

Serving Those Who Serve Our Country

Reducing Risk & Promoting Well-
being in Infancy and Early Childhood:
A Response to Military Deployments
and Parent-Child Separations

© 2012 Kim Flowers, LCSW, IF-ECMH RPF-II
Reprints by permission

- Disclaimer: The comments and views expressed are those of the speaker and do not reflect the views of New Parent Support Program, the Department of Defense, nor the Government of the United States.

Kim Flowers, LCSW, IF-ECMH

760.725.3884 ph

kim.flowers@usmc.mil

Learning Objectives:

- Review the importance of attachment relationships within an ecosystemic perspective, and core concepts in Infant-Family and Early Childhood Mental Health
- Understand the emotional cycle of military separations and the possible impact these may have upon infants, young children, and their parents/caregivers
- Learn developmentally appropriate strategies & resources to assist infants, young children, and their families cope with military separations

Keeping the Children in Mind....



California



- One of top five states with the largest concentration of both active duty & reservists
- The state with the largest number of military retirees

(DUSD, 2007)

How Many?

- Age of children of
ADSM
 - ✓ Birth to age 5 = 41%
 - ✓ 6 to 11 years = 31%
 - ✓ 12 to 18 years = 24%
 - ✓ 19 to 23% = 4%

(DUSD, 2007)

