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Effective Social Work Practice With Military Youth During Deployment

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The Office of the Provost

Walden University 2019

Abstract

Effective Social Work Practice with Military Youth During Deployment

by

Christy Scholl

MS, Stephen F. Austin State University, 2003

BA, East Texas Baptist University, 1994

Project Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Social Work

Walden University

November 2019

Abstract

Since the beginning of the wars in Afghanistan and Iraq, more than 2 million militaryconnected children experienced separation from a parent due to a military deployment. The purpose of this study was to identify and build upon the tools and techniques used by social workers when providing services to military children during a parental deployment. Bowen's family systems theory provided the conceptual framework for this study. Family systems theory relies on the belief that military families are interdependent of one another and to fully understand what may be happening with military youth; social workers must look at and understand the entire family system. The questions that guided this study were designed to explore the tools and techniques social workers use to help military children understand deployment, reduce the adverse effects they may experience, and assist them to become more resilient during a parental military deployment. Data collection consisted of a focus group of 7 social workers providing services to military youth. Overall, participants noted a positive impact with current resources that are available for military youth and families during all phases of deployment. The lack of funding for additional resources were noted as limitations to effective practice with military youth during a deployment. The study has the potential to contribute to social change and improve services provided to military children and their families by increasing understanding of the emotional well-being and resiliency of military youth who experience parental deployments. The military can use the information from this study to provide more culturally competent support programs to military families during every stage of deployment.

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Dedication

This is not an accomplishment I could have achieved on my own. I would like to thank my husband, Todd, for standing beside me and supporting me through this journey. You have sacrificed so much throughout your military career for our family and I appreciate all you have done for our family. You are my rock and I love you. I also would like to thank my beautiful children: Conner, Brooklyn and Evelyn, for always making me smile and for understanding all the nights and weekends that Mom was distracted or could not play because she was completing school work. You are my inspiration for all I do. I hope that one day you can read this paper and understand why I spent so much time in front of my computer. I also want to thank my parents, Eddie and Mary Green, for their undying support of me throughout my life. Thank you for allowing me to follow my dreams and teaching me what hard work can accomplish.

Once in the final phase of my doctoral education, I give the highest credit to my first chair, Dr. Kristin Richards, who provided me with never ending encouragement and support when I doubted myself the most. She taught me that there is only "Plan A: Finish" with no room for a Plan B. I am eternally grateful for the level of support and guidance she provided to me.

I have many other family, friends, and colleagues who have expressed support, pride, and excitement for me in this process as well and I am grateful to each of them. I started this project and completed it with a love and appreciation of every military child who lives the military life, as you are the REAL heroes!

Table of Contents

Section 1: Foundation of the Study and Literature Review	1
Introduction	1
Problem Statement	2
Purpose Statement	3
Research Questions	4
Nature of the Doctoral Project	4
The Significance of the Study	5
Theoretical/Conceptual Framework.	7
Values and Ethics	9
Review of the Professional and Academic Literature	11
Findings from the Literature	11
School and Educational Effects	12
Psychosocial and Behavioral Effects	15
Physiological and Mental Health Effects	21
Child Maltreatment	27
Summary	31
Section 2: Research Design and Data Collection	33
Research Design	34
Methodology	36
Population	36
Procedures for Recruitment, Procedures, and Data Collection	3

Data Analysis	39
Ethical Procedures	41
Summary	42
Section 3: Presentation of the Findings	43
Data Analysis Techniques	44
Findings	50
Themes	50
Identified Themes: Data Results	52
Summary	59
Section 4: Application to Professional Practice & Implications for Social Change	60
Application for Professional Ethics in Social Work Practice	60
Recommendations for Social Work Practice	61
Implication for Social Change	65
Summary	66
References	68

Section 1: Foundation of the Study and Literature Review

Introduction

Since the onset of the United States involvement in the wars in Afghanistan and Iraq, more than two million military children experienced separation from a parent due to a military deployment with many of these children suffering multiple separations (Cozzo, Lerner, & Haskins, 2014). Military children come from diverse backgrounds, have different personalities, and unique needs, with these needs often changing throughout their parent's military career. As of 2016, there were 3,509,834 military personnel to include Active Duty, Reserve and Guard members from all branches of the Department of Defense and the Coast Guard, as well as civilian staff supporting the Department of Defense (Department of Defense, 2016.). Of that 3.5 million military personnel, 524,130 were active duty members in the United States Air Force, Air National Guard, and Air Force Reserve components with 174,040 DOD appropriated funds (APF) civilian personnel, and 21,880 DOD non-appropriated funds (NAF) civilians supporting the Air Force. Military youth often deal with family separations and other stressors which cause them to have individualized and different needs than their civilian peers. Military youth experience periods of high-stress changes and situations in their lives as a result of their parent's military career. These changes and circumstances present unique challenges and indicate a need for interventions that can adequately and appropriately adapt to the individual needs of military children (Cozzo et al. 2014). In this study, I examine the tools and techniques used by professionals when providing services to military children during parental deployment and how these tools and interventions help enhance

understanding of the deployment cycle, reduce the adverse effects of the deployment, and increase resiliency in youth.

This section includes a discussion on the background of the issue, the problem statement, the purpose of the study to include research questions. Also, the summary outlined the nature of the doctoral project, the significance of the study, theoretical/conceptual framework for the study, and a review of the professional and academic literature. Finally, a summary of the information completes the section.

Problem Statement

Military children experience many changes throughout their childhood due to their parent's military service. They often leave their home and move to a new location every two to three years when their parent(s) receives orders to a new duty station. Every move involves a change in school, leaving friends and extended family, changes in extracurricular activities, and ultimately reducing their comfort zone as they once again become the new kid. Military youth also experience long separations from their mother or father, sometimes both, when active duty members deploy. If a family includes dual active duty military service members who deploy at the same time, youth are forced to reside with another caregiver, which often results in a change in school and environments for the length of their parent's deployment. Both moving and deployments present challenges and indicate a need for services and interventions that appropriately adapt to the unique needs of military children (Cozzo et al. 2014).

Lowe, Adams, Browne, and Hinkle (2014) indicated that attachment problems regularly occur between an active duty parent and children at home, but the signs may

appear more subtle and difficult to recognize. Military youth not only have adjustment difficulties during the deployment of a parent but can also experience unique challenges during reintegration with the deployed parent. Younger children tend to experience more problems adjusting to the separation from a parent while school-age children have more issues with anxiety and concerns for the absent parent (Andres and Moelker, 2011). Knobloch, Pusateri, Ebata, and McGlaughlin (2015) stated that older children experience significant changes to family life during deployment such as additional responsibility, changes in daily routines, family traditions, emotional and behavioral problems as well as feeling as if they have an incomplete family.

Social workers and other professionals providing services to military families on high operational tempo and high deployable military installations observe firsthand the impacts parental deployments have on military children. There continues to be a gap in services as it relates to supporting military youth during all stages of the deployment. Due to this gap in services, I utilized an action research method to examine the tools and techniques used when working with military children during deployment.

Purpose Statement

The purpose of this qualitative, action research study sought to enhance understanding of military deployments by analyzing the best practices of social workers when offering services to military youth, ages six years through twelve, during a deployment. The study also sought to build a better understanding of the effects of the parent absence during each stage of the deployment cycle. The information obtained in the study would fill a gap or gaps in services at Mountain Home Air Force Base by

highlighting resources available to military children and their families during deployments and increasing the military, cultural competency of social workers providing these services. The population of this study encompassed seven to twelve male and female social workers and other professionals possessing five years or more military provider experience. Diverse backgrounds and individualized needs are a part of being a military child, and these needs can change throughout a parent's military career. Lowe et al. (2014) indicated that the attachment between a child and active duty parent are adversely affected by deployments and time apart.

Research Questions

- RQ1. What tools and techniques help military-connected children understand deployment, reduce the adverse effects they may experience, and assist them in maximizing resiliency during a parental military deployment?
- RQ2. What evidence-based practices are used, to include tools and interventions, to help guide work with youth during a deployment?
- RQ3. What training and information can be provided to ensure adequate military, cultural competency?

Nature of the Doctoral Project

An action research approach to the problem provided a means to gather information and explore what tools and techniques social workers feel are best suited to providing services to military children during each stage of deployment. This method focused on the experiences and interaction between people and their environment, in the effort to help others understand what problems may be occurring and how to find

solutions to alleviate these problems (Makisomovic, 2010). By using focus groups to gather information from social workers and other professionals about the identified problem of the study, I sought change to improve the services that military youth receive rather than merely gain additional theoretical knowledge of military children themselves. Focus groups utilized a qualitative approach for information gathering that involved people understanding one another which can be difficult to validate. The results were expected to show how the study improved the services provided to military children by identifying criteria and standards of judgment, demonstrating how the research improves learning and testing evidence against the initially identified problem. This knowledge highlighted the process in addition to allowing others to review the study and research methods (McNiff, 2016). The study used focus groups to interview seven social workers and other helping professionals at Mountain Home Air Force Base and the local community about their personal experiences, the tools and techniques they utilize, and their thoughts on how to improve military social work competency. A focus group consisting of at least ten participants is considered an appropriate number to ensure that a variety of perspectives is gained while still being small enough to maintain order and keep the group on task (Nyumba, Wilson, Derrick, & Mukherjee, 2018).

The Significance of the Study

There are more than two million military adolescents and youth across the globe.

This current research study conducted at Mountain Home Air Force Base, Idaho has the potential to contribute to social change and affect services provided to military children and their families by increasing the understanding of social workers about the

deployment process. Expanding the knowledge and cultural competency of social workers and other professionals will help military youth understand deployments, reduce the adverse effects of parental deployments, and improve the resiliency of military children. Mountain Home Air Force Base is home to 3,314 active duty Airmen, 3,900 dependents (children and spouses), 10,000+ retirees, 389 GS Civilians, and 170 Nonappropriated fund civilians. Deployment of an active duty parent shows an association with increases in familial and individual stressors for adults and children, child and youth behavior problems at home and in school, increased mental health care use, and increased instances of child abuse and neglect (Trautmann, Alhusen, & Gross, 2015). The military has actively engaged in combat conflicts since 2001 to include Operation Desert Storm, Operation Iraqi Freedom, Operation Enduring Freedom and studies reviewed indicate a need for more empirical studies on children in military families. Military youth have resources available to them to assist with adjustment during times of deployment such as supportive communities, military-connected peers who have shared the same experiences, and base support agencies. Milburn and Lightfoot (2013) indicated a need for more research on other resources such as peer support groups, military social workers who understand the military culture, and additional interventions to support them.

This study identified available resources at Mountain Home Air Force Base as well as other military-sponsored activities and interventions which military families can utilize to enhance their well-being (Lucier-Greer et al. 2016). Social workers and other providers should be familiar with each stage of deployment, and the challenges military youth may experience in each stage (Lucier-Greer et al. 2016). This study examined

information obtained in a focus group about the most appropriate tools and techniques to help youth understand the deployment cycle and how to reduce the adverse effects of deployment while effectively increasing resiliency. In this study, I sought to increase military social work competency to fill a gap in services at Mountain Home Air Force, which has a high deployment rate of active duty service members.

Theoretical/Conceptual Framework

Family systems theory was the chosen theoretical framework for this study.

