



The Military Teen Experience Survey 2022 Findings and Insights

The Current State of Military Teens, America's Future Force

<i>About NMFA</i>	2
<i>About Bloom</i>	3
<i>Executive Summary</i>	6
<i>Methodology</i>	9
Measures	10
Sample	10
<i>Findings</i>	11
Demographics	11
Mental Well-Being	12
Factors Related to Mental Well-Being	13
Food Insecurity	15
Future Military Service	18
Two Snapshots: 2021 and 2022 Teen Data	19
<i>Recommendations</i>	24
Research	24
Policy	26
Mental and Behavioral Healthcare	26
Military Family Food Insecurity	26
School Transitions	27
Programming	28
Operation Purple Teen Camp	28
Operation Purple Family Experiences	28
<i>Limitations</i>	29
<i>Call to Action</i>	30
<i>References</i>	31

About NMFA

The National Military Family Association is the leading nonprofit dedicated to serving the families who stand beside the uniform. Since 1969, NMFA has worked to strengthen and protect millions of families through its advocacy and programs. They provide spouse scholarships, camps for military kids, and retreats for families reconnecting after deployment and for the families of the wounded, ill, or injured. NMFA serves the families of the currently serving, veteran, retired, wounded or fallen members of the Army, Marine Corps, Navy, Air Force, Space Force, Coast Guard, and Commissioned Corps of the USPHS and NOAA.

To learn more about the National Military Family Association, visit:

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■ About Bloom

Bloom: Empowering the Military Teen is an organization created by and for military teens to empower, highlight, and connect military teens across the globe. Founded by two teens who were struggling with a difficult move, its purpose is to ensure that military teens know they are not alone. Bloom is one of the only organizations that focuses specifically on military dependents of middle school, high school, and college age. Since its launch in April 2020, Bloom has published over 185 articles and featured the work of over 30 military teens from 14 states and five countries as part of its commitment to sharing the stories and presenting the authentic experiences of the military child.

To learn more about Bloom, visit: www.bloommilitaryteens.org.

Introduction

Across America, children and teens are struggling. In October 2021, the [American Academy of Pediatrics, the Children’s Health Association, and the American Academy of Child and Adolescent Psychiatry](#) went so far as to declare a “National State of Emergency in Children’s Mental Health.” The stresses associated with the pandemic, including school disruptions, isolation, and in many cases the loss of a caregiver, have placed children under unprecedented strain (Viner et al., 2022). Similarly to civilian children, military children and adolescents are not only experiencing these stressors, but they also face the many challenges that accompany the military lifestyle that come with their parents’ service including but not limited to PCS moves, repeated separations from the service member parent, and school transitions (McMahon, Creaven, & Gallagher, 2020). While some of the challenges are standard for military teens, lesser studied factors like food insecurity and mental well-being can significantly and negatively impact teens’ mental health (Arnold et al., 2017) and need our attention.

Additionally, we know that too many military families also struggle to put food on the table (Beymer et al., 2021). Food pantries operate on or near virtually every military installation, and the demand has only increased since the pandemic. However, we were alarmed by what our data showed us about the scope of the problem. There are many reasons why a military family might struggle financially. High spouse unemployment, skyrocketing housing costs, and expenses associated with PCS moves can all make it hard for families to make ends meet (Burke & Miller, 2017; Ott, Kelley, & Akroyd, 2018; Shamsuddin, & Campbell, 2021). U.S. leaders must act to address these issues - it is essential to provide struggling families with immediate help to feed their families.

Previous studies have examined the many struggles of military families (Clark et al., 2018), including military service members (Peck & Parcell, 2021), military spouses (Mailey et al., 2018;), and military children and adolescents (Cramm et al., 2019). However, our military teens often feel unseen and unheard (Bloom, 2021). In 2021, NMFA and Bloom surveyed over 2,000 military teens and found 87% of military teens had low to moderate mental well-being scores AND 36% reported experiencing food insecurity. We knew we needed to survey our military teens again in 2022 to see if their mental well-being and levels of food insecurity had improved or declined. NMFA and Bloom decided to work together again to survey our military teen community in 2022. We sought to better understand teens’ mental well-being, their food insecurity levels, and their plans to serve in the future, among other variables.

Using Bronfenbrenner’s Ecological Systems Theory as the theoretical framework, which focuses on understanding how an individual is situated in layers of context, and utilizing the military as a layer of context we considered, our primary objectives of this study were to 1) determine

the incidence of low to moderate mental well-being scores in military teens in 2022 compared to our 2021 findings, 2) determine the incidence of low to moderate food insecurity scores in military teens in 2022 compared to our 2021 findings, and 3) identify demographic, rank, and military status differences between military teens who are struggling and those not struggling as well as any statistically significant correlations between variables.

Military teens told us they often don't feel seen or heard. NMFA values our military teens and their voices; we know teens are a vital part of our military families. They are important. In this report we will explain our methodology, findings, and recommendations for future policy, programs, and research. Mainly, as we begin to shift from a global pandemic to an endemic, we will answer the question we all want to know the answer to: How are our military teens doing in 2022?

Executive Summary

NMFA is Focused on Our Military Teens
Military teens are resilient, but they need our help.

The National Military Family Association (NMFA) has again partnered with Bloom: Empowering the Military Teen to better understand the experience of America's military teens. In 2021, we fielded our first-ever Military Teen Experience (MTE) Survey, and over 2,000 military-connected kids, ages 13-19, gave us a snapshot of military youth life in the middle of a pandemic. In 2022, we heard from even more teens, over 2,500 (n=2,667) military teenagers responded- giving us a deeper understanding of military teens' unique challenges. **Note: In both years, a descriptive, cross-sectional study design was utilized, providing us with a snapshot of the military teen population at those points in time. A voluntary response sample was used. The limitation of this sample is that it is somewhat biased; some people will inherently volunteer more readily than others.**

Military Teens' Mental Well-Being Scores Concerning- Two Consecutive Years

"The biggest struggle I have experienced as a military teen is the struggle of my mental health."
Active-duty Army teen (O-3), Age 15, 10th grade

"People don't understand how growing up I saw my dad more through a computer screen and FaceTime than I did in person. They don't understand that my dad was gone 300 days of the year. He missed years of Christmas and birthdays and school achievements. And as I grew older that sadness of my dad being gone so much turned into fear that one day instead of my dad walking through the door it would be an officer with a folded flag."

Active-duty Navy teen (E-7), age 16, 11th grade

Military teens' mental well-being scores are concerning – for two consecutive years. In 2022, less than 10% of the military teens we surveyed indicated a high level of mental well-being. NMFA used the Short-version Warwick Edinburgh Mental Well-Being Scale (SWEMWBS), a validated instrument, to measure well-being in our teenage respondents.

In 2022, 28% of military teen respondents reported low mental well-being. The majority, 63%, indicated a moderate level of mental well-being. That's up from 45% last year – but while we saw more respondents shift from low to moderate levels of mental well-being in 2022, we also saw more respondents slip from high-levels of mental well-being to moderate as well.

This year, teens shared something else: 37% of survey respondents said they had thought about harming themselves or others. More positively, a substantial number of military teens are getting the mental health help they need. We asked the teens if, in the past year, they had sought care for a mental or behavioral health concern and 25% answered yes. However, military teens not getting help cited many barriers to care.

Military Teens Are Experiencing Food Insecurity

“Military life isn’t “better” than civilian life because everything is “given” to us. People think the military gives us housing and food and all this stuff but what they don’t know or see is how much my dad has to work and how much time he misses with his family on deployments to give us that support and stability. My mom said we can’t get food stamps because the housing that they “give” them puts their income over the limit, so they have to budget every check to make sure everything gets paid, and we have enough for groceries. People think it’s easier but it’s not, it’s harder.” **Active-duty Army (E-5) teen, Age 14, 8th grade**

While over half of our respondents (54%) reported being food secure, our 2022 data revealed that 46% of military teen respondents are food insecure. Broken out, 28% of respondents are experiencing very low food security, and 18% are experiencing low food security. Additionally, 7% of our military teen respondents told us that they have a job and are working in order to contribute to their family’s finances, rather than for extra spending money or for professional experience. They’re working to help their military families with finances.

