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*In-press in the Contemporary Family Therapy*

**Military Marriages: The Aftermath of Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) Deployments**

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**Abstract**

An examination of how members of military marriages were affected by and adapted to OIF/OEF deployment found three themes: communicating to stay connected, emotional and marital intimacy, and managing change. The findings demonstrate the nuanced and subtle nature of deployment-related challenges. While open and frequent communication was important in the adaptation process, communication was not synonymous with transparency. Unshared stories created a void that prevented couples from confiding in and supporting their partners. Although wives maintained their marriages by restraining sexual desires and over-extending their responsibilities post-deployment, these behaviors had a negative effect on marital quality. Clinical and research implications are discussed.

Keywords: Operation Iraqi Freedom, Operation Enduring Freedom, qualitative study, deployment stress, military marriages

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**MILITARY FAMILIES AND STRESS**

Even beyond war and deployment-related separations, military families face numerous life stressors that are inherent in the military culture, and that place families at a higher risk for experiencing a crisis than their civilian counterparts (Black 1993). The challenges experienced by military spouses during deployment can include emotional stressors related to factors such as missing and being concerned for the safety of the service member, deployment-related events such as managing the household budget and confusion over military entitlements, and general life events such as pre-existing marital difficulties (Rosen, Durand and Martin 2000). Experiencing and managing these stressors impact not only individual wellbeing, but the wellbeing of relationships as well, evident in the fact that the increase in treatment of depression, anxiety, and sleep problems by primary care providers is attributable to long deployments and family separation (Mental Health Advisory Team, MHAT 2008). In addition to negotiating the stress experienced throughout the deployment, the stress of a service members' homecoming, although presumed to be a predominantly joyous occasion, can be more stressful than the separation, especially following a long separation or a separation where the service member faced very adverse living conditions (Black 1993).

Returning service members may expect that their family system will remain unchanged in their absence; therefore, any shift in family roles that occurred during the separation must again take place when the family is reunited. In multiple deployment situations, families must undergo this process each time the service member leaves and returns. Commonly, the returning service member enters a household in which the spouse has assumed a more independent and assertive role, and who may be reluctant to return to his or her previous role. The change in roles and boundary ambiguity (Boss 1999) is a universal post-deployment phenomenon that may develop for all the family members (Faber et al. 2008). Service members often can feel as though their families do not understand what they experienced during war and may experience frustration over pressure to assume their former responsibilities.

In addition to the general features of combat deployments, *Operation Iraqi Freedom* (OIF), which began in March 2003, and *Operation Enduring Freedom* (OEF), which began in October 2001, are unique compared to previous combat deployments. Among other features are the increased length of conflicts and frequency of each deployment with brief periods of non-combat between deployments. Such increases often are related to mental health problems and marital problems (MHAT 2006). In addition, many of the stressors in OIF/OEF, including guerilla warfare and terrorist actions such as the use of improvised explosive devices and suicide bombers, are more reminiscent of the Vietnam War than of the 1991 Gulf War or World War II (The Board on Population Health and Public Health Practice 2008). This level of combat has been reported as the most significant determinant of mental health among service members deployed during OIF (MHAT 2006), with more long-term impact on marital relationships remaining to be seen.

It is clear that members of military marriages have to cope with intense pressure and stress, and adapt to the myriad changes related to deployment and reintegration. Understanding the effects of the stressors from deployment as well as how individuals in military marriages cope and adapt to these stressors is vital in order to better serve the needs of our military families. Empirical studies that have explored the effects of OIF/OEF deployments on military couples have focused primarily on domestic violence and relationship satisfaction (e.g., Nelson Goff et al. 2007). Recognizing that there is still much to be learned about the impact of deployment on marriages, and to extend the current studies beyond pathologizing military marriages, we explored the adaptive processes of military marriage by utilizing two couple adaptation models to better understand the processes that couples go through as they adapt to this range of stressors. We further utilized a qualitative means of enquiry to capture the essence of the lived experience of members of military couples that had experienced OIE/OEF deployment/s.

### **COMBAT DEPLOYMENTS AND ADAPTATION MODELS**

The vulnerability-stress-adaptation (VSA) model of marital dysfunction (Karney and Bradbury 1995) provides a framework to understand how couples adapt to stresses. The VSA model regards marital quality as a function of preexisting vulnerabilities that individuals bring to their marriage, such as personality traits (e.g., neuroticism) and experiences (e.g., parental divorce), both of which are relatively stable, and stressful events that occur by chance or are circumstantial. The interactions -- negative and positive -- between the spouses that evolve as they respond to these stressful events are the (mal)adaptive processes that can impact relational satisfaction and stability. Thus, according to this model, given that a couple's level of enduring vulnerabilities is expected to remain relatively stable, any change in the couple's stress over the course of their marriage should then predict their marital satisfaction and stability.

