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TITLE: Understanding the Impact of Having a Military Father with Post Traumatic Stress Disorder (PTSD) on Adolescent Children

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14. ABSTRACT

The primary objective of the study is to understand the impact of having a military father on adolescent children. We will examine the influence of paternal PTSD on adolescent children's emotional wellbeing and behavior and investigate whether adolescents whose fathers have PTSD experience a higher prevalence of psychiatric disorders, as measured by the Development and Well-Being Assessment (DAWBA), compared to those whose fathers do not have PTSD. We will also examine the influence paternal PTSD has on parent-child communication, family dynamics and functioning. In families where the father has PTSD, we will look at the quality of the relationship (as measured by the Five Minute Speech Sample and Hot Topics paradigm) and check for impaired family dynamics and functioning as measured by the Family Assessment Device (FAD) compared to families where the father does not have PTSD.

Secondary aims are to examine the effect of specific symptoms of PTSD (avoidance, anger/hostility/emotional numbing) on adolescent emotional wellbeing and behavior. We believe that adolescents of fathers with prominent anger/hostility symptoms will experience a higher prevalence of oppositional defiant/conduct disorder (as measured by the DAWBA) compared to those whose fathers do not have these PTSD symptoms; adolescents of fathers with prominent avoidance/numbing symptoms will experience a higher prevalence of depressive disorders (as measured by the DAWBA) compared those whose fathers do not have these PTSD symptoms. We will determine the moderating effect of gender on paternal PTSD by investigating whether the impact of having a father with PTSD is greater in male adolescents (based on all measures).

15. SUBJECT TERMS

Post-Traumatic Stress Disorder (PTSD), Military Families, Adolescents, Mental Health, Emotional Wellbeing, Family Functioning

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Table of Contents

	<u>Page</u>
1. Introduction	5
2. Keywords	5
3. Accomplishments	5
4. Impact	7
5. Changes/Problems	7
6. Products	8
7. Participants & Other Collaborating Organisations	9
8. Special Reporting Requirements	10
9. References	10
10. Appendices	12

1. INTRODUCTION:

Military children and adolescents are exposed to a range of stressors that are not experienced by their civilian counterparts, namely the periodic and extended separation from a parent during deployment to a combat zone, frequent moves and locations, and exposure to a parent who may return from combat with physical or psychological injury, including post traumatic stress disorder (PTSD). Since 2001, over 700,000 US children have experienced the deployment of a parent to Iraq or Afghanistan and during this time deployments have become longer, more frequent, and breaks between deployments shorter. A major concern for policy makers is how these deployments impact on the psychosocial development and wellbeing of military offspring. To date there has been a dearth of quality investigation in this area. The primary objective of the study is to understand the impact of having a military father on adolescent children. We will examine the influence of paternal PTSD on adolescent children's emotional wellbeing and behavior and investigate whether adolescents whose fathers have PTSD experience a higher prevalence of psychiatric disorders, as measured by the Development and Well-Being Assessment (DAWBA), compared to those whose fathers do not have PTSD. We will also examine the influence paternal PTSD has on parent-child communication, family dynamics and functioning. In families where the father has PTSD, we will look at the quality of the relationship (as measured by the Five Minute Speech Sample and Hot Topics paradigm) and check for impaired family dynamics and functioning as measured by the Family Assessment Device (FAD) compared to families where the father does not have PTSD.

2. KEYWORDS:

Post-Traumatic Stress Disorder (PTSD), Military Families, Adolescents, Mental Health

3. ACCOMPLISHMENTS:

Progress Summary: Year 1 Objectives:

- Research team established and in post by July 2015
- All questionnaires and structured interviews identified and finalized
- Research team trained in all measures to be used in the study – online and offline interview schedules and video/audio assessments
- Ethics approval received by Ministry of Defence Research Ethics committee (MoDREC) June 2015, reference 654/MODREC/15 and by the King's College London College Research Ethics Committee (CREC) August 2015, reference ref CREC/14/15-01. We are currently awaiting ethical approval from MoDREC for the revisions to our protocol. Following this, we expect to receive HRPO approval.
- Study sample identified from fathers who took part in the previous KIDS study (ref W81XWH-09-1-0509) who have eligible children aged 11-17 years
- Contact details of eligible fathers updated according to information received by the ongoing participation of these fathers in the King's Centre for Military Health Research's