Military Teens of Today Are the Fighting Force of Tomorrow

“I hope my parents support my dream of joining the Army”

Active-duty Army teen, E-9, Age 18, 12th grade

“The hardest thing about being a military teen is pressure to join the military”

Active-duty Navy teen, E-7, Age 17, 12th grade

In 2022, military teens continued to report significantly higher rates of intent to serve than their civilian peers, with 44% of military teens indicating that they planned to serve in the future. The Department of Defense’s [\(DoD\) 2020 propensity report](#) found only 11% of teens and young adults planned on future service in the military. Also, 18% of the teens NMFA surveyed shared that not only do they plan to serve one day in the future – they plan to enlist right after completing high school. The military teens of today are not just the future of our military – they’re our service members of tomorrow.

While Family Science researchers, Family Policy experts, and the DoD acknowledge military-connected challenges will always exist for military families and their teens, NMFA is the voice of military families and are here to support all military family members. Here’s what we’re doing to help our military teens right now:

Policy

» Urging Congress to revise the rules around Supplemental Nutrition Assistance Program (SNAP) so that Basic Allowance for Housing (BAH) is excluded from eligibility calculations - our military families should NOT be food insecure

» Calling on Congress and DoD to increase reimbursement rates as needed to encourage more mental and behavioral health providers to accept TRICARE

Programming

» Developing Operation Purple Teen Camps for our military teen population with 2022 locations in California, Texas, and Georgia

» Developing Operation Purple family experiences that focus on the relationship between the parent/guardian and teen with 2022 locations in Virginia and California

Research

» Identifying critical gaps in research regarding our military teen community, performing necessary credible research, and giving our military teen community a research 'voice'

» Informing Congress, DoD, the White House, K-12 and higher education institutions educating military teens, and key decision makers with findings and research reports

Methodology

In both 2021 and 2022, NMFA and Bloom's Military Teen Experience Survey took a mixed-methods approach. Mixed methods are a research approach where researchers collect and analyze both qualitative and quantitative data within the same study (Shorten & Smith, 2017). Quantitative questions are numerical in nature and can be examined statistically. Qualitative research is used to pull out the stories that people want to share; their cultures, perspectives, and worldviews are appreciated in this method (Allan, 2020). In our case, we used qualitative questions to take a deeper look at how and why military teens feel the way they do. As key policy makers, leaders, and support organizations strive to support our military families, researchers can use mixed-methods data to explore challenges, trends, and diverse populations. It is also to note that while NMFA designs, conducts, and analyzes our data in-house, we seek input from other researchers at higher education institutions as well.

A descriptive, cross-sectional study design was used to quantitatively depict how military teens were fairing both in 2021, during a global pandemic, and again in 2022, while transitioning from a pandemic to an endemic. The defining feature of a cross-sectional study is that it compares different population groups of interest at a single point in time - like a photograph or snapshot. Findings are drawn from whatever fits into the frame. In cross-sectional designs, variables are not manipulated. Rather, our research describes characteristics of our military teen population sample including parent's military status, teen's race, employment, age, sex, rank of service member parent, type of school attended, among other characteristics. The benefit of using a cross-sectional study design was that it allowed NMFA to compare these many different variables at the same time. We did not try to measure the effects of variables but sought instead to describe them statistically. The drawback of using this methodology is that it does not allow for conclusions about causation.

NMFA collected data from military teens by creating and disseminating our Military Teen Experience Survey in tandem with Bloom: Empowering the Military Teen via email, social media, and web-based marketing. The survey contained 60 questions and took an estimated 8 minutes for each military teen to complete. Skip logic was used to ensure respondents only received questions that were relevant to them. Anonymity of survey respondents was assured, their answers were separated from email addresses prior to analysis.

Once collected, the unique identifiers (email addresses) were removed, and clean data were exported. Data were analyzed using the Statistical Package for Social Sciences (SPSS). High-level analyses (e.g., descriptive statistics, correlations) were conducted for this sample. The qualitative data were coded and analyzed using NVivo.

Measures

In both our 2021 and 2022 Military Teen Experience Surveys (MTES), we utilized two validated instruments to ensure the credibility of our data, as well as additional questions from academics and different departments at NMFA.

First, we used the short version of the Warwick-Edinburgh Mental Well-Being Scale (SWEMWBS), as we sought to measure the mental well-being of military adolescents. NMFA completed the registration for a license to use SWEMWBS for non-commercial purposes and was granted licensure before our research began.

The SWEMWBS is a validated, 7-item scale that measures the well-being and psychological functioning of youth. The measure is structured to focus on a positive approach and captures a wide concept of well-being, including emotional, cognitive, and psychological components. Statements approach mental well-being from a positive perspective related to feeling good about life, positive affect, and avoiding pain or negative affect (Haver et al., 2015). Although this measure does not provide clinical diagnosis for mental health concerns, low mental well-being on the SWEMWBS have been related to depressive symptoms when compared to other validated instruments that measure clinical mental health concerns (Shah et al., 2021).

Categories used in the current report to provide meaningful interpretation of the SWEMWBS include high, moderate, and low mental well-being, which have been established in previous research. Categories have been established in previous studies as one standard deviation above (high) and below (low) the mean, and these studies have identified the average mental well-being score as approximately 23.5 (Ng Fat et al., 2017). The average score of 23.5 is used to understand where high, moderate, and low mental well-being scores fall in relation to each other. Thus, categories have been identified as teens having relatively low or poor mental well-being (scores between 7.0 – 19.5), teens having moderate or average mental well-being (19.6 – 27.4), and teens having relatively high or good mental well-being (27.5 – 35.0), with higher scores indicating higher mental well-being.

Additionally, we relied on the Self-Administered Food Security Survey Module for Youth Ages 12 & Older (developed and validated by the U.S. Department of Agriculture [USDA]) to measure the food insecurity levels of our military teens. The USDA has identified categories for food security in accordance with the current measure. Categories include experiencing food security (scores of 0 or 1), low food security (scores between 2 - 5), and very low food security (scores between 6 - 9). While no registration or license was required to utilize the USDA short form, using these standardized instruments and procedures strengthens the reliability and validity of NMFA's research, and ensures maximum compatibility with national statistics on food insecurity and hunger in the United States.

Sample

NMFA and Bloom fielded two surveys for military-connected teens between the ages of 13-19 years old. The first survey was fielded in March 2021 and the second in February 2022, each for a two-week time frame. In 2021, over 2,000 (n=2,116) military-connected teens responded to the MTES and over 2,500 (n=2,667) responded to the second survey in 2022. The 2022 MTES opened on February 1 and closed on February 16. A voluntary response sample was utilized, mainly due to ease of accessing survey participants. Instead of the researchers choosing participants and directly contacting them, people volunteered themselves (e.g. by responding to an online survey). Voluntary response samples are at least somewhat biased as some people are more likely to volunteer than others and, as a group, they may not be fully representative of the larger population we seek to understand. For each variable examined, we also analyzed a subsample made up of only active-duty military teens to understand the experiences of teens whose parent(s) is actively serving today.

Findings

Demographics

In the 2022 MTES, we heard from over 2,500 (n=2,667) respondents. Of the total respondents, most of the military teens (n= 2,254) were between the ages of 13–19. In the 2022 MTES, we heard from nearly 2,300 military teens (n= 2,254) between the ages of 13-19. Teens were, on average, about 16 years old. They identified as boy or man (50%), girl or woman (46%), gender variant or non-conforming (3%), and transgender (1%). Teens primarily identified as White or Caucasian (72%), with 10% teens identifying as Black or African American, 9% identifying as two or more races, 4% identifying Asian or Asian American, 1% identifying as Native Hawaiian or Pacific Islander, and 1% identifying as American Indian or Alaskan Native. A third of teen respondents also identified as Hispanic or Latino/a/e (33%). Teens were not required to respond to demographic questions and could choose ‘Prefer Not to Answer.’ As such, a small percentage of military teens did not report their gender identity, race, or ethnicity.