In the case of military marriages with ineffective adaptive processes, deployment-related stress could lead to a decline in marital quality and/or stability. This process is illustrated in Taft et al.'s (2007) study of combat veterans in which veterans with ineffective management of trait anger and who experienced PTSD symptoms reported high incidence of partner abuse. In a similar vein, former prisoners of war with PTSD symptoms were more likely to experience reduced marital adjustment if they also experienced loneliness (Solomon and Dekel 2008). Marriages with effective adaptive processes, on the other hand, might experience a temporary decline in marital satisfaction but will more likely remain stable in the long term. In other words, how members of military marriages experience and cope with deployment-related stress will in many ways reflect their level of vulnerability to (in)effective adaptive processes.

Similar to the VSA model, the couple adaptation to traumatic stress (CATS) model (Nelson Goff and Smith 2005) provides a systemic description of how individual and couple systems are affected by traumatic stress. The model proposes that the adaptation to traumatic stress in couples is influenced by the interaction of individual level of functioning (e.g., emotionally-related traumatic symptoms), predisposing factors (e.g., childhood trauma) and resources (e.g., positive self-esteem), and couple functioning (e.g., difficulties with intimacy). Conversely, the marriage could be a resource for healing for the primary trauma survivor whereby the traumatic experience could strengthen the bond within the marriage, resulting in growth and increased resilience in the couple. Outcomes of traumatic symptoms can be positive or negative although the precise process of trauma transmission is unclear. Although positive outcomes of deployment-related stress has not been studied in couples, Pietrzak and colleagues (2010) found an increase in posttraumatic growth among OEF/OIF veterans exposed to combat and who had PTSD symptoms.

While studies suggest that trauma from combat can have devastating effects on couples' relationships, researchers have not examined the ability of members of military couples to cope with the negative impact of war trauma. Studies have recognized the resilient nature of combat veterans but the resilient nature of the couple has not been explored. Based on the idea that exposure to OIF/OEF deployment can both weaken and strengthen the marital relationship we set out to better understand the adaptation processes of military couples. We utilized a non-clinical community sample and focused on the lived experiences of how participants themselves viewed the impact of

deployments on their marriage and how they adapted to the stress of deployment. The theoretical frameworks and the literature described above informed our central guiding research questions: How have experiences of deployment and re-integration following deployment to OIF/OEF affected members of military marriages? How do members of military marriages adapt to OIF/OEF deployment?

### RESEARCH METHOD

A qualitative phenomenological inquiry was used to obtain an in-depth understanding of the reality that military families had constructed from their deployment experiences, and to expose the core of the phenomena of deployment through an exchange of dialogue between the researchers and the participants. Such an approach facilitates the process of “understanding the world from the subjects' point of view, to unfold meaning of peoples' experiences” (Kvale 1996, pp. 1-2). It further allows us to understand the phenomenon as it was experienced and describe the human experience of the persons involved allowing the essence of the experience to emerge.

#### Procedure

This study was conducted by members of the *Trauma Research, Education, and Consultation Team (TRECK)* at [SPECIFIC UNIVERSITY NAME]. The members, consisting of the faculty primary investigator (PI), a qualitative methodologist (QM), doctoral and master's-level graduate students, and undergraduate students, were divided into two research teams. Each team was involved in one or more of the phases of the study from data collection to reporting.

The study was conducted in two small cities in the Midwest that neighbor two Army posts, Fort Riley, Kansas, and Fort Leavenworth, Kansas. Fort Riley includes more than 18,458 active duty service members and 9,536 family members, housing several combat units (Fort Riley Garrison 2009). Fort Leavenworth is primarily a training facility for majors and lieutenant colonels representing all branches of the military, with approximately 3,520 service members and 4,422 family members (Fort Leavenworth Public Affairs Office 2010).

#### Data Collection

The participants were recruited from within the local communities through a variety of methods, including publicly posted flyers and newspaper announcements; referral from Army Family Readiness Groups (FRGs), chaplains, and other local military sources; and referral by other research participants. Participants were recruited from communities and non-mental health related agencies as the focus was not on areas of clinical concern like many previous studies. Our goal was to develop a better understanding of how participants themselves viewed the impact of deployments on their marriage, and how they may have adapted to the stress of deployment. The sample consisted of service members who were active duty males, most of whom served in OIF, with a mix of enlisted personnel and officers. Although we attempted to recruit participants from Guard and Reserve units as well as female service members through newspaper advertisements and direct contacts, there were very few Guard/Reserve service members and no female service members who elected to participate. The sampling method was both purposive and convenience, in that OIF/OEF deployment was a criterion for participation and participation was voluntary. Other inclusion criteria included: 18 years of age or older, in their current marriage for at least one year, and denied current substance abuse or domestic violence during an initial telephone screening. The research procedure was approved by the university's Institutional Review Board.

