



Military Families as a Priority Group for Home Visiting Services

Introduction

The uncertainties and changes associated with military life can adversely impact families with young children. Home visitors can help military families manage stressors and engage in positive and responsive interactions with children, thus supporting development and reducing child maltreatment. In fact, military families are one of the identified priority groups for federally funded home visiting programs.¹

This brief describes the military families who might benefit from early childhood home visiting. Consistent with the NHVRC *Home Visiting Yearbook*, our analysis focuses on families served by home visiting programs (i.e., pregnant women or families with children under 6 years old and not in kindergarten). It includes data from the U.S. Census Bureau, supplemented by a literature review of military families, to address the following questions:

- ✔ Why focus on military families?
- ✔ How many military families might benefit from home visiting services?
- ✔ How do military families differ from other families with young children?

Learning about military families' needs, numbers, and characteristics can help home visiting programs adjust their recruitment strategies and provide tailored services.

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Defining Related Terms

- **Military families:**^{2,3} Spouses and children of service members, including active-duty service members and members of the Reserves and National Guard. Consistent with other research on military families and children, we do not include families of veterans.
- **Active-duty service members:** Individuals employed full time by the military.
- **Reserves and National Guard:** Members of the military who are not in active service but can be called to active duty if needed. Many members of the Reserves and National Guard serve part time while holding a full-time civilian job.
- **Deployment:**⁴ The movement of service members to a specified destination for military action. It can also refer to family activities before, during, and after deployment.
- **Reintegration:** The process of adjusting to life at home when service members return from deployment.
- **Residential mobility:** Frequent changes of residence, either between cities/towns; states; or communities, or within the same city/town.

Why Focus on Military Families?

Military families have great capacity for adaptability, flexibility, and resilience, yet they face unique challenges and stressors that can negatively impact child well-being and create instability for young children.⁵ The deployment process and frequent moves introduce concerns that range from anxiety about changing schools to fear that a loved one will be killed or wounded.

Deployment and Reintegration

Deployment is a regular part of military family life with widespread impacts. Deployment disrupts family routines, increases stress, and raises concerns about family well-being. It also contributes to increased rates of depression in active military families.⁶ Deployment can lead to increased rates of marital conflict and domestic violence.⁷

Reintegration is another potential source of stress. In the weeks and months after a service member returns home, couples may experience reduced trust and intimacy and increased relationship dissatisfaction.^{8,9} Additional challenges arise when a service member returns home in need of physical or psychological care.

Parenting can also become more difficult during the deployment cycle due to heightened stressors and shifting family roles. Many spouses who remain at home experience caretaking burden and feelings of increased loneliness and isolation.¹⁰

Children may experience negative effects from a parent's deployment, including increased risks of depression and anxiety, increased behavioral problems, and poor attachment to the deployed parent.^{11,12} Deployment can also lead to increased rates of child neglect and maltreatment.¹³ Risks to children caused by deployment are known to increase as deployment times increase.¹⁴

Repeated deployment and reintegration require families to reorganize and change caregivers on a regular basis. Such ongoing changes can threaten the stability and routines that support children's well-being and healthy development.¹⁵ Young children may be disproportionately affected because they are in a crucial developmental stage and especially dependent on their caregivers.^{16,17} Studies have shown that children ages 3–5 with a deployed parent are more likely to develop behavioral problems than children without a deployed parent—particularly if parents exhibit stress.¹⁸

Residential Mobility

Military families tend to move frequently. Active-duty military families typically move every 2–3 years, about 2.4 times more than civilian families.¹⁹ They are also more likely than civilian families to move long distances, across state lines, or to foreign countries. Residential moves may prompt couples to make serious relationship decisions, such as whether to split up, maintain their relationship long distance, or marry.^{20,21}

The military aims to support families by providing job security, a consistent paycheck, curriculum standards across military-base schools and childcare settings, and similar housing options across locations.²² Despite these efforts, children may find it difficult to adjust to new environments or to disrupt relationships with their caregivers, teachers, and peers.²³

A Priority Group in Federal Legislation

Legislation establishing the federal Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) identifies “individuals who are serving or formerly served in the Armed Forces” as a priority group for services. Individual home visiting programs also prioritize services for military families, including some programs that do not receive MIECHV funding.

