

An Exploration of Army Wives' Responses to Spousal Deployment: Stressors and Protective Factors

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This study empirically developed a theoretical model of army wives' resilience amid deployment. A sample of 18 women, representing army bases in Southern and Western parts of the United States, were interviewed about their experience of spousal wartime deployment. Through the use of grounded theory methods, findings revealed that stress unfolds across the deployment cycle. Adaptation in response to stress was found to occur through the dynamic engagement of resilience processes across individual (e.g., acculturation, purpose/meaning, emotional expression), family (e.g., communication, role flexibility, emotion regulation, problem solving, and coconstructing meaning), and sociocultural (e.g., information, belongingness, shared beliefs, practical support) levels. Implications for clinical training, assessment, prevention, intervention, and future research in couples and family psychology domains are discussed.

Keywords: deployment, military family, resilience

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More than 2 million service personnel have been deployed to the wars in Iraq (Operation Iraqi Freedom; OIF/Operation New Dawn; OND) and Afghanistan (Operation Enduring Freedom, OEF; Siegel, Davis, & The Committee on Psychosocial Aspects of Child and Family Health and Section on Uniformed Services, 2013). Fifty-six percent of those service members are married, and 44% have children (Defense Manpower Data Center, 2012). As a result, millions of military partners and children have experienced the deployment of a family member to hazardous overseas duty (Willerton,

Wadsworth, & Riggs, 2011). Deployment has been associated with a range of emotional responses and dynamics for family members across the time period from the physical departure and return of the military member, including anticipation of loss (predeployment), sense of independence (sustainment), excitement (redeployment), and renegotiating roles (postdeployment; Pincus, House, Christenson, & Adler, 2001).

Research has demonstrated the negative impact of deployment on individual and family functioning. Among military spouses, deployment has been associated with increased rates of depressive disorders, sleep disorders, anxiety, acute stress reactions, and adjustment disorders (Chartrand, Frank, White, & Shope, 2008; Lester et al., 2010; Mansfield et al., 2010). A literature review of 14 studies that examine OIF/OEF samples demonstrated that, in addition to psychological problems, deployment to Iraq and Afghanistan was associated with help seeking, marital dysfunction, and stress in spouses of military personal. Longer deployments and post traumatic stress disorder (PTSD) symptoms in

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military personnel were associated with more severe problems in spouses (de Burgh, White, Fear, & Iversen, 2011). Among military youth, children with deployed parents displayed higher levels of emotional and behavioral problems (Chandra et al., 2010; Lester et al., 2010; Morris & Age, 2009); increased psychosocial difficulties (Flake, Davis, Johnson, & Middleton, 2009); higher levels of heart rate, systolic blood pressure, and stress (Barnes, Davis, & Treiber, 2007); significantly decreased quality of life; and increased suicidal ideation (Reed, Bell, & Edwards, 2011) in comparison with their non-deployed counterparts. Following deployment, PTSD symptoms among veterans were associated with family reintegration, couple adjustment, and parenting difficulties (Gewirtz, Polusny, DeGarmo, Khaylis, & Erbes, 2010; Sayers, Farrow, Ross, & Oslin, 2009).

Spouses whose partners face deployment experience a range of emotional reactions that include fear, emotional distress, and grief in anticipation of their partner's impending departure (Medway, Davis, Cafferty, Chappell, & O'Hearn, 1995; Palmer, 2008; Wright, Burrell, Schroeder, & Thomas, 2006). Nondeployed family members who remain at home, separated from their deployed loved one, confront a family constellation that introduces new roles and dynamics. This change in the family system is often accompanied by fear for the deployed loved one's safety, family dysfunction, communication problems, an overall sense of loss, and the need to learn to parent in the absence of one's partner and coparent (Flake et al., 2009; Huebner, Mancini, Wilcox, Grass, & Grass, 2007; Lara-Cinisomo et al., 2012; Warner, Apenzeller, Warner, & Grieger, 2009).

Resilience is a dynamic process of adaptation, positive coping, and recovery from adverse, stressful experiences (Luthar, Cicchetti, & Becker, 2000; Masten, 2011). Resilience is conceptualized as being multidimensional and encompassing cognitive (Kumpfer, 1999), emotional (Kline & Short, 1991), and behavioral domains (Carpentieri, Mulhern, Douglas, Hanna, & Fairclough, 1993). Resilience literature presents varying theoretical approaches. Some scholars have emphasized a bio-psychosocial perspective to understand individual resilience (Davydov, Stewart, Ritchie, & Chaudieu, 2010), whereas others advocate for understanding family level (Walsh, 2006) and

community-level resources and social capital factors (Ungar, 2011).

Studies on family-level resilience have found that families who problem solve together and support open emotional communication have greater resilience (Walsh, 2006). Interestingly, these empirical findings echo resilience research that underscores the importance of role, identity, and social support as factors that promote the ability to overcome adversity (Clauss-Ehlers, 2004; Clauss-Ehlers, Yang, & Chen, 2006). Although such studies help us understand the importance of various coping strategies during deployment, they do little to contextualize specific themes and processes that have an impact on military family resilience during deployment.

A review of the research indicates a dearth of theoretical and empirical work specifically focused on resilience among military families (Riggs & Riggs, 2011). Research and theory that does exist often takes a family systems approach focused on how the family copes with the need to reorganize after deployment (Riggs & Riggs, 2011). The systemic approach taken in the literature contends that, "each time a service member deploys, family flexibility is tested, as the system structure and organization necessarily shift, and family roles and power dynamics are renegotiated" (Riggs & Riggs, 2011, pp. 680–681). Although family adaptation is certainly a worthy endeavor, scholars contend that the extent to which individual family members can be flexible in their ability to adjust to deployment is found to contribute to healthier functioning and resilience across the family (Walsh, 2006).