(KCMHR) ongoing Health & Wellbeing Study of the UK Armed Forces (see www.kcl.ac.uk/kcmhr/research/kcmhr/healthstudy.aspx)

- Acronym for study identified: **S**ervice **P**arents' & **A**dolescents **C**hallenges & **E**xperiences study ('the SPACE study').
- Newsletter posted to families thanking them for taking part in the previous KIDS study has allowed us to update contact details of eligible participants as we asked recipients to contact us if they were interested in taking part in follow on research
- The team's poster won first prize in poster competition at the Army Family Federation's Symposium on 18th June 2015
- Database tools to enable the successful recruitment of study participants as well as facilitation of in-field data collection have been developed in-house
- The Naval Families Federation has identified 5 families who are happy to take part in the pilot of our study

Delays in Progress of Year 1 Objectives, plus plan for resolution:

• *Delay 1: Collection tools piloted*

We cannot pilot the study until final IRB approval for the study has been obtained. Final amendments to our IRB application are currently being considered by MoDREC and then will go to HRPO for final approval. Pilot families have already been identified by the Naval Families Federation (nff.org.uk).

• *Delay 2: Commence data collection with families*

We cannot begin data collection until we have received US Army Medical Research and Materiel Command Human Research Protections Office (HRPO) approval. Once this approval has been obtained, data collection will begin.

Training and professional development opportunities Year 1:

Course/Training	Date	Attendees
Clinical risk training	June '15	MC, KR, AV, NP, BP
Bitesize: Data Protection Training	June '15	MC, KR, AV, NP, BP
Hot topics training	June '15	MC, KR, AV, NP
EndNote basics for Health & Clinical Sciences	June '15	BP, KR
Safeguarding Children Level 3 on-line training	July '15	MC, BP, NP, KR, AV, NF
Mental Health First Aid Training	Sept '15	KR, AV, NP, BP
Unconscious Bias Workshops	Sept '15	BP, KR, AV
Trauma Risk Management Team Leader training	Sept '15	KR, NP

Managing your research data	Oct '15	KR
Essentials of copyright - what academic staff need to know	Oct '15	BP, AV
Team building training	Oct '15	BP, AV

Planned activity for the next 12 months (12-24) of project

Priorities for Year 2 will be to successfully complete the piloting of the study with families and gaining their feedback on the acceptability and usability of the online/offline questionnaires and videotaped tasks. Following this, we will identify our study sample and begin data collection. These tasks from Year 1 will be the first priority in Year 2. From November 2015-September 2016, we will complete the following objectives as outlined in our Statement of Work:

- Ensure adequate response rate
- Complete data collection for 100 families
- Finalize methods for data entry and cleaning
- Undertake data analysis, report and paper writing

4. IMPACT:

When complete, this study will provide data for US and UK military stakeholders on paternal PTSD and its effects on military children aged 11-17 years. This research will yield unique data, as there are no studies published to date which have collected data from multiple informants. This study aims to overcome a number of limitations seen in previous research by using multi-informant measures to assess adolescent wellbeing and development, as well as family functioning. We will collect data on a range of potential explanatory/confounding factors (for example, maternal mental health).

5. CHANGES/PROBLEMS:

Data collection has been unavoidably delayed due to the time taken to receive ethical and HRPO approval for this study. We expect to receive this approval by the end of October 2015.

6. PRODUCTS/PRESENTATIONS:

Professor Fear presented project outline to Military Operational Medicine Research Program Headquarters Family IPR meeting, 24-25 March 2015, Fort Dietrich, MD and responded to the feedback provided.