How Many Military Families Might Benefit From Home Visiting Services?

At least 508,300 pregnant women and families with children under 6 years old and not in kindergarten have 1 or more parents in the military. This includes 234,100 active-duty families and 274,200 Reserves and National Guard families. If counting individuals rather than families, we estimate 43,900 pregnant women and 650,500 children in military families could benefit from home visiting. See exhibit 1 on the next page for a breakdown of children by age.

Exhibit 1. Breakdown of Young Children in Military Families by Child Age

Child age	Number of children
Infants (<1 year)	121,100
Toddlers (1–2 years)	228,300
Preschoolers (3–5 years)	301,100

Source: Author tabulations of American Community Survey, 2013–2017.²⁴

These numbers are likely underestimates because the American Community Survey does not count individuals who have been deployed overseas for more than 2 months.²⁵ About 15 percent of active-duty personnel were deployed overseas in 2016. Assuming a similar deployment rate, our estimate might be missing approximately 41,000 families.²⁶

Using these figures, military families represent approximately 3 percent of the roughly [18 million pregnant women and families](#) who could benefit from home visiting. This makes military families a relatively small priority group, although comparable in size to pregnant women and mothers under 21—another [group targeted by home visiting programs](#) (see sidebar).

Home visiting programs near military bases may find a higher concentration of military families in their service area, as most military families live off base.²⁷ These families should not be overlooked as programs plan to deliver home visiting services.

Families Commonly Targeted for Home Visiting Services

It is difficult to identify families commonly targeted for home visiting services because programs vary greatly in their priorities. Moreover, U.S. Census Bureau data used in the analysis do not include information about child maltreatment or student achievement. This brief follows the [approach used in the NHVRC's Home Visiting Yearbook](#) by examining families who meet *any* 1 of 5 targeting criteria: (1) having an infant, (2) income below the federal poverty threshold, (3) pregnant women and mothers under 21, (4) single/never married mothers or pregnant women, or (5) parents without a high school education. Note that military families are not included in this group unless they meet 1 of the 5 targeting criteria.

How Do Military Families Differ From Other Families With Young Children?

Military families tend to vary from other families with young children in terms of their economic and demographic characteristics. They also face unique concerns about stigma and confidentiality that may impact program participation.

Economic and Demographic Differences

Military families generally have more economic resources than civilian families with young children. About 1 in 10 military families with young children (11 percent) live in poverty. This is much lower than the poverty rate among all families with young children (25 percent) and families commonly targeted for home visiting services (49 percent). Active-duty military families have particularly low poverty rates (5 percent, data not shown).²⁸

Parents in military families are more likely to have a high school diploma than families with young children in the general population. Only 2 percent of parents in military families with young children have less than a high school education. This compares to 10 percent among all parents of young children and 19 percent among those typically targeted for home visiting services.

Military families also tend to have more parental resources in the form of dual-parent households. More than three-quarters (78 percent) of military families eligible for home visiting are dual-parent households, compared to roughly half (51 percent) of families commonly targeted for home visiting services. Exhibit 2 provides data on additional family types.

In terms of demographics, 75 percent of military families with young children are White, 12 percent are Black, 4 percent are Asian, and 9 percent fall into other racial groups (see exhibit 2). A high proportion of young children in military families speak English at home (86 percent), with 9 percent speaking Spanish and 4 percent speaking other languages. Almost half the children in

military families benefit from military health insurance programs, such as TRICARE, and are less likely to be uninsured or use Medicaid.

