

# COVID-19

MILITARY SUPPORT  
INITIATIVE

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# RESILIENCE

## UNDER STRESS STUDY

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COMPREHENSIVE REPORT

## ACKNOWLEDGMENTS

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## EXECUTIVE SUMMARY

At the time of this writing, COVID-19 has caused some 1.2 million deaths across the globe, leaving few countries unscathed, with over 43 million total cases reported worldwide. The pandemic has disrupted civilian life, as well as the U.S. military and those families who sacrifice in its service. Against this backdrop, the Resilience Under Stress Survey (RUSS) offers a multifaceted look into the experiences of U.S. military-affiliated individuals and their families during the global pandemic, focusing on factors that diminish or contribute to personal and family resilience. Utilizing comparative polling data on the general U.S. public from the Pew Institute, data from Blue Star Families' robust annual Military Family Lifestyle Survey (MFLS), and a sample of military-affiliated individuals recruited by Blue Star Families and its partners, the RUSS provides an unparalleled view into how the pandemic has impacted our nation's military community. Importantly, the RUSS, by focusing on a public health crisis which is still significantly affecting daily life for billions of people across the world, presents the opportunity to identify and get upstream of the adverse effects generated by COVID-19.

### Resilience During National Upheaval and Continued Uncertainty

Military families are widely described as "resilient." As previous research from Blue Star Families' annual Military Family Lifestyle Survey and numerous other sources describe, these families are presented with multiple, repeated stressors such as relocation, deployments and separations as well as disjointed children's education and spousal employment, yet they persevere and even thrive. The RUSS offers a new exploration of not only the impacts of a global pandemic on these families, but also what community factors can support their resilience.

Indeed, though the military population may be expected to be more resilient than the general population, a variety of factors can make military-affiliated individuals and their families more vulnerable. While military family respondents generally reported the greatest impacts have been to their mental health, their children's mental health, their overall happiness and spouse's employment, results from the RUSS demonstrate that the COVID-19 pandemic has had greater impacts on specific segments of the military, including Black families, families with children with special needs, and families who are caregiving.

The RUSS also offers a clearer view of the community characteristics connected with resilience. A positive perception of the crisis response of community entities, such as local government, local schools and especially installations, was connected to less stress and greater resilience. Additionally, active-duty families who reported greater resilience, belonging, and social support also reported reduced COVID-19 impacts. Furthermore, the COVID-19 pandemic may have offered an opportunity for military families to become

more aware of and embedded in their local civilian communities. Not only did active-duty family respondents in the RUSS report greater awareness of local community leadership and resources than active-duty family respondents in the 2019 MFLS, but they also perceived greater military family lifestyle cultural competence (defined as awareness, appreciation, respect, support, and understanding of military family life) from their local communities. These findings offer some direction for future work on enhancing communities' capacity to support resilience in military families.



## Top Findings

### **Military families reported significant impacts from COVID-19 on their overall happiness and on their personal mental health and the mental health of their children.**

These adverse mental health impacts were elevated among families with children with special needs and caregiving families, highlighting a need for a more targeted focus on facilitating mental wellness support for these groups.

### **Military families were less likely than the general population to perceive COVID-19 as a threat to their financial situation.**

In comparison to the general U.S. public, active-duty family respondents tended to have lower levels of perceived financial threat in regards to COVID-19. Likewise, most respondents did not describe having been financially impacted. However, Black military families and military families with children with special needs and families with caregivers reported having more severe financial impacts than their counterparts.

### **Families who reported employment-related impacts due to COVID-19 also experienced financial impacts, including stress.**

Families that faced employment challenges reported experiencing greater levels of financial impact and related stressors. Getting upstream of these challenges, and dealing with existing challenges, can include targeted, community-based efforts to identify economically-vulnerable or job-insecure military families and facilitate opportunities for employment and job protections.

**Women report greater COVID-19 impacts.** Women, who already play a key role in military family household management and decision making, are absorbing the additional burdens and stressors created by the COVID-19 pandemic. Women report greater impacts to their employment, mental health, and overall happiness, as well as greater perceived threats to their communities, and their world.

### **Black active-duty family respondents experienced more financial and employment impacts in comparison to Hispanic/Latino/a and white active-duty family respondents.**

Employment impacts for Black active-duty family respondents outpaced other areas of impact, including mental health and family-related impacts.

**Active-duty family respondents who held positive views on the COVID-19-related responses of their local installation and community entities also reported greater resilience and less stress.** Active-duty families held largely favorable views of the crisis responses of local entities, however, perceptions of a poor response, particularly from the installation, were connected with significantly greater stress.

**Active-duty families express a greater familiarity with community leaders and resources available locally.** Americans have had to become more resourceful, informed and connected to their communities; active-duty family respondents indicated that they had a greater level of familiarity and knowledge of their community leaders and local resources than those respondents in the 2019 MFLS.

### **Active-duty families perceive greater Military Family Lifestyle Cultural Competence.**

COVID-19 presented a unique opportunity for communities across the U.S. to better understand the sacrifices made by military families. Active-duty families reported significantly greater awareness, appreciation, support, respect and understanding of military families from their communities than they did in 2019.

**Active-duty family respondents who reported greater resilience, belonging, and social support also reported reduced COVID-19 impacts.** Active-duty family respondents who perceived less intense mental health, family, and overall happiness impacts also reported greater resilience. Those who reported COVID-19 had no impact on their family, their mental health, their children's mental health or their overall happiness also reported the greatest belonging to their local civilian community.

**National Guard members experience less intense COVID-19-related impacts than active-duty family respondents.** National Guard family member respondents also reported experiencing greater community awareness, appreciation, respect and understanding.

## INTRODUCTION

The coronavirus pandemic has caused far-reaching and intense physical, social, and economic impacts globally, contributing to hundreds of thousands of deaths and economic devastation. While COVID-19's implications are widespread and affect the whole country, military families are likely to be uniquely impacted. Though this population might otherwise be expected to be more resilient against the impacts of crises<sup>1</sup>, due to the income security and health care provided to service members and family members, pandemic stressors can exacerbate existing issues resulting from the military lifestyle. Attempts to stop the spread of the virus included a stop movement order, which halted service members and their families' movements. Service members returning from deployment, training, or separation experienced indefinite delays; families were left in limbo while planning a permanent change-of-station (PCS) move. Families already experiencing limited social support were further stressed by social distancing requirements.

These intensified challenges may put military-affiliated individuals and their families at an amplified risk during COVID-19 due to the increasingly well-recognized "secondary" effects of the crisis, such as social isolation and loneliness<sup>2</sup>. As a result of the immense strain and risks undertaken in their service and sacrifice, many factors may indeed make military-affiliated individuals and their families more vulnerable than those in the general population. Ultimately, these stressors may exceed the bounds of their hard-earned resilience.

## *Military family resilience*

**is when service members, veterans, and their families have the skills and resources they need to withstand, recover, and grow from stressors, including those compounded by military and veteran life.**

The RUSS describes the impact of the crisis on military families and the factors that support military families' resilience during this unprecedented time, focusing on health, mental well-being, financial and household stability, and institutional and community belonging. While research on resilience, particularly in military families, is growing, it has previously examined military-specific stressors such as deployment. COVID-19 has offered an opportunity to explore military and veteran family resilience in action—while under the large-scale universal stressor of a global pandemic.

## METHODOLOGY

### Design

The Resilience under Stress Study (RUSS) included a larger cross-sectional analysis of respondents, as well as a longitudinal analysis of a subsample of respondents who completed both the 2019 Military Family Lifestyle Survey and the RUSS. The study assessed and compared protective factors and overall community capacity factors that may support resilience across the whole sample and among specific subgroups (e.g., among racial/ethnic minority groups, people with children with special needs, etc.). A subset of responses were paired for participants who completed both the RUSS and the 2019 Military Family Lifestyle Survey, which contained many of the same survey items as the RUSS. This allows a comparison of a matched group before and during the COVID-19 crisis.

### Data Collection and Sampling

Fielding for RUSS commenced on May 13 and ended on June 17 through Qualtrics ([www.qualtrics.com](http://www.qualtrics.com)), a web-based surveying platform. The project was executed in collaboration with the Institute for Veterans and Military Families at Syracuse University. Individuals were eligible to participate if they were at least 18 years old and an active-duty service member or veteran of the military, including the National Guard and Reserve components, or a family member/partner of an active-duty service member or veteran. Recruiting for participants took place via multiple channels, primarily through the COVID-19 Military Support Initiative (CMSI). Recruitment methods included emails to existing Blue Star Families members, as well as promotion and solicitation via the website, various social media platforms, and networking support from partners and affiliates. As an incentive, participants could opt-in to a raffle for one of five \$100 gift cards. The RUSS research protocol and human subjects protection plan was reviewed and approved by the Institutional Review Board at Syracuse University (protocol number IRB #20-144).

Recruitment efforts were designed to solicit from subsets of the military and veteran family populations of interest while maintaining broad representation by military branches. Recruitment focused on particular subsets of interest, including National Guard families, racially and ethnically diverse military families, junior enlisted families, and dual-military families. Sampling was not stratified, and results were not weighted to be precisely representative. Also, sampling biases may have been introduced through non-probability sampling. It is important to note that many locations lifted lockdown requirements during survey fielding, which may have influenced respondents' perceptions of the threat of COVID-19 and resource availability. Additionally, survey fielding was held amid the racial injustice protests sparked by the murder of George Floyd. This may have also contributed to these findings.

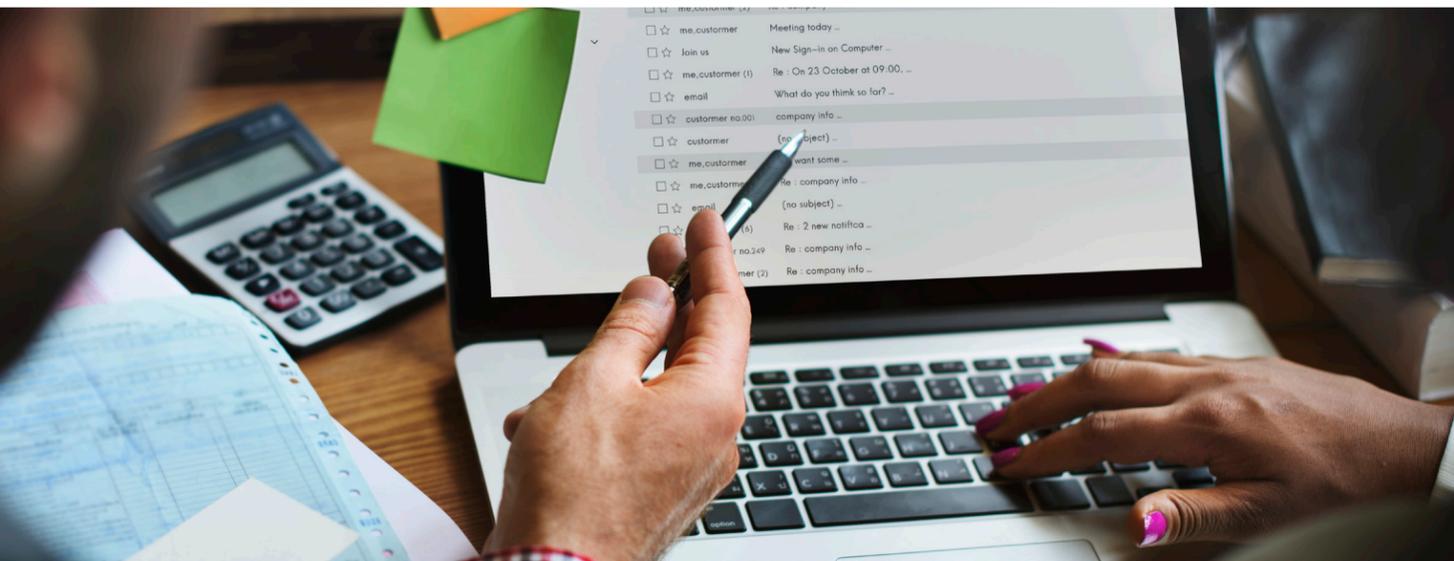
## Measures

The RUSS utilized the Military Family Resilience (MFR) Metric, an ongoing effort to measure military family resilience, sponsored by USAA. Scales were developed for each of the proposed protective factors at the individual, family, and community level, drawing from established scales and a literature review. Items were subjected to rigorous peer and external expert review and revised. Piloting of the community level of the metric occurred in the 2019 Military Family Lifestyle Survey. Piloting of the individual and family level scales occurred in an optional follow-on survey of the Military Family Lifestyle Survey respondents. Respondents were matched across the 2019 Military Family Lifestyle Survey and follow-on survey so that each one had a complete response set of all levels of the metric. Following this pilot, an analysis of each factor and level-guided metric revision, as well as scales, were revised and/or removed in favor of established measures. The usage of these revised scales occurred in the RUSS, in addition to other established measures, including the Perceived Stress Scale, the Social Isolation Scale, Brief Resilience Scale, SF-12, and the Pew COVID-19 Threat Perception Scale.

## Data Analysis

An assessment of the differences across variables occurred within and between subgroups, including active-duty families, veteran families, National Guard families, families with children with special needs, caregiving families, minority families, and others. Frequencies, descriptive statistics, cross-tabulations, t-tests, analyses of variance (ANOVAs), and correlations were conducted using Qualtrics Survey Software and IBM SPSS Statistics V.26.

Open-ended responses were also captured in response to the following question: “Please tell us how COVID-19 has impacted you — good, bad, or other.” Responses were organized, coded, and analyzed inductively to locate themes, and quotes are used throughout this



## RESPONDENTS

report to illustrate the findings.

In total, 3,024 individuals responded to the survey, while 2,205 completed the survey in full (73% completion rate). Respondents were permitted to skip a question or select “prefer not to answer,” which excluded them from the final analysis of that item. Active-duty and veteran family responses were calculated by adding service member or veteran and spouse respondents (veteran family responses included veterans and spouses of veterans).

The sample was nearly evenly split between active-duty and veteran respondents. The active-duty family sample included a greater proportion of white, non-Hispanic, married, older, female, and senior ranking respondents than the active-duty population. Of active-duty service member respondents, 11% were junior enlisted (E1-E4), 50% were senior enlisted (E5-E9), 14% were company grade officers (O1-O3), 22% were field grade officers (O4-O6), and 4% were warrant officers. The majority (93%) of active-duty family respondents were female, and 7% were male. The sample was also under-representative of Black/African-American respondents. While Black/African-American service members constitute 17% of the military population, only 6% of active-duty servicemember respondents identified as Black/African-American. As a result, these findings should not be generalized to the military family population as a whole, though they provide direction for future investigation.

Most service branches were represented at rates within a few percentage points of the active-duty force. However, the Army was slightly oversampled at 37% instead of 35% of the active-duty military population<sup>1</sup>. Survey respondents identified their primary relationship to the service member (self, spouse/significant other, sibling, parent, child, or other relationship). A total of 39% of respondents were a service member, veteran, or retired service member, while 55% were a spouse of a service member or veteran, and 5% were another family member (e.g., a parent, adult child or sibling). Of those who identified as a current or former service member, 13% were active duty, 68% were veteran, 15% were National Guard (activated and non-activated), and 4% were Reserve (activated and non-activated). Of family member respondents, 67% were an active-duty family member, 20% were a veteran family member, 8% were a National Guard family member (activated and non-activated), and 5% were a Reserve family member (activated and non-activated).

## Chapter 1:

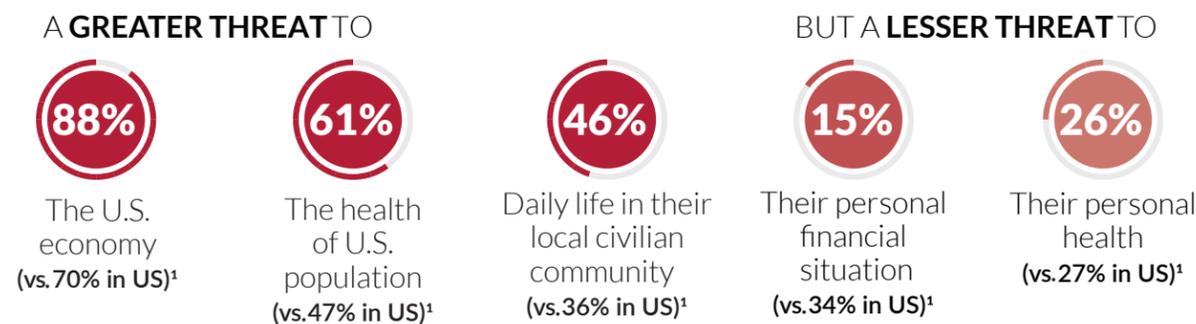
# THE COVID-19 CRISIS' IMPACT ON MILITARY FAMILIES

### How the COVID-19 Crisis and Civil Unrest Impacts Military Families

#### FINDING:

Compared to the general U.S. population, military families perceived COVID-19 to be a major threat to the country.

