Military Adolescent Pandemic Study 2021: MAPS21

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ABSTRACT

BACKGROUND: Military-connected students move between 6 to 9 times throughout their K-12 experience, creating unique challenges relating to integration, adaptation, identity development, and acceptance. However, when transitions occur during a global pandemic, isolation and disconnect with schools and the community create new challenges that impact health and well-being. The MAPS21 study uncovers the lived experiences of military-connected students who have experienced a transition during the pandemic and gives rise to the need for interdisciplinary care within the public-school setting to promote mental health and academic support during and post-pandemic transitions.

METHODS: Military adolescents and their parent(s) were interviewed and data were analyzed following an interpretive phenomenological process. A social-ecological model served as the guide to understand the participants’ experiences and to further inform future supportive measures.

RESULTS: Seven subthemes surface under Individual, Relationships, Community, and Society and Policy, the levels within the social-ecological model. These subthemes included: anticipatory processes, control, growth and maturity, adapting views, isolation, school support, community support.

CONCLUSION: Military-connected students may experience adverse outcomes relating to mental health and academic progression after experiencing a move during the pandemic. This study provides an avenue for teams of interdisciplinary professionals to collaborate within the public-school setting to provide proactive support through engagement and policy development.

Keywords: adolescent; military health; COVID-19; pandemic; school.

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Military-connected students are a major consumer of public education across the United States and throughout the world, moving between 6 to 9 times throughout their K-12 experience. Yet, interventions to support this population within the public-school setting remain inconsistent, creating missed opportunities for support from academic, social, emotional, and health standpoints. Studies have indicated that staff and teacher interaction have a direct impact on the stress levels of military students; however, teachers cannot explicitly decipher between students who are part of a military family and those who are not.1,2 This has led to missing clear indications of challenges specific to military-connected students that include demographics, mobility, deployment, social/emotional awareness, and academics. If the administrators of schools with military-connected students lack a process for identifying military-connected children or are not aware of this population’s needs, students may miss out on traditional supports they would receive from a
military installation, as well as proactive support and understanding from their school.

The understanding of the lived experiences that highly mobile military adolescents face is not well known, and pre-pandemic very limited amounts of studies were conducted to look at the specific impact that high mobility has on adolescent development and well-being. One phenomenological study did explore the identity development of highly mobile military adolescents. This study served as a great basis for understanding the impact of this phenomenon, but the pandemic itself created further challenges that needed to be explored. Thus, the MAPS21 study moves beyond traditional military-connected student relocations to uncover the lived experiences of military-connected students who encountered a move and school transition during the pandemic.

According to the Defense Manpower Data Center (DMDC) Active Duty Military Family File, there are approximately 1.3 million active duty military personnel (Army, Navy, Marines, Air Force) and roughly 36.5% (484,213) of active duty members have dependent children. Of those dependent children, 372,751 are school-aged children between the ages 6 to 18 years old, who often experience a highly mobile lifestyle. Military families will move on average 3 times as often as their civilian peers, relocating every 1 to 4 years and changing school up to 6 to 9 times beyond traditional school changes, creating increased opportunities for stress related to frequent transitions, as they must simultaneously cope with normal developmental stressors such as establishing peer relationships, conflict in parent/child relationships, and increased academic demands.

To explore what is already known about adolescent relocations during the pandemic, as well as military-connected relocations of highly mobile military adolescents during the pandemic, a literature review was conducted within CINAHL, PubMed, PsycINFO, and ERIC. The search criteria included English written, full text articles published between 2019 and 2021. To ensure a broad review of the phenomena was conducted, various combinations of the following terms were used: pandemic, COVID-19, coronavirus, adolescent, teen, school, education, learning, military, mobility, relocation, mental health, and mental illness. A total of 6 articles were synthesized after initial and full-text reviews. All the studies examined used qualitative methods, with the bulk of the articles offering expert reviews on the education system during COVID-19. None of the articles were specifically related to the military-connected student population.

The concern and focus of each study were the reopening of schools during or at the end of the height of the pandemic. The utilization of school based health centers to meet the educational and health needs of the most vulnerable populations was recommended with a direct focus on equity of access, especially for the most vulnerable populations. Amongst the most vulnerable populations included those experiencing food insecurity, homelessness or temporary housing, lack of access to internet/technology, and disabilities or special needs, as well as those at risk for mental health issues or severe illness, English-language learners, and students involved with Department of Children and Family Services or an equivalent agency.