Given the sensitive nature of the topic, separate interviews were conducted with each participant to provide the opportunity to share freely his or her unique experiences and perspectives. Data from 50 couples were collected. The face-to-face interviews were conducted at the university's Family Center. Each interview was audio-recorded and transcribed verbatim. The semi-structured interview was guided by 30 open-ended questions that focused on the deployment experience, intra- and inter-personal effects of trauma experiences, and dyadic functioning. Each interview took between 45 to 90 minutes to complete. Examples of questions include: *How is your marriage most affected by your (or your spouse's) deployment? How do issues related to your (or your spouse's) deployment arise in your marriage? Has your spouse ever experienced any traumatic events? How are you (or your spouse) most affected by his/her past trauma experiences?*

The interviewers completed memos after each interview and used them to triangulate the interpretations of their findings with each other before proceeding with their next interview. This method of triangulating the perspectives of multiple investigators through a process of verification enhanced the trustworthiness of the study (Lincoln and Guba 1985). This method of investigator triangulation, helping to reduce the potential bias that comes with using a single investigator, also was used when performing the analysis of the interview transcripts.

The analysis began after all interviews were completed, by selecting a transcript of either a husband or a wife in the same marriage. When selecting transcripts to analyze, longer transcripts were favored to ensure sufficient depth in the data. Because saturation of data was met after analyzing 30 transcripts, each representing a different marital relationship, we did not analyze data collected beyond these 30 transcripts. We ended up analyzing more

data from spouses as more service members' interviews were brief and did not provide an in-depth account of their deployment experience as needed.

### **Participants**

The 30 participants included in this study consisted of 12 male service members and 18 female spouses. All participants were married to their spouse at the time of the interview, with the average length of marriage being 5.29 years ( $SD = 4.22$ , range = 11 months to 15 years). The ages of participants ranged from 22 to 35 years ( $M = 29.33$ ,  $SD = 4.47$ ) for females, and from 20 to 36 ( $M = 29.92$ ,  $SD = 5.23$ ) for males. Sixteen of the female and nine of the male participants were of European American descent. One female identified as American Indian/Alaska Native and one as 'other.' Two males identified as African American and one as Mexican American. The overall range of deployment length was 3.5 to 13.5 months ( $M = 11.42$ ,  $SD = 2.57$ ). All service members had experienced only one OIF or OEF deployment.

Participants' level of posttraumatic stress was measured using the Purdue Post-Traumatic Stress Disorder Scale-Revised (PPTSD-R; Lauterbach and Vrana 1996). Each of the 17 scale items corresponds to one of the DSM-IV-R PTSD symptoms. Participants indicated the frequency of occurrence of each symptom on a 1 "Not at all" to 5 "Often" scale. Scores range from 17 to 85, with higher scores indicating higher incidences of trauma. The average scores for participants in this study was 35.83 ( $SD = 15.53$ ) for service members and 34.23 ( $SD = 17.85$ ) for spouses, indicating that overall, participants were minimally vulnerable to posttraumatic stress.

### **Researchers' Bias**

Of the seven individuals involved in the analysis of data, only one had direct familial connections with the military. At the time of this study, she was newly married to a non-deployed military personnel. Openly disclosing her connections with the military and sharing and owning her reactions with her research team members as she analyzed the data helped reduce potential partiality. The use of multiple analysts further helped to ensure impartiality as explained in the following section.

### **Data Explication/Analysis**

The goal of the analysis was to identify and describe patterns and relationships both within and across participants. The interpretative phenomenological analysis (IPA) method developed and described by Smith and Osborn (2003) was utilized for this purpose. IPA captures the complexity of the phenomenon under investigation through a close and fine-grained examination of individual accounts and the meanings produced within those accounts. IPA is concerned with the subjective conscious experiences of individuals – the insider's perspective. Investigating how events and objects are experienced and given meaning requires interpretative activity on the part of the participants as well as the researchers, a process known as "double hermeneutic" in which "the participants are trying to make sense of their world and the researcher is trying to make sense of the participants trying to make sense of their world" (Smith and Osborn 2003, p. 51).

The analysis was guided by the interview questions, the vulnerable-stress-adaptation framework, the couple adaptation to traumatic stress model, and participants' stories. Analysis involved multiple readings of the transcripts and discussion with research team members. Two research teams, each with three members were involved in the analysis. A doctoral-level graduate student in each team acted as the team leader. The teams met separately for 1 to 1.5 hours 1 to 2 times per week over a four-month period. The triangulation or convergence of several perspectives from multiple coders enhanced the trustworthiness of the data interpretations (Lincoln and Guba 1985). Triangulation ensures that important ideas are not missed and that there is some consistency to how data analysis is linked to the findings.

