

Fighting a war of their own? The effects of parental deployment to a war zone on adolescent psychosocial development – an exploration of the evidence

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Abstract

This paper addresses the effects of parental deployment to a war zone on adolescent psychosocial development incorporating themes around attachment, separation and loss theories and resilience. It is based upon a review undertaken as part of the author's final qualifying year of social work training. The subject matter was chosen partly due to personal interest, but also with a view to developing insights into the adolescent experience of parental separation due to military deployment, a phenomenon which has been increasing over recent years in the UK.

A literature review of available material relating to adolescent responses to parental deployment identified that there is currently little UK research in this area. However, an increasing number of military-focused US sources has emerged, particularly since the Persian Gulf War of 1991, and these have been drawn upon in this paper. In addition, other literature, albeit now quite dated, offers useful information and analysis relating to deployment and these have also been considered.

The key findings of this study demonstrate that the psychosocial challenges of adolescence can be affected by parental deployment; identity formation can be affected and additional difficulties can impact upon a young person's ability to maintain friendships or engage with peers whilst a lack of control can increase vulnerability and ability to cope. The feelings that can manifest for young people experiencing parental deployment appear consistent with the concept of 'ambiguous loss' triggered by the adolescent's concern about the exact whereabouts and proximity to danger, injury or death of their parent, and perhaps exacerbated by the near live media coverage of war. This is qualitatively unlike divorce, adoption or other situations where feelings of ambiguous loss can develop. There appears to be little work specifically addressing whether the gender of the deployed parent or the adolescent plays any significant role regarding the adolescent's psychosocial development, although there are indications within some studies that the gender of an adolescent is a mediating factor that affects a child's response to parental absence, but that the gender of the deployed parent is not necessarily a significant factor. There is, however, evidence that the mental health of the at-home parent can significantly affect how the young person responds to the separation of deployment.

Keywords: Separation and loss, military deployment, adolescence, psychosocial development

Introduction

Separation from a significant person can be “one of the most stressful experiences in the life of a human being, regardless of age” (Garmezy & Rutter, 1985, cited in Zvizdic & Butollo, 2000 p.204). In a military context, deployment is the term used to explain the process through which armed forces personnel are separated from their families when assigned to temporary unaccompanied tours of duty. Amen *et al.* (1988) delineate deployment via three phases: preparation, separation and reunion. By contrast, Pincus and Nam (1999) describe deployment as a cycle with five distinct phases where the period of separation is divided into three stages: deployment (1st month), sustainment (months 2 to 5) and re-deployment (last month). This paper applies the term ‘deployment’ more generically as the period of separation due to war zone posting and is specifically interested in the effects of this on adolescents. Parental deployment to a war zone means children may experience apprehension and uncertainty associated with separation and loss alongside worry about potential physical harm to that parent. These additional stresses alongside the normative stresses associated with adolescent development can lead to anxiety and confusion for a young person trying to make sense of what is happening in their world.

In recent times, military activity in Iraq and Afghanistan has placed huge demands on the capacity of the UK Armed Forces; a recent National Audit Office report (Andrews *et al.*, 2007, p.5) stated that “operational activity has probably not been as high or as intense, and over such a sustained period, for fifty years”, and warned that UK Armed Forces were understaffed, pointing to the strain that fighting simultaneously in Iraq and Afghanistan was having on the Armed Forces, and by extension on the families of deployed personnel. The withdrawal of

British troops from Iraq by the end of July 2009 may reduce this pressure. However, coping with parental deployment remains a reality for many adolescents and may well be a repeat experience for some.

Adolescent development

Recent work relating to adolescent development has challenged the seemingly fixed conceptualisations of developmental theory that is *deterministic* and which embodied a *white Eurocentric perception* when first constructed (Walker, 2003). Critiques of mainstream perspectives (e.g. Erikson and Piaget) argue that these theories are unable to account for the wide spectrum of interactive causal factors affecting adolescents (James *et al.*, 1998). Woodhead *et al.* (1998) argue for a more measured approach that recognises culture, context and competence as key factors informing and affecting development. Nevertheless, early theories of individual development are still highly pertinent and offer useful and informative frameworks as long as we remain alert and open to the uniqueness of the adolescent and their social location.