Shifting the focus on the experience of military wives confronted with spousal deployment, the research is even less prominent. Among nondeployed spouses, existing research highlights the importance of larger sociocultural factors on the nondeployed partner's ability to be resilient. For instance, findings indicate that the ability to "make meaning" of the deployment (Hammer, Cullen, Marchand, & Dezsofi, 2006), such as having a sense of pride and patriotism about the deployed family member's role, contribute to coping. Padden, Connors, and Agazio (2011) found that optimistic coping (having a positive outlook) promoted resilience among military spouses. Marnocha (2012) found that social support, reestablishing roles, placing fo-

cus elsewhere, and staying strong contributed to coping during and after deployments. Additionally, in their study of Army Reserve wives, Keith and Nguyen (2012) found that communicating through technology, establishing stability, and engaging social supports during deployments helped spouses cope. Finally, Wheeler and Stone (2009) interviewed National Guard Spouses regarding their deployment related experiences. They also found several broad coping strategies, including expressive activities (i.e., journaling and art), social support, spirituality, technology, and avoidance, were reported as helpful during deployment.

Although many resilience studies have used quantitative measures to assess protective factors, it is essential to understand that, by definition, resilience refers to a capacity to respond to risk and emerge having overcome the stressor with minimal evidence of having experienced the adversity, which is not easily directly measured. Further, a resilient response includes behaviors and interactions that promote adjustment and functioning in response to stressors that may be embedded within a sociocultural context. Such culturally influenced processes may be overshadowed when studies rely on predetermined sets of protective factors to measure resilience in diverse cultural groups.

The current study contends that military wives represent a distinct cultural group. It thus follows that military wives will demonstrate protective processes that are specific to their sociocultural context. Hence, we explore the specific processes that promote resilience and coping with spousal deployment among military wives. In sum, the approach taken to resilience in this study examines how protective processes unfold for army wives' within the sociocultural context and how such processes help them manage stressors and cope with the deployment situation faced by their families (Clauss-Ehlers, 2004).

Qualitative research provides a methodology to examine underlying processes and mechanisms at the emic level, that is, analyzing aspects of the women's experience from their perspective as military wives facing spousal deployment. It is our hope that these findings will provide insights about the women's experience that inform clinicians in their approach to clinical work and programmatic support for this group. It is also our hope that the qualitative

approach taken will introduce new research questions to further explore the experience of military spouses and their families. The primary research questions central to this study are: (a) What are the women's "lived experiences" of spousal deployment (i.e., how do they understand the stressors they faced and how protective factors helped overcome them)?; and (b) What protective processes facilitate their resilience?

The current study extends resilience research to military wives. Specifically, this study explores how resilience emerges to help military wives navigate stress associated with spousal deployment. This approach acknowledges the inherent challenges of having a spouse deployed, while simultaneously taking a strength-based perspective that identifies contextual factors that facilitate resilience.

Method

Study Design

The study's conceptualization and design is rooted in a constructivist–interpretivist approach. This approach asserts that there are multiple realities to human experience that can be uncovered through concentrated reflection and participant–researcher interaction (Schwandt, 1994). The constructivist–interpretivist paradigm allows the researcher to understand personal interpretations of the world based on the participant's own lived experiences and interactions that, in turn, guide the researcher in understanding study concepts. As such, it is acknowledged that the researcher and participant coconstruct research findings (Ponterotto, 2005). That is, that the researcher is not independent of the research findings as is assumed in post-positivistic methods, rather the researcher directly impacts the research findings through their influence on the research questions, design, data collection, analysis, and interpretation (Johnson & Gray, 2010)

Consistent with the constructivist–interpretivist research paradigm, interview questions were developed in light of an ecological model of human development and the resilience literature (Bronfenbrenner, 1979). Participants were asked about protective factors that contributed to their resilience at various ecological levels (e.g., microsystem, exosystem, macrosystem). Grounded theory methods were also used to

collect and analyze data (Corbin & Strauss, 2008). This approach calls for ongoing and flexible research methods, including a theoretical sampling of participants, applying open and axial codes to data, constant comparison, and theoretical comparisons.

Participants

Participants included 18 women from two separate Army bases located in the Western and Southern parts of the United States (U.S.). Of the total sample, 75% self-identified as White, 19% as Latina, and 6% as African American. Participant ages ranged from 22 to 40 years. The sample was diverse with regard to rank, a proxy for socioeconomic status, with the wives of both officers (59%) and enlisted soldiers (41%) represented. Each woman had an average of 2 children ($SD = 1.5$). Fifty-three percent of the women had experienced more than one spousal deployment, with two deployments per household reported on average.

Procedures

The following procedures were approved by the Institutional Review Board (IRB) process at the institution where the data were collected and analyzed. Inclusion criteria included the women having experienced spousal deployment to Iraq and/or Afghanistan, meaning their spouses participated in the OIF, OND, and/or OEF operations mentioned above. Snowball sampling techniques were used in this study. To recruit participants, the first author attended community meetings and distributed study flyers informing potential participants about the study. Research flyers were posted on announcement boards in public spaces on the bases.

The screening question asked was, "Have you experienced the deployment of a spouse to Iraq or Afghanistan during your time together?" Interestingly, of the 27 adult women who telephoned, all were eligible for study participation. Eight women were unable to be interviewed, as they moved before interview scheduling. One woman could not be reached again after initial contact.