In addition to school-based health clinics, a focus on student voice and perspective showed to be important on meeting all-student academic needs during remote and hybrid learning. The studies within this review further validated that the student experience is deeply connected to the classroom teacher. Teachers have a unique opportunity to promote the concept of interconnectedness by helping students compare their own local and national context with that of others. The key in changes to the learning environment is that despite the platform or the type of interaction, student agency, self-knowledge and self-regulation take time to hone as students transform their spaces to help them learn.

While the COVID-19 pandemic is on-going and both schools and the medical community are still striving to meet the academic, social, emotional, and medical needs of students, a significant student group is so far missing in research studies. Military-connected students who moved during the pandemic would meet criteria for those who have the potential for being most vulnerable to learning loss and traumatic experiences. They not only faced the traditional COVID-19 academic implication of quick school transition from face-to-face learning to hybrid and on-line learning; but also faced additional challenges while moving across state lines and international borders amidst a global crisis.

The purpose of this study was to explore the lived experiences of military-connected students and their parents who experienced a PCS transition during the pandemic. Using the CDC’s Socio-Ecological Model to understand these experiences has allowed the team to gauge the necessary interdisciplinary collaboration that must take place between health care members (nurses, primary care providers, mental health and counseling specialists, etc.) and educators to promote proactive support, as well as health and wellness during and post-pandemic within the public-school system. The Socio-Ecological Model represents the intricate relationship between factors that impact health outcomes beginning with the individual and expanding through their immediate relationships, community, and society. The research questions were: (1) What does the lived experiences of a military relocations mean to adolescents in military families who moved during the pandemic; (2) What does the
lived experiences of a military relocations mean to parents of adolescents in military families who moved during the pandemic?

METHODS

This study utilized an interpretive phenomenological design. The lived experiences of military adolescents and their parents were investigated following the philosophical underpinnings of truth and human experiences posited by Heidegger and Gadamer. This qualitative research method positioned the primary investigators close to the participants, allowing for value-laden interpretations to surface themes and subthemes throughout the data analytic approach.16

Participants

A total of 19 participants from active duty military or recently retired military families were recruited for this study utilizing convenience and snowball sampling techniques. Three dyad, 3 triad, and 1 quartet family groups stationed stateside and abroad participated. All dyad groups included 1 parent and 1 adolescent child. Amongst the triad groups, 2 composed of 1 parent with 2 adolescent children and 1 group included 2 parents and 1 adolescent child. Finally, in the quartet group, 2 parents and 2 adolescent children were present.

Further descriptive of the participant pool include 7 mothers and 2 fathers with the average age of 42 years. The active duty members rank ranged from Staff Sergeant (E-6) to Colonel (O-6) and representation from the Army, Navy, and Air Force were included. Ten adolescents (4 males, 6 females) between the ages of 13 and 18 participated, with the average age being 14.4 years.

To participate in this study, inclusion and exclusion criteria were identified. The adolescent participants were to be between 13 and 18 years old in secondary education (grades 6 to 12) and planned to attend the public-school setting in the 2021-2022 school year. In addition, at least 1 parent had to identify as an active duty military member in any branch of service or have retired from active duty within 12 months of the interview taking place. The final criteria were that the adolescent experienced at least 3 military related moves within their lifetime, with the latest move occurring after November 2019. This criterion was set to ensure we could capture adolescents who moved in the midst of the pandemic or just before the pandemic only to transition to a fully remote classroom. The only exclusion criteria were students who were being homeschooled during their pre-pandemic move and were planning to continue homeschooling in the 2021-2022 school year. This group was excluded because the experiences obtained in this study were to help inform program and professional development and support in the public-school setting.

Procedure

Participants were interviewed using video conferencing software at an agreed upon time most convenient for the participants. Parents were interviewed separately from adolescents to ensure a clear perspective of experiences were collected and to avoid any coercion or suppression of experiential information. The interviews were 15 minutes to 90 minutes long. A semi-structured interview approach was applied, allowing participants to drive the interview based on their own lived experiences. A general and overarching questions was asked at the beginning of each interview: “Our team is interested in learning about the experiences that military adolescents who move frequently have, especially during the pandemic. Can you share what this experience has been like for you in your life?” The same question was asked to the parents, asking them to share their adolescent’s experiences form their perspective. Follow-up questions to allow for elaboration of the participants’ responses were used as needed. All the interviews closed with the participants being asked how they feel they could be best supported by those around them, including nurses, teachers, parents, peers, etc.