Adolescence is a time of moving from childhood immaturity to adult maturity. Steinberg (1999) identifies three fundamental transitions in adolescence, all of which occur within the contexts of family, peer groups, school, work and leisure. Biological changes occur at varying rates between individual children although, on average, puberty will begin around age 11 or 12 and conclude around 15 or 16 for both sexes. Alongside these physical changes, adolescents develop the ability to think hypothetically and logically, giving them the ability to think about the future, evaluate life options and set personal goals. Finally, an adolescent will experience changes in social status, is able to take on new roles, engage in new activities, and consider choices which may have long-term consequences. These include continuing education, choosing career pathways and

marriage (Scott *et al.*, 1995). In essence, psychosocial development is constructed in relation to five key elements: identity, autonomy, intimacy, sexuality and achievement. Falhberg (1991, p.108) states that adolescents are, in a sense, trying to address four fundamental questions about themselves:

- (1) Who am I?
- (2) Where do I belong?
- (3) What can I do, or be?
- (4) What do I believe in?

Throughout this transitional period it is generally considered 'normal' for adolescents to exhibit a degree of risk-taking behaviour, mediated by the young person's experiences and understanding of family and wider environment. However, for young people with social difficulties or those who are exposed to stressful experiences, the potential for extreme risk-taking, non-conformity, and self-destructive behaviour increases (Visser & Moleko, 1999). Psychosocial problems in adolescence are often seen to manifest in three broad ways (Achenbach & Edelbrock, 1987; Steinberg, 1999):

- *Substance misuse*;
- *Externalising disorders* where an adolescent's problems are 'turned outwards', e.g. delinquency, anti-social behaviour, aggression and truancy;
- *Internalising disorders* where an adolescent's problems are 'turned inwards', e.g. depression, anxiety or phobias.

These categories do not represent an either/or adjustment. Adolescents may experience internalising and externalising difficulties simultaneously. For example, an adolescent may engage in delinquency and also suffer from depression. The World Health Organisation (2004) estimates that

around 20% of adolescents under the age of 18 will suffer from developmental, emotional or behavioural problems. Stressful life events such as war or separation are known risk factors and hence deployment can increase a young person's potential for negative adjustment. Parental deployment has been linked to several youth behavioural outcomes, e.g. irritability and impulsiveness (Hillenbrand, 1976), acting out and negative behaviour (Levai *et al.*, 1995), and can also be linked to depression (Levai *et al.*, 1995; Jensen *et al.*, 1996). Gender plays a mediating factor in terms of a young person's response to separation. Jensen *et al.*'s (1996) study of children's responses to parental separation while on military service found that boys were more likely to experience increased symptoms of childhood depression than girls when a parent was deployed. Similarly, Rosen *et al.*'s (1993) research indicated that boys were more likely to demonstrate increased discipline problems at home during parental deployment.

Erikson's (1963, 1968) eight-stage model of human development across the lifespan emphasises the social and psychological contexts of development. Each of the psychosocial stages is distinguished by a 'crisis' or 'task' and characterised by two opposing forces or 'contrary dispositions'; syntonic (positive) or dystonic (negative). In adolescence, Erikson's framework sees the crisis as being one of 'Identity v. Role Confusion', where a process of identity formation takes place in which the individual makes their own decisions about who they are, and who they want to become. Successful negotiation of this period leaves an individual with a "defined personality within a social reality that he or she understands" (Beckett, 2002, p.118). Having the space and freedom to have new or different experiences (for example clothes, behaviours, values or beliefs) without having to commit to them is a key aspect of successful identity formation because it allows the adolescent to consider

themselves in relation to others, and to actively explore possibilities and options for the future without having to make a serious decision.

