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**To cite this article:** Jessica Dodge, Caroline Kale, Mary Keeling, Rachael Gribble, Sean Taylor-Beirne, Stephen Maher, Carl Castro, Nicola T Fear & Kathrine Sullivan (2023): Families transition, too! Military families transition out of service: a scoping review of research from the Five Eyes nations, Journal of Family Social Work, DOI: [10.1080/10522158.2023.2167896](https://doi.org/10.1080/10522158.2023.2167896)

**To link to this article:** <https://doi.org/10.1080/10522158.2023.2167896>



Published online: 01 Mar 2023.



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## Families transition, too! Military families transition out of service: a scoping review of research from the Five Eyes nations

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### ABSTRACT



There is minimal research about the military-to-civilian transition (MCT) from the perspective of the family. The goal of this scoping review was to identify what is known about military families across the Five Eyes Nations (FVEY) (Australia, Canada, New Zealand, the United Kingdom, and the United States) during this phase as well as identify gaps in the evidence base. Scoping review methods were employed with a narrative review process to conceptualize and organize results. The initial search returned 2,219 sources. From these, 27 sources about military family experiences during MCT were identified. Overall, there was limited research on this topic with the majority of sources being from gray literature. A contributing factor to this lack of literature could be the conflation of the MCT with other military transitions (i.e. deployments). Sources highlighted four major themes that influenced identified needs and current services for military families during MCT: (1) mental health; (2) barriers to care; (3) financial needs; and (4) targeted transition support. The limited literature documents promising family skills-based interventions during MCT. However, there is a need for more empirical research on existing family-based interventions and experiences and needs of the family as a unit during MCT.

### ARTICLE HISTORY

Received 9 September 2021  
Revised 6 June 2022  
Accepted 27 December 2022

### KEYWORDS

Family interventions; high risk families; five eyes nations; Military-to civilian transition; military families

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## Introduction

The military to civilian transition (MCT) refers to the phase when service members leave the military and return to civilian life (Gil-Rivas et al., 2017; Keeling et al., 2019; Pedlar et al., 2019). Research about service members' transition is extensive and highlights the challenges and opportunities that some service members experience. While the majority of service members transition well, some experience significant challenges (Thompson et al., 2017). These challenges include shifting from the structure of military culture to unstructured civilian culture, being underemployed or unemployed, insufficient income, relationship and family problems, housing difficulties and homelessness, addiction, social isolation, health and mental health challenges, and coping with the changes in healthcare coverage and access (Castro & Dursun, 2019; Cooper et al., 2018; Derefinko et al., 2019; Fargo et al., 2012; Hoerster et al., 2012; Keeling, 2018; Kleykamp, 2013; Lord; Ashcroft, 2017).

Despite the focus on military personnel's transition experiences, we know little of the families who transition alongside military personnel. As commonly stated among the military community: "When one person joins, the whole family serves," implying the need for well-rounded military services and understanding of both the service member and their families during transition (Cathcart, 2019; Fossey et al., 2019; Gil-Rivas et al., 2017; Keeling et al., 2019; Marek & D'Aniello, 2014). Based on limited research, military families may also experience the stresses of transition when their loved one leaves service (Selous et al., 2020). Leaving service may mean the loss of consistent income which can cause worry and financial strain for families (Selous et al., 2020), especially when partners have been unable to maintain employment during the service members' military career (Borah & Fina, 2017).

### ***Military families within the five eyes nations (FVEY)***

The present study focuses on the experiences of military families experiencing MCT from across the FVEY nations. When considering the experiences of military families, the FVEY nations (Australia (AUS), Canada (CA), New Zealand (NZ), the United Kingdom (UK), and the United States (US)) have several important similarities: They all have a volunteer force and are Westernized nations connected historically and by a military alliance. Specifically, these countries cooperate jointly through the multilateral UK-USA agreement, sharing signals, military, and human intelligence. Across these countries, between 3,600 and 167,000 families may transition each year (Australian Department of Defence, 2020; Australian Government Department of Veterans' Affairs, 2018; Cathcart, 2019; Department of Defense, 2019; Returned Service League Queensland, 2018; Sondergaard et al., 2016).

### **Scoping review**

This methodology allows for investigation into a broad range of literature, including gray literature (Arksey & O'Malley, 2005; Halas et al., 2015). The present effort involves a comprehensive review of empirical and conceptual work and mapping of key themes, in order to disseminate findings regarding military family transition experiences and delineate where further research is needed (Arksey & O'Malley, 2005; Halas et al., 2015). This review will focus specifically on research from FVEY nations conducted from the perspective of the military family during MCT. Three objectives guided the present review:

- (1) To describe what is currently known about the experiences of families who have a family member transitioning out of service.
- (2) To identify and describe gaps in research about military families' MCT
- (3) To identify and describe gaps in support interventions for military families during MCT.

### **Materials & methods**

Following Arksey and O'Malley's (2005) scoping review framework, the research team developed a search strategy based on the research objectives. Four electronic databases were searched (APA PsycINFO, PubMed, Social Services abstracts, and the ProQuest Military Collection). APA PsychINFO and ProQuest Military Collection databases were used for the gray literature (see Table 1 for search terms). Eligible sources included peer-reviewed and gray literature, both qualitative and quantitative studies, and met inclusion criteria including: (1) published within Five Eyes countries, (2) published in English between 2002 and October 2020, and (3) were limited to those with a recent transition experience (literature in the past 20 years, post-9/11 era families). To ensure our search was most up to date, another search was conducted from October 2020 to March 2021. The authors also corresponded with colleagues from all five countries specializing in military families for all sources and conducted a hand search of reference lists (resulting in nine additional sources).