Only the audio portion of the interviews were recorded on approved digital devices. Digital files were secured on a share drive for a transcriptionist to access. All digital files and transcripts were labeled with the participant’s pseudonym and de-identified to protect the privacy of participants. Transcripts were then loaded onto the same secure drive for the interpretive team to review.

In addition to the interviews, demographic surveys were administered to the participants. Age, gender, ethnicity, along with specific questions relating to military service were asked. The descriptive statistics from these surveys are described in the sample section.

Data Analysis

An interdisciplinary team contributed to the data analysis process. One doctorally prepared K-12 educator, 2 doctorally prepared registered nurses, 1 doctorally prepared nurse practitioner, 1 military journalist, and 2 nursing students participated in the analytic process. Humanistic interpretation of the transcribed data took place through Hermeneutic circles to meet the value laden approach to this qualitative design. This approach was informed by one’s own experiences and existence in the world, which cannot be separated from the interpretation of the participants’ lived experiences.17 Interpretation began with individual interpretations, followed by Hermeneutic circles to allow for collaborative discussion regarding the meaning of
the participants’ experiences, and a final reflective process which involved a final dive into the data. Through this interpretive process, themes surfaced and were organized into an Excel spreadsheet with supporting data.

**Rigor**

Rigor was maintained throughout this interpretive phenomenological study using de Witt and Ploeg’s 18 5 expressions of rigor (balanced integration, openness, concreteness, resonance, and actualization). A balance was found between the participants’ lived experiences and the philosophical underpinnings that informed this study. The interpretive process provided for a methodological approach, which in turn created a connection between the themes and practice guidelines. This supported the expressions of openness and concreteness. Quotes were identified to provide further meaning to the interpretations, allowing for resonance and meaning to occur. Finally, current and ongoing communication with interdisciplinary team members and military families has supported the ongoing trustworthiness of the results, leading to the expression of actualization.

**RESULTS**

A collective total of 7 subthemes surfaced in relation to the 4-level perspective found within the Social-Ecological Model (Figure 1). While the Individual accounted for the greatest number of subthemes, Community had the most supportive data, especially as it related to the subtheme of School Support.

**Individual**

When looking at the Individual within the Socio-Ecological Model, biological and personal history factors play a major role on the impact that a move has on a military adolescent, especially during the pandemic. During adolescence, individuals experience a transformation of reliance on others, such as mom and dad, while further experiencing the exploration of self and one’s own identity. 5 The manner in which an adolescent views their own experiences internally is important to understand because it brings further insight to how and why they transitioned the way they did. Anticipatory Processes, Self-Control, and Growth and Maturity were subthemes that provided a deep understanding into the participants as individuals. While the subthemes are further explored below, data supporting each subtheme can be found in Table 1.

One’s perceptual experiences from an ontological perspective of “being in the world” are linked to their known beliefs about the world based on their own lived experiences. 4, 5 For military adolescents, their lived experiences of moving in general created a sense of anticipation, as well as anticipated processes they would experience from social, emotional, academic, familial, and logistical standpoints. Generally speaking, some participants looked forward to moves, mentioning they do not mind the “fresh start,” while others felt that there was always an exhausted sense of “starting over.” However, as it applies to the pandemic itself, there were many questions about the moving process that would often lead to confusion and anxiousness among the participants because they could not anticipate what was happening, therefore it was difficult to prepare themselves. This had an overall impact on the adolescents’ transitions and adaptations, surfacing as a subtheme in this study as Anticipatory Processes.

Control also surfaced within the data. There were many things that were out of the adolescent’s control as it related to the moving process. This lack of control led many of the adolescents trying to identify what they actually had control over and they often reflected on how the pandemic amplified the lack of control they were already feeling from their move.

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Table 1. Representation of Individual

| Anticipatory Processes | Calypso (Adolescent): Sometimes it [moving to a new place] can be a bit, I guess, like scary kind of because you are there with new people and new teachers. Everything is new and you are not used to it. And, I mean, I’ve gotten a little bit used to it ’cause it’s happened so many times.

