

Boundary Ambiguity and Ambivalence in Military Family Reintegration

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(ABSTRACT)

Since the beginning of the Global War on Terror, almost three million children, spouses, and adult dependents have been directly affected by the deployment experiences of more than two million service members. This study examined the applicability of the Contextual Model of Family Stress (Boss, 2002) to a reintegrating military family sample ($N = 228$) by assessing the effects of external, military-related contextual factors (i.e., rank, component, combat exposure, length of time home post-deployment, and cumulative length of deployments) and internal contextual factors of boundary ambiguity and family and deployment-related ambivalence on family functioning. Quantitative data were taken from a national survey of service members from multiple branches of the United States military. A hierarchical regression analysis revealed that, as a whole, the addition of the military-related contextual factors, boundary ambiguity, and the ambivalence variables made a significant contribution to the prediction of family functioning, controlling for all previously entered variables. Service members from lower ranks and those who had been home for longer periods of time reported poorer family functioning. Higher degrees of boundary ambiguity and family ambivalence were also associated with poorer family functioning. The results from this study extend existing theoretical applications of the Contextual Model (Boss, 2002) to military families through the incorporation of boundary ambiguity and ambivalence. Findings will also inform interventions aimed at promoting family resilience in the military population during the post-deployment period.

Dedication

To Jenny: It would take many lifetimes to express my gratitude for your selfless support as I pursued this degree. I would have quit a long time ago if not for your daily encouragement and your ability to see what I often cannot. I am so humbled by and undeserving of your patience, grace, and love that has sustained me for the last ten years. And I promise never to go back to school as long as I live.

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Soli Deo gloria.

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Chapter 1

INTRODUCTION

Over 2.3 million service members have been deployed since the beginning of the Global War on Terror (GWOT) in late 2001 (White House, 2011). A staggering number of service members are returning from these deployments with a variety of mental health issues, including post-traumatic stress disorder (PTSD), anxiety, depression, and substance abuse problems (Hoge, Auchterlonie, & Milliken, 2006). Additionally, given advancements in body armor coupled with the use of improvised explosive devices as the weapon of choice in Iraq and Afghanistan, many service members are surviving the recent conflicts, but with a variety of non-fatal yet life-changing injuries, including amputations, burns, and most prevalent, traumatic brain injury (Tanielian & Jaycox, 2008). This cohort of military personnel undoubtedly will be affected by their service throughout the course of their lives (MacLean & Elder Jr, 2007). However, their suffering, as well as their resilience, will also affect the lives of those who serve alongside them—members of their own families (Darwin, 2009). They will re-enter a unique family situation where “returning to the status quo is never possible” (Wiens & Boss, 2006, p. 24).

There are more than three million spouses, partners, children, and adult dependents of military personnel who have been affected by the deployment of their loved ones (Office of the Deputy Under Secretary of Defense (Military Community and Family Policy) [DUSD], 2012). More than two million children alone have experienced the deployment of a parent (Chartrand, Frank, White, & Shope, 2008). Uncertainty, unpredictability, and fear typically characterize a family’s experience of a military deployment, especially those deployments that place the service member in a combat zone (Booth, Segal, & Bell, 2007). Families struggle with ambiguity around the well-being of the deployed parent and may worry endlessly about his or her safety (Faber, Willerton, Clymer, MacDermid, & Weiss, 2008). Service members themselves also encounter great unpredictability when deployed and frequently experience traumatic events such as sustaining or witnessing injury and killing enemy combatants, all the while living in harsh conditions (American Psychological Association Presidential Task Force on Military Deployment

Services for Youth Families and Service Members [APA], 2007). Meanwhile, at home, roles and other household responsibilities, such as who takes out the trash or pays the bills, must be reorganized and redistributed among other family members (Wood, Scarville, & Gravino, 1995). Families may need to relocate in order to be near sources of support. Children must adjust to not having one of their parents around, and the parent that is left behind frequently struggles with a significant degree of loneliness (Booth et al., 2007). However, once the deployment ends and the service member returns home, both service member and his or her family may be surprised by the transitions that await them. Though they officially may be out of harm's way, the process of reintegration can be an uphill battle for many military families.

The post-deployment period, during which the processes of reintegration occur, begins once the service member returns home from deployment (Amen, Jellen, Merves, & Lee, 1988; Mateczun & Holmes, 1996; Pincus, House, Christenson, & Adler, 2001). After the physical reunion of service member and family, there is often a brief period of euphoria while the family simply enjoys being with the service member again and can finally relax knowing he or she is safe (Drummet, Coleman, & Cable, 2003; MacDermid, 2006). Spouses will frequently see improvements in their well-being and a reduction in emotional difficulties during this time (Chandra et al., 2011). However, these effects may not apply to the children in the family, whose emotional difficulties such as irritability, worry, and sadness may persist for an extended period (Chandra et al., 2011); these authors speculate it may take longer for similar improvements in youth to be observed. Within a few months of the return of the service member, and with the passing of the initial honeymoon period, the family may find themselves struggling to adapt as the extent of the changes undergone by all family members during deployment begins to emerge. It often becomes unclear, for instance, who is supposed to fill certain roles and responsibilities in the family. This may create a phenomenon called boundary ambiguity, which has to do with a lack of clarity around who is functionally in or out of the family system (Boss, 2002). According to the Contextual Model of Family Stress (CMFS; Boss, 2002), such ambiguity can impair the

ability of the family to carry out its functions.

The myth of Odysseus illustrates how war changes individuals and families. A number of events made this warrior-king's own reintegration difficult, such as gods conspiring against him, witnessing his beloved dog's death, having to slay his wife's suitors, and, most relevant to the present discussion, dealing with her struggle to recognize him after his 20 year absence (Mateczun & Holmes, 1996). It is no surprise that families today still struggle with personal reactions to the returning service member. Ambivalence often characterizes these reactions, as family members contend with contradictory emotions of relief that the service member is back and frustration over readjustments in structure and routine (Faber et al., 2008). Service members themselves also experience ambivalence; they enjoy being with their families but struggle with re-engaging in parental and spousal roles (Sayers, Farrow, Ross, & Oslin, 2009). Children may be afraid of the service member parent (Sayers et al., 2009) and spouses may struggle with ambivalence related to their partner's ambiguous presence (Faber et al., 2008). That is, while their partner may appear to be the same person he or she always has been on the surface (assuming no serious wounds were inflicted), spouses often report that their mates are not the same individuals they were when they first left for deployment (Gorbaty, 2009). Service members may also experience ambivalence regarding deployment itself as they struggle to make sense of their experience, including its benefits and costs. Boss's (2002) Contextual Model indicates that either kind of ambivalence can interfere with the ability to make meaning of a stressful situation, thus creating or exacerbating difficulties in overall family functioning.

While boundary ambiguity and ambivalence can affect reintegration from inside the family, a variety of military-related contextual factors can impact the process from without. For example, research suggests that being in the Guard or Reserve may be a risk factor for problematic reintegration, since Active Duty personnel typically have greater awareness of and access to family support resources (Chandra, L. Martin, Hawkins, & Richardson, 2010). Enlisted personnel, with fewer years of professional experience and time together as a family, as well as fewer financial resources, may also be at a higher risk for problems in the post-deployment period

(Reger, Etherage, Reger, & Gahm, 2007). Research has also identified combat exposure (Monson, Taft, & Fredman, 2009) and the cumulative length of deployments (National Military Family Association [NMFA], 2005) as factors differentiating the experience of military families during deployment and reintegration. The stress that accumulates as a result of the aforementioned factors may contribute to or exacerbate difficulties in family functioning.

It is clear that a variety of changes in service members, spouses, and children coalesce during the post-deployment period, often with negative effects upon family functioning (Lapp et al., 2010; Mateczun & Holmes, 1996; Sayers, 2011). While the CMFS (Boss, 2002) predicts increases in stress (i.e., “pressure or tension in the family system” [p. 16]) around times of transition, including family members’ entering or exiting the system, it is unknown what factors are most salient for military family functioning during the process of reintegration. The purpose of this study is to help explain some of the variation in family functioning, within a family stress framework, through delineating the impact of military-related factors, boundary ambiguity, and service member ambivalence.

Post-Deployment Military Family Functioning

Ever since Reuben Hill’s (1949) classic study of military family adaptation following the deployment of service members participating in World War II, the research community has capitalized on heightened military activity around the globe in an effort to study the effects of deployment and separation of service members and their families during the post-deployment period and beyond. For instance, research continues to be published today regarding the effects of PTSD in Vietnam veterans and their family systems (e.g., Evans, Cowlshaw, & Hopwood, 2009), among many other topics. A significant increase in the amount of research around reintegration would be expected given the uniqueness of the last decade of war compared to previous conflicts, including the heightened operations tempo, a heavy reliance on reserve component service members, and more service members surviving combat but doing so with chronic mental and physical trauma (Institute of Medicine [IOM], 2010).

Research on military families continues to establish a number of family and individual

risk factors related to deployment and reintegration that may affect family functioning. Military families may have a greater risk of marital and family dissolution because of the stressors of military life, including deployment and reintegration (Palmer, 2008), with female service members being at a greater risk for separation or divorce than males (IOM, 2010). Service member symptoms of post-traumatic stress are particularly associated with marital distress during the post-deployment period (Erbes, Meis, Polusny, & Compton, 2011). Couples also struggle with the tasks of reintegration, such as learning how to rely on one another again, managing strong emotions, making sense of their experience, and renegotiating and redefining family roles (Bowling & Sherman, 2008). Re-entering family relationships means that partners face new expectations, power structures, language, routines, leisure, and stresses (MacDermid, 2006). Female spouses, in particular, may be reluctant to relinquish new roles and responsibilities gained over the course of their partner's deployment (Baptist et al., 2011). Couples must also learn how to become interdependent once again (Karakurt, Christiansen, Wadsworth, & Weiss, 2013).

Children may struggle with loyalty conflicts (Pincus et al., 2001), figuring out what the rules are within the family (Patterson & Garwick, 1994), not feeling respected by the service member parent (Willerton, Schwarz, MacDermid Wadsworth, & Oglesby, 2011), or even being afraid of him or her due to how he or she has been changed by deployment experiences (Sayers et al., 2009). Internalizing or externalizing disorders may appear in these youth, as well as disruptions in family or peer relationships and academic maladjustment (Card et al., 2011; Chandra, L. Martin, et al., 2010). Many of these systemic responses by spouses and children can be traced to the experience of boundary ambiguity in this population (Faber et al., 2008; Huebner, Mancini, Wilcox, Grass, & Grass, 2007), as family members re-organize their perceptions of who is functionally in or out of the family system and in what particular ways. Family reintegration can easily become problematic as a result of, for instance, deteriorating communication, role inflexibility, or emotional constriction, in which case all family members are adversely affected, resulting in strained relationships and compromised family functioning.

Given these risk factors, how well are military families doing in terms of adjusting to the

stressor of reintegration? Sayers et al. (2009) surveyed almost 200 Iraq and Afghanistan veterans receiving services at a VA hospital and found that 75% reported some frequency of family readjustment problems (e.g., disagreements about responsibilities, feeling like a guest in one's own home, a troubled relationship with spouse or child), with 66% reporting that these problems occurred weekly. Another study found that only 25% of the children of the mothers surveyed had difficulties with reunion (Andres & Moelker, 2011). However, this optimistic finding should be considered with caution since the length of deployments in this study averaged around five months and the authors failed to define the duration of "reunion."

In another recent survey of more than 4,000 military family members (mostly female spouses), 64% of participants reported their service member had an easy reintegration into the family, 19% identified reintegration as difficult, and the remaining 17% were neutral (Office of Research and Policy [ORP], 2012). Elsewhere, Sayer et al. (2010) sampled over 1,200 Iraq and Afghanistan veterans receiving VA medical services and found that 40% of these veterans experienced problems in community reintegration and, in particular, with social relations (e.g., getting along with spouse/partner, confiding or sharing personal thoughts or feelings) in the last 30 days. What is most revealing about this study, however, is the fact that many veterans were completing the survey around 42 months after returning from their last deployment, indicating that deployment may so alter a family that they struggle with reintegration not just for a few months as previously suggested in models of the deployment cycle (e.g., Pincus et al., 2001), but years.

What this evidence suggests is that many families report doing well with reintegration, while others potentially struggle for years with the process in an attempt to achieve a "new normal" (Lapp et al., 2010, p. 53). Success or struggle in reintegration not only affects the family itself in the ways explained previously, but also ripples out to influence the family's relationship with the military as well as particular service member outcomes, such as readiness and retention. Readiness refers to "the capability of an individual soldier or a unit to perform assigned duties" (Tucker, Sinclair, & Thomas, 2005, p. 277) and retention entails the maintenance of a service

member's commitment to the military. Higher marital quality has been shown to predict both retention in the Armed Forces (Rosen & Durand, 1995) and, to a lesser degree, readiness (Schumm, Bell, & Resnick, 2001). Family attitudes about the military (e.g., how family-friendly is it perceived) have also predicted readiness and retention (Segal, 1986), such that more positive attitudes may translate into greater service member productivity and more frequent re-enlistments. Family member perceptions of organizational support also positively influence their support for a service member's military career (Pittman & Orthner, 1988). Finally, Huffman, Culbertson, and Castro (2008) found that, controlling for sex and rank, perceptions of the military as a family-friendly environment were responsible for 30% of the variance regarding retention. Thus, a thriving military force depends in part upon thriving military families. As a result, it is of utmost importance to understand military family functioning after deployment and the factors that influence the family's response to stress. While we know a good deal descriptively about the characteristics of reintegrating families, our understanding of processes and mechanisms of risk and resilience is lacking; this study will help fill this gap.

Gaps in Reintegration Research

Since research on the family processes associated with reintegration is still in its infancy, there is much to learn. The majority of extant research is simply descriptive of military families (e.g., how many spouses report poor functioning in the post-deployment period, what percentage of service members indicate struggling with re-establishing family relationships, and the like). Moreover, what inferences we can draw are limited since many studies are also plagued by narrow samples or restricted to clinical criteria (e.g., receiving VA services, PTSD diagnosis), select branches of the Armed Forces, or smaller convenience samples (e.g., localized military programming) that limit the statistical analyses that may be performed on the data. Thus, neglecting the use of more complex statistical analyses, much extant research fails to contribute to the knowledge of family processes and mechanisms of change (i.e., answering "why" or "how" something takes place as opposed to simply indicating that it *does* take place). Much research is also disconnected from theory and therefore lacks cohesion or a consistent trajectory.

Furthermore, while factors associated with risk (e.g., an incomplete understanding of the impact of deployment, impaired family communication, impaired family organization) and resilience (e.g., developing a shared family narrative, open communication) in military family functioning have been identified in conceptual literature (Saltzman et al., 2011), they have yet to receive much empirical validation. There is also limited information about the factors that differentiate those families who do well from those who do not. In this area, too, there are conceptual models that need to be tested (Adler, Zamorski, & Britt, 2011; S. Riggs & D. Riggs, 2011). Finally, Boss's (2002) iteration of family stress theory suggests certain military-related features of the family's external context can impact the family's response to the stress of reintegration. Among these salient features are rank (Reger et al., 2007), the cumulative length of deployments (NMFA, 2005), combat exposure (Monson et al., 2009), being a member of the Reserve component (Wiens & Boss, 2006), and the length of time home after deployment (Faber et al., 2008); however, little is known about their impact on family functioning.

As mentioned, a central feature of family reintegration includes the renegotiation of roles and responsibilities and re-establishing relationships with loved ones. These features may reflect an experience of boundary ambiguity (Boss, 2002). It is unclear, however, what precise role boundary ambiguity may play in family functioning. Boss's (2002) family stress model suggests a variety of internal contextual factors that may result from boundary ambiguity, providing a means by which it could affect family functioning. One such potential consequence is service member ambivalence, which is simply the presence of "mixed emotions or conflicted feelings" toward a person or phenomenon (Boss, 2002, p. 121); in the present study, ambivalence toward one's family and one's deployment experiences are in view. While ambivalence is certainly present in reintegrating military families (Wiens & Boss, 2006), the subject remains mostly in the realm of the thematic or anecdotal and has yet to be addressed empirically.

The Current Study

The current study will help fill these gaps, as it examines the impact of reunification stress on family functioning. This study defines family functioning according to the McMaster Model,

which posits six dimensions central to family life: problem-solving, communication, roles, affective responsiveness, affective involvement, and behavior control (I. Miller, Ryan, Keitner, Bishop, & Epstein, 2000). This model of family functioning is predicated upon a systems theory view of families, with particular emphasis upon the role that structure and organization have in affecting family member behavior. Sharing similar conceptual roots, the CMFS (Boss, 2002) provides a broad framework to assess how family functioning is impacted by a family's external and internal contexts as it responds to stressors such as reintegration. The external context refers to things the family cannot control, such as history, economy, culture, and developmental transitions, while the internal context is comprised of structural and psychological features that are under the family's control (Boss, 2002). The structural context includes "the form and function of the family boundaries, role assignments, and rules regarding who is within and who is outside these boundaries" (Boss, 2002, p. 44); the psychological context refers to "the family's perception, appraisal, definition, or assessment of a stressful event" (Boss, 2002, p. 44). Thus, the CMFS provides guidance as to what variables may be partially responsible for the relationship between the stress of reintegration and family functioning. The influence of these three kinds of variables on family functioning will be explored in this study.

First, the CMFS (Boss, 2002) posits that a family's response to stress will be impacted by its external context, including military-related features such as rank, combat exposure, component, length of time home post-deployment, and the cumulative length of deployments. It is thought that greater combat exposure, being of lower rank, and being a member of the Guard or Reserve, for instance, may create situations of greater stress that could impinge upon family functioning. While some of these factors have been explored in the literature, they have yet to be done so cohesively and with the outcome variable of family functioning. The family's external context can then influence its internal context, including its structural and psychological features. One such structural feature is boundary ambiguity (Boss, 2002), the second variable of interest in this study. This refers to a situation in which knowledge of who is functionally in or out of a family system is unclear or ambiguous (Boss, 2002). The experience of boundary ambiguity can

affect how the processes of resuming roles, responsibilities, and relationships proceeds, thereby having a potentially significant impact on family functioning. This phenomenon has been the focus of only a limited number of military family studies (e.g., Faber et al., 2008) thus far, and the current study would extend this literature by placing boundary ambiguity within a statistical model to determine its relationship to military factors and family functioning.

As mentioned earlier, it could be that boundary ambiguity indirectly impacts family functioning through another phenomenon—service member ambivalence, which is a perceptual, psychological feature of the family's internal context. Indeed, Boss (2002) suggests that ambivalence may result from situations involving chronic boundary ambiguity. Ambivalence would presumably affect the ability to make meaning of and cope with the variety of changes that are experienced by families during reintegration (Boss, 2002), and could link boundary ambiguity with overall family functioning. While it has been hinted at in a number of qualitative studies (Huebner et al., 2007; MacDermid, Samper, Schwarz, Nishida, & Nyaronga, 2008; Wiens & Boss, 2006) and conceptual articles related to military families (Palmer, 2008), ambivalence has yet to be included in any models of family functioning or even addressed empirically from the service member's perspective. This study will address two types of ambivalence, one of which is related to one's family relationships, and the other which is related to one's deployment experience. Using the CMFS as the guiding theoretical framework, Figure 1 shows the conceptual model used in the present study. The solid line between variables represents the totality of their effect on family functioning, while the broken lines indicate the possibility that a variable transmits some of its effect on to family functioning via one or more subsequent variables.

The first research question for the present study was the following: To what extent do features of a family's external (i.e., military-related) and internal (i.e., boundary ambiguity) contexts predict family functioning in the post-deployment period? A second research question is the following: In particular, to what extent does service member ambivalence also predict family functioning when controlling for other factors? Hypotheses for the current study were as follows:

Hypothesis 1: Controlling for demographic characteristics (i.e., age, sex, race, length of

marital relationship, and number of children), military-related factors will significantly contribute to variation in family functioning.

Hypothesis 1a: Enlisted service members will report poorer family functioning than officers.

Hypothesis 1b: Service members in the Guard or Reserve will report poorer family functioning than Active Duty personnel.

Hypothesis 1c: Service members whose last deployment was combat-related will report poorer family functioning than those whose deployment was not combat-related.

Hypothesis 1d: The length of time home will be positively related to family functioning.

Hypothesis 1e: The cumulative length of deployments will be negatively related to family functioning.

Hypothesis 2: Controlling for demographic characteristics and military-related factors, boundary ambiguity will negatively and significantly predict family functioning.

Hypothesis 3: Controlling for demographic characteristics, military-related factors, and boundary ambiguity, ambivalence will significantly contribute to variation in family functioning.

Hypothesis 3a: Deployment-related ambivalence will be negatively related to

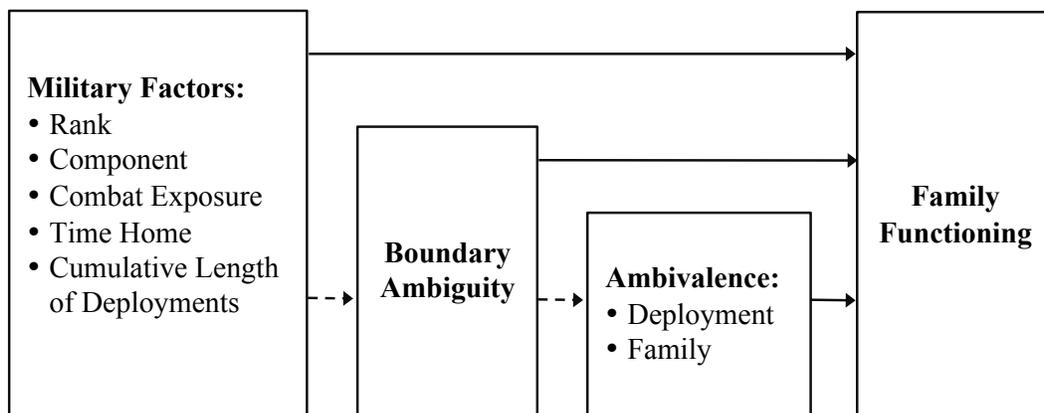


Figure 1. Conceptual Model

family functioning.

Hypothesis 3b: Family ambivalence will be negatively related to family functioning.

Potential Implications

This research provides a timely exploration of the CMFS (Boss, 2002) among a military family sample experiencing reintegration. The conclusions drawn bring attention to the influence of military-related factors and boundary ambiguity on family functioning, as well as the potential role of service member ambivalence in the process. This provides targets for prevention and intervention on multiple levels. Programmatically, service member debriefing and other reintegration programs (e.g., Yellow Ribbon Reintegration Program for Reserve component members) could benefit from an awareness of unique pathways of family stress and what particular aspects of service members and their families might be amenable to change. Similarly, the findings may have a number of clinical implications for civilian or military-affiliated helping professionals. Practitioners may be able to utilize information about boundaries and ambivalence as they assist service members and their partners in the post-deployment period. Finally, there may be policy implications of the research concerning funding for military families and prioritizing certain groups according to level of risk.

Chapter 2

LITERATURE REVIEW

The military lifestyle is associated with a host of stressors that separate this group from the civilian population. While many of these stressors apply more intensely to active duty families (i.e., “full-time” military personnel), they also have an effect on reserve component families (National Guard or Reserve), especially if those reserve members are being activated as frequently as they have been over the last decade. Since the reserve component continues to be an under-studied population, the following discussion of what is known in the literature emphasizes the stressors associated with the active component. However, the particular challenges of the reserve component will be discussed later in the chapter.

One of the fundamental sources of stress for military families in general comes from the need to balance competing demands in the domains of work and family. In this vein, Segal (1986) has infamously called the military and the family “greedy institutions,” since both “exercise pressures on component individuals to weaken their ties, or not to form any ties, with other institutions or persons that might make claims that conflict with their own demands” (Coser [1974] as cited in Segal, 1986, p. 11). Both the military and the family demand a high degree of loyalty that can sometimes produce conflict with the other. For example, the importance of the mission is paramount in military families, leaving service members to struggle with being a part of a “second [military] family” (Hall, 2011, p. 40). This means that, functionally, military obligations and work and peer relationships can become more important than one’s own family. It also means that service members have little, if any, control over their schedules. If the time required for a job extends past an eight hour work day, so be it. Moreover, while there are bonuses and incentives, service members do not get compensated for “overtime” work. Thus, in situations where, for instance, a parent’s military position requires them frequently to be absent from the family, such competing demands could make it difficult to determine who is functionally in or out of the family system, which Boss (2002) refers to as boundary ambiguity. This conflict between greedy institutions, however, is not simply a matter of competing demands or mere time

constraints, but also has to do with the security of one's identity as a function of the social institutions to which one belongs. For example, while emotional constriction would make a soldier successful during a deployment, this may be the very thing that causes distress in her family relationships once she returns. The former would bolster an identity that privileges work, while the latter would represent a challenge to an identity that privileges the family. Similarly, a father's flexibility in disciplining his children borne out of a compassionate heart, if applied to the military realm, may lead to his being passed over for promotion, or worse.

Simply put, it is difficult for service members to "be all you can be" in both domains, at the same time. Such contradictions then, inherent in being simultaneously a service member and family member and having to navigate those boundaries, can result in ambivalence, or simply mixed feelings, toward either domain. Luescher (2004) notes "it is useful to speak of ambivalence when polarized simultaneous emotions, thoughts, volitions, actions, social relations, and/or structures that are considered relevant for the constitution of individual or collective identities are (or can be) interpreted as temporarily or even permanently irreconcilable" (p. 36). A service member may experience ambivalence toward his family when he becomes aware of how ill-suited his military experience has made him for a harmonious family life. Sure, he loves them, but on the other hand, he may struggle with the fact that he cannot run his home like he runs his company, command, or battalion. Inherent in such a struggle is a question of identity—In which domain do I *really* belong? Who am I and where do I fit in? It is this temporary irreconcilability of one's military and family identity and the ambivalence that results that is most relevant to reintegration and the purposes of this study.

There are a number of additional ways in which the task of balancing participation in military and civilian or family cultures is stressful. For example, relocations for active component service members occur about every three years, can come with little or no notice, and can have the effect of isolating the military family from civilian life (Hall, 2011). This can be especially difficult for military spouses and children, who may have more interaction with non-military peers and friends than the service member (Blaisure, Saathoff-Wells, Pereira,

MacDermid Wadsworth, & Dombro, 2012). Frequent moves leave non-military family members with the task of starting over socially in an unfamiliar place, whereas the service member has a ready-made social network wherever he or she is sent. These frequent moves also often have a negative effect on working family members, such as spouses, who may not always be able to find work for which they are trained at a new assignment, which can then contribute to increased financial pressures on the family (Booth et al., 2007). Another significant stressor is separation, which is an ever present threat to the family system that may occur through routine or unexpected trainings and especially overseas deployments (S. Riggs & D. Riggs, 2011). Deployments are associated with a degree of adjustment problems in children (Card et al., 2011) and emotional difficulties and increased stress for spouses (Flake, Davis, Johnson, & Middleton, 2009). Now that the larger context of the military family has been explored, the following sections will discuss more detailed conceptual and theoretical aspects of the study related to the deployment cycle and the military context, boundary ambiguity, and ambivalence.

Deployment Cycle and Reintegration

Research has established that deployment constitutes a unique and major stressor in the lives of service members and their families (Wood et al., 1995). Deployment refers to “the movement of forces within areas of operations, the positioning of forces into formation for battle, and/or the relocation of forces and materiel to desired areas of operations” (Center for Army Lessons Learned, n.d., in Adler, Huffman, Bliese, & Castro, 2005, p. 121). Peebles-Kleiger and Kleiger (1994) suggest there is a qualitative difference between peace-time and combat deployments, with the latter being a catastrophic stressor. Compared to normative or expected (and thus planned for) stressors, catastrophic stressors are characterized by a greater “sense of helplessness, loss, disruption, destruction...[and] dangerousness” (Peebles-Kleiger & Kleiger, 1994, p. 179). Wiens and Boss (2006) agree that deployment is a catastrophic stressor in terms of families having little time to prepare for the event and its association with greater uncertainty and danger, however this conceptualization may be changing. Since the early part of the last decade, it has become well known that military service would entail one, if not more, combat deployments.

Deployment thus has become something families could better prepare for than in previous generations, though it remains to be seen if its effects are any less catastrophic.

In addition to the routinization of deployments, another change in the understanding of deployment concerns the idea of the deployment cycle. Most broadly, this has been conceptualized as three discrete stages: pre-deployment (the time leading up to the actual deployment), deployment (when the service member is separated from the family), and post-deployment (Amen et al., 1988). However, given the unprecedented number of multiple, consecutive deployments experienced by military personnel in the last decade and the cumulative effects of deployment-related stress, the idea of discrete deployment cycle stages is becoming usurped by the notion of a “spiral of deployment” (Blaisure et al., 2012). Stress and “unresolved anxieties” can get carried across multiple deployments (NMFA, 2005, p. 14), which can further erode resilience as well as family functioning (Chandra, Lara-Cinisomo, Jaycox, Tanielian, Burns, et al., 2010) .

Given the unique nature of the last decade of war and especially in light of the 2011 drawdown of troops from Iraq (Tapper, 2011, October 21), greater focus is now being given to the post-deployment period, which encompasses a host of processes under the label “reintegration.” The term “reintegration” is not very well-defined in the literature. At a minimum, it refers to the period of time following the service member’s deployment and, in particular, what a family experiences after their physical reunion with the service member (Mateczun & Holmes, 1996; Norwood, Fullerton, & Hagen, 1996; Peebles-Kleiger & Kleiger, 1994). Within this definition, authors disagree on the timing and length of the period of reintegration. The emotional cycle of deployment model articulated by Pincus et al. (2001) suggests the post-deployment period (i.e., reintegration) lasts from three to six months after the service member’s return. However, writing about a stress reduction intervention following the Gulf War, Black (1993) suggested the reintegration period only lasted from four to eight weeks. Given research suggesting family problems related to reintegration may last for more than 40 months after the return from deployment (Sayer et al., 2010), more realistic time estimates come from Peebles-Kleiger and

Kleiger (1994) who indicated a period of three to nine, if not 12 to 18, months, for resolution of this phase of deployment. However, what “resolution” means is up to the individual family, and even dissolution of the family does not always entail a negative or unwanted outcome (Boss, 2002). With longitudinal studies of service members and their families currently underway (see Blaisure et al., 2012), future research will likely provide more specific estimates of a timeline for reintegration and an idea as to what successful navigation of the post-deployment period looks like.