Identity formation and deployment

The notion of identity formation as task or crisis helps illustrate how the environmental changes associated with deployment can have emotional effects that may impact upon an adolescent's psychosocial development. The interplay between a person's psychological condition and their social environment provides social workers with a "powerful perspective on understanding people's psychological development and behaviour in social and cultural contexts" (Howe, 2002, p.171). It is therefore important to recognise not only 'what' changes in an adolescent's world when a parent deploys, but also how they feel and how they respond to these changes.

A consistent finding within the research on deployment relates to the need for the remaining family members to renegotiate boundaries and roles within the family setting during deployment (see Rosen *et al.*, 1993; Huebner & Mancini, 2005; Huebner *et al.*, 2007). In their study of 107 adolescents (aged 12 to 18), all of whom had a deployed parent, Huebner *et al.* (2007) found that changing roles, routines and responsibilities was a problem for many young people, for example having to take the role of the deployed parent looking after younger siblings, or taking on new household chores. Young people reported that deployment often affected their outside activities because of these additional/changed roles or responsibilities, or through lack of transport or because these activities were only undertaken with the deployed parent. This is important; Rosen *et al.*'s (1993) research found that emotional stressors were a considerable problem for adolescents during deployment. Kelley's (1994) work on stress related to war and other traumatic events suggested that

adolescents could express resentment over increased responsibility, i.e. household duties which, in turn, could lead to discipline problems. Therefore, it can be argued that adolescents who have a deployed parent are at increased risk of emotional stress and associated behaviours.

During deployment, additional responsibilities and changing roles may restrict the adolescent's capacity to identify, assess, and choose values and roles in their adult lives (Coleman & Hendry, 1999), and thwart opportunities for social interaction at a number of levels, e.g. with peers, out of school activities or work opportunities. With regard to identity formation, Marcia (1966) suggests that an adolescent could be in a state of identity foreclosure which is characterised by an acceptance of the values of others rather than self-determined beliefs and goals. In Erikson's terms, the adolescent would not be meeting the challenges of this stage and may well develop a tendency towards the dystonic, perhaps developing a behavioural bias towards social isolation for example. Nevertheless, role and responsibility changes do offer opportunities for adolescents to explore different aspects of themselves and others. Huebner and Mancini (2005) found that some adolescents enjoyed increased bonding with siblings during deployment and were positive about additional responsibilities, though this was sometimes countered with concern about the adolescent/parent relationship post-deployment if the returning parent did not recognise their increased maturity.

Separation

How an individual reacts to separation has its roots, according to the classic perspective of Bowlby, in patterns of behaviour and responses that have been learnt in very early life (1969, 1973, 1979). Bowlby's attachment theory is based on evidence of the ways in which early experiences of attachment with a caregiver influence the way an individual relates to and deals with

other people. Children who experience their attachment figure as usually available and responsive feel secure. However, unreliable and/or unresponsive attachment figures engender insecurity. Through the social interactions that attachment behaviour generate, children develop competence in dealing with social situations and internalise a sense of how the world 'works' (Bowlby, 1973). Payne (2005) describes reactions to separation as defence mechanisms. For example, securely attached children will move towards people whereas insecure/ambivalent children are known to become aggressive and move against people and insecure/avoidant children display withdrawal tendencies and move away from people.

Throughout childhood, there is a gradual shift in attachment behaviour away from parents to peers. Bowlby (1979) described adolescence as the stage when attachments to parents are loosening and new attachments are formed with others. However, attachment behaviour and defence mechanisms are often maintained over the life cycle and have the potential to affect relationships with family, peer groups, and society as a whole. Allen and Hauser (1996) found a positive correlation between an adolescent's ongoing relationships with their parents and their ability to develop quality relationships with peers, demonstrating that the dyadic interplay between an adolescent and his/her parent can have an effect on other relationships, i.e. on an adolescent's ability to establish and maintain key supportive networks.

Deployment of a parent results in "changes in the family unit and loss of normal expectations of what life would be" (Jewett, 1994, p.35). If experienced as anxiety-provoking by the adolescent, it has the potential to impact upon the adolescent's psychosocial development because the adolescent's 'attachment figure' may not be available. Alternatively, defence mechanisms employed by the adolescent

may push away or reject those relationships that can support them, for example peer relationships, or emerging intimate relationships.