Additionally, 34% of military teen respondents told us their serving parent had been wounded, ill, or injured. Children can be ‘forgotten secondary caregivers’ when living in homes where one parent is the primary caregiver for a service member with a service-connected illness or injury. These Hidden Helpers take on extra household and childcare responsibilities, in addition to coping with stressful household situations that arise from invisible and visible wounds (Tanielian et al., 2017).

Military Teen Caregivers In Their Own Words:

“My biggest challenge is helping taking care of my parent because of their injuries.”

Medically retired Army, E-4 adolescent, age 14, 8th grade

The overwhelming majority (72%) of respondents had a parent or guardian serving on active-duty status, including those with parents activated through the National Guard or Reserves. Of the remaining respondents, 10% came from National Guard or Reserve families serving on drilling status, 14% from families whose service member had retired after 20-years of service or had medically retired, and 4% were from families of veterans who served but did not retire after 20-years of service or medically retired. For 18% (n = 393) of teens, two or more of their parents or guardians had served in the military and in 39% (n = 119) of these families, both parents were currently serving on active-duty status (i.e., serving on active duty or serving in The National Guard or Reserves on active status).

About half of teens indicated that their service member parent was enlisted (52%), while officers comprised the minority (34%). This is not necessarily an accurate representation of the U.S. military, as enlisted personnel make up about 82% of the armed forces and officers make up the remaining 18% (Department of Defense (DoD), 2020). According to the DoD, there are about 1.3 million active-duty personnel, and 36% of them have children.

Military teens attended a variety of schools, with the majority attending public schools, including charter schools (61%). Other schools attended by respondents included private schools (22%), Department of Defense Education Activity (DoDEA) schools (9%), home school (4%), virtual school (unrelated to the pandemic; 2%) and other types of school not listed as an option (2%).

Mental Well-Being

Overall, the military teens in this sample reported their mental well-being as generally moderate. Teens reported an average score of 22, which is considered a moderate level of mental well-being. About 9% of teens reported having high mental well-being, 63% had moderate mental well-being, and 28% scored low on mental well-being. It should also be noted that scores below 20 on this measure can be indicative of depressive symptoms (Shah et al., 2021).

Based on the questions asked in the SWEMWBS, teens who reported high mental well-being generally experienced feelings of optimism, relaxation, and closeness with others. Additionally, they dealt with problems well, felt that they could make up their mind about decisions, and felt that they were thinking clearly.

Alternatively, teens who reported low mental well-being generally experienced difficulty thinking clearly and making up their mind. They also rarely felt optimistic, did not often feel relaxed, and felt disconnected from others. These experiences are aligned with descriptions of depressive symptoms, so it is important to understand the experiences of these teens and what resources they can access.

Active Duty Teens – Mental Well-Being

		Frequency	Percent
VALID	Low	367	27.5
	Moderate	838	62.9
	High	128	9.6
	Total	1333	100.0

Given that 28% of teens reported experiencing low mental well-being, it is important to understand if and how they reached out for help. Although almost half (45%) of teens reported not feeling that they needed care for a mental or behavioral health concern, over half of teens needed mental or behavioral healthcare in some capacity but did not receive it. The largest portion of teens who needed care but did not receive it (10%) reported that it was due to not disclosing their concern about their mental or behavioral health to their parents or guardians. Talking about mental health with a parent or guardian can feel uncomfortable and teens may worry about how parents will respond (Becker et al., 2014). Building safety and trust in parent-adolescent relationships could be foundational for ensuring that teens can communicate their needs to the adults in their lives and, thus, receive the mental or behavioral health care they need.

Another reason teens listed for not receiving needed care was that their parent or guardian was unable to find a mental or behavioral healthcare provider (5%). Inability to find a mental healthcare provider has been consistently cited as a difficulty for military families due to lack of providers, high out-of-pocket costs, and time constraints (Becker et al., 2014). Finding ways to increase the number of mental healthcare providers to military families can help ensure that military teens receive the care they need.

Finally, 4% of teens reported that although they needed mental or behavioral health care, their parent or guardian was unwilling to seek out such care for them. An unwillingness to seek out mental or behavioral health care may speak to the stigma that still exists for some families seeking mental health care (Becker et al., 2014; Schvey et al., 2021). Although the Department of Defense has implemented many efforts into reducing the stigma associated with mental health in the military, there is still work left to do in removing the stigma to ensure teens receive needed mental and behavioral health services.

Factors Related to Mental Well-Being

Among the factors measured, some were (statistically) related to mental well-being. First, teens who reported having a job generally reported greater mental well-being. Previous research has found mixed evidence on how paid employment impacts adolescent well-being (Evensen et al., 2000), suggesting that the impacts of paid employment for teens may be nuanced considering other factors in their environment (e.g., type of work, reason for employment). Although having a job was related to greater mental well-being for this sample, more information is needed about adolescent employment, especially within military families. Additionally, older teens generally reported lower mental well-being. It could be that as teens in military families get older, they have experienced more stressors over time (e.g., more military moves, more deployments or separations) that may cumulate and contribute to their lower mental well-being (Kaeppler & Lucier-Greer, 2020).

Teens with multiple parents who were currently serving or have served in the military generally reported lower mental well-being. Although this could be for many reasons (e.g., experiencing separation from multiple parents, living apart from one parent if parents are stationed at different installations), research has severely understudied dual-military families and the need for more research on dual-military families has been consistently noted (Blamey et al., 2019).

Military teens' well-being is impacted by school transitions. Teens who had changed schools more frequently generally reported lower mental well-being. Previous research has consistently shown that frequent school changes can have a negative impact on adolescents by hindering their peer relationships, presenting academic challenges in transferring schools, and missing opportunities for extra-curricular activities (Bradshaw et al., 2010).

Military teens who reported experiencing more deployments or separations lasting three months or longer from a military parent generally reported lower mental well-being. The negative impact of parental deployment and separation has frequently been noted throughout research, particularly for younger children (Card et al., 2011). Although research has identified difficulties adolescents face during parental deployment (Huebner et al., 2007), less research has quantified the impact of these difficulties on adolescents.

Too many of our military teens had thoughts of harming themselves or others. Teens who reported thoughts of harming themselves or someone else also generally reported lower mental well-being. The connection between lower mental well-being and experiencing thoughts of harming self or others has been well-documented (Russell et al., 2020). Recent research has explored various mechanisms that may help explain the connection between mental well-being and thoughts of harm for teens, such as entrapment or feelings of defeat (Russell et al., 2020), but these studies have not been conducted with military-connected adolescents. One study explored mental health-related visits to military treatment facility emergency departments among youth and found that adolescents aged 15–17 accounted for the most mental health-related visits (Navy and Marine Corps Public Health Center, 2019), indicating that adolescents in military families may need support regarding mental well-being.

Surprisingly, some factors were statistically unrelated to mental well-being. Namely, parental rank and having a parent serving in Special Operations were both unrelated to teens' mental well-being. Parental rank has consistently shown an impact on children and teens in military families (Lucier-Greer et al., 2016), which makes the lack of association in the current sample surprising. Additionally, having a parent serving in Special Operations was not associated with mental well-being for this sample of teens. It could be that military families with a service member in Special Operations are resilient in the face of their unique stressors, but more research is needed to understand the unique challenges these families face (e.g., very frequent deployments, more frequent PCS cycles).



Mental Well-Being in Their Own Words:

“The biggest struggle I have experienced as a military teen is the struggle of my mental health.”

Active-duty Army teen (O-3), Age 15, 10th grade

“People don’t understand how growing up I saw my dad more through a computer screen and FaceTime than I did in person. They don’t understand that my dad was gone 300 days of the year. He missed years of Christmas and birthdays and school achievements. And as I grew older that sadness of my dad being gone so much turned into fear that one day instead of my dad walking through the door it would be an officer with a folded flag.”

Active-duty Navy teen (E-7), age 16, 11th grade

Food Insecurity

NMFA’s 2022 data revealed that over half (54%) of teens in the current sample reported being food secure over the past month. According to the USDA, the high food security label means there are no reported indications of food-access problems or limitations.

However, 46% of military teens reported food insecurity according to USDA’s definitions. About 18% of military teens reported experiencing low food security and over a quarter (28%) indicated experiencing very low food security. The USDA uses low food security and very low food security labels. The low food security label means there are reports of reduced quality, variety, or desirability of diet. There is little or no indication of reduced food intake. The very low food security label means there are reports of multiple indications of disrupted eating patterns and reduced food intake.

