

Health Care Access and Quality

2021 Military Family Lifestyle Survey Comprehensive Report Spouse Health and Well-Being

In collaboration with

BLUE STAR



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Spouses are the backbone of military families. The necessity to take on multiple roles and responsibilities can affect their sleep, stress, mental health, and ability to find employment.

The disparity in spouse perception on the division of household labor, parenting, and overall time spent with children is well documented.¹ However, for military families, the nature of military service can mean the service member is unavailable to support household labor or family obligations, often leaving the military spouse solely responsible for maintaining day-to-day household obligations and family needs. Execution of these responsibilities can bring with it unique health and well-being impacts as making time for self-care comes second to caring for everyone else.² As for the military spouse population as a whole,³ the majority of military spouses in this sample are female (98%) and have children (86%).

Table 1: % with Children in Age Group in the Home Active-duty spouse respondents with at least one child in each age group

Infant (ages 0-2 years)	29%
Preschooler (ages 3-5 years)	38%
Grade-school-age (ages 6-12 years)	60%
Adolescent (ages 13+)	37%

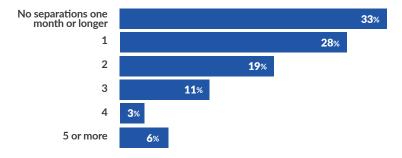
"Spouses often **carry the mental and physical load of the family**, all while also working." Active-Duty Army Spouse

The Impact of Separation

Being separated from loved ones, sometimes for long periods, is part of military life. The majority of spouse respondents (81%) indicate that they have experienced at least one separation from their service member due to military obligations in the past 18 months, although the length of these separations may vary. Of those who note being separated from their service member at some point in the past 18 months, one-third (33%) have not experienced any separations longer than one month, 28% report one separation longer than one month, and 39% have experienced multiple separations longer than one month. Roughly three-quarters (77%) of active-duty spouse respondents report they were not currently separated from their service member at the time of survey fielding; however, one in 10 (9%) active-duty spouse respondents were separated from their service member due to deployment, 10% due to TDY/

Figure 1: Number of Military Separations That Were a Month or Longer

Active-duty spouses who had been separated from their spouse during the past 18 months



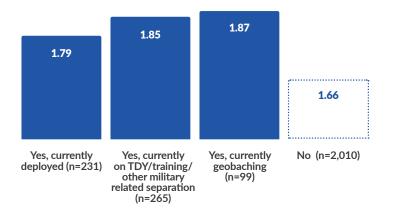
Training/Unaccompanied tours, and 4% due to geobaching.

While the military lifestyle requires frequent adjustments to changing environments, and military spouses have long been familiar with these shifting demands, these changes and separations still come with a cost to overall stress levels. Active-duty spouse respondents who were separated from their service member report higher mean stress scores than those who were not currently separated from their service member at the time of survey fielding.



Figure 2: Perceived Stress Among Active-Duty Spouse Respondents Experiencing Military Separation

Are you and your family's service member currently separated ...due to military service?



"My spouse is deployed and has been gone for 10 months. I have two young children and we are currently in a pandemic. I have **no time alone and no time to really recharge**..."

Active-Duty Navy Spouse

Chronically high stress levels have been associated with higher rates of physical and psychological issues,⁴ and repeated separations and associated stress may impact spouses' physical and mental health. Fewer than half (42%) of active-duty spouse respondents agree that their health is excellent. While two-thirds of active-duty spouse respondents (67%) report they do not have a current mental health diagnosis, 25% report a current diagnosis

of generalized anxiety disorder (GAD), which is much higher than the estimated levels of GAD in the overall population.⁵ Higher than estimated civilian levels⁶ of post-traumatic stress disorder (PTSD) (8%) are also self-reported.

5% of active-duty spouse respondents said that they **considered suicide** within the past year.

Child Care

Less than a quarter (22%) of spouses with a need for child care report they are always able to find care that works for their current situation. The process of finding child care can be challenging for many, but spouses with children who have special needs face additional difficulties finding care⁷ (see Spouse Employment and Child Care Finding for more details). With half (51%) of spouses with children at home reporting they have a child (or multiple children) with one or more of the listed impairments, disorders, "Finding child care for special needs children was extremely difficult. The CDCs did not have the resources nor knowledge to provide care for our child and the special needs preschool was only half day. When I tried to talk with the CDC about our son's needs, they were all very caring **but it was apparent there were not enough resources or procedures in place** to address his unique needs."

