression-oriented

Individuals in an expression-oriented family are encouraged to directly express their feelings (Moos & Moos, 1976). Although expression-oriented families are successful communicators, there is very little emphasis on structuring family activities. Family members may feel a lack of clarity with regard to rules and responsibilities (Moos & Moos, 1976). Other theories have documented the benefits of open communication in families, including having healthier, more rewarding relationships (Baxter & Pederson, 2013; Koerner & Fitzpatrick, 2002), more positive family communication patterns, greater positive personal growth, and decreased feelings of detachment, especially when approaching difficult conversations (Keating, Russell, Cornacchione, & Smith, 2013). Although these families emphasize expressiveness, direct expression of anger and conflict are discouraged.

Although families may exhibit elements of multiple orientations, most families have a dominant orientation.

Structure-oriented

Structure-oriented families emphasize clearly-established family rules and responsibilities. They tend to engage in highly-organized, well-planned family activities. These families have a



hierarchical structure of family organization, but control is not manifested in a rigid autocratic manner (Moos & Moos, 1976). While culture and gender norms may influence familial hierarchies (Jennings & Waller, 1990), structure-oriented families are strongly committed to a family unit and members are mutually supportive.

Independence-oriented

Independence-oriented families tend to be assertive and self-sufficient, making their own decisions rather than relying on external supports (Moos & Moos, 1976). Families with this dominant social environment may have parents with well-developed self-regulatory skills; they employ positive, non-abusive, nurturing parenting practices that result in healthy, mentally competent children (Sanders & Mazzucchelli, 2013). Fostering self-control can be useful, as it has been found to be predictive of higher grade point averages, fewer reports of psychopathology, higher self-esteem, less binge eating and alcohol abuse, and better interpersonal skills, (Moffitt et al., 2011; Tangney, Baumeister & Boone, 2004). Overall, independence-oriented families demonstrate substantial cohesion and unity, and they encourage the open expression of all feelings, including anger and conflict (Moos & Moos, 1976).

Achievement-oriented

Achievement-oriented families emphasize specific activities (e.g., school, work) as part of a competitive framework. These families focus on working hard and getting ahead in life (Moos & Moos, 1976). These families may also possess cultural and psychological factors that support striving for upward mobilization (Hill & Torres, 2010). These families may seek to use talents and intelligence as opportunities for advancement.

Moral or Religious-oriented

Moral or religious-oriented families may emphasize ethical and religious issues and interest in intellectual and cultural activities (Moos & Moos, 1976). While family involvement in broader cultural and religious activities can be useful in expanding youth's horizons, religious involvement may decrease involvement in secular civic activities because they are deemed a threat to the family's welfare (Kim & Wilcox, 2013; Dollahite & Marks, 2009). However, some moral or religious oriented families have a more compartmentalized approach with religious orientation not necessarily influencing other family recreational, leisure, intellectual, or cultural activities (Bloom, 1985).

Conflict-oriented

Conflict-oriented families may have a high degree of conflictual interaction and emphasize the outward expression of anger and aggression (Moos & Moos, 1976). Such overt expression of anger between spouses or in parent-child relationships can model unhealthy modes of conflict resolution, and can result in children justifying their own aggressive and other problematic behavior (Jouriles, Vu, McDonald, & Rosenfield, 2014). Further, nonphysical expressions of conflict have been found to relate to behavioral, emotional, social, academic and health problems among affected children (Cummings & Schatz, 2012). Families that are conflict-oriented are characterized by distant relationships and a lack of mutual concern, commitment, helpfulness, and support among family members (Moos & Moos, 1976).



Differences in families' social orientations have been found to correlate with systematic variability in a range of factors (e.g., ethnicity, patterns of substance use; Moos & Moos, 1984). Service providers may utilize this information in determining distinct interventions, and different timelines within which the families may make changes. Therefore, families need different types of programs and resources to fit their particular orientation. The interventions that are effective in one family may or may not work for another family. Furthermore, a family may proceed through the change process at a faster or slower pace due to their dominant orientation and other factors specific to each family. Programs will increase the likelihood of success for a wide range of families when they consider these differences in all phases of service provision, from the development of curricula to implementation to program evaluation.

Bloom (1985) furthered the research on the importance of a family social context by integrating several measures of family functionality into one assessment with three dimensions: relationship, personal growth, and system maintenance. This assessment of family functioning can assist with understanding families' assets and areas for further development. According to Bloom (1985), strong families have a strong interrelationship orientation, a willingness to grow, and a flexible system maintenance structure. Families that are high on these three dimensions are likely more nimble and successful in navigating significant changes.

Informal and Formal Network Support

The theoretical work by Moos and Moos (1976) and Bloom (1985) enables professionals working with and on behalf of families to discern variability across families and to consider factors that may affect families' ability to make changes. Providers who understand the uniqueness of each family can guide programmatic efforts to increase the potential for a family to be successful in making and sustaining positive change. However, another important factor that can assist a family in making substantive behavior change is the presence of both formal and informal network support.

Bloom (1985) furthered the research on the importance of a family social context by integrating several measures of family functionality into one assessment with three dimensions—relationship, personal growth, and system maintenance.