For included sources, extracted information included method of recruitment, *N*, date of data collection, and participants' military service status (active duty, reserve/National Guard, or veteran). Since the transition process can begin while the service member is still active, it is important to include the military status of participants. Sources were managed using the systematic review management application Covidence (Covidence systematic review software, 2020).

The review process included three steps. First, abstracts were reviewed using the inclusion/exclusion criteria to identify which sources should be included for full review. Second, the full text of sources meeting inclusion criteria is reviewed. Disagreements on whether a study should be included were discussed between investigators, with a third investigator consulted if no agreement was reached. Third, sources eligible for inclusion review were coded to extract and summarize the results. After the final list of sources was determined, the main findings were collated through a narrative synthesis approach.

## Results

### *Overview of included articles*

The search returned 2,219 sources, of which 132 were identified as duplicates. From the remaining 2,087, 1932 were irrelevant and 137 were excluded because they did not meet criteria resulting in 18 sources (Figure 1). Nine sources were found from experts and reference lists resulting in 26 sources about military family experiences during MCT (Table 2). The majority ( $n = 18$ ) were from the US, with others from the UK ( $n = 1$ ), Canada ( $n = 2$ ), Australia ( $n = 2$ ), and one that included Canada, US, and UK ( $n = 1$ ; Table 2). Just over half of the sources were gray literature ( $n = 16$ ) consisting of press releases about programs or policies ( $n = 7$ ) and contracted reports ( $n = 4$ ), with the remainder including a program evaluation, resource guide, newsletter, and conference abstract (Tables 3 & 4). Most peer-reviewed literature were based on cross-sectional surveys ( $n = 5$ ), followed by theoretical papers ( $n = 3$ ), with the remainder including a randomized controlled trial, cohort design, and a program evaluation (all  $n = 1$ ; Table 4). The funding sources were mainly public ( $n = 23$ ) with the remainder being mix of private and publicly contracted reports ( $n = 4$ ).

Among peer-reviewed sources, most were based on samples of veteran/partner dyads ( $n = 3$ ) or other family members (i.e. siblings and parents) of veterans ( $n = 3$ ). Only one source included children ( $n = 1$ ). One ( $n = 1$ ) was from the veteran's perspective (Table 4). Sample sizes ranged from 5 to 7,965. Recruitment was primarily through veteran-serving organizations ( $n = 3$ ) or convenience sampling ( $n = 3$ ; Table 4). Lastly, while we attempted to explore differences by type of transition (e.g., medical discharge, career discharge, dishonorable discharge, etc.), we were unable to do so as studies did not differentiate.

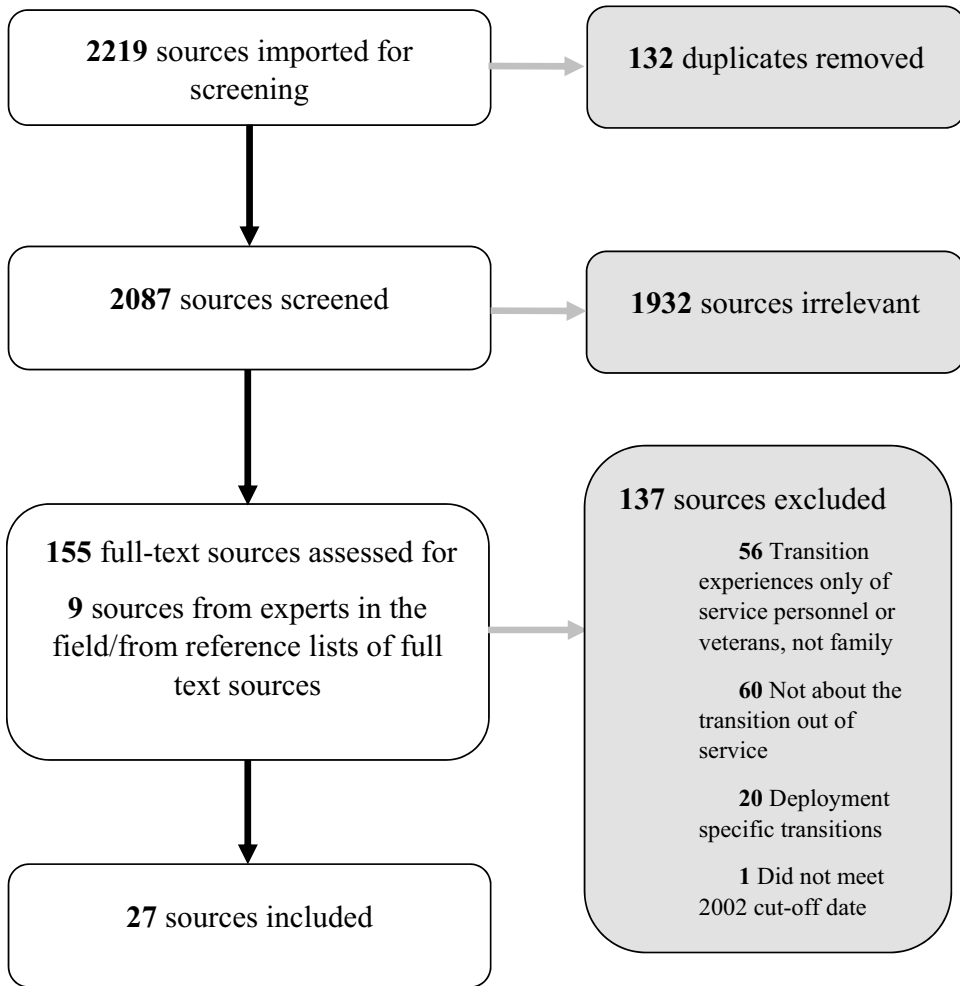


Figure 1. Global scoping review flow diagram.