Project outline also presented to:

- Australian Department of Veterans Affairs, Canberra (Feb 2015)
- KCMHR project board meeting (June 2015)
- MSc in War and Psychiatry postgraduate students at King's College London (July 2015)
- Dr Thomas Kane William Joiner Institute for the Study of War and Social Consequences, University of Massachusetts, Boston, USA, during visit to KCMHR (Sep 2015)
- Forces In Mind Trust Chief Executive Ray Lock during visit to KCMHR (Oct 2015)

7. PARTICIPANTS AND OTHER COLLABORATING ORGANIZATIONS:


Name	Project Role	Institution	Nearest person month worked	Contribution to project
Dr Benjamin Baig	Child Psychiatrist	IOPPN, King's College London	1	On-call clinician
Melanie Chesnokov	Study Coordinator	IOPPN, King's College London	8	Co-ordinates study
Prof Nicola Fear	Principal Investigator	IOPPN, King's College London	12	Project oversight
Dr Trevor Hicks	Consultant Psychiatrist	RAF Brize Norton	1	Independent Medical Officer
Bonnie Parker	Research Administrator	IOPPN, King's College London	5	Administrative support
Mr Nathan Parnell	Research Assistant	IOPPN, King's College London	5	Data collection
Dr Paul Ramchandani	Child Psychiatrist	Imperial College London	1	Study design/planning
Mrs Kristy Rye	Research Assistant	IOPPN, King's College London	4	Data collection
Prof Alan Stein	Child Psychiatrist	Oxford University	1	Study design/planning
Ms Anna Verey	Research Assistant	IOPPN, King's College London	3	Data collection
Professor Sir Simon Wessely	Scientific Advisor	IOPPN, King's College London	1	Advises on design and methodology

8. SPECIAL REPORTING REQUIREMENTS:

YEAR 1 QUAD CHART

Understanding the Impact of Having a Military Father on Adolescent Children
 14309001
 W81XWH-14-1-0079

PI: Professor Nicola Fear Org: King's College London Award Amount: \$1,197,128




Study/Product Aim(s)

Overall study objective: To conduct an in-depth examination to determine the influence of paternal PTSD on adolescent emotional wellbeing and behavior.

Primary aims:
 To examine the influence of paternal PTSD on adolescent emotional wellbeing and behavior.
 To examine the influence paternal PTSD has on parent-child communication, family dynamics and functioning

Approach

A two group comparison study comparing emotional well-being and behavior in adolescents who have a father with PTSD with a group of adolescents whose fathers do not have a mental health diagnosis



Accomplishment: Ethics approvals received from MoDREC and the King's College London College Ethics Committees

Timeline and Cost

Activities	CY	1	2
Establish a research team			
Develop questionnaires			
Procedure to access sample			
Ensure adequate response rate			
Estimated Budget (\$K)		\$609	\$588

Updated: October 22nd 2015

Milestones – Delays to milestones in red

CY1: Milestone 1 – study staff recruited; Milestone 2 – staff trained; Milestone 3- UK MoDREC ethics approval gained, protocol submitted to HPRO IRB; Milestone 4 – data collection tools finalised; Milestone 5 – study documentation finalised; **Milestone 6 – study piloted on 5 families**; Milestone 7 – identify study sample; Milestone 8 – update contact details of sample; **Milestone 9 – start data collection; Milestone 10 – on-going data collection.** **CY2:** Milestone 11- active follow-up of non-respondents; Milestone 12 – achieve adequate response rate; Milestone 13 – start data entry; Milestone 14 – generate final linked dataset; Milestone 15 – complete data collection; Milestone 16 – finalise analytical strategy; Milestone 17 – undertake data analysis; Milestone 18 – final report submitted to funding agency; Milestone 19 – academic papers written and submitted. **Challenges: Obtaining IRB approval, without which we cannot start the study.** Budget Expenditure to Date: Projected Expenditure: \$1,197,128 (Year 1 \$608,968; Year 2 \$588,160); Actual Expenditure: \$280,000

9. OTHER ACHIEVEMENTS:

Safeguarding Children Level 3 on-line training completed by research team and Professor Nicola Fear. See www.e-lfh.org.uk/programmes/safeguarding-children

10. REFERENCES:

The poster below was awarded 1st prize in the Army Families Federation symposium's poster competition in June 2015, Andover, UK.