Families do not exist as independent, self-sufficient systems. Rather, families exist within communities that can serve as support systems for these families (Huebner, Mancini, Bowen, & Orthner, 2009). Families need ongoing support in order to work effectively in an interdependent manner with other individuals, families, groups, organizations, agencies, and communities (Bronfenbrenner, 1994). As families embark on making change, they often draw upon both informal and formal networks for assistance. Individual members of a family's formal network are based on a "role and position, and often reflect[s] obligation or duty" (Mancini, Martin, & Bowen, 2003, p. 324). Within the military, a formal network can be defined as "a network that reflects the policies and systems operating under military or civilian authority as instruments of socialization and support" (J. Dekle, personal communication, 2014). Formal networks include governmental agencies, for-profit and non-profit organizations, civic organizations, schools, hospitals, faith-based organizations, and others; they support the needs of both individuals and families (Huebner et al., 2009). An informal network includes relationships with "work associates, friends, neighbors, voluntary associations, and other collective relationships that are entered into and maintained voluntarily" (Mancini, Martin, & Bowen, 2003, p. 324). They are further defined in a military context, as "the associations, interactions, exchanges, and connections that people and families



make in everyday life, including group associations and less organized networks of personal and collective relationships” (J. Dekle, personal communication, 2014).

Both informal and formal networks may serve important roles that support families seeking to make positive change. An example of this can be found in thinking about a family that is unaware of an existing problem, referred to later in this paper as the pre-contemplation stage. In many cases, extended family members, neighbors, or co-workers are aware of the issue and may provide feedback about the potential benefits of change to raise consciousness (Prochaska, DiClemente, & Norcross, 1992). Families may use both formal and informal networks as resources in gathering this information, weighing the advantages and disadvantages of change, and defining plans of action. Members of a family’s informal and formal networks can be persuasive in encouraging families to make specific changes. Individuals within informal networks can offer advice, be role models, work together to problem-solve, and provide emotional support during this information gathering period. Individuals within formal networks may provide direct support in a variety of methods, including teaching a course or providing informational materials for family support. Both formal and informal support networks can also provide accountability to families making changes. Families going through change processes are often encouraged to tell others about their plans and to seek support in making positive small steps. When families make such intentions public, others in their formal and informal networks can help them move forward with their commitments.

While formal and informal networks are useful for families engaging in a change process, families may alternate between the two sources of support. For example, a military family that seeks to improve its military readiness may begin by seeking advice from close family members and friends. At first, family members may feel most comfortable learning from others who have been through the same situation as them. However, families may need additional support from formal networks that can provide information about resources that are available from a specific military program or agency.

One challenge for families in using their informal and formal support networks is understanding how to best utilize resources to maximize their chances for a positive outcome. For example, a faith-based organization (e.g., church, synagogue, mosque) may serve as a source of informal support for a family in

Families may use both formal and informal networks as resources in gathering this information, weighing the advantages and disadvantages of change, and defining plans of action.

distress. The family may have relationships with the organization’s staff such that spontaneous, supportive, helpful conversations occur. However, families may use the same religious organization as a formal network for support (e.g., daycare, a food shelf, other resources). In sum, informal and formal networks are interrelated and need to work together (Mancini et al., 2003); they can provide needed support to families during difficult times. Both the families and other members of support networks need to clearly understand

what the expectations are for support, whether the network is serving in an informal or formal capacity, and what the levels of accountability and responsibility are for assisting the family in need.

In summary, making sustainable change within a family structure can be difficult, both for individuals and families as a whole. Families do not function in a vacuum and often benefit from numerous sources of support, both formal and informal, to ensure long-term success.



Frameworks for Behavior Change

Families acquiring, developing, or sustaining changes need support structures but those structures alone are not enough. Families also need a process for making change that develops new behaviors and habits and discards old ones. Numerous theories exist to explain behavior change. Theories range in focus from the individual to the interpersonal to the community and group level (Glanz, Rimer, & Viswanath, 2008). Examples of individually-focused theories include the health belief model (Rosenstock, Strecher, & Becker, 1988), the information-motivation-behavioral skills model (Fisher & Fisher, 2002), and the Transtheoretical Model of Behavior Change (Prochaska et al., 1992). Interpersonal models include social cognitive theory (Bandura, 1986) and the theory of planned behavior (Ajzen & Driver, 1991). Community- and group-level models include the natural helpers' model (Eng & Parker, 2002) and the diffusion of innovations theory (Rogers, 1995). Common themes that span across the theories reveal the following eight components of behavior change (Bartholomew, Parcel, Kok, & Gottlieb, 2011):

1. Commitment to perform the new behavior
2. Absence of environmental constraints deterring behavior change
3. Possession of necessary skills
4. Belief that the behavior change will result in a better outcome than no change
5. Greater social pressure to change the behavior than not to change
6. Expectation that the behavior change will foster greater alignment with personal norms and standards
7. Positive emotional reaction to the new behaviors
8. Self-efficacy to perform the behavior in a range of circumstances

Theorists posit that the first three of these elements are necessary and sufficient for behavior change, while the other five impact the direction and strength of the behavior change.