According to the [USDA’s 2020 Household Food Insecurity Report](#), 89.5% of U.S. households were food secure throughout 2020. About 11% of households experienced food insecurity at least some point during the year, including almost 4% of households (5.1 million households) that had very low food security (USDA, 2021). Because military families may face greater financial constraints compared to civilian families (e.g., relocating frequently, needing childcare during parental deployment or forgoing additional income to stay home with children), it is not surprising that almost half of military teens reported experiencing some level of food insecurity over the past month. Teens with an active-duty parent were fairly similar to the larger sample across experiencing food security and very low food security, with fewer teens experiencing low food security.

Active Duty Teens – Food Insecurity

		Frequency	Percent
VALID	Food Secure	853	64.0
	Low Food Security	231	17.3
	Very Low Food Security	249	18.7
	Total	1333	100.0

Factors Related to Food Insecurity

Food insecurity was (statistically) related to parents' pay grade. Military teens who reported having a service member parent of a lower pay grade (e.g., enlisted rank) generally reported greater food insecurity. As pay grade can be an indicator of socioeconomic status for military families (Blaisure et al., 2012), this finding may reflect having access to money and resources to feed one's family.

Additionally, military teens who reported experiencing more military moves in their life generally reported greater food insecurity. For military families, frequent moves have long hindered military spouses' ability to find steady work, which can impact a family's finances (Burke & Miller, 2018). Further, geographic relocations can be costly and, although the DoD provides financial compensation for such moves, this compensation does not always cover the entire cost of a move, leaving less money available for necessities, such as food (Booth et al., 2007). Moreover, teens who reported changing schools more frequently also reported greater food insecurity.

Military teens who had experienced more deployments or separations from their serving parent lasting at least 3 months also tended to report experiencing greater food insecurity. As previously mentioned, parental deployments have the potential to reduce a family's income (Booth et al., 2007). For example, families may need childcare during deployments as only one parent is available to take care of children during this time. Unfortunately, the costs of childcare are high. Some families may choose to pay for childcare, leaving them with less money than before. Alternatively, military spouses may choose to forgo their employment so that they can stay home with children to avoid the high costs of childcare, thus reducing the overall income of the family. The financial constraints that may be caused by parental deployment are unsurprisingly related to food insecurity.

Interestingly, teens who reported having a parent who served in Special Operations generally reported experiencing less food insecurity. This is somewhat surprising given that service members serving in Special Operations generally experience a greater number of deployments and separations as well as a greater number of military moves compared to service members not serving in Special Operations (Meyers, 2021), thus we would expect that these families would be experiencing food insecurity similarly to the other military teens in this sample. This may indicate that there are other factors at play for these families.

Older teens typically reported experiencing greater food insecurity. These could be related for both military-specific reasons and developmental reasons. As military personnel progress through the ranks, they often find themselves stationed in areas with high costs of living, putting additional financial strain on the family. In a culture where self-sufficiency and resilience are valued, families may rather go without than to challenge the status quo (Blaisure et al., 2012). Related to adolescent development, as teens get older, they may have more awareness of their family's circumstances. Thus, they may have a greater awareness of their family's financial situation compared to younger teens, who may have less awareness of finances in the family.

Finally, teens are often costly to raise within a family, as they may be engaging in extracurricular activities that have associated costs and are beginning to drive (which can increase insurance and gas costs).

Food insecurity may also take a mental toll on youth. Teens in the current sample who reported greater food insecurity tended to be more likely to also report thoughts of harming themselves or others. Multiple studies have linked food insecurity to negative outcomes for adolescents, including depression and suicidal ideation (Ke & Ford-Jones, 2015; McIntyre et al., 2013). Moreover, a recent study showed that as youth experienced increasingly more severe food insecurity, they also were at increasing risk of experiencing suicidal thoughts (Men et al., 2021). Ensuring that military teens have the food they need may be a tangible way of aiding teens in being able to face the unique challenges of military life. Active-duty teens experienced similarly significant connections between greater food insecurity and thoughts of harming themselves or others as compared to the larger sample.

Active Duty Teens - Food Security and Thoughts of Harming Self or Others

		Thoughts of Harming Self or Others
FOOD INSECURITY	Pearson Correlation	.286*
	Sig. (2-tailed)	<.001
	N	1163

** . Correlation is significant at the 0.01 level (2-tailed).

Teens in this sample who reported having a job also generally reported experiencing less food insecurity. As teens get older, holding a job may be a route they choose to pursue for a variety of reasons. Out of the 881 teens who reported having a job currently, 18% (n = 154) of them shared that their reason for having a job was to help with their family’s finances. This may reflect that, for some military families, teens’ decisions to hold a job to aid with family finances may help improve food security for the family.

Having multiple parents who were currently serving or have served was statistically unrelated to food insecurity for the current sample. There is a large gap in research regarding dual-military families, especially dual-military families with an adolescent. Examining how dual-military families’ food insecurity is experienced by the family may be an important direction for future research.

Food Insecurity in Military Teens’ Own Words:

“Military life isn’t “better” than civilian life because everything is “given” to us. People think the military gives us housing and food and all this stuff but what they don’t know or see is how much my dad has to work and how much time he misses with his family on deployments to give us that support and stability. My mom said we can’t get food stamps because the housing that they “give” them puts their income over the limit so they have to budget every check to make sure everything gets paid and we have enough for groceries. People think it’s easier but it’s not, it’s harder.” **Active-duty Army (E-5) adolescent, Age 14, 8th grade**

Future Military Service

The current survey also asked military teens if they planned to serve in the future, and 44% of military teens answered yes, with 19% planning to enlist immediately after high school. When examining only active-duty teens, 34% said they planned to serve in the future, 53% did not plan to serve, and 12% preferred not to answer. A [study published by the DoD](#) in 2021 surveyed over 3,000 teens and young adults (ages 16 - 24) and found only 11% of teenagers plan to serve in the future. The current study’s findings may indicate that military-connected teens may be particularly interested in future service. The study published by the DoD (2020) noted that the number one reason teens cited for not wanting to join the military was the possibility of death or bodily harm (68%), with 62% of the teens and young adults citing the possibility of PTSD or other emotional/psychological issues. Factors related to how teens decide whether to join the military or not may be particularly important regarding recruitment and retention of service members.

Active Duty Teens – Plans to Serve		Frequency	Percent
VALID	No	700	52.5
	Yes	460	34.5
	Total	1160	87.0
MISSING	Prefer not to answer	157	11.8
	System	161	3.0
	Total	1731	00.0
Total		1333	100.0

Teens who planned to serve in the military tended to report greater food insecurity. A study published by the DoD noted that for teens and young adults who were planning to join the military, the most common reason for doing so was related to pay/money (DoD, 2020). It might be that teens see the military as a source of stable income to avoid experiencing food insecurity in their future.

Finally, teens who reported planning to serve in the military reported, on average, greater mental well-being. It is possible that experiencing better mental well-being within a military family could encourage teens to want to enlist for their own career. Because the data were cross-sectional, we cannot draw conclusions about the order of variables (whether mental well-being caused plans to serve or whether plans to serve caused mental well-being). More information is needed to understand what influences teens’ decisions to serve in the military in their future career.