Table 1. Search terms.

#	Concept	Query (title or abstract)
1	Family	spouse* OR wives OR wife OR husband* OR "intimate partner" OR "co-habiting partner" OR couple* OR infant* OR child* OR youth OR adolescence* OR teenager OR dependent* OR offspring OR sibling* OR parent* OR caregiver* OR family*
2	Transition	discharge OR dishonorable OR honorable OR "military-civilian" OR "military to civilian" OR resettlement OR separation OR retirement OR "military transition" OR transition* OR reintegration OR "community reintegration" OR "leaving Service" OR "Service-leavers" OR "civilian life" OR "leaving the military" OR "leaving the Service" OR "leaving the Armed Forces" OR "getting out of the military"
3	Military	"Air Force" OR Army OR Navy OR marine OR Soldier OR sailor OR airman OR military OR "armed forces" OR "National Guard" OR "active duty" OR "military-connected" OR "military personnel" OR "Service personnel veteran" OR "ex-serving" OR "early service leaver" OR "Ex-Service person" OR "Armed services" OR "Coast guard"
4		1 AND 2
5		4 AND 3

**Table 2.** Studies included a scoping review on military families and the military-to-civilian transition.

Number	Author(s)	Year	Title	Country
1	Alabama Department of Mental Health and Mental Retardation (ADMHMR).	2009	Alabama DMHMR Outlook, 1st Quarter FY 09 L: Parenting Assistance Line (PAL)	USA
2	American Psychological Association Communications Staff	2011	Give an Hour announces \$2 million grant to implement Community Blueprint for military families	USA
3	Australian Government: Department of Defense	2020	ADF Member and Family Transition Guide: A Practical Manual to Transitioning	AUS
4	Cathcart	2019	Military to Civilian Transition: A Family-First Approach.	CA
5	Charlton, T.	2017	Transitioning military families to civilian workforce	USA
6	D'Aniello, Marek, & Moore	2017	A Systemic Perspective on Military Service Member' and Their Partners' Perception of PTSD and Reintegration Stress: A Dyadic Analysis	USA
7	Department of Defense News	2018	Military OneSource Benefits Extended to Vets, Families for Full Year After Separation	USA
8	Eberhart, Dunbar, Bogdan, et al.	2016	The Unified Behavioral Health Center for Military Veterans and Their Families: Documenting Structure, Process, and Outcomes of Care	USA
9	Fossey, Coope1, & Raid	2019	Chapter 9: The transition of military veterans from active service to civilian life: impact of transition on families and the role of the family, support, and recognition	USA, UK, AUS
10	Gil-Rivas, Kilmer, Larson, et al.	2017	Facilitating Successful Reintegration: Attending to the Needs of Military Families	USA
11	Glynn	2013	Family-centered care to promote successful community reintegration after war: It takes a nation	USA
12	Heaver, McCullough, & Briggs	2018	Lifting the Lid on Transition: The families' experience and the support they need	UK
13	Keeling, Borah,, Kintzle, et al.	2019	Military spouses transition too! A call to action to address spouses' military to civilian transition	-
14	Marek & D'Aniello	2014	Reintegration Stress and Family Mental Health: Implications for Therapists Working with Reintegrating Military Families	USA
15	National Academies of Sciences, Engineering, and Medicine	2019	Strengthening the Military Family Readiness System for a Changing American Society	USA
16	Ohio Department of Alcohol & Drug Addiction Services	2008	Ohio National Guard Unveils New "OHIOCARES" Website for Service Members and Their Families	USA
17	Porter, Rodriguez, Woodall, et al.	2020	Alcohol misuse and separation from military service: A dyadic perspective.	USA
18	Schwartz, Norris, Cramm, et al.	2021	Family members of Veterans with mental health problems: seeking, finding, and accessing informal and formal supports during the military-to-civilian transition	CA
19	Shelton, C.	2010	Army Career and Alumni Program prepares families for military to civilian transition	USA
20	Sherman & Larsen	2018	Family-focused interventions and resources for veterans and their families.	USA
21	Sherman, Monn, Larsen, et al.	2018	Evaluation of a sesame street multimedia intervention for families transitioning out of the military	USA
22	Smart, Muir, & Daraganova	2018	Family Wellbeing Study: Summary Report	AUS
23	Sondergaard, Cox, Silfversten, et al.	2016	Families support to transition: A systematic review of the evidence.	-
24	Sornborger, J., Glynn, S., Lester, P.	2013	Welcome Back Veterans Family Resilience Center	USA

*(Continued)*

**Table 2.** (Continued).

Number	Author(s)	Year	Title	Country
25	The Center for Social Justice	2016	Military Families in Transition	-
26	White House Press Release	2016	Presidential Memorandum: Advancing Fair Practices by Education and Training Institutions Serving Service Members, Veterans, Eligible Spouses, and Other Family Members	USA
27	White House Press Release	2013	President Obama, Vice President Biden, First Lady Michelle Obama, and Dr. Jill Biden Announce that Since President Obama's Challenge in August 2011, American Businesses Have Hired or Trained 290,000 Veterans and Military Spouses	USA

"-" = there was no specific country from which data was collected. This was used for theoretical papers.