Active-Duty Army Spouse

Parent Support

8% of military-connected parent respondents (n=237) who indicated that they provide support to their active duty service member or spouse children **provide childcare on a regular basis.**

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Table 2: Children's Impairments, Disorders, and Disabilities Active-duty spouse respondents with children who live at home (part-time or full-time; n=2,462)	
Do you have a child with any of the following conditions? Please select all that apply.	
None,* my child(ren) does/do not have any of the following conditions	49%
ADHD	21%
Anxiety disorders	21%
Long-term physical conditions (medical condition, illness, or disability lasting longer than one year)	15%
Learning disability (dyslexia, auditory processing disorder, etc.)	13%
Communication disorders (including speech or language impairment)	13%
Autism Spectrum disorder	9%
Depressive disorders	8%
Other	6%
Diagnosed behavior problem	3%
Short-term physical conditions (medical illness or injury lasting less than one year)	3%
Visual impairment, including blindness	3%
Motor disorders	3%
Intellectual disability	2%
Other mental health disorder	2%
Eating or feeding disorder	2%
Trauma-related disorders	2%
Hearing impairment, including deafness	1%
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or disabilities (see Table 2), the experiences of this population necessitate further exploration. Active-duty spouse respondents provide insight into their experiences trying to find child care for their child(ren) with an impairment, disorder, or disability in openended responses to the question: "What, if any, challenges did you have in finding care?" The most common themes of challenges are availability of care (25%), Child Development Center (CDC) requirements (22%), and lack of qualified/trained providers (15%).

The Importance of Sleep

Echoing trends in the civilian population,⁸ only 41% of active-duty spouse respondents report they get enough good quality sleep to function effectively. Sleep quality for spouses is influenced by a variety of factors, including military separation and parenting responsibilities. Smaller proportions of active-duty spouse respondents who report they were separated from their service member due to deployment (38%), TDY or training (36%), or geobaching (33%) at the time of survey fielding agree they get enough sleep to function effectively than

*None was an exclusive answer choice

those not separated from their service member (42%). The presence of children also impacts the ability of spouses to get good quality sleep. A third of active-duty spouse respondents with children at home (39%) agree that they get enough good quality sleep to function, while 49% of their counterparts who do not have children at home feel the same. Of those who responded to the open-ended question, "What is preventing you from getting enough sleep to

function effectively?" the most commonly cited reasons are stress and anxiety (26%), physical health-related reasons such as chronic pain (25%), and parenting responsibilities (21%).

6% of active-duty spouse respondents **report** having a diagnosed sleep disorder.

What is preventing you from getting enough sleep to function effectively?

"I have a 1-year-old and a spouse who is on an extended training exercise. We are OCONUS and family is unable to visit. **We moved during the pandemic and have no friends.** I don't even know anyone in my spouse's unit."

Active-Duty Army Spouse



Sense of Belonging

A sense of belonging to a community is a critical component of resilience.⁹ Spouses have reported in previous surveys that they often lack this sense of belonging to the local civilian community;¹⁰ less than a third of active-duty spouse respondents (29%) to this year's survey report feeling a sense of belonging to their local civilian community. Because many military spouses are new to their communities — a third of active-duty spouse respondents (37%) report they had lived in their local community for less than 12 months — the military community often offers an opportunity for belonging.¹¹ A family readiness group can serve as a potential bridge between civilian and military communities for spouses.¹² Although what denotes a family readiness group differs between service branches, they can include command spouse groups, family readiness groups, Ombudsman/Key Spouse groups, and work-life groups. These spouse groups are stood up to counteract feelings of isolation or exclusion, provide command and community information, and create a shared sense of belonging.¹³ However, fewer than 1 in 5 active-duty spouse respondents (19%) report that they feel a sense of belonging to the unit/ command spouse group, or to their spouse's unit or command (20%), indicating that these groups should not be the only avenue for connection for active-duty spouses.

