I. Big Picture Overview: Attachment in the military and veteran family contexts: Birth - Adolescence (15 min.)

II. Specific Attachment Concerns: Challenges of parental absence, parental injury, and parental death (25 min.)

III. Practical, Evidence-Informed Strategies: Trauma-Informed Early Childhood and School-Based strategies to support military families (interactive, 50 min.)
Objectives

1. Describe ways in which US military and veteran families are both similar to and different from non-military families in their strengths and challenges for healthy parent-child relationships.

2. Recognize specific military and veteran family experiences that can pose challenges to healthy attachment relationships within the family system.

3. Identify opportunities within Early Childhood and School settings to promote trauma-informed strategies that foster healthy attachment relationships.

4. Practice at least one trauma-informed technique in dyads.
### Key Characteristics Across and Between Family Populations: Children and Youth

#### Active Duty (2016)
- N = 1,036,472
- 42% 5 years and younger
- 32% from 6 to 11 years
- 21% from 12 to 18 years
- 4% from 19 to 22 years
- 82% of children 0-2 yrs live in homes of E1-E6 and O1-O3 members
- Preschool and primary age more likely to be in mid-career families, with HS in mid- and advanced-career families

#### Reserve/Guard (2016)
- N = 685,344
  - 53% are 9 years and younger
- 31% 5 years and younger
- 31% from 6 to 11 years
- 27% from 12 to 18 years
- 11% from 19-22 years
- 81% of children 0-2 yrs live in homes of E1-E6 and O1-O3
- Preschool and primary age more likely to be in mid-career families, with HS in mid- and advanced-career families

Post-9/11 Veteran Families in the US

- 74% of this veteran group are under 45 years, with 40% between 25 and 34 years
- 55% married
- 36% have a service-connected disability and are more likely to use VA health care only than their other veteran era counterparts

https://www.va.gov/vetdata/docs/SpecialReports/Post_911_Veterans_Profile_2016.pdf
Work and Community Contexts

- The DoD and each Service have child, youth, and family programming in multiple areas
  - Available to Active Component (AC) members and families
  - Limited access for Retired and Reserve/Guard
  - AC families may face hurdles if moving across state lines
- The DVA serves veterans, not their families; family programming must have a direct benefit for the veteran
- Veteran and Reserve component families rely on local community resources and may or may not live in a military-connected community
  - Far more likely for these families and their children to be invisible in their settings
  - Reserve component families may face additional medical, IEP/IFSP hurdles
  - Veteran families may have special needs for both a veteran parent and children
Attachment and Ambiguous Loss

• Attachment: A dynamic caregiver-child relationship system that develops over time and works to ensure young children develop skills to cope with stressors within the protective bond to one or more attachment figures.

• Ambiguous Loss: A concept that helps explain physical and psychological characteristics of relationship disruptions, for which there may not be a clear path to closure or healing.
  – Physically present/psychologically absent
  – Physically absent/psychologically present
Developmental Aspects

Developmental abilities, in concert with military family experience, contribute to children’s abilities to process and understand how, why, and how long a parent may not be meaningfully present in their lives:

- **0-5 years**: Stranger anxiety, understanding time; impact of remote parent contact (2-D/screen) versus in-person (3-D)
- **Early elementary**: Magical thinking
- **School-age through Adolescence**: Potential for multiple separations/reunions, taking on adult (additional) responsibilities

*Developmental a/o academic regression, at any age, is expectable as that is a fundamental coping strategy to reduce stress*
Healthy Attachment Challenges

Parental Absence
Parental Injury
Parental Death
Parental Absence
Military Parental Absence

• Parental Absence is different from ‘Absent Parent’

• Temporary Parental Absence results in a caregiver’s return and reengagement with a child
  – Can be due to divorce, separation, custody arrangements;
  – Incarceration;
  – Civilian Occupational Absence or a parent being away to provide care to a family member;
  – Military occupational or work-related absences
    • Can range from a few days to 18 or more months
Related Stressors

- Changes in Routines
- Role Confusion
- Missed Life Events
- Lack of Resources

Parental Absence
Risk Factors

- Single Parents
- Dual Military Families
- Well-being of Spouse
- Support at Home
- Relocation
- Lack of Peer Support
- Long Deployments
- Family Communication
Protective Factors