### **Themes of research focus**

Sources highlighted four major themes: (1) mental health; (2) barriers to care; (3) financial needs; and (4) targeted transition support (Table 5). For each theme, we discuss identified familial needs and services currently available during MCT.

#### **Mental health**

**Needs.** The present results stress how military spouses offer social and emotional support to their families during MCT, but lack support resources tailored to their own needs (Cathcart, 2019; D'Aniello et al., 2017; Gil-Rivas et al., 2017; Marek & D'Aniello, 2014). Findings emphasized the support needs of military spouses during the transition out of service (American Psychological Association Communications Staff, 2011; Australian Government Department of Defence, 2023; Cathcart, 2019; Fossey et al., 2019; Keeling et al., 2019; Ohio Department of Alcohol & Drug Addiction Services, 2008; Porter et al., 2020), including peer support grieving groups and general social and emotional support for this unique transitional period (Marek & D'Aniello, 2014; National Academies of Sciences Engineering and Medicine, 2019). Results also highlighted the increased need for mental health services (D'Aniello et al., 2017; Eberhart et al., 2016; Glynn, 2013), including substance use programs for spouses and relationship counseling for military couples (Ohio Department of Alcohol & Drug Addiction Services, 2008; Porter et al., 2020; Schwartz et al., 2021). There was a particular emphasis on services supporting the veteran-spouse marital relationship during MCT (Fossey et al., 2019; Marek & D'Aniello, 2014; The Centre for Social Justice, 2016).

**Available resources.** Research from the US highlighted limited resources to support the military family's mental health needs during this time. Examples



Table 3. Peer-reviewed literature focusing on spouses and partners' transition experiences.

Author(s) & Year	Study Design	Method	Branch	Serving Status	Recruitment Methods	Inclusion Criteria	Exclusion Criteria	Final Sample	N	Main Findings
<i>Peer Reviewed</i>										
<i>Theoretical Papers</i>										
Gil-Rivas et al., 2017	Theoretical	Theoretical review of factors influencing military family reintegration	Not reported	AD, Veteran	-	-	-	-	-	NATO nations should consider funding research in this area and adopting principles outlined in this chapter. Research should include military families to help develop programs or interventions. Growing psychological needs of military families; need family-centered care in VA
Glynn, 2013	Theoretical	Opinion essay of SM/veteran family literature	Not reported	AD, Veteran	-	-	-	SM/Veteran, military & veteran families	-	Targeted, military spouse transition services needed.
Keeling et al., 2019	Theoretical	Conceptual, peer reviewed journal	Not reported	Veteran	-	-	-	Veterans' spouses	-	Presence of PTSD symptoms positively influence transition stress for SM & partner
<i>Quantitative Papers</i>										
D'Aniello et al., 2017	Cross-sectional	Questionnaire	Army National Guard, Army Reserve, Navy	AD, NG	Convenience sampling during military event	SM in long term relationship w/ $\geq 1$ long-term deployment/had at least one minor child; partner in long-term relationship w/ SM w/ $\geq 1$ long-term deployment/had at least one minor child	Not reported	Service members male & female, av. age 33.3 yrs.; SM Spouses/ partners male & female, av. age 31.9 yrs.	84 couples	Presence of PTSD symptoms positively influence transition stress for SM & partner

(Continued)

**Table 3. (Continued).**

Author(s) & Year	Study Design	Method	Branch	Serving Status	Recruitment Methods	Inclusion Criteria	Exclusion Criteria	Final Sample	N	Main Findings
Marek & D'Aniello, 2014	Cross-sectional	Questionnaire	Not reported	Not reported	Convenience sampling during military family reintegration support events	SM parent to ≥ 1 minor child & 1 ≥ deployment; Partner parent to ≥ 1 minor child & in relationship with SM w/ 1 ≥ deployment then subsequent reintegration	Not reported	SM av. age 35.5 yrs.; Partner av. age 35.0 yrs.	380 veterans; 295 partners	SM & partners who report presence of PTSD & report their own and respective partner's mental health low, are more likely to have more transition stress
Porter et al., 2020	Cohort	Questionnaire, transaction/ personnel records	Navy/Coast, Army, Air Force, Marine Corps, Guard	AD	Secondary data analysis of Millennium Cohort Study & Cohort Family Study	SM within 2–5 years of military service	Dual military couples, SM already separated from service, no longer married at baseline, missing alcohol measure responses	SM 62% age 25–34 yrs.; Spouse 61.6% age 25–34 yrs.	7965 opposite sex, married couples	SM alcohol misuse more predictive of military separation than spousal misuse; need for spousal SUD programs; both partners' binge drinking conveyed a marginally increased risk of military separation' with spouse drinking linked to dissatisfaction with military life.
Sherman et al., 2018	Randomized Control Trial	Questionnaire (baseline and 6-week posttest survey), <i>Sesame Street for Military Families: Transitions Program</i>	Not reported	AD, Veteran	Flyers, e-mails, social media with outreach assistance from a wide variety of military-focused organizations	Have ≥ child age 3–7 yrs., ≥ 1 military caregiver who has either transferred out of the military in the past 18 months (veteran) or was planning to transfer out of the military in the next 18 months (AD)	Not reported	Caregivers avg. age 34 yrs. (57% biological mothers), 96% mothers married to the veteran or AD SM; Children avg. age 4.8 yrs., 57% female	200 military families (one caregiver responding for each family)	Program increased caregiver self-efficacy in helping child cope w/ transition; reduction in child's behavioral/emotional/inattention problems