In the present study, military family reintegration refers to the processes a family engages in as they successfully negotiate adaptations to any deployment-related alterations in family functioning, including changes in roles, responsibilities, and relationship behaviors. The core of this definition comes from the family deployment cycle literature, in particular Mateczun and Holmes’ (1996) chapter outlining the post-deployment processes of return, readjustment, and reintegration. Return refers to the physical reunion of family members and the performance of various homecoming rituals. Readjustment has to do with the family’s growing awareness of changes in family functioning. This could range from the trivial (e.g., noticing one’s spouse loads the dishwasher in a haphazard way or chews loudly) to the significant (e.g., becoming aware that the at-home spouse now disciplines the children or has been making serious financial decisions). Reintegration of the service member back into the family, then, has to do with communication, negotiation of change, and the establishment of consensus among family members. Conceptually, the present study situates readjustment under the larger category of reintegration, while, like Mateczun and Holmes, maintaining the idea that reintegration refers to a set of processes rather than a discrete stage or time period. Moreover, these reintegration processes are carried out in such a way that mutually satisfy the needs of all family members as they strive to reach a “new normal” of family functioning (Lapp et al., 2010). Thus, successful reintegration requires the satisfaction or consensus of all family members with regard to how the family has adapted to the return of the service member. This relates to Boss’s (1992) contention that if even one person in the family has a symptom (or, in this case, has no appropriate say-so in a family’s adaptations to

reunification), then the family is not managing stress well.

Theoretical Frameworks

The present study was guided by the Contextual Model of Family Stress (Boss, 2002), which offers a robust framework for understanding how a family's external and internal contexts affect family functioning in response to stress. For the purposes of this study, the external context was represented by certain military-related factors, such as rank, component, and combat exposure, among others. I also made Boss's (2002) concept of boundary ambiguity central to the military family reintegration experience. Boss (2002) also contends that boundary ambiguity can lead to the experience of ambivalence in family members. Both boundary ambiguity and ambivalence are elements of a family's internal context that impact the response to stress. While ambivalence is experienced subjectively (i.e., psychologically), along with Boss (2002), I propose it is related to sociological structures by virtue of the service member's location in the military and family realm (Luescher & Pillemer, 1998). The CMFS itself, including boundary ambiguity, and a more detailed discussion of ambivalence are explored in the following sections.

Family stress theory. Ever since Reuben Hill's (1949) pioneering work on the post-deployment adjustment of World War II families in the 1940s, the bulk of military family research has been situated within family stress theory, either implicitly or explicitly (Blaisure et al., 2012; G. Bowen, Martin, & Mancini, 2013). Family stress theory is an umbrella term that is associated with a number of similar theoretical models identifying the processes by which stress affects a family and how a family can demonstrate resilience despite such pressure. Family stress theory is a middle range theory (Hawley & Geske, 2000) whose popularity may have peaked in the 1980s; however, refinements are still being made to the theory today (Malia, 2006), most notably by Pauline Boss (2002), whose work provides the framework for the present study. Before presenting Boss's articulation of family stress theory (i.e., the Contextual Model), it will be helpful to first explore the theory as it was originally conceptualized, also within the context of war-time deployment. This will give the reader a more robust understanding of how family stress theory, and, correspondingly, the nature of military service, has changed over the years.

Reuben Hill's (1949) ABCX model of family stress was among the first family stress models and remains the cornerstone of work thus far. His formulations came about as he worked with military family populations at the end of World War II. In this model, *A* represents the stressor event. In Hill's case, the significant stressor was the service member's departure from and subsequent return to the home. This factor then interacts with *B*, which represents the family's available resources at the time of the stressor or crisis-provoking event. Resources include the family's flexibility as an organization, coping behaviors, the strength and quality of relationships within and outside of the family, as well as economic and other factors (Hill, 1958). This *B* factor then interacts with the *C* factor, which represents the family's perception or definition of the event. This is the critical piece of family stress theory that is based in the conceptual framework of symbolic interactionism (LaRossa & Reitzes, 1993). It suggests that any given stressor event will not necessarily be viewed similarly among different families. In the case of reintegration, some may view it with anticipation and others with dread. That is, the same objective event is occurring but families will interpret it differently based on a variety of perceptual or *C* factors. Finally, the unique interaction of the *A*, *B*, and *C* factors produces the *X* factor, which is the outcome of the degree of crisis in the family in response to the stressor.

Hill's (1949) work on reintegration (though he did not use that specific term) is relevant to the present study. After analyzing data from 135 interviews that were conducted with families in Iowa who had a service member father drafted into the war, Hill found that adjustment to separation and reunion was determined by how well the family continued to provide for the basic needs of its members through complementary and mutually satisfying rearrangements of roles. Additionally, families who "closed ranks" while their service member was gone fared better during deployment, but suffered during reintegration. That is, those who perceived and acted as if the father was no longer a part of the family and solidified his exclusion from the family system did well while he was gone. However, once he returned, readjustment was more difficult than for those families who maintained "open ranks,"

realigning the power and authority, reworking the division of labor and

responsibilities, sharing the home and family activities with the father, renewing the husband-wife intimacies and confidences, catching up on one another's friends, resuming the father-child ties, bringing balance between husband-wife and mother-child and father-child relationships, picking up the plans made during separation, reworking and finally putting them into action. (Hill, 1949, p. 82)

Having maintained the father's "presence" in the family throughout the deployment, they were able to better incorporate him into family life once he returned; on the other hand, those who remained closed to the father during deployment and lived "as if" he were no longer a part of the family struggled to integrate him once he returned. Thus, in the previous illustration, perceptions (the *C* factor) about the crisis event (i.e., deployment—the *A* factor) and who was in or out of the family system interacted with the resources available to the family (the *B* factor; e.g., family flexibility) during the reintegration process to produce a particular outcome (the *X* factor). To this end, Hill singled out one factor, the *C* factor, as being particularly salient to the family's adaptation to stress. He concluded that "in the last analysis, the family's definition of the event would seem to be the determining factor in deciding whether or not the separation was a crisis" (Hill, 1949, p. 74). This focus on perceptions provides a thread of continuity with the CMFS articulated relatively recently by Pauline Boss.

In her conceptualization of family stress, which was the basis for this study, Boss (1992, 2002) still employs the prototypical family stress model created by Hill. However, she has refined some conceptual definitions of key terms and made some significant additions. Boss (2002) defines family stress as "pressure or tension in the family system—a disturbance in the steady state of the family" (p. 16). The stressor event (the *A* factor) refers to "an occurrence that is of significant magnitude to provoke change in the family system" (Boss, 2002, p. 47). The *B* factor, family resources, are "economic, psychological, and physical assets on which members can draw in response to a single stressor event or an accumulation of events" (Boss, 2002, p. 88). Perceptions still constitute the *C* factor, though Boss places more emphasis on this than Hill or others have done and also incorporates the importance of the family making adaptive meaning out

of a stressful situation. She prefers the use of the term perception over meaning “because it embodies both cognitive and affective (feeling) processes” (Boss, 2002, p. 59). Finally, while Hill defined the *X* factor of family crisis as a continuous variable reflecting the highest point of stress, Boss splits the *X* factor in two, resulting in the separate elements of family stress (which is continuous) and crisis (which is categorical). Crisis now refers to a situation in which there is “(a) a disturbance in the equilibrium that is so overwhelming, (b) a pressure that is so severe, or (c) a change that is so acute that the family system is blocked, immobilized, and incapacitated” (Boss, 2002, p. 63). Thus, the level of family stress ranges from low to high, while a family is either in crisis or is not.

Among the most notable advancements in family stress theory are Boss’s (2002) additions of the family’s internal and external contexts, which affect how families respond to stressful events. These contexts are, ostensibly, the focus of the present study. Conceptually, these contexts are like rings that surround the family’s stress management process (i.e., the nonlinear interaction among the *A*, *B*, and *C* factors). The external context refers to what is going on around the family, the things that, most likely, the family is unable to change, including a family’s history, economic factors, development, culture, and heredity (Boss, 2002). The internal context consists of family structure, psychology, and philosophy (Boss, 2002). Elements in either of these contexts can constrain or promote family functioning. Finally, it should be noted that there is fluidity in Boss’s conceptualization of family stress, such that boundary ambiguity, for example, is considered both a structural aspect of the family’s internal context and a perception (*C*) factor. Similarly, ambivalence is a feature of the family’s internal psychological context and a perception factor as well. Other contextual elements, like a family’s economic circumstances, can also be considered a resource (*B* factor). While one of Boss’s (2002) unique contributions to the literature is certainly the addition of contextual elements, these do not necessarily appear any more or less important in her Contextual Model than the ABCX features she has retained. In contrast to the preceding discussion that focused on the evolving thread of ABCX nomenclature as a means to provide the necessary context to how family stress models have changed over time, the present study

explicitly utilized the language of internal and external contexts of Boss's (2002) model.

Boundary ambiguity. Second, in her conceptualization of family stress theory, Boss (2002) has added the concept of boundary ambiguity, which "concerns relationships and processes based on who is perceived as in one's family and as being there for them, who is perceived as outside the family and as not being there, and who is perceived as partly in and partly out" (p. 97). Conceptually, it is both an element of the family's internal structural context as well as a perception (or *C*) factor. Operationally, it is a continuous variable that represents the interpretation of a situation in which there is ambiguous loss, which refers to a "loss that remains unclear" (Boss, 2002, p. 97) and involves ambiguity about someone's position in the family system, either when a family member is physically absent but psychologically present (common during deployment) or when a member is physically present but psychologically absent (common during reintegration; this is also called "ambiguous presence").

I propose boundary ambiguity can be a result of the service member or other family members perceiving one another as not being the same person they once were (i.e., psychologically absent). The service member may be changed by deployment (e.g., perhaps more emotionally labile or withdrawn), while other family members may have grown up (e.g., in the case of a teenager or younger child) or developed new skills and consequent increases in self-confidence (e.g., in the case of a spouse), all of which are changes that make family members somewhat unrecognizable to another. This creates uncertainty as to whether the family will function as it did prior to deployment and can characterize how the family views the service member or how the service member views individual family members. When boundary ambiguity is present, sociologically it means that "the family boundary is no longer maintainable, roles are confused, tasks remain undone, and the structure is immobilized" (Boss, 2002, p. 95). Individually, it means that "cognition is blocked by the ambiguity, decisions are delayed, and coping and grieving processes are frozen" (Boss, 2002, p. 95). In terms of the ABCX heuristic, as part of the *C* factor, boundary ambiguity mediates the relationship between the *A* factor (i.e., broader stressor of deployment which is assumed to create ambiguous loss, or of the service

member's return, assumed to create ambiguous presence) and the *X* factor of family stress (or functioning). In contextual terms, as a feature of the internal context, it would first be influenced by the external context (e.g., military factors) and in turn influence family functioning.

Boundary ambiguity has significant relevance for military families faced with the task of re-integrating their service member. Faber et al. (2008) are among the few researchers thus far to explicitly examine this construct in the course of reintegration (see also Baptist et al., 2011; Huebner et al., 2007). In their longitudinal, qualitative study of Reservists and select family members, Faber and colleagues found that boundary ambiguity was manifested in these families as confusion around the resumption of roles and responsibilities, in the communication about relationships and expectations, and the reserve service member's transition from soldier to civilian status. Thus, the family faced with the task of reintegration is one characterized by boundary ambiguity at least for some period of time (Baptist et al., 2011; Faber et al., 2008; Huebner et al., 2007). Details of these studies, as well as other literature connecting boundary ambiguity to family functioning, will be discussed in one of the sections that follows.

Ambivalence. Ambivalence, which "interferes with cognition and blocks the coping process" (Boss, 2002, p. 114), can result from situations involving chronic boundary ambiguity. In the post-deployment period, ambivalence stemming from the boundary ambiguity that is inherent to reintegration would impede attempts by the service member to make meaning of his or her experience and consequently inhibit family functioning. The current study will advance the family stress literature by drawing explicit attention to boundary ambiguity in military families and in connecting this experience with service member ambivalence within the larger process of family stress as outlined by Boss (2002).

Luescher (2004) broadly defines ambivalence as "polarized simultaneous emotions, thoughts, volitions, actions, social relations, and/or structures that are considered relevant for the constitution of individual or collective identities [being or potentially being] interpreted as temporarily or even permanently irreconcilable" (p. 36). This definition speaks to the phenomenon at micro and macro levels. As a strictly psychological phenomenon on the micro

level, as Luescher's (2004) definition entails, ambivalence refers to "the experience of contradictory emotions toward the same object" (Weigert, 1991, p. 21). The Swiss psychiatrist Bleuler first identified it as a psychological construct in 1910 (Luescher, 2004) and for years it remained most exclusively in the domain of psychiatry and mental health. Recent scholars, however, have begun to locate the experience of psychological ambivalence at the individual level within larger social structures, identifying connections between the two (Connidis & McMullin, 2002b). When conceptualized on the macro level, sociological ambivalence refers to ambivalence as a property of conflicting structured sets of social relations, the effects of which are worked out in social interaction. Boss (2007) even explicitly points out that her conceptualization of ambivalence is also sociological in nature vis á vis its emergence from an "ambiguous social situation" (p. 108). While the present study does not purport to test sociological ambivalence per se, it is helpful to reference this literature in order to more fully understand the ambivalences in social structures that create a potentially greater intensity of psychological or subjective ambivalence for the service member and his or her family, especially during reintegration.

The immediate focus in the present study is on psychological ambivalence since Boss (2002) has identified it as a variable related to family stress and, furthermore, it has yet to be assessed in the military family literature regarding reintegration. Still, it is important to understand how exactly psychological and sociological ambivalence intersect in the service member, an intersection that becomes more evident considering Segal's contention that the military and the family are both "greedy institutions" (Segal, 1986). Incidentally, the phrase "greedy institution" was first offered by Coser in 1974, who, eight years prior, was also one of the first to advance the concept of sociological ambivalence. In the present study, these connections come full circle. Service members (as well as their families) belong to the realms of military and family. However, both are in competition for the loyalty of the service member (Segal, 1986), which sets up ambivalence on a structural level that then trickles down to the interpersonal and individual levels. The sociological perspective maintains that ambivalence is not simply a subjective property, but a characteristic of relationships (Luescher, 2004).

Moreover, these two role sets are often contradictory for the service member. What would make him or her a good father or mother or husband or wife is not the same as what would make him or her an exemplary warrior. Once deployed, it would be easy for the service member to get out of step with family life. The transition back into the home for the service member (whether active or reserve component), then, is made more difficult because of these conflicting expectations based on role, especially if the separation was lengthy and if another deployment is imminent (Baptist et al., 2011). The service member and family may have difficulty connecting and adjusting yet again to one another if all are aware of an actual or even the possibility of an upcoming deployment (Chandra et al., 2011). Thus, as mentioned earlier, ambivalence may result when ambiguity exists around one's functional presence in either the military or family system. For example, the service member who excels at his job, but not at home, may start to believe he is less adept at the latter, and, because he finds a better fit at work, begin spending more time at there. This, of course, could prompt or exacerbate any mixed thoughts or feelings toward life at home.

Another nuanced example shows how sociological ambivalence may be demonstrated on the interpersonal level; the service member returns from deployment with certain ingrained patterns of response (e.g., hypervigilance, minimizing emotion) that suit him or her well while deployed (i.e., as military personnel), but can actively contribute to family dysfunction if those patterns persist. The Army's Resilience Training has modules designed specifically to address this domain or role adjustment on the micro level in terms of adaptations to traumatic stress (Adler, Bliese, McGurk, Hoge, & Castro, 2005). This training helps warriors identify those reactions to stimuli that may have saved lives in the field (e.g., tactical awareness, high cohesion with battle buddies), but that can be rather detrimental to close relationships once the warrior has returned home (e.g., hypervigilance, withdrawal, deeper relationships with fellow warriors than with one's spouse; Sayers, 2011).

Boss provides the theoretical connection between psychological ambivalence and family stress theory, which suggests, as stated previously, that ambivalence is a potential outcome of

boundary ambiguity; family functioning is compromised when family members are ambivalent and not clear on who is functionally in or out of the family system (Boss, 2002). A sufficiently high degree of ambivalence “immobilizes and blocks coping, decision-making, and other behaviors” (Boss, 2002, p. 115). In the CMFS (Boss, 2002), it is both an aspect of the family’s internal psychological context and a perception (*C*) factor that affects family functioning in response to stress. The ambivalent family member is frozen in his or her ability to make sense of stressful situations, which can impede problem solving, communication, and other elements of family functioning. For instance, a spouse may be ambivalent toward her newly returned husband, glad he is home but reluctant to begin relying on him once more for emotional support, especially if he is ambiguously present (i.e., physically present and mentally absent).

However, Boss emphasizes only one possible pathway of ambivalence—that is, from the perspective of the other family members to the focal member (in this case, the service member). Yet it is conceivable that the service member may also experience psychological ambivalence him or herself when perceiving boundary ambiguity in the family, which may then hinder personal coping and meaning-making of the situation. For example, the service member may be ambivalent about a spouse taking on new roles, especially if these new roles or responsibilities were preferred ones central to his or her identity. Thus, systemically, if there is any ambivalence from one or more family members toward the service member, it is likely he or she may experience this as well toward those same family members, both as a function of sociological ambivalence, which Boss expressly links with ambivalence as articulated in the CMFS (2007), as well as that psychological ambivalence which is natural to living relational systems (Kerr & M. Bowen, 1988; Whitchurch & Constantine, 1993). Greater service member ambivalence toward the family will then affect his or her ability to successfully accomplish the tasks of reintegration and likely lead to negative outcomes. While this construct certainly seems relevant to military families during reintegration, prior to the present study, research has yet to address it within a military population or otherwise meaningful way given its potential to make a significant contribution to family stress theory in terms of elucidating a possible mechanism by which stress

affects individual and family functioning.

Proposed conceptual model. The Contextual Model of Family Stress (Boss, 2002) provides a robust framework for understanding how contextual elements impact family functioning among military families after deployment. These elements may come predominantly from inside the family (e.g., poor marital or parent-child relationships) or out (e.g., service member's rank, combat exposure) and may have differential effects on a family. The CMFS also provides direction as to constructs that may link the experience of stress with the outcome of family functioning. In this case, the military family literature points to two phenomena—boundary ambiguity and service member ambivalence—as being a significant, but as yet untested, link in the process of family stress management. The conceptual model in Figure 1 depicts the conceptual model that will be tested in the present study.

According to Boss (2002), military-related features of the family's external context (such as rank, combat exposure, and component), should impact the family's internal context and family functioning. Thus, the military-related factors come first in the proposed model as they are assumed to be causally prior to the internal contextual features of boundary ambiguity and ambivalence. Likewise, boundary ambiguity is assumed to affect ambivalence (Boss, 2002) and is so located in the model. Based on their position in the model, military-related factors and boundary ambiguity are thought to directly affect family functioning, as well as indirectly through the constructs that follow. The indirect effects of the military-related context on family functioning are thought to run through boundary ambiguity and service member ambivalence, which both have to do with perception or cognition (i.e., the *C* factor) according to Boss (2002). On the other hand, the only avenue for indirect effects of boundary ambiguity is through ambivalence. While this does study does not purport to test the entirety of the CMFS (Boss, 2002), the inclusion of boundary ambiguity and service member ambivalence has rich potential to expand the knowledge of how and why some families respond differently to similar stressors. More broadly, this research also adds to the literature by helping to distinguish how external, military-related features and internal, structural and psychological features uniquely impact

family functioning. Each of these components of the proposed model will now be discussed in more detail, including what is and is not known from extant literature.

Literature Supporting the Proposed Model

Military-related factors. Military-related contextual factors include rank, cumulative length of deployments, component, combat exposure, and length of time home post-deployment. These belong to the family's external context and are thought to affect the family's internal context and, in turn, family functioning.

Rank. Rank, in general, can serve as a proxy for a number of socioeconomic stressors that can impact a family's functioning (Reger et al., 2007). In terms of its relationship to family dynamics, simply put, the lower the rank, the less income for the service member and family. Andres and Moelker (2011) report that higher rank was associated with more positive reports of parent-child separation during deployment. Lower rank has been associated with greater marital distress, possibly due to its other associations with lower pay, lower educational attainment, and younger partners with less marital and family experience (J. R. Anderson et al., 2011). Rowe, Murphy, Wessely, and Fear (2013) found that lower rank was associated with negative relationship status change in a sample of 5,133 U.K. service members, suggesting that those in lower ranks are more at risk for relationship dissolution. Another study found that husband's rank was a significant predictor of husband stress, but not that of spouses, during the period of reintegration (Allen, Rhoades, Stanley, & Markman, 2011). The authors suggest the greater power, status, and economic resources that go along with having a higher rank enable the service member to better compartmentalize work and family, which reduces work-family spillover; conversely, lower rank would entail greater spillover due to less power and fewer economic resources.

Mabe (2009) helpfully points out that rank can affect how a family responds to deployment in economic terms. Because of the lower pay of enlisted personnel, they may be more likely to have spouses who work outside of the home. Deployment may interrupt the spouse's ability to provide for the family in this way, especially if there are childcare arrangements to

consider or a temporary relocation to be closer to other sources of support. The connection between rank and socioeconomic stressors may also apply to those in the reserve component who often are reduced to one income during deployments, that of the reserve service member's military pay (Knox & Price, 1999).

Aside from purely economic factors, one study found that wives of lower-ranking service members had less knowledge of supports available to them (Marlowe, Van Vranken, Jellen, Knudson, & Segal, 1984), suggesting there may be multiple routes to the effect of rank on family functioning. Despite the lack of research around reintegration characteristics and processes, and given the aforementioned findings and the continuity of the deployment cycle (i.e., repeated deployments; Blaisure et al., 2012), there is reason to believe that lower rank would be associated with greater difficulty during reintegration for the entire family. Rank could also be related to boundary ambiguity; it could be that as a service member moves up ranks, he or she becomes more committed to that "second military family" than his or her own family, potentially leading to more time spent away from home or less psychological availability when spending time with other family members. Thus, in the present study, lower rank was conceptualized as a military-related contextual element associated with lower pay, lower education, less control over work, and a younger family, all of which may create a situation of limited resources that could interfere with successful family stress management and compromise family functioning.

Cumulative length of deployments. Military-related research continues to confirm that the cumulative length of one's deployments, another contextual factor, is a significant predictor of post-deployment family adjustment. Families can "carry the unresolved anxieties and expectations from the last deployment(s) with them along with the skills they gained" over to the next deployment (NMFA, 2005, p. 14). Thus, instead of conceptualizing military families simply entering phase after phase of the deployment cycle, Lester suggests the phrase "cumulative spiral of stress" (2012, p. 3) is much more accurate. Indeed, the longer a family is without one of its members, the greater accumulation of emotional stress and the longer it has to get used to his or her absence in terms of function and role replacement. With shorter dwell times in between recent

deployments, the family would not necessarily have to fully engage in the reintegration process, which would allow them the ability to preserve their deployment-related adaptations and leave their emotional stress unresolved. For this reason, once the service member does return for a lengthier or indefinite period, flexibility of the family may be impaired. Also, Boss (2002) suggests that the resources used in stress management accumulate, such as new social networks for the non-deployed spouse. As the time away from home increases, presumably the strength of those connections would increase as well, making a shift in them difficult once the service member returns, which would also contribute to stress and disrupted family functioning in the post-deployment period. All of the aforementioned reasons would suggest the longer a service member is away, the more difficult it may be for the family to delineate clear boundaries upon his or her return, given that the family may have developed a particularly stable routine not easily amenable to change. In the same vein, ambivalence may also be impacted if a service member had actually come to enjoy lengthy, multiple deployments and suddenly found himself back home, responsible for laundry and oil changes.

In a meta-analysis of the results of nine studies published between 2003 and 2010 regarding the effects of deployment on children under 18, White, de Burgh, Fear, and Iversen (2011) found that the cumulative length of deployments was associated with greater emotional and behavioral difficulties. Among children age six to 12, another study found cumulative length of deployments was associated with a greater risk for childhood depression and externalizing symptoms as measured by the Child Behavior Checklist (Lester et al., 2010). Additionally, these effects can persist as the family begins to work on reintegration (Chandra, Lara-Cinisomo, Jaycox, Tanielian, Burns, et al., 2010). Via telephone interviews with 1,507 non-deployed parents and children who had applied to Operation Purple camps, Chandra and colleagues (2010) found higher reports of caregiver difficulties during reintegration the more time the service member was away, leading the authors to conclude that resilience may indeed weaken over time. Using the Post-Deployment Reintegration Scale among a sample of more than 800 Army personnel at Fort Bragg who had served in Operation Iraqi Freedom (OIF) or Operation Enduring Freedom (OEF),

Beder, Coe, and Sommer (2011) found that a higher number of deployments was associated with service members' greater negative attitudes regarding one's family. Similarly, Rowe et al. (2013) analyzed data collected from 5,133 Army, Navy, and Royal Air Force members from the U.K. and found an association between time away from home and negative change in relationship status (e.g., from married to single). Moreover, another study of 4,234 military family members in the U.S. also found that family support for the service member's career begins to drop substantially between two to three years of cumulative deployment separations (ORP, 2012).

It should be remembered that deployment does not affect every military family in the same way. Surprisingly, using data from the personnel records of all U.S. service members in the last decade, Karney and Crown (2007) found that marital stability actually increased with greater overall time away, and was associated with a reduction of risk in marital dissolution. However, they did not include in their analysis couples that were married prior to 2001, suggesting that couples who married after 2001 may have been more prepared for multiple deployments than others, thus the higher rates of divorce reported elsewhere among military families (e.g., Chapin, 2011). While there obviously may be some variation in how families respond to greater cumulative lengths of deployment, in the present study, it was conceptualized as a contextual feature that would have an additive effect on the overall stress experienced by a family, likely impairing functioning.

Combat exposure. Research is mixed regarding the effect of deployment type upon family functioning during and after deployments. While a few studies show no relationship between service member combat exposure (i.e., the type of deployment), child adjustment (Andres & Moelker, 2011; Glenn et al., 2002), and other family outcomes, the majority of research suggests otherwise. Conceptual literature identifies combat-related deployments as a significant source of additional family stress and as being associated with greater risk and vulnerability in military families compared to those deployments that occur during peace-time (Cozza & Lieberman, 2007; Lincoln, Swift, & Shorteno-Fraser, 2008; MacLean & Elder Jr, 2007). Framed in terms of the CMFS, Wiens and Boss (2006) argue combat-related deployments will more adversely affect

families as a result of the high degree of ambiguity inherent in them, coming as a result of their unexpected onset and the greater uncertainty as to the safety and well-being of the service member.

Monson et al. (2009) reviewed research on military-related PTSD and intimate relationships and noted that combat exposure did not have a direct effect on family relationships during reintegration, but was still mediated by the partner's cognitive attributions, PTSD symptoms, and comorbid issues such as alcohol abuse or depression. Elsewhere, research with Vietnam and GWOT veterans has shown that the degree of combat exposure is a risk factor for PTSD symptoms (IOM, 2010; Koenen, Stellman, Stellman, & Sommer, 2003; Pietrzak, Johnson, Goldstein, Malley, & Southwick, 2009; Seal et al., 2009) as well as suicidality (Pietrzak et al., 2010). All of the aforementioned factors (e.g., substance use, suicidality) would certainly negatively impact family functioning. A recent study sampling Operation Desert Storm veterans found that combat exposure was linked to greater PTSD symptoms which, in turn, were linked to poorer family adjustment (Taft, Schumm, Panuzio, & Proctor, 2008). The authors did note a direct effect of combat exposure on family adjustment for women in their sample but, overall, it appeared to have an indirect effect on functioning via the withdrawal or numbing and arousal symptom clusters of PTSD. Similarly, Allen et al. (2011) surveyed 300 Active Duty Army couples with a civilian wife and Army husband and found that the degree of the service member's combat exposure was a significant predictor of both husband and wife stress during the past year. Finally, using the Post-Deployment Reintegration Scale with a sample of over 800 military males and females who had experienced at least one deployment, Beder et al. (2011) found that service members with combat exposure more highly endorsed negative attitudes related to family reintegration than those without combat exposure.

Based on prior research, it seems the degree of combat exposure or type of deployment presents additional risk for both service members and their families. The degree of combat exposure also has implications for boundary ambiguity and ambivalence, though these have yet to be tested empirically. For instance, it is feasible that some families, much like in Hill's (1949)

classic work, knowing their service member is in a particularly volatile area or has a military occupational specialty (MOS) that would tend to put him or her in harm's way, may err on the side of closing ranks and psychologically shutting him or her out of family life, making boundaries that much more ambiguous upon the service member's return. Additionally, having experienced combat firsthand (and corresponding surges in adrenaline; Department of the Army, 2012) could translate into greater struggle with the mundaneness of life back home, or, alternatively, if one has experienced significant trauma, he or she may be more ambivalent about the deployment experience in terms of its personal or global benefit.

In the present study, combat exposure represents an external contextual feature that could affect both the service member and his or her family during the reintegration process. The service member may be more directly affected in terms of the potential for traumatic stress symptoms that may make reintegrating more difficult, and the family may be adversely affected as a result of the heightened ambiguity and uncertainty experienced during the course of the actual deployment that may then be carried over into the post-deployment period. Overall, this study was unique in testing the direct relationship (i.e., total effects upon) of combat exposure to family functioning, since most studies assess combat exposure's relationship with PTSD or include combat exposure as a control variable.

Component. A growing body of research continues to identify the differences between how active versus reserve component service members and their families experience reintegration. Members of the reserve component (i.e., National Guard and Reserve) are often at greater risk than their active duty counterparts of developing PTSD symptoms, potentially as a result of having civilian roots that make the transition to war fundamentally more stressful than that experienced by full-time personnel, among other factors (Milliken, Auchterlonie, & Hoge, 2007; Seal et al., 2009). Given the geographic dispersion of many reserve component families, Wiens and Boss (2006) propose that they are more frequently alone and without unit affiliation, which could lead to deficits in social support and greater risk for maladjustment. Similarly, Guard and Reserve families have indicated a belief that others could not understand their experiences

unless they too had experienced the deployment (or return) of a loved one (Lapp et al., 2010); given their geographic dispersion and reduced contact with fellow military, such a belief may make these families more isolated and vulnerable, exacerbating any problems related to family functioning. Various researchers suggest reserve families are also less experienced when it comes to military life and may have more challenges utilizing military health care and other benefits or resources (Chandra, L. Martin, et al., 2010). Children in reserve families have also been shown to lack the support networks attuned to the transitions and issues of military life that are more common among the Active component (Chandra, L. Martin, et al., 2010). Finally, Faber et al. (2008) found that their sample of reservists experienced boundary ambiguity in terms of a lack of clarity around who does what in the family (i.e., roles and responsibilities), which can lead to the experience of ambivalence, as a result of the transition back into the civilian workplace among other factors. The social isolation of Guard and Reserve families, their unfamiliarity with military health-related and other supports, and their straddling of the military and civilian worlds creates a number of stressors and resource deficits that have the potential to negatively affect family functioning (Boss, 2002).