Family systems theory is based upon Bowen's systems theory which posits that an individual cannot separate from their relationship networks (Gurmin, 2012). Guerin and Chabot (1997) indicated that Bowen believed that every theorist should find the smallest number of congruent concepts within a family and allow this to serve as a way of better understanding individuals and families. Bowen family systems theory has eight core concepts which include differentiation of self, emotional triangles, nuclear family emotional system, an emotional cutoff, multigenerational transmission process, sibling position, emotional process in society, and emotional reactivity (Gurman, 2012). This therapeutic approach emphasizes the route of change as a change of self rather than change within a couple, the family of origin, or extended family systems.

Within family systems theory there is the belief that family members are interdependent, so the family system cannot be fully understood by just looking at one individual but must be examined as a system (Berryhill, Soloski, Durtschi, & Adams, 2016). Those involved in therapy are identified based upon the presenting problem, the identified patient, and as to where the symptoms occur such as marital relationship, child,

or just one parent (Gurman, 2012). Family systems theory takes the stance that individuals, families, and couples are directly involved in resolving a problem even if the problem identified presents as an individual issue (Simmons, 2014). Military children are a part of a much larger system that must be understood when working with military families (Paley, Lester, & Mogil, 2013). As indicated by Paley et al. (2013), family systems theory assumes that the family is more significant than the sum of its parts, and each member of the family has an impact on the entire family.

Any professional who provides services to military youth during deployment must understand that the stressors of one family member can, and will, affect other family members. For example, when a parent deploys and the parent left at home experiences high stress and problems with acclimating, the child may exhibit some of the same behaviors (Paley et al. 2013). As social workers provide services to military youth and understand how they relate to their family, the scope can be broadened to include a more ecological framework to incorporate larger systems such as school, peers, and base activities (Paley et al. 2013). Social workers can see and understand how the youth's interaction with the various systems are affecting children and how they are related to parental deployment.

Family systems theory can guide interventions aimed at engaging military children and their families when a child has behavioral or emotional concerns related to parental deployment (O'Gorman, 2012). A family systems perspective shows that families operate much better with predictable patterns and routines, or instead they maintain homeostasis of the family system and it is when significant changes occur, such

as a deployment that upsets the homeostasis of the family (Thompson, Baptist, Miller, & Henry, 2017). When this happens, family members must adjust their behavior to adapt to the change. Military youth are more vulnerable when a parent deploys, as they are not only struggling with their stressors but are also having to deal with parental stressors. Youth carry more responsibility in the home as they try to take the place of the missing parent, which can jeopardize their overall well-being and their ability to adjust to the new norm in the house.

The family is an essential factor in the overall well-being of military children, and deployments can upset the welfare of those children. This study intends to help social workers understand and build knowledge of how the family system is affected by deployments and how to provide interventions to the family to help military youth adjust to changes in the family during a deployment. A therapeutic aim of family systems theory is the reduction of anxiety and emotional reactivity of clients. People often face adversity and encounter many challenging situations which place them at risk of psychological, social, and physical difficulties, and they respond in different ways to this adversity (Cohen, Ferguson, Harris, Pooley, & Tomlinson, 2011). Family systems theory is broad enough to encompass a variety of differences yet can offer specific strategies for interventions.

Values and Ethics

Working with the military in any capacity can be a challenge if social workers are not cognizant of and understanding of how military members and their families live their daily lives, the long hours worked, and the unique stressors related to military life,

especially during times of deployment. Social workers have an ethical responsibility to those they are serving. Their primary ethical responsibility is to help people in need and address social problems while advocating for those who cannot or will not advocate for themselves (NASW, 2008). Social work value and ethics are an integral part of the social work profession. The National Association of Social Work (NASW) Code of Ethics (2008) serves as a guide for the professional conduct of social workers. Relevant to this study is the value and principle of service, importance of human relationships, and competence. In addition, the principle of cultural awareness and social diversity is relevant to this study. According to 1.05 Cultural Awareness and Social Diversity rules in the NASW Code of Ethics (2008),

- (a) Social workers should understand culture and its function in human behavior and social, recognizing the strengths that exist in all cultures.
- (b) Social workers should have a knowledge base of their clients' cultures and be able to demonstrate competence in the provision of services that are sensitive to clients' cultures and to differences among people and cultural groups.

Military families and children experience a very diverse environment in the military and often exhibit a strong sense of purpose in their daily lives which relates to a parent's military service and military deployment. Military deployment can have varying effects on children dependent upon many factors in their life and understanding the military deployment cycle and military culture are critical to successfully working with military families. The NASW Code of Ethics were adhered to and followed in this action research study and ethical values, principles, and standards were closely followed. I

followed all guidelines as outlined by the National Association of Social Workers (NASW) related to research for obtaining consent from all participants prior to initiating the research and ensuring all information was shared appropriately with participants while maintaining confidentiality.

Review of the Professional and Academic Literature

Social workers have the unique opportunity to work with military families not only on military installations but also in many local community settings. Social workers are advocates for social justice for those they are providing services to and those who are unable to advocate for themselves. Culturally, competent military social workers working with military families can provide more direct and relevant services, ensure better information and referral services, and direct clients to more appropriate resources representing cultural and ethnic diversity (NASW, 2008). The purpose of this literature review was to examine current research about the effects of parental deployment on children, identify the themes found within current research, and understand what areas of study to focus on in the future to better serve military children and their families. This literature review will help establish support programs geared towards military families who are impacted by deployment and increased military, cultural competency.

Findings from Literature

Four central themes emerged from this literature review that related to the effects of parental deployments on children's health and well-being. The identified issues are related to school and educational impacts, psychosocial and behavioral effects, physiological and mental health effects, and child maltreatment. The search revealed

mostly information about the physiological and psychological effects experienced by children related to deployment; however, there were some crossover indications in the literature such as educational, child maltreatment, and psychosocial impact on children.

School and educational effects. Military children experience multiple adjustments throughout their parent's military career. It is crucial for social workers to understand the association between military deployments and how a child adjusts to the change of the family structure. The consistency of a military child's education is a good indicator of academic performance and outcomes (Card et al., 2011). A review of the literature on the impact and stressors of deployments within the population of military children is the goal of this project.

Chandra, Martin, Hawkins, and Richardson (2010) conducted focus groups and semi structured interviews with teachers, counselors, and school administrative staff at twelve schools to understand how a parental deployment affects the behavioral, social, and educational outcomes of military children in the school setting. Of the schools chosen, six served one Army installation while the other six served schools served other installations in a different part of the county. Researchers selected both military bases because of their high deployment rates over the past five years. Researchers conducted 24 focus groups with school staff where they reported on their perceptions of deployment experiences of military youth. Researchers conducted sixteen individual phone interviews with school members serving Army Reserve or National Guard youth across the country using a snowball sampling method to gather additional information and insight.

Chandra et al. (2010) asked participants question's related to the behavioral or emotional issues of military children, social issues and academic issues as they relate to parental deployment. School staff indicated some military youth struggle with many deployment issues that ultimately affect their ability to function in school. School staff identified one central theme where they suggest that parental deployment does affect the ability of military youth to perform at school.

Nicosta, Wong, Shier, Massachi, and Datar (2017) conducted a quantitative study of 1021 military families with children aged twelve to thirteen located at twelve US Army installations across the United States. Nicosta et al. (2017) obtained data to examine parental deployment, adolescent academic and social-behavioral maladjustment, and parental psychological well-being. The study utilized a large and geographically dispersed sample of military youth to explore how more extended deployments, which have become increasingly common, impact academic and social-behavioral adjustment as well as parental psychological wellbeing. The results showed that deployments lasting longer than 180 days indicated a significant association with a decrease in academic performance. The study adds to the evidence that deployments have substantial implications for not only military-children but their parents also. Parental psychological wellbeing decreases during a deployment which increases youth maladjustment during deployment.

Rush and Akos (2007) suggest that the military provide support services to military-youth, but many nonmilitary affiliated school counselors are in the unique position to provide services to youth who may have a parent deployed. Deployment

support groups held at the school of military youth offer an outlet to express their anger or frustration without fear of being scolded. Students share their knowledge of and feelings about deployment with other youth who are experiencing or have experienced the same thing. This type of support in the school provides an environment for youth to learn and even practice coping skills and problem-solving skills. Rush and Akos propose using a ten session, hybrid psychoeducation-counseling group to help increase youth's knowledge of deployment, develop coping skills, and provide a safe place for them to express their emotions. According to Rush and Akos (2007) group sessions with military-connected children in schools while they are experiencing a parental deployment allows for a structured outlet and enables them to learn and develop appropriate coping skills, interact with others who are experiencing the same feeling and emotions, and voice their concerns.

De Pedro, Astor, Gilreath, Benbenishty, and Berkowitz (2018) suggested that research has shown there is a positive relationship between the number of parental deployments and higher rates of depression and suicidal ideation among military youth and adolescents. They also hypothesize that a positive relationship exists between the number of parental deployments and higher rates of depression and suicidal ideation in military youth. School connectedness, caring relationships, high expectations, and meaningful participation associated with an increase in well-being and decrease in depressive symptoms. Data were obtained from 14,943 military and non-military youth to examine the association between school climate, military connection, deployment, and mental health (De Pedro et al. 2018). The sample population derived from the California

Department of Education's extensive survey of elementary, middle and high school student's perspective of school climate, resiliency, and risk behaviors in the United.

Results show that military-connected youth have a higher rate of depression than their civilian peers.

Psychosocial and behavioral effects. A search found several articles related to the psychosocial and behavioral effects military youth may experience at any time during deployment. The following studies provide information needed to understand the psychosocial and behavioral impact of parental deployment on military youth.

Andres and Moelker (2011) used a longitudinal study among Dutch military families to understand and enhance knowledge of how an active duty military parent's absence affects children during a deployment to Bosnia or Afghanistan while examining the predictors of children's adjustment difficulties during the deployment and upon reintegration of the active duty member. The researchers discuss how a parental absence involves a change in the composition of the family to a single-parent family resulting in a restructuring of familial roles, a change in routines and norms, and adjustment of all members of the family to these new roles.

Andres and Moelker (2011) mailed questionnaires to 911 service members and their partners with the inquiries addressing pre-deployment, deployment, and post-deployment. Additional semi-structured interviews were held with 120 partners of military members and used to enhance and enrich the quantitative survey data. The ENRICH Marital Satisfaction Scale measured relationship satisfaction and the Work-Family Conflict Scale measured work-family conflict. Loneliness was measured by a

shortened version of the UCLA Loneliness Scale to evaluate the isolation of the spouse at home. Three items measured parenting stress while psychological distress was assessed using a General Health Questionnaire which was developed to assess mental strain. The active duty member also completed the questionnaires to examine their well-being during the deployment and their feelings upon reintegration with the family.

Andres and Moelker (2011) indicated that most of the children in the study handled the parental deployment well and adapted to the separation from their parent during their absence from the home. The children also adjusted appropriately and quickly upon the return of the parent from deployment. The study does suggest that some youth did experience difficulty, with one-fourth of the mother's reporting their children had problems with the separation. Younger children tended to have more problems adjusting to the separation, and school-age children experienced more anxiety and concerns for the deployed parent.

Knobloch et al. (2015) examined how a parent's deployment affects their children with thirty-three military youth attending a residential camp offered to military children ranging in age from ten to thirteen. Researchers conducted in-depth interviews of these military children over a five-day period with trained interviewers conducting one-on-one, semi-structured and audiotaped interviews. The meetings were kept short to ensure that the children did not lose any of the experiences of camp, to keep their attention, and to not dwell on negative experiences.