Prior to beginning the analysis, a training of research team members was conducted by the QM. After the training, team members independently read and hand-coded transcripts in turn, by interpreting and coding the meaning they deduced from each line in the transcript. At the research team meetings, team members shared their interpretations and codes, and based on the shared understanding of the data developed a list of codes. The use of multiple coders with multiple perspectives helped ensure that personal bias was kept in check. It further allowed peer verification that enhanced the credibility of the coding. When different opinions were shared, team members returned to the transcripts together and re-read the relevant transcript to clarify and come to a shared understanding of the essence of the message. The process of verification and re-considering the context within which the information was shared proved to be efficient and effective in dealing with any disagreement that arose. Similar codes were then grouped together into broader concepts or themes that captured the essence of participants' stories. These themes were then grouped together into superordinate themes for higher order levels of meaning. Once the entire transcript was coded a memo that summarized and organized emergent themes and listed contextual information of the participant was drawn and triangulated with subsequent transcripts analyzed. This process of constantly comparing the data increased the credibility and trustworthiness of the findings. Confirmability was

further ensured by keeping an audit trail of the themes so as to enable tracing the theme back to the data (Lincoln and Guba 1985).

The team leaders and the QM met regularly to coordinate communication with team members and to verify that the analysis presented had been systematically achieved and was supported by the data. This process continued until saturation of data was met, that is, no new themes emerged from the data and themes became repetitive. At this point, each team had coded a total of 15 transcripts. In the final stage of data analysis, the QM and team leaders reviewed and triangulated the themes, transcript memos, and verbatim evidence from the original transcripts to identify the overall emergent themes that captured the essence of the participants' phenomenological experience. The findings presented below represent concepts and themes that were present across multiple participants.

### FINDINGS

Three themes emerged from the data analysis: communicating to stay connected, emotional and marital intimacy, and managing changes. Communicating to stay connected was the strongest theme. Much of what members of military marriages described related back to this theme. The themes capture the essence of how participants were affected by OIF/OEF deployments. Although the themes are illustrated as independent of each other, they were in fact interconnected. Stress related to deployment stirred up new and old emotions that affected participants' levels of intimacy. When emotional reactions that had the potential to hurt marital relationships were allowed to fester and were not discussed, participants experienced reduced emotional and physical intimacy and elevated stress. Members of military marriages who coped well with stress and adapted well to the demands of deployment appeared to also communicate effectively. For them, the by-product of deployment was a closer and stronger union that was reflected in their increased appreciation for their spouses and life in general.

#### **Communicating to Stay Connected**

The importance of staying connected was expressed by both male and female participants. Being in contact with their spouses throughout the duration of the deployment provided relief and support, helped build trust, and provided the opportunity to express the need for their spouses. The expression of need and feeling supported, in turn, helped participants develop a deeper appreciation for their spouses and for their relationships.

Participants spoke of how important it was for them to keep each other up-to-date with events of the day. This was true even for female participants who at times did not sense that their service members truly understood them. These participants who knew that their service members were withholding information and shared little about events in the combat zone still expressed the importance of staying connected as a couple. It appears that the value derived from communicating with service members was experienced more in terms of increased connection than in simply exchanging news.

Deployed male participants, on the other hand, acknowledged that they were selective in what they shared with their wives. Reasons given included the need to maintain confidentiality of high security information, for personal privacy, the fear that their wives might not fully understand, and the desire to prevent their wives from worrying. The need to protect their wives from their combat experiences was the most frequently cited reason for withholding information as described by one male participant: "I...went crazy at that point...there was a lot of trauma going on in my own mind *because I didn't want to tell her...* about the kid's brains I was holding in my hands just an hour before calling her."

Despite efforts to protect their wives from information that they deemed harsh or gory, many male participants eventually disclosed information about their combat experience after they returned from deployment. Many chose to share their more difficult experiences in the confines of their homes where they felt safe and could ensure that their wives were prepared to receive the information. Most male participants spoke of how it was helpful to be able to share openly with their wives post-deployment. In addition, they found themselves listening more closely and attentively to their wives. Being present to listen and connect in an intimate way with their wives was particularly poignant.

Although there was an overall shared understanding of the need for service members to be selective in disclosing war-related information, some female participants reported that the censorship of information made it difficult for them to know how to fully support their service members, as described by one participant:

While he was there, like he wouldn't tell me anything so it was hard for me to support him emotionally. So [I] just let him know that everyone was safe and that we were still here for him. It made him feel secure about the home fronts. But he didn't ever mention stuff that was going on over there.

Despite the occasional dissatisfaction with what was not disclosed, communicating with their service members was cited as the primary adaptation that helped female participants manage the anxiety and stress brought on by deployment. Fears of injury to their service members and to their battalion were cited as the main factors that provoked anxiety in female participants when communication ceased. The deliberate effort to stay connected on a regular basis, whether by electronic mail, telecommunication, instant messaging, or by sending care packages to

their service members, demonstrated the extent to which female participants valued and needed to maintain couple connection. It was a way for female participants to know that their service members were alive and well.