Service Parents' & Adolescents' Challenges & Experiences (SPACE) study

Parnell, N., Chesnokov, M., Rye, K., Verey, A., Parker, B. & Fear, N.
King's Centre for Military Health Research (KCMHR), King's College London

Objectives

1. Examine the influence of paternal PTSD symptomology on adolescent emotional well-being and behaviour.
2. Examine the influence of paternal PTSD symptomology on parent-child communication, family dynamics and functioning.
3. Examine the effect that specific PTSD symptomology in fathers may have on adolescent well-being and behaviour.
4. Examine the moderating effect of adolescent gender on paternal PTSD symptomology.

Background

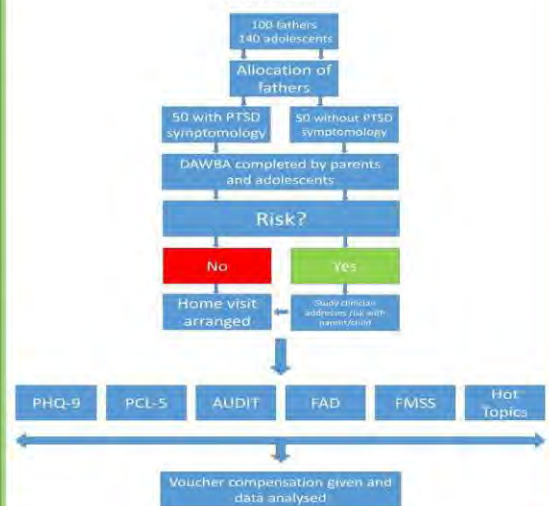
- A major concern for policy makers at present is how military life and deployment impacts on the psychosocial development and emotional well-being of military offspring¹². To date there has been a dearth of high quality, robust, quantitative studies in this area, especially from a UK perspective.
- The SPACE study (ref: 654/MODREC/15) will therefore explore the potential impact on young people of having a father in the military. This study is funded by the US Department of Defense, and will explore the above through in-depth assessment of family and individual functioning.

Method

- **Sample:** Two groups of fathers along with their eligible children aged 11-17 will be recruited. We plan to recruit 50 fathers with and 50 fathers without PTSD symptomology, along with 140 of their children.
- **Family assessments:** Families will undergo self-report assessments online (DAWBA) and during a home visit with added tasks (Hot Topics/FMSS).

Constructs measured	Measure	Who completes
Adolescent emotional well-being	Development and Well-Being Assessment (DAWBA)	Father, mother/partner and any eligible adolescents
Family functioning	McMaster Family Assessment Device (FAD)	Father, mother/partner and any eligible adolescents
Parental common mental disorders	Patient Health Questionnaire – 9 (PHQ-9)	Father and mother/partner
Parental alcohol use and misuse	Alcohol Use Disorders Identification Test (AUDIT)	Father and mother/partner
Parental PTSD	National Centre for PTSD Checklist (PCL-5)	Father and mother/partner
Parent-child communication (parental expressed emotion)	Five Minute Speech Sample (FMSS)	Father and mother/partner if present at home visit
Parent-child communication (relationship quality)	'Hot Topics' paradigm	Father and index young person

Study Design



Potential impact of the research

Research surrounding the health and well-being of military personnel is expanding, yet studies looking into the subsequent effect of problems on their families are few.