Eligible participants met with the first author individually for two hours to complete a demographic questionnaire, personal history, and the semistructured interview. Each interview was digitally recorded. Interviews occurred in a pri-

vate setting, either at the home of the participant or a private meeting room at a public place, such as a military base library. During consent and debriefing processes, participants were offered local support resources and counseling referrals. Interview questions spanned the course of the deployment cycle (Pincus et al., 2001) and asked participants to identify areas of stress and coping in their lives. Sample items included, "I am curious about the ways in which you prepare yourself and your family for deployments" and "Thinking back across time, what stands out in terms of your own reactions to your husband's deployments? How did it change with successive deployments?" Prompting of emergent themes occurred across interviews, consistent with grounded theory methods (Corbin & Strauss, 2008). The full interview protocol is available from the first author of this study.

Data Analysis

All interviews were transcribed by graduate student researchers, and all transcripts were analyzed for content using grounded theory methods (Corbin & Strauss, 2008). Data were analyzed using the method of constant comparison in MAXQDA software (MAXQDA, 2010). As themes emerged from the analysis, comparisons were made across research participants for similarities and differences. Categories were defined by combining multiple codes into theoretically related constructs. Initial data analysis involved open coding technique, which prompted the ability to explore implicit actions and meanings, crystallize the significance of points, compare data, and identify gaps (Charmez, 2006).

The analysis proceeded with axial coding, the process of relating codes to each other through a combination of inductive and deductive reasoning, to make novel connections among categories and subcategories (Corbin & Strauss, 2008). This model consisted of codes related to both stress and protective processes. Axial coding prompted the ability to relate categories to subcategories, specify category properties and dimensions, and reorganize the data from the open coding phase (Charmez, 2006). Contextual axial coding involved examining the presence of stress codes across time points of the deployment cycle (e.g., predeployment, deploy-

ment, sustainment, redeployment, postdeployment; Pincus et al., 2001). For themes that reflected protective factors and resilience processes, data were axial coded by the ecological level at which the protective process occurred (e.g., individual, family, or sociocultural). Data collection ended once theoretical saturation was achieved, that is, when no new themes or theoretical patterns emerged (Corbin & Strauss, 2008).

As data analysis proceeded, three steps were taken to ensure the fidelity of research findings. First, semistructured interview protocols were designed to elicit the participant's own voice about her experiences while allowing the participant and researcher to engage in a conversation. The in-depth interview format fostered an ability to identify, explore, and construct various contextual elements/protective factors that may have contributed to the women's resilience without relying on preconceived definitions of resiliency from other groups/contexts. Second, a code book emerged from the data, and a peer auditor reviewed all codes. Third, a member check (i.e., having a member of the military spouse community provide feedback on analysis and results) was conducted to enhance transparency of findings.

Results

Despite differences among participants in terms of race/ethnicity, social class, number of children, number of times married, how their partner joined the military (e.g., enlisted, commissioned, service academy, ROTC), and number of deployments, the women's stories converged, sharing common features. Across interviews, for example, participants articulated similarities with regard to how they were affected by spousal deployment. As one participant said:

I knew that when he asked me to marry him that it's a possibility that he may not come back, and can I really seriously, honestly handle that . . . it's everything that we all have to face and it's changed me in a lot of ways. A lot of good, and in some areas, some bad.

Using grounded theory, the data depicted the nuanced nature in which spouses coped with the difficulty of wartime deployment and how adaptations contributed to their resilience in response to the event. Identified stressors included increased family problems and struggles to cope

with the perceived threat and ambiguities of war. In response to this stress, participants also identified important protective factors that contributed to their resilience. Key themes in stress and protective domains are presented below.

Stressors

Throughout the interview process, participants frequently presented deployment-related struggles (see Figure 1). Family stress associated with frequent military transitions across different bases and time zones was commonly reported. Participants talked about the difficulties of increased training just before deployment separations. As deployment drew closer, participants reported a lack of ability to control major decisions related to family life. There was a sense of not knowing when the military spouse would leave. This fear of being alone was coupled with the struggle to experience closeness during this difficult time, while also needing distance to cope with the emotional difficulty of an impending departure.

Participants identified perceptions about the level of threat associated with their spouse's work function and ensuing feelings of uncertainty as significant stressors. When partners were assigned to particularly dangerous jobs, spouses reported ruminating on the precariousness of their work. A lack of knowledge about their spouse's physical location while deployed, functions of their daily work, and level of danger associated with their functions contributed to the stress. At times, phone calls from a deployed service member provided information that lead to concerns about spouses' safety and contributed to wives' distress levels:

So he gets on the phone with me, and he's walking around and you hear "cack cack cack cack cack". And I was like, "Are those . . . Is that what I think it is?" And he just started laughing, and that's the way he manages intense situations, with laughter typically. So he was like, "Um yeah let me call you back," and I was just like "I can't believe that happened while we were on the phone," but I do not know why I couldn't believe it, because that's what happened every day.

In the absence of information, nondeployed spouses looked to external sources, such as the media or other wives, for information. Often this information was skewed, misleading, or based on rumor. One spouse described her decision to stop watching TV during deployment to help manage her stress, "I just didn't watch



Figure 1. Army spouse stress cycle.

the news, you know, I tried not to watch the news.” Spouses also reported feeling stress when they considered the uncertainty of whether their partner would return from war forever changed from the experience—or not return at all.