- Maintaining Routines
- Consistent & Positive Family Communication
- Positive Peer Relationships
- Teacher Understanding
- Extracurricular Activities
- Parental Well-being
- Positive Reinforcement
- Positive School Climate
# Challenges

<table>
<thead>
<tr>
<th>Family Functioning</th>
<th>Child/Adolescent Functioning</th>
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<tbody>
<tr>
<td>Relocation</td>
<td>Internalizing behaviors</td>
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<tr>
<td>Lack of communication with service member</td>
<td>Externalizing behaviors</td>
</tr>
<tr>
<td>At-home parent well-being</td>
<td>Academic functioning</td>
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<tr>
<td>Reintegration</td>
<td>Social impact</td>
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</tbody>
</table>
Parent Injury
Military Parent Injury

• As of August, 2016: 52,473 Service Members wounded in action (Defense Casualty Analysis System, 2016)

• Upon return, even more Service members are later diagnosed with other, invisible injuries

• Conceptualizations of injuries include
  – Physical
  – “Invisible”
  – Operational Stress Injuries (OSIs)
  – Combat-Related Stress Disorders
  – Moral Injury
Stressors related to Parent Injury

- Parent emotional distress
- Change in parenting roles
- Transition home or to civilian life
- Change in parenting ability

Impact of Parent Injury

The family experience of a parent injury differs by:

- The time from the original injury
- The specific injury type and severity
- The composition of the family
- The developmental age of the children
- Preexisting parent, child, or family characteristics
- The course of required medical treatment
- The longer-term functional impact on the injured parent

Cozza & Guimond (2011)
When parental combat injury alters the parent’s attunement to the child’s needs, the child’s emotional, social, and physical development suffers. If developmental issues are not attended to, the child is at risk for disorganized attachment, psychological distress, the inability to regulate emotions, behavior problems, developmental delays, and poorer health and well-being (Gorman et al., 2010, p. 5)
Protective Factors

- Healthy parental functioning
- Strong family relationships
- Family provision of emotional support
- Family’s capacity to diminish distress
- Continuity of previously established family routines
- Family’s capacity to maintain structure
- Greater availability and involvement of friends and extended family
- Supportive school environment
Effective Injury Communication

- OARS (open questions, affirmation, reflection, summary)
- Designate a primary PoC for the family
- Pay attention to family dynamics
- Check in about extenuating circumstances
- Communicate using age-appropriate expressions
- Information should be truthful and presented matter-of-factly
- Share enough to understand the behavior and emotions of the adults

Despite their parent’s injury (or death), they will be cared for by the other important adults in their life

EXHIBIT 31-2
GOALS FOR CHILDREN OF INJURED SERVICE MEMBER PARENTS

Develop an age-appropriate understanding of what happened to the parent.
Develop an age-appropriate understanding of the injury and required medical care that can result in
- family separations,
- lengthy hospitalizations,
- multiple procedures, and
- change in family structure/routine.
Accept that they did not create the problems they may now see in their families.
Learn to deal with the sadness, grief, and anxiety related to parental injury.
Accept that the parent who went to war may be “different” than the person who returned, but is still their parent.
Adjust to the “new family” situation by
- staying hopeful,
- having fun,
- being positive about life, and
- maintaining goals for the future.
Parent Death
Who is impacted?

- As of August 2016: 6,876 total deaths (Defense Casualty Analysis System, 2016)
- More than 10,000 children had a parent service member die between 2001 and 2011 (Fisher et al., 2013)
Stressors related to Parent Death

- Media coverage
- Pervasive sense of fear given exposure
- Surviving parent's emotional distress
- Relocation and loss of access to community

Cozza, Chun, & Polo (2005)
## Risk Factors

<table>
<thead>
<tr>
<th>Traumatic parental death</th>
<th>Prior child disturbance</th>
<th>Prior parental mental health difficulties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post death parental psychological difficulties</td>
<td>Prior family history of parental conflict, separations, and divorce</td>
<td>Child more involved with deceased, less with surviving parent</td>
</tr>
<tr>
<td>Less family cohesion</td>
<td>Poor communication</td>
<td>Change in routines and/or caretakers</td>
</tr>
<tr>
<td>Financial difficulties following death</td>
<td>Loss of support networks</td>
<td>Increased vulnerability to further loss</td>
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</table>