The Transtheoretical Model of Behavior Change (TTM) model provides a holistic framework within which to consider how families can develop the ten key components of strong family functioning. This model is innovative because it integrates both the “when” and the “how” of behavioral change. Previous researchers only focused on how one underwent a process of change or the timing of the process of change. The TTM model also merges theoretical constructs from several different models and researchers (Prochaska, 1979; Prochaska, DiClemente, Velicer, Ginpil, & Norcross, 1985). In addition, this model has been empirically tested across a range of health indicators and behaviors (Prochaska, Redding, & Evers, 2008), diverse populations, and various types of systems and organizations (Evers et al., 2006; Mundorf, Redding, & Prochaska, 2013; Prochaska, Prochaska, & Levesque, 2001; Sherman & Carothers, 2005). Furthermore, it applies to both the adoption of healthy behavior (e.g., regular physical exercise) and the elimination of maladaptive behaviors (e.g., nicotine use). The five stages of behavior

The TTM model provides a holistic framework within which to consider how families can develop the ten key components of strong family functioning.

change, described below and in Figure 1, reflect individuals' progression through specific challenges and tasks. Interventions can thus be matched to individuals' needs at the time, thereby increasing the likelihood of further positive change.

As outlined below, the stages of behavior change are also embedded in a theory of 10 process strategies that detail how change occurs. People may enter the change process at any stage



and, as often occurs with human behavior, people sometimes regress to previous stages, which is incorporated into this model. Finally, although none of the theories that emerged in the literature review specifically focused on the behavior change process of families, this framework includes the role of support persons across the stages and process strategies, thereby lending itself readily to a conceptualization of family change.

Integrating a theory of behavioral change into the conceptualization of how to create strong families is important. Families tend to take a similar approach to the acquisition, development, and sustenance of skills, and this process would apply to the ten key components of strong family functioning as well. In other words, if a family wanted to have better communication, it would employ similar strategies for improving this domain as it would be to increasing their financial stability. The specific action steps for improvement vary depending upon the particular issue, but the general approaches are similar across domains. Therefore, this section focuses on the behavior change process that best supports the development, growth, and sustainability of the key components for strong family functioning.

Stages

Various stage models suggest that the change process proceeds across the broad phases of gathering information, developing new habits and behaviors, and maintaining the changes. Helping professionals need to assess a family's current level of readiness for change and then match the appropriate intervention, program, or information to encourage progression to the next stage of behavior change. The TTM model is used as the primary framework for describing the process of behavior change for families; however, relevant literature from the fields of behavior change and goal setting are also incorporated.

People move through the following five stages when making change: pre-contemplation, contemplation, preparation, action, and maintenance (see Figure 1).

Figure 1. Five Stages of the Transtheoretical Model of Behavior Change (Prochaska & Velicer, 1997).



Pre-contemplation. The primary characteristic of the pre-contemplation stage is a complete lack of awareness that a change is needed (Prochaska et al., 1992; Prochaska, Prochaska, & Levesque, 2001). Weinstein, Sandman, and Blalock's (2008) research on health promotion behavior similarly highlights problem recognition as a necessary precursor for long-term behavior change.



For example, strong families practice open, honest, and effective communication skills, which in turn fosters other key components of strong families such as cohesion and resiliency (Kuhl et al., 2014). However, it is possible that while a family has good verbal communication skills, a family may demonstrate incongruent, conflicting nonverbal communication messages. Until a family becomes aware that a problem exists with their communication, they are not ready to make changes.

Contemplation. Once a family understands that a change needs to be made, they have entered the second stage: contemplation. During this stage, a family recognizes that a problem exists and considers taking action; however, they lack a commitment to actually implementing new behaviors leading to change (Prochaska et al., 1992). Rogers (1985) also noted that understanding an issue needs to be addressed and having the intention to do so are important in making sustainable behavior change. The hallmark of the contemplation stage is the willingness of a family to acknowledge the existence of a problem and to seriously consider that change may be needed.

When facing change, families acquire information; develop and implement well-functioning behaviors and practices; and sustain those new-found behaviors and practices over time.

For example, many families maintain busy schedules, which can limit the available time for recreation and leisure (Ajzen & Driver, 1991). In the contemplation stage, families are aware of the problem but they might lack the information needed to institute actions to make effective change. They might wish to spend more quality time together as a family but do not create new rituals allowing for positive family interactions. Families may be ambivalent about instituting regular family activities, given the constraints such as busy schedules or a wide range of interests among family members.

Preparation. In this stage, a family decides it is ready to take action and plans to do so within a short time frame (Prochaska et al., 1992; Sarkin, Johnson, Prochaska et al., 2001). Theorists agree that the convergence of attitudes and thoughts with behaviors is a key step in the behavior change process (Schwarzer, 1999). Once the commitment to change is made, family members can work together to prepare for the new behaviors.

For example, if a family is confronted with a financial crisis, chances are high that they will either recognize a problem exists and move into this stage willingly, or be forced into this stage by external forces such as a bank or mortgage company. Strong families minimize stress related to financial issues and proactively take action to accrue assets to maintain financial stability. In addition, families who are building robust financial portfolios have to assess financial concerns and be willing to take action to move in a positive direction.