#### Active-duty families perceived COVID-19 posed a major threat to (RUSS sample vs. general U.S. population):



While an equal percentage of active-duty family respondents viewed COVID-19 as a threat to their personal health, the majority associated it with a heightened threat to the health, welfare, and functioning of the world. However, active-duty respondents appear to differ greatly from civilians<sup>1</sup> regarding their perception of threat to the U.S. economy, the health of the U.S. population, and daily life in their civilian community; military families hold a far more pessimistic view than their civilian counterparts. On the other hand, a much smaller proportion of active-duty family respondents (15%; most of whom were senior enlisted- or officer-ranked family respondents) perceived there to be a major threat to their personal financial situation, compared to their civilian counterparts (34%).

These different perceptions of threat were also reflected in active-duty family respondents' reported impacts of COVID-19, with military families, like their civilian counterparts, reflecting a greater perceived threat to the country and the world, compared to their individual families. The majority of military family respondents reported the pandemic has had a "major" or "severe" impact on the U.S. economy (82%), the world (73%), and the health of the U.S. population (55%). Additionally, 47% of military families indicated COVID-19 had a major or severe impact on daily life in their local civilian community (47%), further substantiating military families' intuitive "macro" vs. "micro" focus.

*"I personally have seen the silver linings and think my family and I have thrived. But overall, for the rest of the world (health wise and the economy) and the health/financial stress of our extended family and friends, etc... we really worry. A lot of major events have also been missed in our family so that is definitely hard since we can't get that back."*

**Navy Spouse**

**FINDING:**

In line with civilian literature, active-duty family respondents reported COVID-19 was having the greatest impact on their overall happiness, personal mental health, and their children's mental health.

*“I struggled with anxiety and depression prior to the outbreak. Being stuck at home has increased my mental health struggles. The virus itself doesn't frighten me, but the government and community response has been extremely frustrating... I fear for the future of our community because of how polarized we have become over issues related to the virus.”*

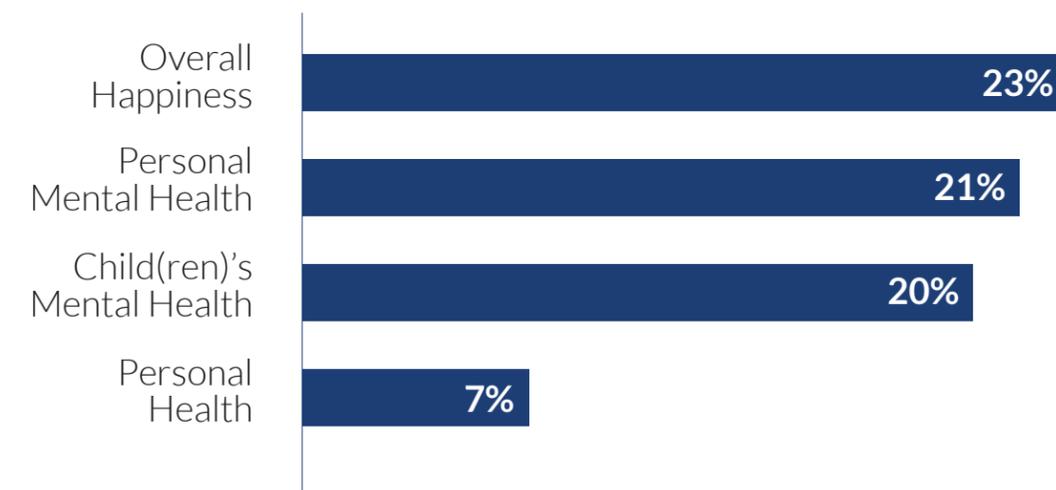
**Air National Guard Spouse**

Just as their civilian counterparts, of whom 40% reported struggling with mental health symptoms or substance abuse in June 2020<sup>2</sup>, active-duty family respondents also indicated the most significant personal impacts of COVID-19 were on their mental health and happiness. Twenty-three percent of active-duty family respondents reported COVID-19 had a major or severe impact on their overall happiness, 21% on their personal mental health, and 20% on their children's mental health. In sharp contrast, only 7% indicated COVID-19 had an impact on their personal health. This suggests that though respondents may have been less concerned about their physical health risk due to COVID-19, other aspects of the pandemic—for example, distress over potential job loss, lockdowns, school and business closures, or political and familial discord—contributed to their lowered mental health. Roughly half of active-duty spouse respondents (47%) indicated they accomplished less than they would like in their work or daily activities as a result of emotional problems, which suggests that COVID-19 had significant impacts on the ability of families to manage and sustain general household functioning. These difficulties were compounded for families with pre-existing mental health conditions.

Active-duty military families (20%) also reported “major” or “severe” impacts on their child(ren)'s mental health. The percentage of active-duty military families with children reporting a child with any special needs (not just mental health concerns) increased from 20% to 34% from the MFLS (May 2019) to the RUSS (May 2020)<sup>a</sup>. More importantly, the percentage of active-duty families with children reporting they have a child with mental health concerns increased from 4% to 13%<sup>a</sup>. The simultaneous impacts on both parents' and children's mental health are a particular concern, as parents who are struggling with their own mental health may be less prepared to support and guide a child with a mental health issue.

### Greatest Impacts of COVID-19 are on Happiness and Mental Health

Active-Duty Families Reporting “Major” or “Severe” Impacts



<sup>a</sup> Differences here were not tested for significance and may be attributable to the differences in samples.

**FINDING:**

Feelings of social isolation remain steady, despite concerns about social distancing.

The need to socially distance and isolate from others to prevent the spread of COVID-19 has led to concerns about increasing social isolation, and the potential negative mental health outcomes that are associated with feelings of social isolation, including depression, anxiety, suicide, and suicidal ideation<sup>3</sup>. While a greater percentage of active-duty family respondents reported “usually” or “always” feeling isolated since COVID-19, similar percentages reported “feeling left out,” indicating that while physically isolating, families are still able to connect with others. Active-duty family respondents reported similar social isolation to the general U.S. population<sup>4</sup>, although spouses reported greater isolation than service members. Indeed, military families may be adept at socially connecting despite physical distance due to frequent relocations that are often part of the active-duty lifestyle.

Teleworking greatly increased during the pandemic, and may continue for long after<sup>5</sup>. While “flexible employment” was reported as a preferred solution to military spouse unemployment woes<sup>6</sup>, and so may be a boon for military spouses seeking to begin or continue working remotely, many respondents suggested that the shift to teleworking has both positive and negative consequences.

*“It has definitely made life more stressful trying to telework, homeschool, and take care of my children all at once.”*

**Female Air Force Service Member**

Although teleworking allowed families to manage household and child care obligations while maintaining employment and income, it also had the potential to create a deeper sense of isolation. Further, pandemic containment efforts included social distancing and lockdowns, potentially increasing the risk of isolation from family and friends, which is already a top issue for military families<sup>7</sup>. Despite these concerns, military family respondents’ feelings of social isolation and stress appeared to remain steady in comparing a paired sample of active-duty, National Guard, Reserve and veteran family respondents from both the 2019 Military Family Lifestyle Survey (MFLS) to the 2020 Resilience Under Stress Study (RUSS). This indicates that while physical separation from others may increase, social connections may be holding strong.

“I see many parallels between the pandemic and military life, so perhaps military life prepared me well for this pandemic. My husband is deployed, and that deployment is extended, but we have dealt with this hardship before. I miss seeing my friends and family, but that is a common feeling as a military spouse. My job prospects are limited by this pandemic, but that’s true of many points along the story of my life. I find myself mostly grateful for my husband’s solid income and the family benefits we receive. I’m grateful for my strong and positive military friends who get me through this, as they’ve gotten me through so many ups and downs before.”

**ARMY SPOUSE**

**FINDING:**

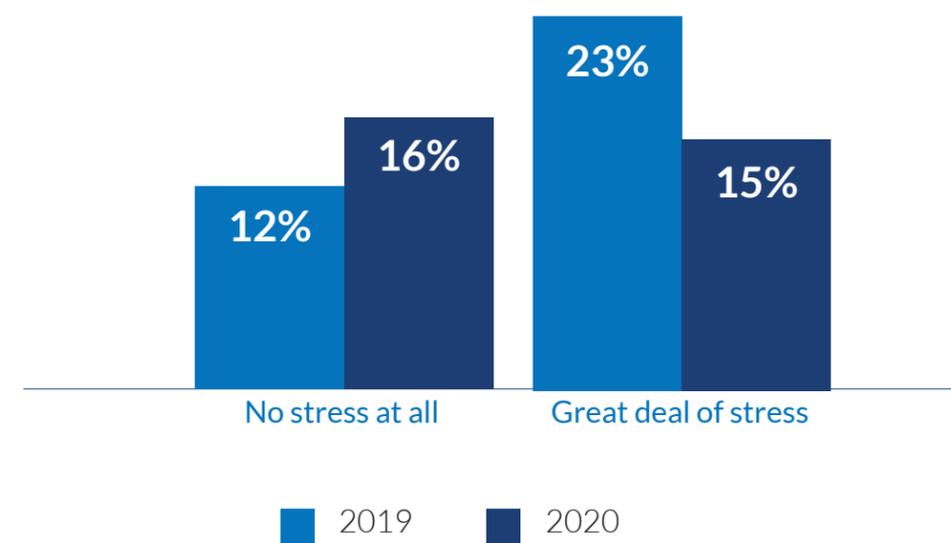
Active-duty family respondents experienced a range of financial impacts; while many families demonstrated financial resilience, active-duty spouses who reported their employment was “majorly” or “severely” impacted reported more severe financial impacts.

Just as the general U.S. population is experiencing record levels of unemployment, 24% of active-duty spouse respondents reported “major” or “severe” impacts to their employment situation as a result of COVID-19. Prior to the pandemic, active-duty spouses experienced an unemployment rate of 24%<sup>8</sup>, well above the national average of 3.5%<sup>9</sup>, and an underemployment rate of 77%<sup>10</sup>. Of those active-duty spouses with severe impacts to their employment situation, 36% reported severe financial impacts, compared to only 6% who reported no employment impacts.

Interestingly, while there has been considerable concern about the current impacts of COVID-19 on the immediate financial circumstances of individuals, only 11% of active-duty family respondents reported that the pandemic had a “major” or “severe” impact on their financial situation, although the sample of active-duty family respondents in the RUSS was disproportionately composed of Senior Enlisted (52%) and Field Grade Officer ranks (28%). Furthermore, the percentage of respondents who reported their financial situation caused them a “great deal of stress” fell a full 8% from 2019 to 2020. This may be reflective of the impact of federal stimulus funding, reduced spending (such as on child care, entertainment, dining out, and travel)<sup>11</sup>, on the proportion of the sample composed of senior enlisted or officer families, or active-duty families’ financial resilience. The COVID-19 crisis and resulting shutdowns may have reduced some costs for families (such as the need for costly child care, commuting, entertainment costs, etc). Further, the large majority (92%) of active-duty families had received an Economic Impact Payment in the previous two months, providing additional unanticipated income. This decline in financial stress during a time of presumed financial uncertainty highlights some military families’ financial resilience, though it is likely that the financial impacts to lower enlisted service members’ families will differ.

**Active-Duty Families Report Less Stress Caused by Financial Situation**

Majority of Sample are Senior Enlisted or Officer Families



The data suggest the pandemic affected but did not fundamentally undermine most respondents’ financial footing; rather, COVID-19 may have destabilized military spouse respondents’ employment situation—for example, by changing their hours and work styles (e.g., moving to work-from-home)—without formally impacting their pay or benefits. It remains to be seen, however, whether or not the pandemic will lead to significantly increased military spouse unemployment, underemployment, and/or decreased labor force participation in the long-term. In spite of the relative calm that respondents displayed in regards to their personal financial situation, military families may be particularly vulnerable to second- and third-order effects related to school and child care uncertainty, inflexibility of service members’ day-to-day job demands, and increased employment competition for spouses re-entering the labor force and/or seeking employment following a PCS move.

While concerns regarding this long-term impact on military spouse employment are warranted, it is also worth highlighting that many military families are demonstrating signs of financial resilience during the pandemic. Most active-duty family respondents (58%) reported they had not used their savings as a result of COVID-19, and half (50%) of those with credit card debt reported that none of their current debt was a result of the crisis.

In a sample of active-duty, National Guard, Reserve, and veteran respondents whose responses to the 2019 MFLS and the 2020 RUSS were paired, those who had more than \$1,000 in savings increased from 79% in 2019 to 86% in 2020. The same group reported a slight reduction in credit card debt, with 62% reporting some credit card debt in 2019 and 59% in 2020.

Food insecurity and housing insecurity among active duty family respondents in the RUSS also remained steady. This may be due to the expanded and accelerated support provisioned by community organizations, such as food banks and charitable social service organizations. Only 7% of active-duty family respondents indicated that a household member faced food insecurity since the pandemic began, versus 6% before the pandemic. Additionally, 3% of active-duty families indicated having to temporarily stay at a hotel/motel and 3% indicated staying with a relative or other individual (outside of a PCS move) before the start of the pandemic, versus 2% since the pandemic began.

While the majority of this sample of active-duty family respondents did not feel they were severely financially impacted by the pandemic, and only 15% perceived it to be a “major” or “severe” threat to their personal financial situation, 88% viewed it as a “major” or “severe” threat to the national economy. When compared to the findings of Pew Research Center<sup>12</sup> among the broader U.S. population, active-duty family respondents to the RUSS are far more concerned about COVID-19’s threat to the national economy and far less concerned about the threat to their personal financial situation. This finding illustrates that while military families may be insulated from some of the negative economic impacts of COVID-19, they remained concerned that the pandemic had unsettled the broader economy and thus may have misgivings about the degree to which they may remain unaffected. In view of the broad, ongoing layoffs and furloughs across the U.S. labor force, these dynamics could negatively impact spouses’ ability to (consistently) earn a wage. Furthermore, increasing instability in the economy and the effect of the stimulus and reduction of unemployment benefits may precipitate greater financial insecurity, so it will be critical to maintain surveillance of military families’ financial circumstances and observe best practices from military families that can be translated to the general U.S. population.



## Spotlight:

# FAMILIES WITH CHILDREN WITH SPECIAL NEEDS

“The mental health of me and my children are greatly impacted. Besides my health problems, all three of my children have mental disorders, including ADHD, ODD and autism. So, them just being stuck together is bad enough. But me not being able to get away is worse.”

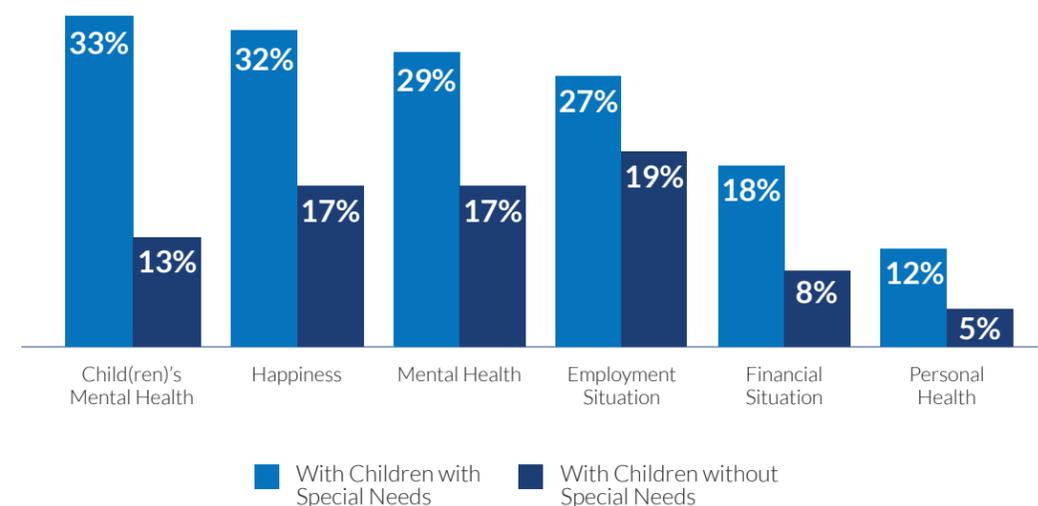
**SPOUSE OF ARMY VETERAN**

A total of 315 respondents identified as an active-duty family with at least one child with special needs, 91% of whom were the spouse of a service member. Most of these respondents (95%) identified as female, with 74% of those respondents identifying as white, followed by Hispanic/Latino/a (12%), Black (5%), and Asian (5%). The most common service member affiliations for active-duty families with a child with special needs were Army (29%), Navy (29%), Air Force (28%), Marine Corps (8%), and Coast Guard (3%).