As deployment grew to a close, participants reported a shift in attention from a focus on uncertainty and perceptions of threat to concerns about possible changes in their partner. They wondered:

are they going to have all of those horrible symptoms you hear about with PTSD, the anger? You do not know who’s coming home at first. So I think you go through a little bit of being afraid, relieved, and afraid at the same time. Because you’re relieved they’re there and they’re in one piece, but you’re afraid because you do not know is it the same person that left.

Stress was exacerbated when partners returned with symptoms of PTSD, “I didn’t want him to think it was freaking me out, but at first I was like oh my gosh, how long is it going to

take him to be normal again?” For others, concerns focused on the military members’ parental interactions and roles and adjusting to new routines:

at first it was difficult because I’ve gone from being the only parent, the house was running my way . . . and so there was that adjustment period of how do we reintegrate him? I didn’t want to tell him how to be a parent, because he never really parented our 6-month old son. So he didn’t know how he liked to be held or how we gave him the bottle, or what times we fed him, or what his schedule was, but I didn’t want to be like, “This is how you have to do it!” Because I didn’t want him to feel like a guest. I didn’t want to give him a schedule, the routine that we were on, so it was an adjustment.

Protective Factors

Participants identified protective factors in response to the aforementioned stressors. They shared that these factors enabled coping in the face of spousal deployment. Three protective factor domains emerged from the data: individ-

ual coping, family beliefs and practices, and sociocultural processes (see Table 1 for a description of each level).

Individual coping. The first protective factor domain included individual level processes such as acculturation, having purpose, and expressing emotion. Acculturation to military life, in terms of learning and accepting practices, beliefs, and customs (Berry, 1997) associated with the military, was found to be a salient aspect of resilience. For spouses with no prior military history or knowledge, their introduction to military norms occurred through their husband and other spouses. Acculturating to the new lifestyle was reported to be the foundation of their ability to connect with other spouses and adopt new norms, beliefs, and family practices, as well as a new language. Said one army wife of her efforts to adjust to army life:

he joined his unit, and we got to know all the people and . . . I was just blind to whatever the Army did. So I didn't understand units. I didn't understand acronyms. I was just trying to learn, you know, work my way through this stuff. . . . He was gone a couple months here and there for training and stuff, but he actually didn't deploy until '03, so we did have about a year or so home together . . . to kind of acclimate to the Army before he deployed that first time.

For some, acculturating to a military lifestyle meant becoming marginalized from civilian family members and lifelong friends:

In the civilian world, my friends back home that aren't military—you know I can talk to them about something that's going on, but they have no clue what I'm talking about. So it's kind of like "Okay, I'll go back to my military family." And that's what you feel like. You have a military family.

Further, participants reported that deployments complicated the process of acculturating to military life. For instance, in anticipation of deployment, new spouses often struggled with the decision to remain near a military installation, where resources and relevant supports

were numerous, or to relocate near extended family to receive the potential benefit of longstanding relationships and family support. The context for this dilemma was the understandable reality that deployment schedules are determined by the needs of the military and not by those of the individual military member or family lifecycle. For new military spouses, remaining near the base often accelerated military acculturation, while leaving interfered with acculturative processes.

Having an identified sense of purpose during the time of spousal deployment was another protective factor the women reported. Making meaning through a sense of purpose, or mission, was reflected in activities such as employment, going back to school, starting a new hobby, making care packages for the spouse's troop, participating in family readiness activities, engaging in volunteer activities, and parenting small children. Indeed, several spouses commented on the protective function of caring for children during deployment:

I really tried to stay positive for her, because, you know, she doesn't understand. I cannot tell her dad's at war, you know, she doesn't get it. So, it was a struggle to stay positive for my child all the time. . . . And if I'm having down times, I go somewhere to have a down time. . . . Most of the time, she reflected whatever mood I was in.

For many participants, having a sense of purpose served as an adaptive distraction mechanism: "I have to stay focused, I have to stay strong, not just for peers but for my job and for my children." For many of the women, knowing they had a place to let go and express their feelings was considered helpful when the uncertainty and unpredictability became burdensome.

Family beliefs/practices. Aspects of the family beliefs/practices protective factor domain included communication, role flexibility,

Table 1
Emergent Protective Factors

Individual coping	Family beliefs & practices	Sociocultural processes
Acculturation to military	Communication	Information
Purpose/meaning	Role flexibility	Belongingness
Emotional expression	Emotion regulation	Shared beliefs
	Problem solving	Practical support
	Coconstructing meaning	

regulating emotions, problem solving, and creating meaning. Communicating by phone, e-mail, or web-interface often prompted a temporary sense of relief among participants, because they knew their spouses were safe in those moments. These aspects of connection also reinforced bonding during separation:

I feel like I learned more because all we had to do was talk to each other. We couldn't see each other or like go on dates, so all we did was talk. And I feel like I knew more about him, you know, than I had ever known about anyone. So I think that made us a lot closer.

Wives shared the protective function of video telecommunication functions in staying connected:

It [Skype] does help us feel a lot more connected. I know as soon as he left I was so excited, I left my computer on my nightstand just waiting for him to call, so yeah it makes a big difference versus just my phone ringing.

Role flexibility refers to how partners delegate marital, parental, and household functions to one another during the deployment cycle. The ability to work together without defensiveness or territoriality helped manage shifting dynamics as the deployed spouse left and returned:

During the deployment, I'm in charge of everything. And when he comes home, it is a freedom. It's a break for me. I'm like, "Here is the checkbook, here's the finances, have fun." . . . When he's home he's in charge of the finances and all that stuff, but when he's gone, it's me. And trust me when he comes home, I'm so happy. I'm like "Here you do it."