(Continued)

**Table 3. (Continued).**

Author(s) & Year	Study Design	Method	Branch	Serving Status	Recruitment Methods	Inclusion Criteria	Exclusion Criteria	Final Sample	N	Main Findings
Sherman & Larsen, 2018	Program evaluation	Program evaluation	Not reported	Veteran	-	-	-	Manualized psychoeducation provider programs; manualized family education curricula; online and phone-based resources for veteran families	14 programs	More research needed to examine short and long-term impact of military family transition programs
<i>Qualitative Papers</i> Cathcart, 2019	Cross-sectional	Interviews, questionnaire	Not reported	Veteran	Not reported	Veteran medically released from CAF between 2012–2017, served more than 15 yrs., officer or noncommissioned officer, male & female, served in any environments	Not reported	Not reported	5 qualitative interviewees; 50 online questionnaire responders	Military family-specific social support/resource needs during transition
Eberhart et al., 2016	Program evaluation, Cross-sectional	Focus group, interview, service utilization data	Not reported	Veteran	Patients of evaluated military clinic	Not reported	Not reported	Veterans, family members of veterans, staff & administrators, leadership	6 male veterans; 9 female family members	Need for provider military competency, military family-centered care

(Continued)

**Table 3. (Continued).**

Author(s) & Year	Study Design	Method	Branch	Serving Status	Recruitment Methods	Inclusion Criteria	Exclusion Criteria	Final Sample	N	Main Findings
Schwartz et al., 2021	Cross-sectional	Focus group, interview	Navy, Army, Air Force, combined service branch	Veteran	Convenience sampling through Military Family Resource Centers, philanthropic organization, social media channels, VA Canada, philanthropic organizations	Heterogeneity of geography, rank, SM length of service, type of service, type/frequency of deployments, type of service, time since release, gender, mental health condition	Not reported	Female & male family members, av. age 42.6 yrs.	36 family members (spouses, partners, adult children, parents, siblings, individuals considered family) of veterans	Military family transition process is negatively compounded by barriers in access to military/VA-funded resources/care
<i>Non-peer reviewed contracted reports</i> Heaver et al., 2018	Report	Case study, survey, evaluation of services	Not reported	Veteran, SM	Facebook for survey & British Forces Broadcasting Service television, radio, social media, printed literature and families' federations' networks for the case studies	Family friendly support services around the transition to civilian life & Families in transition (Foreign & Commonwealth Service Leavers, Wounded, Injured or Sick, and Early Service Leavers)	Not reported	Family members who were either due to leave or had left in the past two years	70 information, advice or support services 168 online surveys 21 family case studies	Families want to be involved in their Service leaver's transition. Transition support could be developed specifically for families. The impact of support interventions needs to be measured
National Academies of Sciences Engineering and Medicine, 2019	Consensus study report	-	Not reported	Veteran, SM	-	-	-	-	-	Military-related events can impact SM & family/subsystems

(Continued)

**Table 3. (Continued).**

Author(s) & Year	Study Design	Method	Branch	Serving Status	Recruitment Methods	Inclusion Criteria	Exclusion Criteria	Final Sample	N	Main Findings
Smart et al., 2018	Report, Cohort	Survey, interview	Navy, Army, Air Force	AD, Veteran	Secondary analyses of family respondents in Transition and Wellbeing Research Programme's Mental health and Wellbeing Transition Study (MHWTS); family members nominated by service member via MHWTS questionnaire responses	Not reported	Not reported	71% spouses/partners; 28–47 yrs.; 80% of SMs adult children and 50% of veterans' children 18–27 yrs. old; 70% parents of SMs ≥ 58 yrs., veterans approx. 48–57 yrs. old	1387 family members (983 spouses/partners; 275 parents; 107 adult children)	Military families require clearer & more targeted communication during transition/more proactive service provision

(Continued)

**Table 3. (Continued).**

Author(s) & Year	Study Design	Method	Branch	Serving Status	Recruitment Methods	Inclusion Criteria	Exclusion Criteria	Final Sample	N	Main Findings
Sondergaard et al., 2016	Report	Systematic Review	Not reported	Veteran	12 search databases, manual scan of 65 'participant' organizations (government bodies, charities, academic institutions and 'other')	Literature: engagement w/ families, family breakdown, housing support, spousal employment; Population: families of current service members/leavers, families of service leavers	Literature: Research not concerned w/ the review areas specified in the inclusion criteria; Population: not concerned with the population specified in the inclusion criteria	Not reported	4,731 systematic review sources; 739 gray literature sources	More comparative & longitudinal research examining military family transition; Evaluating & monitoring of various transition support services
The Centre for Social Justice, 2016	Report	-	Not reported	Veteran	-	-	-	-	-	Government must provide/ improve services to support military family unit