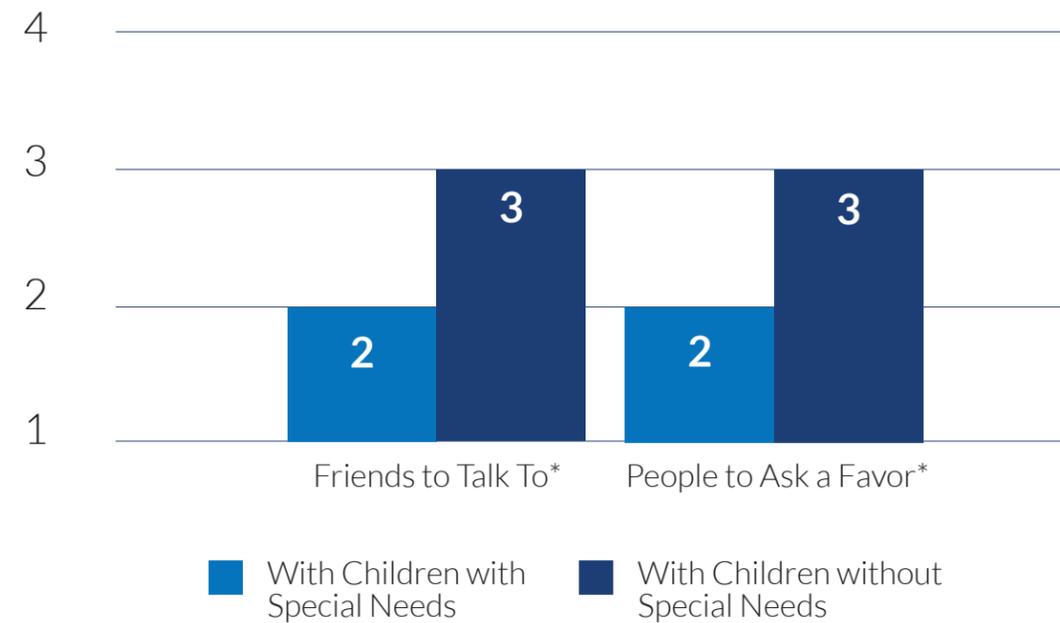
Some of the most intimately felt impacts of the crisis were in relation to military families' personal mental health and their children's health. The balance of competing employment, academic, and domestic responsibilities, and the need to attend to their own mental health, was uniquely amplified for individuals with children, especially those with special needs at home. This group had significantly greater stress\*, more social isolation\*, and less resilience\* than their peers without children with special needs. More than a third (34%) of active-duty family respondents in the RUSS had a child with special needs. The most commonly identified special needs were ADHD (49%), mental health disorders such as depressive or anxiety disorder (38%), a speech or language impairment (33%), autism (28%), and a developmental delay (27%).

Active-duty families with children with special needs indicated greater impacts of COVID-19 than their peers with children without special needs. The greatest impact for families with children with special needs was on their children's mental health; 33% of active-duty family respondents with children with special needs reported a “major” or “severe” impact, compared to only 13% of their peers with children without special needs. There were additional impacts on the parents' mental health; 29% of respondents with at least one child with special needs indicated COVID-19 had a “major” or “severe” impact on their mental health, versus 17% of respondents with a child without special needs. A greater percentage also reported feeling stressed “fairly” or “very often” (64% of families with a child with special needs, compared to 47% of families with children who do not have special needs).

**Active-Duty Families with Children with Special Needs Reported More “Major” or “Severe” COVID-19 Impacts**



**Active-Duty Families with Children with Special Needs Have Fewer Social Resources**

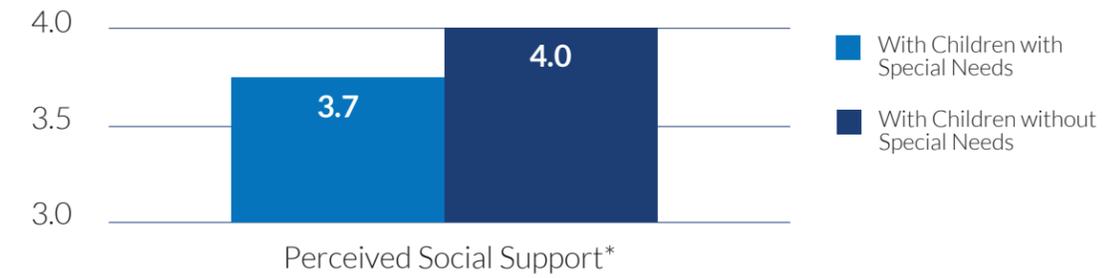


Related to these families' greater levels of stress and mental health impacts, they also reported more limited social support resources than their peers. They have fewer friends in the local civilian community, fewer people of whom they could ask a favor, and significantly less social support overall. More than a third (35%) of families with children with special needs reported they had no friends in the community to talk to, while 27% of families without children with special needs said the same. Limited social resources may put families with children with special needs at greater risk of social isolation. Almost half (42%) of active-duty families with at least one child with special needs described usually or always feeling isolated, versus 32% of those without.

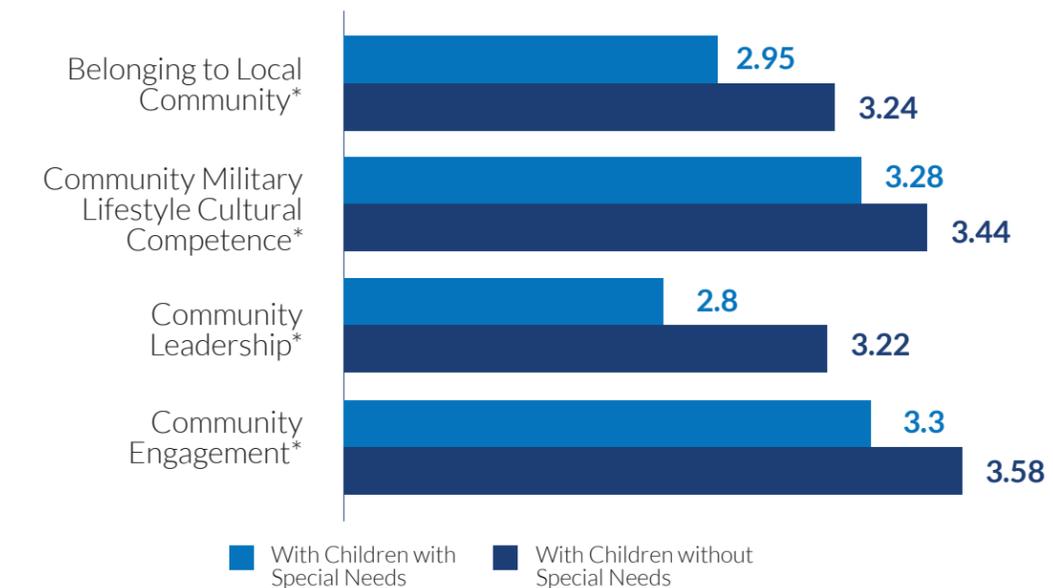
Limited social resources and increased isolation are also connected with poorer perception of the community overall. Finally, active-duty families with at least one child with special needs perceived less capacity for support from the community; they reported less perceived Military Family Lifestyle Cultural Competence\*, poorer community leadership\*, poorer community engagement\*, and less belonging to the local civilian community\*, which are all protective factors that support resilience. These findings, considered in tandem, illustrate that families with children with special needs generally feel less socially integrated than their peers. These increased risk factors warrant special attention to the needs of families with children who have special needs.

\*Indicates a statistically significant difference

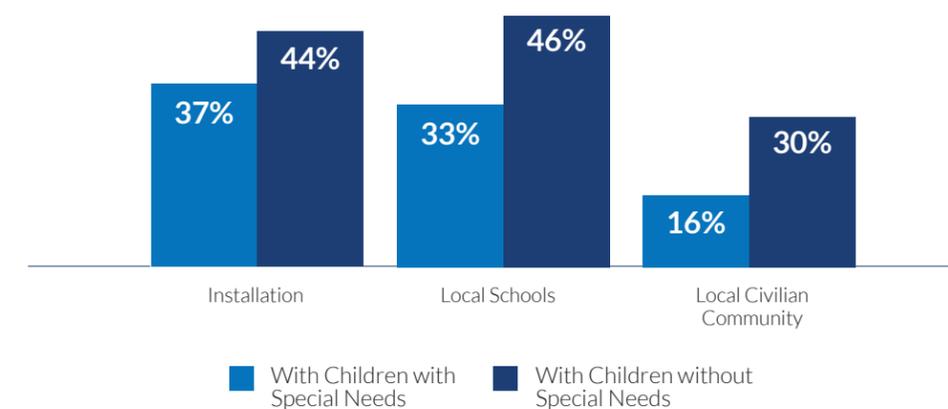
**Active-Duty Families with Children Who Have Special Needs Perceive Less Social Support**



**Active-Duty Families with Children with Special Needs Perceive Less Supportive Communities**



**Fewer Families with Children with Special Needs Reported a "Very Good" or "Excellent" Response to COVID-19**



\*Indicates a statistically significant difference

## Spotlight: CAREGIVERS

“I am a caregiver of a veteran who is immunocompromised which has made daily life much more difficult as their mood fluctuates with the local news and other factors - some days are good, others are filled with paranoia and fear... My work stress has increased significantly as my organization struggles to adapt and stay relevant in the wake of COVID. I feel like there is the potential to lose my job any day now. There are not any comparable jobs in the community right now and the loss of my income would devastate our family. The stress of living in fear has had a significant impact on my mental health. I experience panic attacks, headaches, I don't sleep and I am pretty certain I may be developing an ulcer.”

**SPOUSE OF ARMY VETERAN**

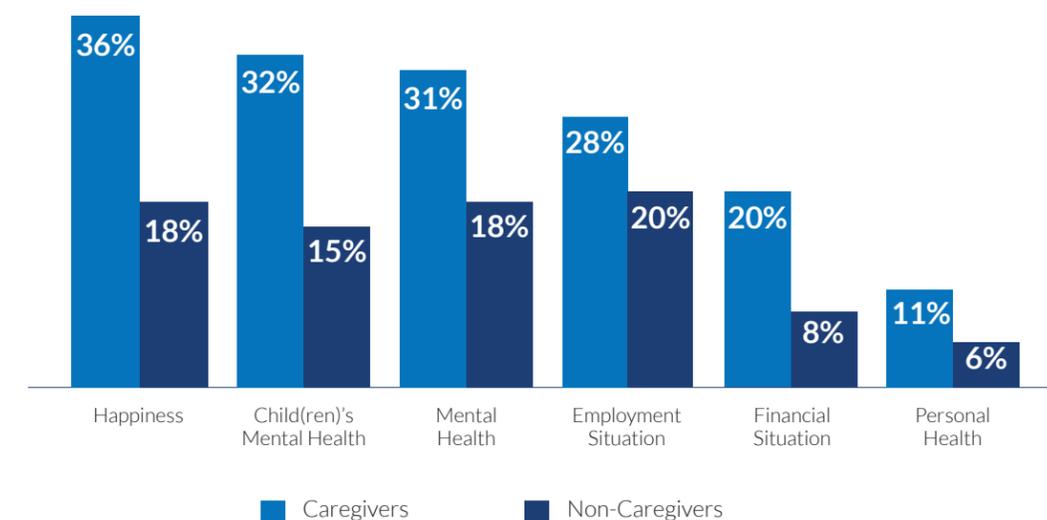
Twenty-six percent (26%) of active-duty family respondents identified as a caregiver; 88% were the spouse of a service member. Most caregivers (93%) identified as female, with 74% of caregivers identifying as white, followed by Hispanic/Latino/a (15%), Black (6%), and Asian (4%). The most common service member affiliations for caregivers were Army (37%), Navy (24%), Air Force (23%), Marine Corps (8%), and Coast Guard (4%).

Families with caregiving responsibilities reported challenges similar to families with children who have special needs, and there was overlap between these two groups. The most commonly identified care recipients were children with special needs (41%) and children without special needs (29%), but a quarter of caregivers were providing care for parents or grandparents (28%). Fifteen percent (15%) of caregivers are caring for both an adult and a child at the same time<sup>13</sup>; many caregivers in this sample are caring for more than one care recipient.

Similarly to families with children with special needs, caregivers also reported more intense impacts of COVID-19 in a variety of areas. The most pronounced differences were within impacts on overall happiness (36% of caregiver respondents, compared to 18% of non-caregiver respondents reported “major” or “severe” impacts), followed by children’s mental health (32%, compared to 15%) and personal mental health (31%, compared to 18%). Most caregivers (69%) reported feeling stressed “fairly often” or “very often,” compared to 48% of non-caregivers. These groups also reported greater impacts to both their employment and financial situations, indicating the crisis may disproportionately magnify pre-existing stressors in these vulnerable populations. The COVID-19 pandemic may have added or deepened caregiving duties, atop the already-outsized responsibilities that military-affiliated caregivers undertake, or may have removed or reduced access to typical supports used by caregivers, such as respite care, informal respite care, or social supports.

### Caregivers Reported Greater COVID-19 Impacts

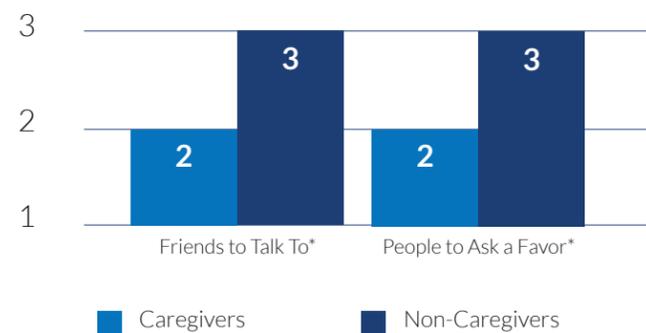
Active-Duty Family Respondents who Reported “Major” or “Severe” Impacts



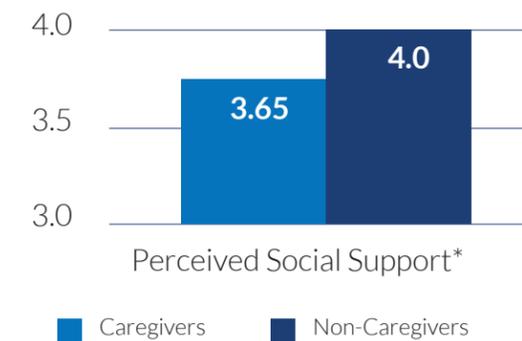
Caregiver family respondents not only reported greater impacts of COVID-19, but they also reported fewer social resources that could help alleviate those impacts, highlighting how caregivers' responsibilities may hinder them from developing social relationships outside of their homes. Almost half (46%) of active-duty family respondents with caregiving responsibilities described usually or always feeling isolated from others, versus 32% of non-caregiver respondents. This group has significantly fewer friends to talk to\* and people to ask for a favor\*, and perhaps, as a result, reported significantly less social support\*, which is a critical buffer to resilience.

Just as they perceive fewer social resources, caregiver respondents perceived less capacity for support from the community as a whole, similar to families with a child with special needs. Caregiver family respondents reported less perceived Military Family Lifestyle Cultural Competence\*, poorer community leadership\*, poorer community engagement\*, and less belonging to the local civilian community\*, which are critical protective factors to support resilience. These outcomes highlight caregivers' feelings of being external to their communities, therefore causing them to feel generally less engaged, affirmed, and acknowledged.

