FAMILY DEVELOPMENT
Military Families Learning Network

Strategies to Support Families Experiencing Difficult Circumstances

https://learn.extension.org/events/2732

U.S. Department of Defense

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- Co-chair on the development of the first DEC position statement related to child abuse
- Research interests:
  - Responsive parental interactions with their children with disabilities
  - Family-centered practices and family support
  - Development of tools and scales to support the implementation of evidence-based practices with fidelity
Strategies to Support Families Experiencing Difficult Circumstances
Objectives:

• Develop awareness of difficult circumstances unique to military and first responder families
• Learn about the impact of stress on child brain development – the good and bad.
• Discuss resources and strategies to enhance and strengthen family interactions during difficult circumstances
Challenging Circumstances for Military and First Responder Families

- Death of a parent
- Disruptions of family routines
- Loss of a colleague
- Loss of friend and family support for military families
- Difficulty getting and staying in contact with families/friends
- Adjustment to a new community and/or culture
- Threat and reality of frequent relocation
- Maintaining two careers when moving so often
- Development of PTSD
- Fear and anxiety about these risks and situations
Three Types of Stress

Positive

Tolerable

Toxic
Positive stress response

• Normal and essential part of healthy development
• Characterized by brief increases in heart rate and mild elevations in hormone levels
• Examples: first day with a new caregiver or receiving an injected immunization
Tolerable stress response

- Activates the body’s alert systems to a greater degree as a result of more severe, longer-lasting difficulties
- Examples: loss of a loved one, a natural disaster, or a frightening injury
- If the activation is time-limited and buffered by relationships with adults who help the child adapt, the brain and other organs recover from what might otherwise be damaging effects.
Toxic stress response

- Can occur when a child experiences strong, frequent, and/or prolonged adversity
- Examples: abuse, neglect, caregiver substance abuse or mental illness, exposure to violence, and/or family economic hardship—without adequate adult support
- This kind of prolonged activation of the stress response systems can disrupt the development of brain architecture and other organ systems, and increase the risk for stress-related disease and cognitive impairment well into the adult years.
Which of these stressors might create toxic stress for a child?

- Death of a parent
- Disruptions of family routines
- Loss of friend and family support for military families
- Difficulty getting and staying in contact with families/friends
- Adjustment to a new community and/or culture
- Threat and reality of frequent relocation
- Maintaining two careers when moving so often
- Parent developing PTSD
- Fear and anxiety about these risks and situations
Two Things Science Tells Us

• Science does not support the claim that infants and young children are too young to be affected by the significant stresses that negatively affect their families and caregiving environments.

• There is no credible scientific evidence that supports the conclusion that all young children who have had significant exposure to early stresses will always develop stress disorders or grow up to be violent adults.

(http://developingchild.harvard.edu/)
Resilience

- An important concept for helping families in stressful situations
- What is resilience? “The ability to overcome serious hardship, while others do not.” (http://developingchild.harvard.edu/)
- Resilience skills can be learned!
- The American Psychological Association offers an extensive resilience guide which can be found at http://www.apa.org/helpcenter/resilience.aspx
  - Ten Tips for Building Resilience in Children and Teens
  - Resilience and pre-school children
“Serve and Return”

http://developingchild.harvard.edu/science/key-concepts/serve-and-return/
Protecting Children from Stress

Very young children can be protected from the stressors they are experiencing through a nurturing relationship with one or more reliable adults who understand how to interact with them in a serve and return way.

But what does all of this have to do with you?

What is your role in building a resilient environment in military and first responder families for young children with disabilities?
Help parents understand:

• That brain development begins before birth and continues to develop for many years.
• That how the brain develops is only in part genetic but is greatly influenced by the child’s environment.
• That the skills of young children with or without disabilities develop gradually beginning with simple skills and progressing to more complex skills.
• The importance of a nurturing, reliable, and available caregiver.
• That having more than one nurturing, reliable, and available adult in their child’s life will not hurt the bond between the parent and the child.
How to Help Parents Understand

https://youtu.be/t4ZomIKhRNE
Reality Check

• Children of military personnel and first responders typically experience many stressors.
• Several of these ‘typical’ stressors may occur daily in the life of a young child just as a result of the parent’s job.
• They just come with the job!
Additional Stress

Some military and first responder children are experiencing stressors that are not unique to their parent’s job, and can occur in any family. Such as:

- Poverty
- Environmental toxins
- Parental mental illness
- Parental drug or alcohol abuse
- Physical or emotional abuse or neglect
Children who experience 6-7 risk factors are 90 - 100% more likely to have developmental delays in cognitive, language, and emotional development. (Bath, et al. 2008)
Let’s be clear….