Knobloch et al. (2015) used interviews to initially gather demographic information from the children as this process was designed to help build rapport. The

questions then turned to the child's family life during a parent's deployment, and lastly, the interviewer asked about the child's family life during reintegration. Thematic analysis identified three themes which are changes in family life, challenges of deployment, and opportunities during deployment.

Knobloch et al. (2015) found that there are often significant changes to family life for children during a deployment. Children report more responsibilities, changes in routine and activities, family traditions, emotional upheaval, and a feeling of an incomplete family. They also found there are significant challenges for these children such as disruptions to daily routines, emotional and behavioral difficulties, missing the deployed parent, an increase in familial conflict, and additional responsibilities. The deployment does provide opportunities for growth to include more family closeness with those at home, developing more independence, and preparation for future separations.

Huebner, Mancini, Wilcox, Grass, and Grass (2007) studied the feelings of youth in military families who are affected by a parental deployment. The study seeks to explore uncertainty, loss, resilience, and adjustment among youth aged twelve to eighteen that had a parent deployed to a war zone. Themes identified in the study were overall perceptions of uncertainty and loss, boundary ambiguity, changes in mental health, and conflictual relationships. An ambiguous loss theoretical framework was used to organize the responses of youth uncertainty to parental deployment. Researchers used the Double ABC-X model lens to present four categories of data to illustrate ambiguous loss as experienced by youth during a deployment. These categories are a) perception of loss and

uncertainty, b) boundary ambiguity, c) mental health needs and changes, and d) conflictual relationships.

Huebner et al. (2007) selected participants from their attendance at one of the several camps sponsored by the National Military Family Association as these camps were only available to youth who currently had a parent deployed. There were 107 participants between the ages of twelve to eighteen involved in the study and data was gathered through in-depth, semi structured focus group interviews spread across fourteen groups.

The study findings supported the efficacy of the theory of ambiguous loss to assist in understanding how youth adjust during a deployment. Behavioral changes occur with more tendency to act out toward others. Manifestations of depression and anxiety were common with significant uncertainty about the deployed parent. The findings are interpreted as early signs of ambiguous loss. Youth discussed changes in roles and responsibilities after a parent deploys which often confused their place in the family system. The reunion with the deployed parent and their reintegration back into the family was one of the most difficult for youth as they recognized and were aware of the changes in the deployed parent. The study does find that a parental deployment has significant effects on the family system, especially adolescents which are observed in behavior changes, mental health changes, and fear.

Lowe et al. (2012) indicate military life has many unique demands on the family such as deployments, permanent change of station (PCS) every two to three years, temporary deployments (TDY's), long hours and regular training which often create a

parental absence. The absence of a parent results in a significant educational hardship because of changes in educational curriculum and requirements, instruction, and behavioral interventions, and a lack of specialized military support from the schools.

The military deployment process for families is often very stressful at all stages of deployment: predeployment, deployment, and postdeployment. Lowe et al. (2012) hypothesized that an active duty members time in service and familial communication are related to parent's distress and defensiveness while the length of deployment and familial connections are related to a child's attachment to the parent. The researchers also hypothesize that an active duty member's deployment time and time in service relate to frustration and parenting stress. Participants of the study were military members and dependents stationed at Moody Air Force Base in Georgia with 30 military dependents surveyed.

Lowe et al. (2012) provided information to participants as to the purpose of the study with specific instructions on how to complete each portion of the survey beginning with the Military Dependent Survey. The military dependent study provided information about the family's primary demographic. Next, the participants completed a thirty-six response questionnaire with answers ranging along a scale from strongly agree to disagree strongly. The surveys provided scores in the areas of: (a) defensive responding, (b) paternal distress, (c) parent-child dysfunctional interactions, (d) difficult child, and (e) time in service. Last, participants were asked to complete the Parenting Relationship Questionnaire which consisted of seventy-one questions with answers of never, sometimes, often, or almost always. Both questionnaires provide numerous variables, so

correlations were completed to identify any variables between these defined variables.

The variables included deployment time, time in service, defensive responding, discipline practices, parental involvement, parenting confidence, and school satisfaction.

Findings of the study suggest that the attachment between a child and the military member are adversely affected by shorter deployments and time apart. The research also shows attachment problems with the parents at home and the child, but they are more subtle and difficult to recognize. These problems can include bonds becoming more insecure between a child and military member while issues become more prevalent between a child and the parent at home due to the change in roles, increased responsibility, and stress. The study did not support the hypothesis that the increased length of time away from home hurt youth but found that shorter times away from home combined with weak communication skills increase parental stress, which in turn causes distress among youth. Results indicate that more extended deployments negatively affect the parent-child relationship of the child and parent remaining at home during the deployment.

Truhan (2015) studied twenty-two military adolescents, ages seven to seventeen to investigate the differences in parentification in a military home with a deployed parent and without a deployed parent. For the study, researchers defined parentification as the process of role reversal where a child takes on roles and responsibilities that are inappropriate for their emotional and developmental level. Information was assessed using the Parentification Questionnaire – Youth which is a twenty item self-survey provided to military youth.

Truhan (2015) completed an independent sample *t* test using twenty of the twenty-two participants as two participants were excluded to control for error. Findings of the study found there is a significant difference between military families with a deployed parent and military families who are currently a single family home due to a deployment. Families with a deployed parent have a higher rate of parentification. The data supported the hypothesis and found that there is a significant difference in parentification in a single parent home during deployment and a two-parent home when both parents are home. The study suggests that parents are potentially giving their children more roles and responsibilities that are not appropriate for their developmental and emotional level which indicate that parentification is likely to present in military families during a deployment.

Physiological and mental health effects. A child's reaction to a deployed parent varies from child to child as well as their developmental, emotional, and attachment to the deployed parent. In recent years, more and more studies are being conducted to understand the physiological effects of parental deployment on youth.

Hisle-Gorman et al. (2015) conducted a study to examine how a parental deployment and combat injury affect children's mental health, injuries and maltreatment post-deployment. The study was conducted during fiscal years 2006 to 2007 during a high deployment period and examined 487,460 military youth, ages three to eight years, who received care within the military health system. The study utilized a retrospective cohort design using data from the military healthcare system and the TRICARE management system. Parents report higher maladaptive behaviors and increased mental

health problems during a parental deployment. According to documentation, children are more likely to be diagnosed with a mental health disorder or require psychiatric hospitalizations during parental deployments. The study compared the rates of mental health care, injury, and child maltreatment visits of youth with a deployed parent and children with a parent experiencing a combat-related injury with children who have not experienced a parental deployment.

Results of the study by Hisle-Gorman et al. (2015) indicated one-third (33%) of military children experienced a parental deployment during the reporting year. Of these children, 19.7% of them had a parent return from the deployment with a combat-related injury. The post-deployment period indicated increases in mental health visits and referrals, child injuries, and child maltreatment cases. Children who experience a parental deployment have higher visits for mental health services, injuries, and child maltreatment. The study suggests the need for increased prevention and intervention services for families as the reintegrate upon a return from a deployment.

Foran, Eckford, Sinclair, and Wright (2017) completed a study to examine the association between symptoms of posttraumatic stress disorder, general aggression, and marital stress of the active duty member returning from a deployment and the effects these symptoms have on their children. Researchers hypothesized that the PTSD symptoms of the active duty member coupled with marital distress were indicators of a rise in child mental health referrals. 1,068 active duty soldiers returning from a fifteen month deployment were invited to participate in the study via a survey with 974 agreeing to participate in the study. Although 974 participants completed the written survey, the

study only included the participants with children between the ages of three to seventeen living in the home resulting in 169 participants.

Foran et al. (2017) used a seventeen item posttraumatic stress disorder checklist (PCL) to measure PTSD symptoms. The list uses a five point scale from 1 being not at all to 5 being extremely. A result of this checklist indicated a positive screen for PTSD symptoms among participants. By addressing child mental health symptoms, the Strengths and Difficulties Questionnaire (SDQ) was utilized to gather additional information. The checklist did include categories for emotional problems, conduct problems, and hyperactivity/inattention in children with results indicating low to moderate mental health symptoms in each of the three areas. Three distinct questions were asked to examine marital distress between the active duty member and spouse. These questions were: "Are you having marital problems?" "Have you and your spouse gotten into frequent arguments or disagreements?" and "Is your relationship strong?" General aggression was assessed using eight items developed by the Walter Reed Army Institute of Research and rated on a five point scale. A structured equation modeling was used to test PTSD symptoms, marital distress, and child mental health with Mplus 7.1 statistical software conducting the analyses.

Results of the study supported the hypothesis that parental PTSD and child mental health during reintegration after a deployment are significantly associated. Also, the impact of parental PTSD and child mental health symptoms are explained by general aggression in the home. The results indicate a need for early intervention services such as improving parenting practices and child adjustment during each stage of deployment.

Millegan, Engel, Liu, and Donneen (2013) completed a retrospective cohort study to examine the effect a parental deployment to a combat zone has on the rate of psychiatric hospitalizations among military children. During the fiscal years of 2007-2009, researchers gathered data from the medical data repository (MDR) and the Defense Manpower Data Center (DMDC) with the parent and child data being linked using a standard medical record number.

Millegan et al. (2013) used a sample consisting of 377,565 children, ages nine to seventeen, with 121,033 having a parent deployed and 256,532 who did not have a parent deployed. One outcome identified itself as any hospitalization funded through a military health system and military insurance where there was a diagnosis in Major Diagnostic Category of 19 or 20. A two-stage statistical model was used to analyze data and to calculate odds ratios for risk of child psychiatric hospitalization based on parental deployment and length of deployment. Demographics of the child were utilized as covariates and included in the final model. Linear regression was also used for children with at least one day in the hospital with the dependent variable being the length of stay in the hospital and with the bias being accounted for by using Duan's smearing estimate method.

Analyses of the data suggest there is a small increase in the risk of psychiatric hospitalization among the population during parental deployment with risk increasing with the length of the deployment. Millegan et al. (2013) found no significance between parental deployment and the length of hospitalization. The study does recommend the

development of preventive and intervention services to optimize the available medical resources for military families.

Cederbaum et al. (2014) completed a study to understand better how parental deployment affects military youth mental health. Data obtained from the 2011 California Healthy Kids survey examined the feelings youth were experiencing such as feeling sad or hopeless, suicidal ideation, well-being, and depressive symptoms. The population sample consisted of 14,299 students in 7th, 9th, and 11th graders within the school district. Of the sample, 1,305 had a military-connected parent, and 609 had a military-connected sibling.

Cederbaum et al. (2014) conducted data analysis examining frequency distribution and cross-classification tables to compare sociodemographic characteristics and critical variables related to a military connection. Findings of the study suggest that military youth feel sad or hopeless more than their civilian peers. The results also found that 24.8% of military adolescents with a parent deployed and 26.1% of military youth with a sibling deployed, report seriously considering suicide. These findings emphasize an increased risk of mental health problems among military youth.

Esposito-Smythers et al. (2011) address a gap in services by providing a review of the empirically based and theoretically informed analysis of a deployment cycle and the impact this can have on youth. There are unique stressors and risks associated with a parental deployment which often increases the emotional and behavioral problems among adolescents. The four phases of deployment include pre-deployment (notification to departure), deployment (departure period), reintegration (preparation to return), and post-

deployment (period after return). Each phase has its own unique set of stressors and problems for families, especially youth. These feelings can range from shock and anger during pre-deployment to fear and worry during the deployment to intense happiness during reintegration which often fades into many mixed emotions during the post-deployment phase when families are attempting to readjust their routines.