**Caregivers in Active-Duty Families Have Fewer Social Resources**



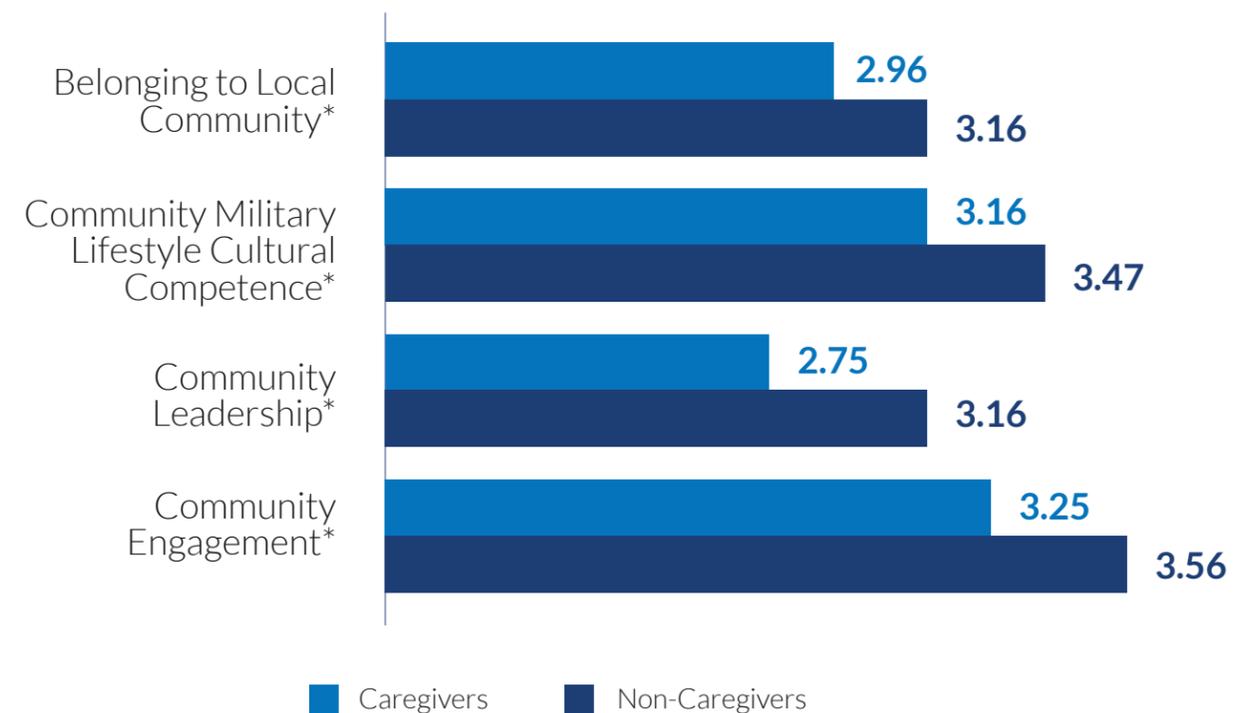
**Caregivers in Active-Duty Families Report Less Perceived Social Support**



\*Indicates a statistically significant difference

This feeling of being less engaged, affirmed, and acknowledged is also reflected in caregivers' poorer perception of the COVID-19-related response from local institutions. Fewer caregiver respondents reported a "very good" or "excellent" response from their local government (20%) and their local civilian community (16%), compared to 32% and 29% of their non-caregivers peers, respectively. A smaller proportion (37%) also rated the COVID-19 response of their local installation as either "very good" or "excellent", versus 43% of non-caregiver peers. These findings illustrate the challenge of responding to the needs of all military families during a crisis, particularly those families that are most vulnerable to the impacts of COVID-19. Military family members who are caregivers may have additional needs or expectations during a pandemic, compared to their non-caregiver peers, and an excellent response from the institutions may require a more nuanced or differentiated approach to adequately serve all military families.

**Caregivers Respondents Perceive Less Supportive Communities**



\*Indicates a statistically significant difference

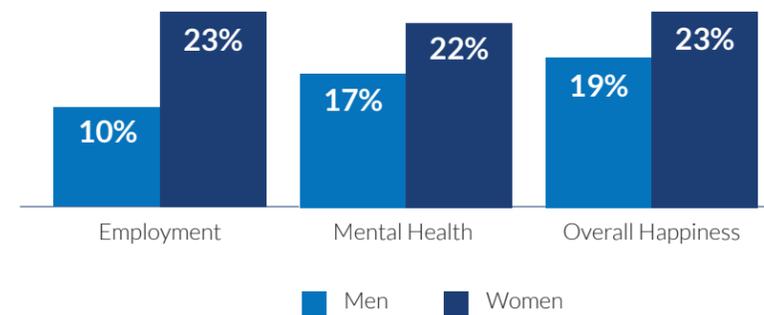
*Spotlight:*

# WOMEN IN ACTIVE-DUTY FAMILIES

“The pressure put on parents, but mothers especially, to function at proper efficiency and meet expectations in a remote working job and also teach and effectively aid their children (I have 3) were astronomical. The stress alone in making sure every child met its required daily tasks and maintained structure within my job were debilitating. Feeling like I am responsible for my children’s quality of education is so far out of my wheelhouse and that if we didn’t get something done because my workload was so high that I couldn’t meet every task teachers required, made me feel like their failures were my fault, that I couldn’t do enough.”

**NAVY SPOUSE**

**More Women in Active-Duty Families Reported “Major” or “Severe” COVID-19 Impacts**



A total of 1,094 women from active-duty families participated in the study, most of whom (94%) were the spouse of a service member, and the remainder were service members themselves. The majority were white (74%), followed by Hispanic/Latino/a (12%), Black (6%), and Asian (5%). The most

common service member affiliations for women were Army (35%), Navy (25%), Air Force (23%), Marine Corps (10%), and Coast Guard (4%). The sample of gender nonconforming/transgender respondents was too small to report in comparison to male and female respondents; it should be noted that these findings cannot be applied to all active-duty families.

COVID-19 has undeniably demonstrated a significantly greater impact on women in a wide variety of domains across the globe, from economic to physical and mental health<sup>14, 15, 16</sup>. This discrepancy was also reflected in active-duty family respondents. A greater percentage of women from active-duty families reported that COVID-19 had “major” or “severe” impact on their employment (23% vs. 10%), their mental health (22% vs. 17%), or their children’s mental health (23% vs. 19%). In alignment with these findings and with civilian literature, female respondents in active-duty families were significantly more stressed than male respondents. Of note, levels of stress were significantly higher among women from active-duty families who perceived COVID-19 to be a “major” threat to their mental health than women who reported “no threat” or “minor” threat.

#### **Women perceived greater external threats associated with COVID-19.**

In general, women also perceived greater external impacts being posed by COVID-19. For instance, a total of 48% of women indicated that COVID-19 had a “major” or “severe” impact on daily life in their local civilian community, compared to 33% of men. In addition, 75% of women perceived COVID-19 as having a “major” or “severe” impact on the world, versus 47% of men. Further, in comparison to 42% of men, 56% of women perceived COVID-19 as having a “major” or “severe” impact on the health of the U.S. population, and 83% of women, versus 73% of men, perceived COVID-19 as having a “major” or “severe” impact on the U.S. economy.

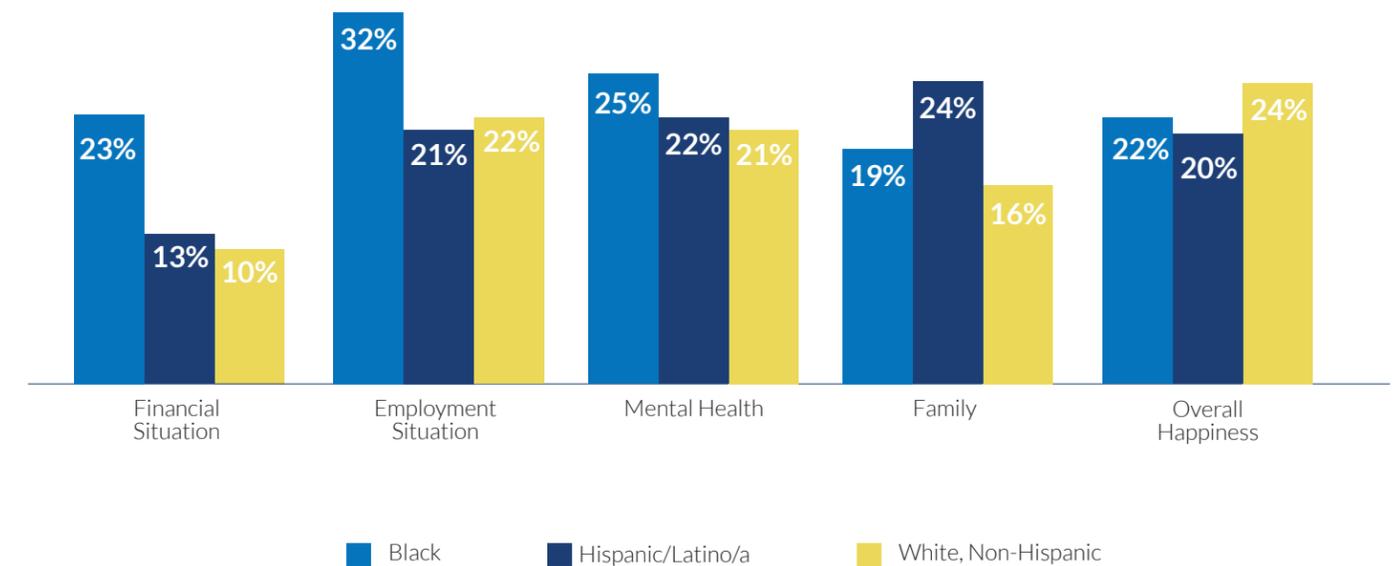
The weight of the pandemic and increased care responsibilities, particularly for children learning from home, seems to fall more heavily on women. Leaders, both military and civilian, and employers need to be aware that these pressures may be unsustainable over time. These pressures may lead to female service members leaving the military before they intended to and female spouses reducing employment or stepping out of the workforce entirely to shoulder the household burdens that have increased during COVID-19. Flexibility had already been identified as a key to solving the spouse employment issues<sup>17</sup>; during COVID-19, it became even more critical.

# Spotlight: BLACK & HISPANIC/ LATINO/A MILITARY FAMILIES

A total of 73 Black and 140 Hispanic/Latino/a respondents from active-duty families participated in the study, most of whom (89% and 84%, respectively) were the spouse of a service member. Most identified as female (94% of Black and 90% of Hispanic/Latino/a respondents). The most common service member affiliations for Black respondents were Army (41%), Navy (28%), Air Force (17%), Marine Corps (6%) and Coast Guard (1%), and the most common service member affiliations for Hispanic/Latino/a respondents were Army (36%), Navy (24%), Air Force (17%), Marine Corps (15%) and Coast Guard (4%).

**The small sample size of Black and Hispanic/Latino/a active-duty family respondents limits the conclusions that can be drawn from this data. These findings are intended to report potential concerns among these under-represented groups, and should not be generalized to all active-duty Black and Hispanic/Latino/a families.**

## Perceived “Major” or “Severe” COVID-19 Impacts May Differ By Race



**Black active-duty family respondents perceived greater impacts on their financial and employment situations, compared to Hispanic/Latino/a and white respondents, while mental health impacts were comparable across races.**

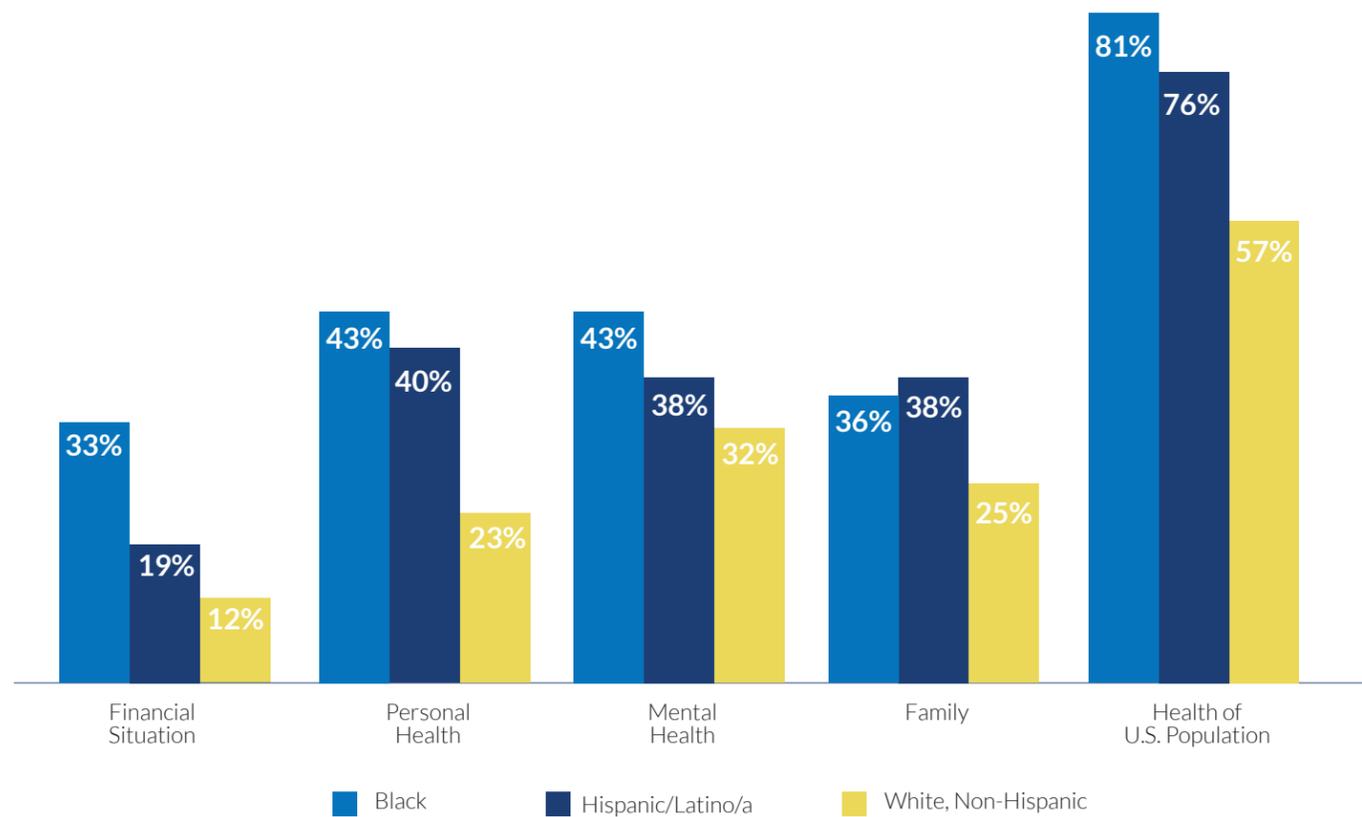
The greatest personal impact for Black active-duty family respondents was on employment (32%), while the greatest personal impact for Hispanic/Latino/a respondents was on their family (24%). A total of 32% of Black active-duty families perceived COVID-19 as having a major or severe impact on their employment situation, versus 21% of Hispanic/Latino/a and 22% of white respondents. Nearly a quarter (23%) of Black active-duty families perceived COVID-19 as having a “major” or “severe” impact on their personal financial situation, versus 13% of Hispanic/Latino/a and 10% of white respondents. In contrast, mental health impacts were comparable across race, with 25% of Black, 22% of Hispanic/

Latino/a, and 21% of white active-duty family respondents indicating that COVID-19 had a “major” or “severe” impact on their mental health. Similar patterns also emerged regarding perceptions of COVID-19 impacts on the mental health of respondents’ children and families, with nearly a quarter of Black, Hispanic/Latino/a, and white respondents reporting a “major” or “severe” impact on both. While conclusions are limited, these findings indicate that future research on COVID-19 impacts, particularly around employment and finances, should consider race.

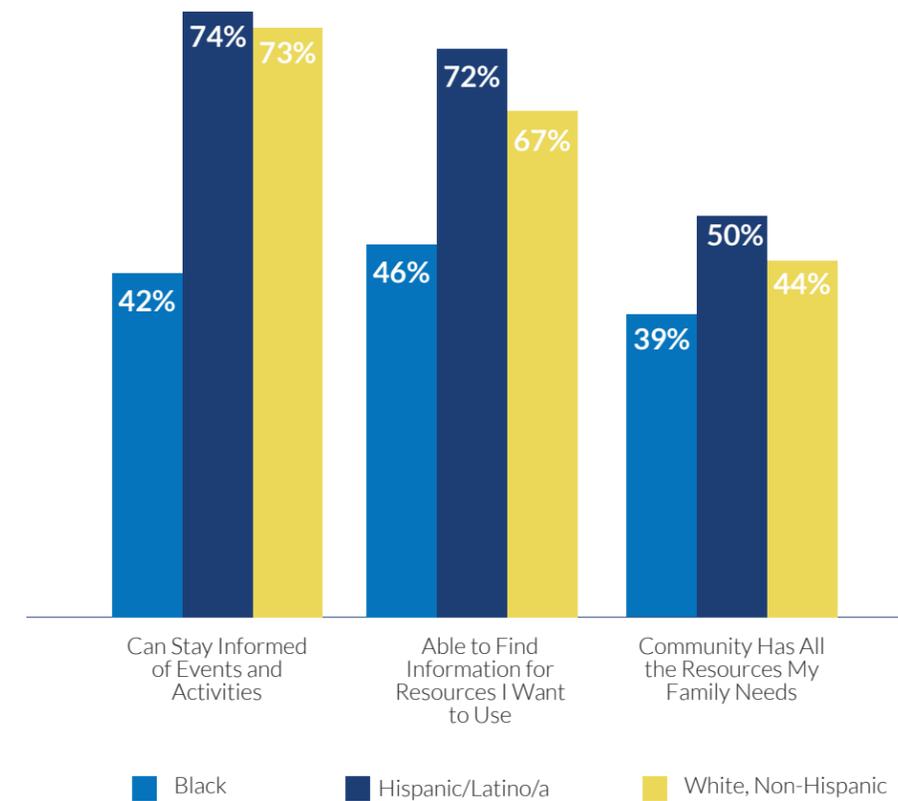
**Black and Hispanic/Latino/a active-duty family respondents perceived a greater personal and external threat from COVID-19.**

Racial disparities also emerged in the perception of threat from COVID-19. For example, in comparison to white, non-Hispanic active-duty family respondents (12%), more Black (33%) and Hispanic/Latino/a (19%) active-duty family respondents perceived COVID-19 to be a “major” threat to their personal financial situation, personal health, and mental health. For Black active-duty families in particular, a greater perception of threat to mental health, paired with a well-documented negative perception of mental health care<sup>18</sup>, could negatively impact the well-being of the entire family.