Length of time home. Overall, family functioning has been shown to improve the longer a service member has been home after his or her last deployment (MacDermid, 2006). This relationship is consistent with the CMFS (Boss, 2002), which explains the link as a function of boundary ambiguity. More specifically, Boss (2002) suggests that boundary ambiguity increases around the time of transitions, when members are entering or exiting the family system. Aside from changes in development (e.g., a child becomes an adolescent who can take on more responsibility), it is otherwise unknown how boundary ambiguity may shift over time. Nonetheless, this obviously characterizes the military family welcoming home the physical presence of the formerly deployed service member. In support of the idea that boundary ambiguity coincides with entrances into and exits out of the family system and that family functioning should improve with time, Faber et al. (2008) found that boundary ambiguity eventually decreased after the reservists in their sample had returned to work for several weeks.

This suggests that, for reservists at least, getting back into a predictable, familiar routine can help reduce boundary ambiguity and, in turn, help both the service member and family with the tasks of reintegration. By extension, if ambivalence is indeed related to boundary ambiguity, it may be that lengthier time home could also be associated with resolution or a decrease in ambivalence. To my knowledge, there is no research that identifies any similar timeline for active component military families with respect to boundary ambiguity and reintegration, nor is there any other military research addressing changes in the course of ambivalence over time.

In order to better understand the effect of time home on the process of reintegration, more longitudinal research will have to occur. The Military Family Research Institute conducted one such longitudinal, qualitative study with 16 Army Reservists, 13 spouses or partners, and seven parents (MacDermid, 2006). Just less than half of those interviewed indicated some sort of a “honeymoon” period, and those who did indicated the lowest levels of well-being between four and nine months after the service member’s return home. This is consistent with one other cross-sectional study in which service member endorsement of guilt and anger/alienation increased between four and eight months post-deployment (Adler et al., 2011). Milliken et al. (2007) also found an increase in PTSD symptoms reported among reserve component service members between three and five months post-deployment. Thus, there is burgeoning empirical evidence for what appears to be a delayed period of increased difficulty during reintegration for at least some portion of military families. However, more than half of MacDermid’s (2006) sample reported a general linear pattern of adaptation during the one year following the deployed member’s return; the longer the service member had been back home, the greater his or her well-being and presumably, family functioning overall. A third pattern was indicated by a minority of the sample, characterized by fairly positive well-being but with much greater variability throughout the year, what MacDermid calls the “bounce” pattern (2006).

Unfortunately, existing research has yet to specify factors that may explain the variation in these patterns of reintegration and well-being. Nonetheless, such evidence (e.g., Faber et al., 2008; MacDermid, 2006) suggests that, while there is variation across families, overall, individual

and family well-being improves the longer the service member is home. Despite the glaring lack of empirical work regarding this question, conceptual literature emphasizes the importance of patience and “going slowly” when it comes to reconnecting as a family (Bowling & Sherman, 2008; Lapp et al., 2010), further implying that the longer period a family has together, the more improved functioning they will demonstrate. Thus, it is thought that healthier, more adaptive patterns of family functioning will emerge the longer a service member has been home after his or her last deployment. The present study’s inclusion of service member ambivalence may lend more nuance to the relationship between length of time home and family functioning, providing much needed research in this area.

Boundary ambiguity. Boss and J. Greenberg (1984) define boundary ambiguity as “a state in which family members are uncertain in their perception about who is in or out of the family and who is performing what roles and tasks within the family system” (p. 536). According to the CMFS (Boss, 2002), boundary ambiguity emerges from a particularly long-lasting or severe sense of ambiguous loss, which refers to a situation in which there is ambiguity around the presence or absence of a family member in the family system (Boss, 2002). Theoretically, boundary ambiguity refers to a structural situation in the family’s internal context and entails the perception (*C* factor) of a lack of clarity about who is in the family, on whom one can depend, and so on. For instance, immediately after the service member’s return, a spouse may wish to transfer responsibilities back to him or her because, prior to deployment, he or she reliably took out the trash or paid the bills or whatever the particular task may have been. If the service member is unwilling or unable to carry out those responsibilities, then there is ambiguity around his or her functional presence in the family system. Alternatively, if the deployed parent returns and expects his or her partner to relinquish responsibilities but the partner does not, then the service member may wonder about his or her own place or role in the family system (e.g., if the partner now takes care of a task that was once in the service member’s purview), thus contributing to the experience of boundary ambiguity.

Before reviewing the three qualitative studies that have explicitly looked at boundary

ambiguity in reintegrating military families, it will be helpful first to explore another theoretical argument to justify the link between boundary ambiguity and family functioning. Specifically, Olson's Circumplex Model (Olson, Sprenkle, & Russell, 1979) posits that family functioning rests upon two dimensions—adaptability and cohesion. Cohesion refers to “the emotional bonding members have with one another and the degree of individual autonomy a person experiences in the family system” (p. 3). Olson and colleagues argue that cohesion depends, in part, on the boundaries in the family system; with clear boundaries comes optimal cohesion. Relatedly, overly rigid or diffuse boundaries lead to overly low or high extremes of cohesion. When boundaries are diffuse and there is enmeshment between subsystems, there is ambiguity as to the position of others in the family system. For example, if dad comes home to see mom and daughter enmeshed, surrounded by a rigid boundary that impedes communication and effectively shuts him out, he may wonder about his place in the family, to whom will he turn for support, and the like (Minuchin, 1974). As long as these questions are unclear, family functioning is compromised. Thus, the Circumplex Model (Olson et al., 1979) and the Contextual Model (Boss, 2002) provide theoretical justification for the idea that boundary ambiguity (or conversely, clarity) is related to existing family functioning.

The first military-specific study to address boundary ambiguity was conducted by Huebner and colleagues (Huebner et al., 2007) who conducted focus group interviews with 107 youth attending a camp for military youth, all of whom had experienced the deployment of a loved one. Youth identified challenges regarding roles and responsibilities during both deployment and reintegration, which the authors connected to boundary ambiguity. Adolescents often had to surrender various responsibilities upon the service member's return, “adding confusion to their place in the family system” (Huebner et al., 2007, p. 119). Thus, the authors concluded that reunion and reintegration was more difficult for these youth than was the physical absence of the deployed parent. Moreover, most of the youth reported that the deployed parent “was not aware of the changes [that occurred at home during the deployment], expecting everything to be the same as it was when he or she left” (p. 118). Such a mismatch between the expectations of the service

member and other family members alone can leave one in doubt about his or her functional position in the family, resulting in boundary ambiguity. Finally, the study also identified that confusion regarding how youth should behave at home came from the deployed parent failing to recognize and appreciate the youth's growth and maturity while he or she was away. In effect, the status of the youth was elevated during deployment, but this was taken away once the service member returned, leaving much doubt about who was to do what around the home and producing threats to family functioning as the youth struggled with re-accepting the deployed parent into a parental role. While Huebner and colleagues' study does not address boundary ambiguity as perceived by the service member parent, it is reasonable to conclude that the parallel was experienced by the deployed parent and that resuming one's parental responsibilities was likely an attempt to manage such ambiguity, albeit one that was met with a negative reaction by the youth.

In the second study, Faber et al. (2008) conducted qualitative interviews of 16 Army reservists and 18 family members, however only half of the reservists were married, which limits the generalizability of their findings. Interviews were conducted at seven time points over the course of the year following the reservist's return from deployment. They found a number of families endorsing the experience of boundary ambiguity; in particular, the ambiguous presence of the reservist. This is a term used by Faber et al. (2008) to refer to "physical presence with psychological absence" (Boss, 2002, p. 99). The authors identified boundary ambiguity as centering around three issues: resumption of roles and responsibilities, relational communication and expectations, and the transition from soldier to civilian. Spouses were reluctant to ask their service member to resume their pre-deployment roles, not knowing if he or she was ready; service members themselves were unsure how to participate in the home, as they did not want intentionally to upset the family's new routines. Couples struggled to communicate openly with one another after having grown accustomed to communicating in a very guarded and closed manner (e.g., short phone calls of spotty quality in which only limited topics were discussed so as to not cause unnecessary worry in the other partner). Finally, some of the reservists had a difficult time "letting their guard down" after deployment and spouses were troubled when their service

member “did not seem the same psychologically” (Faber et al., 2008, p. 227). Faber and colleagues suggest boundary ambiguity was affected by returning to work and personal characteristics, though they do not go into detail as to what these are. They also did not address the concept of ambivalence, which the CMFS (Boss, 2002) would suggest arises from the experience of boundary ambiguity, or link it to family functioning. For most of their sample, Faber and colleagues found a reduction in boundary ambiguity around six weeks following the reservist becoming employed once again. This study not only lends support to the notion that boundary ambiguity is present in reservist families, but also that it would be greater in these families compared to those of the active component, since the former face the additional challenge of reintegrating into civilian employment.

Finally, Baptist et al. (2011) conducted interviews with 12 male service members, mostly active duty, and 18 spouses. While their study was not theoretically situated in boundary ambiguity or ambiguous loss theory like the two aforementioned studies, boundary ambiguity was brought in during the discussion to help make sense of the results. The authors pointed out that many wives in their sample were reluctant to relinquish new roles and responsibilities to their service member husbands given the likelihood of another deployment. Additionally, the acquisition of new skills made it more difficult to become dependent once more upon their husbands and that overall “members of military marriages appeared to be uncertain of what the new rules were post-deployment” (Baptist et al., 2011, p. 211). Thus, based on these findings, boundary ambiguity is a likely outcome when a spouse’s acquisition of and desire to maintain enjoyable new roles and responsibilities is met with opposition by the service member who insists upon a return to pre-deployment functioning. Instead, a novel situation is created for the reintegrating family that requires negotiation in order to optimally function as a family.

While the studies on boundary ambiguity in military families certainly add to the literature, there are limitations. None of these studies focused exclusively on reintegration, as the present study does. Methodologically, since data for these studies were gathered via focus groups or individual interviews, they have small samples that can prevent generalizability to larger

populations. The present study will address this gap by quantitatively assessing the manifestation of boundary ambiguity in reintegrating families across a larger and more varied sample of service members. Moreover, two of the studies sampled participants during the earlier part of the Global War on Terror; thus it could be that the present study may reveal differences based on greater cumulative length of deployments than was possible more than six years ago. Finally, regarding substantive limitations, these studies did not directly address how the experience of boundary ambiguity and its possible consequences (e.g., ambivalence) fit in to predictions of overall family functioning; this study attempted to fill these gaps.

Ambivalence. As mentioned earlier, ambivalence is a multifaceted phenomenon that has subjective, emotional, attitudinal, as well as sociological dimensions (Luescher & Pillemer, 1998). One can be ambivalent about any number of things, including one's family relationships and deployment experiences, both of which are highlighted in the present study. Ambivalence in family relationships during reintegration may manifest as mixed feelings toward one's spouse or children. A service member may be surprised to see that life continued in her absence and may respond with hostility or anger toward loved ones. The warrior may also simultaneously love but also resent his family if he perceives them as less than understanding when it comes to his need for patience in resuming responsibilities around the home.

Deployment-related ambivalence, on the other hand, may entail conflicting or contradictory thoughts, feelings, and evaluations related to one's overall deployment experience. For example, in a time of war, moral conflicts are common among returning service members, many of whom are forced by virtue of their post to witness the loss of life or take someone else's life. Indeed, many warriors thus struggle with guilt over their combat experiences (Matsakis, 2007). Thus, deployment-related ambivalence is concerned with the service member's evaluation of his or her deployment-related experiences. Other considerations in deployment-related ambivalence are how the benefits of deployment compare to the potential for death, injury, or other chronic ailments. Is a service member better or worse off for having experienced military deployment? These are the kinds of questions with which deployment-related ambivalence is

concerned. While this kind of ambivalence does not have the service member's family as its object, it is nonetheless assumed to be related given literature demonstrating links between the family and military realms (for an example from the work-family spillover literature, see Grzywacz, Almeida, & McDonald, 2002).

Family stress theorists like Boss and Patterson agree on the utmost importance of making meaning (*C* factor) in adapting to family stress (Boss, 2002; Patterson & Garwick, 1994) and it is precisely here where psychological ambivalence (i.e., regarding one's family or deployment) may be most detrimental to family functioning and thus critical for understanding in military families. The polarization of positive and negative attitudes toward a subject (e.g., family, deployment) may result in a sort of paralysis of meaning-making abilities, leaving the individual unable to make sense of life experience and prohibiting the formation of a "coherent narrative" that is ultimately necessary for intra- and interpersonal well-being (Adler et al., 2011; Siegel, 2001, 2007). However, an empirical link between psychological ambivalence, which simply refers to "the experience of contradictory emotions toward the same object" (Weigert, 1991, p. 21) and military family functioning has yet to be established. One must look outside of military family research to explicitly connect ambivalence and family functioning. For instance, Wong, McElwain, and Halberstadt (2009) studied 55 two-parent families from the Southeast U.S. with a child in kindergarten and found that ambivalence in the marital relationship predicted heightened mother and father negative expressiveness in the family, which would most certainly affect family functioning. Elsewhere, a longitudinal study tracking 168 newly wedded couples through 13 years of marriage found that the emergence of a high enough degree of ambivalence was associated with eventual marital decline and dissolution (Huston, Caughlin, Houts, Smith, & George, 2001).

While there is a smattering of explicit evidence for the link between ambivalence and family functioning in community samples, ambivalence is indeed implicit in a handful of military family studies. Adler et al. (2011) surveyed 509 U.S. Army soldiers who had recently returned from combat in Iraq and found service members reporting an increase in negative emotion between four and eight months post-deployment concurrent with a general increase in

endorsement of the perception that deployment had a positive impact over time. These results support the idea that ambivalence about one's overall deployment experience is indeed present among reintegrating service members. Furthermore, Adler et al. (2011) propose a model of service member adaptation to the transition from deployment. One of their proposed moderators affecting the relationship between deployment experiences and post-deployment quality of life is the ability of the warrior to form a coherent narrative about his or her experience. As mentioned previously, the experience of ambivalence, both felt and implicit, would be an obstacle in this process (e.g., Siegel, 2001).

It should also be noted that ambivalence is also an inherent part of any relationship in terms of the dynamics of separation and closeness or autonomy and dependence (Kerr & M. Bowen, 1988). Conceptually, this subjectively-experienced and relationally-oriented ambivalence must be negotiated during reintegration, though there is rather limited empirical evidence of this phenomenon. This kind of ambivalence (i.e., subjective and relational) is implicit in recent research conducted by Karakurt and colleagues (2013) around couples' experiences of reintegration. For instance, their qualitative research yielded two themes relevant to the present discussion—intermittent idealized closeness and a shift from independence to interdependence. The former entails the ebb and flow of emotional closeness in a relationship. This dynamic was manifested in behavioral oscillations reflecting positive and negative subjective evaluations of the participant's partner and the relationship. The authors contrast "idealized" with "realistic" closeness, which takes into account the simultaneous presence of positive and negative evaluations toward a more accurate picture of the relationship. I propose the underlying dynamic of ambivalence (or lack thereof) also played itself out in the latter theme whereby a number of the couples had to renegotiate interdependence. This process invariably involved competing decisions regarding the needs of oneself, one's partner, and the relationship. It could be that, as the balance of ambivalence tilted in one direction or the other, individuals would then demonstrate similar oscillations between independence and interdependence until a consensus was reached (Breunlin, 1989). Thus, it is likely that service members struggle with being drawn toward and repelled by

their close relationships, though no studies to date have sought to empirically verify this particular type of ambivalence (i.e., family-related) as well as determine its role in the family's adaptation to stress.

Sociological aspects of psychological ambivalence (i.e., the interaction of disparate social structures and one's position within them) are also evident in the limited literature on service member relationships with children. Willerton et al. (2011) conducted focus groups with service member fathers to learn more about their relationship with their children. Fathers in this study expressed explicit awareness of cultural expectations around fathering and how those conflicted with what fathers could actually do or provide given the constraints of a military career. In other words, there is a conflict, not easily reconciled, between these individuals' status of military service member and father. The status of the former requires parental separation, while that of the latter requires close involvement. The former eschews experiencing emotion, the latter thrives on it. Thus, while the limited military family literature speaks of ambivalence on the part of the family toward the service member, the concept of ambivalence appears multidirectional and, as such, can apply to the entirety of a service member's family. In other words, it is appropriate to speak of the service member's experience of ambivalence toward his or her family, not just the other way around, as well as the effects of deployment-related ambivalence on family relationships.

No research to date has empirically addressed the service member's experience of psychological ambivalence regarding either his or her family or one's deployment experiences and the function both play in family adaptation to the stress associated with deployment and return. Including the ambivalence variables in the current study's model thus added to the knowledge base about military families.

Family functioning. Family functioning is conceptualized in the present study according to the McMaster Model of family functioning (Epstein, Baldwin, & Bishop, 1983). The McMaster Model maintains that "a family's structure and organization are important factors that strongly influence and determine the behaviour of family members" (I. Miller et al., 2000, p. 169).

Additionally, “the transactional patterns of the family system strongly shape the behavior of family members” (I. Miller et al., 2000, p. 169). These tenets dovetail with Boss’s (2002) concept of boundary ambiguity, which has to do with the perception of family structure and organization and the ensuing experience of ambivalence and action that may follow. The McMaster Model breaks down family functioning into six separate dimensions deemed most relevant for clinical research: problem solving, communication, roles, affective responsiveness, affective involvement, and behavior control. Problem-solving refers to the “family’s ability to resolve problems at a level that maintains effective family functioning” (I. Miller et al., 2000, p. 170). Affective involvement involves the family’s ability to show interest in and value each family member (I. Miller et al., 2000). Lastly, behavior control entails how the family handles physically dangerous or social situations, or “situations which involve meeting and expressing psychobiological needs or drives” (I. Miller et al., 2000, p. 172). Roles, affective responsiveness, and communication will be defined in the discussion that follows, as these processes are most salient to reintegration.

Qualitative and conceptual literature have identified a number of processes and phenomena common to military families experiencing reintegration that are related to family functioning. At the top of the list in terms of frequency and perhaps difficulty (Baptist et al., 2011) is the redistribution or renegotiation of roles and responsibilities for parents (Faber et al., 2008; Wood et al., 1995) as well as youth (Huebner et al., 2007; Mmari, Roche, Sudhinaraset, & Blum, 2009; Ternus, 2010). The McMaster Model defines family roles as “the recurrent patterns of behaviour by which individuals fulfill family functions” (I. Miller et al., 2000, p. 171). The initial separation that accompanies deployment forces families to redistribute responsibilities to maintain family functioning. Even though the family is missing one of its members, children still need a ride to school, bills need to be paid, laundry needs to be done, and the trash needs to be taken out. Spouses often juggle multiple new responsibilities in their service member’s absence, and one or more children may also find themselves being delegated a task that used to be taken care of by the deployed parent.

At times, families may discover better ways of doing things or spouses will gain new skill

sets and a sense of independence (Gambardella, 2008). Families can often surprise service members with how well they are faring during deployment, which then affects their functioning during reintegration. Service members may underestimate how well or adaptive their spouses and children are during their absence (Andres & Moelker, 2011), which could presumably heighten the disconnect between their expectations and reality upon their return. This situation could easily lead to conflict if the service member desires to resume his or her pre-deployment roles (Gambardella, 2008). However, service members often struggle with feeling like an outsider upon their return, the banality of “regular” life as opposed to war, and may feel easily overwhelmed if pushed to do too much too soon (Bowling & Sherman, 2008). Successful negotiation of the service member back into the family as well as the family’s related adjustment requires flexibility and effective communication (Bowling & Sherman, 2008).

Communication is also frequently highlighted in military family literature, defined “as how information is exchanged within a family” by the McMaster Model (I. Miller et al., 2000, p. 170). Verbal communication, in particular, can suffer in the home especially if the service member has post-traumatic stress symptoms or if there is a lack of clarity around what should be shared regarding one’s combat experience, which can also affect the non-deployed spouse’s distress (Campbell & Renshaw, 2012), leading to the creation of a feedback loop that only intensifies the service member’s symptomology (Monson et al., 2009). The presence of PTSD in the service member is overwhelmingly associated with poorer functioning for both spouses or partners and children; “avoidance of trauma-related stimuli and emotional experiences” can create or exacerbate deficits in communication (Dekel & Monson, 2010, p. 305). Troubles with communication, lower intimacy, and parenting disagreements can then lead to marital conflict (Palmer, 2008) and compromised family functioning.

Affective responsiveness is defined in the McMaster Model as “the ability of the family to respond to a range of stimuli with the appropriate quality and quantity of feelings” (I. Miller et al., 2000, p. 171). Strong emotion expressed by any particular member must also be managed if a “new normal” and optimal functioning is to be reached (Bowling & Sherman, 2008); otherwise,

emotional cohesion in the family can suffer as displays of strong emotion could threaten trust and feelings of closeness (Olson, 2011). Additionally, couples will need to re-create intimacy in their relationship, learning how to be interdependent once more and relying on one another as sources of social support (MacDermid et al., 2008). This process is often hampered by the emotional constriction that occurs for all parties during deployment.

Service members may reduce their emotional experience to anger during deployment or even numbness; family members back home may deal with their loneliness by also downplaying their emotions. While this may be protective during deployment, it can be destructive to family relationships if maintained once the service member is home. Also, during deployment, the at-home caregiver may enlist one of his or her children as a confidant (Card et al., 2011), which could have a temporary effect of strengthening that relationship. However, depending on the content, intensity, and duration of the confidant relationship, there could be detrimental consequences during reintegration should one or the other family members not want to give up that role. The service member may see the closer relationship between the spouse and child and may resent such closeness or perceive a degree of unwelcomeness (Papernow, 2008). Such an event would reverberate throughout the family system, affecting overall family functioning with particular impacts on the marital and parenting subsystems.

Generally, researchers seem to conclude that, historically, the majority of military families weather separation and reintegration fairly well (Yeatman, 1981). However, there is certainly some quantitative evidence of distress and potentially impaired functioning in military families as one or more family members may have fantasies about what reunion and reintegration will be like that subsequently get shattered (Amen et al., 1988). Specifically, among a recent sample of 97 Guard soldiers who had returned from deployment to Iraq or Afghanistan, 74% expressed concern about getting along well with their partner and 69% of parents in the sample were concerned about their relationship with their children (Khaylis, Polusny, Erbes, Gewirtz, & Rath, 2011). Sayers et al. (2009) sampled 199 Iraq or Afghanistan veterans referred for behavioral health evaluations, 75% of whom indicated some degree of family readjustment problems with

66% indicating the frequency of the problem was weekly. Fathers also reported difficulties in readjusting to post-deployment family roles.

Overall, then, research suggests some families fare reintegration reasonably well and are able to reach a “new normal” of post-deployment functioning, while others tend to struggle with the transition. It would appear that military-related factors such as rank, component, combat exposure, cumulative length of deployments, and length of time home may have something to do with distinguishing these two groups, but more conclusive research is needed to account for their effects on family functioning. Furthermore, few studies have used standardized, global assessments of family functioning such as the Family Assessment Device (Epstein et al., 1983) to measure how well reintegrating families are doing. Given both the paucity of studies with family functioning as an outcome variable and a failure to employ similarly robust measures when family functioning is accounted for, it appears this and other well-validated measures of family functioning are under-utilized with the current cohort of service members returning from deployments to Iraq, Afghanistan, and related areas. Their use would enhance our knowledge of how well these families are functioning in the post-deployment period, help us understand how family function varies according to a number of different internal and external factors, and provide greater clarity in terms of targets for intervention. This study will help fill these gaps.

The Present Study

A variety of stressors confront military families during the post-deployment period as they try to come together once again as a family system. How families handle reintegration has long term consequences for individual family members as well as service members’ readiness and likelihood of retention in the military (Rosen & Durand, 1995; Schumm et al., 2001). However, little is still known about how service members and their families are influenced by external factors associated with military deployment (e.g., combat exposure, cumulative length of deployments). Moreover, there is limited research on mechanisms that may help explain the relationship between stress and family functioning, such as boundary ambiguity (e.g., Faber et al., 2008; Huebner et al., 2007) and service member ambivalence, both of which are likely given the

competing demands of belonging to the “greedy institutions” (Segal, 1986) of the military and the family. Service member ambivalence, especially, has gone unaddressed in the literature, despite predictions from multiple theoretical perspectives that it would have a bearing on family functioning during reintegration (Wiens & Boss, 2006). The present study attempted to address these gaps, as well as provide a test of the ability of boundary ambiguity and ambivalence to explain variation in family functioning over and above that predicted by either demographics (such as age, race, sex, etc.) or military-related factors, thus indicating potential mechanisms that may buffer or exacerbate the effect of military-related stress on family functioning.

As referenced previously, research questions for the present study include the following: To what extent do features of a family’s external (i.e., military-related) and internal (i.e., boundary ambiguity) contexts predict family functioning in the post-deployment period? Additionally, to what extent does service member ambivalence also predict family functioning when controlling for other factors? Specific hypotheses for the current study are as follows:

Hypothesis 1: Controlling for demographic characteristics (i.e., age, sex, race, length of marital relationship, and number of children), military-related factors will significantly contribute to variation in family functioning.

Hypothesis 1a: Enlisted service members will report poorer family functioning than officers.

Hypothesis 1b: Service members in the Guard or Reserve will report poorer family functioning than Active Duty personnel.

Hypothesis 1c: Service members whose last deployment was combat-related will report poorer family functioning than those whose deployment was not combat-related.

Hypothesis 1d: The length of time home will be positively related to family functioning.

Hypothesis 1e: The cumulative length of deployments will be negatively related to

family functioning.

Hypothesis 2: Controlling for demographic characteristics and military-related factors, boundary ambiguity will negatively and significantly predict family functioning.

Hypothesis 3: Controlling for demographic characteristics, military-related factors, and boundary ambiguity, ambivalence will significantly contribute to variation in family functioning.

Hypothesis 3a: Deployment-related ambivalence will be negatively related to family functioning.

Hypothesis 3b: Family ambivalence will be negatively related to family functioning.

Figure 2 depicts the individual variables in theoretically-specified blocks or models that were analyzed. Utilizing the CMFS (Boss, 2002) as a guiding framework, this study attempted to account for the influence of internal contextual features of boundary ambiguity and ambivalence over and above that of external, military-related contextual factors on the outcome of family functioning.

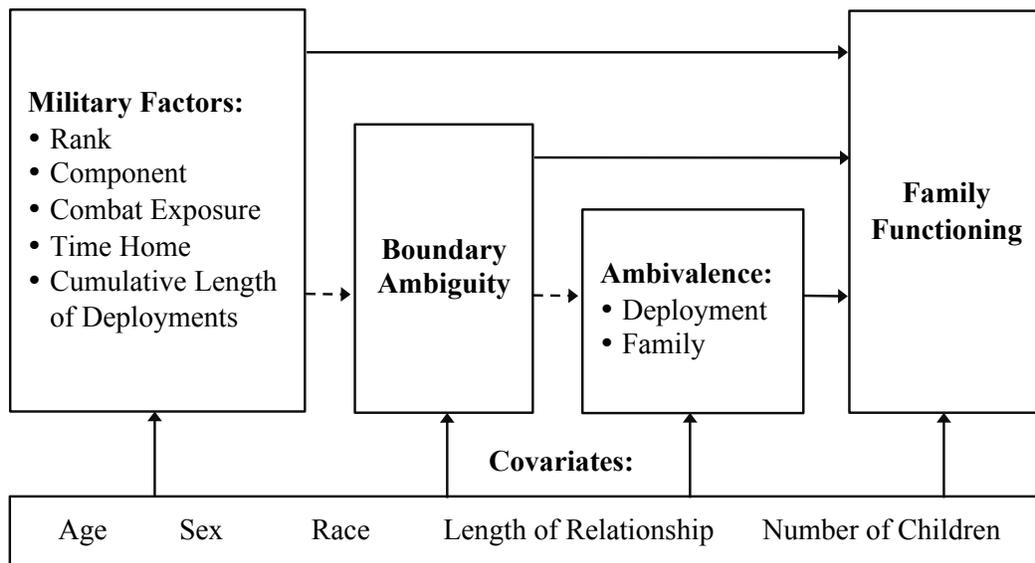


Figure 2. Conceptual Model with Covariates

Chapter 3

METHODS

Design Overview

Secondary data analysis. The present study is a secondary data analysis. Hofferth (2005) identifies a number of strengths and weaknesses associated with the use of secondary data. Strengths include access to a broader population than may be available given the limited resources of a novice researcher. Similarly, secondary data often affords a more robust, diverse sample. In the present study, service members across multiple branches and components had the opportunity to complete the survey instrument. This is less common in current military family literature, as branch, installation or program location, or mental health issues often delimit the samples of most studies. Another strength of secondary data analysis is thorough and efficient use of existing data. Many institutional review boards consider military families to be a vulnerable population; therefore, ethical research would suggest mining existing data sets for as many research questions as possible in order to reduce the chance of unnecessarily exposing these families to researchers.

On the other hand, in secondary data analysis, there may be little congruence between the research questions posed and what is actually available in the data. This limits what the researcher is able to find out and he or she must often adapt the line of inquiry to the available data. Second, there could be issues with measurement, such as the use of scales with poor psychometric properties or poorly defined variables (Hofferth, 2005). In the present study, the survey instrument experienced a number of reviews and pilot testing before it was officially launched in late summer 2012. It was especially important that its specific measures be parsimonious. The funding organization requested a variety of data related to family functioning, individual family member well-being, and program needs assessment; as such, the survey became a lengthy one. Additionally, this consideration had to be weighed against the desire to not make the survey a burdensome task to participants.

Origin of the data. The data for this study came from the Family and Community Research Lab under the direction of Dr. Lydia Marek at Virginia Tech. The larger study from

which these data were drawn was funded by a grant from the Operation: Military Kids (OMK) collaborative, which was launched in 2005 to provide support to geographically dispersed children experiencing the deployment of a parent and is backed by the Departments of Defense (in particular Army Child, Youth, and School Services) and Agriculture (in particular, Cooperative Extension/4-H; Huebner, 2009). When survey efforts first began, 49 states plus the District of Columbia participated in the OMK program. In the summer of 2011, Dr. Marek was commissioned to conduct a study of reintegrating military families. The particular focus of this study, which generated the data for this analysis, was a needs assessment and general program evaluation, as funders wanted to know generally what were the needs of these families, what programs were available to them and were being accessed, how helpful they were, and how they could be improved. As a member of the Family and Community Research Lab, I participated in the development of the larger study from its inception.