The stress felt during each stage of deployment can cause emotional health problems for family members. Research indicates some universal emotions related to all phases of deployment are loneliness, worry, sadness, anxiety, anger, insomnia, nervousness, headaches, eating problems, and maintaining proper concentration and focus. Military youth often see and experience the changes the non-deployed parent experiences which can affect their mental health and adjustment.

Past research has also found that military children report a loss of interest in their normal activities, changes in sleeping and eating habits, periods of sadness, crying, worry, and even social withdrawal. Many youths also experience problems in school with a decline in grades. Teachers have reported observing military-connected youth to display an increase in anger which ultimately impacts school functioning. Teachers have also reported seeing an increase in high-risk behaviors of military youth such as cutting, sexualized behavior, drinking, and drugs. The authors also found that military youth experience an increase in mental health services during the deployment process.

Services provided to military adolescents and their families during the stages of deployment consists of prevention programs and treatment services that are psychoeducational, peer-based, and family-based. Support groups provide youth an

avenue to develop skills to help them better cope with the stressors of parental deployment.

Child Maltreatment. The Family Advocacy Program (FAP) is a multi-disciplinary resource provided to active duty military members and their families that offers services to address child abuse and neglect through prevention, intervention, and treatment (Military OneSource, 2018). Child abuse and neglect, as defined by the Department of Defense, represent four types of maltreatment: physical abuse, emotional abuse, sexual abuse, and neglect. In 2017, there were 12,849 reports of suspected child abuse and neglect reported to the FAP which is a five percent decrease in reports from 2016 (Department of Defense, 2018). Of these 12, 849 reports of suspected child abuse and neglect, 6,450 met the criteria for child abuse and neglect and were investigated (Department of Defense, 2018). The stress, loneliness, and anxiety experienced by both children and their parents during a military deployment increase the risk of child maltreatment.

McCarthy et al. (2013) conducted a population-based study examining the frequency of child treatment in military families before and after a combat-related deployment. The study sample consisted of 2,287 children who had experienced 2,563 substantiated incidents of abuse and neglect by a military parent. 90% of these children only experienced one episode of child maltreatment, but of those who experienced multiple incidents, 57% occurred during post-deployment.

McCarthy et al. (2013) obtained data for the study by combining archival information from military databases. Information on child maltreatment cases was

obtained from the records of the Family Advocacy System of Records (FASOR) clinical information system and provided information on all incidents of child maltreatment reported to the Family Advocacy Program (FAP) on military installations worldwide. Information about deployments was obtained through a deployment database via Clinical Informatics Branch at Brooks City-Base in Texas. The database provided information about 445,480 military deployments of 261,644 active duty members for an 85-month period between October 2001 and October 2005.

Results indicate that victims were more likely to experience neglect (44%) followed by emotional abuse (39%), physical abuse (30%), and last, sexual abuse (2%). The study examined the rate of child maltreatment after versus before the military member's first deployment with findings indicating that the frequency of child maltreatment such as emotional abuse and neglect decreased from pre-deployment to post-deployment while child maltreatment such as physical abuse remained stable. Incidents of severe neglect and sexual abuse tended to be higher following deployment. The milder forms of child maltreatment are found to decrease following a deployment while increases in severe child maltreatment increase.

Rabenhorst et al. (2015) studied child maltreatment perpetration among 99,697 active duty military parents who completed a combat-related deployment. Past research has indicated that combat-related experience is a risk factor for child maltreatment and family maltreatment. Studies found an association between increased parental deployments with increases in child maltreatment. This study examined whether child maltreatment rates by military members were affected after a combat-related deployment

when compared to other non-combat related deployments. Researchers hypothesized that active duty fathers who are deploying would have higher overall child maltreatment rates than active duty mothers. The researchers also hypothesized that married parents would have lower overall child maltreatment rates than single or never married parents. Enlisted active duty military parents would have higher child maltreatment rates than commissioned officer active duty parents. The current study examined whether child maltreatment rates by active duty parents would become lower or higher after a combat deployment compared to the rates before deployment. The study also sought to examine whether or not maltreatment type, severity, an injury occurring, and whether alcohol use was involved in the maltreatment.

Rabenhorst et al. (2015) used a population that consisted of 99,697 active duty Air Force members who had deployed for thirty-one or more days during Operation Iraqi Freedom/Operation Enduring Freedom (OIF/OEF) and was the parent of a child under the age of eighteen during the period of 1 October 2001 and 31 October 2005. The deployment data was obtained in the same manner as the previous study, which was through the Clinical Informatics Branch, Brooks City, Base, Texas. This data provided 261,644 individuals who met the deployment criteria as they completed between one and twenty deployments during the study period. The Air Force Personnel Center provided data which included information on the number of dependent children a military member had at the time of the deployment. The final database provided 99,697 participants who met the criteria. The Family Advocacy System of Records (FASOR) clinical information system provided information about each incident reported to the Family Advocacy

Program (FAP). The child maltreatment data merged with the deployment data and Air Force personnel data which created a database with information about deployments and child maltreatment incidents associated with the active duty member who is deploying. A conditional Poisson regression was used to analyze the rate ratios of child maltreatment post-deployment compared to pre-deployment.

Results of the study indicate that approximately two percent of deployed military parents perpetrated 2,653 incidents of substantiated child maltreatment involving 2,943 maltreatment types. The analysis shows that among the 2,943 substantiated child maltreatment types, the most frequent was neglect (36.2%), followed by emotional abuse (33.1%), physical abuse (28.5%), and sexual abuse (2.2%). The majority of the incidents were mild at 71% with incidents of moderate/severe occurring at 29%. Alcohol was a factor in 12% of the incidents with 19% of the incident resulting in a child injury.

Child maltreatment rates were found to be higher among military fathers than mothers, single parents, and never married parents. The rates among enlisted military members were higher than the incident rates of commissioned officers. The analysis also found that shorter deployments of one to three months had higher child maltreatment rates than other deployments with longer time periods. The study found that child maltreatment rates were lower among married parents than single or divorced parents. The study stated that enlisted active duty status directly associated with higher child maltreatment rates but indicate that enlisted active duty members are associated with lower economic status and less education which are high-risk factors of child maltreatment in general. The study differed from the previous research as findings

suggest that child maltreatment rates did not change after deployment. Although the study did find an association between deployments and post-deployment child maltreatment outcomes, there is only speculation as to why this occurs.

Summary

This chapter provided a review of the literature conducted to explore the question, "What tools and techniques do social workers use when working with military children during a deployment?" Current, peer-reviewed scholarly publications were located using a search of SocINDEX, Thoreau Multidata Base, Social Work Abstracts, PsychInfo, and ERIC databases. The search criteria used the terms, "military children" AND "deployment" AND "military parent". A search yielded nineteen articles for the literature review. From the articles, four themes emerged throughout while examining the effects a parental deployment can have on a child: (a) school and educational effects on children; (b) psychosocial and behavioral effects; (c) physiological and mental health effects; and (d) child maltreatment.

Many of the studies focused on just one of the themes but often touched upon related areas such as the interrelationship of school climate and mental health. For example, in the Chandra et al. (2010) article, the research focused on how multiple and extended deployments affect the behavioral, social, and emotional outcomes of children in school through the perspective of school staff. School staff indicated that youth anxiety levels, increased responsibilities at home, the poor mental health of the parent at home, and difficulty accessing appropriate resources affected how students performed in school. School staff felt that the deployment of a parent negatively impacted the social and

emotional functioning of some children, but they suggested other youth coped well. The four themes identified in the literature indicated that the common problems associated with deployment are related to other issues such as the length of the deployment, the stability of the parent at home, the mental state of the active duty member, and how the family handled the reintegration of the member back into the family.

Other studies described a role shift within the home and a change in the parent-child relationship after parental deployment. Truhan (2015) indicated that children are often given new roles and responsibilities when a parent deploys that are often not appropriate for their emotional and developmental level. Research has found that girls are at a greater risk of parentification in the home during deployment than boys, but little research has been completed to identify if there is an association between parental deployment and increased resilience or higher levels of anxiety and distress. Creech, Hadley, & Borsari (2014) stated that the deployment of a parent might be related to an increase in emotional and behavioral problems for children.

Many studies show that the attachment between a child and active duty parent are adversely affected by deployments and time apart (Lowe et al. 2012). Attachment problems between a parent who remains at home during deployment and the youth are also present, but they are more subtle and difficult to recognize. Military youth have adjustment difficulties not only during deployment but also upon reintegration of the deployed parent with younger children tending to have more problems adjusting to the separation and school-age children having more issues with anxiety and concerns for their absent parent (Andres and Moelker, 2011). Older children also experience significant

changes to family life during deployment as they experience additional responsibility, changes in daily routines, family traditions, emotional and behavioral problems as well as feeling as if they have an incomplete family (Knobloch et al. 2015). Understanding the effects, a military deployment has on youth will assist helping social workers and community agencies provide more direct, evidence-based interventions to military children and their families while ensuring resources are available during all stages of deployment.

Section 2: Research Design and Data Collection

Military children experience numerous changes and potential challenges throughout their childhood due to a parent's military career. Military youth have adjustment difficulties during the deployment of a parent but also experience unique challenges during reintegration with the deployed parent.

Social workers and professionals providing services to military youth and their families observe firsthand the impact deployment has on military children and families. Working with the military in any capacity can be a challenge if the helping professional is not cognizant of or understanding of how military members and their families live their daily lives based upon the mission and readiness of the Air Force, the work they do, the long hours they work, how the military health care systems operates and even understanding the benefits and services available on and off military installations (Wooten, 2015). There is often a gap in services for military children and their families as it relates to providing effective and culturally appropriate support during deployment.

It is due to this gap in services, that this study explored the tools and techniques used when working with military-connected children and adolescents as well as their families during a deployment. In the following section, I discuss the study's research design and rationale, methodology, data analysis, and the ethics involved in the study.

Research Design

The research design of this study utilized a qualitative, action research approach. The experience and interaction between people and their environment are important for others to understand what problems may be occurring and how to find solutions to alleviate these problems (Maksimović, 2010). These experiences include feelings, actions, and perceptions (Maksimović, 2010). John Dewey believed there is a tendency for many to cover up real problems of people and communities, and his criticism of the separation between knowledge and action led to the creation of action research (Maksimović, 2010). Kurt Levin believed that the core idea of action research referred to experimental research aimed at solving social problems within a group through planning, action, and evaluation (Maksimović, 2010). Action research has the philosophy that actions and procedures should not be created through policy and programs but instead should provide the resources which enable people and communities to enable effective action that is appropriate to specific communities (Stringer, 2014). With action research, there is a change in vision from service providers being the creator of services to being more a facilitator with others to create services that will be relevant for specific populations (Stringer, 2014).

I examined the evidenced based practices used when working with youth during a deployment. A qualitative approach was determined after research questions were developed to meet the identified needs of filling a gap in services provided to youth and military families at Mountain Home Air Force Base. Mountain Home Air Force Base, an Air Combat Command installation, has a high operational tempo with a high deployment rate for military personnel. By using a qualitative, cross-sectional design, I sought to understand military deployments and their effect on youth at a certain point in time.

A qualitative, action research design allowed for an understanding of the natural environment of how professionals who provide services to military youth perceive the problem and the tools and interventions necessary to help reduce the adverse effects of a parental separation (Korstjens and Moser, 2017). A qualitative research design provided a method to gather data in a natural setting, with open discussions, to help the researcher understand what social workers, professionals and military families think, feel and do during a military deployment. An expectation of this study was that it would provide knowledge of evidence-based tools and interventions that are more effective and efficient when used with military youth during parental deployments. I utilized a qualitative, phenomenological approach as this type of approach provided a method for the capture of the lived experiences of social workers and helping professionals within their world and allowed for an exploration of how they make sense of the effects a military deployment has on youth and provided insight into their experience.