**Table 4.** Gray literature focusing on spouses and partners' military to civilian transition experiences.

Author(s) & Year	Publication Type	Source	Program/Policy	Program/Policy Launch Year	Program/Policy Goals
Alabama Department of Mental Health & Mental Retardation, 2009	Newsletter	The University of Alabama Child Development Resources/ The Alabama Children's Trust Fund	Reintegration Action Plan (RAP)	2008	<ul style="list-style-type: none"> <li>Resource booklet containing strategies to facilitate successful transition and obtaining professional assistance to ease MCT of veterans and their families</li> </ul>
Australian Government Department of Defence, 2023	Transition Guide Manual	The Australian Government: Department of Defense	ADF Member and Family Transition Guide	2020	<ul style="list-style-type: none"> <li>To provide resources for SIM/Veteran and military families during the MCT</li> </ul>
American Psychological Association Communications Staff, 2011	Press Release	American Psychological Association Practice Central	Give an Hour	2005	<ul style="list-style-type: none"> <li>National network of volunteer mental health professionals providing services to military members, veterans, and their families experiencing psychological effects of combat, deployment, and reintegration into society after serving in Iraq and Afghanistan</li> </ul>
Charlton, Thomas T., 2017	Press Release	US Department of Defense Information/Joint Base Charleston Public Affairs	Hiring our Heroes	2011	<ul style="list-style-type: none"> <li>Program to assist transitioning service members and military spouses in finding employment outside the military</li> </ul>
Department of Defense (DoD) News, 2018	Press Release	Department of Veterans Affairs; Military OneSource	Military OneSource	2018	<ul style="list-style-type: none"> <li>Benefits extended to 365 days after retirement from military (vs. 180)</li> <li>Services include relocation help, tax support, financial planning, health and wellness coaching, confidential nonmedical counseling, specialty consultations for spouse employment, education, adoption, elder care, special needs</li> </ul>
Fossey et al., 2019	Book Chapter	Book: Military Veteran Reintegration Approach, Management, and Assessment of Military Veterans Transitioning to Civilian Life	Military Family Systems Model z	2019	<ul style="list-style-type: none"> <li>Findings of pan-NATO survey on families, other relevant literature</li> <li>Not enough is known about the transition experiences of military families</li> <li>Military families in NATO nations should be consulted when developing transition policies and programs for military family transition</li> </ul>
Ohio Department of Alcohol & Drug Addiction Services, 2008	Press Release	Ohio Department of Alcohol & Drug Addiction Services	OHIOCARES	2008	<ul style="list-style-type: none"> <li>Enhance the safety net of behavioral health services available for military personnel and their families during MCT</li> </ul>

(Continued)

**Table 4. (Continued).**

Author(s) & Year	Publication Type	Source	Program/Policy	Program/Policy Launch Year	Program/Policy Goals
Shelton, Charlene, 2010	Press Release	US Department of Defense Information/Army Career and Alumni Program	Army Career and Alumni Program	2010	<ul style="list-style-type: none"> <li>• Provides soldiers and their families with information and employment assistance during MCT</li> </ul>
Sorngorger, J., Glynn, S. M., Lester, P., 2013	Conference Abstract	American Psychological Association 2013 Convention Presentation	Welcome Back Veterans Family Resilience Center	2013	<ul style="list-style-type: none"> <li>• Engages and supports existing systems aiding with mental and physical health care and reintegration stress of veterans and military families during MCT</li> </ul>
White House Press Release, 2016	Press Release	White House Press Releases	Working Group on Fair Practices in Veterans Education and Training Programs	2016	<ul style="list-style-type: none"> <li>• Develop policies to further goals of veteran/spousal/family education and employment resources during service/after retirement</li> <li>• Promote fair practices in education and training institutions serving service members veterans, eligible spouses, and other family members</li> </ul>
White House Press Release, 2013	Press Release	White House Press Releases	Joining Forces	2013	<ul style="list-style-type: none"> <li>• US companies committed to implementing strategic hiring practices to hire military veterans and their spouses</li> </ul>