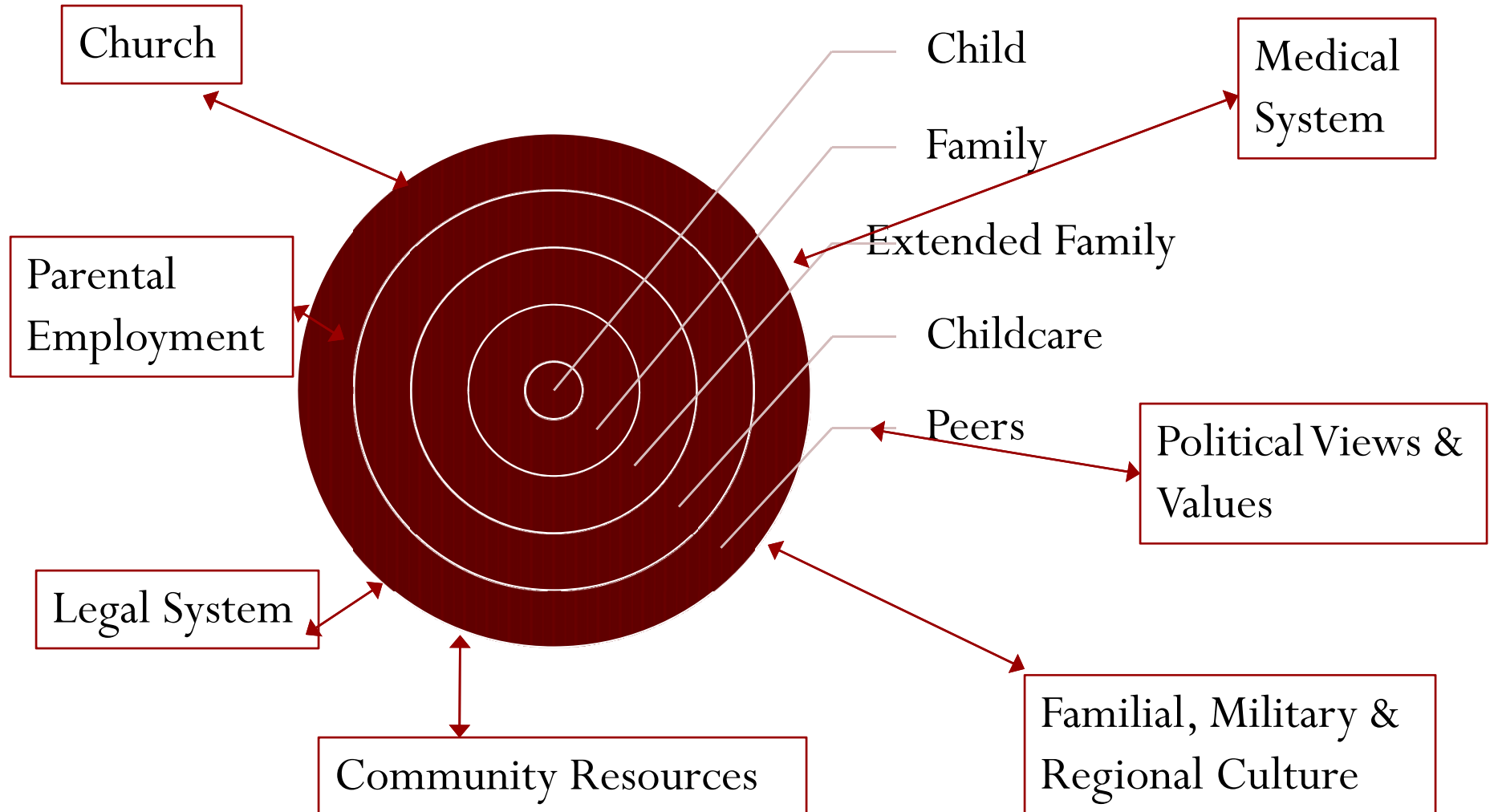


How Many?

- More than two million American children have had a parent deploy to Iraq or Afghanistan.
- At least 19,000 children have had a parent wounded in action.
- Over 2,200 children have lost a parent in Iraq or Afghanistan.

(DUSD, 2007)

Using an Ecosystemic Perspective



Relationships Really Do Matter



Attachment

- A reciprocal, profound, emotional and physical relationship between a child and his parent setting the stage for all future intimate, trusting relationships.

www.iamyourchild.org

Attachment Patterns

- There is no such thing as an “unattached” child. Children vary in whether they are “securely” or “insecurely” attached.

Robertson



James Robertson filmed hospitalized children distressed by separation from their parents.

Response Sequence:

1. Protest/Inconsolable
2. Despair/ Collapse
3. Detachment/ Acts unconcerned

(Robertson, 1952)



Bowlby

Attachment is a **biological** system designed to protect a child who will seek proximity to the primary caregiver when afraid, hungry or in need of reassurance. S/he will maintain proximity until soothed.

Behavior children use:

- Crying
- Following
- Clinging
- Calling
- Smiling

(Bowlby,

1969)

Ainsworth

- When feeling soothed/safe, the child will return to exploration of the environment (curious, play, etc), using the primary caregiver as *secure base*.



(Ainsworth et al., 1978)

Infant-Family & Early Childhood Mental Health Core Beliefs

- Attachment relationships provide a context within which children develop socially, physically, emotionally & cognitively
- Early attachment relationships are the blueprint for later relationships
- Babies bring possibilities for growth, change & new relationships

More Core Beliefs

- All parents want what is best for their child, including healthy, stable & mutually satisfying relationships
- Parents must be nurtured in order to nurture
- It is up to us to support parents' capacities and to help them further develop them

More Core Beliefs

- Early developing attachment relationships may be impacted negatively by family stress, separations, & parental histories or experiences of unresolved losses or traumatic life events

The Balance Between Vulnerability & Resiliency



Risk Factors

- Poverty
- Community or domestic violence
- Teenage parents
- Maternal mental illness, such as depression
- Parental substance abuse
- Difficult temperament or child disability
- Childhood abuse or neglect
- Other traumatic events, i.e. loss of parent

Protective Factors for Child

- Maternal sensitivity & secure attachment
- An intact, healthy marriage/relationship
- Positive family circumstances, i.e. adequate finances
- Psychosocial support
- A healthy, involved father/partner to “buffer”
- A typical developmental progression
- Individual traits such as “easy temperament”
- Stable maternal mental health

Benefits of Military Life

- Relatively stable income
- Stable & adequate housing
- Low-cost or free medical care
- Travel opportunities
- Supportive military community & targeted services/programs
- Patriotic values & challenging work
- Shared identity/military culture

Peacetime Stressors

- Frequent moves
- Parental absence
- Dangerous & heavy work
- Irregular work hours
- Middle-age retirement
- Isolation & separation from loved ones
- Larger community ambivalence

What Does Wartime Deployment Mean to a Young Child?

- Parental absence/extended loss
- Increased sense of danger
- Change in roles/routines
- Increased risk for maternal depression & stress
- Increased risk for less family cohesion/structure
- Increased risk for child maltreatment (neglect)

(Jensen, 1986; Kelley, 1994; Gibbs, 2007 & Rentz, 2007)

The Revised Emotional Cycle of Deployment

2005)

(Pincus, et al.



- Pre-Deployment - Anticipation of Departure (1–6 weeks before deployment)



- Active Deployment- (Departure through the first month or so)



- Sustainment (Lasts until the month before returning home)



- Re-Deployment (The month before the service member returns home)



- Post-deployment (From arrival to three to six months)

What Do We Know?