**Perception of COVID-19 as “Major” Threat May Differ by Race**



**Black Active-Duty Family Respondents Reported More Difficulty Staying Informed**



**Black active-duty family respondents may be receiving less communication about their local civilian communities.**

Information and communication is of critical importance in a crisis, but Black active-duty families may not be receiving information about community resources, compared to other races. Only 42% of Black respondents agreed or strongly agreed that they could stay informed of events and activities in their local civilian community, in contrast to 74% of Hispanic/Latino/a and 73% of white, non-Hispanic respondents. Furthermore, only 46% of Black active-duty family respondents agreed or strongly agreed that they can easily find information for local civilian resources that they want to use, compared to 72% of Hispanic/Latino/a and 67% of white, non-Hispanic respondents. Together, these two findings may highlight the degree to which Black military families live in communities that are not in accord with their ethn racial identity and may highlight issues around residential segregation and exclusion. Limited information may also contribute to less awareness of available resources, making those resources inaccessible to families.

## Chapter 2:

# COMMUNITY SUPPORTS AND RESILIENCE DURING COVID-19

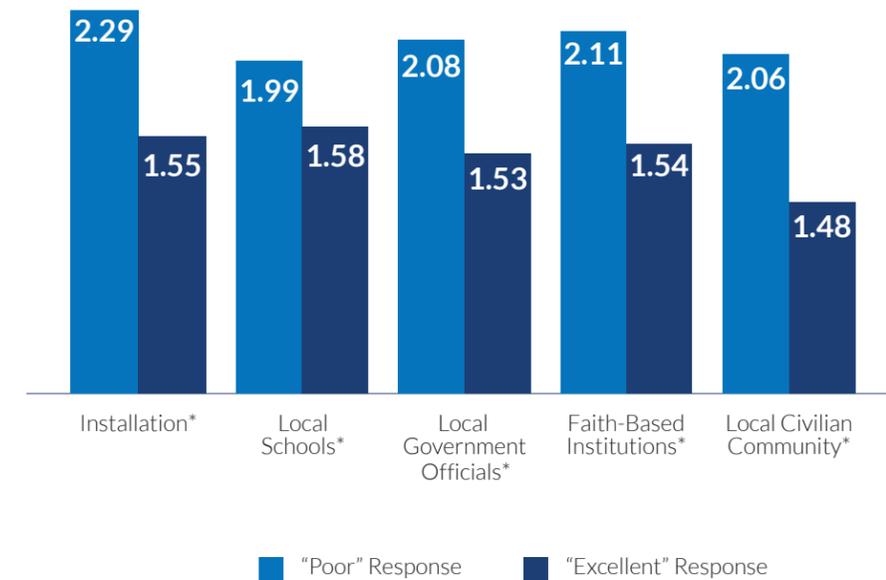
### FINDING:

Active-duty family respondents with positive perceptions of the community and installation response to COVID-19 reported less stress and greater resilience; however, respondents who perceived a poor response from their local installation were significantly more stressed and less resilient.

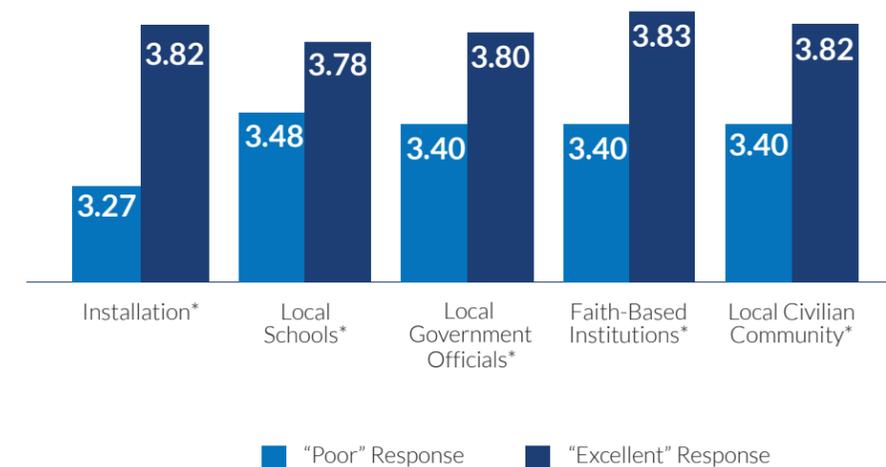
Among local community entities, active-duty military families reported that local installations had the best response to COVID-19, indicating their local installations had largely successfully navigated the challenges arising from the pandemic. More than half (63%) of active-duty family respondents said their local installation's response to COVID-19 was "good," "very good," or "excellent," compared to local schools (60%), faith-based institutions (58%), local government officials (55%), and the local civilian community (54%). Those active-duty family respondents who perceived positive responses from community institutions had greater resilience scores, underscoring the critical importance of community leadership during a crisis. There is a small significant relationship between community leadership and stress; as respondents perceive better leadership, their reported stress diminishes slightly, and vice versa.

On the other hand, active-duty family respondents who perceived poor COVID-19-related responses from community entities reported significantly higher stress, particularly if they perceived a poor response from the local installation. A greater percentage of active-duty family respondents who perceived poor response from their installations reported a "major" or "severe" impact of COVID-19 on their mental health (39% versus 16%), their children's mental health (29% versus 13%), and their overall happiness (41% versus 11%), compared to those who perceived an "excellent" response from their installations.

Stress is Significantly Lower in Active-Duty Family Respondents Who Perceive an "Excellent" Response from Community Entities



Resilience is Significantly Higher in Active-Duty Family Respondents Who Perceived an "Excellent" Response from Community Entities



\*Indicates a statistically significant difference

While respondents' definitions of an "excellent" or "poor" COVID-19 response may vary, open-ended responses provide some illustration. Some respondents noted, for example, that installation leadership was lax in enforcing COVID-19 prevention regulations. These negative perceptions of local installations' COVID-19 responses fueled anger, distrust, and disillusionment with the military and broader political community wrangling over COVID-19 regulations. Other concerns corresponded to broader concerns with the military—namely in regards to what they viewed as ambiguous or hasty stop movement orders. Likewise, military families expressed concerns about the lack of thoughtfulness, transparency, and clarity in decisions around K-12 schooling and the pressure to manage their children's education remotely.

The significantly greater stress reported by respondents who perceived a "poor" local response to the COVID-19 crisis, as well as greater resilience for those who perceived a positive community institution response, illustrate the central and pronounced role that local installations, schools, local government officials, faith-based institutions, and communities play in the lives of military families. As Michael Ungar concludes in *Change Your World: The Science of Resilience and the True Path to Success*<sup>1</sup>, "resilience is political. It does not require big government, but it needs government or substitute authority that will provide the foundations for success." Mental health is the area most impacted by COVID-19 at the individual and family level, and installation and local community leaders have a significant role in providing clear, consistent, and coherent action to mitigate uncertainty and reduce mental distress.

***"The base is not following recommendations from official sources for safety, and leadership has seemed almost flippant at times to social distancing guidelines, which has brought our trust levels down. I initially thought of the military as logical, trustworthy, and concerned for our welfare, and this pandemic has proved otherwise."***

**Air Force Spouse**



**FINDING:**

Community leaders' responses to the COVID-19 pandemic may have provided an opportunity for active-duty families to gain a better understanding of their leaders and their communities; on the whole, active-duty family respondents reported a greater awareness of their local leaders and resources<sup>b</sup>.

One of the striking findings of the 2019 Military Family Lifestyle Survey was the proportion of active-duty family respondents who reported they "did not know" about various aspects of their local community's capacity to support their family, particularly local civilian community leadership. Military families may pay close attention to leaders' response to a crisis, driving perceptions of leaders' general competence and trustworthiness. One of COVID-19's silver linings may be that local active-duty families are now more familiar with certain elements of local government and institutions that are critical to local civic engagement. Active-duty family respondents reported increased awareness of their local community leadership and improved perception of leaders.

While 28% of active-duty family respondents in the 2019 MFLS did not know if leaders were "good at their jobs," this percentage dropped nearly in half to only 15% in the 2020 RUSS. This trend held among active-duty family respondents who reported they did not know "if leaders will do what they say" (24% in 2019 to 13% in 2020), and also among those who reported they were unsure whether or not it was "easy for community members to contact leaders" (34% in 2019 to 23% in 2020). Some of these improvements may be due to better communication on the part of local organizations; two-thirds (66%) of active-duty family respondents reported they were "easily able to find information for local civilian resources they wanted to use," an increase from 61% in 2019. The absence of these resources and information about them can make integration and transitions difficult.

On the whole, these newfound perceptions were positive, indicating that local leaders' responses to the COVID-19 pandemic, including bolstering resources and improving communication channels, helped instill trust within the local active-duty resident

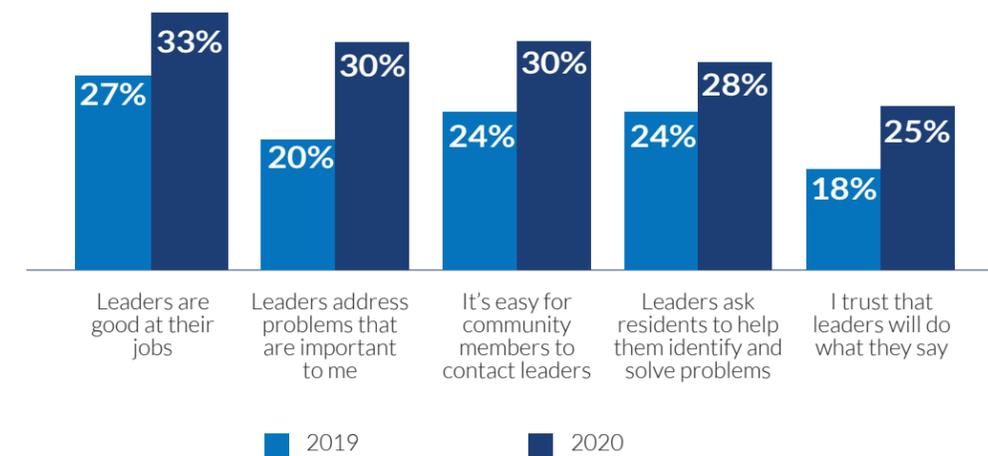
community. Indeed, the percentage of active-duty respondents who indicated they "trust leaders will do what they say" increased from 18% (2019 MFLS) to 25% (2020 RUSS). This trend held for those reporting they felt local leaders were "good at their job" (27% in the 2019 MFLS to 33% in the RUSS) and for those who felt "leaders address problems that are important to [the respondent]" (20% in the 2019 MFLS to 30% in the RUSS).

Furthermore, there is some evidence to suggest that COVID-19 may have provided an opportunity for military families to increase their local support system. In a paired sample of active-duty, veteran, National Guard, and Reserve family respondents from both the 2019 MFLS and the 2020 RUSS, there was a significant increase in the number of friends in the local civilian community with whom the respondent could talk about "what was on [the respondent's] mind." Additionally, the percentage of active-duty family respondents who indicated they did not have a friend in the local community decreased from 34% (2019 MFLS) to 29% (2020 RUSS).

Collectively, these findings suggest that while COVID-19 presented a major disruption to daily life, many active-duty families were nevertheless motivated to extend their local relationships. Indeed, social connection tends to increase among communities during trying times such as war and disaster<sup>2,3,4</sup>, though it is interesting that social connections for military families continue to increase even during a pandemic in which physical proximity comes with risk. While clearly a disruption that will have long-standing effects, the COVID-19 pandemic also represents an opportunity to narrow the gap between military and veteran families and civilians. Military and civilian leadership can take advantage of this opportunity to promote engagement, connectedness, and belonging in their communities.

**Active-Duty Family Respondents Perceive Improvement in Community Leadership**

Percent of Active-Duty Family Respondents Who Agree or Strongly Agree



<sup>b</sup> Differences here were not tested for significance and may be attributable to the differences in samples.

**FINDING:**

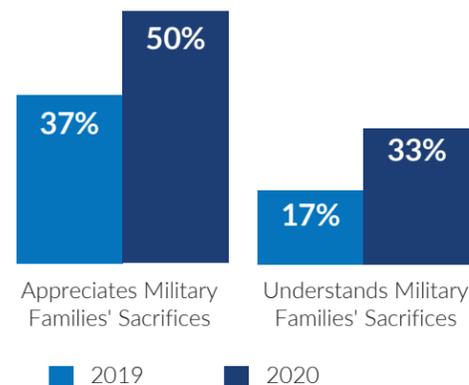
## Military families perceive greater Military Family Lifestyle Cultural Competence.

Another potentially positive outcome of COVID-19's may be that it has provided opportunities to decrease the civil-military gap within local communities. In addition to military families gaining a greater awareness of certain aspects of their local communities, as outlined in the previous finding, military family respondents also perceived greater Military Family Lifestyle Cultural Competence among civilians in their local communities. In a paired sample of active-duty, veteran, National Guard, and Reserve family respondents from both the 2019 MFLS and the 2020 RUSS, respondents reported a significant increase in perceived Military Family Lifestyle Cultural Competence in their local communities, defined as the degree to which military families perceive their community's collective understanding, awareness, appreciation, support, and respect for military and veteran families.

These improvements were particularly striking regarding the degree to which active-duty respondents believed local civilians appreciate and understand local military families' sacrifices. In the aggregate samples from the 2019 MFLS and the 2020 RUSS, the percentage of active-duty respondents reporting greater appreciation increased from 37% to 50%, and the percentage of those reporting they perceived greater understanding on the part of their civilian neighbors increased from 17% to 33%<sup>c</sup>.

### Active-Duty Family Respondents Reported Greater Appreciation and Understanding in the Local Civilian Community

Active-Duty Family Respondents Who Feel Their Local Civilian Community



<sup>c</sup> Differences here were not tested for significance and may be attributable to the differences in samples.

***“My zip code has [some of] the highest COVID-19 positive [cases].... I’m proud of our community who have organized relief for this hard hit neighborhood, but it has been heartbreaking to see the suffering right next to me.”***

**Army Veteran**

Blue Star Families' 2019 MFLS found that respondents' perceived Military Family Lifestyle Cultural Competence within their local civilian community was significantly associated with their sense of belonging to the community<sup>5</sup>. RUSS findings validate this and the sense of being “seen” by their local civilian neighbors during a time of collective stress and crisis translated into more active-duty respondents who reported they felt like they were “a valued member of the community” (an increase from 29% in 2019 to 37% in 2020) and that they felt a “sense of belonging” there (an increase from 31% to 37%). In some instances, this sense of belonging appeared to contribute to, or be propelled by, pride in communities' responses to the pandemic. The RUSS did not explore the nuanced reasons for these improvements; however, nationwide interest, appreciation, and increased attention to essential workers performing dangerous frontline duties, as well as increased reporting about active-duty and National Guard troops deployed to support the effort, likely contributed to a general “respect-for-service” bump. To support this concept, active-duty service members reported an even greater increase than spouses regarding their sense of belonging to the local community; while spouses reported a five percentage point increase (31% to 36%), service members experienced a 14 percentage point increase (33% to 47%)<sup>d</sup>.

Despite these improvements, the fact that only one-third of active-duty family respondents reported they believe local civilians understand military families' sacrifices is indicative of how far advocates have to go in addressing the civil-military gap. For some families, periods of crisis can provide a stark reminder of how little they have in common with their civilian neighbors. As one Marine Corps Spouse pointed out,

*“[m]y husband’s deployment was extended with no end date which greatly impacted the mental health of me and my children. We have suffered illness and depression during the pandemic.... It is difficult and most of our friends and community are civilians. They do not understand how difficult deployment is [when it is] not during a pandemic. They also do not understand how dangerous my husband’s job is, which adds more stress. I wish civilians had a better idea about what military members go through and how to help them.” - Marine Corps Spouse*

<sup>d</sup> Differences here were not tested for significance and may be attributable to the differences in samples.

**FINDING:**

Active-duty family respondents who reported greater resilience, including greater protective factors such as belonging to the local community and social support, also reported reduced COVID-19 impacts in some areas.

Military families are expected to be resilient, bouncing back when they encounter the many stressors of military life. Prior to COVID-19, everyday stress was compounded by issues unique to military life, such as time away from family due to deployments or trainings, frequent relocations, and frequent uncertainty and change. The pandemic further compounded that stress by introducing more uncertainty, especially regarding issues such as children's education, employment, and in-person social support.