Food Insecurity, Military Parent’s Pay Grade, & Number of PCS

		Parent’s highest rank/pay grade	Number of moves because of parent’s military career
FOOD INSECURITY	Pearson Correlation	-.165**	-.136**
	Sig. (2-tailed)	<.001	<.001
	N	1992	2140

** . Correlation is significant at the 0.01 level (2-tailed).

Future Service in Military Teens’ Own Words:

“I hope my parents support my dream of joining the Army” **Active-duty Army teen, E-9, Age 18, 12th grade**

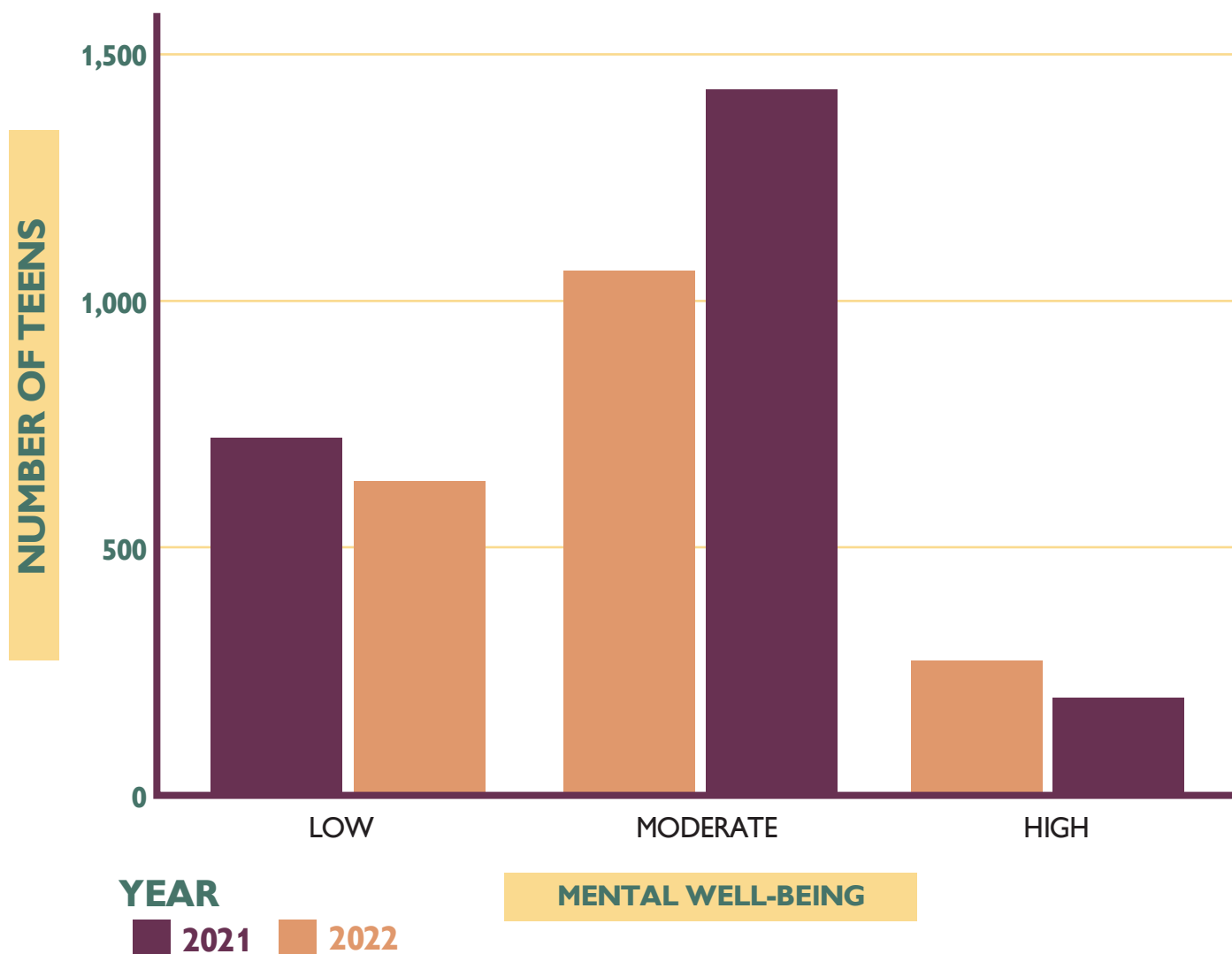
“The hardest thing about being a military teen is pressure to join the military” **Active-duty Navy teen, E-7, Age 17, 12th grade**

Two Snapshots: 2021 and 2022 Teen Data

Looking at two years of teen data, there were differences in food security levels, mental well-being scores, and plans to serve in the future. While we cannot determine causation, a relationship between two events where one event is affected by the other, it is important to examine these snapshots in time to consider and further understand the evolving challenges the military teen community faces. It is also salient to note that each year’s data examined different groups of teens rather than the same group, as would have been done in a longitudinal study.

Mental Well-Being

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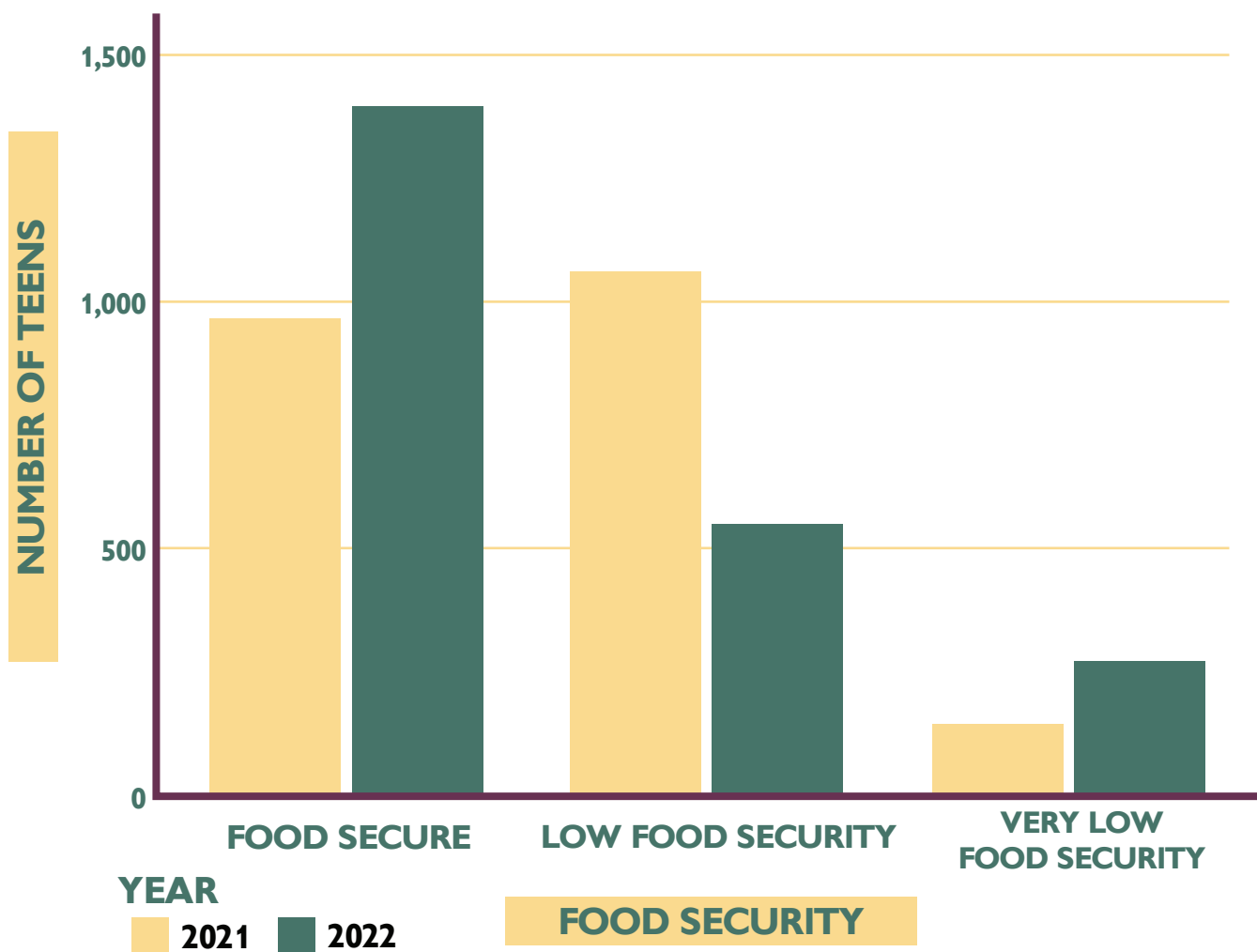


In 2022, the group of military teens respondents who reported moderate mental well-being scores was larger than the teen respondents in the same group in 2021. However, the 2022 military teens also reported lower mental well-being scores than the teens in the previous year’s data set. The number of teens who reported high mental well-being also fell. Some things to consider are the long-lasting impacts of the COVID-19 pandemic and the slow transition from a pandemic to endemic. While K-12 schools and after-school activities slowly transitioned from shut down to normalcy, the teens’ mental well-being could have suffered during this time-period. The stress of COVID-19 has raised concerns regarding family functioning and wellness in vulnerable populations, including the military community (NMFA, 2021). However further research would be necessary to determine causation.