Methodology

Population

The target population for this study was social workers and helping professionals located on Mountain Home Air Force Base military installation and within the local community who provide or have provided services to military youth and their families.

Procedures for Recruitment, Participation, and Data Collection

The Idaho Department of Social Work Examiners Directory was used to obtain information of potential participants in Mountain Home and the surrounding areas. Phone calls, emails, and networking helped the research connect with more focus group participants. An advertisement was placed on Facebook to reach additional participants not included previous outreach attempts. Moser and Korstjens (2018) indicated that it is critical to select participants who can provide the richest information; they should be knowledgeable on the research problem, able to articulate and reflect their ideas and opinions, and are motivated to communicate with both the researcher and other participants. Therefore, I reached out to Military Family Life Counselors on Mountain Home Air Force Base as they work directly during each stage of deployment with military youth and military families to provide services to combat the negative effects of deployment.

Participation was completely voluntary for all participants, and they were advised they had the option of stopping participation at any time during the study. A focus group consisting of seven participants provided data for the study. Linhorst (2002) defined focus groups as a qualitative research method in which the researcher interviews a small

group of participants to stimulate discussion of the research topic and obtain information about the participant's beliefs and attitudes. All participants received the same introductory e-mail explaining expectations of them during the study and why the study is important as well as explaining that the focus group discussion would be recorded.

The focus group met in Mountain Home, Idaho at the Mountain Home Public Library and consisted of five social workers and two Military and Family Life Counselors. Social workers are professionals with graduate degrees in social work who work with individuals, groups and community organizations to develop or improve programs, services, and help people lives better lives. Additionally, a Military and Family Life Counselor is a professional who holds a graduate degree in a mental health field such as social work, psychology, marriage and family therapy, or counseling and must possess and maintain a full licensure to practice independently at the Master's or Doctorate level as a Clinical Social Worker, Marriage Family Therapist or Psychologist without restrictions or supervision (i.e. LCSW, LISW, MFT, LPC, etc.) The sample size was used to ensure sufficient data from the participants were obtained to identify effective, evidence-based practices while working with the military culture.

A focus group provided a means for open discussion and allowed the stakeholders to participate in an unstructured, conversational, and familiar way of talking in a group about the identified problem (Kaner, 2014). Open discussions allowed for the participants to talk when they want, say what they want, and share information in a way that everyone in the group could understand. During the focus group, participants were

asked to share and compare their experiences about the research problem and discuss the extent to which they agree or disagree with one another.

The focus group began with a welcome and icebreaker followed by an overview of the topic of the study. Participants were informed of the rules of the focus group and confidentiality of the group was discussed. Each participant signed a confidentiality agreement prior to the start of the focus group. Participants were informed that the discussion would be audio recorded and later transcribed so the information can be analyzed. The participants answered pre-designed questions beginning with general questions and becoming more specifically related to the research problem. After the focus group, the participants were provided an opportunity to review the written transcript and facilitate member checking.

I asked the following questions as the focus groups are facilitated with participants:

- 1. Describe your experience with military deployments.
- 2. Describe the tools and interventions you have utilized as a provider when working with military-connected children during a military deployment?
- 3. Tell me what you have learned about how parental military deployments can positively or negatively affect military-connected children?
- 4. How do you believe social workers/schools/providers can help decrease the adverse effects children experience during deployment?
- 5. In what ways do you believe the military community offers an appropriate level of services to support military-connected children during a deployment?

- Describe your thoughts on providing more services during each stage of deployment.
- 7. Describe the way(s) you feel military-connected children and families have ready access to resources in every stage of deployment? What way(s) do they not?
- 8. In your experience, in what ways can military leadership assist to provide fund additional resources to provide to military families during times of deployment?

Data Analysis

Information and data obtained during the focus group was written down by the facilitator to help identify statements that have a concrete meaning once isolated from other information. The data was transcribed to allow for a deeper analysis of meaning. The analysis of the data collected provided a method to reflect upon and interpret information to assist participants in looking at the research problem in different ways, which assisted them in developing a framework to think about the problem being investigated (Stringer, 2014).

I completed a thematic analysis of data to identify themes based upon the research questions. Thematic analysis helped me identify patterns and themes within the data that are important then I used this information to address my research questions (Maguire and Delahunt, 2017). The first step in the data analysis was that I became familiar with the information by reading and re-reading the transcribed focus group transcript and making notes of my early impressions of the data. I did not have a pre-set of codes but developed

and modified codes as I worked through the coding process (Maguire and Delahunt, 2017). I generated initial codes by organizing the data into segments and this allowed me to label related data based upon research questions (Maguire and Delahunt, 2017). I worked through the transcript to remove, combine and organize codes into categories that seemed relevant to my researched questions. I examined the codes and identified four broad ideas that emerged from the data then reviewed, modified, and developed them into preliminary themes to ensure that they made sense based upon the research questions (Maguire and Delahunt, 2017). Next, I read the data associated with each theme and studied it to ensure that the data did support the identified theme, if the themes overlapped, or if subthemes were identified within the data. Finally, I completed a final refinement of the themes and how they relate the questions being asked. The data obtained from this research project and a review of the literature regarding past research on military deployments and youth helped support the validity of this research project. The purpose of this study sought to enhance understanding of military deployments by analyzing the best practices of social workers when offering services to military youth during a deployment and resources available to military families during a deployment, so the random sampling of participants was appropriate for this study. This research is not generalizable to all military installations without additional research based upon the individual resources and programs at each specific installation but is applicable to Mountain Home Air Force Base. Data analysis depended on each participants' honesty to the questions asked and their active participation in the group discussion.

Ethical Procedures

Upon approval by the Institutional Review Board of Walden University (03-20-19-0675587), in March of 2019, I began recruitment of participants, with a bachelors or above degree to participate in the project. All participants expressing an interest in participating in the study were provided an introductory discussion with information about the research topic and focus group methodology. All participants who participated in the study did so voluntarily and no promises, coercion, or monetary compensation were provided to any of the participants. The participants were comprised of professionals who would gain enhanced knowledge and shared experiences, through their participation. I explained that if at any time any participant experienced higher levels of anxiety, concern, or worry based upon their personal experiences or past work with military families, they could discontinue their participation in the study without repercussions. Each participant provided their consent for participation in the study by signing a disclosure form that provided a full description of the study, information on the researcher (name, address, contact information, etc.), the purpose of the study, rules of the focus group, a detailed description about confidentiality, and how the data would be shared with others. No identifying information of the participation was maintained in any notes, transcriptions or coded data. I did explain the risks of focus group participants sharing information with others outside of the focus group although all participants were asked to not share any identifying information of participants within the group. The data was transcribed using a data software program which ensured all confidentiality. No names or identifying information of participants were provided in the audio file that was

transcribed. The data was stored in a locked cabinet at the Airman & Family Readiness

Center at Mountain Home Air Force Base with only the researcher having access to the

data and other relevant information (Rothwell, Anderson, & Botkin, 2016). All

participant information and data from the research study will be destroyed five years after

the project has been approved by the dissertation committee at Walden University.

Summary

I facilitated a focus group with social workers and other professionals from Mountain Home Air Force and the local community. The participants agreed to participate in a focus group and answer questions related to effective social work practice with military youth during deployment. The focus group was recorded and then the data was transcribed into a written format which was coded and analyzed. Three themes were identified from the analysis relative to the research questions. Section 3 includes discussion of data analysis techniques and findings of the focus group discussion.

Section 3: Presentation of the Findings

The purpose of this study was to seek to enhance understanding of military deployments by analyzing effective social work practices of social workers and other professionals when offering services to military youth and their families during a deployment. The research questions were:

- RQ1. What tools and techniques do social workers use to help military-connected children understand deployment, reduce the adverse effects they may experience, and assist them in maximizing resiliency during a parental deployment?
- RQ2. What evidenced-based practices to include tools and interventions do social workers use that help guide their work with youth during a deployment?
- RQ3. What training and information can be provided to social workers to ensure adequate military, cultural competency?

An action research methodology provided the means to collect information during a focus group, with five purposively selected degreed social workers and two licensed professional counselors (LPC) who work with youth within the local community and on a military installation in various capacities. The two licensed professional counselors are employed as Military and Family Life Counselors on Mountain Home Air Force Base and work directly with military families during the deployment process; therefore, the feedback they provide would add depth to the focus group and data collected. The knowledge they share would enhance the data collected based upon their experience working with military families and they could provide rich information as they are vastly knowledgeable on the research problem (Moser and Korstjens, 2018). Expert sampling is

a form of purposeful sampling method that is used to gain knowledge from people with specific knowledge and skills in the area of study (Laerd, 2012). Thematic analysis was used to define topics and trends throughout the information collection. This method helped in the assessment of data to assist in defining significant data trends and topics then using this information to tackle the study questions (Maguire and Delahunt, 2017). I used NVivo and manual processing to transcribe the audio recording of the focus group. NVivo is a frequently used qualitative data analysis software for academics and professional scientists worldwide (QSR International, 2019).

Section 3 includes a discussion of the data collection and data analysis techniques, validation procedures, limitations, and findings. I also provide a description of the results along with the information topics/themes, and a summary.

Data Analysis Techniques

Upon approval by the Institutional Review Board of Walden University (03-20-19-0675587), in March of 2019, I began recruitment of social workers, with a bachelors or above degree in social work to participate. I also recruited other professionals who hold a bachelor or graduate degree in a mental health field such as social work, psychology, marriage and family therapy, or counseling and possess a full licensure to practice independently as a Clinical Social Worker, Marriage Family Therapist or Psychologist without restrictions or supervision (i.e. LCSW, LISW, MFT, LPC, etc.). I also recruited social workers and professionals who currently work with or have experience working with military youth and their families. I used the Idaho Department of Social Worker Examiners Directory, professional networking and Facebook to recruit

potential participants. I invited ten social workers and four Military and Family Life Counselors to participate via phone calls and e-mail. Purposive random sampling was used to make selections. Six social workers and two Military and Family Life Counselors agreed to participate in the DSW action research study. Each participant met the criteria for participation as they held a bachelor or master's degree in social work or were a licensed professional counselor (LPC). Each participant was provided a copy of the applicant background questionnaire in advance of the start of the focus group as well as the informed consent. I went over the informed consent form, background information form, the list of the pre-set structured questions, and provided each participant a copy of each form for their keeping. All seven participants who arrived to participate at the focus group completed the information prior to the start of the recorded focus group session. Participants were given ten minutes before the focus group began to complete the background information form and to read and sign the consent form. Participants were also asked if they had any concerns or questions before the discussion began and this was repeated at the end of the discussion. Participants were provided pizza and a drink to enjoy while participating in the discussion as the focus group was scheduled around dinner time to coordinate with participant's schedules.

Participants were asked and encouraged to speak freely and openly using their own vernacular. The preset interview questions were all open ended. Open ended questions allow for participants to share in-depth what they think or feel about the subject being researched while feeling more empowered and motivated about the questions being asked (Singer and Couper, 2017). Open ended questions often will yield more insights to

not only the participant's initial answers to a question but into how they understand the questions being asked (Singer and Couper, 2017). There was no sign that the participants felt uneasy during the focus group discussion or that their answers showed any amount of untruth.