The importance of maintaining connections through frequent communication was evident not only in affirmative cases, that is where male and female participants talked about the positive impact on connection through frequent or close communication, but it was also evident in disconfirming cases. Where members of couples felt that their communication was constrained, either through fears of calls being tapped, through gaps in technology that made communication difficult, or through more dissatisfaction with the selective censoring of information, they spoke of fewer feelings of connection and less satisfaction with their relationship in general. One female participant described this link between challenges in her communication with her service member during deployment and continued struggles with connection in this way: "...communication trouble, it's gotten worse since um things with the army, I think partially because there's things he can't talk about, and it's just kind of carried over a lot more, so we really don't talk about much of anything."

### **Emotional and Marital Intimacy**

The increased emotions that members of military couples experienced in relation to deployment also had an impact on their experiences of feeling more or less connected to their spouse. For some female participants, the fear of losing their service members and the increased connection in their relationship helped strengthen the couples' bond. Although not all female participants experienced increased feelings of connection in their marriages, most agreed that deployment increased their level of appreciation for their families and life overall. This was expressed by one participant as follows:

We've learned to cherish, cherish each other more, and to love our life together. I mean, at any moment it could be gone. You know, especially while he's over there. It was [daughter's name] and I here, and him gone. You know, the fear lies within, so when he's home, and you know he's home, it just makes everything ten times better. You really do. I mean, no matter how much you fight, um, or disagree on any subject, the fact that he's home and you are safe and you're happy, overcomes all that.

Male participants shared similar sentiments as they reported that the distance from their wives made them value the time that they did have together once they were home. One male participant said, "You know, with being deployed before, as quick as it did, and knowing it could happen again... It kind of just makes us just appreciate the time we have together more." For many male participants, this increased emotional intimacy also led to increased commitment to their spouses and to their marriages, and being more confident of the couples' future together. Overall, being more protective and affectionate toward their wives post-deployment was a recurring theme for male participants.

Female participants further reported taking advantage of the time they had together by making "every moment count." This was especially true for those who viewed deployment as causing them to lose "together time" as described by one participant:

It [deployment] was a detriment totally to our relationship and a setback. And in fact... we feel like we're just now starting our marriage, because he just now gets to be in a [specific assignment]. So we've been living the past three years going, 'Okay when you get back we'll get to do this, or we'll get to do this,' and it's like it never happens, we never even got the chance to be a couple.

However, for participants for whom deployment was traumatic, their stories were fraught with pain and disengagement from their partners. Female participants noticed an overall elevation of emotional reactivity on the part of their service members post-deployment, while male participants spoke of how deployment was reminiscent of previous traumatic experiences and recognized that deployment triggered and exacerbated existing mental health issues. There was elevated fear, anger, hyper-vigilance and pre-existing symptoms of mood and anxiety disorders among male participants. Furthermore, these participants reported increased physiological arousal following deployment. Past emotions would be stirred when they heard or saw something that was reminiscent of being in a war zone. Described one male participant:

I've had one major flashback since we came back and that was when, you know, when the [tornado] alarm goes off here... when that happened and I was like jumped up and I was looking left and looking right. My heart probably went up to about 150 at that moment and I was like... I just started crying like that.

The experiences of re-traumatization appeared to prevent male participants from being able to relax and resume normal daily activities. These participants also reported that they felt angrier and that they had lost their tempers more often since returning.

Some female participants noticed that their service members were more short-tempered or angrier post-deployment. This led participants to be more careful when around their service members -- for fear of startling him. One participant described the changes in her service members, "He's changed a lot... from when he used to be kind of loving and caring and... nothing really bothered him and now... certain things will just aggravate the fire out of

him and cause him to get aggravated and angry..." Although none of the female participants reported that their service members had been physically abusive, some stated that they were scared or fearful when their service member would raise his voice at them or the children.

Increased anxiety was not reserved only for the male participants. Female participants experienced their share of anxiety. These participants described how they feared for their service members' well-being, and particularly feared that communication from their service members would cease during the deployment. When communication halted even briefly, participants shared that this increased their stress and worry -- that their service member might be hurt, wounded or dead. In fact, female participants experienced increased anxieties even prior to their service members' deployment. One participant described how the sight of her service members bags piled up in preparation for deployment was too much for her:

He was getting all of his stuff together and as soon as I saw his stuff across the living room, my stomach was in knots and I was just a nervous wreck. It's just like every time I see this, this means you leave, and it's like the world is turned upside down.