Action. This phase is marked by actual implementation of change, evidenced by altered behavior(s) (Prochaska et al., 1992). The role of practice in creating new healthy behaviors has been well-documented (Locke & Latham, 2002; Webb & Sheeran, 2006; Weinstein et al., 2008). Relative to the family context, now that the family has identified the issue and made a plan, they now work together to implement change. Families generally have an agreed-upon measure of success, and they strive to reach this goal over the course of several months.

For example, a family decides it wants to place more importance on religious or spiritual activities; they decide to attend weekly religious services and go out to lunch afterwards as a family. This family decided a change was needed (religion became a more central focus), decided on a plan (explored the location



of timing of local services), and started attending together. In so doing, they were simultaneously incorporating more than one component of strong family functioning into their change efforts. Although the primary focus was on religiosity and spirituality, the family also incorporated a routine (going out to lunch afterwards), spent more leisure time together, modeled prosocial family values, and promoted family cohesion, all of which contributes to the growth of a strong family.

Maintenance. In this final stage, families work to avoid relapsing into a previous stage. Maintenance may last anywhere from six months to a lifetime depending on the behavior change. This is often not a passive stage, but one that may require continued vigilance and energy (Prochaska, 1979; Prochaska & DiClemente, 1983; Weinstein et al., 2008).

Using the previous example of a family who wanted to increase the importance of religious and spiritual components into family life, this stage requires that families actively work together to maintain the new behavior. For example, family members might hold each other accountable for missing a religious service or they might institute a reward system for keeping up their newly created routine. Also, they may rearrange social engagements that would interfere with regularly attending services as a family.

In sum, strong families are not spontaneously created, and even strong families regularly make changes to better themselves. When facing change, families acquire information (pre-contemplation and contemplation stages), develop and implement well-functioning behaviors and practices (preparation and action stages), and sustain those new-found behaviors and practices over time (maintenance stage).

For service providers and those working with and on behalf of families, it is not enough to know when change is occurring; it is also of vital importance to know how the change is happening. To explain how families move from one stage to the next, the TTM framework documents ten process strategies that are matched to the particular stages to promote progression and avoid relapse.

Process Strategies

Process strategies are the activities used to propel people through the stages of behavior change (Prochaska & Velicer, 1997). The ten process strategies are: consciousness-raising, dramatic relief, environmental re-evaluation, social liberation, self-re-evaluation, self-liberation, helping relationships, counter-conditioning, reinforcement management, and stimulus control (see Figure 2).

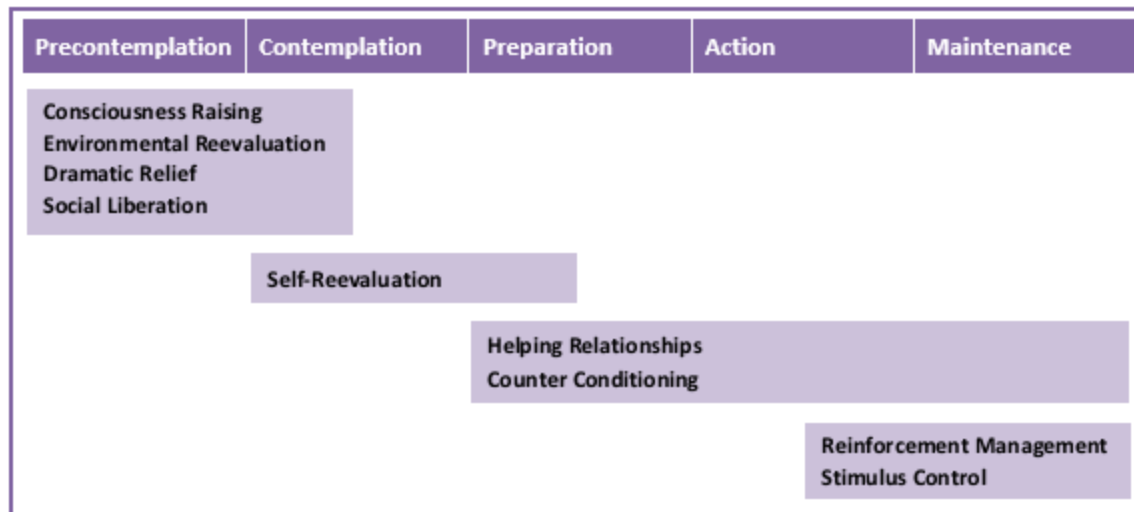
As part of the pre-contemplation and contemplation stages, families use four key strategies as they become aware that a behavior change may be useful, including consciousness-raising, dramatic relief, environmental re-evaluation, and social liberation (Prochaska et al., 1992).