Sample

The larger study used convenience sampling to gather data from service members and their spouses or partners and children attending events affiliated with the Operation: Military Kids (OMK) program; only data from service members are analyzed in the present study. Eligible service members were those who met inclusion criteria of having experienced at least one deployment and were still currently serving in the military. Additionally, given that a wide variety of service members completed the survey, including at least one whose last deployment was during the Gulf War, and that limited evidence suggests reintegration-related family problems may occur up to three years post-deployment (Gewirtz, Erbes, Polusny, Forgatch, & DeGarmo, 2011), the study was restricted to service members reporting within this three year timeframe. Also, given the focus on family functioning and family dynamics, only data from service members who indicated they had a co-resident spouse or partner and at least one or more minor children in the same household were included in the present analysis. This yielded a sample size of 228 service members for the present study, a more than sufficient number to achieve adequate statistical power in a hierarchical regression analysis as determined by the program G*Power

(Faul, Erdfelder, Lang, & Buchner, 2007). With α at .05, a medium effect size ($f^2 = .15$), and power of .95, G*Power calculated a necessary minimum sample size of 138.

OMK coordinators in each state were responsible for distributing surveys at military family events between August 2012 and December 2012. Event attendees were either given a hard copy of the survey or a link to the survey hosted online at www.surveymonkey.com. The events where participants initially were recruited were held in all states (including the District of Columbia) except Mississippi. Some of these events were proprietary to OMK. Examples include a variety of military youth-focused programs (e.g., family camps), Speak Out for Military Kids Trainings/Presentations (designed to help military youth cultivate public-speaking skills and provide platforms to speak to civilian youth about their military family experience), and Boots Off (which brings together newly returned service members and their families to help rebuild connections during reintegration), among others. Other possible events were those hosted by organizations with which OMK has partnered. Examples of these include the National Guard's Yellow Ribbon Reintegration Program, which began in 2008 and provides regular opportunities following deployments for reserve component service members to gather and work on reintegration into the family and community; many events are also offered to family members as well (MacDermid Wadsworth & Southwell, 2011).

Procedures

Survey development and planning. The survey used in the present study was developed between the fall of 2011 and spring of 2012. As a research assistant in the Family and Community Research Lab, I was given primary responsibility for selecting or creating relevant measures for the service member survey, providing justifications for those measures, assembling them into a coherent survey format, and making appropriate edits. Various lab members worked with me on these tasks. We would brainstorm appropriate measures and cull research related to their use to present to Dr. Marek, who would then offer her feedback. Afterward, we would continue modifying the survey and its elements, refining the selection of measures and eventually the finer details of the survey itself, such as its skip logic. In April 2012, the surveys were sent to

five individuals within OMK who had volunteered to review them. Much of the feedback that was received from the OMK staff was positive, though many recommended shortening the survey. Appropriate edits were made, surveys were disseminated once again to the same reviewers, and more feedback was received. Once final changes had been implemented, such as streamlining the order of the survey and eliminating apparently redundant items, approval from Virginia Tech's Institutional Review Board (see Appendix A) was received in May 2012 to begin a pilot study.

Members of the lab traveled to military family camps in Kentucky ($N = 11$), Wyoming ($N = 20$), and Alaska ($N = 11$) to administer the survey to service members, spouses, and adolescents and conduct brief focus groups on the measure itself. Written feedback on the measure was also received from 70 participants at a family camp in Virginia where we were unable to conduct focus groups. Focus group members were asked questions about the length, clarity, and scope of the survey (see Appendix B). Team members held a short debriefing after each group to discuss participant feedback.

Following the focus groups, several minor changes were made to the survey, including the following: adding an item to the larger measure about perceptions of service member PTSD symptoms, adding another item asking the participant to rank sources of social support in terms of helpfulness, inquiring about the location of the last deployment, adding an item from one scale that had inadvertently been omitted, providing an option for participants to indicate they were no longer living together as a family, giving another option to indicate the focal child was not yet born when the most recent deployment began, and making clarifications to the skip logic. The survey was also edited to ensure an appropriate reading level, which was 6.4 for the entire service member survey, according to Microsoft Word.

Survey distribution. Following an e-mail from OMK leadership announcing the study to OMK state coordinators (see Appendix C), the lab began distributing hard copies and web links to the survey to all states participating in the Operation: Military Kids program, once Institutional Review Board approval from Virginia Tech was received for the implementation of the survey (see Appendix D).

The distribution of the survey was met with some resistance by several state OMK teams who refused to distribute the survey because of contractual issues and others who expressed concern that they did not have enough events or access to service members that met the inclusion criteria. Additionally, during this time, other states chose to not reapply for an annual OMK grant, thus effectively ending their involvement in the program. The non-participating states included Michigan, Mississippi, Iowa, Oregon, California, Georgia, Kansas, Kentucky, Louisiana, Maine, New Mexico, South Dakota, and Wyoming. However, the lab was able to partner with Army National Guard personnel in all of these states (with the exception of Michigan, Mississippi, and South Dakota, who did not participate in any way) to distribute the surveys among military families. Thus, data were finally collected in 47 states plus the District of Columbia.

Participating state OMK coordinators and National Guard representatives were instructed to distribute and collect a minimum of 100 surveys each for service members, spouses, and adolescents for a total of 300 surveys per state. They had the option of doing this via hard copy or via an online survey hosted at www.surveymonkey.com; hard copies were to be passed out at events hosted by or held in affiliation with OMK or the Army National Guard. In both versions of the survey, informed consent language was included on the first page; participants indicated consent by beginning the survey. At events, service members were notified of the opportunity to complete the survey in person or given a link to the electronic version that they could complete later. For those that chose the hard copy, service members would complete the survey at the physical location of the event, and return it to a program staff member. Some states returned data to Virginia Tech as they were received, while others waited until they collected the necessary data before returning the surveys. States were responsible for keeping track of how many surveys had been collected; members of the lab sent periodic updates to states alerting them of their on-line participation numbers. In the final sample ($N = 228$), 53 surveys (23%) were submitted on-line and 175 (77%) were submitted as a hard copy.

Measures

Covariates. A variety of demographic covariates were used as control variables. Age was assessed via the question "What is your age?" and is a continuous variable. Sex was assessed with the question "Are you male or female?" and is represented as a binary variable coded 0 (male) and 1 (female). Race was originally assessed with the question "How would you best describe yourself?" Respondents could choose from the following categories: Hispanic/Latino/Spanish; White or Caucasian; African American/Black; American Indian, Native American, or Alaska Native (i.e., Eskimo, Aleut); Asian (i.e., Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, etc.); Native Hawaiian or Other Pacific Islander (i.e., Samoan, Guamanian, Chamorro, etc.); Other. Due to limited variability in participants' responses, this variable was collapsed into White and non-White in the present study, coded as 0 and 1, respectively. To assess the length of the marital or partner relationship, participants were asked "How long have you been in your current relationship?" This was coded as an ordinal variable with the following response categories: 1-3 years, 4-6 years, 7-9 years, and 10 or more years (coded 1-4, respectively). Finally, participants indicated the number of children they had by responding to the item "How old and what gender are your children (including stepchildren)?"

Military-related factors. The military-related factors were comprised of several variables that have been associated with psychological and relational stress in the military family literature. These variables were rank, cumulative length of deployments, combat exposure, component, and length of time home. With the exception of length of time home, all variables are coded such that a higher score would presumably reflect greater stress based on existing literature.

Rank. There are three general categories of rank for most military personnel (Blaisure et al., 2012). Enlisted personnel usually join the military after high school and sign up for an initial term of eight years. Officers, on the other hand, join the military after receiving a college education at a service academy or another institution and receive a commission instead of enlisting. Warrant officers become officers by virtue of a warrant (i.e., specific authorization) instead of a commission and have a specialized skill set. In the current study, rank was measured

by a single item in which the respondent could respond to the following choices: enlisted, warrant officer, or officer. Due to limited variability in responses, responses were recategorized into either “officer” (0) or “enlisted” (1), with the former including warrant officers, before being entered into the regression model.

Cumulative length of deployments. Cumulative length of deployments was indicated by a continuous variable in response to the question, “Considering your overall experience with deployment, how many total months have you ever been deployed for military operations?”

Combat exposure. Combat exposure was assessed via proxy by a single item asking if the service member’s most recent deployment was combat-related, defined within the larger study as the service member’s participation in a military activity that was “in support of a combat mission as a combatant or noncombatant.” Rabenhorst et al. (2012) used a similar operationalization of a combat-related deployment as a proxy for combat exposure. Response choices were coded as 0 (no) and 1 (yes).

Component. Component was indicated by a single item asking the respondent to identify the branch and component in which he or she serves. All possible choices (Active Duty Army, Army National Guard, Air National Guard, Coast Guard Reserve, etc.) were available (see Appendix E). A new binary variable was created by grouping those who indicated active component in any branch (0) and those who indicated reserve component (i.e., Guard or Reserve) in any branch (1). Military family literature typically discusses Guard and Reserve service members as one group since they are distinguished from Active component personnel by their part-time military status (e.g., Castaneda & Harrell, 2009).

Length of time home. The amount of time a service member had been home following the most recent deployment came from a single item that asked “How many months have you been back home since returning from your last deployment?” This continuous variable is the only military-related variable not coded such that, based on existing theory and research, a larger number would indicate greater stress.

Boundary ambiguity. Based on a review of relevant literature, a set of 12 items

indicating various potential family and reintegration related dynamics was created for the larger study. Several of these were based upon those items used in Sayers and colleagues' (2009) study of family readjustment problems.

From this complete set of items, there were six that conceptually mapped onto the construct of boundary ambiguity, which refers to "a state in which family members are uncertain in their perception about who is in or out of the family and who is performing what roles and tasks within the family system" (Boss & J. Greenberg, 1984, p. 536). As such, these six items were used as the measure of boundary ambiguity stemming from the type of ambiguous loss most relevant during reintegration—ambiguous presence (Faber et al., 2008). This is a situation in which the service member (or other family member) is present physically, but not emotionally or psychologically (at least in the way formerly experienced by other family members). Boss (2007) notes that boundary ambiguity lends itself well to operationalization and as such, these items are behavioral indicators of the construct in terms of how researchers have identified boundary ambiguity being manifested in these families (e.g., Huebner et al., 2007).

Face validity for the measure of boundary ambiguity used in the present study comes from their correspondence with related literature (Faber et al., 2008; Huebner et al., 2007). Table 1 below illustrates how the items used to measure boundary ambiguity in the present study map onto Faber and colleagues' (2008) categories. For each of the six items, respondents could choose from a seven-point response scale from 1 (not at all stressful) to 7 (very stressful). Allen et al. (2011) recently used a similarly-constructed scale in their research on stress in recently deployed Army couples. For the present analysis, a mean score was created by summing item scores and dividing by the number of items completed. A respondent must have answered at least three items for a mean score to be calculated. Higher scores represent a greater degree of boundary ambiguity from the service member's perspective. In the present analysis, internal consistency among these six items was acceptable with $\alpha = .90$.

Ambivalence (Post-Deployment Reintegration Scale, PDRS). Ambivalence was measured using an ambivalence index constructed from scores on the Post-Deployment

Table 1
Correspondence of Boundary Ambiguity Items

Boundary Ambiguity (Faber et al., 2008)	Items in the Present Measure
Roles and responsibilities	Renegotiating household responsibilities Figuring out my role in the house Feeling like an outsider in my home
Relational communication and expectations	Re-establishing a relationship with my spouse/partner Re-establishing a relationship with my child(ren) How my child(ren) respond to me

Reintegration Scale (PDRS; Blais, Thompson, & McCreary, 2009). The PDRS will be described first, followed by a brief discussion of issues related to the measurement of ambivalence, and, finally, a description of the particular ambivalence index used in the present study.

The PDRS (Blais et al., 2009) is a 36-item measure assessing positive and negative attitudes about the service member's reintegration experiences in three domains: work, family, and personal. Work has to do with "adjusting back into in-garrison life and the nature of recollections related to deployment-related work experiences" (Blais et al., 2009, p. 368). The personal domain refers to "feeling like oneself again" (Blais et al., 2009, p. 368) and "integrating one's personal experiences into an overarching view of the world" (p. 379). The family domain refers to "the joys and the strains of readjusting to family life" (Blais et al., 2009, p. 368). Six subscales, with six items each, are present in the survey as each of the three domains is split into a positive and negative subscale. Four of these subscales were utilized in the present study: family positive, family negative, personal positive, and personal negative. Internal consistency reliability across all six subscales ranges from .78 to .89 according to the study's authors (Blais et al., 2009). Construct validity comes from evidence that greater negative attitudes are related to more self-reported symptoms and stress in military service (Blais et al., 2009). Factorial validity was demonstrated by an acceptable RMSEA statistic (.064) measuring the goodness of fit of the six factor model. In the present study, internal consistency reliability was good for the four subscales of personal positive ($\alpha = .82$), personal negative ($\alpha = .84$), family positive ($\alpha = .84$), and family negative ($\alpha = .84$).

Various considerations were made to determine the appropriateness of the PDRS items as a measure of ambivalence. Generally, the measurement of ambivalence is a debated topic (Lettke & Klein, 2004) and depends upon how it is conceptualized in any given study (Luescher, 2004). While Luescher's (2004) definition of ambivalence, which refers to "polarized simultaneous emotions, thoughts, volitions, actions, social relations, and/or structures that are considered relevant for the constitution of individual or collective identities [being or potentially being] interpreted as temporarily or even permanently irreconcilable" (p. 36) provides an overall anchor for the study, the immediate focus here is on psychological ambivalence at the individual level. Ambivalence can be felt or implicit, acknowledged or otherwise, and there are benefits and drawbacks to both direct and indirect measures of ambivalence, as each may tap into slightly different constructs (Suitor, Gilligan, & Pillemer, 2011). Direct measures are thought to measure felt ambivalence, or that of which an individual is aware (Luescher & Pillemer, 1998). Indirect measures, conversely, are thought to measure implicit ambivalence that may not yet be consciously experienced in an individual (Pillemer, 2004). Given the lack of consensus as to what constitutes a "gold standard" in the measurement of ambivalence, the exploratory nature of the inclusion of ambivalence in the present study, and the items available in the secondary dataset, I chose to construct an indirect measure of ambivalence, which presumably would tap into ambivalence whether or not the service member is actually cognizant of it.

Indirect measures of ambivalence involve a "comparison of contradictory items or scales" and formulas for deriving an index rating of ambivalence (Lettke & Klein, 2004). Lettke and Klein (2004) note that what is most important in evaluating indirect measures of ambivalence is that the items are in opposition to one another, though this does not require them simply to refer to opposite poles of a single construct similar to the type of measure first used by Kaplan (M. Thompson, Zanna, & Griffin, 1995).

A recent example of this type of an indirect measure of ambivalence comes from Suitor, Gilligan, and Pillemer's (2011) study regarding the difference between direct and indirect measures of ambivalence. Their positive items asked about the respondent's relationship with the

target person in terms of closeness, how often the respondent feels loved or cared for, and whether being with the target person makes the respondent happy. Negative items asked for the degree of tension or strain in the relationship, how often disagreements or conflicts occur, and if the target person makes too many demands. Clearly, there is not a one to one correspondence of the positive and negative items, but instead, they address global aspects of the relationship. Suitor and colleagues determined that their indirect measure did not predict depressive symptoms or psychological well-being as well as the direct measure, though the two did perform equally well when considering the adult parent's perspective alone (compared to the child's). Nonetheless, indirect measures have been used successfully in a number of others studies (e.g., Fingerman, Pitzer, Lefkowitz, Birditt, & Mroczek, 2008; Kiecolt, Blieszner, & Savla, 2011) and there are drawbacks to direct measures as well (Luescher & Pillemer, 1998).

Based on the previous discussion regarding indirect measures of ambivalence, it appears the structure of the PDRS subscales is conducive to serving as a measure of psychological ambivalence as it pertains to one's family and deployment experience. Since the PDRS was not originally intended to be a measure of ambivalence, per se, the scores for these items were transformed into an ambivalence index (Breckler, 1994). Of the many ways to create such an index, Griffin's formula was implemented, which continues to be used most frequently, is highly endorsed, and captures both the similarity and intensity of positive and negative attitudes (M. Thompson et al., 1995). Responses for PDRS items lie on a scale from 1 (not at all true) to 5 (completely true). For each subscale, these item scores were averaged to create a subscale mean that was entered into the Griffin formula (Suitor et al., 2011; M. Thompson et al., 1995):

$$(\text{positive} + \text{negative}) / 2 - |\text{positive} - \text{negative}| + 1.5$$

This created an ambivalence index from zero to 6.5, with higher numbers indicating greater ambivalence. Two ambivalence scores were thus created, each representing deployment-related or family ambivalence. The family dimension of ambivalence has the family as its focal object and incorporates items from the family positive and negative subscales. Similarly, deployment-related ambivalence was assessed via positive and negative subscale items from the personal domain of

the PDRS. See Table 2 below for a sampling of positive and negative items of both dimensions. Ambivalence is presumed if a participant endorses positive and negative items to a similar degree; that is, the simultaneous experience of conflicting thoughts, feelings, or attitudes toward the same object. The full measure used in the larger study is included in Appendix H.

Table 2
Sample PDRS Items

Deployment	
Positive	Negative
I have realized how well off we are in the U.S.	Putting the events of the tour behind me has been tough.
I have a greater appreciation of the value of life.	I have had difficulty reconciling the devastation I saw overseas with life in the U.S.
I have a better understanding of other cultures.	Focusing on things other than the tour has been difficult.
Family	
Positive	Negative
I feel closer to my family.	There has been tension in my family relationships.
I have a greater willingness to be with my family.	I feel my family resented my absence.
I more fully appreciate the time I spend with my family.	I feel the tour has had a negative impact on my personal life.

Family functioning (Family Assessment Device [FAD] General Functioning subscale). Family functioning was measured by the general functioning subscale score from the Family Assessment Device (Epstein et al., 1983), which assesses six domains deemed clinically relevant to family functioning: problem solving, communication, roles, affective responsiveness, affective involvement, and behavior control. In general, the FAD has been used (e.g., Evans, Cowlshaw, Forbes, Parslow, & Lewis, 2010) and recommended in recent military family research for the measure’s “robust internal reliability and validity... low correlations with social desirability, moderate correlations with other self-report measures of family functioning, and evidence of concurrent validity” (I. Miller et al., 2000, p. 101).

The general functioning subscale of the FAD (see Appendix F; Epstein et al., 1983) consists of 12 items and is designed to provide an overall picture of family health or pathology based upon the aforementioned elements in the McMaster Model of family functioning (I. Miller

et al., 2000). Scale items are rated along a four-point scale ranging from 1 (strongly agree) to 4 (strongly disagree). Sample items include “making decisions is a problem for our family” (problem solving), “we cannot talk to each other about the sadness we feel” (affective responsiveness, communication) and “in times of crisis we can turn to each other for support” (affective involvement). The responses for all items in the scale were averaged to create a mean score; respondents were required to answer at least 7 of 12 items in order for a mean score to be calculated according to Ryan, Epstein, Keitner, Miller, and Bishop (2005). Scoring was reversed such that higher scores represent better overall family functioning.

Epstein et al. (1983) report a Cronbach’s alpha reliability value of .92 for the general functioning subscale of the FAD. A more recent study found a similar reliability level of .91 (Olson, 2011). Additionally, the same Olson study found the general functioning subscale of the FAD to be well correlated with the FACES IV instrument, providing evidence of concurrent validity. Internal consistency reliability in the current study was $\alpha = .92$.

Data Analysis

Preliminary analysis of regression assumptions. Preliminary analyses of regression assumptions are described below. Actual results of all such analyses, conducted using PASW Statistics (version 18.0.3, more commonly known as Statistical Package for the Social Sciences or SPSS), are detailed in the relevant sections of Chapter 4.

Preliminary analyses were first conducted to assess the fitness of the data in terms of the following regression assumptions: normality, linearity, and homoscedasticity (Snyder & Mangrum, 2005). Snyder and Mangrum (2005) note that the additional assumption of multivariate normality is also met if these three primary assumptions are satisfied. Residual scatterplots were examined for adherence to these assumptions, according to guidelines provided by Tabachnick and Fidell (2007). Specifically, “assumptions of analysis are that the residuals (differences between obtained and predicted DV scores) are normally distributed about the predicted DV scores, that residuals have a straight-line relationship with predicted DV scores, and that the variance of the residuals about predicted DV scores is the same for all predicted scores”

(Tabachnick & Fidell, 2007, p. 125). In addition to visual inspection of scatterplots, homoscedasticity was assessed using the Koenker test (Koenker, 1981), which tests a null hypothesis that the data are homoscedastic.

Further steps were, however, taken to assess for multivariate normality with the examination of values for individual cases. Tabachnick and Fidell (2007) recommend the cautious use of Mahalanobis distances for the assessment of multivariate normality of individual cases. This refers to “the distance of a case from the centroid of the remaining cases where the centroid is the point created at the intersection of the means of all the variables” (Tabachnick & Fidell, 2007, p. 74). Each case is assigned a value, with higher values representing greater distance away from the cluster of variable means. Using a χ^2 distribution with $p = .01$, values that exceed the cut-off indicate a multivariate outlier and should be considered for removal from analysis.

Descriptive statistics of individual variables were also examined for univariate normality. In particular, significant univariate skewness or kurtosis was indicated by an unbiased Fisher g statistic for skewness (g1) or kurtosis (g2) above $|2|$ as produced by the DeCarlo macro in SPSS (DeCarlo, 1997). While Tabachnick and Fidell (2007) note that minor deviations from normality may be flagged as significant in large samples (e.g., over 200), any data that significantly exceeded this cut-off were considered for transformation using logarithmic transforms. Finally, the Durbin-Watson statistic provided by SPSS was used to assess for an additional assumption of independence of errors (Tabachnick & Fidell, 2007). This statistic is “a measure of autocorrelation of errors over the sequence of cases, and, if significant, indicates nonindependence of errors” (Tabachnick & Fidell, 2007, p. 128).

Multicollinearity is a threat to the validity of multiple regression analysis. It refers to a situation in which two or more variables are highly correlated (Tabachnick & Fidell, 2007) and can be assessed via collinearity diagnostics using SPSS. A condition index is provided, which is “a measure of tightness or dependency of one variable on the others” (Tabachnick & Fidell, 2007, p. 90), as well as variance proportions for all variables in the analysis. Tabachnick and Fidell (2007) state that multicollinearity is indicated when the Condition Index is greater than 30 for a

particular dimension and when two or more variables' variance proportions are greater than .50.

Preliminary analysis of missing data and power requirements. In an attempt to use as much available data as possible, missing data were taken into consideration. Binary variables indicating missing data (i.e., 1 [data present] and 2 [missing]) were created for each independent variable in the analysis. T-tests and analyses of variance (ANOVAs) were conducted using these variables to determine if significant differences existed among variables of interest based on missingness on these variables. Results indicated no substantial pattern of missingness related to the data.

A priori power analyses were conducted using G*Power (Faul et al., 2007), which indicated the largest necessary sample size for sufficient power in the first step of the analysis (i.e., R^2 deviation from zero) was 138. Parameters in this power analysis included power of .95 and alpha of .05, with five predictors (i.e., those constituting the first model of the regression analysis). A medium effect was also specified, which is reasonable in the behavioral sciences (Rossi, 2013) and is frequently a default convention when an effect size is unknown beforehand (Heppner, Wampold, & Kivlighan, 2008). Necessary sample sizes for detecting a similar effect for subsequent steps in the regression analysis (i.e., detecting the R^2 increase or ΔR^2) were smaller than that required for the first step. As a result, only the power requirements for the first step were considered in determining the adequacy of the sample.

Given the absence of a pattern in missingness of the data and the size of the sample being sufficient in terms of power, listwise deletion was used to remove cases with any missing data, resulting in a total effective sample size of 228. Additionally, a sample of this size more than satisfies rules of thumb suggested by Tabachnick and Fidell (2007) stating the sample should be as large as $50 + 8m$ (where m is the number of predictors, which would equal 154 with 13 predictors) for testing the multiple correlation coefficient and $104 + m$ for testing individual beta coefficients (which would equal 117).

Formal hierarchical regression analysis. Hierarchical regression analysis was utilized in the present study since it can be used for the purpose of testing theory-based causal mechanisms

(Cohen, Cohen, West, & Aiken, 2003) and specific hypotheses (Snyder & Mangrum, 2005). Covariates or other “nuisance variables” potentially responsible for spurious relationships between variables of greater importance are first entered into a single block or step of the regression analysis. Thus, the maximum amount of actual variance is attributed to the variables entered earliest in the analysis. Any remaining variance will then be attributed to other variables (or sets of variables) entered later in the analysis. Variables of greater interest are entered in subsequent steps based on causal priority. In contrast to simultaneous regression that provides information on the relative importance of individual variables, what is of greater interest in hierarchical analyses is the change in the R squared (i.e., ΔR^2) value for each block or model (Pedhazur, 1997). That is, ΔR^2 represents the additional increment in explained variance in the dependent variable over and above any variables previously entered in the analysis. It tests whether at least one regression coefficient in the block of variables just added to the model is significant (Pedhazur, 1997). What it does not do is tell the researcher that any given variable is *more* or *less* important than another, regardless of the size of the beta coefficients. Additionally, Pedhazur (1997) emphasizes that “the meaning and validity of controlling certain variables while studying the effects of others depend on the theoretical formulations about the pattern of relations among the variables under study” (p. 245). In the present analysis, the Contextual Model of Family Stress (Boss, 2002) was used to determine the order of entry of variables in the regression analysis.

Model 1. Standard demographic variables were entered in Model 1 to control for any influence they may have on the dependent variable of family functioning. These were age, sex, race, length of the marital relationship, and number of children. A number of military family studies have included similar variables as controls or identified a relationship between these variables and the quality of family relationships (e.g. J. R. Anderson et al., 2011; Andres & Moelker, 2011; Asbury & D. Martin, 2012; Chartrand et al., 2008; Karney & Crown, 2011; Warner, Appenzeller, Warner, & Grieger, 2009). Thus, the regression equation for Model 1 was as follows (all regression equations are presented for the sample):

$$\text{(Family Functioning)'} = A + b(\text{age}) + b(\text{sex}) + b(\text{race}) + b(\text{length of relationship}) + b(\text{number of children})$$

Model 2. Military-related contextual factors were entered in Model 2. These are thought to impact family stress caused by the re-entrance of a service member into the family. The regression equation for Model 2 (including the preceding block) was as follows:

$$\text{(Family Functioning)'} = A + b(\text{rank}) + b(\text{component}) + b(\text{combat exposure}) + b(\text{time home}) + b(\text{cumulative length of deployment}) + [b(\text{age}) + b(\text{sex}) + b(\text{race}) + b(\text{length of relationship}) + b(\text{number of children})]$$

Model 3. Boundary ambiguity was entered in Model 3. Based on the CMFS (Boss, 2002) and being of particular interest in this study, it was entered in this step in order to test the hypothesis that the addition of this variable adds significantly to the prediction of family functioning over and above that accounted for by demographic controls and military-stress variables. Moreover, Boss's (2002) Contextual Model suggests that external, military-related contextual factors first influence internal contextual factors, such as boundary ambiguity, which, in turn, then affect how families respond to the stress of reintegration. The regression equation for Model 3 (including the preceding blocks) was as follows:

$$\text{(Family Functioning)'} = A + b(\text{boundary ambiguity}) + [b(\text{rank}) + b(\text{component}) + b(\text{combat exposure}) + b(\text{time home}) + b(\text{cumulative length of deployment})] + [b(\text{age}) + b(\text{sex}) + b(\text{race}) + b(\text{length of relationship}) + b(\text{number of children})]$$

Model 4. The ambivalence variables (family and deployment-related) were entered last in Model 4, since Boss (2002) proposes that ambivalence would be a potential result of boundary ambiguity and can potentially affect family functioning by hampering decision-making and coping. The regression equation for Model 4 (including the preceding blocks) was as follows:

$$\text{(Family Functioning)'} = A + b(\text{family ambivalence}) + b(\text{deployment-related ambivalence}) + [b(\text{boundary ambiguity})] + [b(\text{rank}) + b(\text{component}) + b(\text{combat$$

exposure) + b(time home) + b(cumulative length of deployment)] + [b(age) + b(sex)
+ b(race) + b(length of relationship) + b(number of children)]

Chapter 4

RESULTS

Sample Selection

The larger sample consisted of data from 849 service members who had experienced at least one deployment. Data for 327 service members remained in the dataset after filtering for the study's inclusion criteria of (a) having a cohabiting spouse or partner, (b) being in a relationship at least one year in length, (c) having at least one co-residential minor child, (d) currently serving in the military, and (e) experiencing at least one full deployment cycle. Cases with missing data on the variables used in the hierarchical regression analysis were removed from the sample, leaving 235 respondents. Inspection of univariate outliers for continuous variables then revealed three cases with standardized time home values greater than 3.29 and two cases with standardized cumulative length of deployment values greater than 3.29. Such a high standardized score suggests these cases are significant outliers, and were removed from further analysis, given that they would occur less than 99.9% of the time in a normal distribution of scores (Field, 2009; Tabachnick & Fidell, 2007). Inspection of multivariate outliers for all variables via Mahalanobis distances revealed two cases with conflicting data, which were both removed, leaving no standardized residuals greater than $|3.29|$. The final sample for the present study was thus narrowed to 228 respondents.

Sample Characteristics

Basic service member demographic information appears in Table 3. Service member ages varied from 21 to 55 years ($M = 35$, $SD = 7.80$). The sample was overwhelmingly comprised of males ($n = 213$, 93%) compared to females ($n = 15$, 7%). Respondents were also primarily White ($n = 195$, 85.5%) compared to non-White ($n = 33$, 14.5%). Further breakdown of service member race is provided in Table 3.

Family-related demographic information is presented in Table 4. More than half (54%) of respondents indicated being in a romantic relationship for 10 or more years. Service members in the sample were parents to 1 to 5 children ($M = 2.25$, $SD = 1.09$). Age of participants' children

was measured categorically, with results shown in Table 4.