During the focus group discussion, an audio recorder was present to record the discussion. I also took notes and ensured that extensive time was given to ensure that every participant had the opportunity to provide input for all the questions to be discussed and also to provide additional information as they felt appropriate. The data was collected over a sixty-six minute time frame. After the focus group discussion was concluded, I again asked participants if there were any additional comments, statements, or questions in relation to the discussion. I thanked each participant for their active participation and their willingness to share their experiences and knowledge during the discussion process. The audio recorded information was transcribed using a data software and manual processing to aid in data analysis. The transcribed written format was reviewed, edited, and provided to participants for review and validation of the data. Four of the participants responded indicating no concerns, additions, or changes to the data.

At the end of the focus group, the audio recording was transcribed into a written format using NVivo software and manual processing. NVivo software is an online program and the information was not seen or shared by any other person for this process. This process allowed for additional analysis of the data (Laerd, 2012). I filled in gaps and missing words as well as corrected spelling and typographical errors of the transcribed data. As transcribed data do not reflect nonverbal communication, gestures or the

participant's behavioral responses, I utilized notes made during the focus group to supplement the transcribed data. I then started my analysis of the data by reviewing and reading the transcript, listening to the audio recording of the transcript, and reviewing notes made during the focus group to ensure that I fully understood the data (O'Conner and Gibson, 2003). I completed this entire process at least four times to ensure accuracy of the data and made notes in the margins of the transcript then in a notebook. According to Maguire and Delahunt (2017), the first step in any qualitative analysis is reading, and re-reading transcripts of the discussion to ensure that you become very familiar with the entire body of data.

After I became familiar with all the data obtained, I began a thematic analysis of data to identify themes based upon the research questions. This process aided in the analysis to help identify patterns and themes within the data that are important, and this information was used to address the research questions (Maguire and Delahunt, 2017). A pre-set of codes was not developed prior to beginning the analysis but were developed and modified as I worked through the coding process (Maguire and Delahunt, 2017). I generated initial codes by organizing the data into segments and this allowed me to label related data based upon research questions (Maguire and Delahunt, 2017). I identified salient themes, recurring ideas, and patterns that linked the information obtained to participants and the research questions (O'Conner and Gibson, 2003). I manually coded the data using an inductive approach.

In the initial process, I identified three broad ideas that emerged from the data that I then reviewed, modified, and developed them into preliminary themes to ensure that

they made sense based upon the research questions (Maguire and Delahunt, 2017). A theme is a pattern capturing something important or interesting about the information obtained and/or research (Maguire and Delahunt, 2017). I reviewed the data associated with each theme and studied it to ensure that the information supported the identified theme, if the themes overlapped, or if subthemes were identified within the data. This final refinement of the data and themes was conducted to help identify what each theme is saying related to the research question (Maguire and Delahunt, 2017).

My next step was to review, modify, and further develop the three broad themes that I identified previously. I gathered all data that was relevant to each identified theme by using a color-coded system attached to each theme and the data associated with that theme. I then reviewed the entire data set, examining whether the data supported each theme and ensuring that the most important data and themes were fully captured and related to the research questions presented in the study.

A good thematic analysis works with a broad spectrum of study issues, can be used to analyze distinct kinds of information, from secondary sources such as media to group transcripts or interviews and also can work with big or small information sets (Clarke and Braun 2013). Three themes were identified: (a) need for more supportive and readily available mental health resources for military youth and their families, (b) collaboration and effective communication were important for military youth and families to have a successful deployment and reintegration, (c) well-being of military children is influenced by the availability of a support system and resources and the ability to connect military youth to needed resources. This included limited resources on the

military installation and within the local community as well as inadequate staffing. I then completed a final refinement of the data and themes to identify exactly what the essence of the theme is saying about the research questions and how the themes related to the research questions.

I then used a transcript review as an aspect of member checking to establish credibility of the data analysis and findings. The transcript and findings were e-mailed to participants as a method to check for accuracy and tone with their personal experiences (Birt, Scott, Cavers, Campbell, & Walter, 2016). This allowed participants to reconstruct their narrative of the initial information by allowing them to reconstruct their experiences, clarify statements, or even add additional information while affirming that the results reflected their personal opinions and experiences (Birt et al., 2016). Four participants affirmed the accuracy of the data and this allowed for the elimination of any researcher bias and supported the credibility of the data and the subsequent interpretation of the findings (Anney, 2014).

The purpose of this study sought to enhance understanding of military deployments by analyzing the best practices of social workers when offering services to military youth during a deployment and resources available to military families during a deployment, so the random sampling of participants was appropriate for this study. One limitation of member checking as a validation procedure is there is a potential for problems or traps that can be inadvertently set by the researcher themselves as a result of inexperience or even placing the transcription procedures above the participant's voice (Carlson, 2010).

Only seven of the invited participants agreed to attend the focus group for varying reasons. According to Ritchie, Lewis, Nicholls, & Ormston (2014), six to eight focus group participants is a fairly standard format in social research. Of the seven participants', one was male and six were female. Two of the participants were Military & Family Life Counselors who hold a license in Marriage & Family therapy. One participant holds a license with a bachelor's degree in social work while the remaining four participants hold a license with a master's degree in social work. The participants were white with one Hispanic female.

This research is not generalizable to all military installations without additional research based upon the individual resources and programs at each specific installation but is applicable to Mountain Home Air Force Base. Data analysis depended on each participants' honesty to the questions asked and their active participation in the group discussion.

Findings

I examined the tools and techniques used by social workers and other professionals when providing services to military youth during a parental deployment and how these tools and techniques help enhance understanding of the deployment cycle, reduce the adverse effects of the deployment, and increase resiliency in military youth and their families.

Themes

A theme is a pattern in research data which captures a significant idea or fact about the data or research questions (Maguire and Delahunt, 2017). There were recurring

themes in participants' perceptions regarding effective treatment of military youth during deployment. Mental health resources, effective collaboration, healthy communication and an effective support system positively impacted military youth and their families during a deployment. The findings indicated that military youth who are provided effective interventions during all stages of deployment may experience a better understanding of deployment which can reduce the adverse effects they may experience and help them develop skills to increase resiliency.

Theme 1. Social worker and other professionals reported a need for more supportive and readily available mental health resources for military youth and their families.

Theme 2. Social worker and other professional participants reported that collaboration and effective communication were important for military youth and families to have a successful deployment and reintegration.

Theme 3. Social worker and other professional participants reported that the well-being of military children is influenced by the availability of a support system and resources and the ability to connect military youth to needed resources. This included limited resources on the military installation and within the local community as well as inadequate staffing.

The identified themes are further expanded upon below and participant responses support the themes identified. I did make minor editorial changes as necessary to some responses provided by participants to ensure that the information read grammatically and appropriately. Each participant was identified by a pseudonym to ensure protection of the

identity of all participants. Each participant was labeled with a number rather than any identifying information such as name, race, age, or sex. The themes identified represent a mix of all participants' voices.

Identified Focus Group Themes: Data Results

A summary of the outcomes for the focus group discussion questions through identified themes follows:

Theme 1: Social worker and other professionals reported a need for more supportive and readily available mental health resources for military youth and their families. All participants provide services to active duty members, spouses, and military youth through individual and group counseling, psychoeducational briefings, referral to outside resources, support groups, and additional support and availability during a crisis. Participant 4 reported that "people are coming home and this is a critical period as things have changed." Participant 7 reported needing to "put the message out there that is okay to need help and that it's okay to get it." Participant 2 reported that the "Air Force as well as the First Sergeant, and their team are willing to step up and help out someone in their group."

Participant 7 indicated "it's almost like in order to force them to access resources, it's like it must be mandatory." Participants noted a need for a mental health aspect of deployment both prior to and after a parent's return to ensure that the active duty member is doing well and has no recurring effects as a result of deployment. Participants shared that removing the stigma in the military that receiving mental health services is not appropriate or will hurt one's career would benefit families and make them healthier.

In summary, participants indicated there is a slow change in culture within the military and feel that with attrition, seeking mental health services will eventually be seen a positive occurrence rather than a fear.

Theme 2: Social worker and other professional participants reported that collaboration and effective communication were important for military youth and families to have a successful deployment and reintegration. Participant 3 reported personal experience as a spouse of an active duty member who deployed such as "my daughter who was four almost five at that time went into a depression". Another participant states she had a baby six weeks after her spouse was deployed and how this child "had a hard time attaching to him after he returned in a year". Participant 3 reported working with military youth within the school system as a "military and family life counselor for the last six or seven years." Participants 1 and 2 reported working with military youth as a caseworker with Child Protective Services and discussed military families "being in a special spot because when things happen, they are now a single parent with little support" and "that is the biggest disadvantage." In summary, all participants have experienced military deployment as a provider and/or as a parent in many instances which provides them with varying perspectives of the need of military youth.

Participant 3 shared that they provided support to military youth through a "deployment group" within the local school system but "some students stay, some don't." They intervene within the school system by "trying to check in weekly just to see how they are doing" and some will talk "one on one." Participant 4 provides pre-deployment

briefings and reintegration briefings to active duty members and their spouses to provide information on what resources are available.

Participants indicated that reaching out to the school board for additional funds for more school counselors is an option to get more assistance for military youth within the school system. Participants also discussed advocating for more funds from the Air Force to pay for camps and additional counselors on the military installation. Participants also indicated a need for additional funds to be obtained through both the school district and the military community to help fund additional resources for military youth.

When questioned about what they have learned about how military deployments affect military children, Participant 3 shared they "have seen a lot of growth with students." A participant stated they will ask students, "How did you change since your parent has been gone" and then discuss how things have changed in the home and for the student. Some participants reported how military youth have indicated to them "there's been a lot of fighting" or "Oh, it feels so good to have them home." Participant 7 revealed asking military youth "who's there to help you?" and discussing with them the process of deployment with them has helped them better understand. In summary, participants indicated to checking in on military youth throughout a deployment, asking them how they are doing, what they may need, and expressing an interest in their overall well-being was instrumental in showing military youth that someone cares and providing them an opportunity to open up.

In response to being asked how social workers, schools, and providers can help decrease adverse effects children experience during deployment, Participant 5 indicated

that "working with military youth and families in any capacity that we can do to help them decrease those adverse effects during a deployment or before a deployment and after a deployment at any time." Participant 4 shared that this begins with communication among family members and "counseling them to be able to verbalize" their problems with one another. Others shared that this starts with parents having effective communication with one another and building a healthy home life with the "ability to get to problem solving" effectively.

Participant 7 indicated that one effective collaboration and communication method to help military youth and families is "the pre-deployment briefs provided that are spot on and really great with examples and providing information on who you can call if needed." Participants reported a need for more contact after reintegration rather than just at the initial meeting. They said to "check in when the member returns to work after about two weeks leave" as most families are in "Disneyland mode" until then. Participants indicated maintaining this contact to help families learn what their new normal may be after a deployment and "extended that reintegration period."

Participant 7 shared the following:

So, there's a lot of work I end up doing and he comes home from deployment and home has changed, work has changed, and also his level of intensity from being deployed is still way up there. So, then it's always a challenge for military parents especially military to military couples but really any coming home from work and then dialing it down for the people in your house to ensure that communication is good and things remain calm.

In summary, participants identified effective communication, listening, resources and support during all stages of deployment, follow-through at all stages, and collaborative parenting as important to helping children during each stage of deployment.

