Parent’s Early Life Stressful Experiences, their Present Well-Being, and that of their Children


**SUMMARY:** The current study sampled military families in the Army (N = 266) that included data from both Active Duty and civilian parents and their adolescent children. Researchers examined associations between parents’ early life stressful experiences, their present well-being, and that of their children. Results indicated that parents' current functioning may impact their children's well-being.

**KEY FINDINGS:**
- Positive parenting by the civilian parent was associated with adolescents having fewer depressive symptoms and higher quality social connections.
- Depressive symptoms and parenting quality of the Active Duty parent were linked to adolescents' well-being, with adolescents experiencing more depressive symptoms when their Active Duty parent reported greater depressive symptoms.
- Parents who encountered more stressful childhood experiences, including relatively prevalent and less severe adversities (e.g., verbal conflict between parents) experienced poorer functioning than adults who encountered little early stress.

**IMPLICATIONS FOR PROGRAMS:**
- Engage Service members and their intimate partners in classes that aim to increase communication and conflict-resolution skills prior to and after deployment
- Educate couples who have a history of trauma on positive coping skills before and after reintegration
- Provide workshops to help deployed military members' spouses learn about available supportive services to handle increased household responsibilities

**IMPLICATIONS FOR POLICIES:**
- Encourage the development and continuation of programs that can promote resilience in Service members, their partners and children
- Promote the training of professionals to better identify military spouses who have difficulties managing roles and responsibilities during deployment
- Recommend education of professionals on the possible effects of parents’ emotion regulation and parenting during deployment and post-deployment

This product is the result of a partnership funded by the Department of Defense between the Office of Military Community and Family Policy and the USDA’s National Institute of Food and Agriculture through a grant/cooperative agreement with The University of Minnesota.
METHODS
- Data were collected from respondents on an Active Duty Army installation in the continental United States. Surveys were administered at three computer labs on post to provide easier access to families.
- Multiple community-based methods (e.g., print and radio advertising; signs at youth center; flyers at military and community stores and restaurants) were used to recruit a convenience sample.
- Research criterion included: (a) families who had at least one Active Duty Service member and at least one adolescent between the ages of 11 and 18 years, and (b) all eligible family members came to the youth center on the installation to take the survey at the same time.

PARTICIPANTS
- The current study utilized a sample of military families (N = 266) including data from both Active Duty and civilian parents and their adolescent children.
- On average, Active Duty respondents were males (86%) and almost half reported having some college education (44%).
- Most fell within the 31-40 years age range (65%). The majority were enlisted personnel (88%) and had experienced at least one deployment (90%).
- Demographic data were not given for civilian parents or adolescents within the study.

LIMITATIONS
- The study fails to mention demographic data for both the civilian parents and adolescents which may allow for misinterpretation or generalizability of results.
- Parents’ self-reports of their childhood experiences years ago may be subject to recall bias and potential variations due to their current mood at the time of data collection.
- Data collected are only from one time point which may limit generalizability and associations.

AVENUES FOR FUTURE RESEARCH
Future research could:
- Assess physical health through a doctor’s records rather than a self-report item, providing a different perspective illustrating respondents’ health in relation to other patients
- Examine associations longitudinally as opposed to a single time point to further understand how stressors impact a family over time
- Include adolescent participants who are outside of the 11-18 years age range to examine variability among age groups

ASSESSING RESEARCH THAT WORKS

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

www.reachmilitaryfamilies.umn.edu