Table 3
Sample Demographics

	Frequency	%	M	SD
Age			34.96	7.80
21-29	62	27.2		
30-39	97	42.5		
40-49	58	25.4		
50-55	11	4.8		
Sex				
Male	213	93.4		
Female	15	6.6		
Race				
White	195	85.5		
Black	9	3.9		
Hispanic	18	7.9		
Other	6	2.6		
Race (binary variable)				
White	195	85.5		
Non-White	33	14.5		

Table 4
Family-Related Demographics

	Frequency	%	M	SD
Relationship Length				
1 to 3 years	20	8.8		
4 to 6 years	50	21.9		
7 to 9 years	35	15.4		
10 or more years	123	53.9		
Number of Children			2.25	1.09
1	65	28.5		
2	82	36.0		
3	48	21.1		
4	25	11.0		
5	8	3.5		
Age of Children				
0 to 5 years	190	39.9		
6 to 12 years	194	40.8		
13 to 18 years	92	19.3		

With regard to military characteristics, the majority of service members came from the enlisted ranks ($n = 176, 77.2\%$), while the remainder ($n = 52, 22.8\%$) of the sample was

comprised of warrant officers and commissioned officers. Reserve component service members were over-represented in the present study ($n = 182$, 80%) compared to Active Duty service members ($n = 46$, 20%). More specifically, Army National Guard service members made up 55.3% of the study's sample, a by-product of recruiting through National Guard Yellow Ribbon Reintegration Program (YRRP) events. Coast Guard was the only branch of the Armed Forces not represented in the study. Further breakdown of branch and component is presented in Table 5 below. Across the sample, service members had served anywhere from two to 32 years in the Armed Forces ($M = 13$, $SD = 7.59$, $Range = 2 - 32$). Years of service data were missing for five participants, which was permissible given it is not a variable used in the regression analysis.

Table 6 contains various deployment-related characteristics of the sample. Participants had experienced an average of 2.3 deployments ($SD = 1.58$, $Range = 1 - 15$) for a cumulative average of 24 months ($SD = 12.12$, $Range = 4 - 60$). The length of the last reported deployment was an average of 11 months ($SD = 3.12$, $Range = 1 - 24$). Most service members ($n = 171$, 75%) indicated that this last deployment was combat-related. Given associations between combat deployments and post-traumatic stress, it may be helpful to provide additional information on what is known regarding the prevalence of PTSD in the current sample. Only those respondents indicating a most recent combat deployment were asked about a PTSD diagnosis or symptoms. Twenty service members (11.7%) indicated being given a PTSD diagnosis at an unspecified point in their career. Of those who experienced a combat-related deployment and did not receive an official diagnosis, 19 (12.8%) reported currently experiencing symptoms of PTSD. Missing data were allowed on these items since they were not included in the statistical analysis. Overall, 22.8% ($n = 39$) of those whose most recent deployment was combat-related indicated a diagnosis or experiencing symptoms of post-traumatic stress.

Preliminary Analyses

Regression assumptions. Assumptions of linearity, normality, and homoscedasticity were assessed via inspection of the standardized residual plot. Dots were centered on zero (normality), along a straight line (linearity), and in a fairly rectangular (homoscedasticity) fashion. An

Table 5
Military-Related Demographics

	Frequency	%	M	SD
Rank				
Enlisted	176	77.2		
Warrant Officer	11	4.8		
Officer (commissioned)	41	18.0		
Rank (binary variable)				
Enlisted	176	77.2		
Officer	52	22.8		
Component				
Active Duty	46	20.2		
Guard	144	63.2		
Reserve	38	16.7		
Component (binary variable)				
Active Duty	46	20.2		
Reserve	182	79.8		
Branch				
Army	204	89.5		
Air Force	20	8.8		
Navy	3	1.3		
Marines	1	0.4		
Component and Branch				
Active Duty Army	42	18.4		
Army National Guard	126	55.3		
Army Reserve	36	15.8		
Air National Guard	18	7.9		
Air Reserve	2	0.9		
Active Duty Navy	3	1.3		
Active Duty Marines	1	0.4		
Years of Service			13.07	7.59
2 to 5	47	20.6		
6 to 10	48	21.1		
11 to 15	48	21.1		
16 to 20	38	16.7		
21 to 25	27	11.8		
26 or more	15	6.6		
Missing	5	2.2		

additional test was run to assess for homoscedasticity, producing a non-significant Koenker statistic (19.65, $p = .10$), indicating homoscedastic data. The assumption of the independence of errors was assessed and satisfied with a Durbin-Watson statistic of 1.98. While multiple regression does not require the presence of univariate normality, it can strengthen the results of

Table 6
Deployment-Related Characteristics

	Frequency	%	M	SD
Number of Deployments			2.3	1.58
1	79	34.8		
2	65	28.5		
3 or more	83	36.4		
Cumulative Length of Deployments			24	12.12
1 to 12 months	65	28.1		
13 to 24 months	56	24.6		
25 to 36 months	74	32.5		
37 or more months	34	14.9		
Last Deployment Combat-Related				
Yes	171	75.0		
No	57	25.0		
PTSD Diagnosis ($n = 171$)				
Yes	20	11.7		
No	149	87.1		
Missing	2	1.2		
PTSD Symptoms ($n = 149$)				
Yes	19	12.8		
No	61	40.9		
Missing	69	46.3		

the analysis. All variables were well within established limits for univariate normality, with the exception of the time home variable; Fisher's unbiased g_1 statistic for skewness and g_2 statistic for kurtosis exceeded commonly accepted levels of $|2|$ (2.24 and 4.77, respectively). However, transforming the data was ultimately unnecessary given that the other multivariate assumptions were still met. Finally, the conditions for multicollinearity as outlined by Tabachnick and Fidell (2007) were not satisfied in the current dataset, indicating no problems with multicollinearity.

Descriptive statistics. Descriptive statistics were calculated for continuous study variables and are detailed in Table 7 below. As mentioned earlier for the categorical variables, the majority of service members belonged to the enlisted ranks ($n = 176, 77\%$), served in the Reserve component ($n = 182, 80\%$), and experienced a combat-related recent deployment ($n = 171, 75\%$). The cumulative length of total deployments ranged from four months to five years with an average of two years ($SD = 12.12$). The length of time home following the last deployment ranged from one to 28 months ($M = 4.73, SD = 5.31$). Almost half (48%) of the sample had only

Table 7
Descriptive Statistics for Continuous Variables

Predictor	<i>M</i>	<i>SD</i>	Min	Max
Dependent Variable				
Family functioning	3.22	0.55	1.50	4.00
Independent Variables				
Time home	4.73	5.31	1.00	28.00
Cumulative length of deployments	24.04	12.12	4.00	60.00
Boundary ambiguity	3.02	1.46	1.00	6.17
Deployment-related ambivalence	2.60	1.19	0.50	5.50
Family ambivalence	3.11	1.28	0.50	5.67

been home two months or less when they participated in the study. Boundary ambiguity scores ranged from 1 to 6.17, with an average score of 3.02 ($SD = 1.46$), just below the mid-point average of the scale. Service members averaged 2.6 on deployment-related ambivalence ($SD = 1.19$, $Range = 0.50 - 5.50$) and 3.1 on family ambivalence ($SD = 1.28$, $Range = 0.50 - 5.67$). Potential scores for both could have ranged from 0 to 6.5, indicating scores on both dimensions were lower than the measure's mid-point. Family functioning scores, as measured by the general functioning subscale of the Family Assessment Device, averaged 3.22 ($SD = .55$, $Range = 1.5 - 4.0$), which falls toward the higher end of family functioning.

Bivariate analyses. Bivariate analyses were also conducted prior to running the hierarchical regression analysis with detailed results of Pearson r correlations in Table 8 below.

Control variables. There were a number of significant correlations among the control variables, especially among age, sex, and relationship length. Age was positively correlated with a number of variables, including length of the dyadic relationship ($r = .60$, $p < .001$), the number of children ($r = .26$, $p < .001$), component ($r = .16$, $p = .014$), combat exposure ($r = .17$, $p = .009$), length of time home ($r = .18$, $p = .005$), and the cumulative length of deployments ($r = .33$, $p < .001$). Age was negatively correlated with rank ($r = -.17$, $p = .010$) and boundary ambiguity ($r = -.14$, $p = .037$). Sex (male = 0, female = 1) was positively correlated with deployment-related ($r = .15$, $p = .025$) and family ambivalence ($r = .15$, $p = .023$) and negatively correlated with family functioning ($r = -.18$, $p = .007$) and the number of children ($r = -.16$, $p = .017$). Relationship

Table 8
Correlation Matrix of Study Variables

	1	2	3	4	5	6	7	8	9	10	11	12	13
1. Age													
2. Sex	-.06												
3. Race	-.04	.04											
4. Relationship length	.60***	-.07	-.05										
5. Number of children	.26***	-.16*	.05	.18**									
6. Rank	-.17*	-.07	.05	-.26***	-.04								
7. Component	.16*	.09	-.23**	.03	.03	-.01							
8. Combat exposure	.17*	-.01	.01	.18**	.14*	-.17*	-.22***						
9. Time home	.18**	.02	.01	.16*	-.07	-.10	-.16*	.15*					
10. Cum. length of dep.	.33***	-.13	.08	.34***	.17**	-.15*	-.22***	.17**	.16*				
11. Boundary ambiguity	-.14*	.06	.00	-.08	-.03	-.01	-.05	.11	.20**	-.01			
12. Deployment-related ambivalence	.04	.15*	.03	.02	.05	.04	-.04	.13*	-.02	.12	.46***		
13. Family ambivalence	.11	.15*	-.06	.04	-.04	-.02	-.07	.17*	.16*	.13	.61***	.62***	
14. Family functioning	.02	-.18**	-.05	.00	.11	-.10	.12	-.04	-.27***	.00	-.51***	-.31***	-.58***

* $p < .05$. ** $p < .01$. *** $p \leq .001$.

length had expected positive correlations with number of children ($r = .18, p = .005$), as well as with combat exposure ($r = .18, p = .007$), time home ($r = .16, p = .016$), and cumulative length of deployment ($r = .34, p < .001$). Length of the dyadic relationship was only negatively correlated with rank ($r = -.26, p < .001$).

Military-related factors. Among the military-related variables of interest in the present study, rank (Officer = 0, Enlisted = 1) was negatively correlated with combat exposure ($r = -.17, p = .011$) and length of deployments ($r = -.15, p = .028$). Component (Active = 0, Reserve = 1) was also negatively correlated with combat exposure ($r = -.22, p = .001$) and cumulative length of deployments ($r = -.22, p = .001$), as well as length of time home ($r = -.16, p = .013$). Combat exposure (no = 0, yes = 1) had the highest number ($n = 9$) of statistically significant correlations with other variables. In addition to the aforementioned correlations, it was positively correlated with time home ($r = .15, p = .027$), cumulative length of deployment ($r = .17, p = .009$), deployment-related ambivalence ($r = .13, p = .044$) and family ambivalence ($r = .17, p = .011$). Post-deployment time home was positively correlated with length of deployments ($r = .16, p = .018$), boundary ambiguity ($r = .20, p = .002$), and family ambivalence ($r = .16, p = .017$), and was negatively associated with family functioning ($r = -.27, p < .001$). Cumulative length of deployments, as mentioned, was correlated with all other military-related factors but no other variables of interest.

Boundary ambiguity and ambivalence. Boundary ambiguity was strongly and positively correlated with deployment-related ambivalence ($r = .46, p < .001$) and family ambivalence ($r = .61, p < .001$), and negatively correlated with family functioning ($r = -.51, p < .001$). Deployment-related ambivalence was also highly correlated with family ambivalence ($r = .62, p < .001$) and negatively related to family functioning ($r = -.31, p < .001$). Family ambivalence was strongly, negatively correlated with family functioning ($r = -.58, p < .001$).

Hierarchical Regression Analysis

Summary results of the hierarchical regression analysis for family functioning are presented in Table 9, with more detailed results presented in Table 10.

Table 9
Hierarchical Regression Analysis Summary Results (N = 228)

Predictor	Family Functioning	
	ΔR^2	β
Model 1	.04	
Age		-.01
Sex		-.16*
Race		-.05
Relationship length		-.03
Number of children		.09
Model 2	.09**	
Rank		-.14*
Component		.08
Combat exposure		-.02
Time home		-.26**
Cum. length of dep.		.01
Model 3	.21**	
Boundary ambiguity		-.49**
Model 4	.10**	
Deployment-related ambivalence		.09
Family ambivalence		-.47**
Total R^2 (adjusted)	.41**	

* $p < .05$. ** $p < .01$. *** $p \leq .001$.

Model 1. Model 1, consisting of the five standard demographic variables (i.e., age, sex, race, length of relationship, number of children), failed to reach a commonly accepted level of statistical significance with an R^2 of .04 ($F(5, 222) = 1.90, p = .095$). However, sex was significant ($\beta = -.16, p = .015$), suggesting that, controlling for other covariates, females report poorer family functioning than males. Nonetheless, given that only 6.6% sample were female, and the lack of significance for Model 1, this finding should be considered with caution.

Model 2. Model 2, which added the military-related factors to the analysis (i.e., rank, component, combat exposure, time home, cumulative length of deployments), did reach statistical significance with $F(10, 217) = 3.29, p = .001$, *Model* $R^2 = .13$, explaining an adjusted 9% of the variance in family functioning. The ΔR^2 associated with Model 2 was significant at .09 ($p = .001$). This supports Hypothesis 1, which stated that military-related factors would significantly contribute to variance in family functioning over and above the contribution of control variables.

Table 10
Hierarchical Regression Analysis Full Results (N = 228)

Variable	Model 1			Model 2			Model 3			Model 4		
	<i>B</i>	<i>SE B</i>	β									
Age	.00	.01	-.01	.00	.01	.02	-.01	.01	-.08	.00	.01	.02
Sex	-.36	.15	-.16*	-.39	.14	-.18**	-.34	.13	-.16**	-.23	.12	-.11
Race	-.08	.10	-.05	-.03	.10	-.02	-.04	.09	-.02	-.10	.08	-.06
Relationship length	-.01	.04	-.03	-.02	.04	-.03	-.02	.04	-.04	-.04	.03	-.07
Number of children	.05	.03	.09	.03	.03	.06	.04	.03	.07	.02	.03	.04
Rank				-.18	.09	-.14*	-.18	.08	-.14*	-.17	.07	-.13*
Component				.11	.10	.08	.14	.09	.10	.09	.08	.07
Combat exposure				-.02	.09	-.02	.05	.08	.04	.07	.07	.06
Time home				-.03	.01	-.26***	-.02	.01	-.14*	-.02	.01	-.15**
Cum. length of dep.				.00	.00	.01	.00	.00	.02	.00	.00	.06
Boundary ambiguity							-.18	.02	-.49***	-.09	.03	-.24***
Deployment-related ambiv.										.04	.03	.09
Family ambivalence										-.20	.03	-.47***
R^2		.04			.13			.35			.45	
(R^2 adjusted)		(.02)			(.09)			(.31)			(.41)	
F for change in R^2		1.90			4.53***			70.75***			19.62***	

* $p < .05$. ** $p < .01$. *** $p \leq .001$.

Specifically, in this particular model, the variables of rank ($\beta = -.14, p = .034$) and time home ($\beta = -.26, p < .001$) made significant contributions to the model. Enlisted service members reported poorer family functioning than officers, and the shorter time a service member had been home was associated with better reports of family functioning. The former lent support for Hypothesis 1d (i.e., enlisted service members will report poorer family functioning than officers) while the remaining sub-hypotheses were rejected, failing to make significant contributions to family functioning in the expected directions. The relationship between time home and family functioning, though significant, was opposite to what was predicted. The demographic covariate sex remained significant in Model 2 ($\beta = -.18, p = .007$).

Model 3. In Model 3, boundary ambiguity was added to the regression analysis, achieving statistical significance with $F(11, 216) = 10.38, p < .001, Model R^2 = .35$. The ΔR^2 for Model 3 was significant at .21 ($p < .001$) and it accounted for an adjusted 31% of variance in the outcome of family functioning. The regression coefficient for boundary ambiguity ($\beta = -.49, p < .001$) suggests that a standard deviation increase in boundary ambiguity is associated with almost a half-standard deviation reduction in family functioning scores. Thus, Hypothesis 2 (i.e., boundary ambiguity will be negatively and significantly related to family functioning) was supported as boundary ambiguity explained family functioning over and above the demographic covariates and military-related factors. Additionally, the demographic covariate sex remained significant in Model 3 ($\beta = -.16, p = .007$). Rank and time home (β , first added in Model 2, also remained significant ($\beta = -.14, p = .016$ and $.017$, respectively).

Model 4. Finally, the two ambivalence variables were added in Model 4, which also achieved statistical significance and lent support for Hypothesis 3 with $F(13, 214) = 13.32, p < .001, Model R^2 = .45$. The addition of ambivalence to the model was associated with a ΔR^2 of .10 ($p < .001$). Deployment-related ambivalence failed to achieve statistical significance and did not differ reliably from zero ($\beta = .09, p = .166$), rejecting Hypothesis 3a (i.e., deployment-related ambivalence will be negatively related to family functioning). Family ambivalence, on the other hand, was strongly, negatively related to family functioning ($\beta = -.47, p < .001$), supporting

Hypothesis 3b. The more a service member endorsed family ambivalence, the poorer his or her family functioning. Once again, rank ($\beta = -.13, p = .015$) and time home ($\beta = -.15, p = .009$) remained significant in the final model, as did boundary ambiguity ($\beta = -.24, p = .001$). Though covariates were not of particular interest, it should be noted that the regression coefficient for sex was no longer significant in Model 4. The final, overall model accounted for an adjusted 41% of the variance in family functioning.

Chapter 5

DISCUSSION

Summary

The present study is situated in the “third wave” of military family reintegration research, which, among other things, “comprises studies focused less on description and more on explanation” (MacDermid Wadsworth, 2013, *Pushing Ahead...*, para. 1). Burgeoning “third wave” military family scholarship suggests links between the stressors of deployment and reintegration and family functioning. Utilizing the Contextual Model of Family Stress (Boss, 2002) as the guiding conceptual framework, this study extends what is known about military families during reintegration by exploring the relationship between the stress of a service member’s return, the family’s external and internal contexts, and family functioning. Specifically, this study hypothesized that, during reintegration, military families would be made more vulnerable due to a variety of military-related factors, such as the cumulative length of deployments, combat exposure, lower rank, belonging to the Guard or Reserve component, and being home for a short time after deployment. It also hypothesized that family functioning would be affected by boundary ambiguity and service member family and deployment-related ambivalence. Thus, the study attempted to assess for a number of risks to successful military family functioning during reintegration, which is a significant area of contemporary concern. In fact, MacDermid Wadsworth (2013) further reminds researchers to “recognize that we are at the beginning, not the end, of the post-war lifetimes for the new generation of veterans and their families” (*Practical Rigor...*, para. 6); as such, the present study could not be more timely.

Hierarchical multiple regression analysis was used to test whether the addition of the internal contextual variables boundary ambiguity and ambivalence, as indicated by the Contextual Model (Boss, 2002), significantly added to the prediction of family functioning over and above that of standard demographic covariates and military-related features of the family’s external context. Although not hypothesized in the study, the demographic variable sex was statistically significant in Models 1, 2, and 3 (though Model 1 itself failed to reach significance), indicating its

initial importance as a predictor of family functioning. More specifically, results suggested that female service members, compared to males, report poorer family functioning when holding other demographic variables, military factors, and boundary ambiguity constant. Once the ambivalence variables were added to the model, sex was no longer a significant predictor of family functioning.

The addition of military-related factors as a whole significantly added to the model's predictive power, which suggests that some military-related aspects of the family's external context do indeed make a difference in terms of how families respond to the stress of the service member's return. Rank and time home were the only significant variables in Model 2, and remained significant in Models 3 and 4. The data supported Hypothesis 1a, which stated that enlisted service members, compared to officers (including warrant officers), would report poorer family functioning, controlling for demographics and the remaining military-related factors. Data also showed that fewer months home post-deployment significantly predicted higher family functioning scores; however, this is in opposition to Hypothesis 1d, which stated that a longer time home would be associated with better family functioning. Regarding the other military-related factors, results suggested that component, combat exposure, and cumulative length of deployments were not significant in the prediction of the outcome variable. Thus, the data did not support the following hypotheses: service members in the Guard or Reserve would report poorer family functioning than Active Duty personnel (Hypothesis 1b); service members whose last deployment was combat-related would report poorer family functioning than those whose deployment was not combat-related (Hypothesis 1c); and the cumulative length of deployments would be negatively related to family functioning (Hypothesis 1e).

As the CMFS (Boss, 2002) would predict, results indicated that the family's internal structural and psychological contexts are significant to the family's response to stress and overall functioning. Boundary ambiguity significantly increased the ability of the model to predict family functioning, lending support for it as a key element in the processes of reintegration. Controlling for all other variables, service members scoring higher on boundary ambiguity reported poorer family functioning scores. Thus the data supported Hypothesis 2, which stated that, controlling

for demographic characteristics and military-related factors, boundary ambiguity would be negatively and significantly related to family functioning. Finally, the addition of family and deployment-related ambivalence variables as a whole also added to the predictive power of the model, reflecting the importance of the family's psychological context in family stress management. Only family ambivalence was shown to make a difference in family functioning, such that greater ambivalence toward one's family predicted poorer family functioning. Thus, results confirmed Hypothesis 3b, which stated that family ambivalence would be negatively related to family functioning. Hypothesis 3a, which stated that deployment-related ambivalence would be negatively related to family functioning, was not supported, as deployment-related ambivalence had a negligible association with family functioning. Together, these findings support a number of study hypotheses and provide empirical support for the utility of boundary ambiguity and ambivalence as predictors of family functioning.

The Family's External Context

The Contextual Model (Boss, 2002) suggests that the family's external context, including its economic, historical, and developmental aspects, shapes the internal context, and thus the family's response to stress and overall functioning. While no hypotheses were made regarding the demographic covariates, it is important to note what the findings suggested about the different ways men and women may experience military and family life in the post-deployment period. Additionally, results showed that certain military-related contextual factors are of unique importance in predicting family functioning during reunification.

Demographic covariates. Demographic factors, as a whole, failed to make a significant contribution to the prediction of family functioning. Sex, however, was the only covariate to achieve significance in the entire analysis, and did so in two of the four regression models. In terms of the CMFS (Boss, 2002), sex cuts across the heuristic categories of external and internal contexts. As a biological feature, it belongs to the external context, and also has much to do with culture, since families are also organized around gender (Silverstein, 2003). In the same vein, it also affects the internal context in terms of both power (a structural facet) and perception and

appraisal (psychological facets; Boss, 2002).

These findings are consistent with extant research regarding differences between male and female service members. Female service members are at a greater risk of military sexual trauma and intimate partner violence, as well as early life sexual abuse (e.g., Boyd, Bradshaw, & Robinson, 2012; IOM, 2010), all of which can affect relationship quality in the post-deployment period. Mota et al. (2012) also note that female service members may come from more disruptive family backgrounds than men and may be more prone to PTSD after a return from deployment. Additionally, Karney and Crown (2007) found that female service member marriages were at greater risk for dissolution than male service member marriages. Thus, in light of existing literature, it is not surprising that females reported poorer family functioning than their male counterparts. In this sample, the average female score on the FAD subscale was 2.86, compared to males who scored an average of 3.25.

Within the hierarchical regression analysis, the fact that sex was no longer significant when family and deployment-related ambivalence were added to the fourth model suggests these variables may “carry” or reflect some of the influence of sex on family functioning. This means that, when ambivalence is accounted for, sex loses its predictive power and the relationship between sex and family functioning disappears in the hierarchical analysis. Such a finding makes sense given that, for many couples, a gendered division of labor exists in the home, which results in women, even for those who are employed outside of the home, shouldering a much greater burden of caregiving and other parental responsibilities than men (Hochschild, 1997). Thus, women especially may be susceptible to ambivalence that results from the conflict between “the contradictory cultural narratives of intensive mothering and shared parenthood” (Sevon, 2012, p. 60). Women, unlike men, continue to face judgment as they “are sometimes viewed as selfish or self-centered for wanting to have it all” (i.e., a career and a family; Gutek, Searle, & Klepa, 1991, p. 562). Indeed, extant research suggests that women generally experience more work and family-related ambivalence than men (e.g., Ross-Smith & Chesterman, 2009; L. Thompson & Walker, 1989). Moreover, it is reasonable to also suppose that ambivalence for many female

service members may be exacerbated as a function of the gendered nature of the military itself (Howard & Prividera, 2004), making it more difficult for females to reconcile contradictions between work and family roles.

This finding should be considered with caution, however. Tabachnick and Fidell (2007), quoting Rummel (1970), note that in “dichotomous variables with 90-10 splits between categories, or more” (p. 73), correlations between the dichotomous variables and others are truncated or weakened and scores in the lesser category carry more weight than those in the larger. Still, given the dearth of literature on the impacts of maternal versus paternal deployment on family functioning (e.g., Paley, Lester, & Mogil, 2013), future research with larger samples should pay more attention to sex in general and explore variables, such as ambivalence, that may mediate or provide routes of indirect effects of sex on family functioning.

Military-related factors. This study addressed the effect of five military-related contextual factors on family functioning, including rank, component, combat exposure, length of time home post-deployment, and cumulative length of deployments. The Contextual Model (Boss, 2002) suggests such factors impact the family’s internal context, and were thus entered in the second step of the regression analysis after the demographic covariates. Rank was consistently associated with family functioning in the hierarchical regression analysis, even after controlling for the influence of the demographic variables. Service members of higher rank (i.e., warrant and commissioned officers) reported better family functioning than enlisted personnel. This is consistent with recent research among predominantly Active Duty Army personnel that has found that lower rank predicts greater stress regarding deployment (Allen et al., 2011) and greater marital distress (J. R. Anderson et al., 2011). Similar findings that being of lower rank is associated with relationship dissolution were found in another study of service members in the U.K. (Rowe et al., 2013). However, it is likely that rank does not directly affect family functioning, but instead is associated with a variety of related stressors (Reger et al., 2007). For instance, a lower-ranking service member is more likely to be younger and married for fewer years and thus less experienced when it comes to family life and one’s military and civilian career

as well. Additionally, spouses of lower ranking service members may be less prepared to successfully manage deployment and reintegration (Booth et al., 2007). In a study of over 34,000 active duty Air Force members, lower ranking service members expected their spouses to have more problems coping with deployment than those from higher ranks (Spera, 2009). Additionally, lower-ranking personnel may also face financial pressures that higher-ranking service members do not (Booth et al., 2007). While rank itself is only amenable to change in terms of the service member's career trajectory, its significance in the present study suggests its relevance in designing prevention and intervention efforts.

Another significant variable, time home, was negatively associated with family functioning across all models, such that the shorter a service member had been home after deployment, the higher were his or her family functioning scores. Despite theoretical literature suggesting family functioning improves the longer a service member has been home, this effect was not an entirely surprising one and offers support for the idea of the "honeymoon" period that is mentioned anecdotally in several conceptual or review articles (e.g., Boyd et al., 2012; Devoe & Ross, 2012). MacDermid (2006), in a qualitative study of reservists and their spouses or parents that took place early in the course of the GWOT, found that about half of the partners or parents endorsed a "honeymoon" period in which well-being was initially high upon the service member's return, followed by a reduction and eventual improvement in well-being. Similarly, though family satisfaction and family functioning are separate but related constructs (e.g., Bandura, Caprara, Barbaranelli, Regalia, & Scabini, 2011; Olson, 2011), Knobloch and Theiss (2011) found that the longer a service member had been home post-deployment, the poorer the relationship satisfaction ratings given. Their study only focused on the first six months, while service members surveyed in this study had been home for up to 36 months.

A more recent study of reintegrating couples by Karakurt et al. (2013) may offer the beginnings of an explanation for the honeymoon phenomenon. Researchers cited a theme of "idealized closeness" occurring early in the process of reintegration, which referred to overwhelmingly positive evaluations of the relationship in the absence of any weaknesses. As

time wore on in this longitudinal study, “idealized closeness” was replaced by “realistic closeness,” which accounts for both positive and negative areas of a relationship. While the authors connect “idealized closeness” to the familiar “honeymoon” pattern identified in the literature (Pincus et al., 2001), they offer no further explanation as to why such positivity exists early on. Given that it was typically reservists in their study who expressed “idealized closeness,” it may be that the relief and joy service members feel upon being out of harm’s way, returning to their home country, and reuniting with loved ones spills over into the relational domain (Grzywacz & Marks, 2000), at least for awhile. Similarly, according to the Contextual Model (Boss, 2002; Wiens & Boss, 2006), such elevated, positive reports of family functioning in the immediate months following reunion may be attributable to a delay in the emergence of ambiguity that often follows such changes in a family system. Once the initial excitement settles, couples may then become more acutely aware of how each has been changed by deployment, leading to the emergence of ambiguity around identity and function of family members.

While rank and time home were significant predictors of family functioning, combat exposure, component, and cumulative length of deployments failed to account for significant variation in the outcome variable in all steps of the analysis. Each will be considered in the remainder of this section.

Few studies have addressed the direct effect of combat exposure on family functioning as it is often used as a control variable or moderator (e.g., Skopp et al., 2011). This was done in an attempt to gain understanding around the impact of combat exposure on family functioning when taking demographic and other military-related factors into account. However, in the hierarchical regression analysis, combat exposure failed to demonstrate a significant effect on family functioning. Bivariate analyses, on the other hand, revealed significant, positive zero-order correlations between combat exposure and both ambivalence variables, such that combat exposure was associated with greater ambivalence. This would be expected based on extant conceptual literature (e.g., Adler et al., 2011). For example, a combat-related deployment would presumably lend itself to more excitement than a routine, peace-keeping deployment

(Department of the Army, 2012). The resulting “transition from the exciting and meaningful work activities on deployment to the more routine activities in garrison may be associated with equal measures of relief and boredom” (Adler et al., 2011, p. 159). Furthermore, greater degrees of trauma incurred during the deployment (associated with later hyperarousal; Macy, Barry, & Noam, 2003) may translate into what Adler and colleagues (2011) call the “combat veteran’s paradox,” which refers to “the state in which service members are both happy to be home and at the same time a bit edgy and angry” (p. 160). Thus, it could be that combat exposure did not have a significant effect on family functioning because the analysis did not provide a test of ambivalence as a mediating variable.

An alternative reason for the lack of a significant effect may be that there were issues related to how this variable was defined; this was not meant to be a robust measure of the variety of traumatic events one could experience while on a combat mission. The variable in the present study, based on the question “Was your last deployment combat related? (i.e., in support of a combat mission as a combatant or noncombatant),” only gives limited information about the geographic location or purpose of the last deployment. Moreover, a review of the data revealed that service members deployed to the same location did not always agree as to whether their last deployment was in fact combat-related. For example, of the 47 service members who indicated Kuwait as the location of their last deployment, 17 classified it as combat-related and 30 did not. The study is limited by this obvious lack of conceptual clarity, yet this is a not uncommon occurrence in related literature, where combat exposure has been ill-defined and operationalized with some ambiguity (e.g., Beder et al., 2011; Gibbs, Martin, Kupper, & Johnson, 2007). Nonetheless, research suggests that combat exposure may impact PTSD, which then impacts family functioning (Taft et al., 2008); given the present study’s omission of PTSD as a variable, it is not entirely surprising combat exposure was not significant. Future research should continue to focus on the nuanced ways PTSD may connect combat exposure with family functioning, as well as provide better accounting for specific locations and combat-relatedness of deployments to more fully account for any potential differences among them.