However, it is also suggested that the relationship *between* the parents may have a role in affecting children's adaptation (Cook, 2000; Akister & Reibstein, 2004) so consideration needs to be given to the relationship of the parents prior to the deployment as a factor in the adolescent's adjustment. Much of the literature points to the pre-deployment stage as being particularly stress provoking within the marital relationship and that, for spouses of military personnel, a sense of emotional and physical distance increasingly develops (Pincus *et al.*, 2001). Logan (1987) suggests that, psychologically, it is easier to be angry than to confront the pain of impending separation, and it is thought to be a common occurrence for spouses to have significant arguments before a deployment (Black, 1993; Pincus & Nam, 1999). Longitudinal studies of children whose fathers were prisoners of war or missing in action found that marital satisfaction was indeed a key factor in the children's adjustment during the separation (Hunter, 1978). Perhaps then, even in well-adjusted marital relationships, deployment has the capacity to cause discord or tensions which may affect the adolescent's ability to cope.

Studies have consistently found that family break-ups, separation or divorce are situations of loss that can have a negative effect on children. Rodgers and Pryor's (1998) comprehensive review of the literature on separation and divorce suggested that adolescents from separated families were more likely to leave school early with fewer academic qualifications, become sexually active, pregnant or a parent at an earlier age and there were also higher levels of smoking, drinking and drug use. Of course this is not always the case; Summers *et al.*'s (1998) comparable study involved extensive questionnaires and found

that the average scores of children from divorced families were within normal ranges when compared to children of intact families. Nevertheless, a common finding in the literature relates to the presence of secondary factors, such as familial income or peer relationships. Interestingly, Cockett and Tripp's (1994) study of family breakdown found that it was those children who experienced repeated separations who were affected most, highlighting the potential negative impact of repeated parental deployment. Research has suggested that securely attached adolescents exhibit more adaptive coping strategies than insecurely attached adolescents (Kerns & Stevens, 1996). Thus it will be those adolescents who display attachment behaviours and 'defence mechanisms' that merely confirm their own poor or weak internal conceptions of themselves and others who may be least able to cope.

Yet, it has been argued that an individual's development occurs along an inherited genetic blueprint where social environment plays only a supporting role and that, at best, environment helps us to recognise what is already part of our biological make-up (Hamlyn, 1978). Rutter and Rutter (1993) argue that qualities such as shyness or cheerfulness are genetically determined and impact on an individual's ability to form relationships. However, studies of children separated from their biological parents have demonstrated that some behaviours have an inherited quality but the expression of these behaviours is influenced (positively and negatively) by the quality of the social environment (Cadoret *et al.*, 1990). Hinde (1989) argues that it is the dynamic combination of genetic programming, innate temperament and social experience that develops individual personality and capacity to cope, and so factors such as different social and familial relationships, environmental factors such as financial position and housing, as well as inherited genetic blueprint, influence an adolescent's responses. Rutter's (1978)

work on resilience provides a valuable insight into the role that both nature and nurture play; he posits that protective factors promoting resilience include having an 'easy' temperament, a special talent, or having a supportive school or good circle of friends, and are genetically and environmentally based. Studies on children's reactions to war have highlighted the importance of family and community ties as protective factors (e.g. Thabet & Vostanis, 2000), and Huebner and Mancini's (2005) study on adolescent adjustment to deployment identified the supportive role of formal organisations such as youth groups and schools and family support groups. As social workers, whilst we may have no control over an individual's genetic predisposition, there is perhaps, scope to promote the mobilisation of protective factors, e.g. strong friendships or supportive school environments.

Loss

Significant disruptions in meaningful relationships are experienced as a loss (Bowlby, 1973; Jewett, 1994). Hooymann and Kramer (2006, cited in Curren, 2007 p.15) state that "losses ... always result in deprivation of some kind; in essence, we no longer have someone or something that we used to", reminding us of the broader context of loss than the finality and distinctiveness of death.