Dowdney (2000)
<table>
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<tr>
<th>Protective Factors</th>
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</thead>
<tbody>
<tr>
<td>Increasing child self-esteem</td>
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<tr>
<td>Supporting adaptive expression of emotion</td>
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<tr>
<td>Parent-child communication</td>
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<tr>
<td>Increasing positive family interactions</td>
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<tr>
<td>Increasing child adaptive control beliefs</td>
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<tr>
<td>Facilitating a positive parent-child relationship</td>
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<tr>
<td>Effective discipline</td>
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<tr>
<td>Reducing child exposure to negative life events</td>
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<tr>
<td>Improving child coping skills</td>
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<tr>
<td>Parental warmth</td>
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<tr>
<td>Reducing parental distress</td>
</tr>
<tr>
<td>Addressing issues related to the cause of death</td>
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</tbody>
</table>

Haine, Ayers, Sandler, & Wolchik (2008)
Grief

With the sudden and potentially violent circumstances surrounding operational deaths, Military-connected children may experience

- **Secondary traumatization**
  - PTSD-like symptoms as a result of learning about the traumatic firsthand experience

- **Traumatic grief**
  - learned of horrific details surrounding the death
  - the child’s responses to the death are more likely to be severe, prolonged, and interfere with daily functioning

- **Ambiguous loss**
  - may occur when the conditions surrounding the loss are unclear or uncertain
## Challenges of Military Parent Death

<table>
<thead>
<tr>
<th>Challenge</th>
<th>Impact</th>
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<tbody>
<tr>
<td>Service Member’s prior absence</td>
<td>• Difficulty accepting the permanence of loss</td>
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<tr>
<td>Military deaths as public events</td>
<td>• Family privacy may be diminished</td>
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<td>• News may bypass formal communication</td>
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<tr>
<td>Differences in community support</td>
<td>• Less available to Reserve and National Guard</td>
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<td></td>
<td>• Attention may be burdensome</td>
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<tr>
<td>Military traditions and rituals</td>
<td>• May be comforting or confusing; need preparation</td>
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<tr>
<td>Cause of death, including suicide</td>
<td>• Death due to combat, accidents, suicide, other</td>
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<td>• More scrutiny, stigma, and difficulty with suicide</td>
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<tr>
<td>Death of a leader</td>
<td>• Expectation that leaders are not vulnerable</td>
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<td>• Loss of direction</td>
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<tr>
<td>MIA and POW</td>
<td>• Ambiguous, potentially long-term nature of loss</td>
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<tr>
<td>Mass casualties</td>
<td>• Unique bonds between families but different management</td>
</tr>
</tbody>
</table>

Lehman & Cozza (2006)
Reconciliation Needs of Mourning

1. Acknowledge the reality of the death
2. Embrace the pain of the loss
3. Remember the person who died
4. Develop a new self-identity
5. Search for meaning
6. Receive ongoing support from others

Wolfelt (2016)
Practical Strategies

Trauma-Informed Early Childhood and School-Based strategies to support military families
Teacher-Child Relationships

- Teacher as an “ad hoc” attachment figure
- Parallels to parent-child relationships:
  - Safe haven and a secure base
  - Affective quality varies along similar dimensions of harmony/comfort-seeking and resistance/avoidance
  - Patterns of separation-reunion behavior, and associations of these patterns with sensitivity

Verschueren & Koomen (2012)
Vulnerable Children

Strategies to foster healthy attachment relationships in school can be trauma-informed

1. Caregiver management of affect

2. Attunement

ARC framework - Kinniburgh & Blaustein (2010)

With younger or more vulnerable children, the role of the teacher as an attachment figure (secure base and safe haven) is expected to be of greater importance. These children’s attachment system gets activated more easily and their capacity for self-regulation is relatively limited, making adult-caregiving support, very likely including help provided by teachers, crucial for their survival and growth.