Component also failed to predict family functioning. A number of other studies have also failed to detect differences by component in a number of outcomes, such as PTSD symptoms (Helmer et al., 2007), community reintegration difficulties (Sayer et al., 2011), and prevalence rates for mental health concerns (Hoge et al., 2006). Studies that have found significant differences among components on outcomes like PTSD symptomology (e.g., Thomas et al., 2010), which is closely related to family functioning (Dekel & Monson, 2010), have utilized more optimal forms of sampling that are less subject to a selection bias. In contrast, respondents in the present study volunteered themselves for participation, and it is possible this group had healthier families than non-responders. Additionally, while it is commonly noted that reserve component personnel have less access to support programming, a majority of respondents were attendees at Yellow Ribbon events. Having ameliorated one risk factor for these participants, overall differences in family functioning by component may have been diminished.

Finally, while cumulative length of deployments did share significant zero-order correlations with rank, combat exposure, component, and time home, the variable was not a significant predictor of family functioning in the hierarchical regression model. This is in contrast to conceptual and theoretical literature identifying potential cascades (Masten, 2013) or spirals of distress (Lester, 2012) that continue to spill over onto subsequent deployment cycles. Some notable studies (e.g., Chandra, Lara-Cinisomo, Jaycox, Tanielian, Burns, et al., 2010; Lester et al., 2010) that provide support for the spiral of distress idea were conducted in 2008 and earlier; it could be that, four or more years later, service members (and their families) in the present sample have become more accustomed to and prepared for the vicissitudes of deployment than earlier cohorts. In terms of the Contextual Model's (Boss, 2002) scheme contrasting normative, predictable stressor events with catastrophic, unexpected ones, deployment and reintegration may now fall squarely under the former category. As a result, more clarity around the stressor means less ambiguity and less threat to family functioning. The present study's results suggested that cumulative length of deployment may not be as significant a factor as it is made out to be in extant literature, at least when it comes to family functioning in general and from the service member's

perspective.

The Family's Internal Context

The Contextual Model (Boss, 2002) suggests a family's external context (i.e., that which *cannot* be controlled) impacts the internal context (i.e., that which *can* be controlled), which then influences the family's response to stress. Findings suggested that elements of the family's internal context, such as boundary ambiguity and ambivalence, affect family functioning in the post-deployment period over and above variation accounted for by demographic or military-related factors.

Boundary ambiguity. Early in the course of the current proliferation of military family research, Drummet et al. (2003) cited boundary ambiguity as a stressor facing families during deployment and reintegration. Boundary ambiguity is a "universal post-deployment phenomenon" (Baptist et al., 2011, p. 200) and, according to the Contextual Model (Boss, 2002), is a perceptual feature of the family's internal context that mediates the impact of the stressor situation (i.e., the service member's return) on family functioning. Family members must make sense of who is in or out of the family as they re-establish boundaries and roles and accomplish the tasks necessary for adaptive family functioning. While G. Bowen and J. Martin (2011) have recently noted the significance of Boss's contribution of boundary ambiguity in military family scholarship, it is surprising that so few studies have utilized such a relevant concept to make sense of families and their well-being during the post-deployment period. Three studies in particular, all qualitative, are among the only ones to utilize ambiguous loss and boundary ambiguity as a guiding framework for interpreting data (Baptist et al., 2011; Huebner et al., 2007; Maguire, Heinemann-LaFave, & Sahlstein, 2013). In all three, service members, spouses, and adolescent children have indicated experiencing confusion around who is in or out of one's family during the process of reintegration. This study is the first to quantitatively assess the phenomenon of boundary ambiguity in reintegrating families. Data revealed that the experience is indeed a part of the processes of reintegration and that family functioning suffers as the degree of boundary ambiguity increases.

As a social network, the family is responsible for satisfying a variety of “social needs or functions [for its members], including protection, caregiving, nurturance, play, exploration/learning, and affiliation” (Lewis, 2005, p. 12). Questions of family boundaries are at the heart of this process, since they concern “who, when, and how...members participate in family life” (Carroll, Olson, & Buckmiller, 2007, p. 210). This also involves roles in terms of answering the question “who will do what?” as well as “how?” Boundary ambiguity involves an incongruity between a member’s physical and psychological presence (Boss, 2002), which can lead to questions about family members’ functional capacities, capabilities, or roles. By extension, a form of boundary ambiguity may exist when a family member asks the following question of any other member: Is he or she in the family system the way that I expect or need him or her to be? Thus, the functional presence of family members, in terms of who is fulfilling what roles and responsibilities, remains unclear, and the aforementioned tasks of socialization normally undertaken by the family are impeded.

Consider the following scenario. A service member parent may “need” his children to act like children in order for him to consider himself, functionally, “father” (i.e., retain this as a stable identity). However, during the course of his deployment, his children have grown and matured. Upon the service member’s return, they may no longer act like “children.” In a way, if they cease to be children, then he ceases to be father, at least in the way that he was accustomed to. Ambiguity in his perception of both himself as *father* and his children as *children* will persist until these roles (and identities) can be renegotiated. According to symbolic interactionism, what we do in relationships (i.e., the roles we fulfill), is central to our sense of identity (Fine, 1993). When one’s identity is threatened as a result of re-entering a post-deployment family system that substantially differs from pre-deployment, distress (Thoits, 1983) and shame can result (L. S. Greenberg & Iwakabe, 2011), and can ripple through the family if not acknowledged and addressed. This father may no longer know how to act around his children, or respond to them in a developmentally appropriate way. He may experience confusion and hurt that comes out in maladaptive or ineffectual parenting behaviors or spills over into the marital relationship,

impacting overall family functioning. Indeed, L. S. Greenberg (2011) notes that unacknowledged shame “often leads to anger and attack to protect one’s identity” (p. 290).

In their study of coparental conflict post-divorce, Madden-Derdich, Leonard, and Christopher (1999) define boundary ambiguity as “an individual’s inability to redefine and reorganize family structure in a way that clearly removes the former partner from the spousal role” (p. 590). Similarly, upon the service member’s return to the family, he or she, along with other family members, must “redefine and reorganize family structure in a way that clearly” acknowledges each member for who they are at that point in time. Resentment is likely to build if a spouse pushes the service member too quickly into resuming certain responsibilities he may not yet be ready to resume. Alternatively, marital functioning could be disrupted if the service member pressures his spouse to return to her pre-deployment ways despite the fact that she excels in and enjoys her newly acquired responsibilities. Little imagination is required to appreciate the variety of negative impacts on family functioning that can stem from chronic boundary ambiguity. In sum, this study’s findings on the importance of boundary ambiguity quantitatively corroborate the existing qualitative literature on the subject, support the validity of the application of the Contextual Model (Boss, 2002) to a military population, and open the door for further such research.

Ambivalence. The identity question, “*who* am I?,” is implicit in the question “*where* or *how* do I fit in?” This question, central to the experience of boundary ambiguity, if unaddressed and unresolved, can lead to a second question—“do I *want* to fit in?” It is this question that captures the heightened, sometimes paralyzing distress of psychological ambivalence that often greets the service member upon his or her return. Psychological ambivalence refers to “the experience of contradictory emotions toward the same object” (Weigert, 1991, p. 21). The present study had one’s family and deployment-related experience in view, conceptualized as subjectively felt phenomena that are also influenced by contradictions in structured sets of social relations (Connidis & McMullin, 2002a). Service members in this sample appear to wrestle to some degree with the question of fitting in given that they must navigate the “greedy institutions” (Segal, 1986)

of the military and the family that are often in conflict with one another. They return home from deployments after having formed close relationships with battle buddies under exciting, high-stress conditions (Adler et al., 2011). They experience relief upon reuniting with loved ones, but after awhile, may realize difficulties around life at home—routines are different, children have grown, life has gone on without them. Spouses may have taken on new responsibilities or insist the service member immediately and fully re-engage despite not being ready to do so. Service members may prefer the fellowship of comrades over a spouse, since the latter may not want to hear “one more war story.” They may prefer the rigidity and simplicity of war and daily survival compared to the ambiguity, complexity, yet mundaneness of family life and relationships. Thus, some struggle to make sense of such conflicting thoughts and feelings, which may lead to greater distress that can ripple through the family system if not normalized and worked through.

This study showed just how important ambivalence is to family life; greater ambivalence endorsed by the service member predicted poorer family functioning, even after taking boundary ambiguity, military-related factors, and demographic covariates into account. The study also revealed that family ambivalence and deployment-related ambivalence likely have differential effects on the family. The former will be considered first, followed by the latter.

Data suggested family ambivalence was particularly important to family functioning during the course of reintegration. The Contextual Model maintains that ambivalence can lead to impairments in decision-making, coping, and other behaviors related to carrying out functions central to the family (Boss, 2002). A number of potential, specific routes exist whereby ambivalence may impact family functioning. Indeed, one may seek to resolve ambivalence through procrastination, denial of responsibility, or minimizing the importance of one’s family life or military career (van Harreveld, van der Pligt, & de Liver, 2009), thus limiting one’s ability to provide support for a spouse, nurture a child, communicate effectively, and so forth. Moreover, ambivalence is associated with personal discomfort and negative affect (Emmons & King, 1988; van Harreveld et al., 2009), which would directly impair one’s abilities regarding the McMaster model’s (Epstein et al., 1983) dimensions of affective responsiveness and affective involvement in

family functioning. For example, it may be difficult for a service member to express delight in his son's first home run if, moments earlier, this same son rejected his father's bid for affection because he is scared he will deploy again. Systems theory in general (Whitchurch & Constantine, 1993) and the stress generation model (Hammen, 2006) in particular, suggest that the son's responses could then feed back into, and thereby reinforce, the service member's ambivalence, creating additional stress and exacerbating problems in family functioning.

Though the experience of family ambivalence among service members seems somewhat intuitive, this study is the first to empirically assess family ambivalence during reintegration, though various authors have mentioned ambivalence as relevant to the deployment cycle. A number of them (e.g., Hall, 2008; Karakurt et al., 2013; Laser & Stephens, 2011; Palmer, 2008), in conceptual papers or literature reviews, note the phenomenon during the predeployment period, when couples and families are preparing to be separated for an extended period of time. Fewer researchers have found empirical evidence for ambivalence among family members during reintegration. Huebner and Mancini (2010) identify ambivalence among adolescents during deployment when the youth may feel good but feel bad for doing so given the service member parent's absence. They also noted ambivalence among adolescents during the post-deployment period, a time when they are likely to have mixed feelings about their parent's return, and made this phenomenon even more explicit in later work. It is surprising then that research has yet to explore ambivalence experienced by the service member (qualitatively or quantitatively) and place it within a testable model as this study has done.

Deployment-related ambivalence, on the other hand, failed to significantly predict family functioning, which partially may be a result of how the variable was formed. Item scores from the personal positive and personal negative subscales of the Post-Deployment Reintegration Scale (Blais et al., 2009) were transformed into a single score, using Griffin's formula (M. Thompson et al., 1995) identified in Chapter 3, to measure deployment-related ambivalence. Bivariate analysis of family functioning and these two subscales from the PDRS indicated no relationship between family functioning and personal positive scores, but a significant, negative relationship

with personal negative scores. This is consistent with Blais and colleagues' (2009) finding that negative attitudes, and not positive ones, were stronger predictors of domain-specific stressors across the three types of scales (personal, work, and family) in the PDRS. Thus, the nonsignificance of deployment-related ambivalence may be a result of measurement error in the personal positive items of the PDRS or, in fact, it could simply be unrelated to family functioning. Alternatively, while the Contextual Model (Boss, 2002) would suggest that such an individual experience would ultimately affect one's participation in relationships, it may be that service members are better at compartmentalizing such information in an attempt to prevent such negative spillover into other domains of functioning. Indeed, MacDermid (2006) found that the ability to compartmentalize was a strength in successful navigation of deployment cycle transitions; it has also been associated with reduced stress in male service members (Allen et al., 2011). Future research should assess precursors and sequelae of deployment-related ambivalence, as well as what psychological or other factors may moderate its relationship with family functioning.

Future Directions for Research

Women in the military. Results of the present study suggest a variety of specific directions for future research. First, the study revealed information about salient external contextual factors, such as sex, rank, and length of time home that may be helpful in future research endeavors. For example, women appeared to report poorer family functioning than men. Though there are cautions about its interpretation, future research could ask particular questions about the experiences of female service members as they engage in the processes of reintegration with their families. For instance, how similar or different are their experiences of reintegration compared to male service members? What micro (e.g., relationship processes) and macro-level (e.g., social structures) factors contribute to such differences? It would also be useful to know if the overall findings from the study generalize to female service members, given their limited representation in the study.

Military-related factors. Regarding the military-related contextual factors, rank and length of time home were significant predictors of family functioning even after boundary

ambiguity and ambivalence were added to the model. Further research could help ascertain what it is about rank that is associated with variation in family functioning (e.g., socioeconomic factors, family status, etc.). Qualitative research yielding rich, “thick description” (e.g., Stake, 2010) of the nuanced experiences of service members from across ranks may be particularly useful.

Since the results for time home were not in the expected direction, more work is needed to determine just how stressed these service members and their families are with respect to family functioning. In other words, has any damage of deployment on family relationships already been done by the time the post-deployment period comes around? This speaks to the need for longitudinal research in which pre-deployment characteristics of family functioning can be controlled for. Also, for whom exactly does family functioning continue to decline in the post-deployment period? More specific research employing specific variables related to the family’s external (e.g., heredity, family history, ethnicity) or internal context (e.g., shared narratives or the lack thereof regarding military involvement, family status and structure, etc.) may help provide refined results.

As mentioned earlier, future research should continue to employ clearer conceptualizations of the extent of combat exposure. Measures such as the Combat Experiences Scale (CES), which assesses exposure to specific events such as being fired upon or witnessing injury (e.g., Pietrzak & Southwick, 2011), or the similar Combat Exposure Scale (Keane et al., 1989) could be used to this end. Also, researchers may arrive at more valid family information related to combat experience through their use of robust, well-established measures of family functioning, such as the Family Assessment Device (Epstein et al., 1983), the Family Adaptability and Cohesion Evaluation Scale (FACES; Olson, 2011), or the Family Assessment Measure (FAM; Skinner, Steinhauer, & Sitarenios, 2000). Relatedly, post-traumatic stress symptomology should also be a primary consideration in future research related to family functioning; given its prevalence and importance to individual, family, and public health, it simply cannot be overlooked (e.g., Resnik, Plow, & Jette, 2009; Seal et al., 2009). This would include the use of robust measures to account for the spectrum of trauma-related symptoms as opposed to narrower

inquiries related simply to general diagnostic information (e.g., hyperarousal, avoidance, intrusion).

Boundary ambiguity. A number of important research implications spring from the results regarding boundary ambiguity. First of all, future research should determine if the boundary ambiguity measure used in the present study is equally useful across branches and ranks of the Armed Forces. Such research would also aid in making any refinements to this or other measures of boundary ambiguity. Second, what other factors cause or affect the experience of boundary ambiguity? Data suggested little overlap among military-related factors or demographics with boundary ambiguity. Perhaps contextual factors of family history, ethnicity, family values, and narratives about the military would impact the degree of boundary ambiguity in the post-deployment period.

It is also worth considering varieties of boundary ambiguity in reintegrating families, since that which is experienced by the service member may differ qualitatively from that experienced by a spouse or child. Indeed, Boss (2002) does not address the perception of boundary ambiguity from the perspective of the one who has returned to the family system, thus there is room for theoretical expansion here. Parsing the distinctions among boundary ambiguity as caused by loss (e.g., ambiguous loss or presence), intrusion (i.e., perception that individual or family boundaries are intruded upon by an outside party), or inclusion (i.e., the re-introduction of a family member into the system) may be a useful starting point in this regard (see Carroll et al., 2007).

Third, there was a significant bivariate correlation between time home and boundary ambiguity, prompting the question of how boundary ambiguity varies across time? The present study is limited in that it presented a single snapshot of family functioning and boundary ambiguity. In depth qualitative and quantitative research could more closely examine fluctuations in boundary ambiguity both within and across reintegrating families during the post-deployment period. It would also be useful to explore what naturally occurring, corrective processes are in these families that would allow them to reach a satisfying “new normal,” getting them out of maladaptive feedback loops, and restoring clear boundaries and roles assignments. This would

help determine to what extent prevention is sufficient in promoting family resilience, compared to the necessity of clinical intervention.

Ambivalence. The significance of ambivalence in the regression analysis provides an exciting impetus for further research on this particular aspect of family life. For starters, future efforts could be directed at creating, piloting, and refining a measurement of ambivalence for the reintegrating population. Second, in an effort to expand on the Contextual Model's (Boss, 2002) assertions that ambivalence may spring from chronic boundary ambiguity, it would be useful to identify mediators and moderators of this relationship. For instance, symbolic interactionism literature on identity (e.g., Fine, 1993) and related distress (e.g., Thoits, 1983) may be helpful starting points regarding mediation. Regarding moderation, the concept of differentiation of self (Kerr & M. Bowen, 1988) may be useful to see if those who can take a more confident "I-position" (i.e., maintain a stable sense of self despite emotional pressure from others; Skowron, 2000) are less susceptible to ambivalence in the wake of boundary ambiguity.

In the same vein, just as results of the regression analysis showed that ambivalence accounted for variation in family functioning over and above that attributed to boundary ambiguity, research should be directed at what mediates and moderates the relationship between ambivalence and family functioning. While Boss (2002) is explicit that ambivalence may block coping and immobilize responses, she fails to identify a possible mechanism. Paley et al. (2013) suggest potential mediating pathways via the parental relationship, the couple relationship, and co-parenting processes. It could be that ambivalence in the service member contributes to detachment from the couple relationship, creating stress that could spill over into the child subsystem as well as affect general functions such as problem-solving and role allocation. Other possible avenues may come from related literature on attitudinal ambivalence (Conner & Armitage, 2008), behavioral inhibition (Pennebaker, 1985), coping strategies (van Harreveld et al., 2009), and stress generation (Hammen, 2006).

Finally, given the gendered organization of much of military (Howard & Prividera, 2004) and family life (Goldner, 1988), it is very likely female service members experience these

phenomenon differently than their male counterparts. Being a part of both the civilian and military worlds is not easy for a male service member, but it is arguably more difficult for a female, who may experience much more tension around her roles in both places. Since sex failed to reach significance once the ambivalence variables were added to the model, research could explore the connection between sex and ambivalence more closely; qualitative work would be particularly helpful in this regard.

Future Directions for Prevention and Intervention

Data suggested a variety of factors were salient to family functioning that can help tailor prevention and intervention efforts. The external contextual factors such sex and rank provide clues as to particular groups of service members that may be a focus of effective prevention efforts, while the internal contextual factors suggest particular targets for therapeutic intervention. What follows are several specific applications for prevention and intervention.

Targeting at-risk groups. First, results suggested that a number of specific groups may benefit from early prevention efforts. Sex was a significant variable in the regression model, indicating that females reported poorer family functioning than males did. Special attention should be paid to the vulnerabilities and resilience of female service members as it appears they may not experience reintegration the same way their male counterparts do. Prevention efforts could be aimed at returning female service members to prepare them and their families for the stressors faced during the post-deployment period. Service members of lower rank were found to have lower family functioning scores than officers. Given this information, prevention efforts related to reintegration preparation or family support could target enlisted service members as they prepare to return home. Most notably for the majority of the present sample, the Yellow Ribbon Reintegration Program, which offers programming throughout the deployment cycle, could provide modules that address the unique needs and stressors of females and lower-ranking personnel in the reserve component as opposed to more general programming options.

Relationship psychoeducation. A second point of application involves the dissemination of knowledge around the course of relationships in the post-deployment period, with particular

respect to how boundary ambiguity and ambivalence may play out in the relationship. It behooves service members and their partners to hold reasonable expectations of the emotional and relational ups and downs that await them during the course of reintegration (Knobloch, Ebata, McGlaughlin, & Ogolsky, 2013), including awareness of the likely experience of boundary ambiguity and ambivalence and how these relate to family functioning. The research of Karakurt et al. (2013) among Reserve couples showed that some couples initially experienced a sense of idealized closeness in which weaknesses were omitted from an evaluation of the relationship. Maintaining such rose-colored perceptions could undoubtedly lead to a greater sense of dissatisfaction or disillusionment once the novelty of the post-deployment period wears off. For the service member and partner about to reunite, awareness of such relationship processes before the actual reunion could give couples pause and allow them time to reconsider their expectations for the relationship. Being made aware of the ebbs and flows of post-deployment relationships could allow military families to appreciate the experience of closeness and relief, while learning what they can do to maintain such a sense of cohesion in the midst of emotional flux.

Prevention efforts could involve disseminating information about the course of relationships in the post-deployment period, boundary ambiguity, and ambivalence via military briefings as service members prepare to return home. Or, information could be posted in a number of places online, such as the Military One Source clearinghouse website (<http://www.militaryonesource.mil>), which provides a wealth of information for service members and their families as well as brief counseling. One significant benefit of this service is that it removes geographic distance as a barrier. This knowledge could also be disseminated through the Army's existing network of Family Readiness Groups or other volunteer-based sources of support and information. Workshops or seminars preparing family members for reintegration could also serve as platforms for communicating this information, such as the family components of the U.S. Army's Master Resilience Training (Griffith & West, 2013; Reivich, Seligman, & McBride, 2011). Another such example is the Army's clergy-led Strong Bonds program for couples and families that focuses on relationship enhancement (Markman & Rhoades, 2012); such

information could easily be integrated into a larger program to foster relational strengths in preventive fashion. Clinicians working preventively with couples and families could assist with this process in simply making this information known throughout therapy sessions with non-deployed family members should they be seen during the deployment, and then with the entire family once the service member returns.

Relationship intervention. Third, more specifically related to family functioning and intervention, practitioners should inquire of service members and family members presenting for therapy about how one or more deployments have affected family organization, responsibilities, and roles. Gambardella (2008) has written about her application of role-exit theory and its relationship to marital discord in a military family counseling situation. Given that roles are a dimension of the McMaster Model of Family Functioning (Epstein et al., 1983), this model could be utilized as a framework for assessing specific processes related to roles as well as family functioning overall. Structural Family Therapy (SFT) may also be well-suited for reorganizing family structure with its emphasis on subsystems and the maintenance of healthy, clear boundaries (Minuchin, 1974). Visual “maps” of the family’s structure used in SFT (Minuchin, 1974) may help families become aware of how boundaries function in the home and highlight the consequences of boundary ambiguity. Genograms (McGoldrick & Gerson, 1986) also visually depict the constellation of family relationships and can be used to highlight patterns of closeness, distance, or cut-off. Experiential techniques like family sculpting (Simon, 1972) could also be employed to help family members gain a deeper level of awareness as to how others perceive their availability, or lack thereof, in the family system. Additionally, families can be helped to become aware of how their well-intentioned adaptations to deployment may result in confusion around boundaries that impedes the family fulfilling its necessary functions. All family members will have to work through any emotional reactivity that arises during the process. Clinicians could utilize ideas from Emotionally Focused Couples Therapy (EFCT; Susan M. Johnson, 2004) and Emotionally Focused Family Therapy (Susan M Johnson, 2008) to help partners and children see and appreciate the vulnerability underneath the volatility as they rebuild trust in the

post-deployment period.

Addressing ambivalence. Finally, results also suggested service members experience ambivalence about their families and that this is negatively related to family functioning. Prevention efforts, such as the aforementioned Strong Bonds program, could be aimed at helping service members, as well as their significant others, become aware of the likely experience of ambivalence in attempt to begin cultivating adaptive responses and coping skills. If even service members and partners knew this may be a part of their reintegration experience, they would be less likely to be shaken, shamed, or distressed by the experience. Practitioners specializing in intervention would be wise to explore service member or partner ambivalence that would likely be present in couples presenting for therapy. Aside from asking general questions to probe for the experience, two therapeutic modalities in particular offer unique ways of addressing ambivalence. The motivational interviewing approach normalizes ambivalence and requires making it explicit and even heightening it in order to help someone move past inaction into action (W. Miller & Rollnick, 2002). Erbes, Polusny, MacDermid, and Compton (2008) describe an application of motivational interviewing in the context of couple therapy with combat veterans.

Alternatively, Internal Family Systems (IFS) therapy might conceptualize a significant degree of ambivalence as the inability of a core Self to manage the contradictory desires or feelings among two or more of a person's "parts" (Schwartz, 1997). This modality of therapy would offer clients a unique way of attuning to disparate parts of themselves (i.e., the part that is positive toward the family and the other that is not) and in their partner, enhancing compassion and curiosity toward both self and other, and coming to emergent solutions in the process of resolving a personal or interpersonal impasse. IFS would also be useful for helping individual service members resolve, or at least become more comfortable with, their own ambivalence related to deployment experiences. Finally, EFCT (Susan M. Johnson, 2004) may also be useful here once again, as it would provide similar opportunities for couples to explore and accept potentially vulnerable emotions like sadness or fear that may underlie ambivalent positions. Systemically, it would be easy for entrenched ambivalence to become an organizing principle for

a military family (Goolishian & H. Anderson, 1987); thus, the systems-oriented interventions discussed here would be ideally suited to interrupt such a feedback cycle in the family.

Limitations

A number of limitations are evident in the study. First, while secondary data analysis affords efficient use of valuable data (Hofferth, 2005), the researcher is limited in the conceptualization of variables and presented with sampling difficulties. Multiple regression analyses assume that variables are measured without error, a highly unlikely assumption in general, but especially so when variables are conceptualized within the constraints of secondary data. The variable combat exposure, for instance, was measured by proxy with the question of whether or not the last deployment was combat-related. Any number of regions around the globe can be designated as combat-related despite being many miles away from significant threat. Thus, the study was unable to make use of the variety of measures to assess the extent of actual combat exposure that would have provided more nuance to the results. Other measurement issues include the post hoc formulation of the ambivalence variables based on items from the PDRS, a measure that was not explicitly designed to measure such a construct. Additionally, there is difficulty defining deployment consistently in military family scholarship and this dataset is no exception. Though a definition was offered in the survey itself, it is reasonable to conclude there may be a lack of precision around the dates that service members were gone given the variety of lengths of the last deployment, which ranged from one to 24 months ($M = 10.97$, $SD = 3.12$). Still, variables used in the present study represented sufficiently proximate measures of their respective constructs.

Second, a related limitation to using this particular secondary dataset has to do with the number of informants. Though it is certainly ideal to employ data from multiple family members in research on family functioning, only data from service members were utilized in the present study. Inherent in the study of “the family,” however, is a dialectic between the perspective of the individual and the family as a larger entity. Boss (2002) is adamant that both perspectives are needed. Elsewhere, she notes the danger of emphasizing a family’s shared perception of a stressor

in terms of a failure to pay attention to power and other such differences in a family (Boss, 1992); thus, every individual family member's perceptions of phenomena matter, from the most powerful to the least. In the same vein, symbolic interactionism, one of the conceptual frameworks from which family stress theory emerged (G. Bowen et al., 2013), suggests that if an individual perceives or defines something as real, then it is real in its consequences (LaRossa & Reitzes, 1993). Indeed, Filsinger (1983) points out that, "While self-reports may be subject to motivational distortion, the data reflect the perceptions of the individual reporting them. Those perceptions may be extremely important in understanding the dynamics of family life" (p. 153). Thus, the use of only one informant should not so thoroughly undermine any of the study's conclusions so as to invalidate them or its contributions to the CMFS. While future family reintegration research should strive for multiple informants, the nascent state of this topic can still profit from studies, such as this one, based on the self-report of a single individual.

Third, the sample was largely homogenous in terms of race, gender, and military branches and components represented, potentially limiting generalizability. For instance, females comprise 14.5% of Active Duty and 18% of Guard and Reserve service members (DUSD, 2012), but in the present study females represented 6.6% of the overall sample and are thus under-represented; however, it is likely that a more balanced sample would yield similar, if not stronger, results than were found in this study. Racially, just less than one third of Active Duty and around 24% of Guard and Reserve personnel identify as a minority (DUSD, 2012), while in the present study non-White participants were also under-represented, comprising only 14.5% of the sample. Data from a more racially balanced sample may yield different results. In a similar vein, the data were gathered largely from a convenience sample of Guard or Reserve service members attending family support events and under no compulsion to complete the survey. Perhaps those who took the time to complete the survey had better family functioning and thus less reservations about answering intrusive questions. Additionally, it may be that reservists, by virtue of straddling civilian and military worlds, experience more ambivalence than their active duty counterparts; such ambivalence may not be as strongly related to family functioning among active personnel. It

is unknown how characteristics of those who completed the survey differ from those who did not, limiting generalizations to the larger population of military personnel. Despite this limitation, the study's results are still noteworthy for a large segment of our nation's Armed Forces.

Fourth, the data are cross-sectional, which prevents testing proper causal mechanisms. Hierarchical regression analysis does allow for the identification of the influence of variables over and above other variables that are considered causally prior based on theory and research (Keith, 2005). Path models can be produced with this type of analysis that reflect "weak causal ordering" (Keith, 2005, p. 215), which basically means that if there is indeed a cause and effect relationship between boundary ambiguity and family functioning, for example, it would be in the direction of boundary ambiguity preceding family functioning in the present study. However, longitudinal research would be required to make any claims of causality.

Finally, there may be specification errors inherent in the hierarchical regression model. Specification refers to ensuring that the researcher has accounted for all the relevant independent variables that may predict an outcome variable (Cohen et al., 2003). For instance, there were no controls for pre-deployment levels of family functioning available in the larger dataset. It cannot be assumed that demographics and military-related factors or deployment in general are responsible for family functioning scores, thus other causes are likely. Similarly, the study did not include PTSD as a variable of interest since few respondents indicated receiving the diagnosis ($n = 20$), though this is a likely experience for up to 30% or more of Guard soldiers alone returning from combat zones (Thomas et al., 2010). As such, excluding such a variable may entail a specification error in the regression model. Future research should incorporate robust measures of post-traumatic stress symptomology to better account for variation in family functioning, as well as consider a number of additional independent and dependent variables such as child behavior problems, marital quality, and parenting satisfaction, among others.