The consciousness-raising process strategy consists of a family gathering information and educating themselves about the issue. Often, particularly during the pre-contemplation phase, this information comes in the form of feedback from individuals outside of the family. In this process, families are reflective and insightful, gathering feedback regarding unhealthy behaviors and the potential benefits of adopting more positive behaviors. The dramatic relief process strategy uses the emotions associated with behaviors to make change. For instance, a person may feel inspired when hearing how others have successfully made difficult changes; they may feel anxious as they consider the detrimental effects of continuing the unhealthy behavior. These emotions can spur families forward in contemplating real change. Environmental re-evaluation is a process strategy that involves a family realizing how their



unhealthy behavior affects others and the possible positive outcomes of change (Ajzen & Driver, 1991; Gibbons, Gerrard, & Lane, 2003). Parents may feel more motivated to make difficult changes when they consider the benefits for their children. Finally, the social liberation process strategy helps families see that change is needed by highlighting society’s support of the healthy behavior. For example, many campaigns target family wellness through healthy diet and exercise. Societal messages emphasize how eating at home, consuming healthy foods, and eating together are all important to overall family functioning (<http://www.letsmove.gov/white-house-task-force-childhood-obesity-report-president>). When families hear these consistent messages, they are more apt to consider making positive changes.

Figure 2. Interaction of TTM stages and strategies (Prochaska & Velicer, 1997).



These four strategies are important as families begin to change, but each is operationalized differently depending on the family’s social orientation and the specific component of strong family functioning being addressed. For example, a family may not be aware that they lack family cohesion until their young children begin socializing with peers and forming extra-familial relationships. Children may return from friends’ homes and ask parents why their family doesn’t eat dinner together, do not have regular family meetings, or why parents do not attend children’s extracurricular activities. In this way, the issue is identified and a family can decide if and when it will move to the preparation stage.

As families progress from thinking about changing a behavior (contemplation) to preparing an action plan (preparation), the strategy of self-evaluation (family-evaluation) becomes important (Prochaska et al., 1992). As families acknowledge a problem and consider change, they must be able to foresee the benefits of a different behavior. Drawing on the above example about family cohesion, this strategy of family-evaluation offers a family the opportunity to envision how they could engage in cohesive activities and anticipate a positive impact on the family climate.

As families move from the preparation stage to the action stage, they use the strategy of self-liberation (family-liberation). This strategy is defined as believing in one’s ability to change and making the commitment to act on that belief (Prochaska & DiClemente, 1983). This criterion is a key component of the theory of planned behavior, which notes that an individual’s assessment of the ease or difficulty associated with change is important to implementing action steps (Webb & Sheeran, 2006). Extending this concept to families, it is imperative that families believe they can enact change together and that



they commit to this idea. For example, families wishing to increase their religiosity or spiritual lives could set a realistic goal of weekly church or house of worship attendance as a family over the next three months, rather than setting unattainable goals which might result in failure.

The process strategies of helping relationships and counter-conditioning are employed by families in the preparation and maintenance stages. These two strategies help families transition from thinking about making change to taking action. The helping relationships strategy involves finding people who are supportive of the family's change (Eng & Parker, 2002); these supportive people can include extended family members, friends, both formal and informal support networks, and professional assistance. Counter-conditioning requires families to substitute healthy behaviors and thoughts for unhealthy ones (Prochaska & DiClemente, 1983). For example, a couple struggling with communication may seek couples therapy to assist in making positive changes; they may also commit to refraining from name-calling and put-downs and instead foster respectful, open lines of communication.

Families who progress to the maintenance stage utilize the final two process strategies, namely reinforcement management and stimulus control. These strategies increase their chances of remaining in the maintenance stage and not relapsing (Prochaska & DiClemente, 1983). The reinforcement management strategy relies on the principle that positive behavior yields family rewards, and negative behavior yields negative outcomes for a family. This concept is similar to the prototype-willingness model of behavior change that posits that the social context of the behavior is important (Gibbons, Gerrard, & Lane, 2003). For healthy behaviors to occur and be maintained, they must be reinforced by a social context that rewards healthy behavior and discourages unhealthy behavior. In a family context, those who incorporate and regularly utilize positive routines and rituals experience positive outcomes that include greater predictability and ease of daily family life, decreased household tension, and warmer relationships.

Finally, the stimulus control strategy uses reminders and cues to encourage regular healthy behavior as substitutes for unhealthy behaviors (Ries, Miller, Fiellen, & Saitz, 2009). As applied to families seeking to

strengthen themselves, a family may use reinforcement management to determine what group rewards they will receive for continuing with positive changes (e.g., a group outing, vacation, special meal). Also, they can determine as a group the reminders and cues that would be most effective for their family to encourage healthy behavior changes and discourage unhealthy behaviors (e.g., family note boards).

For providers who work with, and on behalf of, families, understanding how families' progress through the behavior change stages and utilize process strategies in facilitating that growth are important.

For professionals who work with and on behalf of families, understanding how families progress through the behavior change stages and utilize process strategies in facilitating growth is important. In this way, programs and policies can be developed and refined to meet families at their particular level of readiness. The matching of family readiness level to intervention allows for a more successful outcome than if a generic, nonspecific intervention is utilized.