• We are not saying that every child from a military or first responder family is experiencing toxic stress.

• Remember having one or more consistent adult who is responsive and supportive over time protects children from this stress!
But what about when the stress is too high?

- General interventions are not very effective.
- You must match the intervention to the source of the significant stress.
- But what does that mean?
Scenario 1:

- You are an Early Intervention provider (educator, therapist, etc.).
- You are helping a parent learn how to use appropriate feeding strategies.
- Having a child with a disability can be stressor. Additionally, having a child with feeding problems is very stressful for this parent.

Match the intervention to the source of the stress.
However...

- The other parent has been deployed for the second time in a year to a “very” dangerous conflict.
- The home parent appears to be distracted when you are visiting.
- If something goes wrong during the home visit, no matter how small, the parent gets very upset.

We cannot ignore this stress.

What might be some of the first things you would do?
Use of the DEC Family Recommended Practices

- Ask the parent to explain the situation in his or her own way
- Reflect on what you see and ask open ended questions about:
  - Feelings the parent is having about the situation
  - How it is impacting the family
- Ask the parent what things might help improve the situation
  - What has been tried in situations like this before?
  - To whom has the parent turned in the past? Would that source be a resource now?
Resources Surrounding Deployment

• **Young Children on the Homefront: Family Stories, Family Strengths:** Videos from ZeroToThree with military families sharing their deployment experiences and strategies

• **ZeroToThree Military and Veteran Families Support**

• **Military One Source**
More Resources Surrounding Deployment

- **MilitaryOneClick Family Support and Deployment Resources**
  http://militaryoneclick.com/family/#deployment

- **The American Academy of Child and Adolescent Psychiatry Military Family Resource Center**: This site includes a Q&A and facts around deployment.
  http://www.aacap.org/aacap/families_and_youth/resource_centers/Military_Families_Resource_Center/Home.aspx

- **Center for Parent Information and Resources: Resources Especially for Military Families**
  http://www.parentcenterhub.org/repository/military/
More Resources Surrounding Deployment

• Military.com Deployment Guides and Resources by Branch of Service
  http://www.military.com/deployment/deployment-guides-and-resources.html

• Defense Centers of Excellence

• National Military Family Association: This includes Military OneSource, Military Kids Connect, etc.
  http://www.militaryfamily.org/kids-operation-purple/deployment.html
Scenario 2:

- You are an Early Intervention provider (educator, therapist, etc.).
- You are helping a parent manage their child’s challenging behavior.
- You suspect that the family is struggling with alcohol abuse and depression.

What might be some the first things you would do?
Resources Surrounding Mental Health and Substance Abuse

• **Military Substance Abuse Programs:** This link contains the links to branch specific programs.

• **Substance Abuse Policy and Treatment:**

• **Substance Abuse and Mental Health Services Administration:**
  http://www.samhsa.gov/veterans-military-families
Resources Related to Death of an Infant or Child

• **Military Family Life Counselors (MFLC)/ Military Family Support Coordinators (MFSC):** These sources are often found within the Family Readiness (or Resource) Centers on military installations

• **Five Things I Learned About Child Loss In The Military (personal blog)**
Resources Related to Death of an Infant or Child

- **Five Resources for Military Families Dealing with Infant Loss**
  http://militaryoneclick.com/5-resources-military-families-infant-loss/

- **Tricare Mental Health Care Services**: Download a Mental Health Care Services Fact Sheet
  http://www.tricare.mil/CoveredServices/Mental/GettingMHCare
Spousal Abuse In the Military

• In FY 2015, the rate of confirmed abuse incidents was 11.9 per 1000 couples.¹
• There were 14 reported domestic abuse deaths in FY 2015 with 58% allegedly perpetrated by the active-duty service member.¹
• In 2013, another report found the rate of spousal abuse that met DoD criteria to be at 11 per 1000 couples with 60% of the alleged abusers being the active duty-service member.²
• Also, the Family Advocacy Program accepts reports and assists in instances of intimate partner violence in accordance with DoD definition.