Exhibit 2. Characteristics of Military Families With Young Children and Other Potential Beneficiaries of Home Visiting Services

Percentage	Military families with young children N = 508,300	All families with young children N = 17,967,800	Families commonly targeted for home visiting services N = 9,086,900
Poverty			
Under 100% of federal poverty level	11	25	49
Family type			
Mother and father	78	64	51
Mother only	9	21	36
Father only	4	4	4
No parent	1	3	3
No child (pregnant woman without children)	9	7	6
Race			
American Indian/Alaska Native	1	1	1
Asian	4	6	4
Black	12	14	19
Native Hawaiian/Pacific Islander	<0.5	<0.5	<0.5
White	75	69	63
Multiple	4	3	3
Other	3	7	9
Ethnicity			
Hispanic or Latino	14	23	29
Primary language spoken by children			
English	86	68	72
Spanish	9	24	19
Other	5	8	9

Percentage	Military families with young children N = 508,300	All families with young children N = 17,967,800	Families commonly targeted for home visiting services N = 9,086,900
Child insurance status			
TRICARE or other military insurance	48	2	2
Medicaid or other public insurance	21	62	44
Private insurance	29	31	49
None	2	5	5
Education of parents or caregivers			
Less than high school	2	10	19

Source: Author tabulations of American Community Survey, 2013–2017.²⁹

Notes: Percentages may not add up to 100 due to rounding. Families with young children include all families and subfamilies with pregnant women and/or children under 6 years old and not yet in kindergarten. Families commonly targeted for home visiting services meet at least one of the following targeting criteria: (1) having an infant, (2) income below the federal poverty threshold, (3) pregnant women or mothers under 21, (4) single, never married mothers or pregnant women, and (5) parents without a high school education. Family type is based on data for the youngest child. “Mother only” families include children with two mothers; “father only” families include children with two fathers. Race and ethnicity are based on race and ethnicity of mother or other primary caregiver. Age, health insurance status, and primary language are based on data for children, except language for children under 4 years old is based on language of their mother or other primary caregiver. Some children with public health insurance also have private health insurance. Education of parents or caretakers is based on data for all parents present or the head of household if no parents are present.

Hesitations to Participate in Home Visiting Programs

Military families may hesitate to participate in home visiting programs due to concerns about confidentiality and stigma. While this is also true for civilian families, the laws and policies concerning mental health and treatment confidentiality are different in the military.³⁰ First, the military screens service members for mental health disorders upon entry, so that military leadership is aware of factors that may affect service members’ ability to execute required duties. Second, home and work lives are less separate for service members than for civilians. For example, military health insurance provides service members access to military service providers, which could contribute to the perception that leadership will find out about mental health concerns. As a result, military families may feel concerned about sharing information on their psychological health status that could potentially affect military service time.³¹

Similarly, many families—both civilian and military—misperceive seeking help for mental health concerns as a sign of weakness. This view may be exacerbated by a military culture that prizes toughness and self-reliance. Indeed, only a small proportion of military personnel use mental health services despite established research identifying significant psychological needs.³² Seeking help from programs that seek to reduce child maltreatment can carry its own stigma.

Conclusion

Home visiting can help military families manage the dual stressors of parenting young children and navigating the changes and challenges of a military lifestyle. While military families represent only 3 percent of all potential home visiting beneficiaries, they are an important priority group with distinctive needs and characteristics. States and localities with higher percentages of military families should pay particular attention to these distinctions when developing recruitment and engagement strategies. For example, programs may want to partner with local military bases and organizations—rather than more typical referral partners—to identify and recruit potential participants.

Knowing more about military families can help programs tailor service delivery. [Military-informed care](#) accounts for military families' unique strengths, challenges, and culture. As described in an earlier [Innovation Roundup Brief](#), several home visiting programs seek to serve military families in ways that engage the broader military community. Such supports may also encourage service members to join and stay in the military.

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References and Notes

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- ³ Veteran families may face similar challenges to military families, particularly if the veteran has recent military experience. There are more than a million families with a veteran and either a child under 6 or a pregnant woman.
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²¹ Note that reserve families are typically not required to move as often as active-duty military families; their residence and relocation patterns are more similar to civilian families.

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²⁷ Only 10 percent of military families live on base according to the U.S. Department of Defense: https://www.acq.osd.mil/eie/fim/Housing/Housing_overview.html

²⁸ The poverty rate for military families with young children and a parent is in the Reserves or National Guard is 16 percent.

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