Emotional regulation in response to shifting family dynamics was a key protective factor. Military spouses discussed the intricate dance that occurred prior to deployment, as spouses prepared to leave, followed by preparation to reconnect as spousal return was anticipated:

Right before the deployment, we both sort of kind of back off from each other. We sort of start doing the distance thing, just to hurry up and get over with so it doesn't hurt that much. But regardless, it doesn't matter how many deployments you go through, watching them go hurts. You can say each deployment gets a little bit easier and easier, but when you watch them leave, that stays the same. It never changes.

Many participants discussed the need to problem solve and create a plan for potentially negative outcomes, including soldier death, injury, or mental health issues. Participants often reported being hesitant to approach such con-

cerns with their spouses but felt a sense of relief when these concerns were addressed:

I talked to him a little about the what-ifs, just to make sure I knew everything. You know, they have to do the paperwork and all that, so we talked a little bit about that. . . . He was a bit hesitant to talk about it, and I didn't want to push it because it does sound horrible . . . but we did talk about what would happen and what he would want.

Coconstructing meaning in this context refers to mutually determining a reason for or attributing some benefit from deployment. Participants discussed the meaning they attributed to deployments including patriotism, expansion of democracy, spiritual beliefs, and family financial independence. Several spouses discussed how deployments were meaningful in terms of the positive impact on their marital relationships as they tested the depth of the spousal bond and proved its strength:

I think there's a definite respect level that we have for each other that has increased because we've seen just how hard, you know, I do not want to say you can be pushed, because I'm sure you can always be pushed harder, but at this point how hard we've been pushed and been able to overcome and get through, um so there's a respect, definitely a respect for each other.

Sociocultural processes. The third protective factor domain involved sociocultural supports that helped army wives adjust to deployment stress. Information about the service member or service member's unit was often gathered through social connections, primarily other military members and family readiness groups. Information often helped mitigate feelings of uncertainty and perceptions of threat. Social support helped army wives feel understood by others and connected, particularly with fellow military spouses. For instance:

Six months into the deployment, if you have the crappiest day of your life, your family's not going to know unless they've been there. The spouses . . . that you are around, they're with you, they're going to understand.

Having a sense of purpose helped army wives negotiate deployment stress. This view allowed them to experience pride about what their spouse was doing, and the sacrifice being made:

I do not know, just knowing that he does this because that's what he feels. You know, he was meant to do and that it's the right thing to do like morally. . . . It's really hard to explain. I just get this weird sense of pride in what he does because so few people are willing to make that sacrifice, and he is one of those

few. It's something that it's hard to explain, and I didn't get it until we were married and until he went off and put himself in harm's way for the good of other people.

Social support also contributed in practical ways (e.g., childcare). Logistically, participants reported that they functioned as single parents during deployments. Practical supports in the face of increased stress were identified as particularly important for some spouses, especially when concerns about their own capability to care for children were in question.

Discussion

This study examined the phenomenological experiences of army wives during the wartime deployment of a spouse, with a specific focus on stressors and protective factors. The primary research questions central to this study were: (a) What are the women's "lived experiences" of spousal deployment (i.e., how do they understand the stressors they faced and how protective factors helped overcome them)?; and (b) What processes facilitate their resilience? Deployment was consistently described as a stressful lived experience in which the departure and return of the soldier over time is related to experience of subjective stress in Army wives. The narratives converged around several protective processes across three ecological levels (e.g., individual coping, family beliefs/practices, sociocultural processes; Bronfenbrenner, 1979). Together, our findings suggest that Army wives in this study utilized a set of protective processes specific to their experiences of being embedded in an Army culture, which they found to be most helpful in overcoming the stress of deployment.

Stressors were examined across various phases of the deployment cycle, suggesting that stress occurs in a cyclical and predictable fashion. Past studies (Lara-Cinisomo et al., 2012) have often ignored temporal instability across the deployment cycle in their analysis, highlighting an important strength of the current study. Several studies parallel the findings of the current study that deployment stressors include perceptions of threat and uncertainty concerning the deployed service member (Davis, Ward, & Storm, 2011; Faber, Willerton, Clymer, MacDermid, & Weiss, 2008; Warner et al., 2009). Further, the theme of a loss of control

found in this study reflects previous findings highlighting the experience a sense of powerlessness among military spouses (Davis et al., 2011).

Our results reflect past qualitative research findings that speak to the challenge of adjusting to post deployment changes. We found that adjusting to new roles (i.e., parenting) and behaviors (i.e., symptoms of PTSD) was a challenge for the women in our sample, in addition to concerns about spousal return and implications for routine and couple interactions. These results correspond with Aducci, Baptist, George, Barros, and Nelson Goff's (2011) findings that families must relearn their dance following deployment, including adjusting to individual changes, and making sense of each other's deployment experiences. Clearly, the post deployment reintegration period represents a uniquely challenging time for military families, responding to intrapersonal and interactional changes.