Nyloch (Adolescent): I think if I had—if I had a chance to change it, I wouldn’t because I like getting a fresh start. So it is very challenging. Because you go to a new school, nobody knows you. Most people automatically just don’t like you until they get to know you. So as a military child, I’m sure a lot of other military children—unless they were born to fit in, then they most likely have problems with bullying or just people being rude, especially if they move to a school where there weren’t other military kids. But since I’ve always been used to moving around for years, I feel like if all of a sudden I just stayed in one place, I wouldn’t like it as much.

Claire (Parent): But the unknown and the fear of, hey, we’ve gotta get from there to here. And we can’t help but stop . . .

Wilton (Parent): Like it was just—logistically, it was a hundred times the worst—the worst move we’ve ever done. So we were more stressed trying to just physically get boots on the ground in (geographical location reference)—and weren’t able to kind of focus on helping them say goodbye to their friends and making things work and doing—I mean, it’s hard enough as a parent letting your—trying to help your kids say goodbye to people, but—we—we didn’t even have time to pretend like we had a chance to try and figure it out.

Control | Nyloch (Adolescent): I think that I’m not as happy as I used to be. And there’s another side of me that I wish to express where I can sing, I can dance, I can just be happy the whole time. I can’t do that here because there isn’t a theater here, and especially ‘cause of corona. They—they are taking extra precautions there. I know from my friends. But here, everything is either just shut down or there’s nowhere to go. It’s just—it’s not cool.

Tom (Adolescent): Um, you know, you’ve just gotta accept it. Like you can’t really control the moves, so you’ve just gotta accept what’s gonna happen. You just gotta move on and then enjoy right now. Like enjoy what you’re doing now.

Samantha (Parent): Um, (name reference) had the most traumatic experience she has ever encountered in her entire life. Ah, you know, moving internationally is already overwhelming, but doing it during a pandemic where you’re isolated, you have to be creative with how you say goodbye to friends, the community you grew up in. Um, and even just that culture, to say goodbye, which would have been the traditional way we would have done it, I think just overpowered a sense of loss and grief that she wouldn’t—I think we could have done it in a more natural way, but the pandemic took that from her.

Growth and Maturity | Tracy (Adolescent): . . . most of the kids that I’ve told, ‘Hey, I’m a military child, too,’ they’re usually shocked. Um, they ask me how many places I’ve been. They ask me if I enjoy going to all the different places. And, in turn, I’m surprised by how much they—they don’t know about the world. They—most of them have never left the state.

Rupert (Adolescent): I never really fit in with this school. All the kids are—I guess American is the word. (Laughter.) I’m used to—I’m used to kids who are—have been places and they know things. And these kids do not—really haven’t. Like Canada and Mexico and Idaho. That’s pretty much the limit. Ah, yeah. Like I can have small conversations with them, but nothing really, I guess, heavy. And it’s not necessarily their fault. It’s really just a difference in upbringing.

Aurora (Adolescent): . . . like my parents were like trying to figure things out, and so I’m like, oh, my gosh. And I’m like—you know, I kinda have to be that like—like kind of their support system during that thing so that they can get us through that, too. I used to not feel that way when my sister still lived here. But then she went to college, and so it kinda like got put on me where like I have to be like that in-between where I have to be able to help my parents a lot, but I have to be able to like still be there for my little brother and stuff. And especially during the move because like, you know, it’s a stressful time for everyone. And I kinda just want to be like that like rock so that everything could be calm and stuff.

many participants also shared the “need” to accept the moves because they were going to happen no matter what; however, acceptance was not always willingness or embrace. Parents of the adolescents also shared the impact of control from their own perspective, as well as how feelings of lacking control impacted them and their families. The pandemic took away a lot of control adolescents and parents had in order to create smoother transitions, impacting their overall transition.

Many participants felt a sense of Growth and Maturity through their experiences of moving, prior to and during the pandemic. This growth assumed many different forms from cultural awareness to an innate desire to have to be strong for their family. However, this increased sense of responsibility placed even more undue stress on the adolescents who transitioned during this pandemic, more so than their previous transitions because of the lack of connection to peers and the surrounding community. Their individual perspectives of self in comparison to peers and within the family unit exuded through the data.