- More than 2 million American children---40% younger than 5 years---have had a parent deployed to Iraq or Afghanistan
- Current deployment to Iraq or Afghanistan ranges from 6 to 15 months, a significant portion of a young child's life

(2007 DoD Demographics

Report)

And the Research Says....

- Study reported in the Nov 2008 *Archives of Pediatric & Adolescent Medicine*
- Research team led by Molinda M. Chartrand, MD from Boston University School of Medicine
- Surveyed both parents & childcare providers of children ages 18 mos to 5 years enrolled in base childcare May—Dec 2007

The Study's Design

- 55 children with a deployed parent & 114 children without a deployed parent
- In 92% of the parental deployments the child's father was deployed for an average of 3.9 months
- Parents completed the Child Behavior Checklist (CBCL)
- Caregivers completed the Child Behavior Checklist Teacher's Form (CBCL-TF)
- The sample was stratified into two groups: younger than 3 years and 3 to 5 years



Very young children, ages 3 to 5 years, with a parent deployed to a war zone, exhibit more behavioral symptoms than their peers—even after stress and depression in the non-deployed parent were controlled



Toddlers 18 months to 3 years seemed to fare BETTER, with lower CBCL scores. Why?

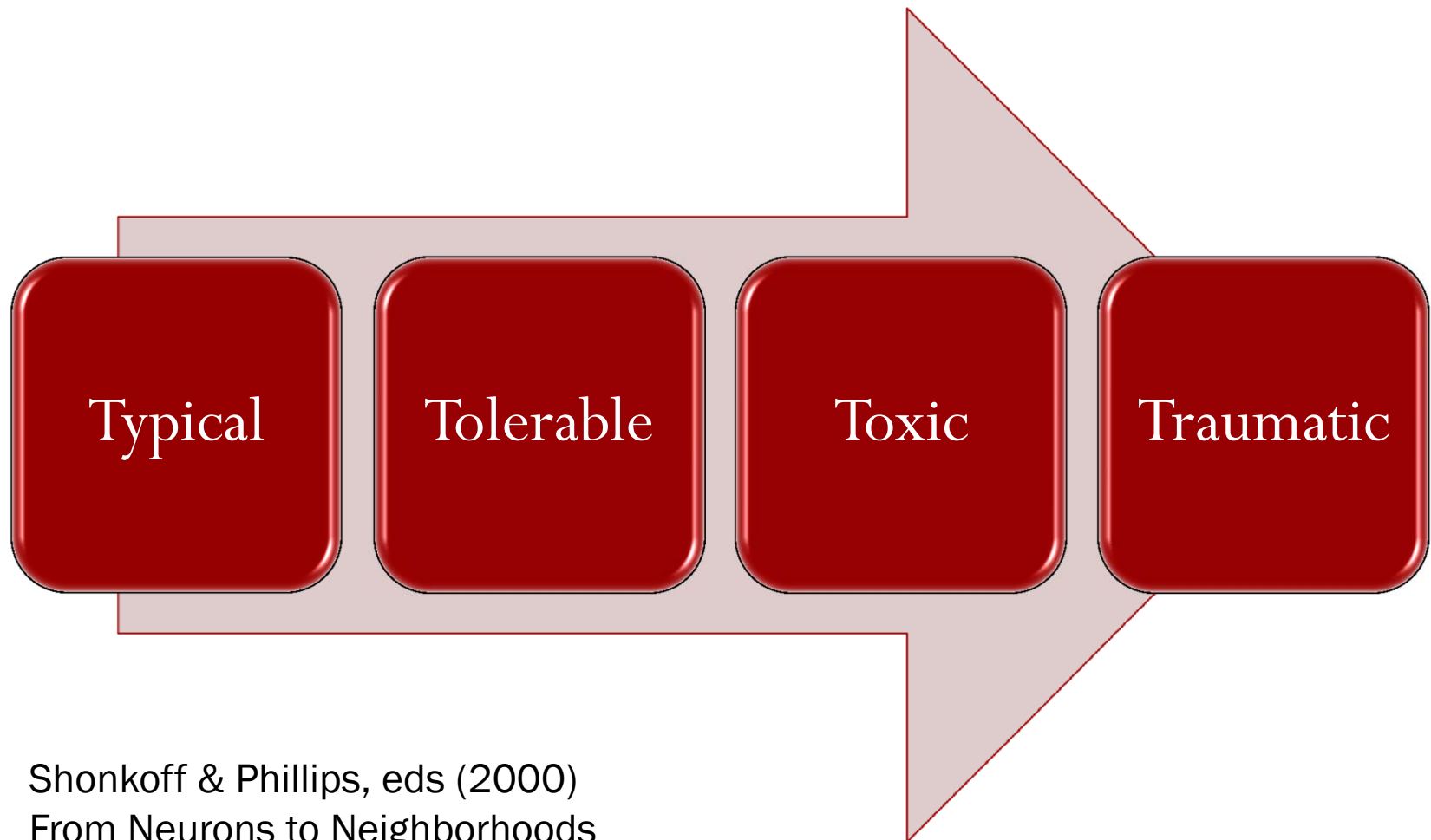
Research to Practice

Clinicians and early childhood caregivers must be aware that both externalizing and internalizing behaviors may be seen in young children with a deployed parent

Deployment Factors to Consider

- Age, gender and development of child
- Role of deployed parent (primary caregiver?)
- Quality of relationship & care of interim caregiver
- Stability & mental health of interim caregiver
- Family dynamics/factors
- Length of parent's absence
- Suddenness of deployment
- Wartime versus peacetime
- Loss/injury experience

Spectrum of Stress



Shonkoff & Phillips, eds (2000)
From Neurons to Neighborhoods

Community Support Invaluable for Healthy Coping

- High quality childcare has been found to affect children's attachment, later school performance & social success
- Social support, parent training & psychoeducation important



Linkage to Financial Resources

- During deployments spouses report additional expenses are incurred and stressful:

- ✓ Phone services (56%)
- ✓ Childcare (47%)
- ✓ Loss of income (31%)
- ✓ Loss of job (19%)

Parent as A Protective Shield



Parent As a Protective Shield

Encourage:

- Emotional Availability & Responsiveness
- Comforting/Nurturing Behaviors
- Predictable Environments & Routines

Educate:

- Developmental Perspective in Understanding Children's Reactions to the Separation
- Concrete Strategies to Build Emotional Connections

A Developmental Perspective: Infants (Birth – 12 Months)

- Changes in eating and sleeping patterns
- May want to be held more
- May seem fussier than usual, crying or whimpering
- More withdrawn, showing little emotion or listless



Toddlers (Ages 1 - 3 Years)

- Show regression in walking or potty training
- Cry for no apparent reason, sadness
- Whine and cling to parent
- Irritability, moodiness, or tantrums
- Angry outbursts or aggression, screaming
- Decreased concentration or attention
- Increased or decreased activity level
- Aimless motion
- Difficulty falling asleep, night-waking
- Feelings of anxiety, worry or fear about own safety
- Return to earlier behaviors such as thumb-sucking, soiling and loss of language skills

Preschoolers (Ages 3 - 5 Years)

- Clinging to people or favorite toy/blanket
- Unexplained crying or tearfulness, sadness
- Increased acts of anger or frustration
- Sleep difficulties, nightmares, frequent waking, fear of the dark
- Worry about the safety of everyone, including deployed family member
- Eating difficulties
- Fear of new people or situations
- War-related play
- Increase in complaints of headaches, stomachaches or other illnesses
- More irritable or crabby
- Fascination with the military and news about it, war and weapons
- Toileting accidents

Help Interpret Behavior

- | | | |
|--------------------------------------|---|--|
| • Sadness/ Withdrawal | ↔ | I Miss Mommy |
| • Push You Away, Then
Cry for You | ↔ | & Will You Leave Too? |
| • Cling & Scream When
You Leave | ↔ | I Need You, I'm Afraid
You'll Leave Me, Too |
| • Hit or Bite | ↔ | I'm Angry & Don't
Have Words/ Control |
| • Regress | ↔ | Change is Hard |
| • Play & Laugh | ↔ | Aah.... A Break |

Infants: Red Flags

- Resists holding, is difficult to comfort or console; has prolonged inconsolable crying
- Has sleeping or eating difficulties (sleeps or eats too much or too little)
- Is failing to thrive
- Rarely seeks/makes eye contact, or typically avoids eye contact with parents
- Appears unresponsive to efforts to interact or engage
- Rarely coos, babbles or vocalizes
- Has limited ability to regulate emotions

Toddlers & Preschoolers: Red Flags

- Shows little preference for or excessive dependence on the parent(s) or other primary caregiver
- Does not show any apprehension about strangers
- Appears excessively irritable or fearful
- Has an inappropriate or limited ability to express feelings
- Lacks interest or curiosity about people or playthings
- Fails to explore his or her environment