Curren (2007) argues that cognitive development and lack of control are particular factors affecting a young person's experience of loss and grief. An adolescent's developing ability to think abstractly and logically means they may understand where their parent has gone, and be able to reflect on the war situation, but will have no control over whether their parent is deployed. It would be interesting to consider if the intense media coverage of war impacts on the adolescent's cognitive processing of war or their feelings of control. According to Costello *et al.* (1994),

constant media coverage of the Persian Gulf War in 1991 desensitised adolescents, albeit the coverage was somewhat sanitised. However, changes in technology mean that near-live television war reporting from the frontline is possible, and such intense media coverage can increase awareness of the possibility of injury or death of a parent (Huebner & Mancini, 2005). Smith and Moyer-Guse's study (2006) considered the developmental differences in fear and response to the television coverage of the Iraq War and, using a qualitative approach, questioned 161 parents about their children. They found that 13-17 year olds were more likely (than younger children) to see the war as frightening and to have safety concerns. Whilst the validity of their study may be questioned because the responses were from the parent's perspective, these themes do underline the feelings of uncertainty and worry that adolescents can associate with war.

Ambiguous Loss

Recent work on deployment and separation links to Boss's (1999, 2004, 2006) theory of ambiguous loss. Ambiguous loss is a loss that remains unclear. The premise of the theory is that uncertainty or a lack of information about the whereabouts or status of a loved one as absent or present, as dead or alive, is traumatizing for most individuals, couples and families. The ambiguity can impact upon the grief process (Boss, 1999), prevent cognition, and affect coping and decision-making processes. A family member may be physically absent while psychologically present or physically present and psychologically absent but both these situations present uncertainty. According to Boss, family members have no choice but to live with the paradox of absence and presence (Boss, 2006).

Ambiguous loss has been applied in other settings, for example premature birth (Powell, 2001), adoption (Powell & Afifi, 2005) and divorce (Madden-Derdich *et al.*,

1999), and consistently found to be stressful because the situations can deny resolution and can cause confusion for individuals "not knowing who is in or out of your family or relationship" (Boss, 2006, p.12). In terms of deployment, uncertainty and vagueness emerge because thoughts of safety and harm can be ambiguous; an adolescent may know that a parent is in a war zone but have no idea whether, or how close, the parent is to conflict (Huebner *et al.*, 2007). Key characteristics associated with ambiguous loss are boundary ambiguity, disruption of family rituals, increased family distress and mental illness (Boss, 1999, 2006). Huebner *et al.*'s (2007) study used these themes to explore the nature of uncertainty and ambiguous loss with adolescents who had a parent deployed and found that uncertainty was linked with not knowing what would happen in the future in regard to their own welfare and their deployed parents, for example whether they would see them again. Over half of the participants consistently used words like "nervous", "worried", "afraid", "lonely", "isolated" and "sad" when asked about how they felt when they found out that their parent was being deployed. Some adolescents had conflicting feelings that reflected anger or feeling proud of the deployed parent and some expressed changing feelings from denial to recognition. Unclear roles and responsibilities added to the adolescent's confusion with regard to their place within the family. Some 38% reported changes in the at-home parent's behaviour and emotions that impacted on their relationship with them. At an emotional level, manifestations of depression and anxiety were widely reported by adolescents, e.g. feelings of isolation and sadness, or changes in sleeping and eating patterns, whilst a minority reported that the stress of deployment had led to them "lashing out".

To reiterate, Huebner *et al.*'s (2007) work in this area indicates that deployment can manifest itself as an ambiguous loss for an adolescent, and their findings are consistent

with other studies relating to the effects of deployment (Amen *et al.*, 1988; Kelley *et al.*, 2001). The implications for an adolescent's psychosocial development are evident. For example, internalising or externalising behaviours may be exhibited in the context of an adolescent's relationships with his/her peers, school and family, and key psychosocial developmental tasks can be affected. Poor mental health can lead to poor academic outcomes (Aviles *et al.*, 2005), and this may affect an adolescent's sense of achievement. Moreover, an adolescent usually has friends who share their activities and aspirations (Steinberg, 1999) so an adolescent who loses interest, or falls behind, in their school-work may find it difficult to remain friends with those for whom school work is important. Thus an adolescent may lose the friends they need to confide in, adding to their feelings of isolation or sadness.