Besides the fear of possibly losing their service members in combat, female participants' anxieties were multiplied if their service members had a history of being unfaithful in their marriages. For these participants, past experiences with infidelity compounded by the distance their service members during deployment led to reduced trust in their service member that, in turn, hurt their sex life. Noted one participant, "I'd say the sex life stuff [poor sex life] has to do with the infidelity, which a lot of times has to do with being away, you know 'cause he's usually not at home when he's doing it [being unfaithful]." The physical separation of the couple brought fear to this participant, who recalled being betrayed by her service member. Though she embraced the return of her service member, she was apprehensive and maintained an arms' length distance for fear of another possible betrayal.

Emotional experiences had an impact on sexual intimacy as well, as members of couples that reported reduced sexual intimacy spoke of having reduced sexual desire. They described how having different sexual needs was stressful on their marriages and that re-engaging sexually was challenging after having had to "turn off" sexually during the deployment. One male participant described how his lack of sexual desire disturbed him as he had no intention of hurting his wife:

I'm kinda numb to that [sex], too. Uh, I, I love my wife and I think she's the most beautiful woman on the planet but I just have had no interest in her since I got back. I know that really hurts her...that really bothers my wife and it bothers me 'cause I don't understand why and I wish, I wish it wasn't that way. And I wish I wouldn't hurt her like that.

Female participants too had turned off sexually, as one participant shared:

...you have to shut your feelings off when he's gone because there is nothing there, nothing there, and then of a sudden I'd feel touchy feely and all the sudden you've shut yourself down to all that emotion and feeling and I don't know, it's hard to bring it back up...if you don't shut it down then you're probably cheating or something...it's hard to turn it on and off...it's like feelings get hard.

Thus, the deployment experience evoked myriad emotions for members of military couples. Although these emotional experiences may have led to increased emotional intimacy, they did not always translate to being physically or sexually closer. For most participants, work and conscientious effort to reconnect sexually was necessary. For some, issues pertaining to trust and the lack of sexual desire as well as symptoms of post-traumatic stress and similar mental health symptoms affected intimacy and created more distance. For others, increased quality in communication, efforts to stay connected, and expressions of appreciation led to increased intimacy and closeness.

### **Managing Changes**

Members of these military couples worked hard at maintaining a consistent level of communication during deployment. While they were for the most part rather successful at doing so, they had little control over other changes that were inevitable. In response to these changes, they had to take on new roles and responsibilities or swap roles with their spouses. Female participants had to find the strength and resources to assume new roles and responsibilities, while their service members let go of roles and responsibilities at home in order to manage their roles and responsibilities related to deployment. The changes in roles and responsibilities often extended beyond deployment and continued after the service members returned from deployment, resulting in some tension in relationships as the couple worked to adjust to these changes.

Female participants with children appeared to have the biggest adjustment, going from having a co-parent to becoming "like a single parent" during the deployment. The additional task of managing household finances and relationships with extended families led many female participants to discover their capabilities and develop their self-confidence as expressed by one participant: "I remember I had to like grow and be independent and not be dependent on him...and that was really hard...I think it did, it made me more self-efficient and not reliant." The



increased independence gained by female participants during deployment often made the readjustment to post-deployment challenging. While service members expected things at home to return to what they were prior to deployment, female participants were often unsure and reluctant to relinquish their new roles and responsibilities. Some female participants did not want to bother with the inconvenience of having to readjust if their service members got deployed again in the future, and others became comfortable with their new roles and responsibilities and did not see a reason to change, as described by one participant:

Another big thing is, you get so used to [independence], and you realize, 'Okay well, I don't need him. I can do this on my own.' And that's been really hard. 'Cause they come back thinking that we need them...And yeah, we realize that we don't need them. And so it's hard for that adjustment, also.

Another participant described this adjustment to new roles and responsibilities as the hardest part, as she continued to do many of the same things that she had done during the deployment, but integrating the service member back into the routine proved difficult:

I would say that's been the most difficult part, I mean, I handled anything anyway....I did all the finances, [daughter's name] and I had a routine....we'd wake up at a certain time, we'd do this, we'd do that. She had her television time, when he came home, you know, I still did the finances, but mine and [daughter's name]'s routine got thrown...into bits.

Members of some couples were better able to make this adjustment. One participant expressed gratitude to his wife for being considerate and allowing him to take the time he needed to ease back into the routine of civilian life, demonstrating this ability of some to find a balance and adjust to the changes in roles and responsibilities successfully:

...she let me slowly get back into rotation or swing of things. The Chaplain services did a um briefing of all the spouses prior to us coming home. And the guy told her straight, told all the wives straight up, 'Look if you are mowing the lawn because he hasn't been here, keep mowing the lawn...he'll, he'll take over when he's ready to take over. Give him time to adjust and give him time to settle.' And she was normally you know she's pretty good about giving me time to settle um but then again that "Honey-Do list" is always a mile long so...