Toddlers & Preschoolers: Red Flags Continued

- Often appears sad and withdrawn
- Has inappropriate sexual behavior
- Has inappropriate impulsive or aggressive behavior
- Has excessive fears that do not respond to reassurance
- Experiences frequent night terrors
- Has extreme and frequent tantrums
- Experiences significant language delays
- Exhibits unusual need for order or cleanliness



Young Children Can Be Resilient: Loving
& Responsive Adults Are Key

Infant-Family & Early Childhood Mental Health Services

- Concrete Resources/ Assistance
- Emotional Support
- Developmental Guidance
- Early Relationship Assessment/ Support
- Advocacy
- Infant-Parent Psychotherapy

Maintaining Emotional Connections During Separations & The Five Senses: *Sight*

- Hang pictures of family low so that babies can see them. Place photos in small, safe photo albums so that a young child can carry them. Take pictures to “send to Mommy.”
- Video-tape the deploying parent participating in every day activities with the young child, i.e. reading, playing, singing, changing a diaper, feeding & bathing.
- Encourage the young child to “read a book with Daddy” by filming the reading of a simple board book and offering the young child the book while playing the recording.



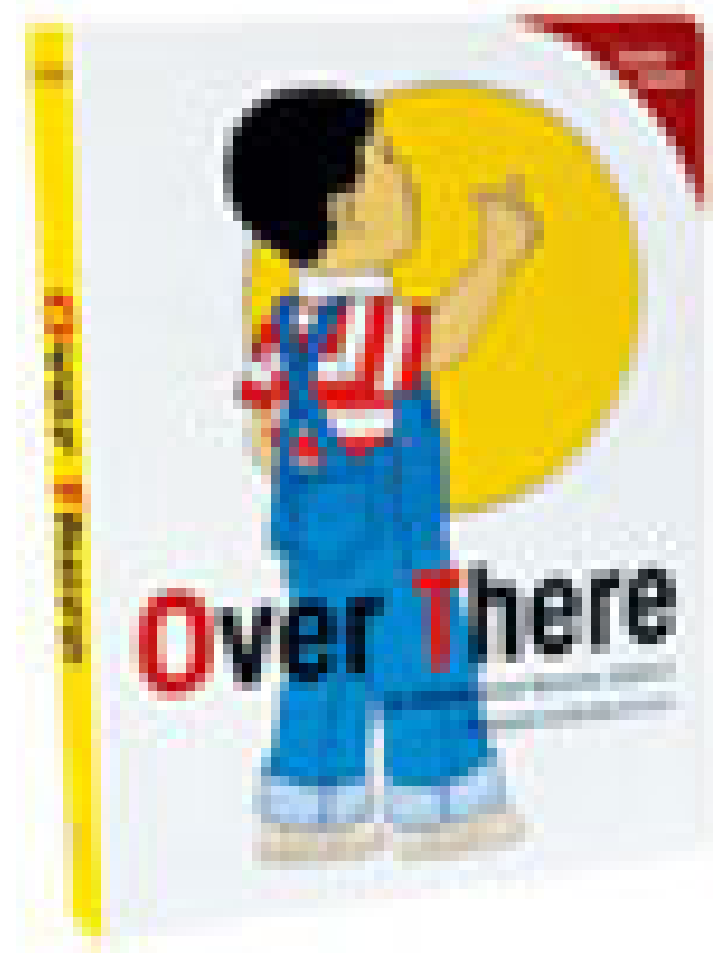
- Have a special “photo quilt” or made by transferring photos of the deploying parent & family onto fabric. The ASYMCA offers this service through their Operation Kid Comfort program.

Operation Kid Comfort

- Camp Pendleton referrals MUST go through the ASYMCA National Office: www.asymca.org
- For San Diego families not attached to Camp Pendleton: www.militaryymca.com
(San Diego ASYMCA facilitates the program & American Sewing Guild volunteers to make the quilts)

Sight

- Read simple board books such as “Over There” and “Home Again” found at www.zerotothree.org that offer comfort and visual reminders of the deployed parent. Make own book complete with pictures of the parent & child. Tell the story of time spent together.



Sight

- Have the deployed parent send photos of herself and include pictures of the surrounding areas to look at. Be certain to ensure that the images are not graphic or disturbing in any way.