**Table 5.** Main findings from scoping review on military families during the military to civilian transition.

Major Themes	Needs of military families during transition to civilian life	Current services/policies provided to military families during MCT	Synthesis of inclusion strategies for military families during MCT	
Mental Health	<ul style="list-style-type: none"> <li>Supporting marital relationship<sup>9, 13, 25</sup></li> <li>Mental health services for spouses/families<sup>3, 6, 11, 16</sup> <ul style="list-style-type: none"> <li>Substance use programs for spouses<sup>16, 17, 25</sup></li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Sesame Street Virtual Adventure Campaign Program<sup>21</sup></li> <li>Tragedy Assistance Program for Survivors (TAPS)<sup>13</sup></li> <li>Give an Hour<sup>2</sup></li> </ul>	<ul style="list-style-type: none"> <li>Social support for SM<sup>13</sup></li> <li>Family-based transition support<sup>15, 25, 23</sup></li> <li>Military culture extends throughout the family<sup>9</sup></li> <li>Family-centered engagement strategies<sup>4, 12</sup></li> </ul>	
Barriers to Care	<ul style="list-style-type: none"> <li>Military cultural competence from providers<sup>8, 13, 20, 25</sup> <ul style="list-style-type: none"> <li>Mental health literacy<sup>18</sup></li> </ul> </li> <li>Public/private partnerships for care<sup>8</sup></li> <li>Accessibility/coordination of services<sup>6, 10</sup></li> <li>Long-term support for military families<sup>10</sup></li> <li>Targeted, personalized assistance for medical discharges<sup>22</sup></li> <li>Unique needs of differing family structures<sup>8, 12, 15</sup></li> </ul>	<ul style="list-style-type: none"> <li>Family-centered VA care<sup>11</sup></li> <li>Minimize unique military barriers to care access<sup>5, 18</sup> <ul style="list-style-type: none"> <li>Veteran mental health stigma<sup>20</sup></li> <li>Caregiver burnout<sup>21</sup></li> </ul> </li> <li>Civilian military cultural competence<sup>20</sup></li> <li>Military children school support/evaluation on potential competence gaps<sup>12, 15, 25</sup></li> </ul>	<ul style="list-style-type: none"> <li>Principles of Excellence for Educational Institutions Serving Service Members, Veterans, Spouses, and Other Family Members<sup>5, 6</sup></li> <li>Hiring our Heroes<sup>5</sup></li> <li>Army Career and Alumni Program<sup>19</sup></li> <li>Joining Forces<sup>27</sup></li> <li>Veteran Family Transition Program*</li> <li>Reintegration Action Plan (RAP)<sup>1</sup></li> <li>Welcome Back Veterans Family Resilience Center<sup>24</sup></li> <li>Military OneSource<sup>7</sup></li> </ul>	<ul style="list-style-type: none"> <li>Financial support of spouse as SM transitions<sup>6, 23, 25, 27</sup></li> <li>Spousal supports family via second income<sup>25</sup></li> <li>Hub at VA for families recently transitioned<sup>25</sup></li> <li>Spousal support during transition<sup>25</sup></li> </ul>
Financial Needs	<ul style="list-style-type: none"> <li>Spousal education and employment opportunities<sup>5, 13, 19, 23, 25, 26</sup></li> <li>Job training/Continuing Education<sup>5, 19, 25, 26</sup></li> <li>Military specific family financial literacy<sup>12, 23</sup></li> </ul>	<ul style="list-style-type: none"> <li>Online formal/informal resources<sup>1, 7, 12, 18</sup></li> <li>Transition-specific services for military families<sup>4, 7, 12, 15, 24</sup></li> <li>More proactive service provision for adult children and spouses (AUS)<sup>22, 24</sup></li> <li>Family transition hub at bases<sup>25</sup></li> </ul>	<ul style="list-style-type: none"> <li>Principles of Excellence for Educational Institutions Serving Service Members, Veterans, Spouses, and Other Family Members<sup>5, 6</sup></li> <li>Hiring our Heroes<sup>5</sup></li> <li>Army Career and Alumni Program<sup>19</sup></li> <li>Joining Forces<sup>27</sup></li> <li>Veteran Family Transition Program*</li> <li>Reintegration Action Plan (RAP)<sup>1</sup></li> <li>Welcome Back Veterans Family Resilience Center<sup>24</sup></li> <li>Military OneSource<sup>7</sup></li> </ul>	<ul style="list-style-type: none"> <li>Financial support of spouse as SM transitions<sup>6, 23, 25, 27</sup></li> <li>Spousal supports family via second income<sup>25</sup></li> <li>Hub at VA for families recently transitioned<sup>25</sup></li> <li>Spousal support during transition<sup>25</sup></li> </ul>
Targeted Transition Support	<ul style="list-style-type: none"> <li>Specific caregiver needs (CA)<sup>4, 18</sup> <ul style="list-style-type: none"> <li>Childcare<sup>18</sup></li> <li>Support programs<sup>4</sup></li> </ul> </li> <li>Better preparation for transition<sup>12, 22, 25</sup></li> <li>Improved communication about transition w/ families<sup>12, 22</sup></li> <li>Service provider engagement w/service leavers (UK)<sup>23, 24</sup> <ul style="list-style-type: none"> <li>Engagement w/military families<sup>23, 24</sup></li> <li>Housing needs (facilitating housing)<sup>3, 23</sup></li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Principles of Excellence for Educational Institutions Serving Service Members, Veterans, Spouses, and Other Family Members<sup>5, 6</sup></li> <li>Hiring our Heroes<sup>5</sup></li> <li>Army Career and Alumni Program<sup>19</sup></li> <li>Joining Forces<sup>27</sup></li> <li>Veteran Family Transition Program*</li> <li>Reintegration Action Plan (RAP)<sup>1</sup></li> <li>Welcome Back Veterans Family Resilience Center<sup>24</sup></li> <li>Military OneSource<sup>7</sup></li> </ul>	<ul style="list-style-type: none"> <li>Principles of Excellence for Educational Institutions Serving Service Members, Veterans, Spouses, and Other Family Members<sup>5, 6</sup></li> <li>Hiring our Heroes<sup>5</sup></li> <li>Army Career and Alumni Program<sup>19</sup></li> <li>Joining Forces<sup>27</sup></li> <li>Veteran Family Transition Program*</li> <li>Reintegration Action Plan (RAP)<sup>1</sup></li> <li>Welcome Back Veterans Family Resilience Center<sup>24</sup></li> <li>Military OneSource<sup>7</sup></li> </ul>	<ul style="list-style-type: none"> <li>Financial support of spouse as SM transitions<sup>6, 23, 25, 27</sup></li> <li>Spousal supports family via second income<sup>25</sup></li> <li>Hub at VA for families recently transitioned<sup>25</sup></li> <li>Spousal support during transition<sup>25</sup></li> </ul>

The reference numbers correspond to the numbered literature in Table 3.

\*A national peer-based program provided by The Veteran Spouse Network. Investigators felt it was important to include as it launched in Fall 2020 and is targeted support for veteran spouses/partners and their families during transition to civilian life. There are no current white papers about it.

of programs include the Sesame Street for Military Transition program, the Veteran Family Transition Program in certain parts of Texas, and the Welcome Back Veterans Family Resilience Center in Los Angeles, California (Marek & D'Aniello, 2014; Sherman et al., 2018; The University of Texas at Austin Institute for Military and Veteran Family Wellness, 2021; Wadsworth et al., 2013).