¹ DoD Family Advocacy Program Fiscal Year 2015 Data
Child Abuse and Neglect in the Military

- In FY 2015, the rate of child abuse and neglect victims were 5.3 children per 1000.¹ This is less than the national average of 9.4 per 1000 during FY 2014.¹
- “Abuse and neglect often go unreported because military families don’t seek mental health help or family support out of fear of harming the service members career…”²

However…

¹ DoD Family Advocacy Program Fiscal Year 2015 Data
MilitaryOneSource’s website says this,

• “The DoD and military Services take the position that family-member abuse will not be tolerated…But abuse reported to the Family Advocacy Program (FAP) will not automatically ruin a service member’s career...With FAP intervention and treatment, many service members gain new insights into their professional and personal lives and are able to make the changes necessary for successful military service. Of course, the more extreme the violence, the more likely it is that an offender’s military career will be affected.”¹

¹ http://www.militaryonesource.mil/phasss-military-leadership?content_id=266712
Military Reporting Options for Domestic Abuse

Restricted Report (via the Family Advocacy Program & military health care providers)

- No law enforcement or command notification
- Does not apply to child abuse or if the spouse is in immediate risk of serious harm

Unrestricted Report (via FAP, military police, or chain of command)

- Access to victim advocacy services
- Law enforcement investigation and command notification
- Support and protection from the command
- Access to victim advocacy services

Child Abuse Reporting Options

Childhelp National Child Abuse Hotline
1-800-422-4453

Local Child Protective Services (CPS)
All reports of child abuse/neglect of a military child must be reported immediately to civilian CPS

Local Family Advocacy Program (FAP)
1-800-342-9647 to find a local FAP

Dept. of Defense Child Abuse and Safety Violation Hotline
Not a crisis line; Business hours only; Eastern time

In the U.S. call 1-877-790-1197
Int’l Call Collect 571-372-5348
Resources Surrounding Family Violence

• Domestic Abuse: Military Reporting Options:

• Transitional Compensation Program:

• Find a Family Advocacy Program:
  • Select “Family Advocacy Program” from the drop down menu
  • Enter installation name or postal code
Advice From a Professional

https://youtu.be/o349VapEnLc
A Reflective Tool for Providers: Zinger Activity

• Use this activity to prepare yourself for the “What If…” moments

• Cultivate respect and compassion

• Feelings are for feeling, not fixing
In Summary

• It is important to understand that families and children of those in the military, as well as those of first responders, have additional stressors that other families do not have.

• These types of stressors may not occur to providers but can impact the outcomes for the children and their families.

• Supporting families and children with disabilities during these challenging circumstances requires courage and compassion.
In Summary

• Promoting resiliency in families and children with disabilities is extremely important.

• Think with parents about adults other than themselves in their child’s life who can help provide consistent and responsive interactions when stressful events are occurring.
Military Families Learning Network

Join the Conversation Online!

MFLN Family Development

MFLN Family Development @MFLNFamDev
Talk About it Tuesday: #MFLNchat

Military Families Learning Network

To subscribe to our MFLN Family Development newsletter send an email to: MFLNfamilydevelopment@gmail.com with the Subject: Subscribe
We invite MFLN Service Provider Partners to our private LinkedIn Group!

DoD
Branch Services
Reserve
Guard
Cooperative Extension

https://www.linkedin.com/groups/8409844
Evaluation and CE Credit

Through the Early Intervention Training Program at the University of Illinois, providers in Illinois can receive 1.5 hours of Early Intervention credit.

Several states other than Illinois have already agreed to recognize CE units from this webinar. They are: Georgia, Kansas, Kentucky, Maryland, North Carolina, Ohio, Tennessee, Texas, and Virginia.

All participants may receive a certificate of completion from this webinar after completing an evaluation and post-test. This certificate can sometimes be used to apply for CE credits with your credentialing body if you are not an Illinois provider.
Webinar participants who want to receive a certificate of continuing education (or just want proof of participation in the training) need to take this post-test AND evaluation:

https://vte.co1.qualtrics.com/SE/?SID=SV_4ILK3DyQs8IqQmDb

CE certificates of completion will be automatically emailed to participants upon completion of the post-test & evaluation.

- Questions/concerns surrounding CE credit certificates can be emailed to this address: MFLNFDEarlyIntervention@gmail.com

- Sometimes state/professional licensure boards recognize CE credits from other states. However, it is necessary to check with your state and/or professional boards if you need CE credits for your field.
FD Early Intervention Upcoming Event

Lunch & Learn: Supporting Families Experiencing Difficult Circumstances

• Date: Dec. 14, 2016

• Time: 12:30 p.m. Eastern

• Location: https://learn.extension.org/events/2894

For more information on MFLN FD Early Intervention go to: https://blogs.extension.org/militaryfamilies/family-development/
Find all upcoming and recorded webinars covering:

- Personal Finance
- Military Caregiving
- Family Development
- Community Capacity Building
- Family Transitions
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