A systemic approach

Adolescent psychosocial development does not take place in a vacuum but "within complex systems made up of their immediate surroundings, social networks, cultural communities and set within a wider social structure" (Baldwin & Walker, 2005, p.40). An adolescent's environment may be affected by deployment or influence how he or she responds but, similarly, aspects of an adolescent's environment may provide sources of support and strength at what may be a particularly difficult time. For example, research suggests that one of the most potent influences on adolescent development is the family (Fletcher *et al.*, 1999; Huang, 1999; Noack *et al.*, 1999). Parent-child relationships undergo changes during adolescence and, whilst these are represented by a gradual shift from dependency to mutual reciprocity (Larson *et al.*, 1996), parents play a crucial role during these changes. Studies have found (Allen & Hauser, 1996; Allen *et al.*, 1998) that adolescents benefit from parental support that encourages autonomy yet ensures

continued monitoring and emotional connectedness, e.g. through psychological availability, warmth, active listening and boundary setting. Thus, during deployment, the physical and emotional availability of the remaining parent is a critical factor influencing adolescent psychosocial development.

Studies have demonstrated that military separation can be accompanied by a cyclic pattern of depressive behaviour in the at-home spouse that decreases over the time of the separation (e.g. Nice, 1983; Amen *et al.*, 1988). In a military context, the at-home parent is usually the mother; women currently make up approximately 9% of the UK Armed Forces and little consideration has been given specifically to maternal separation. Kelley *et al.*'s (2001) comparative study of children with deployed Navy mothers and children of non-deployed and civilian mothers showed that children with deployed mothers exhibited more internalising behaviours than those children of non-deployed or civilian mothers, and that civilian children exhibited lower levels of externalising behaviours than the children of both the non-deployed and deployed mothers. Whilst Applewhite and Mays (1996) found no significant differences in children's psychosocial problems based on the gender of the parent from whom they were separated, it is perhaps an area that would benefit from further study.

Kelley's (1994) study of 61 mothers which compared maternal adjustment during a peacetime routine separation and during a wartime deployment found that depressive symptoms remained throughout a wartime deployment, suggesting that the potential or actual exposure to a war situation is positively correlated with the length and severity of depressive symptoms in at-home spouses. This is important because studies following the Persian Gulf War (Rosen *et al.*, 1993; Medway *et al.*, 1995) found the at-home parents' reactions to deployment

greatly affected the reaction of the children. Where negative, so too were those of the children. Given that there seems to be a link between at-home spouses' propensity to depressive symptoms and the deployed parent's exposure to a war zone, is it then the case that parental deployment could mean that an adolescent is also at greater risk of developing symptoms associated with depression? Research seems to confirm this. For example, Rosen *et al.*, (1993) used quantitative measures of mothers' reports of their own and their child's health during deployment and found that tearfulness and sadness were the most common symptoms. Yeatman's (1981) study on paternal separation found that children displayed general withdrawal, a decline in their school work, and an increase in physical ailments such as aches and pains. Likewise, in their study of US adolescents' exposure to and feelings about the Persian Gulf War, Brosz Hardin *et al.*, (2003) found that almost two thirds of adolescents in the sample reported feeling distressed, and that this was greater for those adolescents with a parent or sibling in the war.

As children grow older the quality of their peer groups and friendships becomes important. Bigelow and LaGaipa's research (1975) found that 13-16 year olds valued intimacy, loyalty, genuineness, common interests and similarity in attitudes in their relationships with their peers. Huebner and Mancini's study of adolescent adjustment to deployment (2005) seems to echo these findings. They found that, during deployment, other 'military' adolescent peers were a good source of support because they understood what the adolescent was going through, and could provide an opportunity to release tensions. In terms of psychosocial development, 'cliques' or 'crowds' (Steinberg, 1999) can become an important basis for self-definition, and an important influence on self-image. In the context of peer groups, an adolescent can experiment with the expression of autonomy and test out decision-making skills.