Intimate Partner Violence

In addition to other stressors brought on by military life, one out of ten active-duty spouse respondents (10%) report experiencing unhealthy relationship behaviors during the past year. These unhealthy relationship behaviors could include jealousy, controlling behavior, financial or economic control, isolation, insults, or threats, and are included in many definitions of intimate partner violence.¹⁴ Economic abuse, in particular, is correlated with psychological, sexual, and physical violence.¹⁵ Aspects of the military spouse lifestyle, like isolation from family and friends, as well as child care and employment challenges that may make them more financially vulnerable and dependent on the service member, may put spouses at greater risk of experiencing intimate partner violence.¹⁶ Indeed, according to the Department of Justice's Bureau of Justice Statistics, the incidence of domestic violence^a in the U.S. was approximately 4.2 victimizations per 1,000 persons age 12 or older in 2019 (or 0.42%).¹⁷ When compared to the proportion of spouse abuse reports that met

DOD criteria in FY2019 (10.9 Table 3: % of active-duty spouse respondents who report experiencing each of the following per 1,000 military service within the last year (n=2,560) members, or approximately Has your partner or spouse... 1.1%),¹⁸ the frequency of Sometimes said insulting things or threatened you? 8% domestic violence/abuse in Limited your access to financial accounts or made you ask him/her for money, withheld 4% money, demanded to know how money was spent, or concealed financial information from you? the military was potentially greater than two times that of Been very jealous or tried to control your life? 3% the national population pre-2% Tried to keep you away from your family or friends? pandemic.^{b,c} Respondents were able to select all that applied.

Of course, there are compounding risk factors for unhealthy relationship behaviors and intimate partner violence.¹⁹ For example, 16% of active-duty spouse respondents who identify as an unpaid caregiver report at least one type of concerning behavior, compared with 9% of spouses who do not identify as a caregiver. Additionally, 12% (n=196) of spouses who are connected to the Special Operations Command (SOCOM) report one or more unhealthy relationship behaviors in the past year, compared with 10% (n=2005) of spouses who are not affiliated with SOCOM.

^a"Domestic violence" as defined in this report was limited to "rape or sexual assault, robbery, aggravated assault, and simple assault" or "threatened, attempted, and completed occurrences of those crimes." (Morgan and Truman, 2019)

^bThe 2021 MFLS was fielded during the COVID-19 pandemic. Differences between pre-pandemic data and the 2021 MFLS could be related to factors that were not examined in the MFLS.

^cWhile the Bureau of Justice Statistics report included violent incidents involving any family member over the age of 12, the DOD report was limited to abuse of spouses, indicating that the disproportionate rate of domestic violence within military families may be even greater.



Of those who have experienced any concerning behaviors, the majority (90%, n=257) did not report concerns about their spouse's behavior. Most (49%) did not report the behavior because they felt it was not a big deal. However, a notable proportion (17%) indicate they were afraid to hurt their spouse's/partner's career, 5% indicate they were embarrassed, and 5% cite a lack of confidentiality as reasons they did not report, demonstrating that concerns for repercussions continue to prevent spouses from seeking support (n=225). The majority (59%, n=253) of spouses who have experienced unhealthy relationship behaviors say they are aware of resources that could help, and that they are able to access resources (56%, n=251), but only a third report actually accessing resources (37%, n=250). Of those who have utilized resources, 58% (n=91) agree the resources were helpful to them. It is important to note, however, a quarter (25%, n=253) of active-duty spouse respondents who have experienced these concerning behaviors do not agree with the statement: "I am aware of resources where I can turn for help."

Implications

Spouse well-being and family experiences can impact the decision to remain in or leave the military. Almost four out of ten (38%) active-duty spouse respondents say their family expects to exit military service within the next five years. Among those respondents planning to exit service within the next five years, the most commonly cited reason for leaving the military, outside of military retirement, is "the military lifestyle did not allow me sufficient time with my family"(24%). Given the impact of female spouses on family decision making²⁰ and the potential impact on service branch end strength if and when families choose to exit military service, it is imperative that military spouses' overall well-being factor into personnel policy priorities.

Recommendations

*More information in Recommendations Chapter of Comprehensive Report

Military

- Conduct a communications campaign to educate military families on the services available to support healthy relationship behaviors, options for reporting unhealthy behaviors, and dispel myths about the impact of reporting on the service member's career.
- Educate professionals working with military families to recognize and intervene when they observe unhealthy patterns of behavior in relationships and expand pathways to help families through multiple touchpoints, regardless of the presence of physical violence.
- Expand drop-in or hourly child care availability, to include availability at installation fitness centers.
- Expand and provide consistent respite child care support.
- Commission a report on families with children with special needs and their barriers to accessing child care. Include plans for hiring and training qualified providers and making CDCs accessible for children with special needs.*



Non-Profits or Communities

Invite uniformed family readiness officers/assistants across the DOD to informal military spouse groups to ensure accurate dissemination of information and resources.



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