Thoughts of Harm to Self and Others

Starting in 2020, military teens have had to face the difficulties of the COVID-19 pandemic in addition to the unique challenges of military life. The pandemic took a toll on adolescents’ mental health due to isolation, family financial difficulties, and fears and uncertainties regarding their daily life (Imran et al., 2020).

When asked if they had ever had thoughts of harming themselves or others, 28% and 31% of teens said yes in 2021 and 2022, respectively. Although the number of teens with low mental well-being may have decreased, their thoughts of harming themselves or others did not change drastically. While these percentages may not be surprising, they are, nonetheless, concerning, emphasizing the need for increased access to mental health services.



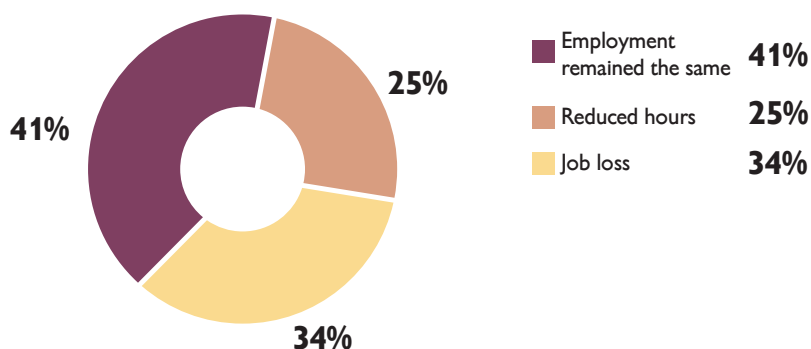
While the group of military teen respondents in 2022 reported experiencing more food security, they also reported experiencing higher levels of very low food insecurity than teen respondents from 2021. Military teens in the low food security level remained the same. While previous research has relied on parents’ reports, adolescents’ experiences are unique, the stigma attached to food insecurity may be felt differently, and adolescents willing and reliable research participants (Dush, 2020). Dush, 2020 asserted adolescents should be included in future food insecurity research, which is what NMFA has done in this study.

Our findings support other military-connected organizations that have reported food insecurity among military families. For example, the Military Family Advisory Network (MFAN, 2021) reported that 20% of military-connected families reported experiencing food insecurity as reported by military-connected adults (e.g., service members, veterans, military spouses). Although our findings show a greater percentage of food insecurity among military families, food insecurity in our sample is reported by military teens. Different family members may have different perspectives on food insecurity within the family. Moreover, parents may feel stigma regarding food insecurity and may tend to under-report their current experiences, particularly when reporting food insecurity experienced by children within the household (Gregory, 2020).

Some additional things to consider are the country’s slow transition from a pandemic to endemic and how quickly military teens were able to access food normally provided in K-12 schools. Some states’ K-12 schools transitioned quickly and efficiently to distribute breakfasts and lunches. Other states transitioned to K-12 food distribution sites more slowly and less effectively. The [USDA reported](#) that 21 states were approved for the Pandemic Electronic Benefit Transfer (P-EBT), part of the U.S. government response to the COVID-19 pandemic. Through P-EBT, eligible school-aged children received temporary emergency nutrition benefits loaded onto EBT cards that were used to purchase food. Children who would have received free or reduced-price meals under the National School Lunch Act were eligible to receive P-EBT benefits. The states that were not approved for this could have had teens with higher instances of food insecurity, especially if those unapproved states had high concentrations of military families.

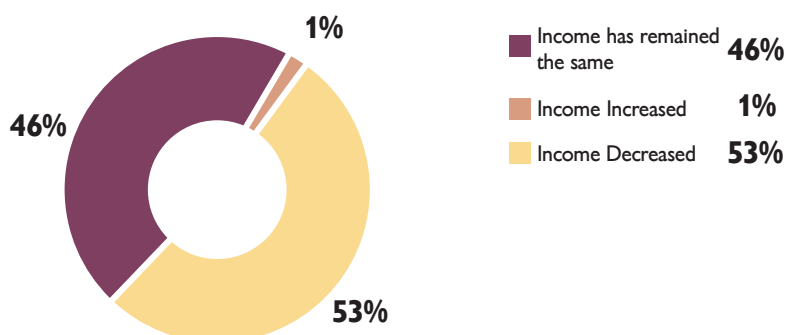
NMFA’s 2021 report, *Military Families During the COVID-19 Pandemic: Lack of Child Care, Military Spouse Unemployment, and Income Loss*, surveyed over 4,000 military families; 59% reported job loss or a reduction of hours during the pandemic, and 53% reported their family income had been reduced. Another consideration is how family income could have impacted military teen food insecurity levels. Again, while this research cannot determine causation, it is important to note that many Americans lost their jobs during the pandemic (Crayne, 2020).

Incidence of Employment Loss During COVID-19 Pandemic

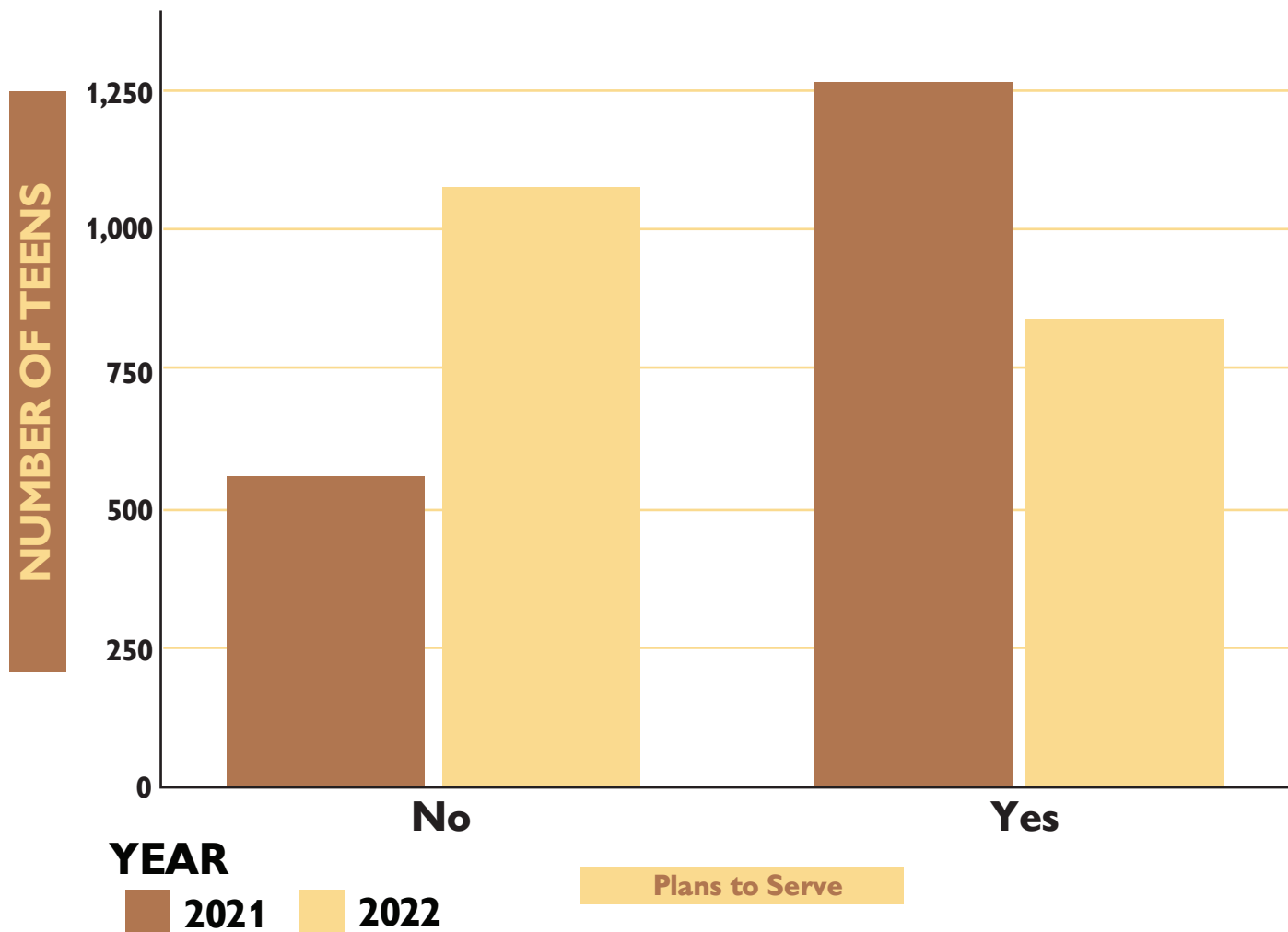


The loss of income for military families due to reduced hours or job loss could be a factor related to military teens’ reported food security levels in both 2021 and 2022.