Military family resilience is when service members, veterans, and their families have the skills and resources they need to withstand, recover, and grow from stressors, including those compounded by military and veteran life. A resilient response mitigates the impacts of this stress<sup>6</sup> and, in this study, resilience was significantly greater in active-duty family respondents who perceived COVID-19 impacts on their family, their mental health, their children's mental health and their happiness to be less intense. Active-duty family respondents who reported greater protective factors that support a resilient response, such as social support and a sense of belonging to the local civilian community, also reported reduced COVID-19 impacts in those same areas. Those active-duty family respondents who reported COVID-19 had no impact on their family, on their mental health, their children's mental health, or on their happiness reported the greatest belonging to the local civilian community. These findings further validate previous Blue Star Families' research and underscore the need to enhance specific mechanisms (such as increased cultural competence, improved spouse employment opportunities, welcoming practices in schools, etc.) that support these protective factors as upstream solutions for resilience.



***“Stress levels have increased for everyone. This is an unprecedented event globally. My spouse and I have resilience skills learned through 20+ years in the military. So, we are still thriving; although uncertainty of the future causes some anxiety.”***

**Air National Guard Spouse**

## Spotlight:

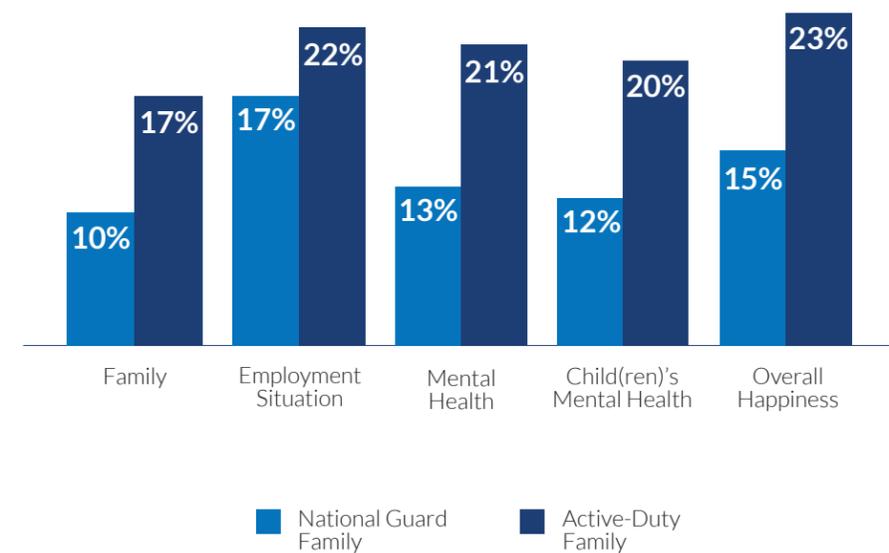
# NATIONAL GUARD

“Our community leaders... and councilmembers... are very involved in keeping all of the citizens informed, and having open forums, surveys and daily, weekly emails and reaching out to assist in financial resources, food pantries, utility assistance and financial assistance.”

### ARMY NATIONAL GUARD VETERAN

A total of 272 respondents identified as being part of a National Guard family, 58% of whom were a service member and the remaining 42% were the spouse of a service member. Of National Guard family respondents, almost half (47%) were activated. The majority (76%) belonged to the Army National Guard, while 22% belonged to the Air National Guard. Most National Guard family respondents (58%) identified as female, and 85% of National Guard family respondents identified as white, followed by Hispanic/Latino/a (5%), Black (3%), American Indian (3%) and Asian (3%).

#### Fewer National Guard Family Respondents Reported “Major” or “Severe” Impacts of COVID-19

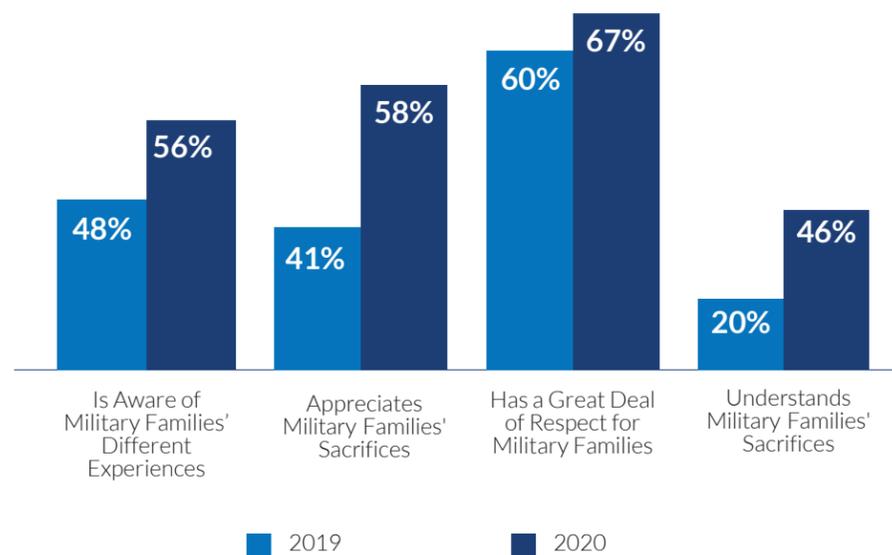


In general, National Guard family respondents indicated having less severe impacts from COVID-19 than their active-duty counterparts. For instance, only 13% of National Guard family respondents indicated that COVID-19 had a “major” or “severe” impact on their mental health, compared to 21% of active-duty respondents. Additionally, 15% of National Guard family respondents indicated that COVID-19 had a “major” or “severe” impact on their overall happiness, compared to 23% of active-duty family respondents. These patterns persisted in perceptions of threat; 18% of National Guard family respondents perceived COVID-19 as a “major” threat to their mental health, versus 33% of active-duty family respondents, and 16% perceived COVID-19 as a “major” threat to their personal health, versus 26% of active-duty family respondents.

While National Guard families fared better in local community engagement and other areas, they remain underserved by installations. In the 2019 MFLS, many National Guard families reported they lived more than an hour from the nearest installation, and yet the local civilian support agencies were not effective in addressing their needs<sup>7</sup>. Furthermore, in the 2020 RUSS, fewer National Guard family respondents (27%) rated their local installation's COVID-19 response as "very good" or "excellent", compared to active-duty families (37%), and another 20% of National Guard family respondents reported they "did not know" about the installation's response. Additionally, these families may be more vulnerable in some ways than their active-duty counterparts. For instance, among all National Guard family respondents to the 2020 RUSS, 7% indicated that they experienced food insecurity before the crisis, but this increased to 10% in the same group since the crisis started. While the increase in community understanding of the sacrifices of National Guard families is an important step forward, it should be paired with an increase in community support that meets the needs of these families.

**National Guard Family Respondents Reported Greater Community Understanding and Appreciation<sup>e</sup>**

*National Guard Family Respondents Who Feel Their Local Civilian Community*



Beginning in March 2020 and continuing through the time of this report in September 2020, thousands of National Guard service members have been activated to support the COVID-19 pandemic response, as well as in response to civil unrest and protests across the country precipitated by the murder of George Floyd<sup>8</sup>. While the National Guard is well-positioned to have stronger ties to their local community because they move less frequently, there is evidence that increased conversation nationally regarding the role and purpose of the National Guard and military writ large is a benefit to further strengthening these ties. National Guard family respondents felt a stronger attachment to their local civilian community (46%), compared to their active-duty counterparts (30%). Compared to National Guard family member respondents surveyed in 2019, National Guard family respondents in 2020 perceived their local civilian communities to have greater awareness (8 percentage point increase), appreciation (17 percentage point increase), respect (7 percentage point increase, and understanding (26 percentage point increase)<sup>e</sup>. Of note, in comparison to active-duty families, a lower percentage of National Guard families perceived COVID-19 as a major threat to daily life in their local civilian community (27% vs. 46%). The National Guard's recent, high levels of media exposure may have led to increasing civilian community member awareness of National Guard presence, therefore reciprocally increasing National Guard families' perception of their community's Military Family Lifestyle Cultural Competence.



<sup>e</sup> Differences here were not tested for significance and may be attributable to the differences in samples.

## Chapter 3:

# RECOMMENDATIONS AND IMPLICATIONS

As their civilian counterparts have, military families have experienced substantial burdens during the COVID-19 pandemic, particularly related to mental health and employment. This had compounded existing issues, such as the high unemployment and underemployment of military spouses.<sup>1</sup> Many of these challenges are concentrated among subpopulations of the military, including families with children with special needs, caregivers, Black and Hispanic/Latino/a active-duty families, and women. Fortunately, military and civilian organizations, by taking a multilevel approach that addresses national, regional and local dynamics, can play a decisive and impactful role in tending to these issues. In this section, we outline specific areas of focus and identify actions to improve some of the negative outcomes among military-affiliated families and amplify military families' resilience.

### Program and Support Providers

#### *Community organizations, corporations and philanthropic donors and foundations*

Military spouse employment, a perennial military family lifestyle concern prior to the COVID-19 pandemic, was one of the greatest negative impacts reported by active-duty families. The increased pressure on women, the largest proportion of military spouses, resulting from school and childcare facility closures, may result not only in increased under- and unemployment, but reduced labor force participation. To address this, community organizations, corporations, and philanthropic donors and foundations can support funding and incentivizing direct hire programs for military spouses who are entering or re-entering the labor force or PCS-ing. Furthermore, there should be tailored funding and establishment of programs for "upskilling" and retraining for spouses who previously worked in industries which were disproportionately impacted by the spread of COVID-19 (e.g., the service and hospitality industries).

As noted in civilian literature that connects financial resources with resilience,<sup>2</sup> the RUSS found that those respondents who were "not stressed at all" about their financial situation were the most resilient. While it is impossible to determine if greater resilience increases financial resources, or vice versa, it is clear that there is a role for institutions to play in supporting military families who are currently under particular financial strain due to COVID-19, or who may come to be in the future. While the active-duty family respondents in the RUSS reported limited financial impacts, the ramifications of military spouse employment losses have the potential to destabilize that financial footing. Groups that are more financially impacted by the pandemic, such as Black active-duty families, caregivers,

and families with children with special needs, could benefit from the targeted financial support, both remedial and preventative, from community organizations, corporations and philanthropic donors and foundations. To this end, organizations and advocates should endeavor to prevent "backslides." Offering low-rate loans, grants, mortgage deferrals, debt forgiveness, and expanded emergency relief (such as food and utility assistance, eviction moratoriums, etc. can protect against the second-order effects of employment losses.

For the full sample of RUSS respondents, including active-duty, National Guard, Reserve, and veteran family respondents, resilience is associated with a sense of belonging and social support, though it was not possible to determine whether resilience creates a sense of belonging and increases social support, or vice versa. Belongingness and social support, which both relate to one's feeling of being connected to and integrated in a supportive group of people, can be enhanced in military families through a variety of efforts, including increasing opportunities and support for spouse employment. Community organizations, in particular, have an important role in setting the conditions for military families to establish and increase their social support; "the primary function of formal networks should be to support informal networks, because it is these informal group associations that are most accessible to individuals and families and those who they most often rely upon on a daily basis."<sup>3</sup> For example, organizations can expand spouse employment opportunities and better broadcast and market these opportunities by working with community-based entities that support military families or that could be recruited to do so.<sup>4</sup> Additionally, philanthropic organizations can provide grants to local municipalities to create military family sections on their websites and establish a military community member liaison staff position.

Other opportunities which could improve military families' sense of belonging and social support include facilitating welcoming practices in local community centers, local schools, faith-based organizations and local TV and digital/social media. Active-duty family respondents who note their schools are welcoming and supportive also have a greater sense of belonging to the local civilian community, and active-duty family respondents reported that "friends, supportive teachers, and extracurricular activities" help give their child a sense of belonging to their school.<sup>5</sup> This sense of belonging to the school may be harder to find for families who have moved during the pandemic and are beginning a new school year in a virtual school, underlining the importance of creating innovative ways to help establish community and belonging.

This welcoming by the local community can also support another related factor connected with belonging and resilience, Military Family Lifestyle Cultural Competence (MFLCC). MFLCC is present when military families perceive civilians in their local community are aware of, appreciate, support, respect, and understand their military service. To enhance resilience, supports and resources need to have value and meaning;<sup>6</sup> they have to demonstrate that they understand. In this sample, a perception that the community resources have this MFLCC was associated with belonging in the local community. This finding highlights the ongoing need for local and community-based organizations and

businesses to signal their awareness, understanding and appreciation for military families. In open-ended responses to the question “What can your local civilian community do to best support you or your family?”, active-duty family respondents indicated a desire for communities to understand how military lives are different.<sup>7</sup> Even seemingly small gestures, such as providing discounts for products or services, can be effective towards this end. On a larger scale, civilian communities can collaborate with local installations to establish joint-governmental-use facilities where military and local community members can take advantage of social programs and services together, to avoid duplication of services and foster more intimate and meaningful integration and engagement between these populations. Community organizations, corporations, and philanthropic donors and foundations can support these efforts to increase understanding and belonging to the local community.

### Resource and Care Providers

#### Community resource, healthcare, and mental healthcare providers

As reported in the previous finding, the perception of MFLCC both in the civilian community and in community resource providers were associated with a sense of belonging to the local community. Importantly, MFLCC increased significantly from 2019 to 2020 in a matched sample of respondents who completed both the 2019 MFLS and the 2020 RUSS. Perceived access to high-quality health care also increased from 36% in 2019 to 41% in 2020 for active-duty military family respondents in the MFLS and the RUSS.<sup>a</sup>

In tandem, these findings may indicate an overall perception of improvement in health care. Community resource providers, including health care and mental health care providers, can capitalize on these improved perceptions and continue to support military families by demonstrating their cultural competence.

Despite the slight improvement in perceived access to health care, and while most respondents did not emphasize concerns about their physical health or vulnerability to COVID-19, many indicated that the pandemic had created mental health challenges for them and their children. Indeed, mental health, for active-duty service members, spouses and their children, was among the most pronounced and consistent COVID-19-related challenges encountered by military



families, including each of the subpopulations which were assessed in-depth—families with children with special needs, caregivers, Black and Hispanic/Latino/a active-duty families, and women in active-duty families. This finding is also notable because research has consistently shown that military members and their families already face a higher burden of mental illness in comparison to their civilian counterparts.<sup>8</sup> National and local policy in response to COVID-19 calling for home isolation and quarantine may be particularly detrimental to families already managing mental health concerns. Accordingly, because mental health is also tied to one’s feelings of worth, value, and social cohesion, as well as engagement and productivity, it is vital to address the added and persistent mental health stressors which military families face during the pandemic.

One of the greatest areas of impact reported by active-duty family respondents was on their children’s mental health; 20% of active-duty families reported that COVID-19 had a “major” or “severe” impact on their children’s mental health. Yet, many families, and military families in particular, have limited access to mental health care providers for children. There is a shortage of pediatric mental health providers in general,<sup>9</sup> an issue which is exacerbated for military families who move and must re-establish care every few years, losing care continuity. Additional research into the impacts of the COVID-19 pandemic on children’s mental health in general and on military children in particular is certainly warranted. Policy solutions to expand access to mental health care should include reviewing state licensure reciprocity, already an issue for military spouse employment.<sup>10</sup> Health care providers can only provide care for clients who live in the states in which they are licensed, a requirement that increasingly impacts everyone as telehealth becomes more common,<sup>11</sup> but impacts military families in particular as they PCS from state to state, travel under TDY orders, or geo-bach. Additionally, Tricare can examine increasing capacity for panels of providers, as many providers may not be able to accept new clients given the potential increase in demand. It is also essential that more attention be given to families with children with special needs, caregivers, and Black and Hispanic/Latino/a family members, given that these groups and their children may experience more extensive mental health impacts, as evidenced in this study and consistent with civilian literature.<sup>12</sup>

Getting upstream of mental health challenges among military families that are both directly and indirectly related to COVID-19 can include addressing the various financial, employment and schooling concerns among these families. An important first step is to equip and empower service members to recognize risk factors for mental health concerns like depression, anxiety, and PTSD, whether that is conveyed in formal training or otherwise. Similar to other efforts within the DoD to combat problems like sexual harassment and assault,<sup>13</sup> service members and family members themselves may be best situated to identify potential concerns before they become more severe. This is especially important as various forms of stigma, or concerns about impact on the service member’s career, may prevent military-affiliated individuals from disclosing mental health struggles they may be grappling with or from seeking more formal mental health care.<sup>14</sup> For this reason, it is important that general healthcare providers (i.e., primary care providers and

<sup>a</sup> Differences here were not tested for significance and may be attributable to the differences in samples.

pediatricians demonstrate military cultural competence, and also provide mental health screening for military families as part of “routine” care and wellness visits. Both general health care and mental health care providers can work to “normalize” the stress families and children are feeling during the pandemic; they can remind them it is normal to be stressed during this time, and help them identify ways to prioritize their mental health, lessen or eliminate certain stressors, and develop effective self-care and wellness solutions.