Current study findings echo previous phenomenological inquiries of military wives during deployment that highlight coping processes (Aducci et al., 2011; Davis, Ward, & Storm, 2011; Faber et al., 2008; Jennings-Kelsall, Aloia, Solomon, Marshall, & Leifker, 2012; Keith & Nguyen, 2012; Lara-Cinisomo et al., 2012; Marnocha, 2012; Wheeler & Stone, 2009). Our research expands these findings to examine culturally specific processes organized across what we have identified as three socio-ecological domains of protection that enable Army wives to endure: individual coping, family beliefs/practices, and sociocultural mechanisms. Findings at the individual coping level confirm past studies that highlight the importance of military spouses having a purpose and meaning to their everyday lives during the deployment (Blank, Adams, Kittelson, Connors, & Padden, 2012; Davis et al., 2011; Everson, Darling, & Herzog, 2013). The literature discusses the notion of a sense of coherence as bringing meaning and manageability for military wives coping with deployment (Everson et al., 2013). Current study findings reflect the importance of coherence through findings that a defined purpose and meaning promoted resilience among Army wives. Stability and coping were encouraged through engagement in structured, manageable activities (i.e., "my purpose is to be a good mother, therefore today I have to

bring my child to school, go to the food store, and make dinner"). Similar to the current study and past literature, Blank et al. (2012) found that military wives frequently reported using coping behaviors such as "trying to keep busy," which reflect purpose. In our study, we allowed coping to be participant-defined, as contextualized in military culture. Military culture here adopts a task driven and productivity focused agenda. It may be that a sense of daily success and achievement contribute to a sense purpose and meaning and, as such, underlie the protective nature of this construct for Army wives. Additional research is needed to understand the causal mechanisms that drive the protective function of having purpose and meaning for Army wives experiencing deployment.

Past research studies also point to the importance of positive thinking (Blank et al., 2012; Davis et al., 2011) and positive emotionality (Faulk, Gloria, Cance, & Steinhardt, 2012). Interestingly, in the current study, participants did not specifically vocalize the use of positive thoughts. However, we did not specifically ask about participant thinking patterns, so it is unknown whether they would have endorsed such practices if directly questioned about them. This quandary points to one of the fundamental differences between quantitative research, which uses predetermined definitions of coping resources, and qualitative research, which allows those definitions to be revealed by the research participants themselves. It seems that positive thinking, although protective, may not be a salient culturally specific practice for military wives.

Social support has repeatedly been identified in the literature for the protective qualities it provides military spouses (Blank et al., 2012; Davis et al., 2011; Fields, Nichols, Martindale-Adams, Zuber, & Graney, 2012; Faber et al., 2008; Green, Nurius, & Lester, 2013; Lara-Cinisomo et al., 2012; Skomorovsky, 2014). Whereas past studies have largely relied on predetermined measures of social support, the methodology used in the current study allowed the women to define those aspects of social interactions that were helpful. The study extends our knowledge about social supports helpful for the women by identifying specific types of interactions to be helpful such as the practical support gained from social interactions. Additionally, the women reported that they felt sup-

ported through a shared sense of belongingness with a sisterhood of women who faced similar challenges and shared similar beliefs about their husband's service and family sacrifice. These findings extend those of past studies that have not identified these aspects of social support for military wives, possibly because of their reliance on predefined measures of the social support construct.

Social support is embedded within a cultural context in this study, thus invoking cultural match (military to military) and cultural mismatch (civilian to military) supportive mechanisms. Although this study did not specifically address differential support across groups, findings regarding acculturative processes did reveal the tensions that exist for wives between their military and civilian lives. Past research on military spouses has examined social support across cultural groups, including support from family (both spouses' own and their military partners' family), support from nonmilitary friends, and support from spouses of other military members. Results suggested that support from all three groups independently buffered against psychological problems and depressive symptoms in military spouses (Skomorovsky, 2014). In our study, social support provided information, practical supports, and cultural supports, such as belongingness and shared beliefs. It may be that different groups provide varying types of support, (i.e., military supports provide culture specific supports—belongingness, shared beliefs—and information, whereas civilian supports provide practical support). Additional research is needed to tease apart the nuances of how different groups (i.e., civilian, military involvement) provide varied types of support for loved ones with a family member serving in the military.

Another interesting consideration with regard to social support in the military is the impact of military endorsed support groups called Family Readiness Groups (FRG). Faber et al.'s (2008) research highlights the protective nature of involvement in FRGs. Although the FRG program did not emerge as a salient theme in this study, several of the women did mention them in their interviews in both positive and negative ways. Currently, the effects of these programs is being debated, with some scholars suggesting they provide positive social support (Faber et al., 2008) and others suggesting participation

may have deleterious effects for some (Parcell & Maguire, 2014). In our study, the theme of information was linked to unit specific social support, which suggests providing access to unit information is what is protective about participation in these groups.

Taken together, study findings suggest that aspects of military culture incorporate protective factors that promote resilience among this group of women. Military culture provides a shared narrative around the meaning of deployments for military families. Acculturating to military life imbeds spouses with others in similar situations who can be looked to for emotional and practical support. Indeed, several times throughout the interviews, spouses commented on how their family was truly a larger “military family” of individuals. Although military culture has previously garnered attention by scholars, there has been limited study of stressors and protective factors, and subsequent resiliency within this context (Collins, 1998; Dunivan, 1997; Hsu, 2010). Findings from this study help to clarify how sociocultural aspects of military life can serve as protective factors in the face of the deployment related adversities shared by military spouses.

Limitations

The findings from this study have limited generalizability because of the qualitative nature of the study. Thus, they cannot be used to make statements about the Army wife population more generally. Further, it is important to note that data collection for the current study occurred when media attention to the wars in Iraq and Afghanistan was particularly intense. In turn, this may have heightened participant sensitivity to the danger spouses faced in their capacity as army soldiers, thus potentially influencing their reports concerning their perceptions of threat in this study.