Incidence of Family Income Loss During COVID-19 Pandemic



Future Plans to Serve



Of the 2021 military teen respondents, 65% indicated they planned to serve in the military. In 2022, the group of military teen respondents were less likely to choose the military as a career path - 44%. While we cannot make inferences about why the 2022 respondents were less inclined to serve, we can examine the intervening geopolitical climate in the United States in between our two years of surveys.

The U.S. military evacuation of Afghanistan brought America's longest war to an end. According to the [Pew Research Center](#) in a poll conducted in August 2021, 54% of U.S. adults said the decision to withdraw troops from Afghanistan was the right one, while 42% said it was wrong. There is notable agreement among both members belonging to both political parties that the U.S. primarily failed to achieve its goals in Afghanistan (Pew Research Center, 2021). It is worth considering that the arguably messy withdrawal from Afghanistan and perceived failure to achieve goals there impacted teens' preemptive plans to serve in the military in the future. While Russia's invasion of Ukraine has also impacted the geopolitical climate, it is important to note that the 2022 MTE survey was fielded before those events unfolded and could not have influenced teens' reported plans to serve in the U.S. military in the future.

Recommendations

Research

NMFA's research on the military teen community can inform the Department of Defense (DoD), Congress, the White House, K-12 schools educating military-connected students, higher education institutions educating military-connected students, Military Service Organizations (MSOs)/ Veteran Service Organizations (VSOs), and other key decision makers in their efforts to support military families. However, further research is needed.

Relatively little is known about the factors that influence teens' plans to join the military. It is possible that exposure to military life (e.g., being part of a military family, having extended family in the military) could influence teens' decisions about being part of the U.S. military. The DoD's propensity report (2021) has shown that 11% of teens planned to serve in the military, but it is unknown whether the teens in the study were civilian or military-connected teens. Our recent reports have found that 65% in 2021 and 44% in 2022 of specifically military-connected teens were planning to serve, which may indicate that exposure to military life is impactful on teens' decisions. Future research could focus on examining teens' exposure to military life to better understand how it influences future service. Additionally, future research may seek to consider the influence of the geopolitical climate on teens' decisions about future service. For example, recent events surrounding the invasion of Ukraine may impact teens' thoughts about plans to serve in the U.S. military.

There is limited research on military adolescent caregivers (Elizabeth Dole Foundation, 2021). Previous research examining military caregivers has focused on the spouse caregiver and found that military caregivers are typically military spouses with children, who are also parents with jobs (either full and/or part-time), and that sometimes even children help care for the wounded, ill, or injured service member (Tanielian et al., 2013). However, military-connected teens who may also shoulder the burdens of caregiving, have not been researched in depth (Elizabeth Dole Foundation, 2021). Even less is known about the long-term impacts of military adolescents serving as secondary and even at times, primary caregivers (Elizabeth Dole Foundation, Wounded Warrior Project, Lilly Endowment, & Mathematica, 2021; Tanielian et al., 2013). While the White House's Joining Forces, Wounded Warrior Project, Elizabeth Dole Foundation, and coalition of organizations, including NMFA, have pledged support for children in military and veteran caregiving families, further research and support are needed for this population (Elizabeth Dole Foundation et al., 2021). Particularly researchers should focus on understanding the unique struggles, particularly pertaining to mental health factors, of military teen caregivers who may carry the burden of caring to varying degrees for their service member family member who has been wounded (either visible or invisible) or injured.

Further research is also needed to examine the unique challenges of military teens in Special Operations Forces (SOF) military families. Particularly, research examining the number and length of deployments military teens in the Special Operations Forces (SOF) community experience and the impact on their subsequent mental well-being are needed. Within the SOF military community, the stigma for seeking mental healthcare is very high which leads operators to typically wait over 13 years on average to seek treatment for non-catastrophic injuries (Searcey, 2016). SOF families experience higher number of deployments, higher number of PCSes, and higher number of school transfers (Conan, 2014; Wood, 2016). Previous research and programmatic efforts for the SOF community have focused on strengthening marriages because stress within a marriage can distract the operator, impact performance, and even lead to mission compromise or lethal mistakes (Wood, 2016). It is also well documented that the high SOF tempo intensifies the demands on the military spouse left at home (Conan, 2012). However, there is a gap in literature in examining the intensified strains on SOF military teens. Further research is needed to examine the same struggles, obstacles, and variables that SOF adolescents experience as SOF military spouses. While the SOF teens may be the minority in the teen community, they undoubtedly experience high levels of many concerning military-connected lifestyle factors.

Timely access to appropriate mental health care is essential. However, we know that military families routinely struggle to access mental health care (DoD: Office of Inspector General, 2020). The Department of Defense (DoD) Inspector General reported in 2020 that DoD consistently failed to meet outpatient mental health access to care standards for service members and their families (DoD Evaluation of Access to Mental Health Care Report, 2020) While the report did not include data on children's and teens' access to care, military families stated it can be very difficult to find a pediatric mental health provider, both on or off installation (Tanielian et al., 2016). Further research is needed to fully understand the struggles that military adolescents and their families face in trying to access mental health services.

Finally, given that 28% of teens reported experiencing low mental well-being, it is important to understand how, when, and why they reached out for help. The largest portion of teens who needed care but did not receive it reported that it was due to not disclosing their concern about their mental or behavioral health to their parents or guardians. Talking about mental health with a parent or guardian can feel uncomfortable and teens may worry about how parents will respond (Becker et al., 2014). Building safety and trust in parent-adolescent relationships could be foundational for ensuring that teens can communicate their needs to the adults in their lives and, thus, receive the mental or behavioral health care they need. Further research is needed on both fronts - both understanding how military teens reach out for mental and behavioral health help, and how communication and relationships with their parents influence that decision to ask for help or not ask for help.

Policy

Mental and Behavioral Healthcare

NMFA is pleased that the Fiscal Year 2021 (FY2021) National Defense Authorization Act included a mental health scheduling pilot to help service members and families access the care they need – an issue for which NMFA has long advocated. That is an important step in the right direction, but more needs to be done. We're calling on Congress and DoD to take the following steps to improve military families' access to care:

- Require Managed Care Support Contractors (MCSCs) to build and maintain robust provider networks. Increase reimbursement rates as needed to encourage more providers to accept TRICARE.
- Update inaccurate and outdated provider directories, which make it difficult for families to identify an appropriate care provider.
- Decrease copays for mental health care. Cost should never be a barrier to a military family member seeking needed mental or behavioral health care.
- Remove barriers, including those related to licensing, that prevent military spouses from entering mental health fields.

Military Family Food Insecurity

Low-income civilian families dealing with food insecurity can turn to the Supplemental Nutrition Assistance Program (SNAP) for assistance. However, those benefits are not available to most military families because their Basic Allowance for Housing (BAH) is counted when determining eligibility. As housing costs continue to outpace BAH, this has put families under increasing strain.

After years of advocating for military families facing food insecurity, NMFA is pleased that Congress and DoD have finally started to recognize that food insecurity affects military families. In November 2021, Secretary of Defense Lloyd Austin directed DoD to create a toolkit to help military commanders recognize signs of financial stress among families and point them to resources.