### **Local Community Leaders**

#### ***Elected officials, public and school administrators, and faith-based organizations***

Local community leaders have a critical role in the response to a national crisis like the COVID-19 pandemic. Indeed, their response can impact not only the economy and public health, but can also impact individuals’ stress and resilience. Active-duty family respondents who had a positive view of a local government’s response to COVID-19 also had significantly lower levels of stress and higher levels of resilience. This remained consistent for various community entities, including schools, local government officials, faith-based institutions, and the local civilian community as a whole. Furthermore, a positive general perception of local leadership was associated with less stress, greater access to information and communication, greater belonging to the local civilian community and perception of greater community engagement. This may indicate that good leadership improves sense of belonging- or, vice versa- that people who feel less belonging perceive poor leadership, but it is important to note these factors are connected. These local community leaders, the traditional pillars of a community, must mindfully adjust to the pandemic and maintain awareness of the health and social implications of the pandemic and various COVID-19-related policies. Doing so may confer a sense of balance for military families in a time of significant uncertainty. Furthermore, in this context, local community leaders must be especially intentional and culturally competent during their interactions with military families, developing awareness of the unique ways COVID-19 may be impacting this population.

As noted in previous chapters, the COVID-19 pandemic may have provided an opportunity for military families to better understand their local civilian community. Not only did the percentage of active-duty family respondents who “did not know” if local leaders were “good at their jobs” fall from 28% in 2019 to 15% in 2020, but the percentage of those who agreed leaders were good at their jobs rose from 27% to 33%<sup>b</sup>. It is important to maintain this momentum and create long-term positive shifts in the perceptions of community leadership. In the RUSS active-duty family sample, a positive view of leadership was significantly associated with ability to obtain information and communication. This highlights the critical role of clear communication and alleviating uncertainty, particularly during a crisis. Clear and consistent communication across a myriad of communication platforms is essential.

<sup>b</sup> Differences here were not tested for significance and may be attributable to the differences in samples.

***“The pandemic has impacted me and my family with changes to how we approach schooling, work and regular scheduled events and activities.[...] Being a military family has given us [the ability] to stretch our level of resiliency and face some challenging times together and overcome them. There were many lessons to learn and we have all risen to the occasion. I am surprised at the low-level of communication within our leadership, however, which has been disheartening.”***

**Air National Guard Service Member**

Actions such as “warm hand-offs,” or the facilitation of communications between installation, political and community-based organization leaders, can be critical in providing military families with a greater sense of stability and connectedness as they make adjustments and respond to changing demands. The global impact of the pandemic may understandably shift attention from the needs of particular groups in a community, but it is critical for local leaders to continue to demonstrate appreciation for military families and understanding of their unique challenges. The ability of community leaders and civilians to maintain this focus will go a long way toward re-affirming broader societal awareness of military families’ contributions as well as the everyday challenges that existed before the pandemic and the new challenges that now exist—and how these challenges create additional barriers.

Finally, local leaders must be cognizant that subpopulations of the military, including families with children with special needs, caregivers, and Black and Hispanic/Latino/a families, may be facing heightened challenges. Thus, more targeted and sensitive outreach must be devoted to engaging these populations to ensure they do not “fall through the cracks.” This is particularly true for Black and Hispanic/Latino/a populations since their level of COVID-19 morbidity and mortality is greater than the general population.<sup>15</sup> More diverse representation in local leadership and outreach roles, community forums, and more nuanced messaging which speaks to these groups’ identities and what makes them feel valued and part of the community collective will be vital in improving engagement in these populations.

### **K-12 Education Professionals**

#### ***School administrators, teachers, and staff; Education policy professionals***

Active-duty family respondents in this sample who rated their local schools' COVID-19-related response as "excellent" reported less stress and greater resilience than those who rated their local schools' response as "very good," "good," "fair," or "poor." Additionally, fewer active-duty family respondents who rated their schools' COVID-19-related response as "excellent" reported that COVID-19 had "major" or "severe" impacts on their children's mental health. Many military families' most pressing concerns related to their children's ability to successfully cope with increased stressors resulting from a lack of robust schooling and socialization with peers. While the disruption of school closures during COVID-19 has had profound impacts on children and their families across the country, schools may have an especially unique ability to ease the stress this disruption and uncertainty places on families. Schools already play a central role not only in the intellectual, social, and emotional development of children, but also as a primary link connecting military families to their civilian communities. Previous Blue Star Families research found active-duty families with school-aged children reported significantly more belonging to the local community than their peers.<sup>16</sup> This connective role means schools have the opportunity to improve outcomes for children and their families.

It is important that communications from school administrators, principals, teachers, counselors, and School Liaison Officers (SLOs) during this period of pronounced ambiguity remain clear, consistent and efficient. Military families are, to some degree, familiar with uncertainty and ambiguity, as military life can be unpredictable, in terms of the next deployment, temporary duty assignment, or duty station. This may make military families

more resilient, as the family flexibility and adaptability essential to coping with these shifts are key components in resilience.<sup>17</sup> The uncertainty surrounding COVID-19, however, may exceed even these hard-won family resources. Uncertainty and stress are undeniably linked, and uncertainty may be the defining feature of stress.<sup>18</sup> As a result, uncertainty can engender negative attitudes and distrust, which may create substantial barriers to engagement for military families and impact the wellbeing of their children.

***“My children are all participating in well-organized and well-run virtual school through the school district DODEA. It’s been about as positive and seamless as possible. We are calling this time “extreme family closeness” and making the most of it and being as positive and grateful as we can be.”***

**Army Spouse**

Opportunities to reduce uncertainty, through clear, consistent, and coherent information, should be prioritized. Information about enrollment, course scheduling, computing equipment, virtual tools and applications and the like, should be made publicly available and easily navigable on schools' websites (and social media channels, such as Facebook, where possible), and resources such as tutoring should be expanded and made readily accessible, potentially by relaxing eligibility criteria temporarily. These steps will help alleviate concerns related to the increased parental attention for schooling and potential economic burden and productivity tradeoffs, which disproportionately fall on women.

Critically, these communication channels must be bi-directional: It is important that military families also highlight expectations and concerns, ask questions, and exchange knowledge and information about their children to support their child's learning and mental health. To accomplish this, regular, private check-ins between students, parents and teachers can be especially valuable. Moreover, SLOs can serve a particularly powerful function in bridging these gaps and ensuring that local installations are appropriately briefed on obstacles faced in schools by their military families' children. Flexibility for both families and school administration, teachers, and staff is essential to support whole family health.

While academic success is paramount, schools also serve as a foundation for developing social and emotional skills and are an essential component of maintaining children's mental health. School administration, teachers, and staff should be aware that mental health concerns among children may be increasing,<sup>19</sup> and be observant for indicators of mental distress. Additionally, schools can take a proactive approach in providing both formal and informal mental health support and resources, ensuring both parents and children understand how students can access counselors, and providing connections to formal mental health care as needed. Social connections to peers are an important component of child development, and schools can work to ensure that students have the ability to engage socially with their peers. Because this socialization may take a different shape than it did prior to COVID-19, with an increase in online engagement, parents and schools must ensure this engagement is done safely, and provide safeguards for potential threats, such as online bullying, identity theft, exploitation, and other online dangers.

Ensuring student success and child wellbeing also requires sensitivity to a variety of challenges and needs. Schools must be aware of the various barriers families face in engaging in online learning, including limited, inconsistent, or no access to computer technology or the internet. Issues such as these may be amplified in low-income households as well as in rural communities. Furthermore, schools should commit time and resources to better focus on families with children with special needs, regardless of military affiliation. Undeniably, school closures during COVID-19 introduced exceptional challenges to the provision of supportive services for children with special needs, but these are also the children and families that may be most vulnerable. In this study, these families had more financial impacts and were less satisfied with the response of their



local schools as compared to families that did not have a child with special needs. These outcomes may be associated with the increased time and enhanced programming that is necessary to address these children's complex needs and schools' challenges in planning for and adapting to these contingencies. Because many online learning platforms are not readily tailored to meet these complex needs, it is vital that schools invest in customized platforms and programs that create an equitable and holistic learning experience for these vulnerable children.

Lastly, schools must acknowledge the decidedly unique global situation and accordingly adjust expectations for academic output and engagement from families. While aspirations for scholastic rigor should be preserved, schools must expect and allow for the substantial challenges to online learning. Some of these challenges are technical and are heightened for dual-career families and single parents in the military, and the burden of these challenges disproportionately falls on women.

***“Our schools closed, so my special needs children had no resources or outlet. It was an entire mess and their education has been stilted because of it. There are no resources given to special needs families.”***

**National Guard Service Member**

### **Military Leadership**

#### **Department of Defense and military leaders**

Overall, active-duty family respondents rated the COVID-19-related response of local installations as the best, in comparison to local government officials, local schools, local civilian communities, and faith-based organizations. Respondents generally felt their installations had shown strong leadership and direction during the pandemic and had effectively navigated the various intricacies brought on by the pandemic, including the “Stop Movement” Order.

However, when active-duty family respondents perceived that installations had not responded well, they had the highest levels of stress and lowest levels of resilience. Thirty-nine percent (39%) of active-duty family respondents who rated the installations' response as poor reported “major” or “severe” impacts to their mental health, compared to 16% who rated the installations' response as excellent.

Concerns about the response to COVID-19 are reported to the Office of the Inspector General through a DoD Hotline, which had received a total of 455 contacts related to COVID-19 as of July 31, 2020. These contacts primarily related to concerns over isolation and quarantine, social distancing, policy questions and training on policy, and care of patients. In alignment with this dynamic, in open-ended responses, active-duty family respondents also illuminated concerns over installations' insufficient response to the pandemic. These frustrations persisted even when the pandemic was not seen as an immediate threat to military families. This observation punctuates the need for alignment of response efforts and consistent communication of guidance.

***“Our installation has taken all appropriate COVID-19 actions and responded in a swift and informed manner. This has led to no current infections aboard our installation. Our leadership had been open and straightforward in the reasons why it's been handled as it is, restrictions and orders in place, and when and how restrictions may be eased.”***

**Marine Corps Spouse**

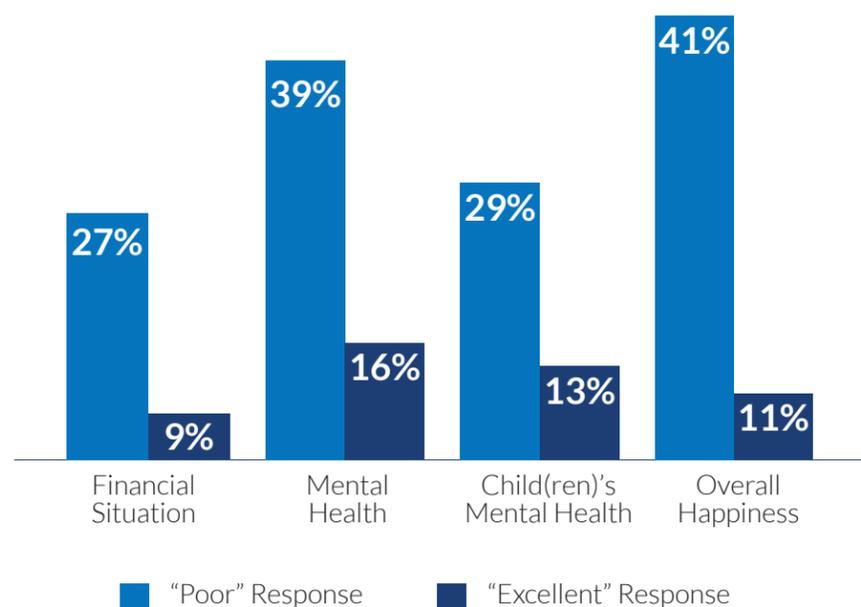
***“The installation and subordinate units have handled it terribly with very poor leadership and unclear guidance, but my family has not suffered like others have.”***

**Army Service Member**

Military leadership already requires compliance with a deluge of demands,<sup>20</sup> and particularly in the context of a national crisis with polarizing or contradictory guidance,<sup>21</sup> it can be difficult to ascertain the appropriate course of action. However, it remains pivotal that installations follow national guidance as well as establish and communicate expectations. This framework will be most impactful if military families see policy implementation documented and enforced. Along these lines, installations should review and update their pandemic response plans to ensure they are consistent with emerging scientific evidence (e.g., as provided by the Centers for Disease Control and Prevention and the National Institutes of Health). While the House of Representatives version of the National Defense Authorization Act (NDAA) for Fiscal Year 2021 (H.R. 6395) would require the Department of Defense to develop a strategy for pandemic preparedness and response and would mandate a review of the military health system's response to COVID-19 (Sec. 722), this legislation had not been enacted as of writing this report. As such, it is critical that the Department of Defense take proactive steps (in the absence of statutory mandate), to safeguard the wellbeing of the active duty force by updating their pandemic response strategies. At the same time, installations should coordinate response plans from their tenant units and ensure alignment with other national crisis response plans.

#### Perceived COVID-19 Impacts are Greater in Active-Duty Family Respondents Who Reported a “Poor” Response from Their Installation

Active-Duty Family Respondents who Report “Major” or “Severe” Covid-19 Impacts



In view of the need for clarity, continuity and accountability, it will be important to complete an after-action review to identify lessons and develop future response plans, as DoD has indicated.<sup>22</sup> The current House version of the NDAA would require the Secretary of Defense to establish a COVID-19 Military Health System Review Panel to review and make recommendations regarding the military health system's response to the pandemic. This existing legislative effort is a good first step, but to be most effective, any review should be both rigorous and expansive, going beyond the expenditure of funds and the military health system to address the broader military response in a number of areas, including child care, the impact of school closures on family readiness, family care plans, defining “mission essential” personnel, and clarifying the second-order effects on training and fiscal spend-down requirements, ensuring the welfare of the total family force. The COVID-19 crisis provides rich opportunities to prepare for future disaster or crisis response, and DoD can capitalize on this learning opportunity.

Finally, it is important to recognize that whole-family success is best ensured through prevention efforts which target upstream risk factors. During this period of crisis, there is a need for increased military leadership sensitivity to family stressors, particularly in areas where there are high levels of virtual schooling, telework arrangements, and heightened COVID-19 risk. Unit leaders should know which families under their command have caregivers and/or have a child with special needs, and actively seek to identify needs and connect them with available resources. As demonstrated in this study, these two groups face significant and persistent psychosocial adjustment and household management challenges which, during the pandemic, warrant more tailored supports. Moreover, as noted in Chapter 1, women in active-duty families (including both service members and spouses) were disproportionately impacted, which is consistent with other research, both in military and civilian populations.<sup>23, 24, 25, 26</sup> Unit leaders should be aware of and sensitive to the additional burdens women are facing. This sensitive leadership approach should include effective strategies to support families through this crisis, including teleworking and flexible scheduling, where appropriate, a review and reduction in non-essential training, and a calibration and communication of expectations. In turn, this targeted concentration can include evaluation of commanders' attention to these upstream factors in command climate assessments.

#### Individuals and Families

##### Military and veteran families and their civilian neighbors

The global pandemic has impacted everyone, but the experience has not been universal. Observations on the impacts of the crisis show that COVID-19 has affected military members and their families to differing degrees. It is important to recognize commonalities in this experience as well as points of divergence. Along these lines, solutions to address the needs of military families cannot be “one-size-fits-all” or focus solely on acute issues; rather, solutions must be tailored to the unique needs of particular subpopulations, and must acknowledge and address existing structural and systemic issues, and account for not just current, but future COVID-19 impacts.

***“The biggest challenge was accessing groceries. I have two small children, and my spouse is deployed. For several weeks, I had to rely on a combination of neighbors and grocery delivery services to get basic groceries. The camaraderie was great though. Usually in a deployment, it feels like everyone’s lives keep going, but your family’s life paused. This time it felt like all of our lives stopped. Everyone was stuck at home a lot, trying to find ways to make the time pass. That part was great!”***

**Air National Guard Spouse**

To this end, civilian community members should recognize that they have a central part to play in helping integrate service members and their families and that it is important for both groups to connect with and understand one another. This study highlights that some military members’ networks have deepened, potentially in response to the pandemic, and that they may feel more understood by and connected to their civilian community counterparts, reporting both greater cultural competence from their civilian community and a greater number of friends in the local civilian community. In the 2019 MFLS, 37% of active-duty military families reported that they felt their local civilian community “truly appreciate the sacrifices made by service members”; this increased to 50% in the 2020 RUSS. The percentage of active-duty military families who felt their local civilian community “truly understands the sacrifices made by service members” also increased from 17% to 33%.<sup>c</sup>

When military families feel understood and recognized by their friends and neighbors, they are more likely to develop resilience. Actions such as acknowledging military families, regularly asking how they are doing, and being cognizant of the challenges which spouses and children of service members also encounter, are potent. Furthermore, it is important for military neighbors to be aware of specific barriers that military families often face in meeting basic needs (such as employment) and in accessing services and amenities. Where possible and appropriate, facilitating opportunities for military-affiliated individuals (e.g., recommending them for a job, providing childcare, etc.) can be instrumental in

strengthening these relationships. Furthermore, a variety of structural reforms are needed to tend to persistent, long-standing issues in this population (e.g., childcare, K-12 education, spousal employment barriers, etc.). It is important that these structural reforms also account for the compounded disparities among families with children with special needs, caregivers, and Black and Hispanic/Latino/a families.