Conclusion

At the time of writing, there are around 60,000 U.S. troops deployed to Afghanistan alone (Whitlock, 2013, September 13) and tens of thousands more serving around the globe, all of

whom must come home at some point and negotiate a “new normal” in their family relationships. There are also hundreds of thousands more who have served their country as part of Operations Iraqi Freedom, New Dawn, and Enduring Freedom and have already rejoined their families, a process easily fraught with complications, especially if the service member has incurred one of the “signature injuries” (Department of Defense Task Force on Mental Health, 2007) of these conflicts—PTSD or traumatic brain injury. Utilizing the Contextual Model of Family Stress (Boss, 2002) as a framework, this study was the first to test the effects of demographic covariates, military-related factors, boundary ambiguity, and ambivalence on family functioning. Sex was revealed as a significant factor in reports of family functioning, as was service member rank and the length of time home post-deployment. Results also lent support to the Contextual Model’s (Boss, 2002) core propositions that boundary ambiguity and ambivalence are highly significant to family functioning in the face of stress. Knowing that stress can be weathered and family suffering is not inevitable offers a degree of hope to military families who have and will encounter such a transition. These results suggested the continued viability of the Contextual Model of Family Stress (Boss, 2002) to guide future military family scholarship and to lay the foundation for specific ideas that can strengthen the resilience and ameliorate the vulnerabilities of our nation’s military families.

References

- Adler, A., Bliese, P., McGurk, D., Hoge, C., & Castro, C. (2005). Battlemind debriefing and battlemind training as early interventions with soldiers returning from Iraq: Randomization by platoon. *Psychiatric Quarterly*, *76*, 928–940. doi:10.1037/a0016877
- Adler, A., Huffman, A., Bliese, P., & Castro, C. (2005). The impact of deployment length and experience on the well-being of male and female soldiers. *Journal of Occupational Health Psychology*, *10*, 121–137. doi:10.1037/1076-8998.10.2.121
- Adler, A., Zamorski, M., & Britt, T. (2011). The psychology of transition: Adapting to home after deployment. In A. Adler, P. Bliese, & C. Castro (Eds.), *Deployment psychology*. Washington, D.C.: American Psychological Association.
- Allen, E., Rhoades, G., Stanley, S., & Markman, H. (2011). On the home front: Stress for recently deployed Army couples. *Family process*, *50*, 235–247. doi:10.1111/j.1545-5300.2011.01357.x
- Amen, D. G., Jellen, L., Merves, E., & Lee, R. E. (1988). Minimizing the impact of deployment separation on military children: Stages, current preventive efforts, and system recommendations. *Military Medicine*, *153*, 441–446.
- American Psychological Association Presidential Task Force on Military Deployment Services for Youth Families and Service Members. (2007). *The psychological needs of U.S. military service members and their families: A preliminary report*. Washington, D.C.: American Psychological Association.
- Anderson, J. R., Johnson, M. D., Goff, B. N., Cline, L. E., Lyon, S. E., & Gurss, H. (2011). Factors that differentiate distressed and nondistressed marriages in Army soldiers. *Marriage & Family Review*, *47*, 459–473. doi:10.1080/01494929.2011.619301
- Andres, M. D. & Moelker, R. (2011). There and back again: How parental experiences affect children's adjustments in the course of military deployments. *Armed Forces & Society*, *37*, 418–447. doi:10.1177/0095327X10390461

- Asbury, E. T. & Martin, D. (2012). Military deployment and the spouse left behind. *The Family Journal, 20*, 45–50. doi:10.1177/1066480711429433
- Bandura, A., Caprara, G. V., Barbaranelli, C., Regalia, C., & Scabini, E. (2011). Impact of family efficacy beliefs on quality of family functioning and satisfaction with family life. *Applied Psychology, 60*, 421–448. doi:10.1111/apps.2011.60.issue-3
- Baptist, J. A., Amanor-Boadu, Y., Garrett, K., Goff, B. S. N., Collum, J., Gamble, P., . . . Wick, S. (2011). Military marriages: The aftermath of Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) deployments. *Contemporary Family Therapy, 33*, 199–214. doi:10.1007/s10591-011-9162-6
- Beder, J., Coe, R., & Sommer, D. (2011). Women and men who have served in Afghanistan/Iraq: Coming home. *Social Work in Health Care, 50*, 515–526. doi:10.1080/00981389.2011.554279
- Black, W. G. (1993). Military-induced family separation: A stress reduction intervention. *Social Work, 38*, 273–280.
- Blais, A., Thompson, M., & McCreary, D. (2009). The development and validation of the Army Post-Deployment Reintegration Scale. *Military Psychology, 21*, 365–386. doi:10.1080/08995600902914727
- Blaisure, K. R., Saathoff-Wells, T., Pereira, A., MacDermid Wadsworth, S. M., & Dombro, A. L. (2012). *Serving military families in the 21st century*. New York, NY: Routledge Academic.
- Booth, B., Segal, M., & Bell, C. B. (2007). *What we know about Army families: 2007 update*. Fairfax, VA: ICF International.
- Boss, P. (1992). Primacy of perception in family stress theory and measurement. *Journal of Family Psychology, 6*, 113–119. doi:10.1037/0893-3200.6.2.113
- Boss, P. (2002). *Family stress management: A contextual approach*. Thousand Oaks, CA: Sage Publications.
- Boss, P. (2007). Ambiguous loss theory: Challenges for scholars and practitioners. *Family Relations, 56*, 105–111. doi:10.1111/j.1741-3729.2007.00444.x

- Boss, P. & Greenberg, J. (1984). Family boundary ambiguity: A new variable in family stress theory. *Family Process*, 23, 535–546. doi:10.1111/j.1545-5300.1984.00535.x
- Bowen, G. & Martin, J. (2011). The resiliency model of role performance for service members, veterans, and their families: A focus on social connections and individual assets. *Journal of Human Behavior in the Social Environment*, 21, 162–178.
doi:10.1080/10911359.2011.546198
- Bowen, G., Martin, J., & Mancini, J. (2013). The resilience of military families: Theoretical perspectives. In M. Fine & F. Fincham (Eds.), *Handbook of family theories: A content-based approach* (pp. 417–427). New York, NY: Routledge.
- Bowling, U. B. & Sherman, M. D. (2008). Welcoming them home: Supporting service members and their families in navigating the tasks of reintegration. *Professional Psychology: Research and Practice*, 39, 451–458. doi:10.1037/0735-7028.39.4.451
- Boyd, M. A., Bradshaw, W., & Robinson, M. (2012). Mental health issues of women deployed to Iraq and Afghanistan. *Archives of Psychiatric Nursing*, 1–13. Advance online publication.
doi:10.1016/j.apnu.2012.10.005
- Breckler, S. (1994). A comparison of numerical indexes for measuring attitude ambivalence. *Educational and Psychological Measurement*, 54, 350–365.
doi:10.1177/0013164494054002009
- Breunlin, D. (1989). Clinical implications of oscillation theory: Family development and the process of change. In C. Ramsey (Ed.), *Family systems in medicine* (pp. 135–149). New York, NY: Guilford.
- Campbell, S. & Renshaw, K. (2012). Distress in spouses of Vietnam veterans: Associations with communication about deployment experiences. *Journal of Family Psychology*, 26, 18–25.
doi:10.1037/a0026680
- Card, N., Bosch, L., Casper, D., Wiggs, C., Hawkins, S., Schlomer, G., & Borden, L. (2011). A meta-analytic review of internalizing, externalizing, and academic adjustment among

- children of deployed military service members. *Journal of Family Psychology*, *25*, 508–520. doi:10.1037/a0024395
- Carroll, J. S., Olson, C. D., & Buckmiller, N. (2007). Family boundary ambiguity: A 30-year review of theory, research, and measurement. *Family Relations*, *56*, 210–230. doi:10.1111/j.1741-3729.2007.00453.x
- Castaneda, L. W. & Harrell, M. C. (2009). *Deployment experiences of Guard and Reserve families: Implications for support retention*. Santa Monica, CA: RAND Corporation.
- Chandra, A., Lara-Cinisomo, S., Jaycox, L., Tanielian, T., Burns, R., Ruder, T., & Han, B. (2010). Children on the homefront: The experience of children from military families. *Pediatrics*, *125*, 16–25. doi:10.1542/peds.2009-1180
- Chandra, A., Lara-Cinisomo, S., Jaycox, L., Tanielian, T., Han, B., Burns, R., & Ruder, T. (2011). *Views from the homefront: The experiences of youth and spouses from military families*. Santa Monica, CA: RAND Corporation.
- Chandra, A., Martin, L., Hawkins, S., & Richardson, A. (2010). The impact of parental deployment on child social and emotional functioning: Perspectives of school staff. *Journal of Adolescent Health*, *46*, 218–223. doi:10.1016/j.jadohealth.2009.10.009
- Chapin, M. (2011). Family resilience and the fortunes of war. *Social Work in Health Care*, *50*, 527–542. doi:10.1080/00981389.2011.588130
- Chartrand, M., Frank, D., White, L., & Shope, T. (2008). Effect of parents' wartime deployment on the behavior of young children in military families. *Archives of Pediatric and Adolescent Medicine*, *162*, 1009–1014. doi:10.1001/archpedi.162.11.1009
- Cohen, J., Cohen, P., West, S. G., & Aiken, L. S. (2003). *Applied multiple regression/correlation analysis for the behavioral sciences* (3rd ed.). Mahway, NJ: Lawrence Erlbaum.
- Conner, M. & Armitage, C. J. (2008). Attitudinal ambivalence. In W. Crano & R. Prislin (Eds.), *Attitudes and attitude change* (pp. 261–286). New York, NY: Psychology Press.
- Connidis, I. A. & McMullin, J. A. (2002a). Ambivalence, family ties, and doing sociology. *Journal of Marriage and Family*, *64*, 594–601. doi:10.1111/j.1741-3737.2002.00594.x

- Connidis, I. A. & McMullin, J. A. (2002b). Sociological ambivalence and family ties: A critical perspective. *Journal of Marriage and Family*, *64*, 558–567.
doi:10.1111/j.1741-3737.2002.00558.x
- Cozza, S. & Lieberman, A. (2007). The young military child: Our modern Telemachus. *Zero to Three*, *27*, 27–33.
- Darwin, J. (2009). Families: “They also serve who only stand and wait”. *Smith College Studies in Social Work*, *79*, 433–442. doi:10.1080/00377310903131454
- DeCarlo, L. T. (1997). On the meaning and use of kurtosis. *Psychological Methods*, *2*, 292–307.
doi:10.1037/1082-989X.2.3.292
- Dekel, R. & Monson, C. M. (2010). Military-related post-traumatic stress disorder and family relations: Current knowledge and future directions. *Aggression and Violent Behavior*, *15*, 303–309. doi:10.1016/j.avb.2010.03.001
- Department of Defense Task Force on Mental Health. (2007). *An achievable vision: Report of the Department of Defense Task Force on Mental Health*. Falls Church, VA: Defense Health Board.
- Department of the Army. (2012). *Army 2020: Generating health and discipline in the force ahead of the strategic reset*. Retrieved from www.ria.army.mil/docs/GoldBook.pdf
- Devoe, E. R. & Ross, A. (2012). The parenting cycle of deployment. *Military medicine*, *177*(2), 184–190.
- Drummet, A. R., Coleman, M., & Cable, S. (2003). Military families under stress: Implications for family life education. *Family Relations*, *52*, 279. doi:10.1111/j.1741-3729.2003.00279.x
- Emmons, R. A. & King, L. A. (1988). Conflict among personal strivings: Immediate and long-term implications for psychological and physical well-being. *Journal of Personality and Social Psychology*, *54*, 1040–1048. doi:10.1037/0022-3514.54.6.1040
- Epstein, N. B., Baldwin, L. M., & Bishop, D. S. (1983). The McMaster Family Assessment Device. *Journal of Marital and Family Therapy*, *9*, 171–180.
doi:10.1111/j.1752-0606.1983.tb01497.x

- Erbes, C., Meis, L., Polusny, M., & Compton, J. (2011). Couple adjustment and posttraumatic stress disorder symptoms in National Guard veterans of the Iraq war. *Journal of Family Psychology, 25*, 479–487. doi:10.1037/a0024007
- Erbes, C., Polusny, M. A., MacDermid, S., & Compton, J. S. (2008). Couple therapy with combat veterans and their partners. *Journal of Clinical Psychology, 64*, 972–983. doi:10.1002/jclp.20521
- Evans, L., Cowlshaw, S., Forbes, D., Parslow, R., & Lewis, V. (2010). Longitudinal analyses of family functioning in veterans and their partners across treatment. *Journal of Consulting and Clinical Psychology, 78*, 611–622. doi:10.1037/a0020457
- Evans, L., Cowlshaw, S., & Hopwood, M. (2009). Family functioning predicts outcomes for veterans in treatment for chronic posttraumatic stress disorder. *Journal of Family Psychology, 23*, 531–539. doi:10.1037/a0015877
- Faber, A., Willerton, E., Clymer, S., MacDermid, S., & Weiss, H. (2008). Ambiguous absence, ambiguous presence: A qualitative study of military reserve families in wartime. *Journal of Family Psychology, 22*, 222–230. doi:10.1037/0893-3200.22.2.222
- Faul, F., Erdfelder, E., Lang, A.-G., & Buchner, A. (2007). G*Power 3: A flexible statistical power analysis program for the social, behavioral, and biomedical sciences. *Behavior research methods, 39*(2), 175–191.
- Field, A. (2009). *Discovering statistics using SPSS*. Los Angeles, CA: Sage.
- Filsinger, E. E. (1983). *Marriage and family assessment: A sourcebook for family therapy*. Beverly Hills, CA: Sage.
- Fine, G. A. (1993). The sad demise, mysterious disappearance, and glorious triumph of symbolic interactionism. *Annual Review of Sociology, 19*, 61–87. doi:10.1146/annurev.so.19.080193.000425
- Fingerman, K., Pitzer, L., Lefkowitz, E., Birditt, K., & Mroczek, D. (2008). Ambivalent relationship qualities between adults and their parents: Implications for the well-being of

- both parties. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, *63*, P362–P371. doi:10.1093/geronb/63.6.P362
- Flake, E., Davis, B., Johnson, P., & Middleton, L. (2009). The psychosocial effects of deployment on military children. *Journal of Developmental & Behavioral Pediatrics*, *30*, 271–278. doi:10.1097/DBP.0b013e3181aac6e4
- Gambardella, L. (2008). Role-exit theory and marital discord following extended military deployment. *Perspectives in Psychiatric Care*, *44*, 169–174. doi:10.1111/j.1744-6163.2008.00171.x
- Gewirtz, A., Erbes, C., Polusny, M., Forgatch, M., & DeGarmo, D. (2011). Helping military families through the deployment process: strategies to support parenting. *Professional Psychology: Research and Practice*, *42*, 56–62. doi:10.1037/a0022345
- Gibbs, D., Martin, S., Kupper, L., & Johnson, R. (2007). Child maltreatment in enlisted soldiers' families during combat-related deployments. *Journal of the American Medical Association*, *298*, 528–535. doi:10.1001/jama.298.5.528
- Glenn, D. M., Beckham, J. C., Feldman, M. E., Kirby, A. C., Hertzberg, M. A., & Moore, S. D. (2002). Violence and hostility among families of Vietnam veterans with combat-related posttraumatic stress disorder. *Violence and Victims*, *17*, 473–489. doi:10.1891/vivi.17.4.473.33685
- Goldner, V. (1988). Generation and gender: Normative and covert hierarchies. *Family Process*, *27*, 17–31. doi:10.1111/j.1545-5300.1988.00017.x
- Goolishian, H. A. & Anderson, H. (1987). Language systems and therapy: An evolving idea. *Psychotherapy: Theory, Research, Practice, Training*, *24*, 529–538.
- Gorbaty, L. R. (2009). *Family reintegration of reserve service members following a wartime deployment: A qualitative exploration of wives' experience* (Doctoral dissertation). Dissertations & Theses: Full Text. (Publication No. AAT 3322252)
- Greenberg, L. S. (2011). Is shame all there is? *Gestalt Review*, *15*, 287–295.

- Greenberg, L. S. & Iwakabe, S. (2011). Emotion-focused therapy and shame. In R. Dearing & J. Tangney (Eds.), *Shame in the therapy hour* (pp. 69–90). Washington, D.C., US: American Psychological Association. doi:10.1037/12326-003
- Griffith, J. & West, C. (2013). Master resilience training and its relationship to individual well-being and stress buffering among Army National Guard soldiers. *Journal of Behavioral Health Services & Research*, 1–15. Advance online publication. doi:10.1007/s11414-013-9320-8
- Grzywacz, J. G., Almeida, D. M., & McDonald, D. A. (2002). Work–family spillover and daily reports of work and family stress in the adult labor force. *Family Relations*, 51, 28–36. doi:10.1111/j.1741-3729.2002.00028.x
- Grzywacz, J. G. & Marks, N. F. (2000). Reconceptualizing the work–family interface: An ecological perspective on the correlates of positive and negative spillover between work and family. *Journal of Occupational Health Psychology*, 5, 111. doi:10.1037/1076-8998.5.1.111
- Gutek, B. A., Searle, S., & Klepa, L. (1991). Rational versus gender role explanations for work-family conflict. *Journal of Applied Psychology*, 76, 560–568. doi:10.1037/0021-9010.76.4.560
- Hall, L. K. (2008). *Counseling military families: What mental health professionals need to know*. New York, NY: Routledge.
- Hall, L. K. (2011). The military culture, language, and lifestyle. In R. Everson & C. Figley (Eds.), *Families under fire* (pp. 31–52). New York, NY: Routledge.
- Hammen, C. (2006). Stress generation in depression: reflections on origins, research, and future directions. *Journal of Clinical Psychology*, 62, 1065–1082. doi:10.1002/jclp.20293
- Hawley, D. R. & Geske, S. (2000). The use of theory in family therapy research: A content analysis of family therapy journals. *Journal of Marital and Family Therapy*, 26, 17–22. doi:10.1111/j.1752-0606.2000.tb00272.x
- Helmer, D. A., Rossignol, M., Blatt, M., Agarwal, R., Teichman, R., & Lange, G. (2007). Health and exposure concerns of veterans deployed to Iraq and Afghanistan. *Journal of*

- Occupational and Environmental Medicine*, 49, 475–480.
doi:10.1097/JOM.0b013e318042d682
- Heppner, P. P., Wampold, B. E., & Kivlighan, D. M. (2008). *Research design in counseling* (3rd ed.). Belmont, CA: Thomson Brooks/Cole.
- Hill, R. (1949). *Families under stress: Adjustment to the crises of war separation and reunion*. New York, NY: Harper & Brothers.
- Hill, R. (1958). Generic features of families under stress. *Social Casework*, 39, 139–150.
- Hochschild, A. (1997). *The second shift*. New York, NY: Avon.
- Hofferth, S. (2005). Secondary data analysis in family research. *Journal of Marriage and Family*, 67, 891–907. doi:10.1111/j.1741-3737.2005.00182.x
- Hoge, C., Auchterlonie, J., & Milliken, C. (2006). Mental health problems, use of mental health services, and attrition from military service after returning from deployment to Iraq or Afghanistan. *Journal of the American Medical Association*, 295, 1023–1032.
doi:10.1001/jama.295.9.1023
- Howard, J. & Prividera, L. (2004). Rescuing patriarchy or saving “Jessica Lynch”: The rhetorical construction of the American woman soldier. *Women and Language*, 27(2), 89–97.
- Huebner, A. J. (2009). Exploring processes of family stress and adaptation: An expanded model. In J. Mancini & K. Roberto (Eds.), *Pathways of human development: Explorations of change*. (pp. 227–242). Lanham, MD, US: Lexington Books/Rowman & Littlefield.
- Huebner, A. J. & Mancini, J. A. (2010). Resilience and vulnerability: The deployment experiences of youth in military families. Retrieved from www.fcs.uga.edu/cfd/docs/resilience_and_vulnerability.pdf%E2%80%8E
- Huebner, A. J., Mancini, J. A., Wilcox, R., Grass, S., & Grass, G. (2007). Parental deployment and youth in military families: Exploring uncertainty and ambiguous loss. *Family Relations*, 56, 112–122. doi:10.1111/j.1741-3729.2007.00445.x

- Huffman, A., Culbertson, S., & Castro, C. (2008). Family-friendly environments and US Army soldier performance and work outcomes. *Military Psychology, 20*, 253–270.
doi:10.1080/08995600802345162
- Huston, T. L., Caughlin, J. P., Houts, R. M., Smith, S. E., & George, L. J. (2001). The connubial crucible: Newlywed years as predictors of marital delight, distress, and divorce. *Journal of Personality and Social Psychology, 80*, 237–252. doi:10.1037/0022-3514.80.2.237
- Institute of Medicine. (2010). *Returning home from Iraq and Afghanistan: Preliminary assessment of readjustment needs of veterans, service members, and their families*. Washington, D.C.: The National Academies Press.
- Johnson, S. M. [Susan M.]. (2004). *The practice of emotionally focused couple therapy: Creating connection*. New York, NY: Routledge.
- Johnson, S. M. [Susan M.]. (2008). Couple and family therapy: an attachment perspective. In *Handbook of attachment: theory, research, and clinical applications (2nd ed.)*. (2nd ed., pp. 811–829). New York, NY, US: Guilford Press.
- Karakurt, G., Christiansen, A. T., Wadsworth, S. M., & Weiss, H. M. (2013). Romantic relationships following wartime deployment. *Journal of Family Issues*. Advance online publication. doi:10.1177/0192513X12470799
- Karney, B. R. & Crown, J. S. (2007). *Families under stress: An assessment of data, theory, and research on marriage and divorce in the military*. Santa Monica, CA: RAND Corporation.
- Karney, B. R. & Crown, J. S. (2011). Does deployment keep military marriages together or break them apart? Evidence from afghanistan and iraq. In S. M. MacDermid Wadsworth & D. Riggs (Eds.), *Risk and resilience in U.S. military families* (pp. 23–45). New York, NY: Springer. doi:10.1007/978-1-4419-7064-0
- Keane, T. M., Fairbank, J. A., Caddell, J. M., Zimering, R. T., Taylor, K. L., & Mora, C. A. (1989). Clinical evaluation of a measure to assess combat exposure. *Psychological Assessment: A Journal of Consulting and Clinical Psychology, 1*, 53–55.
- Keith, T. Z. (2005). *Multiple regression and beyond*. Boston, MA: Allyn & Bacon.

- Kerr, M. & Bowen, M. (1988). *Family evaluation*. New York, NY: Norton.
- Khaylis, A., Polusny, M. A., Erbes, C., Gewirtz, A., & Rath, M. (2011). Posttraumatic stress, family adjustment, and treatment preferences among National Guard soldiers deployed to OEF/OIF. *Military Medicine*, *176*, 126–131.
- Kiecolt, K. J., Blieszner, R., & Savla, J. (2011). Long-term influences of intergenerational ambivalence on midlife parents' psychological well-being. *Journal of Marriage and Family*, *73*, 369–382. doi:10.1111/j.1741-3737.2010.00812.x
- Knobloch, L., Ebata, A., McGlaughlin, P., & Ogolsky, B. (2013). Depressive symptoms, relational turbulence, and the reintegration difficulty of military couples following wartime deployment. *Health Communication*. Advance online publication. doi:10.1080/10410236.2013.800440
- Knobloch, L. & Theiss, J. (2011). Depressive symptoms and mechanisms of relational turbulence as predictors of relationship satisfaction among returning service members. *Journal of Family Psychology*, *25*, 470–478. doi:10.1037/a0024063
- Knox, J. & Price, D. H. (1999). Total force and the new American military family: Implications for social work practice. *Families in Society*, *80*, 128–136.
- Koenen, K., Stellman, J., Stellman, S., & Sommer, J. J. (2003). Risk factors for course of posttraumatic stress disorder among Vietnam veterans: A 14-year follow-up of American Legionnaires. *Journal of Consulting and Clinical Psychology*, *71*, 980–986. doi:10.1037/0022-006X.71.6.980
- Koenker, R. (1981). A note on studentizing a test for heteroscedasticity. *Journal of Econometrics*, *17*(1), 107–112.
- Lapp, C., Taft, L., Tollefson, T. T., Hoepner, A., Moore, K., & Divyak, K. (2010). Stress and coping on the home front: Guard and Reserve spouses searching for a new normal. *Journal of Family Nursing*, *16*, 45–67. doi:10.1177/1074840709357347
- LaRossa, R. & Reitzes, D. (1993). Symbolic interactionism and family studies. In P. Boss, W. J. Doherty, R. LaRossa, W. R. Schumm, & S. K. Steinmetz (Eds.), *Sourcebook of family*

- theories and methods: A contextual approach* (pp. 135–166). New York, NY: Plenum.
doi:10.1007/978-0-387-85764-0_6
- Laser, J. A. & Stephens, P. M. (2011). Working with military families through deployment and beyond. *Journal of Clinical Social Work, 39*(1), 28–38. doi:10.1007/s10615-010-0310-5
- Lester, P. (2012). War and military children and families: Translating prevention science into practice. *Journal of the American Academy of Child & Adolescent Psychiatry, 51*, 3–5.
doi:10.1016/j.jaac.2011.10.008
- Lester, P., Peterson, K. A., Reeves, J., Knauss, L., Glover, D., Mogil, C., . . . Beardslee, W. (2010). The long war and parental combat deployment: Effects on military children and at-home spouses. *Journal of the American Academy of Child & Adolescent Psychiatry, 49*, 310–320.
- Lettker, F. & Klein, D. (2004). Methodological issues in assessing ambivalences in intergenerational relations. In K. Pillemer & K. Luescher (Eds.), *Intergenerational ambivalences: New perspectives on parent-child relations in later life* (pp. 85–114). San Diego, CA: Elsevier.
- Lewis, M. (2005). The child and its family: The social network model. *Human Development, 48*, 8–27. doi:10.1159/000083213
- Lincoln, A., Swift, E., & Shorteno-Fraser, M. (2008). Psychological adjustment and treatment of children and families with parents deployed in military combat. *Journal of Clinical Psychology, 64*, 984–992. doi:10.1002/jclp.20520
- Luescher, K. (2004). Conceptualizing and uncovering intergenerational ambivalence. In K. Pillemer & K. Luescher (Eds.), *Intergenerational ambivalences: New perspectives on parent-child relations in later life* (pp. 23–62). San Diego, CA: Elsevier.
- Luescher, K. & Pillemer, K. (1998). Intergenerational ambivalence: A new approach for the study of parent-child relations in later life. *Journal of Marriage and Family, 60*, 413–425.
doi:10.2307/353858

- Mabe, P. A. (2009). War and children coping with parental deployment. In *Living and surviving in harm's way: A psychological treatment handbook for pre- and post-deployment of military personnel*. (pp. 349–370). New York, NY: Routledge/Taylor & Francis Group.
- MacDermid Wadsworth, S. M. (2013). Understanding and supporting the resilience of a new generation of combat-exposed military families and their children. *Clinical Child and Family Psychology Review*. Advance online publication. doi:10.1007/s10567-013-0155-x
- MacDermid Wadsworth, S. M. & Southwell, K. (2011). Military families: Extreme work and extreme “work-family”. *The Annals of the American Academy of Political and Social Science*, 638, 163–183. doi:10.1177/0002716211416445
- MacDermid, S. (2006). Multiple transitions of deployment and reunion for military families. Retrieved from www.cfs.purdue.edu/mfri/pages/research/DeployReunion.pdf
- MacDermid, S., Samper, R., Schwarz, R., Nishida, J., & Nyaronga, D. (2008). *Understanding and promoting resilience in military families*. West Lafayette, IN: Military Family Research Institute at Purdue University.
- MacLean, A. & Elder Jr, G. (2007). Military service in the life course. *Sociology*, 33, 175–196. doi:10.1146/annurev.soc.33.040406.131710
- Macy, R. D., Barry, S., & Noam, G. G. (2003). Threat and trauma: An overview. *New Directions for Youth Development*, 98, 11–28. doi:10.1002/yd.42
- Madden-Derdich, D., Leonard, S., & Christopher, F. (1999). Boundary ambiguity and coparental conflict after divorce: An empirical test of a family systems model of the divorce process. *Journal of Marriage and the Family*, 588–598. doi:10.2307/353562
- Maguire, K., Heinemann-LaFave, D., & Sahlstein, E. (2013). “To be so connected, yet not at all”: Relational presence, absence, and maintenance in the context of a wartime deployment. *Western Journal of Communication*. Advance online publication. doi:10.1080/10570314.2012.757797
- Malia, J. M. (2006). Basic concepts and models of family stress. *Stress, Trauma and Crisis: An International Journal*, 9, 141–160. doi:10.1080/15434610600853717

- Markman, H. J. & Rhoades, G. K. (2012). Relationship education research: Current status and future directions. *Journal of Marital and Family Therapy*, 38, 169–200.
doi:10.1111/j.1752-0606.2011.00247.x
- Marlowe, D., Van Vranken, E., Jellen, L., Knudson, K., & Segal, M. (1984). *The impact of deployment separation on Army families*. Washington, D.C.: Walter Reed Army Institute of Research.
- Masten, A. (2013). Competence, risk, and resilience in military families: Conceptual commentary. *Clinical Child and Family Psychology Review*, 16, 278–281.
doi:10.1007/s10567-013-0150-2
- Mateczun, J. & Holmes, E. (1996). Return, readjustment, and reintegration: The three R's of family reunion. In R. Ursano & A. Norwood (Eds.), *Emotional aftermath of the Persian Gulf War: Veterans, families, communities, and nations* (pp. 369–392). Washington, D.C.: American Psychiatric Press.
- Matsakis, A. (2007). *Back from the front: Combat trauma, love, and the family*. Brooklandville, MD: Sidran.
- McGoldrick, M. & Gerson, R. (1986). *Genograms in family assessment*. New York, NY: W.W. Norton.
- Miller, I., Ryan, C. E., Keitner, G. I., Bishop, D. S., & Epstein, N. B. (2000). The McMaster approach to families: Theory, assessment, treatment and research. *Journal of Family Therapy*, 22, 168–189. doi:10.1111/1467-6427.00145
- Miller, W. & Rollnick, S. (2002). *Motivational interviewing: Preparing people for change* (2nd ed.). New York, NY: Guilford.
- Milliken, C., Auchterlonie, J., & Hoge, C. (2007). Longitudinal assessment of mental health problems among active and reserve component soldiers returning from the Iraq war. *Journal of the American Medical Association*, 298, 2141–2148. doi:10.1001/jama.298.18.2141
- Minuchin, S. (1974). *Families and family therapy*. Cambridge, MA: Harvard University Press.