Decisional Balance and Self-efficacy

While the five stages denote when change occurs and the ten process strategies account for how change happens, two additional core concepts are useful in understanding how families engage in

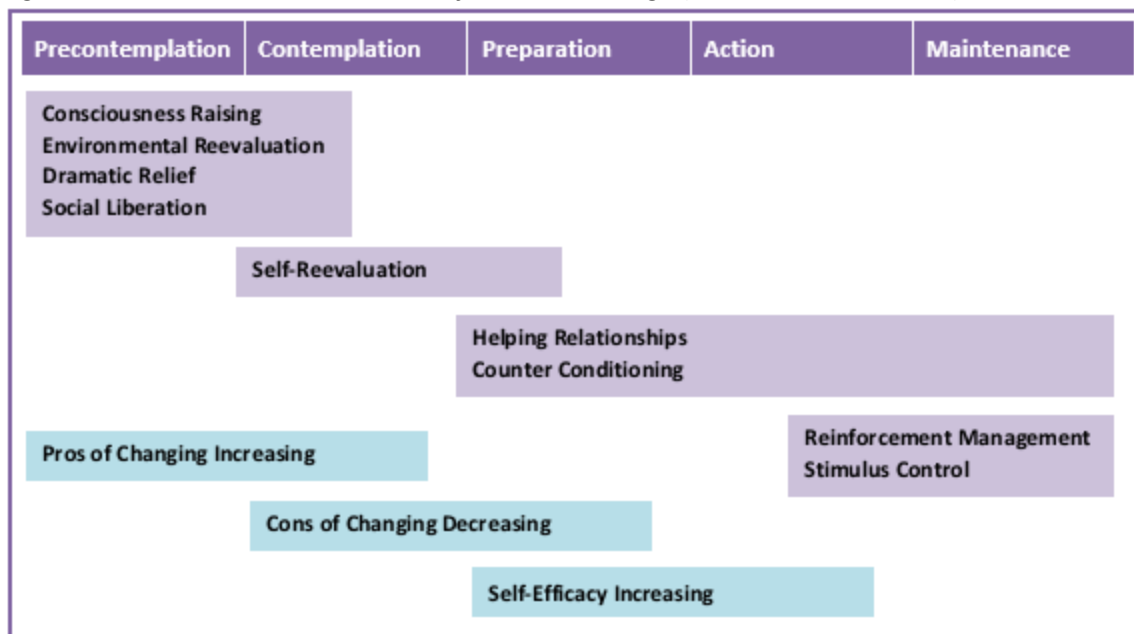


sustainable behavioral change. These concepts include decisional balance (Prochaska et al., 1992) and the promotion of self-efficacy as a family (Bandura, 1986).

The decisional balance involves a family’s continuous assessment of the benefits and risks of making family change and is illustrated in Figure 3. This assessment occurs throughout the change process and reflects the basic sentiment that change is difficult to initiate and maintain (Fisher & Fisher, 2002).

Families that seek to make changes often do not have complete consensus that the proposed change is entirely positive. Further, there may be divergence of opinions among family members about the changes, and broader family roles and power or control dynamics likely affect these processes. In the contemplation stage, families may still believe that the disadvantages of changing outweigh the advantages. They may wish to maintain the status quo because it feels more familiar, comfortable, and safe; changing may be seen as demanding energy, time, and emotional vulnerability. Every family member may repeatedly re-evaluate the potential benefits and drawbacks of making the change. As a family unit moves through the preparation and action stages, the process strategies allow a family to begin to reflect that the pros of making changes are more valuable to them. At this point in the decision making process, the negative aspects of change begin to decrease substantially. Once a family moves into the maintenance stage, the positive aspects of change are generally realized and supported by the family system.

Figure 3. Full Transtheoretical Model of Behavior Change (Prochaska et al., 2008).



Self-efficacy, namely the confidence families have that they can continue positive behaviors even when challenges arise, is an intrinsic component of behavior change (Bandura, 1998). For example, a family facing deployment of one parent may be tempted to discontinue regular joint family worship due to fatigue and other routine daily stressors; however, a family with strong self-efficacy knows it can continue the newly-developed positive behaviors despite the additional life stressors. Self-efficacy works with decisional balance to allow families to progress to the maintenance stage. Self-efficacy generally



increases as families progress through the stages; families feel empowered by their teamwork, as they are experiencing benefits associated with the positive changes to date. Self-efficacy works in conjunction with decisional balance, assisting families in understanding that change is possible, positive, and enduring.

Barriers to Help-Seeking

A family may recognize that they want to change (contemplation stage), but cannot move into the preparation stage because they lack requisite skills, supports, or information. Seeking help, whether it be from trained professionals or informal social networks, is a way that families can find additional information and support in order to sustain desired change(s) in behaviors (Barker, Olukoya, & Aggleton, 2005; McCart, Smith, & Sawyer, 2010). However, a range of individual and structural barriers may inhibit them from accessing help and moving through the change process (Barker et al., 2005; Doherty & Kartalova-O'Doherty, 2010; Hunt & Eisenberg, 2010; Kim & Omizo, 2003; Lim, Heckman, Montalto, & Letkiewicz, 2014; McCart, Smith, & Sawyer, 2010; Oleski, Mota, Cox, & Sareen, 2010; Vogel, Heimerdinger-Edwards, Hammer, & Hubbard, 2011).