Even more significantly, the FY22 National Defense Authorization Act included a Basic Needs Allowance (BNA) for low-income military families. This allowance will provide a temporary pay boost to families whose incomes and household sizes place them below 130 percent of federal poverty guidelines. Like SNAP, the BNA will include BAH when determining eligibility. However, the legislation did provide DoD latitude to exclude some or all BAH in "high cost" areas. We're hopeful this new benefit will help some struggling families when it is implemented in January 2023.

The longer-term solution, which NMFA supports, is to revise the rules around SNAP so that BAH is excluded from eligibility calculations. We are urging Congress to make this much-needed change when it reauthorizes the Farm Bill in 2023.

School Transitions

Military dependent children attend on average six to nine different schools before high school graduation. These transitions, which affect about 185,000 military kids annually (DODEA, 2018), can be difficult and military families worry about the effect that the military-directed moves have on their children's education. From transitioning school records, receiving special education and health services, trying out for sports teams, or joining extracurricular activities, these barriers can be daunting.

The Interstate Compact on Educational Opportunity for Military Children (Compact), which has been adopted by all 50 states and the District of Columbia, as well as the Department of Defense Education Activity (DoDEA), addresses many of the most common transition-related challenges. Still, the fact remains public schools are locally controlled – and financed – so policies, resources, and requirements vary from district to district and state to state. With administration and staff turnover, enforcement of the Compact remains a top priority for NMFA. That enforcement is spearheaded by the Military Interstate Children's Compact Commission ([MIC3](#)), on which NMFA serves as an ex-officio member.

In addition to the Compact, advanced and open enrollment will benefit our transitioning military school children. These policies are 2022 priorities for the Defense State Liaison Office (DSLO) and solutions for which NMFA has long advocated. Advanced enrollment allows a child to be enrolled in their receiving school district before the family has a physical address at their new location. This allows a student greater flexibility and a more equal playing field than before to register for classes, begin an Individualized Education Program (IEP), and join extracurriculars, among other activities when attending a new school. Thirty-three states have enacted advanced enrollment policies, six states have introduced bills, and 12 have yet to act. Check [here](#) to see if your state allows advanced enrollment.

Open enrollment is also gaining momentum. This policy is only available in five states and allows a child access to flexible school placement options. These policies vary but NMFA urges schools to adopt the following policies:

- Allow military children to enroll and attend school in an area outside of their temporary lodging/military housing in anticipation of permanently living in a different school district
- Exempting application deadlines and other requirements to accommodate timing of military moves
- Prohibiting home districts from denying release of military student for an inter-district transfer if requested district approves
- Allowing military children to remain in their current school placement for the duration of the school year (or through graduation if in 11th or 12th grade) despite a change of residence.

Our military children are resilient, but they should not be disadvantaged because their parents choose to serve. By enforcing the Compact, and enacting advanced and open enrollment policies, states and districts will help close the education and services gaps for military kids.

Programming

While Family Science researchers, Family Policy experts, and the DoD acknowledge military-connected challenges will always exist for the military teen population, there are programs to support this population. NMFA has designed programming solutions to respond to those challenges.

Following the 2021 study, NMFA has built on our successful models for camps and family programs to create tailored experiences to support teen mental and physical wellness.

Operation Purple Teen Camp

Our Operation Purple Camps have served thousands of teens over the years, so we are adapting our existing program to focus directly on the military teen community. We are revising our curriculum to include structured time for teens to discuss the challenges they face and to build bonds with other teens experiencing similar struggles. We will also be piloting 3 unique teen-exclusive experiences.

- Camp Highlander in California will host a camp serving exclusively young people ages 13 to 17. Here we will have the opportunity to identify programming that best supports peer-to-peer bonding amid exciting camp activities.
- Camp Cullen in Texas will host two camps for us simultaneously, one for our teens ages 13-17, who will engage in a separate course of programming from the ages 7-12 camp occurring in parallel. This camp will inform how we can structure programming that allows teens to focus on their own needs, while also allowing us to serve all young people in a family.
- Camp Southern Ground in Georgia will focus on teens who have previously participated in Operation Purple and will allow us to support holistic development of our teens through a vibrant camp experience complete with opportunities to build knowledge around food and mental health.

Operation Purple Family Experiences

NMFA not only offers opportunities for young people to experience the joy and connection of camps, but also gives military families the opportunity for group respite and recovery. By analyzing research on teens beyond military families, evidence shows that strong communication between teens and their parents increases mental wellbeing.

This year we will offer a pilot experience to alumni that will target that relationship between adult and teen in two overnight experiences (one in Virginia and one in California) that will offer one teen and one adult per household to create memories and strengthen ties. The overnight will include two facilitated workshops in partnership with the American Red Cross, to create peer to peer connections for teens, and enhance peer-to-parent communication. In this way we build stronger scaffolds for teen mental wellness.

Limitations

The results reported herein should be considered in light of some limitations. While there was peer-reviewed, published research on military adolescents and their well-being, there was a lack of previous research conducted on military adolescent food insecurity levels. Hence, relevant studies were limited. This impacted our literature review and subsequently, the theoretical framework we chose to utilize.

This research also has a potential sample bias. NMFA utilized a voluntary response sample, which is a sample made up of volunteers. Compared to a random sample, these types of samples are biased. Due to the volunteer response sample, the study also may not generalize to a larger military teen population. Additionally, year one and year two methodology designs were cross-sectional in nature, so the direction of the effects could not be determined, as cross-sectional studies do not provide definite information about cause-and-effect relationships. This is because such studies offer a snapshot of a single moment in time; they do not necessarily consider what happens before or after that snapshot is taken.

As a non-academic 501c3, NMFA does not have an Institutional Review Board (IRB). We released the survey in partnership with Bloom: Empowering the Military Teen, an organization run by military teens for military teens. Critically, this organization speaks to and recruits military teens. NMFA speaks to and recruits the help of military parents' in asking their teens to take the survey. Bloom gained assent from their military teen peers, NMFA gained consent from the parents of military teens, and the survey posed less than minimum risk to minor children [HHS Section 46.404]. Additionally, included age-appropriate validated instruments (WEMWBS and USDA short form for children ages 12+) and worked with an academic expert who focuses on military adolescent research to provide external review of our survey before dissemination. At the beginning of the MTE survey, an Informed Consent statement was also included to inform participants that their anonymous responses would be used for research purposes. Each question on the survey also included a Prefer Not to Answer (PNA) option, so that military teens were not required to answer any questions that made them feel uncomfortable in any way.

Finally, the primary researcher conducting NMFA's teen-focused research in 2021 and 2022, Dr. Crystal Lewis, is an active-duty military spouse who has active-duty military children. Researchers can hold biased views based on their cultural backgrounds, personal experiences, or perspectives. Dr. Lewis may be biased as a member of the active-duty military community, and it is possible that personal connection to the military community created a data bias. However, the data-gathering process and subsequent analysis in SPSS and NVivo were carried out appropriately. Therefore, the findings from 2021 and 2022 are still reliable and valid despite this possible limitation.

Call to Action

NMFA is the voice of military families. As supporters and members of the Military-and Veteran-connected community, we know the shared bonds of military service can be powerful. However, the military teen community often feels unseen and unheard (Bloom, 2021; NMFA, 2021). Our findings indicate military teens face unique challenges and may need more support than civilian teens in some capacities. Additionally, military teens may not feel a sense of belonging in our military community, despite being vital parts of the military family unit.

What can we all do to help our military teen community? At NMFA, we encourage everyone to listen to and support military teens in your community, and to elevate teen voices whenever possible. How? Below are immediate action items that identify ways in which you can help!

- Download and read our Military Teen Guide [here](#).
- Visit NMFA's website and [donate](#) to our teen programming initiatives.
- If you or any military community member you know are struggling, call 800-342-9647;
- Military OneSource triage specialists will listen to your personal challenges and direct you to the resources that exist, or visit their website [here](#).
- Connect a military teen in your life with Bloom: Empowering the Military Teen's resources [here](#).
- When appropriate, encourage military teens to seek guidance from a mental health professional.

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