Relationships

Relationships within the Socio-Ecological Model are very important when determining how to best meet the overall needs of this population. Those who are closest to the individual and who play a major part in their overall interactions and lived experiences can influence behaviors, as well as responses to stress. Parents, teachers, friends, coaches, etc. are amongst some of the most influential relationships adolescents will have. Within this theme, Adapting Views surfaced as a subtheme. Immediate relationships influenced adolescent behaviors. In addition, relationships that were not formed due to moving during the pandemic
Table 2. Representation of Relationships

| Subtheme | Statement |
|----------|----------|
| Isolation | Aurora (Adolescent): It was really hard and lonely, um, and really stressful and really easy to get depressed. Because when you're moving, you have to say goodbye to everyone. And then we go to this new place where schools are all shut down and you can't meet anyone... I was told I was gonna start online school, and that just like crushed me because I think that's about two months... without knowing anyone. And about two months after—like a month-and-a-half after we got here—I got really depressed and had to go into a, um, mental hospital for a couple weeks. |
|          | Wilma (Parent): I mean, they've seen us struggle with this. This was, you know, an ugly PCS. There were days that I cried and I had a meltdown and I had a big, fat tantrum trying to figure things out. And sometimes I think they need to see that. Because it's not all roses on my end. We're not doing this just to make it difficult for them. This is just freakin' hard sometimes. |
|          | Claire (Parent): I think probably the hardest part was, um, not really getting to see my friends, but I can contact 'em over like internet services and stuff and social media. And so that's been pretty good... I haven't really been able to get to meet anyone new 'cause I'm just doing online school. |
|          | Fred (Parent): There certainly were emotional outbursts at times. They tended to mirror our emotions. When we were frustrated, they were frustrated. |
|          | Roger (Adolescent): I think probably the hardest part was, um, not really getting to see my friends, but I can contact 'em over like internet services and stuff and social media. And so that's been pretty good... I haven't really been able to get to meet anyone new 'cause I'm just doing online school. |
|          | Lee (Parent): So just seclusion. More seclusion. You know? Like you go to a seclusionary state when they first—when you—during a normal move. But with COVID, it's just twice as bad. |
|          | Ricky Bobby (Parent): I mean, a little bit of depression, being upset, losing friends. But it was really the isolation. Especially teenagers. Very social creatures. Um, and you just—you've got—essentially the four walls of this house was her world for quite some time. |

Also influenced adolescent behaviors, as well as their adaptation to their new environment. This surfaced the subtheme of Isolation. Data for both these subthemes are exhibited in Table 2.

It was very interesting to see the ways that parental views and behaviors impacted the adolescent’s behaviors and viewpoints about the moves. However, during the interviews, it seemed that layers of feelings and views the adolescent had peeled away allowing the researchers to see differences between surfaced behaviors (what others see) and true inner feelings (what some hide). Throughout the Hermeneutic circles, parental experiences were a major point of discussion, creating a path of insight into the relationship between their experiences and their adolescents’ behaviors. Often, it seemed like a release for the parents in this study to truly tell their own story and to relay the way that the moves have impacted them.

Isolation was a major influence, surfacing as a subtheme within this study. Social distancing, mask wearing, isolation, and virtual/hybrid learning environments were mandated during the pandemic. Though national and even worldly precautions and preventative measures were suggested, each state and local government differed on their level of precautionary measures, especially within the school systems. This created some confusions, anxiousness, and even depression, at times, amongst both the adolescents and their parents as relational isolation prevented the adolescents from being able to say goodbye to friends in the manner they normally would. In addition, the techniques they normally used to make new friends or to begin forming new relationships was difficult, and even impossible in some instances. Distancing and isolative behaviors, especially during a move, decreased socialization and increased isolation. These COVID-19 mitigation measures led to the lack of traditional on-boarding opportunities in new school communities as well as outside engagement such as recreational or community involvement, creating major maladaptive behaviors as reported by both the adolescents and their parents.

Community

Community support is a necessity for military families as it plays a vital role in overall individual outcomes. Community itself is part of the complex relationship of factors within the Sociocological Model that have a direct impact in health and wellness. Often, military moves within the states and abroad place military families in areas where they are not familiar with the people, culture, or surroundings. On rare occasions, orders to relocate to an area near family or even to a place they have been stationed before helps to ease the transition. However, during adolescence, transitions can be even more straining because of several factors, including navigating state graduation requirements, understanding one’s own identity in a new environment, and peer support for both adolescents and parents. Two major subthemes relating to community rose from the data: School Support and Community Support.