As members of military couples pondered on what helped them cope with the changes brought about by deployment, some attributed their strength to their faith -- faith in the military as well as their spiritual faith. When things at home or in a war zone were difficult, they reminded themselves and their spouses of the importance of the military's mission, and the positive outcomes that they hoped would occur as a result of the war. They recognized that coping became more difficult when they had lost their belief in the military's mission; this was especially true for female participants. One participant spoke of how she had to constantly remind herself of the military's mission to help her cope with the ambiguity and anxiety that she felt:

I think it's also very necessary. Um, I understand the need for what's going on over there. He signed up for that job, and that's his responsibility, and I knew that before I married him. And while I don't like him being gone, and I miss him terribly, I understand. And I do think that deployment was very necessary right now, for what's going on in the world.

Another participant reported that it was helpful to not blame her service member for his deployment but to see the entire picture and understand the context.

Prayer and other activities of faith also helped come members of military couples cope during deployment. For example, one male participant reported, "The most beneficial [coping strategy] is our, our mutual faith in our God...We don't believe in anything that is accidental, but we believe in divine providence." In addition to relying on religious faith, female participants agreed that their religious/spiritual beliefs were strengthened as a result of the deployment.

Members of military couples thus faced myriad challenges and changes when they were called to serve during OEF/OEF deployment, particularly around changes in roles and responsibilities. These challenges did not abate upon the return of the service member but continued or were exacerbated post-deployment. Yet, through their abilities to maintain connected via frequent or close communication, their adaptations to the heightened emotions during the deployment, and their spiritual faith and faith in the military, many displayed resiliency and resourcefulness in finding ways to manage these challenges successfully. Those who were unable to maintain connections through communication or who struggled more with the heightened emotions during or after deployment, had a more difficult time adjusting to the changes that deployment brought them.

### DISCUSSION

A phenomenological exploration of how members of military marriages were affected by and adapted to OIF/OEF deployment highlights the adaptive processes used to manage deployment-related stress and maintain marriages. The vulnerability-stress-adaptation model (Karney and Bradbury 1995) frames the interplay of

personal/couple vulnerabilities and the stress from deployment as leading to processes that are (mal)adaptive and that impact marital quality. Of the range of adaptive processes, maintaining satisfactory emotional intimacy levels by keeping in constant contact during deployment was particularly important for couples. Interactions that led to increased frequency of shared dialogue as well as more meaningful dialogue was reassuring for military wives, and increased marital bonding. The inability to fully disclose and confide in their wives in real-time however, prevented service members from receiving much needed support. Many adapted their communication in order to protect their wives and that meant being open to listening and being present yet restrained. Although the mutual sharing of information served the important need for security, that need was never expressed overtly even if it meant sacrificing marital quality. Overall, members of the military struggled to strike a balance between how much to disclose and how much disclosure to expect from their partners. The finding that communication problems lead to emotional stress is consistent with previous findings (Rosen et al. 2000).

Although in general the participants included in this study had low PTSD symptoms, as indicated by their PPTSD-R scores, one service member spoke of having some PTSD symptoms. For this service member, adapting to couple life post-deployment was a challenge. His vulnerability to stress impacted his ability to re-connect emotionally with his wife. Those with histories of vulnerabilities such as infidelity in their marriage or poor communication had similar difficulties re-connecting post-deployment. The extent to which members of military marriages could acknowledge receive their need for comfort, receive information, and help within their marriages clearly impacted the overall quality of couple functioning, including intimacy, communication, satisfaction, and adaptability (Nelson Goff and Smith 2005). Those who were able to seek out and rely on their marital partner to help cope with and adapt to the stress brought on by deployment were more likely to report enjoying more closeness and intimacy in their marriage.

Interestingly, some adapted to their separation by turning off sexually in order to protect their marriages. For members of these couples, reconnecting sexually post-deployment was a challenge. The lack of physical intimacy was seldom addressed in the couple relationship but rather left to brew and to negatively impact desires for connection. Sexual intimacy problems reported post-OIF/OEF deployment is consistent with previous studies (e.g., Nelson Goff et al., 2007) indicating that veterans with PTSD reported sexual intimacy problems. Thus, intimacy issues may be particularly impacted by war-deployment regardless of PTSD symptoms, requiring further research with the current generation of service members and their life partners.

Boundary ambiguity (Boss 1999) was another (mal)adaptive process that challenged couples' reintegration post-deployment. Although wives could have transferred roles and responsibilities back to service members post-deployment, not all did, noting the desire to avoid the need to readjust again should a future deployment occur – a practical level ambiguity (Huebner et al., 2007). Wives, for the most part, had little choice but to learn to be self-reliant and perform all the household duties single-handedly while their service members were deployed. While this change allowed wives to discover their inherent strength and skills, for many, their newfound independence made it difficult for them to return to being dependent on their service members. Overall, members of military marriages appeared to be uncertain of what the new rules were post-deployment, and many managed the stress of reintegration by suppressing their personal needs. Such work-family conflict among military families has been noted to be particularly pronounced when the military families are unable to successfully manage role restructuring through accommodating and negotiating the resources and demands placed on them (Hammer et al. 2006). Those who were able to reintegrate well were those who were prepared for changes in household roles and responsibilities that might or might not include reverting back to their pre-deployment structure. In one case, the service member was appreciative that his wife allowed him to ease back into civilian life while she continued taking charge of the household.