Individual

Family members may face a variety of barriers to moving through the change process. As a part of a family, individuals may be in denial that they need help, may have negative attitudes surrounding help-seeking, and may feel discomfort surrounding self-disclosure and admission of vulnerability (Oleski et al., 2010). Several factors have been found to influence individuals' attitude towards seeking help, such as internalized gender norms (Koydemir-Özden, 2010); age (Barker et al., 2005), and identity and other specific characteristics (Barker et al., 2005; Kessler, Brown, & Broman, 1981; Parslow & Jorm, 2000; Simon, 2002).

Internalized gender norms. While individual attitudes affect help-seeking behavior in both men and women, some gender differences have emerged (Barker, 2000; Koydemir-Özden, 2010; Mackenzie, Gekoski, & Knox, 2006; Oliver, Pearson, Coe, & Gunnell, 2005). Men tend to internalize negative, societal attitudes toward health providers, especially mental health and treatment (Kessler, Brown, O'Brien, Hunt, & Hart, 2005; Vogel et al., 2011), fearing others will see them as weak (Chapple, Ziebland, & McPherson, 2004; Vogel, Wade, & Haake, 2006). However, there are several positive moderating factors to men's help-seeking behavior, such as education and having a partner (Doherty & Kartalova-O'Doherty, 2010).

Age. Age may also be related to people's willingness to seek help. For examples, youth and younger adults are in a developmental period of identity formation and experimentation with new roles, contexts, and experiences. The literature notes several factors during these periods of development that may prevent help-seeking behaviors; self-agency, access to providers or resources, trust or privacy concerns, emotional openness, stigma, or societal and cultural norms (Barker et al., 2005; Eisenberg et al., 2009; Hunt & Eisenberg, 2010; Komiya, Good, & Sherrod, 2000).

Identity and other specific characteristics. Normalized practices and expectations associated with individuals' identities can impact whether or not they seek help. For example, individuals identified as Asian American, African American, Native American, and Latino have been shown to have lower rates of help-seeking behaviors than their European American counterparts (Chu et al., 2011; Downs &



Eisenberg, 2012; Freedenthal & Stiffman, 2007; Wong et al., 2014; Wu et al., 2010). Stigma may be a particularly salient barrier to help-seeking in these populations (Goldston et al., 2008; Masuda & Boone, 2011). For example, among Native Americans, worries about embarrassment seem to be especially prominent (Freedenthal & Stiffman, 2007). Moreover, Masuda & Boone (2011) found that the Asian American sample had lower levels of stigma tolerance and greater self-concealment than the European American sample, both of which were predictors of help-seeking attitudes. Similarly, Asian Americans who demonstrated inhibition of strong negative emotions such as pain or anger were more likely to harbor negative attitudes towards seeking help (Kim & Omizo, 2003). These negative attitudes towards seeking help could be due to particular groups having limited familiarity with mental health care professionals or concerns that providers may not be culturally competent (Goldston et al., 2008).

Structural

In addition to individual barriers to help-seeking, some structural deterrents also influence individuals' help-seeking behavior. Individuals may struggle with lack of knowledge regarding resources and available services, language barriers, family responsibilities, availability of needed services within a reasonable distance, and insurance or financial constraints (McCart et al., 2010; Moskos, Olson, Halbern, & Gray, 2007; Oleski et al., 2010; Ward & Besson, 2012).

Military

Service members may face the same barriers as their civilian counterparts, but often report additional significant concerns related to military-specific barriers (Ouimette et al., 2011). There are a wide range of deterrents to help seeking among military personnel including: social consequences of seeking help (i.e., embarrassment, worried about looking stupid), discomfort receiving help, and concern about negative consequences on military career and promotion (Hoge et al., 2004). Yet, as with the civilian population, there are positive moderating factors to Service members' help-seeking behavior, including being married, and having received previous mental health care (Blais & Renshaw, 2013).

Barriers are important to consider in helping families make lasting changes; the ability to anticipate potential barriers and brainstorm ways to overcome them offers families better opportunities for success. In addition, providers and those who work with and on behalf of families may wish to consider how families can use their formal and informal networks of support to mitigate the barriers, utilize the process strategies, and allow the families to resume progression to what the Transtheoretical Model of Behavior Change refers to as the maintenance stage.

Implications and Recommendations

Professionals working with and on behalf of families are faced with the challenge of supporting family success in making and sustaining positive change. Research on the healthy development of strong families has several implications for policymakers and program providers. Based on these implications, several recommendations are described below.



Understanding the Uniqueness of Each Family

Each family has a unique culture and identity. Modern family structures are more diverse than ever, often shaped by a variety of factors including culture, sexual orientation, gender, ethnicity, and family composition (Golding, 2006). Understanding the heterogeneity of families can assist policymakers and program providers alike. Designing programs and policies that allow for family differences enables providers to leverage families' unique strengths and account for potential obstacles that may impede change.

Development of Programs and Policies

The ten key components of strong families can serve as a framework for designing and implementing family programs in general and within the military context. These key components can strengthen family policy work and increase program effectiveness when addressed holistically throughout the development and implementation phases.