- Verschueren & Koomen, 2012
Caregiver Affect Management

“Support the child’s caregiving system - whether parents or professionals - in understanding, managing, and coping with their own emotional responses, so that they are better able to support the children in their care” (p. 53)

Trauma Behaviors that Challenge Caregiver Modulation

• Triggered responses to caregivers
• Anger/opposition
• Demand for attention
• Patterns of approach and rejection
• Extreme emotional responses to stressors

Common Caregiver Responses

• Reduced sense of efficacy
• Guilt and shame
• Anger and blame
• Shutting down or constricting
• Overreacting
• Being overly permissive

Kinniburgh & Blaustein (2010)
“Support the child’s caregiving system - whether parents or professionals - in learning to accurately and empathetically understand and respond to children’s actions, communications, needs, and feelings” (p. 65)

**Trauma Behaviors that Challenge Attunement**

- Lack of capacity to communicate needs or to identify and cope with difficult emotions
- Communication via behavior
- Intense emotion and/or numbing responses to triggers

**Need to Understand**

- The role of child vigilance
- Specific child triggers
- How to “read” child’s cues and patterns
- Reflective listening skills

Kinniburgh & Blaustein, 2010
Different Levels of Intervention

**Tier 3 (Intensive)**
Intensive intervention, in addition to Tier 1 and Tier 2, for a few students. Supports the needs of ~5% of students.

**Tier 2 (Targeted)**
Targeted intervention, in addition to Tier 1 instruction, for some students. Supports the needs of ~15% of students.

**Tier 1 (Universal)**
High-quality instruction and evidence-based core curriculum for all students. Supports the needs of ~80% of students.
Establish-Maintain-Restore (EMR) is a framework for teachers to create and support effective relationships with their students that follows three steps:

- Establishing the relationship through positive interactions,
- Maintaining the relationship with continued support and encouragement, and
- Restoring the relationship following episodes of teacher-student conflict

Cook & Coco (under review)
### Specific Practices to Establish, Maintain, and Restore Positive Relationships with Students

<table>
<thead>
<tr>
<th>EMR Phase</th>
<th>Rationale</th>
<th>Intentional Relationship Practices</th>
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<tr>
<td>Establish</td>
<td>The aim for the establish phase is to engage in intentional practices to cultivate a positive relationship with the students. When a teacher establishes relationships with all students, they feel connected, safe, and respected. When this is in place, students are most likely to learn, engage in desired behaviors, and respond to your attempts to correct their behavior. A teacher cannot maintain a relationship she does not have, so it is essential to first establish relationships with your students.</td>
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<td>Maintain</td>
<td>The aim for the maintain phase is to sustain the quality of an established positive relationship with students over time by intentional implementing maintenance practices. Research has shown that the quality of relationship can diminish over time because people take one another for granted (ignore good behavior or miss opportunities to reinforce the person) and may unintentionally become more negative by paying more attention to problem behavior.</td>
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<td>Restore</td>
<td>The aim for the restore phase is to intentionally repair any harm to the relationship once there has been a negative interaction between the teacher and student. This is important because negative interactions can weaken the relationship and correspondingly cause the student to be less engaged in class, harder to correct their problem behavior, and more challenging to motivate to take on increasingly more difficult academic tasks. As such, teachers must intentionally re-connect with the student to restore the relationship back to its previous positive state.</td>
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List your class roster and reflect at which phase in the relationship you are with each student. Use the results of this to direct and guide your interactions and intentional relational practices with students.

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Establishment Phase</th>
<th>Maintaining Phase</th>
<th>Restoring Phase</th>
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1. Establish

Devoting time and effort towards creating positive relationships with every child in the classroom, so that each feels respected and connected

Suggested Practices:
• Teachers spend time with each student individually
• Teachers reference individual information about the student
• Teacher positively greet each student individually

Trauma-Informed Notes:
• If gathering information from home, recognize student boundaries
• Let interactions be child-led
2. Maintain

Utilizing high levels of positive to negative interactions and brief relationship check-ins to continue to support the positive relationships

Suggested Practices:
• Teachers use high ratios of compliments or other positive interactions to reprimands or other negative interactions
• Teachers use brief relationship check-ins, in which the student is encouraged to share about their lives or personal thoughts, to support the student’s sense of respect and connectedness

Trauma-Informed Notes:
• Physical contact may or may not be rewarding to the student - be attuned to their needs for touch vs. space
• Some recommended strategies (e.g., “second-hand compliments”) can be seen as manipulative
3. Restore