Theme 3: Social worker and other professional participants reported that the well-being of military children is influenced by the availability of a support system and resources and the ability to connect military youth to needed resources. This included limited resources on the military installation and within the local community as well as inadequate staffing. Participant 4 stated, "the idea is to try to get it be good when he is home because if it's bad, then he goes away on deployment, the spouse realizes she likes it better when he is gone and it just gets worse when he returns home." Everyone shared that providing parenting classes to parents, doing home visits with families during a deployment, and teaching parents about self-care as a way to help decrease the adverse effects military youth experience during deployment. Participants indicated that by providing parents a way to handle the stressors of a deployment ultimately can help military youth decrease the adverse effects of a deployment. Participant 6 indicated that by "Having a calmer parent. You have many calmer children."

Participant 5 shared that by "re-initiating that we can get away before people get deployed." Participant 2 indicated having resiliency events for parents and even for families prior to and after deployment can provide an extra support to military youth as families can learn about base and local community resources available to them while also

learning coping skills to help them handle the stressors of a deployment. Participant 1 indicated that "helping mom and dad is a huge one because that trickles down and is beneficial to youth."

Numerous participants shared that the Airman & Family Readiness Center on all military installations is great at providing information and resources to families. Participant 7 noted that even during a medical appointment at a military treatment facility, medical staff will ask if a parent is deployed. This participant stated, "I think that this is really important because then they'll kind of tune into you, like how are you doing?" Participant 6 indicated resources that are readily accessible to military youth and families is the Military & Family Life Counselors who are available to all active duty members and their dependents as needed. Participants also indicated that school counselors are a resource available to military youth within the school system. Participant 4 indicated a need for additional Military & Family Life Counselors in the local Junior High as the "school counselor has 600+ students and parents to deal with. Participants highlighted barriers for both active duty and family members in reaching out for assistance during times of need, i.e. seeking services/resources prior to a deployment to help prepare and learn what is available. Participants indicated a limited number of base resources, community resources, especially mental health resources, inadequate communication within the family, stigma of seeking mental health assistance and lack of funding for additional resources as roadblocks to resources for military youth.

In summary, providing military youth and parents with a playgroup to meet other youth and parents which will provide an extra layer of support or programs such as Give

Parents A Break to provide parents with some time away from their children to help reduce stress. Also, providing additional activities for children such as "the kids' gym, bowling, league, or the movie days or something." Providing additional supports such as military and family life counselors that are available to assist military youth and families address problems which may be occurring. Participants indicated that base leadership may not have a good understanding of how military deployments in all stages can and will often affect military children on many different levels. Lastly, learning more effective marketing tools to ensure that the target population is being reached and are aware of activities and resources available.

These findings answered the research questions with regard to identifying tools and techniques are used to help military-connected children understand deployment, reduce the adverse effects they may experience, and assist them in maximizing resiliency during a parental military deployment and also highlighted evidence-based practices that help guide work with youth. The findings helped indicate what training and information can be provided to social workers and other professionals to ensure an adequate, military competency. Overall, participants noted a positive impact with current resources that are available for military youth and families during all phases of deployment such as outreach activities, counseling availability, supports within the military community and support within the school system. The lack of funding for additional resources such as additional school counselors, local mental health services, parent training classes, and additional military & family life counselors were noted as limitations to effective practice

with military youth during a deployment. Adequate communication and connecting families to resources they will utilize was also identified as a limitation.

Summary

The research evaluated the effective practice with military youth and their families during a parental deployment. The findings indicated a positive impact on the lives of military youth and their families especially in regard to available supports, activities, and family life outcomes. Section 4 will apply the current findings with professional practice and discuss implications for social change.

Section 4: Application to Professional Practice and Implications for Social Change

By completing this study, I sought to enhance understanding of military deployments by analyzing the best practices of social workers and other professionals at Mountain Home Air Force Base and the surrounding community who offer services to military youth, ages six through twelve years, during a deployment. I used a qualitative, action research method in a focus group setting with seven social workers and other professional participants. Participants reported a positive impact for military youth and their families with current available resources and supports that are influenced by base and local resources, outreach activities, counseling availability, supports within the military community and support within the school system. The lack of funding for additional resources such as additional school counselors, local mental health services, parent training classes, and additional military & family life counselors were noted as limitations to effective practice with military youth during a deployment. Adequate communication and connecting families to resources they will utilize was also identified as a limitation. The findings inform social workers and professionals about effective practice for military youth during a deployment.

Application for Professional Ethics in Social Work Practice

Providing services to military youth in any capacity can be a challenge if those providing services are not cognizant of and understanding of how military members and their families lives their daily lives. Military children experience a higher level of stress within their lives as a result of a parent's military service such as moving to a new location every few years, changes in schools, changes in extracurricular activities, leaving

friends and family and ultimately reducing their comfort zone as they once again become the new kid. Military youth also experience long periods away from a parent due to deployments. Such changes and parental deployments present challenges and often indicate a need for services and interventions that appropriately adapt to the unique needs of military children (Cozzo et al. 2014). Social workers and other professionals providing services to military youth and their families often observe firsthand the impacts a parental deployment has on military children. Social workers have an ethical responsibility to those they serve and their primary ethical responsibility is to help people in need and address social problems while advocating for those who cannot or will not advocate for themselves (NASW, 2008.). Developing further enhanced knowledge about effective practice with the military population impacts the professional providing services and impacts the practice of other professionals and agencies that collaborate with the military community thus positively impacting military youth and their families. The results of this study benefit Mountain Home Air Force Base as well as local community partners who provide services to military youth during deployment. The findings may help providers choose more effective therapeutic intervention strategies to address problems that inhibit positive outcomes with military youth. The findings supported the need for social workers and other professionals to identify barriers to emotional and behavioral outcomes for military youth in many areas of their life as well as in the home and local community.

Recommendations for Social Work Practice

Working within a military culture is a very specialized field of practice that ranges from the micro level to the macro level and often requires advanced knowledge

and skills (Wooten, 2015). Responding to the needs of military youth during a deployment presents both opportunities and challenges for military social work education.

This study sought to understand military deployments and the tools and techniques social workers use to intervene when providing services to military children on military installations during parental deployments. The military has a distinct subculture that can be confusing to those who have not lived a military life. I must seek to build the relationship between all levels of military leadership, military families, and community and civilian stakeholders in a way that promotes equality. Many military children receive services through the local community or school and building relationships would encourage all involved to be sensitive to one another's feelings and needs while also encouraging the development of personal and cooperative relationships among everyone (Stringer, 2014). The military also has a distinct language that is full of acronyms and there needs to be an understanding of this military culture and language when providing services to military youth especially during a deployment when stress level is potentially high.

Inclusion at all levels of the military can be tricky and sometimes difficult. I recommend that social workers and professionals who work with the military environment should seek to attend meetings such as the such as the Council of Governments (COG), Community Action Information Board (CAIB), and the Integrated Delivery System (IDS), and Quality of Life (QoL) as these meetings have all the base

helping agencies attending and would be a way to build relationships and collaborations with other providers.

Social workers have an obligation to learn about different races, ethnicities, and cultures to assist them in becoming better social workers. There should be an investment in the development of knowledge about people and communities of color, (NASW, 2008). People are more than race, ethnicity, and gender and social workers should view them as a whole entity rather than just pieces. Social workers should pull together every part of the individual through a multi-dimensional approach. By understanding cultural competence and having a holistic view of the person rather than placing them into categories, the social worker has a better understanding of the individual and their needs. The military culture can often be very difficult for those who do not live it daily to understand. I recommend that social workers who have limited experience with the military community to ensure they are educated appropriately and effectively on military culture to include the values, beliefs and morals that military families live their daily lives. Military social workers and other professionals have an ethical obligation to share their experience and knowledge with others who may be working with military families to ensure an appropriate understanding of military cultural competence to help reduce and/or mitigate harm to military families.

Because the focus group involved social workers and professionals who provide services only to Mountain Home Air Force Base and the local community, generalizability is limited. Military installations across the world have varying resources and services available for military youth and their families. Local communities also differ

in size and the services available to military youth which make it difficult to generalize the results of this study to other demographics and locations. Member checking as a validation process did help confirm the findings of this study, which can potentially be used by the Community Action Team at Mountain Home Air Force Base, the local community of Mountain Home, local public and base schools, and other helping agencies better understand the needs of military youth during deployment and how social workers can help them lessen the adverse effects of a deployment. Further research is needed on the availability of additional funds to help supplemental resources.

A limitation of this study is that participation was limited only to social workers and other professionals who provide services to the military population. The findings may not reflect the perspectives of military youth, military members, or spouses and they are the demographic being studied. Another limitation involves only one air Force military installation reflected in the data. The results may not depict youth from other Air Force military installations, Army, Air National Guard, Navy, or Marine youth. A recommendation for future research would include expanding the participant base to include military youth and their families and potentially include other branches of military.

I plan to disseminate the findings from this study to increase the knowledge base in the field of military social work and help social workers better understand the military culture so as to improve an increase the tools and techniques used when providing services to military youth during deployment. I will reach out to participants in an effort to inquire about disseminating the results at their agencies. In addition, I will recommend

that the Community Action Team allow a presentation of the findings at a meeting to share the information with all base helping agencies.

Implications for Social Change

This researcher sought to identify and build upon the tools and techniques used by social workers and other professionals when providing services to military youth during a deployment. This study aims at improving the lives of military youth and their families and the focus is on streamlining access to services for military youth. The findings and outcomes of this research will help bring a positive change to the military community specifically military youth who may be experiencing hardship. Military youth may often find the deployment of a parent very stressful but it can also be an opportunity for growth within the youth. Mountain Home Air Force Base is an Air Combat fighter base that has a high operation and high deployment rate based upon the mission of the Air Force. Research has found that a parental deployment can place a military youth at risk for emotional, behavioral, academic, and health difficulties but also shows that military youth often exhibit great resiliency during the absence of a parent (Knobloch et al. (2015). Providing effective therapeutic strategies to military youth during a deployment involves knowledge of the military culture, collaboration with military youth and their families, and with base and local community helping agencies. Successful intervention strategies with military youth will help social workers and community agencies provide more direct, evidence-based interventions to military youth and their families while ensuring resources are available during all stages of deployment to help reduce the behavioral, social, and emotional outcomes of children.

On a micro level, effective tools and techniques include individualized services based upon the specific needs of the military youth and their family to help them prepare for deployment, a change in routine, an opportunity to express their emotion, and allow then to accommodate for any change or shift in their daily routine and lives. A macro implication of this study is to incorporate effective interventions at the base level and the local community level with social workers and other professionals and to advocate for policies that add military considerations for children with a deployed within the local school district as an added support. The current study findings suggested that children respond positively to services provided within the school system and can positively affect the emotional, behavioral, and educational needs of a military youth. A mezzo level implication of the study can potentially be utilized for partner with the Department of Defense and policymakers to develop and offer additional tools and resources that can assist military youth and their families in handling the unique stressors that may arise during a deployment. Findings from this study have implications for social change not only at Mountain Home Air Force Base but across other military installations that provide services to military youth. Further study of the implications of deployment on the emotional, behavioral, health, and educational needs of a military youth may inform additional macro level changes at military installations throughout the World that may impact military youth on an individual level.

Summary

There are more than two million military adolescents and youth across the globe who regularly experience high periods of stress changes and situations in their life on

many levels. Military youth taken on stressors during their childhood that many civilians do not understand. Therefore, it is important that professionals working with military youth understand the military culture and way of life. This study was completed to explore effective social work practice with military youth during a deployment.