A second limitation relates to sample characteristics. Participants were recruited from two Army bases across the continental U.S. Although a somewhat diverse sample, White women and officer wives were overrepresented. Another sample limitation was that nondeployed men were not included nor were individuals who identified as lesbian, gay, bisexual, or transgender. At the time of data collection, military policies did not recognize same-sex

unions, and thus these individuals may have been less willing to volunteer for the study. As such, these findings do not speak to the experiences of other military spouses/partners. Some of the positive findings in this study may also be attributed to the socioeconomic status of participants (Benzies & Mychasiuk, 2009).

Clinical Implications

A central question for intervention, prevention, and training is to ask how results from the current study add to our knowledge of how to effectively apply a family systems perspective in work with military families that increases protective factors and decreases stressors to prevent maladjustment. The following paragraphs describe how the emergent protective factors identified in this study (e.g., Individual Acculturative Coping, Family Beliefs and Practices, and Sociocultural Processes) are applicable to deployment cycle stages.

Intervention. We recommend that intervention with military families occur in a context of *deployment cycle assessment*. Given the ebb and flow of deployment-related stress, it may be the case that mental health symptoms wax and wane in response to the specific deployment cycle in which the family finds itself. Couple and family psychologists are encouraged to be cognizant of these shifts in family experience and provide ongoing assessment across the various phases of deployment (Pincus et al., 2001). For instance, although some spouses were well equipped to deal with the stress of a pending transition prior to deployment, they may not have been as adept at managing the uncertainty that arises during the deployment stage. Availability of appropriate supports at specific moments of deployment, and in conjunction with an understanding of stressors associated with specific phases may influence the trajectories of couples and families in ways that promote their well-being (Clauss-Ehlers et al., 2006).

Deployment cycle assessment can be likened to intervention and prevention efforts based on family life cycle development (Gladding, 2014). The family life cycle refers to the stages a family transitions through as a unit in their lives across time. Just as the family psychologist needs to consider the family’s stage of life cycle development, the family psychologist working with military families is encouraged to

consider the family's deployment stage. The application of empirically based best practices that are responsive to deployment-related themes is not unlike consideration of clinical interventions that correspond with the family's life cycle stage.

A key predeployment theme is managing concerns about the upcoming loss that will occur when one's spouse is deployed. Drawing from study results, clinical work to prevent maladjustment at this stage might focus on the couple as they prepare for the deployment cycle. Given that individual acculturative coping was a protective factor for army wives, work during predeployment might include the clinician encouraging the nondeployed spouse and soon-to-be deployed spouse to share their sense of purpose and meaning with one another as both partners prepare for deployment. Clinicians are prompted to facilitate emotional expression between partners and help them strategize how each will deal with the upcoming separation. The tools identified during the predeployment stage of treatment aim to decrease stress and increase coping at this earliest stage of the deployment cycle.

The focus on intervention shifts as the family moves into deployment. When applying a family systems approach, the couple and family psychologist might ask: "Which family members will be included in the treatment process?" Once the parameters of couple and family therapy are set, it is important that family members continue their involvement in family therapy. This model differs when working with deployed military families. As the family moves into the deployment phase, the deployed family member is no longer available to engage in family therapy. The goals of therapy must shift to meet this deployment cycle change.

A key deployment theme is perceptions of threat and concern about the well-being of the deployed family member. Working within the framework of individualized acculturative coping, the family psychologist can now shift the focus to work with the nondeployed spouse and children. Encouraging emotional expression about the experience is critical during this time as is continued discussion about purpose and meaning. Further, encouraging family members to ground their negative thoughts regarding safety and security in information received from

unit supports and the deployed service member may help to promote more balanced thinking.

Family beliefs and practices are also relevant protective factors during the deployment phase. Here couple and family psychologists may consider integrating problem-solving strategies into practice. In the current study, for instance, spouses identified strategies such as letter writing, cojournaling, and sending care packages that increased a sense of connection with their deployed spouse. Given the usefulness of distraction as a coping mechanism, clinicians might encourage family members to remain active and engaged in positive, productive activities during deployment (e.g., start a new hobby, seek employment). These activities often occur in a social context that promotes social interaction and the potential for social support. Psychologists may talk with family members about ways to increase positive social supports such as encouraging military families to reach out to other military spouses, extended family members, religious groups, or parenting groups. This level of intervention reflects the sociocultural processes aspect of protective factors where participants shared that information, belongingness, shared beliefs, and practical support promoted coping.

Independence is a key theme of the sustainment phase of the deployment cycle. Here the army wife may have adjusted to being the sole parent in the household. Intervention during this time might continue to focus on individual acculturative coping as the family psychologist supports the nondeployed spouse's engagement in running the household independently. This draws from the family beliefs and practices aspect of identified protective factors, specifically with regard to role flexibility that the nondeployed spouse must demonstrate during this time. Finally, the family psychologist can help the nondeployed spouse tap into sociocultural processes such as identifying individuals who can provide practical support and continuing to engage in a sense of belongingness with nondeployed spouses who share the same experience.

An emotional impact of redeployment is a sense of excitement that comes with the expectation of being reunited with the deployed spouse. Returning to the protective factors identified in the current study, the family therapist can facilitate individual acculturative coping through a discussion of the complex emotions

that may emerge for the nondeployed spouse. In the family beliefs and practices domain, role flexibility and emotion regulation are relevant as the nondeployed spouse prepares for the return of the deployed spouse.