In order to foster these important factors in families, professionals can follow these three strategic steps:

1. **Engage** in a comprehensive planning process that gathers information about the current state of the families within their purview and the relevant programs, practices, and policies that affect those families.
2. **Implement** a strategic planning process to identify the strengths and the opportunities for development and growth within the particular environmental context.
3. **Use** assessments, evaluations, policies and protocols, to accomplish the prioritized goals and objectives. Thus, the pairing of design, implementation, and evaluation work together for the overall benefit of families.

Utilization of Formal and Informal Networks

Informal systems of support are important for healthy family development. Military family members need connections with friends, extended family members, and neighbors to be able to thrive. For helping professionals who work with families, promoting use of support networks may be useful when enacting change.

In addition to informal support networks, policymakers and program professionals may want to provide clear pathways for accessing formal network supports, minimizing organizational or agency obstacles. Organizational consideration of how strategic partnerships can support family members across various systems is important, as well as ensuring that policy language reflects the important role of support networks. Program providers may wish to include information about resources pertaining to formal network support and can work to understand the vital role of informal network support in family program planning and implementation phases. Creation of alliances and referral systems with other community programs can be helpful in supporting families.

Policies and programs can be structured within the frameworks for behavior change in order to match families with the resources and interventions that provide the highest chance of family success.



Conclusion

Strong families are an important part of a modern society; however, strong families require ongoing effort to build, develop, and sustain (Amato, 2014). In order for strong families to flourish, it is important that helping professionals, providers, program administrators, and policymakers establish mechanisms to strengthen informal and formal network capacity and implement at resources, programs, and interventions that fortify strong families. Successful application of this knowledge to practice requires understanding the ten key components of strong military families, family structure, and family change theories.

Strong families exhibit the following key components of family functioning: (1) communication, (2) emotion regulation, (3) family cohesion, (4) family recreation and leisure time, (5) financial management, (6) prosocial family values, (7) resilience, (8) religiosity and spirituality, and (9) routines and rituals, and (10) military readiness (see Appendix A for a review of the descriptions of each component).

In order for strong families to flourish, it is important that helping professionals, providers, program administrators, and policymakers establish mechanisms to strengthen informal and formal network capacity and implement at resources, programs, and interventions that fortify strong families.

In helping families develop and grow these key components of strong family functioning, the Transtheoretical Model for Behavior Change can provide a framework for understanding how families can make sustainable change (e.g., Niec, Barnett, Gering, Triemstra, & Solomon, 2015). Policies and programs can structure resources and interventions within the frameworks for behavior change in order to provide the highest chance of family success. Finally, behavioral outcomes can be based

upon the processes of change when evaluating family change. The design, implementation, and evaluation of family policy and programming can work together for the overall benefit of families.

In conclusion, individuals and organizations that work with and on behalf of families may develop and implement structures, programs, and interventions that focus on building and fortifying strong families. The key components identified in this research brief serve as a framework for designing, implementing, and evaluating family programs.



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Appendix - Ten Components of Strong Families

<p>Communication encourages:</p> <ul style="list-style-type: none"> ○ Empathetic style of interaction between family members ○ Positive interactions between couples ● Resilient attitudes in family members ● Positive experiences that build family cohesion ● Competence-building in children’s social skills 	<p>Emotion Regulation helps:</p> <ul style="list-style-type: none"> ○ Utilize an authoritative parenting style ● Reduce emotional flooding communication styles between family members ● Build interpersonal and intrapersonal skill sets
<p>Family Cohesion relates to:</p> <ul style="list-style-type: none"> ○ Supportive family environments ○ Strong bonds between family members ○ Positive emotional connections in parent-child relationships 	<p>Family Recreation/Leisure Time supports:</p> <ul style="list-style-type: none"> ● Stability within the family unit ● Safe spaces to try unique and challenging experiences ● Experiences and activities that promote open communication and increase cohesion
<p>Financial Management helps:</p> <ul style="list-style-type: none"> ● Increase marital satisfaction in couples ● Create children and youth who have healthy financial behaviors and attitudes 	<p>Prosocial Family Values promote:</p> <ul style="list-style-type: none"> ○ Parenting styles that clearly communicate to children the family expectations with regard to behavior and family roles ○ Parenting styles that result in consistent discipline patterns for children ● Intergenerational, culturally specific beliefs and practices
<p>Resilience encourages:</p> <ul style="list-style-type: none"> ○ Interactions between couples that result in flexible and team-based thinking to adapt to change ○ Family units positively adapting to changing circumstances ● Family systems that respond to changes in such a way as to maintain a dynamic equilibrium 	<p>Religiosity and Spirituality help:</p> <ul style="list-style-type: none"> ○ Parents and children have a common framework to discuss family expectations with regard to behavior and family roles ○ Parents develop a foundation from which to develop consistent and age-appropriate disciplinary practices ● Couples develop a unified vision of the institution of marriage
<p>Routines and Rituals promote:</p> <ul style="list-style-type: none"> ○ Family cohesiveness ● Stability and predictability in daily family life ● Traditions to celebrate family member accomplishments ● Open communication among family members 	<p>Military Readiness acclimates:</p> <ul style="list-style-type: none"> ● Family members to the military life cycle

- Hollow bullet points denote factors outlined in the Department of Defense Family Readiness Logic Model.
- Filled in bullets denote factors outlined in the Strong Family Functioning Research Report.