- Mmari, K., Roche, K. M., Sudhinaraset, M., & Blum, R. (2009). When a parent goes off to war: Exploring the issues faced by adolescents and their families. *Youth & Society, 40*, 455–475. doi:10.1177/0044118X08327873
- Monson, C. M., Taft, C., & Fredman, S. J. (2009). Military-related PTSD and intimate relationships: From description to theory-driven research and intervention development. *Clinical Psychology Review, 29*, 707–714. doi:10.1016/j.cpr.2009.09.002
- Mota, N., Medved, M., Wang, J., Asmundson, G., Whitney, D., & Sareen, J. (2012). Stress and mental disorders in female military personnel: Comparisons between the sexes in a male dominated profession. *Journal of Psychiatric Research, 46*, 159–167. doi:10.1016/j.jpsychires.2011.09.014
- National Military Family Association. (2005). Report on the cycles of deployment: An analysis of survey responses from April through September, 2005. Retrieved from <http://www.militaryfamily.org/assets/pdf/NMFACyclesofDeployment9.pdf>
- Norwood, A., Fullerton, C. S., & Hagen, K. (1996). Those left behind: Military families. In R. Ursano & A. Norwood (Eds.), *Emotional aftermath of the Persian Gulf War: Veterans, families, communities, and nations* (pp. 163–196). Washington, D.C.: American Psychiatric Press.
- Office of Research and Policy. (2012). *2012 Blue Star Families military lifestyle survey*. Retrieved from <http://bluestarfam.s3.amazonaws.com/42/65/a/11110/CompReport2012.pdf>
- Office of the Deputy Under Secretary of Defense (Military Community and Family Policy). (2012). 2011 Demographics profile of the military community. Retrieved from http://www.militaryonesource.mil/12038/MOS/Reports/2011_Demographics_Report.pdf
- Olson, D. (2011). FACES IV and the circumplex model: Validation study. *Journal of Marital and Family Therapy, 37*, 64–80. doi:10.1111/j.1752-0606.2009.00175.x
- Olson, D., Sprenkle, D. H., & Russell, C. (1979). Circumplex model of marital and family systems: I. Cohesion and adaptability dimensions, family types, and clinical applications. *Family Process, 18*, 3–28. doi:10.1111/j.1545-5300.1979.00003.x

- Paley, B., Lester, P., & Mogil, C. (2013). Family systems and ecological perspectives on the impact of deployment on military families. *Clinical Child and Family Psychology Review*. Advance online publication. doi:10.1007/s10567-013-0138-y
- Palmer, C. (2008). A theory of risk and resilience factors in military families. *Military Psychology, 20*, 205–217. doi:10.1080/08995600802118858
- Papernow, P. (2008). A clinician's view of "stepfamily architecture": Strategies for meeting the challenges. In J. Pryor (Ed.), *The international handbook of stepfamilies: Policy and practice in legal, research, and clinical environments* (pp. 423–454). Hoboken, NJ: John Wiley & Sons.
- Patterson, J. M. & Garwick, A. W. (1994). Levels of meaning in family stress theory. *Family Process, 33*, 287–304. doi:10.1111/j.1545-5300.1994.00287.x
- Pedhazur, E. J. (1997). *Multiple regression in behavioral research: Explanation and prediction* (3rd ed.). Belmont, CA: Wadsworth.
- Peebles-Kleiger, M. J. & Kleiger, J. H. (1994). Re-integration stress for Desert Storm families: Wartime deployments and family trauma. *Journal of Traumatic Stress, 7*, 173–194. doi:10.1002/jts.2490070203
- Pennebaker, J. W. (1985). Traumatic experience and psychosomatic disease: Exploring the roles of behavioural inhibition, obsession, and confiding. *Canadian Psychology, 26*, 82. doi:10.1037/h0080025
- Pietrzak, R., Goldstein, M., Malley, J., Rivers, A., Johnson, D., & Southwick, S. (2010). Risk and protective factors associated with suicidal ideation in veterans of Operations Enduring Freedom and Iraqi Freedom. *Journal of Affective Disorders, 123*, 102–107. doi:10.1016/j.jad.2009.08.001
- Pietrzak, R., Johnson, D., Goldstein, M., Malley, J., & Southwick, S. (2009). Psychological resilience and postdeployment social support protect against traumatic stress and depressive symptoms in soldiers returning from Operations Enduring Freedom and Iraqi Freedom. *Depression and Anxiety, 26*, 745–751. doi:10.1002/da.20558

- Pietrzak, R. & Southwick, S. M. (2011). Psychological resilience in OEF-OIF veterans: Application of a novel classification approach and examination of demographic and psychosocial correlates. *Journal of Affective Disorders, 133*, 560–568.
doi:10.1016/j.jad.2011.04.028
- Pillemer, K. (2004). Can't live with 'em, can't live without 'em: Mothers' ambivalence toward their adult children. In K. Pillemer & K. Luescher (Eds.), *Intergenerational ambivalences: New perspectives on parent-child relations in later life* (pp. 115–132). San Diego, CA: Elsevier.
- Pincus, S., House, R., Christenson, J., & Adler, L. (2001). The emotional cycle of deployment: A military family perspective. *US Army Medical Department Journal, 2*, 21–29.
- Pittman, J. & Orthner, D. K. (1988). Predictors of spousal support for the work commitments of husbands. *Journal of Marriage & Family, 50*, 335–348. doi:10.2307/352001
- Rabenhorst, M. M., Thomsen, C. J., Milner, J. S., Foster, R. E., Linkh, D. J., & Copeland, C. W. (2012). Spouse abuse and combat-related deployments in active duty Air Force couples. *Psychology of Violence*. Advance online publication. doi:10.1037/a0027094
- Reger, M. A., Etherage, J. R., Reger, G. M., & Gahm, G. A. (2007). Civilian psychologists in an Army culture: The ethical challenge of cultural competence. *Military Psychology, 20*, 21–35. doi:10.1080/08995600701753144
- Reivich, K., Seligman, M., & McBride, S. (2011). Master resilience training in the U.S. Army. *American Psychologist, 66*, 25–34. doi:10.1037/a0021897
- Resnik, L., Plow, M., & Jette, A. (2009). Development of CRIS: Measure of community reintegration of injured service members. *Journal of Rehabilitation Research and Development, 46*, 469. doi:10.1682/JRRD.2008.07.0082
- Riggs, S. & Riggs, D. (2011). Risk and resilience in military families experiencing deployment: The role of the family attachment network. *Journal of Family Psychology, 25*, 675–687. doi:10.1037/a0025286

- Rosen, L. N. & Durand, D. B. (1995). The family factor and retention among married soldiers deployed in Operation Desert Storm. *Military Psychology*, 7, 221.
doi:10.1207/s15327876mp0704_1
- Rossi, J. (2013). Statistical power analysis. In J. Schinka & W. Velicer (Eds.), *Handbook of psychology: Volume 2: Research methods in psychology* (pp. 71–108). Hoboken, NJ: John Wiley & Sons.
- Ross-Smith, A. & Chesterman, C. (2009). 'Girl disease': Women managers' reticence and ambivalence towards organizational advancement. *Journal of Management & Organization*, 15, 582–595. doi:10.5172/jmo.15.5.582
- Rowe, M., Murphy, D., Wessely, S., & Fear, N. T. (2013). Exploring the impact of deployment to Iraq on relationships. *Military Behavioral Health*, 1, 13–21.
doi:10.1080/21635781.2012.721060
- Ryan, C., Epstein, N., Keitner, G., Miller, I., & Bishop, D. (2005). *Evaluating and treating families: The McMaster model approach*. Philadelphia, PA: Brunner/Routledge.
- Saltzman, W., Lester, P., Beardslee, W., Layne, C., Woodward, K., & Nash, W. (2011). Mechanisms of risk and resilience in military families: Theoretical and empirical basis of a family-focused resilience enhancement program. *Clinical Child and Family Psychology Review*, 14, 213–230. doi:10.1007/s10567-011-0096-1
- Sayer, N. A., Frazier, P., Orazem, R. J., Murdoch, M., Gravely, A., Carlson, K. F., . . . Noorbaloochi, S. (2011). Military to civilian questionnaire: A measure of postdeployment community reintegration difficulty among veterans using department of veterans affairs medical care. *Journal of Traumatic Stress*, 1–11. Advance online publication.
doi:10.1002/jts.20706
- Sayer, N. A., Noorbaloochi, S., Frazier, P., Carlson, K., Gravely, A., & Murdoch, M. (2010). Reintegration problems and treatment interests among Iraq and Afghanistan combat veterans receiving VA medical care. *Psychiatric Services*, 61, 589–597.
doi:10.1176/appi.ps.61.6.589

- Sayers, S. L. (2011). Family reintegration difficulties and couples therapy for military veterans and their spouses. *Cognitive and Behavioral Practice, 18*, 108–119.
doi:10.1016/j.cbpra.2010.03.002
- Sayers, S. L., Farrow, V. A., Ross, J., & Oslin, D. W. (2009). Family problems among recently returned military veterans referred for a mental health evaluation. *Journal of Clinical Psychiatry, 70*, 163–170. doi:10.4088/JCP.07m03863
- Schumm, W., Bell, D. B., & Resnick, G. (2001). Recent research on family factors and readiness: Implications for military leaders. *Psychological Reports, 89*, 153–165.
doi:10.2466/PRO.89.5.153-165
- Schwartz, R. (1997). *Internal family systems therapy*. New York, NY: Guilford.
- Seal, K., Metzler, T., Gima, K., Bertenthal, D., Maguen, S., & Marmar, C. (2009). Trends and risk factors for mental health diagnoses among Iraq and Afghanistan veterans using Department of Veterans Affairs health care, 2002-2008. *American Journal of Public Health, 99*, 1651–1658. doi:10.2105/AJPH.2008.150284
- Segal, M. (1986). The military and the family as greedy institutions. *Armed Forces & Society, 13*, 9–38. doi:10.1177/0095327X8601300101
- Sevon, E. (2012). 'My life has changed, but his life hasn't': Making sense of the gendering of parenthood during the transition to motherhood. *Feminism & Psychology, 22*, 60–80.
doi:10.1177/0959353511415076
- Siegel, D. (2001). *The developing mind: How relationships and the brain interact to shape who we are*. New York, NY: Guilford.
- Siegel, D. (2007). *The mindful brain: Reflection and attunement in the cultivation of well-being*. New York, NY: Norton.
- Silverstein, L. B. (2003). Classic texts and early critiques. In *Feminist family therapy: Empowerment in social context*. (pp. 17–35). Washington, D.C.: American Psychological Association. doi:10.1037/10615-002

Simon, R. (1972). Sculpting the family. *Family Process, 11*, 49–57.

doi:10.1111/j.1545-5300.1972.00049.x

Skinner, H., Steinhauer, P., & Sitarenios, G. (2000). Family Assessment Measure (FAM) and process model of family functioning. *Journal of Family Therapy, 22*, 190–210.

doi:10.1111/1467-6427.00146

Skopp, N., Reger, M., Reger, G., Mishkind, M., Raskind, M., & Gahm, G. (2011). The role of intimate relationships, appraisals of military service, and gender on the development of posttraumatic stress symptoms following Iraq deployment. *Journal of Traumatic Stress, 24*, 277–286. doi:10.1002/jts.20632

Skowron, E. A. (2000). The role of differentiation of self in marital adjustment. *Journal of Counseling Psychology, 47*, 229–237. doi:10.1037//0022-0167.47.2.229

Snyder, D. & Mangrum, L. (2005). Approaches to prediction: Correlation, regression, and classification techniques. In D. Sprenkle & F. Piercy (Eds.), *Research methods in family therapy* (pp. 368–402). New York, NY: Guilford.

Spera, C. (2009). Spouses' ability to cope with deployment and adjust to Air Force family demands: Identification of risk and protective factors. *Armed Forces & Society, 35*, 286–306. doi:10.1177/0095327X08316150

Stake, R. (2010). *Qualitative research: Studying how things work*. New York, NY: Guilford.

Suitor, J., Gilligan, M., & Pillemer, K. (2011). Conceptualizing and measuring intergenerational ambivalence in later life. *The Journals of Gerontology: Series B: Psychological Sciences and Social Sciences, 66*, 769–781. doi:10.1093/geronb/gbr108

Tabachnick, B. G. & Fidell, L. S. (2007). *Using multivariate statistics* (5th ed.). Boston, MA: Allyn & Bacon.

Taft, C., Schumm, J., Panuzio, J., & Proctor, S. (2008). An examination of family adjustment among Operation Desert Storm veterans. *Journal of Consulting and Clinical Psychology, 76*, 648–656. doi:10.1037/a0012576

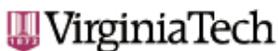
- Tanielian, T. & Jaycox, L. (Eds.). (2008). *Invisible wounds of war: Psychological and cognitive injuries, their consequences, and services to assist recovery*. Santa Monica, CA: RAND Corporation.
- Tapper, J. (2011, October 21). Obama announces complete drawdown of U.S. troops from Iraq by year's end. *ABC News*. Retrieved from <http://abcnews.go.com/blogs/politics/2011/10/obama-to-announce-complete-drawdown-of-u-s-troops-from-iraq-by-years-end/>
- Ternus, M. (2010). Support for adolescents who experience parental military deployment. *Journal of Adolescent Health, 46*, 203–206. doi:10.1016/j.jadohealth.2009.12.019
- Thoits, P. A. (1983). Multiple identities and psychological well-being: A reformulation and test of the social isolation hypothesis. *American Sociological Review, 48*, 174–187. doi:10.2307/2095103
- Thomas, J. L., Wilk, J. E., Riviere, L. A., McGurk, D., Castro, C., & Hoge, C. (2010). Prevalence of mental health problems and functional impairment among Active Component and National Guard soldiers 3 and 12 months following combat in Iraq. *Archives of General Psychiatry, 67*, 614–623. doi:10.1001/archgenpsychiatry.2010.54
- Thompson, L. & Walker, A. J. (1989). Gender in families: Women and men in marriage, work, and parenthood. *Journal of Marriage & Family, 51*, 845–871. doi:10.2307/353201
- Thompson, M., Zanna, M., & Griffin, D. (1995). Let's not be indifferent about (attitudinal) ambivalence. In R. Petty & J. Krosnick (Eds.), *Attitude strength: Antecedents and consequences* (pp. 361–386). Hillsdale, NJ: Lawrence Erlbaum Associates.
- Tucker, J., Sinclair, R., & Thomas, J. (2005). The multilevel effects of occupational stressors on soldiers' well-being, organizational attachment, and readiness. *Journal of Occupational Health Psychology, 10*, 276–299. doi:10.1037/1076-8998.10.3.276
- van Harreveld, F., van der Pligt, J., & de Liver, Y. (2009). The agony of ambivalence and ways to resolve it: Introducing the MAID model. *Personality and Social Psychology Review, 13*, 45–61. doi:10.1177/1088868308324518

- Warner, C., Appenzeller, G., Warner, C., & Grieger, T. (2009). Psychological effects of deployments on military families. *Psychiatric Annals*, *39*, 56.
doi:10.3928/00485713-20090201-11
- Weigert, A. (1991). *Mixed emotions: Certain steps toward understanding ambivalence*. Albany, NY: State University of New York Press.
- Whitchurch, G. G. & Constantine, L. L. (1993). Systems theory. In P. G. Boss, W. J. Doherty, R. LaRossa, W. R. Schumm, & S. K. Steinmetz (Eds.), *Sourcebook of family theories and methods: A contextual approach* (pp. 325–355). New York, NY: Plenum.
doi:10.1007/978-0-387-85764-0_14
- White House. (2011). Strengthening our military families: Meeting America's commitment. Retrieved from http://www.defense.gov/home/features/2011/0111_initiative/Strengthening_our_Military_%20January_2011.pdf
- White, C. J., de Burgh, H. T., Fear, N. T., & Iversen, A. C. (2011). The impact of deployment to Iraq or Afghanistan on military children: A review of the literature. *International Review of Psychiatry*, *23*, 210–217. doi:10.3109/09540261.2011.560143
- Whitlock, C. (2013, September 13). In Afghanistan drawdown, U.S. forced to take costly option in transporting military gear out. *The Washington Post*. Retrieved from http://www.washingtonpost.com/world/national-security/in-afghanistan-drawdown-us-forced-to-take-costly-option-in-transporting-military-gear-out/2013/09/12/6a5e260a-1bde-11e3-b4fb-944b778463f5_story.html
- Wiens, T. W. & Boss, P. (2006). Maintaining family resiliency before, during, and after military separation. In T. Britt, A. Adler, & C. Castro (Eds.), *Military life: The psychology of serving in peace and combat: The military family*. (Vol. 3, pp. 13–38). Westport, CT: Praeger Security International.
- Willerton, E., Schwarz, R., MacDermid Wadsworth, S. M., & Oglesby, M. (2011). Military fathers' perspectives on involvement. *Journal of Family Psychology*, *25*, 521–530.
doi:10.1037/a0024511

- Wong, M., McElwain, N., & Halberstadt, A. (2009). Parent, family, and child characteristics: Associations with mother- and father-reported emotion socialization practices. *Journal of Family Psychology, 23*, 452–463. doi:10.1037/a0015552
- Wood, S., Scarville, J., & Gravino, K. (1995). Waiting wives: Separation and reunion among Army wives. *Armed Forces & Society, 21*, 217–236. doi:10.1177/0095327X9502100204
- Yeatman, G. W. (1981). Paternal separation and the military dependent child. *Military Medicine, 146*, 320–322.

Appendix A

Virginia Tech Institutional Review Board Approval - Pilot Study



Office of Research Compliance
 Institutional Review Board
 2000 Kraft Drive, Suite 2000 (0497)
 Blacksburg, VA 24060
 540/231-4606 Fax 540/231-0959
 email irb@vt.edu
 website <http://www.irb.vt.edu>

MEMORANDUM

DATE: May 31, 2012
TO: Lydia I Marek
FROM: Virginia Tech Institutional Review Board (FWA00000572, expires May 31, 2014)
PROTOCOL TITLE: Reintegration Study Pilot
IRB NUMBER: 12-531

Effective May 30, 2012, the Virginia Tech Institutional Review Board (IRB) Chair, David M Moore, approved the New Application request for the above-mentioned research protocol.

This approval provides permission to begin the human subject activities outlined in the IRB-approved protocol and supporting documents.

Plans to deviate from the approved protocol and/or supporting documents must be submitted to the IRB as an amendment request and approved by the IRB prior to the implementation of any changes, regardless of how minor, except where necessary to eliminate apparent immediate hazards to the subjects. Report within 5 business days to the IRB any injuries or other unanticipated or adverse events involving risks or harms to human research subjects or others.

All investigators (listed above) are required to comply with the researcher requirements outlined at:

<http://www.irb.vt.edu/pages/responsibilities.htm>

(Please review responsibilities before the commencement of your research.)

PROTOCOL INFORMATION:

Approved As: **Expedited, under 45 CFR 46.110 category(ies) 6,7**
 Protocol Approval Date: **May 30, 2012**
 Protocol Expiration Date: **May 29, 2013**
 Continuing Review Due Date*: **May 15, 2013**

*Date a Continuing Review application is due to the IRB office if human subject activities covered under this protocol, including data analysis, are to continue beyond the Protocol Expiration Date.

FEDERALLY FUNDED RESEARCH REQUIREMENTS:

Per federal regulations, 45 CFR 46.103(f), the IRB is required to compare all federally funded grant proposals/work statements to the IRB protocol(s) which cover the human research activities included in the proposal / work statement before funds are released. Note that this requirement does not apply to Exempt and Interim IRB protocols, or grants for which VT is not the primary awardee.

The table on the following page indicates whether grant proposals are related to this IRB protocol, and which of the listed proposals, if any, have been compared to this IRB protocol, if required.

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Appendix B

Post-Pilot Survey Questions

POST-PILOT SURVEY QUESTIONS

State: _____

1. Were there any questions that were hard to understand?
 Yes No
 a. If yes, which ones?

2. Were there any instructions that were hard to understand?
 Yes No
 a. If yes, which ones?

3. Is there anything that you think is important that wasn't included in the survey?
 Yes No
 a. If yes, what?

4. Are you a Service Member Spouse/Partner of Service Member
 Teen of a Service Member

5. How long did it take you to complete the survey? _____ minutes

Appendix C

Recruitment Email

From: "Allen, Darrin W CIV (US)" [REDACTED]

Date: July 26, 2012 12:29:03 PM EDT

To: [REDACTED]

Cc: Lydia Marek [REDACTED] "Beaudry, Ruth L NAF (US)" [REDACTED]

Subject: Reunion and Reintegration Study

Hello 4-H State Liaisons and OMK Project Directors,

Each State that received an OMK Grant accepted the grant requirement to participate in the Reunion and Reintegration Study. This was discussed at the 4-H Military Partnership meeting in February.

We are ready to begin the process of implementing the study and wanted to give you background information and criteria regarding this study. The reason this study is being conducted is that it will help inform how Operation: Military Kids, 4-H and the military can better support geographically dispersed youth from military families during the reunion and reintegration phase of deployment in FY13 and beyond.

This study is targeted for active duty, guard, and reserve Service Members, Spouses and youth of all branches of service who are geographically dispersed and meet the following criteria:

- A. Service members who have deployed and returned home within the past 18 months
- B. Spouse/partner of a service member who has deployed and returned home within the past 18 months.
- C. Adolescent ages 13-18, with a parent or loved one who has deployed and returned home within the past 18 months.

To begin the study, a member of the Virginia Tech Family and Community Research Lab will be in touch with you within the next 10 days to discuss the study protocols; parental consent forms, how to distribute the surveys, and work through any IRB issues or any other questions you might have related to implementing this survey. It will be very important for you to promptly follow up on phone calls and emails from the Virginia Tech team. This will help ensure your state team is properly prepared to implement the surveys.

Your OMK State Team will be required to conduct 100 surveys with each target audience for a total of 300 surveys. You will be able to discuss the format your state would like to receive the survey in; hard copy or electronic. If you choose to use hard copy surveys 100 copies of each survey to be mailed to you along with postage paid returned envelopes.

Your military partners from the Guard and Reserve will be notified that you have received the surveys. I encourage you to begin briefing your various state and local team members so they are able to assist in identifying events and groups of military Service Members, Spouses, and youth who might complete surveys.

After you receive 100 of each survey for each of the target populations you can begin the process of getting them completed by the target audience as soon as you have cleared the process with your University IRB office. All completed surveys must be completed and returned to Virginia Tech using the return envelopes provided No Later than October 15, 2012.

If you have any questions regarding this evaluation initiative please don't hesitate to give me call.

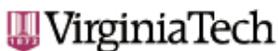
Vr

Darrin
National OMK Project Director

[REDACTED]
[REDACTED]

Appendix D

Virginia Tech Institutional Review Board Approval - Survey Implementation



Office of Research Compliance
 Institutional Review Board
 2000 Kraft Drive, Suite 2000 (0497)
 Blacksburg, VA 24060
 540/231-4606 Fax 540/231-0959
 email irb@vt.edu
 website <http://www.irb.vt.edu>

MEMORANDUM

DATE: June 28, 2012
TO: Lydia I Marek
FROM: Virginia Tech Institutional Review Board (FWA00000572, expires May 31, 2014)
PROTOCOL TITLE: Military Reintegration Study
IRB NUMBER: 12-614

Effective June 28, 2012, the Virginia Tech Institution Review Board (IRB) Chair, David M Moore, approved the New Application request for the above-mentioned research protocol.

This approval provides permission to begin the human subject activities outlined in the IRB-approved protocol and supporting documents.

Plans to deviate from the approved protocol and/or supporting documents must be submitted to the IRB as an amendment request and approved by the IRB prior to the implementation of any changes, regardless of how minor, except where necessary to eliminate apparent immediate hazards to the subjects. Report within 5 business days to the IRB any injuries or other unanticipated or adverse events involving risks or harms to human research subjects or others.

All investigators (listed above) are required to comply with the researcher requirements outlined at:

<http://www.irb.vt.edu/pages/responsibilities.htm>

(Please review responsibilities before the commencement of your research.)

PROTOCOL INFORMATION:

Approved As: **Expedited, under 45 CFR 46.110 category(ies) 7**
 Protocol Approval Date: **June 28, 2012**
 Protocol Expiration Date: **June 27, 2013**
 Continuing Review Due Date*: **June 13, 2013**

*Date a Continuing Review application is due to the IRB office if human subject activities covered under this protocol, including data analysis, are to continue beyond the Protocol Expiration Date.

FEDERALLY FUNDED RESEARCH REQUIREMENTS:

Per federal regulations, 45 CFR 46.103(f), the IRB is required to compare all federally funded grant proposals/work statements to the IRB protocol(s) which cover the human research activities included in the proposal / work statement before funds are released. Note that this requirement does not apply to Exempt and Interim IRB protocols, or grants for which VT is not the primary awardee.

The table on the following page indicates whether grant proposals are related to this IRB protocol, and which of the listed proposals, if any, have been compared to this IRB protocol, if required.

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Appendix E

Branch and Component Item

12. In what branch/component of the military do you (or did you) serve? Check one.

- | | |
|------------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Active Duty Army | <input type="checkbox"/> Active Duty Navy |
| <input type="checkbox"/> Army National Guard | <input type="checkbox"/> Navy Reserve |
| <input type="checkbox"/> Army Reserve | <input type="checkbox"/> Active Duty Marine Corps |
| <input type="checkbox"/> Active Duty Air Force | <input type="checkbox"/> Marine Corps Reserve |
| <input type="checkbox"/> Air National Guard | <input type="checkbox"/> Active Duty Coast Guard |
| <input type="checkbox"/> Air Reserve | <input type="checkbox"/> Coast Guard Reserve |
| | <input type="checkbox"/> DOD civilian |

Appendix F

Family Assessment Device - General Functioning Subscale

The questions below ask how things were in your family **BEFORE YOUR LAST DEPLOYMENT** and how they are **NOW**. For each item below, circle the answer that best fits you and your family for each period of time. It may be helpful to first answer **all** items about your family **BEFORE YOUR LAST DEPLOYMENT**, and then how things are **NOW**. **Circle the answer that best expresses your feelings using the following scale:**

SA = Strongly Agree, A = Agree, D = Disagree, SD = Strongly Disagree.

a. Planning family activities is difficult because we misunderstand each other.	SA	A	D	SD
b. In times of crisis we can turn to each other for support.	SA	A	D	SD
c. We cannot talk to each other about the sadness we feel.	SA	A	D	SD
d. Individuals are accepted for what they are.	SA	A	D	SD
e. We avoid discussing our fears and concerns.	SA	A	D	SD
f. We can express feelings to each other.	SA	A	D	SD
g. There are lots of bad feelings in the family.	SA	A	D	SD
h. We feel accepted for what we are.	SA	A	D	SD
i. Making decisions is a problem for our family.	SA	A	D	SD
j. We are able to make decisions about how to solve problems.	SA	A	D	SD
k. We don't get along well together.	SA	A	D	SD
l. We confide in each other.	SA	A	D	SD

Appendix G
Informed Consent

The Army Child, Youth & School Services Division is very interested to know more about the experiences of all military families, and DOD Civilians, during the reintegration process. This survey is intended for all service members and DOD civilians who have ever deployed and returned home from their last deployment within the last 18 months. The benefit from your participation will be that the data collected through this study will be used to improve programs and services for military families, children and youth during reunion and reintegration. We will ask you about your experiences, as well as things that have been helpful, things that have been stressful, and how you and your family could be most helped during the process of reunion and reintegration. Your participation is voluntary and the information you provide will be kept strictly confidential. This survey should take no more than 30 minutes. You are free to withdraw from completing this survey at any time without penalty. You are free not to answer any questions you choose without penalty. There should be no or minimal risk to you by completing this survey. Should you have any questions about this research or its conduct, and research subjects' rights, you may contact: Lydia I. Marek, 540-231-6306 or lmarek@vt.edu; Departmental Reviewer/Department Head Anisa Zvonkovic, 540-231-4794 or anisaz@vt.edu; or David M. Moore, 540-231-4991 or moored@vt.edu.

Appendix H

Post-Deployment Reintegration Scale (Family and Personal Subscales)

Please indicate the extent to which each of the statements below is true for you since returning from your last deployment using the following rating scale, ranging from *Not at all true* (1) to *Completely true* (5).

Since returning from my last deployment:	Not at all true		Completely true		
a. I feel closer to my family. (FP)	1	2	3	4	5
b. Putting the events of the tour behind me has been tough. (PN)	1	2	3	4	5
c. There has been tension in my family relationships. (FN)	1	2	3	4	5
d. I am more aware of problems in the world. (PP)	1	2	3	4	5
e. I have become more responsive to my family's needs. (FP)	1	2	3	4	5
f. I have had difficulty reconciling the devastation I saw overseas with life in the U.S. (PN)	1	2	3	4	5
g. I feel the tour has had a negative impact on my personal life. (FN)	1	2	3	4	5
h. I have become more involved in my family relationships. (FP)	1	2	3	4	5
i. I have a better understanding of other cultures. (PP)	1	2	3	4	5
j. I feel my family has had difficulty understanding me. (FN)	1	2	3	4	5
k. I have been confused about my experiences during the tour. (PN)	1	2	3	4	5
l. The tour has put a strain on my family life. (FN)	1	2	3	4	5
m. I have realized how well off we are in the U.S. (PP)	1	2	3	4	5
n. It has been hard to get used to being in the U.S. again. (PN)	1	2	3	4	5
o. I have realized how important my family is to me. (FP)	1	2	3	4	5
p. I have a greater appreciation of the value of life. (PP)	1	2	3	4	5
q. Getting back "into sync" with family life has been hard. (FN)	1	2	3	4	5
r. Being back in the U.S. has been a bit of a culture shock. (PN)	1	2	3	4	5
s. I have a greater willingness to be with my family. (FP)	1	2	3	4	5
t. I have a greater appreciation of the conveniences taken for granted in the U.S. (PP)	1	2	3	4	5
u. I feel my family resented my absence. (FN)	1	2	3	4	5
v. I more fully appreciate the rights and freedoms taken for granted in the U.S. (PP)	1	2	3	4	5
w. Focusing on things other than the tour has been difficult. (PN)	1	2	3	4	5
x. I more fully appreciate the time I spend with my family. (FP)	1	2	3	4	5

FP = Family Positive, FN = Family Negative, PP = Personal Positive, PN = Personal Negative

Appendix I

Boundary Ambiguity Items

On a scale of 1 to 7, where 1 = *Not at all stressful* and 7 = *Very stressful*, circle the number indicating how stressful each item is for you now.

	Not at all Stressful					Very Stressful		
	1	2	3	4	5	6	7	
a. Renegotiating household responsibilities	1	2	3	4	5	6	7	
c. Figuring out my role in the house	1	2	3	4	5	6	7	
e. Re-establishing a relationship with my spouse/partner	1	2	3	4	5	6	7	NA
f. Re-establishing a relationship with my child(ren)	1	2	3	4	5	6	7	
g. How my child(ren) respond to me	1	2	3	4	5	6	7	
h. Feeling like an outsider in my home	1	2	3	4	5	6	7	