Sight



www.sesamestreet.org

Sound

- Record the deploying parent's voice singing to his young child & reading stories. Encourage them to create favorite bedtime or bath-time rituals that can be recorded. This might be a poem, special song or a special way the parent says goodnight.

Sound

- Record parent's voice in the recorder box of a stuffed animal such as a teddy bear. For a visual connection, have the bear dressed in military apparel.
- Have parent call on the telephone when possible. Follow the young child's lead in when she is ready to "talk." Have the phone held up to the young infant's ear to talk or sing to baby. His sense of hearing was fully developed even before he was born. Hearing the parent's voice will bring her to mind.

Smell

- Have the parent leave behind a favorite t-shirt, hat, pillow or scarf that she used. Spray cologne or perfume on it. Young children's sense of smell is a powerful avenue to use to tap into memory of you. Let the child snuggle or wear these items.



Smell

- With supervision of the stay-at-home caregiver, allow the toddler or preschooler to “smell” the deployed parent’s favorite cologne or perfume, deodorant, or soap. Have the parent talk about the away parent during this activity.

Touch

- Trace the deployed parent's hand-print and hang it low on the refrigerator. Encourage the toddler or preschooler to "high-five" the parent when she wants to share or celebrate something special. Trace the young child's hand on paper and mail it to the deployed parent so s/he may do the same. Talk about this to build an emotional connection.
- Encourage the parent to invite the young child to fill and send a package to the deployed parent. Be sure to include drawings and crafts made by the child.

Touch

- The feel of something used by the deployed parent can also tap into early memories. Have parent encourage or sit with the young child in the parent's special chair. Let her hold something of the deployed parent's. Be certain that it is an object that is safe and can be damaged or lost!
- Have the deployed parent write letters and send drawings made for the young child. Just holding and hearing a letter written from the parent will help the child feel close to him.

Taste

- Have deploying parent share favorite snacks or meals with the young child before deploying. Write or talk about the items when deployed. Simply eating these items can help the young child think about the deployed parent and the moments shared together.



- Reflecting Adults Lead to Responsive Adults & Well-Adjusted Young Children

National Website Resources

- www.zerotothree.org
- www.militaryhomefront.dod.mil
- www.tricare.osd.mil
- www.militaryonesource.com
- www.militarychild.org
- www.stomppproject.org
- www.asymca.org

Bibliography

- Ainsworth, M., Blehar, M., Waters, E., & Wall, S. (1978). *Patterns of Attachment*. Hillsdale, NJ: Erlbaum.
- Bowlby, J. (1969). "Attachment and Loss," Vol 1. *Attachment*. New York: Basic Books.
- Chartrand, M.M., et al. (2008). "Effects of Parents' Wartime Deployment on the Behavior of Young Children in Military Families." *Archives of Pediatric & Adolescent Medicine*.
- Gibbs, D.A., Martin, S.L., Kupper, L.L., & Johnson, R.E. (2007). "Child maltreatment in enlisted soldiers' families during combat-related deployments." *Journal of the American Medical Association*, 298, 528–535.
- "Honoring Our Babies & Toddlers: Supporting Young Children Affected by a Military Parent's Deployment, Injury or Death" by *Zero To Three*, 2009.
- Jensen, P.S., Martin, D., & Watanabe, H. (1996). "Children's response to separation during Operation Desert Storm." *Journal of the American Academy of Child and Adolescent Psychiatry*, 35, 433–441.
- Kelly, M.L. (1994). "Military-induced separation in relation to maternal adjustment and children's behavior." *Military Psychology*, 6, 163–176.
- Pincus, S.H., House, R., Christensen, J., & Adler, L.E. (2005). "The emotional cycle of deployment: A Military Family Perspective. *Journal of the Army Medical Department*, 615-623.
- Rentz, E., Marshall, S., Loomis, D., Casteel, C., Martin, S., & Gibbs, D. (2007). "Effect of deployment on the occurrence of child maltreatment in military and nonmilitary families." *American Journal of Epidemiology*, 165(10), 1199-1206.
- Robertson, J. (1952). *A Two-Year-Old Goes to Hospital*. (Film). New York: New York University Film Library.
- Shonkoff, J., & Phillips, D, eds . (2000). *Neurons to Neighborhoods: The Science of Early Childhood Development*. Washington, DC: National Academy of Sciences.
- "Supporting Young Children: Supporting Babies & Toddlers in Military Families, A Professional Guide" by *Zero To Three*, 2007.