Re-establishing the positive relationship through restorative communication techniques

Suggested Practices:
• **Reconnect** - schedule a time to meet privately
• **Repair**
  – Take ownership
  – Apologize
  – Ask for a do-over
  – Convey care
• **Restore** - work to demonstrate commitment

Trauma-Informed Notes:
• Do not attempt during “survival mode”
• Natural, non-punitive consequences
• Avoid common triggers (confrontation, unpredictability, sensory overload, vulnerability/frustration)
• Authenticity is key
Military Child Considerations

• Healthy attachment challenges
  – Child’s potential distance or separation from other attachment figures
  – Trauma of military parental injury or death
• Teacher understanding of military culture
• Parent-teacher relationships
• Geographic mobility leading to less time/motivation to establish relationships
Student scenarios

- Select and practice strategies from across the EMR framework that may improve the teacher-student interactions and overall relationship
- Provide feedback on the strategy selection and delivery
A first-grade boy with an older sibling in the school appears fairly withdrawn in the classroom, with the exception of being quick to cry at frustration. During these times, he asks for his sister or father and seems to be unable to console himself without them. His father has agreed to come in for a conference but has cancelled two appointments.
You often remind third-grader Camila that she is only responsible for herself, yet you find her constantly checking on other students’ progress on work, reminding them to pick up after themselves, and instructing others how things ought to be done. Her stories often revolve around her father, who recently had surgery.
School-Based Interventions

Tier 2

- Bounce Back: An Elementary School Intervention for Childhood Trauma
- Cognitive Behavioral Intervention for Trauma in Schools
- Support for Students Exposed to Trauma: School Support for Childhood Trauma
- Trauma and Grief Component Therapy for Adolescents
- Trauma-Focused Coping in Schools

Tier 3

- Integrative Treatment of Complex Trauma for Children
- Integrative Treatment of Complex Trauma for Adolescents
- Trauma and Grief Component Therapy for Adolescents
- Trauma-Focused Coping in Schools

- NCTSN
School Resources Website

http://schoolresources.militaryfamilies.psu.edu

Online Learning Modules
The Clearinghouse for Military Family Readiness at Penn State developed four online learning modules. These modules focus on 1) the Interstate Compact on Educational Opportunity for Military Children; 2) military work-related parental absence; 3) geographic transitions; and 4) military and schools.

Toolkit
Each module contains a variety of resources including quick reference fact sheets, brochures, tip and strategy handouts, checklists, and links to outside handouts and resources. The Toolkit resources are directly related to the online learning modules.

Top Three Resources
The Clearinghouse vetted over 250 free, publicly-available resources related to school personnel and military children. The three best resources related to each of the following will be highlighted on the website: academics, behavior, deployment or parental absence, grief, parental injury, the Interstate Compact, military children, military culture, and reintegration will be highlighted on the website.
Finding Programs

http://www.militaryfamilies.psu.edu/programs/find-programs

Clearinghouse Continuum of Evidence
The Clearinghouse for Military Family Readiness at Penn State has reviewed over 1000 programs to determine the potential benefit to military families. To view the effectiveness of a particular program, or identify reviewed programs, users can click on the link to the Continuum from the School Resources page.
Coaching and Assistance

http://www.militaryfamilies.psu.edu/technical-assistance

Funded by the Office of Military Community and Family Policy, the TA Specialists at the Clearinghouse are available, free of charge, to consult with you as you think about the best ways to work with Military families. The Clearinghouse TA staff can support you by:

- Identifying data and research findings related to evidenced-based programs and implementation science
- Providing information on evidence-based programs
- Assisting with selecting a program
- Providing strategies to help with program implementation
- Obtaining program or training materials
- Developing a program evaluation plan

The Technical Assistance Specialists are available via live chat, email at clearinghouse@psu.edu, or phone at 1-877-382-9185, and can be reached from 9 a.m. to 5 p.m. EST/EDT.
Military Resources

- Center for Deployment Psychology
- Department of Defense
- Home Base Program
- National Guard Bureau Family Program
- National Military Family Association
- NCTSN
- Military Kids Connect
- Military One Source
- School Liaison Officers
- Sesame Street
- Zero to Three
Selected References