Despite positive indicators in this study that the civil-military gap is closing under the shared national crisis of COVID-19, broader efforts are needed to further bridge the divide, and to prevent further division due to the political discord the pandemic and simultaneous cultural events in the country have aroused. Organizations can help address this divide by focusing on efforts to establish common ground and working towards creating family-level resilience through intentional, culturally competent and inclusive community-based programming.

***“Our community leaders in the City [...] (mayor) and councilmembers as well as our County [...] Supervisors and the Senator [...] and Congressman [...] are very involved in keeping all of the citizens informed, and having open forums, surveys and daily, weekly emails and reaching out to assist in financial resources, food pantries, utility assistance and financial assistance. We have been very fortunate that we are okay, our health is good, and my husband and I are working at home, so we are safe. The COVID-19 has not impacted us in a bad way, but we are in a good place, we are definitely paying it forward and helping our neighbors and friends.”***

**Army National Guard Veteran**

<sup>c</sup> Differences here were not tested for significance and may be attributable to the differences in samples.

## Appendix:

# EXPANDED METHODOLOGY SECTION

The Resilience Under Stress Study compared multiple samples to establish the findings in this report. This section, therefore, provides more detailed information on recruitment approaches for each sample, sample differences, analytic procedures used, the limitations of this research, and directions for future research.

### Samples

This report included a unique opportunity to connect data from previous samples of the Military Family Lifestyle Survey with new survey data collected in the Resilience Under Stress Study. This allowed multiple comparisons to be made, both within the sample of respondents to the RUSS as well as across all active-duty family respondents from the two samples, 2019 MFLS and 2020 RUSS, and within a subset of active-duty, National Guard, Reserve and veteran family respondents from both samples that were paired across both samples. “Family” samples were calculated by combining service member and spouse respondents in each group; active-duty families were calculated by combining the active-duty service member and active-duty spouse groups, National Guard families were calculated by combining service member and spouse groups, and so on.



### Recruitment for the 2019 Military Family Lifestyle Survey

The 2019 Military Family Lifestyle Survey was designed by Blue Star Families (BSF) in collaboration with Syracuse University’s Institute for Veterans and Military Families (IVMF) and with extensive input from military family members and advocates, subject matter experts, and policymakers who work with military families. The survey was conducted online with approval from Syracuse University’s Institutional Review Board (IRB) and was administered using Qualtrics survey system (Qualtrics, Inc., Provo, UT) from May 6 to June 21, 2019. The survey generated a self-selected convenience sample.

All survey participation was considered voluntary and information provided was confidential. Survey recruitment and outreach was broad and included:

- awareness-building efforts focused on military families via email distribution from the BSF mailing lists and social media dissemination (e.g., Facebook, Twitter, blog posts, and partner websites);
- outreach from a myriad of diverse military family, military, and veteran service nonprofits, supportive service organizations, and professional organizations; and
- an intentional explanation of the study’s objective (provided to each possible participant in a consent form whether they subsequently chose to complete the survey or not) to minimize self-selection bias toward any single focal issue and, thus, mitigating the respondents’ propensity to participate based upon any specific, issue-based self-interest (e.g., benefits, employment, wellness, etc.).

Recruitment and outreach were designed in a way that systematically solicited from sample subsets of the military family population to obtain a sample that was largely representative of the military- and veteran-affiliated community on a number of characteristics such as branch of service and National Guard/Reserve component. Sampling, however, was not stratified, nor were results weighted to be precisely representative. Possible biases were introduced through the utilization of a non-probability sampling method including over- or under-representation, particularly the case when looking at gender, marital status, age, rank, and/or race/ethnicity representation among active-duty service member and spouse respondents in the 2019 survey compared to the active duty service member and spouse population.

### Recruitment for the Resilience Under Stress Study

The Resilience Under Stress Study (RUSS) was conducted between May 13 and June 17, 2020 under the COVID-19 Military Support Initiative (CMSI), a partnership between Blue Star Families and the Association of Defense Communities. Inclusion criteria included providing consent, speaking or understanding English, being over 18 years of age, and having some relationship to the military, whether as a service member, veteran, spouse, parent, adult child, sibling, girlfriend/boyfriend or significant other. Participants were

excluded if they did not meet the inclusion criteria, such as having no affiliation with the military, or if they did not consent to participate. As with the MFLS survey, the RUSS was conducted online with approval from Syracuse University's Institutional Review Board (IRB) and was administered using Qualtrics survey system (Qualtrics, Inc., Provo, UT).

Recruitment for the RUSS was facilitated through a variety of approaches, including direct email communication with existing BSF chapter members as well as marketing and promotion of the RUSS on Blue Star Families' social media channels, including Facebook and Instagram. This audience was inclusive of both chapter members and individuals affiliated and unaffiliated with the U.S. military. Respondents were also encouraged to refer other potential participants to the study, resulting in a snowball sampling method. Additionally, other veteran- and military-serving organizations, such as Women in Military Service for America Memorial and The Enlisted Association, also served as "outreach partners". These entities were asked to communicate details about the RUSS to their members, clients and followers on their websites, social media channels and via email blasts. All messaging employed included details about the study and incorporated a "call to action" meant to get prospective participants to join the study or to identify and recommend others who might be eligible. As a means of encouraging participation, prospective participants were informed that Blue Star Families would be randomly awarding \$100 gift certificates to five survey respondents. Additional efforts were made to secure participation for subpopulations within the military, specifically Black military families, that are typically hard to recruit and engage in research.

### **2019 Military Family Lifestyle Survey Sample Description**

Of the 11,228 military family members who started the survey, 64% (7,141) completed the entire questionnaire. The number of respondents varied per question based on applicability to the respondent (for example, relationship to the service member, presence of children, employment status). Many sections of this survey were only available for completion by specific subgroups: military spouses, spouses of veterans, veterans, or service member respondents. Active duty military family responses were calculated by adding service member and military spouse responses, though it is important to note there was a much larger response from military spouse respondents. Survey branching and skip logic techniques, whereby selected answers to certain questions were a gateway to specific follow-on questions, were also used. All responses allowed respondents to select "prefer not to answer" and many questions allowed respondents to select all applicable responses.

While the 2019 MFLS collected information from a variety of military-connected individuals, including National Guard, Reserve, and veteran service members and their families, the data reported in this report was drawn primarily from the responses of active-duty family members (service members and spouses of active-duty service members), with the exception of the Spotlight on National Guard families. The majority of the active-duty family sample was composed of active-duty spouses (86%), while the remainder were service members (15%), and female respondents outnumbered male respondents (89% to 11%). There was a greater percentage of married, older and senior-ranking respondents in this sample than in the active-duty population as a whole.<sup>1,2</sup> Race and ethnicity demographics of the active duty sample were within a few percentage points of the active-duty population, with the notable exception of Black/African-American respondents, who were represented at much lower rates than is reflected in military service. The majority of these family members were white, non-Hispanic (78%), while 11% were Hispanic/Latino/a, 5% were Black, 4% were Asian, 2% were Native Hawaiian or Pacific Islander, and 1% were American Indian/Alaska Native.

### **2020 Resilience Under Stress Study Sample Description**

Similar to the 2019 MFLS sample, the sample of active-duty family respondents to the RUSS included a majority of active-duty spouses (88%), compared to active-duty service members (12%). Female respondents also largely outnumbered male respondents (93% versus 7%). This sample included a greater proportion of married, older, and senior-ranking respondents than in the active-duty population, similar to the 2019 MFLS sample. The majority of these family members were white, non-Hispanic (74%), while 12% were Hispanic/Latino/a, 6% were Black, 5% were Asian, 2% were Native Hawaiian or Pacific Islander, and 1% were American Indian/Alaska Native. Of note, only 19% of this respondent sample reported a household income of less than \$50,000 for the year 2019, indicating this sample may be more financially secure than other active-duty families. The RUSS sample also included a greater proportion of Army-affiliated respondents, and fewer affiliated with the Marine Corps or the Coast Guard.



|   | 2019 MFLS | 2020 RUSS |
|---|-----------|-----------|
| Total Respondents                                       | 11228     | 3024      |
| Total Active-Duty Families                              | 6544      | 1203      |
| Active-Duty Service Members                             | 949       | 139       |
| Active-Duty Spouses                                     | 5597      | 1064      |
| <b>Branch of Active-Duty Family Respondents</b>         |           |           |
| Army  | 33%       | 37%       |
| Air Force   | 25%       | 26%       |
| Navy  | 23%       | 24%       |
| Marine Corps  | 13%       | 10%       |
| Coast Guard   | 7%        | 4%        |
| <b>Race/Ethnicity of Active-Duty Family Respondents</b> |           |           |
| American Indian/Alaskan Native                          | 2%        | 1%        |
| Asian   | 4%        | 5%        |
| Black/African-American                                  | 5%        | 6%        |
| Hispanic or Latino/a                                    | 11%       | 12%       |
| Native Hawaiian or Pacific Islander                     | 1%        | 2%        |
| White Non-Hispanic                                      | 78%       | 74%       |
| <b>Gender</b>   |           |           |
| Male  | 11%       | 7%        |
| Female  | 89%       | 93%       |
| <b>Rank</b>   |           |           |
| E1-E4   | 8%        | 6%        |
| E5-E9   | 51%       | 52%       |
| W1-W5   | 3%        | 3%        |
| O1-O3   | 13%       | 10%       |
| O4-O6   | 24%       | 28%       |
| O7-O10  | 0.5%      | 1%        |

### Matched Group Sample Description

Researchers were able to pair the responses for a group of respondents (n=232) who completed both the 2019 MFLS and the 2020 RUSS. The paired sample of respondents expanded beyond active-duty families, respondents to include National Guard, Reserve, and veteran families. The majority were active-duty families (65%), followed by veteran families (25%), activated and non-activated National Guard (6%) and activated and non-activated Reserve families (4%). This group had slightly higher Navy participation (27%, compared to 23% and 24% in the 2019 MFLS and the 2020 RUSS, respectively), and lower Coast Guard participation (1%, compared to 7% in the 2019 MFLS and 3% in the 2020 RUSS). It is important to note that even fewer members of this sample (15%) reported an income of less than \$50,000 in 2019; this sample may be insulated from some of the financial vicissitudes of the pandemic in ways that lower-income or more junior-ranking military-affiliated families are not.

### Paired Group of 2019 MFLS and 2020 Respondents

|                                     |           |
|-------------------------------------|-----------|
| Total Respondents                   | 232       |
| Total Active-Duty Families          | 150 (65%) |
| Veteran Family                      | 58 (25%)  |
| National Guard Family               | 14 (6%)   |
| Reserve Family                      | 10 (4%)   |
| <b>Branch</b>                       |           |
| Army                                | 36%       |
| Air Force                           | 25%       |
| Navy                                | 27%       |
| Marine Corps                        | 11%       |
| Coast Guard                         | 1%        |
| <b>Race/Ethnicity</b>               |           |
| American Indian/Alaskan Native      | 1%        |
| Asian                               | 6%        |
| Black/African-American              | 4%        |
| Hispanic or Latino/a                | 8%        |
| Native Hawaiian or Pacific Islander | 3%        |
| White Non-Hispanic                  | 81%       |

| <b>Paired Group of 2019 MFLS and 2020 Respondents (cont.)</b> |     |
|---|-----|
| <b>Gender</b>   |     |
| Male  | 11% |
| Female  | 89% |
| <b>Rank</b>   |     |
| E1-E4   | 4%  |
| E5-E9   | 55% |
| W1-W5   | 2%  |
| O1-O3   | 8%  |
| O4-O6   | 31% |
| O7-O10  | 0%  |

### Scales Used

The RUSS employed several previously validated scales existing in the literature, including the Brief Resilience Scale<sup>3</sup>, the Social Isolation Scale<sup>4</sup>, and the Perceived Stress Scale<sup>5</sup>.

The RUSS incorporated scales from the Military Family Resilience (MFR) Metric, an ongoing effort sponsored by USAA to measure aspects of military family resilience, including Military Family Lifestyle Cultural Competence, leadership, engagement, and belonging. The scales were developed from established scales and an extensive literature review in a collaborative process with subject matter experts. The metric is divided into three levels: individual, family, and community, and the initial community level scales were piloted in the 2019 Military Family Lifestyle Survey while the individual and family level scales were tested in an optional follow-on survey to the 2019 MFLS. The items and factors were analyzed across participants that completed both surveys and resulted in revisions to revise item wording and remove poorly performing items. The revised scales were then utilized in the RUSS. Scale reliability statistics are available upon request.

### Applied Statistical Analysis

This report utilized a number of statistical analyses in addition to descriptive statistics and cross tabulations, including t-tests, analyses of variance (ANOVAs), and correlations. These tests were used to examine the significance of potential group differences, such as perceptions of social isolation among caregiver and non-caregiver respondents. ANOVAs were used to reveal significant differences between groups, such as differences in belonging scale scores among groups who perceived various degrees of COVID-19 impacts. Correlations were used to examine relationships between continuous variables, such as the relationship between belonging and resilience. Statistical tables can be provided upon request.

### Limitations of the Resilience Under Stress Study

While this study provides a critical snapshot of some military families' experiences during the COVID-19 pandemic and the factors that support their resilience during the crisis, there are limitations to this research, both within the sample collected and also relating to geographic and temporal context. A primary limitation is a set of samples that are not fully representative of military families as a whole.

| <b>Comparison of Race/Ethnicity Between RUSS Active-Duty Family Respondents and Military Service Members</b> |                  |   |
|--|------------------|---|
|  | <b>2020 RUSS</b> | <b>2018 Demographic Profile<sup>6</sup></b> |
| American Indian/Alaskan Native   | 1%               | 1%  |
| Asian  | 5%               | 5%  |
| Black/African-American   | 6%               | 17%   |
| Hispanic or Latino/a   | 12%              | 16%   |
| Native Hawaiian or Pacific Islander  | 2%               | 1%  |
| White Non-Hispanic   | 74%              | 69%   |

Sample characteristics differed from the active-duty military population in several key areas, including socioeconomic status, race, and gender. Black and Hispanic/Latino/a military families were significantly underrepresented in this sample. Various factors, including some racial/ethnic minorities' distrust of research and general concerns over confidentiality, likely contributed to this underrepresentation. Additionally, recruitment methods used a form of snowball sampling, which may have limited outreach into these communities. Ongoing research and outreach efforts are necessary to improve rates of participation in these groups. Furthermore, the large majority of active-duty family respondents (91%) reported senior enlisted or officer ranks. As a result, the study may not have fully captured the experience of junior enlisted families. It is likely that these subpopulations have had more challenges in terms of financial stress, employment and food and housing security. Additionally, active-duty family respondents to this study were overwhelmingly female (93%), and the largest group was active-duty spouses (88%).

An inability to account for geographic variances and temporal context also limited the study findings. Given the variation in impacts of COVID-19 in different regions of the country, it is probable that families' experiences also varied in different regions. The dispersal of the sample across the country limited the sample size in any particular geographic area, significantly reducing the ability to identify and contextualize specific geographic differences in experiences and perspectives. The timing of survey fielding also limits the conclusions that can be drawn from this study. Fielded from May 13 to June 17, 2020, the survey was intended to study impacts on and resilience in military families during the COVID-19 pandemic. During the course of fielding, however, the nation erupted in race-related conflict after the murder by police officers of George Floyd on May 25th, amid a series of other highly visible deaths of Black citizens. Any differences, therefore, may also be due to the racial tension in the country, and the subsequent protests and conversations related to race and systemic racism that developed during that period.

The RUSS provides an important step forward in understanding factors that can support military family resilience, particularly during stressful times such as the COVID-19 pandemic. It should not, however, be viewed as generalizable to the military population as a whole due to the discrepancies between the collected sample and the demographic characteristics of the active-duty military population. Instead, it provides some guidance for future research on military family resilience. Future research on military family resilience can build on this work by more closely aligning sampling to the demographics of the active-duty military community and collecting a large enough sample to allow for geographic context.

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