Within this study, School Support was the most heavily data driven subtheme. The majority of participants shared how their experiences with the public-school system had a direct impact on their lives and well-being. Through these accounts both positive and negative experiences were shared that
directly impacted the adolescent’s health. For example, 1 adolescent, Harper, stated:

... they’re supposed to be the most military friendly school, but they were the least military friendly school I’ve been to. Um, it—everything was a lot harder. It’s more ’cause they had these rules, and they were very strict with the rules.

This experience was further detailed by Harper’s mother who revealed that:

She definitely slipped into a depression to where by Thanksgiving, she wouldn’t get out of bed ... (Crying.) We remember this girl. And I’ve watched this girl like deteriorate so much. And this school also not only did not really fit in with the kids, school really made her—these are literally the words that came out of her mouth. She said, “Mom, I used to feel like I was a good kid at my other school, and here I feel like I’m one of the worst.”

Within another family unit, John, the military adolescent, mentioned:

... definitely most of the time I feel like people expect me like to know how to do a few things or to know certain things that I don’t because very simply I just moved here. But, I mean, I—I’m kind of just learning to try to catch up. It kinda feels a bit disheartening, but I kind of just have to, um, use the information that they do give and try to figure it out.

He went on to mention that he felt supported by the school overall, which aligned with his mother’s feelings as well. She mentioned:

... we do live in an area where we’re lucky that they have a lot of support for military families and a lot of support for new families where they do a lot of new family events at the beginning of the school year. But none of that happened this year. ... they tried to do what they could, but they were kind of scrambling as well because plans kept changing—at the last minute. ... so, you know, he didn’t get a tour of the school. He didn’t get like a new student orientation. There—there really wasn’t anything to be prepared for—the school year.

While a combination of both positive and negative experiences were shared, the main connection was the impact of the experience on health and well-being. The data reinforced time and time again the major role that school support can play in military adolescent outcomes, especially from an interdisciplinary perspective.

While participants felt that schools could serve as a direct entity of support for military adolescents, Community Support also played a major role in the transitions they experienced during the pandemic. Adolescents often just wanted others to understand what it was like for them and to be more compassionate and accepting, while validating their experiences. For example, Kate mentioned it would be nice “... maybe like for people around us to know more like how much we move and things ... when you move somewhere, at first it’s hard to like have people understand you.” Many of the adolescents yearned for more support, especially from someone in their new community.

Parents often suggested that it is already hard to adjust to a new community when moving, but trying to do so during the pandemic created even more challenges and opportunities for maladaptive behaviors to occur. Moreover, parents felt that if they could get the support they need, they could better serve their adolescents through the experiences they were having. One parent mentioned:

It was really scary. Because not only, you know, was COVID going on so we couldn’t even interact with this new community, we didn’t even know what resources were available in our community. And it was so isolating. Even more so—um, we had no idea who to turn to. And, you know, even though mental health is like coming up and more accepting, it’s still a stigma.

Fred, another parent, mentioned that the cycle of loss is very real for military adolescents and the community needs to understand the experiences they face to know how they can best support them.

That [moving during the pandemic]—that kind of added to the frustration of—of, you know, the military lifestyle where—where people go into self-protection mode, and you lose friends before you’ve lost them. So, I mean, it spreads it out over a longer period because you’ve got, you know, your first friend that divorces you 2 months before you leave, and then you’ve got your second friend that divorces you on the day you leave. So it—it’s a frustrating process for them.

Society and Policy
Society stretches beyond the local community and looks toward larger changes that could directly affect the health and wellness of an individual. Several participants within this study shared their thoughts on larger changes that could create smoother processes. While these changes are not necessarily so large that they impact national policy, they could impact organizational policy and change, national advocacy for awareness, and state regulations that encourage professional development opportunities be offered to understand how to best serve military children and their families in the public-school setting. Truly, the adolescents and their parents wanted their experiences to be heard, to be validated, and to be a driving force toward better academic and social-emotional support.

Throughout the Hermeneutic circles, a deeper understanding of the impact that larger society has
on individual health and wellness outcomes seemed to rise over and over again through interpretations of the participants’ data. Ricky Bobby spoke to the ever-evolving military culture stating:

The pressures and downward-directed cultural changes by leadership, whether it be military or civilian leadership, um, those are constantly changing. So, we’re getting this huge mixing of things. So we’ve got a whole bunch of different subcultures coming together being swirled around and constant little changes pushed in on ‘em. Um, like I said, if we had a—the ideal program from twenty to ten years ago would not work today—for educating, you know, what the military subcultures are. Like what do the kids deal with?