Another adaptive process that helped some members of military marriages manage deployment stress was their faith in the mission of the military and their spiritual faith. Reminding themselves of the overall mission of the military and the good that could come out of the OIF/OEF deployments especially helped wives cope with the uncertainties and anxieties of deployment. Those who found strength in their spiritual faith to get through deployment grew in their faith, which helped maintain their marriages.

The findings from this study demonstrate the nuanced and subtle nature of deployment-related challenges within military marriages. Wives had to cope with knowing that they would probably never fully know the extent of their service members' experience during deployment. This meant that these service members were silenced. The unshared stories created a void that prevented these members of military marriages from fully confiding in and supporting their partners. Other sacrifices that helped maintain their marriages, negatively impacted marital quality, included restraining sexual desires, and for wives, over-extending their roles and responsibilities post-deployment. These sacrifices appeared to be initiated without consultation between partners. While open and frequent communication was important in the adaptation process of these members of military marriages, communication

was not synonymous with being transparent. Focusing on the overall mission of the military to help get through the deployment was adaptive and effective and allowed them to temporarily avoid dealing with their unmet needs within their marriages.

### **Limitations**

There were several limitations to this study. The participants were predominantly White, all the service members were male, all the participants were young (average age of 29 years and married for an average of 5 years), and had only experienced one deployment. In addition, it is unknown if the participants had pre-existing disorders as a result of their war-trauma or other experiences. Although the average PTSD symptom scores of the service members were 35.83 (ranged from 18-52), much of what was described in the emotional reactivity theme appeared to be post-traumatic stress symptoms, even if they were not at a diagnosable level. Our purpose was not to recruit only service members with PTSD, but service members who had been exposed to war-related trauma, to provide a broad description of the impact of exposure to war trauma. In addition, it should be noted that all the service members had only been deployed to Iraq or Afghanistan once. Future research is needed to assess the adaptation and stressors of service members and their families that face multiple, prolonged deployments and in an era of mixed societal support for these wars.

Limitations also may have resulted from conducting separate individual interviews with both spouses, as joint interviews may have provided more systemic information about couple functioning and interactions. Finally, the study provided data on a limited number of predominately active duty service members and their spouses recruited from two military installations that were selected due to geographic convenience. As a result, the service members in this study may not be a representative sample of a broader military population. Caution should be used in transferring these findings to other military couples.

### **IMPLICATIONS FOR CLINICAL SERVICES FOR MILITARY MARRIAGES FACING DEPLOYMENT**

There is much for therapists to learn from the adaptation processes described by participants in the current study, as findings demonstrated that marriages inherently have the ability to manage and adapt to deployment stressors. The key themes described here may be particularly important to recognize clinically, because they can provide a guide for therapists in assessment and interventions with service members and their partners. For example, systemic therapies often are viewed as "adjunct" to other individual trauma treatments (e.g., cognitive behavioral therapy, exposure therapy); however, issues related to sexual functioning, communication, relationship roles, intimacy, cohesion, conflict, and emotional reactions such as anger and fear need to be evaluated and understood within a couple framework.

Couples might need help expressing their fears and frustrations about the ambiguity of deployment and their needs for reassurance from their partners. In addition, helping couples address concerns, such as responding to changes in roles and responsibilities and increasing sexual intimacy, could be topics for therapists to focus on working with couples post-deployment. To facilitate this process, treatment should explore past attachment-related trauma and how it might hinder the couples' ability to bond and build empathy for each other. Providing couples the opportunity to process being vulnerable and transparent could facilitate their ability to seek their emotional/attachment needs from their partner and to discuss topics that might otherwise be difficult to initiate. To conclude, the relational aspects of couples' deployment experience cannot be ignored. Ignoring relational concerns in treatment may serve to continue and possibly exacerbate the individual and couple distress.

### **IMPLICATIONS FOR FUTURE RESEARCH**

While some of the participants in this study appeared able to adapt in ways that supported positive functioning in their marriages, others struggled more with this process. Research exploring why some marriages are more successful than others in adapting is needed. It could be that predisposing vulnerabilities, such as previous traumas or pre-existing mental disorders, or additional stressors during the deployment cycle, make the development of healthy adaptations more difficult for some (Karney and Bradbury 1995; Nelson Goff and Smith 2005). Research to investigate what supports healthy adaptations is thus needed.

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