During a parental deployment, military youth are often ready and willing to shoulder additional responsibilities in the home, accommodate changes in their daily lives and routines, and be flexible in many areas of their lives. Deployments that take parents away from their children are not likely to change in the foreseeable future, which means that military youth will continue to experience to the loss of a parent for a time. Military youth need an outlet for their emotions and should have the ability to communicate with professionals who understand what they are experiencing. Military youth need to have the availability to have frequent contact with the absent member, to help them maintain an attachment to that parent. Therefore, it is vital for any professional providing services to military youth and their families that they expand their knowledge and cultural competency of the military culture in order to better help military youth understand deployment, reduce the adverse effects of a parental deployment, and improve the resiliency of military children.

References

- Andres, M.D., & Moelker, R. (2011). There and back again: How parental experiences affect children's adjustments in the course of military deployments. *Armed Forces* & *Services*, 37(3), 418-447.
- Anney, V. (2014). Ensuring the quality of findings of qualitative research: Looking at trustworthiness criteria. *Journal of Emerging Trends in Educational Research and Policy Studies (JETERAPS)*, 5(2), 272-281.
- Berryhill, M.B., Soloski, K.L., Durtschi, J.A., & Adams, R.R. (2016). Family process: Early childhood emotionality, parenting stress, and couple relationship quality. *Personal Relationships*, *23*, 23-41. doi: 10.111/pere.12109.
- Birt, L., Scott, S., Cavers, D., Campbell, C., & Walter, F. (2016). Member checking: A tool to enhance trustworthiness or merely a nod to validation? *Qualitative Health Research 26*(13), 1802-1811. doi: 10.1177/1049732326654870.
- Card, N.A., Bosch, L., Casper, D.M., Wiggs, C.B., Hawkins, S.A., Schlomer, G.L., & Borden, L.M. (2011). A meta-analytic review of internalizing, externalizing, and academic adjustment among children of deployed military service members.

 **Journal of Family Psychology, 25(2), 508-520.
- Carlson, J. A. (2010). Avoiding Traps in Member Checking. *The Qualitative Report*, *15*(5), 1102-1113. Retrieved from https://nsuworks.nova.edu/tgr/vol15/iss5/4
- Cederbaum, J.A., Gilreath, T.D., Benbenishty, R., Astor, R.A., Pineda, D., DePedro, K.T., Esqueda, M.C., & Atuel, H. (2014). Well-being and suicidal ideation of

- secondary school students from military families. *Journal of Adolescent Health* 54, 672-677.
- Chandra, A., Martin, L.T., Hawkins, S.A., Richardson, A. (2010). The impact of parental deployment on child social and emotional functioning: Perspectives of school staff. *Journal of Adolescent Health*, *46*, 218-223.
- Clarke, V. & Braun, V. (2013) Teaching thematic analysis: Overcoming challenges and developing strategies for effective learning. *The Psychologist*, 26 (2), 120-123.
- Cohen, L., Ferguson, C., Harris, C., Pooley, J.A., & Tomlinson, S. (2011), Family systems and mental health issues: A resilience approach. *Journal of Social Work Practice*, 25(1), 109-125. doi: 10.1080/02650533.2010.533754.
- Cozzo, S.J., Lerner, R.M., Haskins, R., (2014). Military and veteran families and children: Policies and programs for health maintenance and positive development. Social Policy Report. *Strategy for Research in Child Development*, 28(3). 1-30.
- De Pedro, K.T., Astor, R.A., Gilreath, T.D., Benbenishty, R., Berkowitz, R. (2018). School climate, deployment, and mental health among students in military-connected schools. *Youth & Society*, *50*(1), 93-115.
- Department of Defense. (2018). Report on child abuse and neglect and domestic abuse in the military for fiscal year 2017. Retrieved from http://download.militaryonesource.mil/12038/MOS/Reports/FAP-FT-17-DoD-Report.pdf.

- Department of Defense. (2016). 2016 Demographics profile of the military community.

 Retrieved from http://download.militaryonesource.mil/12038/MOS/Reports/2016-Demographics-Report.pdf.
- Esposito-Smythers, C., Wolff, J., Lemmon, K.M., Bodzy, M., Swenson, R.R., & Spirito, A. (2011). Military youth and the deployment cycle: Emotional health consequences and recommendations for intervention. *Journal of Family Psychology*, *25*(4), 497-507.
- Foran, H.M., Eckford, R.D., Sinclair, R.R., & Wright, K.M. (2017). Child mental health symptoms following parental deployment: The impact of parental posttraumatic stress disorder symptoms, marital distress, and general aggression. *SAGE Open,* 7(3), 1-10. doi: 10.1177/2158244017720484.
- Gurman, A.S. (2012). Clinical casebook of couple therapy. New York, NY: The Guilford Press.
- Guerin, P.J. & Chabot, D.R. (1997). Development of family systems theory. *American Psychological Association*, 181-225.
- Hisle-Gorman, E., Harrington, D., Nylund, C. M., Tercyak, K. P., Anthony, B. J., & Gorman, G. H. (2015). Impact of parents wartime military deployment and injury on their young children's safety and mental health. *Journal of the American Academy of Child & Adolescent Psychiatry*, *54*(4), 294-301
- Huebner, A.J., Mancini, J.A., Wilcox, R.M., Grass, S.R., & Grass, G.A. (2007). Parental deployment and youth in military families: Exploring uncertainty and ambiguous loss. *Family Relations*, *56*(2), 112-122.

- Kaner, S. (2014). *Facilitator's guide to participatory decision-making*. (3rd ed.). San Francisco, CA: Jossey-Bass.
- Knobloch, L.K., Pusateri, K.B., Ebata, A.T., & McGlaughlin, P.C. (2015). Experiences of military youth during a family member's deployment: Changes, challenges, and opportunities. *Youth and Society*, 47(3), 319-342.
- Korstjens, I. & Moser, A. (2017). Series: Practical guidance to qualitative research. Part 2: Context, research questions and designs. *European Journal of General Practice*, 23(1), 274-279.
- Laerd Dissertation. Purposive sampling: Laerd Dissertation. (2012). Retrieved from http://dissertation.laerd.com/purposive-sampling.php.
- Lowe, K.N., Adams, K.S., Browne, B.L., Hinkle, K.T. (2012). Impact of military deployment on family relationships. *Journal of Family Studies*, *18*(1), 17-27.
- Lucier-Greer, M., Arnold, A.L., Grimsley, R.N., Ford, J.L., Bryant, C., & Mancini, J.A. (2016). Parental military service and adolescent well-being: mental health, social connections, and coping among youth in the USA. *Child and Family Social Work,* 21, 421-432.
- Maguire, M. & Delahunt, B. (2017). Doing a thematic analysis: A practical, step-by-step guide for learning and teaching students. *All Ireland Journal of Teaching and Learning in Higher Education* 8(3), 3351-33513.
- Makismovic, J. (2010). Historical development of action research in social sciences. *Philosophy, Sociology, Psychology, and History, 9*(1), 119-124.

- McCarthy, R.J., Rabenhorst, M.M., Thomsen, C.J., Milner, J.S., Travis, W.J., Copeland,
 C.W., & Foster, R.E. (2013). Child maltreatment among civilian parents before,
 during, and after deployment in United States Air Force Families. *Psychology of Violence*, 5(1), 26-34.
- McNiff, J. (2016). You and your action research project (4th ed.). New York, NY: Routledge.
- Milburn, N.G. & Lightfoot, M. (2013). Adolescents in wartime US military families: A developmental perspective on challenges and resources. *Clinical Child & Family Psychology Review*, 16, 266-277.
- Military OneSource. The family advocacy program. (2018). Retrieved from https://www.militaryonesource.mil/-/the-family-advocacy-program.
- Millegan, J., Engel, C., Liu, X., & Dinnen, M. (2013). Parental Iraq/Afghanistan deployment and child psychiatric hospitalization in the US military. *General Hospital Psychiatry*, 35, 556-560.
- Moser, A. & Korstjens, I. (2018). Series: Practical guidance to qualitative research. Part 3: Sampling, data collection, and analysis. *European Journal of General Practice*, 24(1), 9-19.
- National Association of Social Workers. (2008). Code of ethics of the National Association of Social Workers. Retrieved from https://www.socialworkers.org/pubs/code/code.asp.

- Nicosta, N., Wong, E., Shier, V., Massachi, S., Datar, A. (2017). Parental deployment, adolescent academic and social-behavioral maladjustment, and parental psychological well-being in military families. *Public Health Reports*, *132*(1), 93-105.
- Nyumba, T.O., Wilson, K., Derrick, C.J., & Mukherjee, N. (2018). The use of focus group discussion methodology: Insights from two decades of application in conversation. *Methods in Ecology and Evolution*, *9*(1), 20-32.
- O'Conner, H. & Gibson, N. (2003). A step-by-step guide to qualitative data analysis. *A Journal of Aboriginal and Indigenous Community Health, 1*(1), 63-90.
- O'Gorman, S. (2012). Attachment theory, family system theory, and the child presenting with significant behavioral concerns. *Journal of Systematic Therapies*, 31(3), 1-16.
- Paley, B., Lester, P., & Mogil, C. (2013). Family systems and ecological perspectives on the impact of deployment on military families. *Clinical Child & Family Psychology Review, 16*, 245-261.
- QSR International. Helping you discover the rich insights from humanized data. (2019).

 Retrieved from https://www.qsrinternational.com/.
- Rabenhorst, M.M., McCarthy, R.J., Thomsen, C.J., Milner, J.S., Travis, W.J., & Colasanti, M.P. (2015). Child maltreatment among u.s. air force parents deployed in support of operation iraqi freedom/operation enduring freedom. *Child Maltreatment*, 20(1), 61-71. doi: 10.1177/1077559514560625.

- Ritchie, J., Lewis, J., Nicholls, C., & Ormston, R. (2014). Thousand Oaks, CA: Sage Publications.
- Rothwell, E., Anderson, R., & Botkin, J.R. (2016). Deliberative discussion focus groups. *Qualitative Health Research*, 26(6)., 734-740.
- Rush, C.M. & Akos, P. (2007). Support children and adolescents with deployed caregivers: A structured group approach for school counselors. *The Journal for Specialist in Group Work*, 32(2), 113-125.
- Simmons Staff. (2014). Theories used in social work practice and practice models.

 Retrieved from https://socialwork.simmons.edu/theories-used-social-work-practice.pfd.
- Singer, E. & Couper, M.P. (2017). Some methodological uses of responses to open questions and other verbatim comments in qualitative surveys. *Methods, data, analyses: a journal for quantitative methods and survey methodology (mda),* 11(2), 115-134.
- Stringer, E.T. (2014). Action Research (4th ed.). Thousand Oaks, CA: Sage.
- Thompson, D.E., Baptist, J., Miller, B., & Henry, U. (2017). Children of the US national guard: Making meaning and responding to parental deployment. *Youth and Society*, 49(8), 1040-1056.
- Trautman, J., Alhusen, J., & Gross, D. (2015). Impact of deployment on military families with young children: A systematic review. *Nursing Outlook*, *63*, 656-679.

- Truhan, T. (2015). Parentification in deployed and non-deployed military families: A preliminary assessment. (2015). *The University of Central Florida Undergraduate Research Journal*, 8(1), 1-11.
- Wooten, N.R. (2015). Military social work: Opportunities and challenges for social work education. *Journal of Social Work Education*, *51* (Suppl 1), S6-S25.