He clearly identifies that a gap through the parental perspective. This gap was further supported through the adolescent perspective as Nylloh mentions, “It’s just how different states work. And it’s just kind of draining to have to keep up with that every time we move.”

Nearly all the adolescents within the families interviewed experienced some form of maladaptive behavior, with 2 adolescents reporting that they fell into a deep depression, one as far as experiencing suicidality. Her mother mentioned,

… coming here was, I mean, naturally a culture shock, but it just didn’t—it wasn’t as smooth as it should have been because of the pandemic. Mentally, it—it decompensated her for quite a while. She went into, ah, major depression. And, I mean, the—the suicidality that she had experienced for, I would say, at least almost 6 months. And I hated saying it out loud, but I was saying, “I’m so afraid she’s gone already.” “I can see in her eyes she just wants to check out.” Like she had no reason to live. She—she was okay with being gone. And as a parent, it was the most terrifying thing. Like it’d never been that significant. But she was really like I’m done. I’m done. I can’t do this anymore … we didn’t have one person to talk to about it with.

These accounts speak volumes to the societal support needed for more resources and funding that should be allocated toward youth mental health services within schools and the greater community.

**DISCUSSION**

It is imperative to understand how small changes and increased support, along with societal changes and policy development can impact a military student’s overall adaptive abilities and mental health. Multiple transitions during one’s childhood can have a variety of impacts on academic progression, identity development, and adaptation. Conducting this study and viewing through the lens of the Social-Ecological Model provided further insight into this population’s needs through interdisciplinary collaboration and multilevel perspectives.

The impact of a school transition and physical relocation on military-connected youth during the height of the pandemic at the individual level has created periods of maladaptive behaviors. The sense of not knowing or even being able to anticipate next steps during a transition led several participants to feel overwhelmed, and their inability to anticipate next steps led to a heightened sense of lack of control. Although lack of control is already associated with military-connected moves, feeling was 2-fold for adolescents who moved just before or during the pandemic, when school closures occurred and social integration opportunities ceased.

In addition to the impact that this phenomenon has on the individual self, immediate relationships further influence adaptive behaviors, as well as overall health and academic outcomes. What was extremely impactful about the study was the opportunity to interview parents, as well as the adolescents themselves. Throughout the interviews and stories shared, we found that parental behaviors and stress were often projected and sometimes adopted by the adolescent child. The stress of moving during the pandemic led to instances of familial maladaptiveness as parents struggled to plan and prepare themselves and their children. Parents shared feelings of lack of control, anxiety and hopelessness. Their behaviors had a direct impact on their children. As Fred stated, “There certainly were emotional outbursts at times. They tended to mirror our emotions. When we were frustrated, they were frustrated.” Furthermore, the social isolation that occurred prevented many adolescents from engaging in peer relationships. This had an extreme impact on their overall well-being as many adolescents felt alone and disconnected.

Community level impacts on student transitions was likely one of the strongest themes within this study. Military-connected adolescents who moved during the COVID-19 pandemic found their connections or lack of connections with schools and the community had a direct impact on their lives and well-being. Many expressed an expectation that military-connected schools and communities would have structures to welcome them or integrate them into the community; however, there seemed to be great inconsistency in established structures. Many of the pre-COVID-19 support services became inaccessible to those military-connected adolescents who needed them at critical times in their transition process. Further, participants of the study mentioned the connection between a teacher and student as being the tethering point for new students. When teachers connected or acknowledged the hardships of a military life, parents and students felt a deeper connection. Likewise,
when connection did not occur, a deep sense of disengagement was noted.

For many of the participants, the lack of school support and community support, coupled with the lack of peer-to-peer connections in a new location, removed the perceived safe social bubble they would have had if they could have stayed in place. These seemed to be the main drivers in the increased self-reported mental health issues that many participants shared. Mental health professionals were in short supply or unavailable to students, per the students and their families. This led to maladaptive behaviors and in 1 extreme case suicidal ideation and hospitalization. For many of the participants, Military Family Life Counselors assigned to schools were unable to be on campus due to mitigation policies or meet with students in-person which would have potentially added an additional layer of support to incoming students.

Society and policy levels on student transitions emerged through parent and adolescent reflection on how they would feel more supported as they transition into a new academic school year and for some, a second pandemic PCS. Several participants within this study shared their thoughts on larger changes that could create smoother processes. More standardized processes for connecting to new students, more mental health support, and more cohesion within the state-to-state pandemic-related processes and academic transition of learning platforms were some ways participants felt would relieve much of their burden. Further, an overall feeling that students would be better supported by a school and community group who are trained to work with military-connected students as a subculture of the student population was noted with multiple participants.

