Associations Between Stressors, Partner Role Functioning, and Postdeployment Outcomes

E. C. Coppola, C. E. McCall, K. M. Bailey, & S. MacDermid Wadsworth
Department of Human Development and Family Studies, Purdue University, West Lafayette, IN

Abstract

Using a sample of spouses of recently deployed National Guard service members (N = 162), we evaluated postdeployment well-being (depression symptoms and family functioning) one year following service members’ return from deployment (T3) from stressors experienced at predeployment (T1) and partner role functioning earlier in reintegration (T2). We evaluated whether partner role functioning earlier in reintegration mediated associations between stressors experienced prior to deployment and later well-being. Results indicated that the accumulation of stressors prior to deployment did not significantly predict partner role functioning earlier in reintegration or well-being later in reintegration. While partner role functioning earlier in reintegration predicted later well-being, it did not mediate associations between predeployment stressors and later well-being. These findings suggest that degree of partner role functioning earlier in reintegration may have implications for spouses’ well-being in a year following deployment.

Introduction

The deployment cycle—collectively referred to the period before deployment (predeployment), during deployment, and postdeployment (reintegration)—is typically described as one of the most stressful aspects of military life (Meadows et al., 2015). Family members navigate through a range of challenges before and during deployment that may persist into reintegration (Brennan et al., 2014). While associations between stressor pileup and depressive symptoms have been previously identified (Collins et al., 2017), little is known about how these associations operate across a deployment cycle.

Drawing on family stress theory (McCubbin & Patterson, 1983), we evaluated how stressor pileup in predeployment (T1) influences spouses’ well-being later in reintegration (T3). We also drew on perspectives of resilience (Meadows et al., 2015) to evaluate partner role functioning as a mechanism of resilience by testing whether it mediates associations between predeployment (T1) stressor pileup and well-being later in reintegration (T2).

Hypotheses

(1) Predeployment Stressors: Experiencing more stressors prior to deployment (T1) will be associated with lower levels of partner role functioning earlier in reintegration (T2).

(2) Partner Role Functioning: Better partner role functioning earlier in reintegration (T2) will be associated with better family functioning and lower levels of depressive symptoms later in reintegration (T3).

(3) Mediating Role of Partner Role Functioning: Associations between stressors experienced during predeployment (T1) and well-being later in reintegration (family functioning and depressive symptoms; T3) will be mediated by partner role functioning (T2).

Method

We collected data from spouses of National Guard service members prior to deployment (T1; 1-16 weeks before departure), shortly following service members’ return from deployment (T2; an average of three months after returning from deployment), and later following their return from deployment (T3; an average of 13 months following return).

Pileup of Stressors (T1): Summed score from the Family Index of Life Events (McCubbin et al., 1981).

Partner Role Functioning (T2): Mean score of five items repurposed from the Active Engagement Scale (α = .86; Hagedoorn et al., 2000).

Outcome (T3): Family Functioning: Mean scores from the General Functioning subscale of the McMaster Family Assessment Device (FAD; α = .94; Epstein et al., 1983).

Depressive Symptoms: Mean scores from the 10-item Center for Epidemiological Studies Depression Scale (CES-D; α = .91; Radloff, 1977).

Analytic Plan:

• Structural equation modeling with full information maximum likelihood
  • Entered raw data into Mplus v. 8
  • Confirmatory factor analysis
  • Developed a latent variable for partner role functioning using modified items from the Active Engagement Scale (Hagedoorn et al., 2000)
  • Path model for hypothesis testing
  • Adjusted for predeployment (T1) family functioning and depressive symptoms

Results

Conformatory Factor Analysis for Partner Role Functioning:

χ²(4, N = 153) = 6.13, p > .05, CFI = .99, TLI = .98, RMSEA = .05

H1, which predicted predeployment (T1) stressors would be associated with partner role functioning earlier in reintegration (T2), was not supported.

H2, which predicted better partner role functioning earlier in reintegration (T2) would be associated with better family functioning and lower depressive symptoms later in reintegration (T3), was supported.

H3, which posited partner role functioning would serve as a mediator, was not supported.

Conclusions

At-home partners’ perceptions of their functioning in the partner role earlier in reintegration is associated with their depressive symptoms and perceptions of family functioning a year later.

Future research should evaluate associations between at-home partners’ perceptions of their functioning in the partner role and service members’ outcomes.

Programming should consider underscoring the importance of functioning in the partner role by promoting communication skills and reflective listening.

References