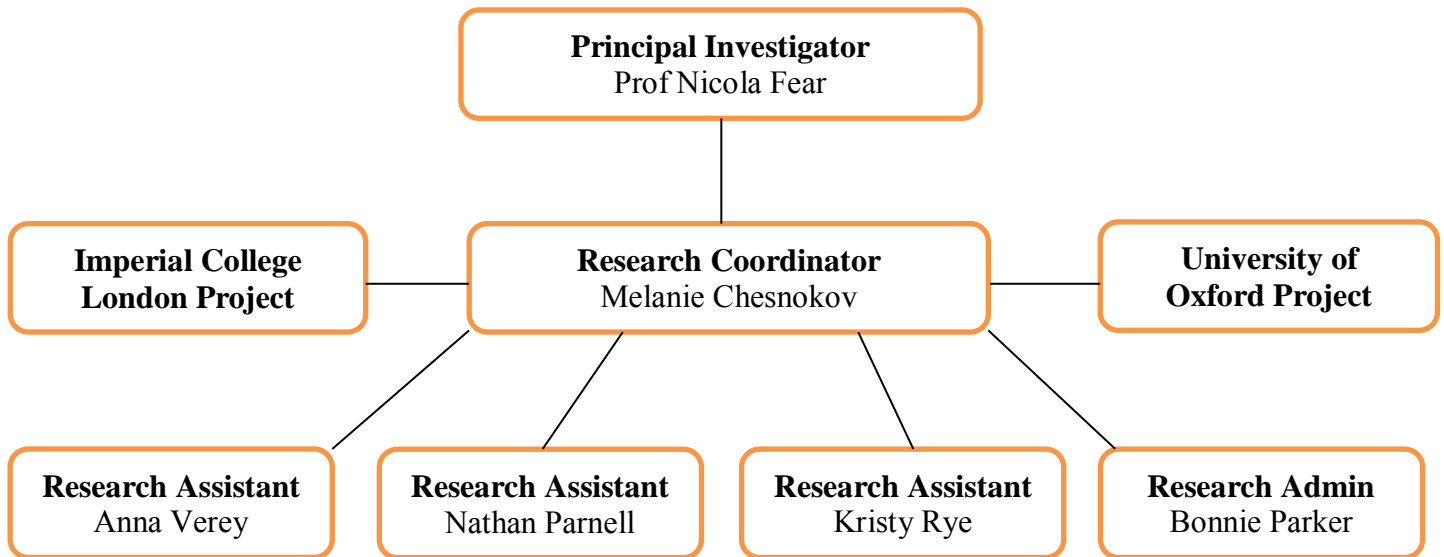
The results of this research will further contribute towards improving support for military families and personnel. This can be achieved through better understanding of the impact of military life and deployment on fathers and the subsequent effect it may have on their children and families. Given the early stages in this field, this could be hugely beneficial for influencing policies and support services.

References

- ¹ APA Presidential Task Force (2007). American Psychological Association Presidential Task Force on Military Deployment Services for Youth, Families and Service Members: A preliminary report. Washington, DC: American Psychological Association.
- ² RNRMCFF (Royal Naval & Royal Marines Children's Fund; 2009). The overlooked casualties of conflict: Understanding the challenges faced by the children of the armed forces personnel. Available from http://rnrchildrensfund.org.uk/uploads/overlooked_casualties_of_conflict_report.pdf.

**11. APPENDICES:
APPENDIX 1: STAFF DIAGRAM, APPENDIX 2: STUDY MEASURES,
APPENDIX 3: STUDY FLOWCHART**

APPENDIX 1: STAFF DIAGRAM



APPENDIX 2: STUDY MEASURES

Constructs measured	Measure	Who completes
Adolescent emotional well-being	Development and Well-Being Assessment (DAWBA)	Father, mother/partner and any eligible adolescents
Family functioning	McMaster Family Assessment Device (FAD)	Father, mother/partner and any eligible adolescents
Parental common mental disorders	Patient Health Questionnaire – 9 (PHQ-9)	Father and mother/partner
Parental alcohol use and misuse	Alcohol Use Disorders Identification Test (AUDIT)	Father and mother/partner
Parental PTSD	National Centre for PTSD Checklist (PCL-5)	Father and mother/partner
Parent-child communication (parental expressed emotion)	Five Minute Speech Sample (FMSS)	Father and mother/partner if present at home visit
Parent-child communication (relationship quality)	‘Hot Topics’ paradigm	Father and index young person

APPENDIX 3: STUDY FLOWCHART