A key theme of postdeployment is the renegotiation of roles after each partner has had a separate lived experience. The emotional expression aspect of individual acculturative coping is relevant given that spouses shared that differences in personality and the emergence of PTSD symptoms, including hyperarousal and reexperiencing, were notable postdeployment. Clinicians may consider providing psychoeducation for both nondeployed and deployed spouses about PTSD symptoms and when to seek professional help.

The latter point corresponds with the information aspect of the sociocultural process protective factor. Participants discussed the need to repair relationships and stabilize family dynamics postdeployment. Spouses highlighted the importance of establishing a shared meaning, reestablishing communication patterns, and reengaging their emotional bond, all of which reflect aspects of the family belief and practices protective factor. These findings reflect previous scholarship on reintegration that found couples benefited from intervention focused on improving communications skills and reengaging their emotional attachment (Bowling & Sherman, 2008; Fischer, Sherman, Han, & Owen, 2013; Gottman, 1999; Johnson, 2004). For families with children, family therapies that promote positive engagement and skills-based training may help members transition to being together again postdeployment (Lester et al., 2011).

Prevention. Implications for prevention largely relate to communication patterns. Army wives reflected on the importance of advances in communication, including videoconferencing platforms, e-mail, and cellular phones. An interesting area of prevention for couples concerns the fact that couples could benefit from communication skills training before deployment to reduce stressors and promote protective factors. Study participants suggested that phone and Internet communication was an important feature of spousal interactions during deployment. By helping couples and families develop communication strategies before deployment, psychologists can help normalize the deploy-

ment experience and help members anticipate stressors. Couples and family psychologists can also provide families with a framework to help them approach difficult conversations during the course of a deployment (Riggs & Riggs, 2011). Research and curriculum development in this area is warranted.

Training. Trainees in couple and family psychology can benefit from training that specifically addresses the culture of military life and related family experiences. In the current study, for instance, nondeployed spouses often reported feeling marginalized by members of their family of origin, childhood peers, and surrounding community, because of misunderstandings about military life. To the extent that couple and family psychologists can understand the sense of isolation that can occur during deployment, they can help the nondeployed spouse and family members develop and maintain a therapeutic alliance. This alliance can also help the family identify community supports.

Trainees are encouraged to learn the different phases of deployment and relevant emotional themes. This awareness is critical to the trainee's ability to conceptualize intervention and prevention measures that meet the family where they are at in the deployment cycle. Training in this area will promote deployment cycle assessment and being able to shift with the family constellation as it changes (e.g., different family members, different sub-systems) depending on deployment phase).

It is recommended that trainees are well versed in signs and symptoms of PTSD. Knowledge in this area is important given the incidence of deployed family members who return with PTSD. Trainees with this level of awareness will be better equipped to develop interventions that are responsive to this experience.

Conclusion

For millions of military spouses, the deployment of a partner to war is a stressful and difficult experience to endure. Nevertheless, many families demonstrate strength and resilience when confronted with this adversity. This study identified both stressors and salient protective factors that contributed to army wives' resilience. Their stories depict coping and resiliency as a dynamic process that unfolds across multiple ecological levels and deployment

phases to promote both individual and family functioning. For many, the process of adapting to deployment was inherently related to their adoption of protective practices and beliefs associated with military culture.

Findings from this study have implications for clinical intervention, prevention, and training. Results underscore the importance of deployment cycle assessment where interventions are based on the clinician's understanding of the deployment phase experienced by the couple or family, overarching themes introduced by that phase, and the stressors they present. From this understanding, the couple or family psychologist can engage in interventions that promote protective factors in the three areas identified through the current study: individual acculturative coping, family beliefs and practices, and sociocultural processes.

Although findings from this study provide some insights into the stress and protection in military families, future research is needed. First, this study's findings would benefit from empirical validation in larger samples of military families. Such studies could seek to determine whether stress and protective processes vary by demographic variables and across deployments. Further, this work might inform the development of a culturally sensitive assessment tool to examine resilience among military families. Such a tool would promote investigation about how mechanisms of protection change over deployment phases as well as across deployments. Second, the examination of acculturative processes to military culture would be a worthy endeavor given this study's findings that military culture specific processes appear to be protective during deployment. To that end, research is needed to address the nuances of cultural match and mis-matched social support for families acculturated to military culture. Third, research that documents the cyclical and cumulative nature of deployment stress and the buffering effects of coping processes across deployments among military family members is also needed to gain a better understanding of the longitudinal effects of military life on spouses and children.

Finally, this study focused on women who were married to the military, mostly living on military bases (where participants were recruited), who represent a group of women who are embedded in a military lifestyle, in compar-

ison with other studies (Jennings-Kelsall et al., 2012; Wheeler & Stone, 2009), which have focused on the stressors of less embedded groups (i.e., wives of reservists and nontraditional partners) of military loved ones facing deployment of a partner. Women in this study reported a fairly consistent set of stressors and protective factors related to their military lifestyle. Women who are less acculturated likely face other unique stressors/protective factors. For instance, Wheeler and Stone (2009) studied a group of reserve wives who reported additional stress concerned with uncertainty about their future with the military. Jennings-Kelsall et al. (2012) examined an online discussion board for Marine partners (defined as wives, fiancées, and girlfriends) and found that although some of their stressors reflect those found here, including issues related to a lack of control and helplessness, others did not, such as finding a place to blame for their stress and confusion about how to prioritize personal goals in the context of their relationships. Thus, stress and protection appear to differ across groups of differential levels of acculturation to the military. Certainly additional research is needed to explore differences in the lived experiences among diverse groups of military partners.

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