Limitations

A limitation of this study was the convenience sampling method implemented to recruit participants. While recruiting via social media resulted in an efficient number of participants, only those who had social media access were reached. To help mitigate this limitation, snowball sampling was used and at least 3 participants were recruited via referral. In addition, all interviews were conducted via a video conferencing platform. A slight connect delay did occur with at least 2 participants, but the interviews commenced as soon as the connection issues were resolved.

Conclusions

As military connected adolescents transition back into the in-person environment, it is imperative that early detection measures are in place to identify maladaptive behaviors from transitional trauma and that proactive support can be fostered through small group interaction and individual counseling opportunities. This detection and support can be fostered through the work of an identified military liaison who has access to new-incoming students, as well as through student-led student sponsorship programs as an avenue to on-boarding new students into school communities. This was a nearly universal sentiment in the study. The lack of peer-to-peer connection directly influenced the participants’ perception of being included and stagnated their growth socially, in some cases academically. In addition, relationships within an adolescent’s immediate environment must be an area of focus. Opportunities for family bonding and interaction can occur through military focused support groups that bring military families together in an attempt to share their experiences and validation. Moreover, the transition back into in-person learning may create increased anxiety surrounding social relationships, especially if adolescents have not had the opportunity to meet peers.

IMPLICATIONS FOR SCHOOL HEALTH

The multilevel perspective of the SEC model served as a great basis to understand the implications for school health in regards to serving the military adolescent population. Complimentary to this multilevel model is the Whole School, Whole Community, Whole Child (WSGCC) model, which aligns overall student-centered outcomes through holistic approaches. This model serves as a great framework toward identifying the public-school setting as a prime environment for holistic support to occur for the military adolescent population and serves as the model for which the listed implications have derived. The communication between disciplines, including education, nursing, mental health, and other community entities could truly create an environment that leads to positive health and learning outcomes.

Professional development training must be developed that focuses on serving the military child from an interdisciplinary perspective. While siloed support circles from various disciplines have definitely contributed to creating a structure of support from their own discipline’s viewpoint, the findings of this study call for an interdisciplinary effort amongst military-connected health care professionals, public school staff and administrators, educators, and mental health professionals to identify effective professional development strategies through a multieexpert lens. Furthermore, a military-focused culturally responsive support system can be developed to support this population from a holistic standpoint.

Parent engagement is also essential to the overall health and well-being of a military-connected adolescent. Family or parent liaisons specifically positioned to help connect parents and students to school resources
and offer additional resources for new families must to be a standardized practice for all schools with higher military populations. However, just positioning liaisons is not enough. Schools must create more opportunities to identify military adolescents early in order to engage them in proactive opportunities that could support their overall transitions, especially post-pandemic. In addition, the family liaison should lead the interdisciplinary team effort in recognizing early stages of maladaptive behaviors through identified reporting practices in order to support proactive care instead of reactive care. For example, first recognition of maladaptive behaviors, including increased absences, increased reports of illness, or a decrease in effort and participation, may be observed by a teacher or a school nurse, which can then be reported back to the family liaison and clinical staff to establish next steps in the students support and care.

In addition to localized support measures within the community, policy development and advocacy are major implications as a result of the MAPS 21 study. The findings in the study can serve as justification for the need for greater support and pave the way for military and nonmilitary-connected schools to build and fund post-COVID-19 student support policies and programs. Policy regulation organizations like the Department of Education (DoE), Department of Defense Education Activity (DoDEA), Parent-Teacher Association (PTA), Military Interstate Children’s Compact Commission (MIC3), Military Child Education Coalition (MCEC), National Military Family Association (NMFA) and the White House Joining Forces should work collaboratively to advocate for policies that ensure schools with high populations of military connected students adopt professional development trainings to support military-connected students, as well as host transition programs for incoming and outgoing military-connected students. In addition, engaging nurses and other health care providers in collaborative efforts would allow for development to occur through a holistic lens.

Human Subject Approval Statement
The study was reviewed and approved by the Pacific Lutheran University HPRB prior to recruitment (Protocol #458).

Conflict of Interest
All authors of this article declare they have no conflicts of interest to report.

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