Moreover, peer groups play a central role in socialising adolescents in appropriate sexual behaviour and in developing capacity for intimate relationships. Thus, potential difficulties may emerge for those adolescents whose access to peer group interactions or activities is restricted. This may be because of role changes and responsibilities in the family setting as a result of deployment, or for those adolescents whose parents serve with the UK Territorial Army and whose peer group may not be able to provide the level of support valued by adolescents.

An adolescent's psychosocial development then is affected not only by the environment surrounding him/her and its reaction to deployment but also by his or her own responses to the separation. An adolescent who feels anxious, stressed or depressed may find it impossible to meet the challenges of everyday life; unable or unwilling to make choices about their future, engage with peers or try out new activities. This may increase because of additional responsibilities or stressors placed on an adolescent as a result of the mental health of the at-home parent.

It is important to acknowledge that "rates of unhappy feelings and self-deprecation reach a peak during adolescence" (Herbert & Harper-Dorton, 2002 p.103), and it is fairly typical for there to be an increase in moodiness and feelings of misery during adolescence. Low self-esteem, worries about the future and concern about social activities are viewed as normal developmental issues in adolescence and may not necessarily be a direct result of deployment. However, they may be compounded because of deployment and the potential for an adolescent's psychosocial development to be affected by parental deployment should, perhaps, be seen in the context of evidence which suggests that the effect of any one stressor is exacerbated if it is accompanied by other stressors (Rutter, 1978). Deployment may be an additional

stressor during what is already a complex period of adjustment for an adolescent, which may have a cumulative effect. However, adolescents who have access to other resources such as high self-esteem, strong support networks and warm and close relationships with a parent are less likely to be adversely affected by stressful experiences, and it is these areas that perhaps should be targeted as potential sites for intervention.

It would seem then that deployment has the potential to impact on a young person's psychosocial development in a number of ways. However, there remain a number of areas that need to be explored further to aid our understanding. For example, there is some consensus that age is a factor affecting all children's responses to deployment (Jenson & Shaw, 1996; Murray, 2002). However, while adolescence usually includes those aged between 11 and 18, there are likely to be differences in understanding and responses to parental deployment across this range. Piaget (1968) suggested that adolescence is the stage of 'formal operations' when complex ideas can be managed, and a shift from concrete to abstract thinking occurs. Yet this change does not occur overnight and it may be beneficial to consider research that is more narrowly focused by age and gender.

Implications for policy and practice

With regard to local authority duties to respond to the needs of children whose parents may be deployed, we may note the importance here of the Children Act 2004 (DfES). The Act is crucial since it provides the legal underpinning for the implementation of the *Every Child Matters* (ECM) agenda (DfES, 2003). Section 10 of the Act places duties on relevant authorities and their appropriate partners to co-operate in order to improve the well-being of children in their area. Such co-operation can ensure that strategies to support young people facing the deployment of their parent

are targeted and integrated into easily accessible sites, e.g. schools or community facilities. This is important as there are many families who operate 'outside' of the military system, for example, children whose parents are in the Territorial Army, or those who live outside military communities, including young people who attend boarding school. Furthermore, research in the US military suggests that families operate within a 'military culture' regardless of race or ethnicity which can affect how the family handles stress or accepts support (Orthner *et al.*, 1990; Albano, 2002). While UK military culture may differ from the US, these studies do offer an important insight into the potential influence that factors such as rank or accessibility can have when seeking or accepting support. Thus, notwithstanding dedicated welfare support available to serving soldiers and their families (Army Welfare Service, SSAFA, Army Families Federation), it still remains important that the potential effects of deployment are recognised by other professionals beyond the military. Indeed, social work's holistic approach and position within a multi-agency arena offers an important channel through which these needs can be identified and addressed. It is hoped that the above review will help alert the profession to the complex challenges faced by adolescents and their families in coping with the deployment of a parent and also provide useful insights to inform their effective support by children's services.

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