### **Barriers to care**

**Needs.** Sources noted that military families experienced barriers to accessing care during transition. One prominent barrier was the military cultural competency of civilian providers (Eberhart et al., 2016; Keeling et al., 2019; Sherman & Larsen 2018; The Centre for Social Justice, 2016). Military service exposes families to a unique set of stressors, including separations due to deployments and trainings and relocations which can uproot a family from schools and support systems (Chandra et al., 2010; Marini et al., 2018). Military culture also often involves stigma toward seeking and receiving health and particularly mental health care for the person serving and their families (Rubin et al., 2013). Family members reported gaps in military cultural competence that impacted their mental health treatment received from civilian providers (Eberhart et al., 2016; Keeling et al., 2019; Sherman et al., 2018; The Centre for Social Justice, 2016). Similarly, mental health stigma on the part of the veteran was also identified as a barrier (Michalopoulou et al., 2017). When a veteran is unwilling to get care, it can increase caregiver and family burden (Sherman & Larsen, 2018). Efforts to reduce mental health stigma were emphasized to aid not only veterans but also their caregivers and families during MCT (Sherman & Larsen, 2018; Sherman et al., 2018). Finally, the literature emphasized the need for greater accessibility, inclusivity, and coordination of MCT services (Fossey et al., 2019). This was especially true of families supporting a service member with a medical discharge (Sondergaard et al., 2016) and families with diverse structures (i.e., single parent, same sex couples; Fossey et al., 2019; Sondergaard et al., 2016).

**Available resources.** Researchers in the UK, the US, and Canada recommend building military cultural competence among general practitioners (Mushale & Bakerjian, 2021; Simpson & Leach, 2021; Tam-Seto et al., 2019). For example, the US has identified the need to train civilian nurses to be culturally sensitive to veterans' military servicethroughout treatment (Mushale & Bakerjian, 2021). Furthermore, the US literature highlighted successful public-private partnerships that provided military families with culturally competent and timely transition services (Eberhart et al., 2016).

### **Financial needs**

**Needs.** Studies emphasized a prominent need for more financial preparation for MCT, including spousal employment and educational services and opportunities (Keeling et al., 2019; Sondergaard et al., 2016; The Centre for Social Justice, 2016). The need for job training and continuing education for both veterans and spouses was also noted (Charlton, 2017; Keeling et al., 2019; Shelton, 2010; The Centre for Social Justice, 2016). Familial needs also included financial services to plan for the transition, including time spent unemployed or with a reduced income (Heaver et al., 2018).

**Available resources.** In the US, various organizations are available to military family members during MCT offering employment preparedness training and job opportunities. Examples of these programs include Hiring our Heroes, the Army Career and Alumni Program, and Joining Forces (Charlton, 2017; Shelton, 2010; White House Press Release (WHPR), 2013). Furthermore, the Principles of Excellence for Educational Institutions Serving Service Members, Veterans, Spouses, and Other Family Members is a federal policy, which promotes fair practices in educational/training institutions serving veterans and their families (WHPR, 2016).

### **Targeted transition support**

**Needs.** The findings highlight the need for transition-specific services and support resources from both the military and civilian sectors (Australian Government Department of Defence, 2023; Cathcart, 2019). Sources emphasized the need for more preparation and improved communication with families about the transition (Smart et al., 2018; The Centre for Social Justice, 2016). Due to systemic barriers and physical distance in rural areas that restrict in-person access, military families also expressed a specific need for online transition resources (Schwartz et al., 2021). Other specific needs expressed included childcare (Cathcart, 2019; Schwartz et al., 2021) as well as a military family transition hub on base in order to provide support during MCT (The Centre for Social Justice, 2016). In the UK, evaluations of transition programming called to attention the need for service providers to be more engaged with service leavers' specific needs such as the nature of why they left (i.e. medical discharge). Furthermore, the report highlighted the importance of engaging military families when developing policies and support programs (Heaver et al., 2018; Sondergaard et al., 2016).

**Available resources.** The UK, Canada, Australia, and New Zealand have different forms of nationalized health care that provides care to service members and their families, allowing these countries to systematically meet health-care needs across MCT (Australian Government Department of Defence, 2023;

National Academies of Sciences Engineering and Medicine, 2019; Sondergaard et al., 2016; The Centre for Social Justice, 2016).

Australia outlines a nationalized transition support process for military families through Defense Families Australia (Australian Government Department of Defence, 2023). Supports include a transition coach that provides guidance for up to 12 months post-transition and a one-time transition seminar that families can attend at any point during the service members' career. However, specific needs for more proactive service provision for military spouses and adult children within this programming have been expressed, as these two sub-populations are at greater risk for mental health problems than the average Australian population (Smart et al., 2018). Other countries do not appear to offer government-supported nationalized programs for military families during MCT (The University of Texas at Austin Institute for Military and Veteran Family Wellness, 2021).

Distinct from universal programs for transitioning families, there are specific emotional and financial programs. One example in the US is the Transitional Assistance Program for Survivors (TAPS), which is federally funded to provide free services to all family members and partners of those who are lost in action (Sherman & Larsen, 2018). Further, the US Military OneSource national online benefit program provides spousal employment consultations DoD News, (2018). Finally, state initiatives, such as the Reintegration Action Plan (RAP) in Alabama, provide a free, online toolkit, detailing MCT support services for veterans and their families (Alabama Department of Mental Health & Mental Retardation, 2009).

## Discussion

This scoping review identified limited empirical or gray literature regarding MCT from the perspective of the family. Within the existing literature, four main themes were identified: (1) mental health; (2) barriers to care; (3) financial needs; and (4) targeted transition support. The findings highlight the need for military families to be better prepared for MCT emotionally, culturally, financially, and practically.

One possible explanation for the paucity of the literature on this topic could be a tendency in military families research to conflate conceptually distinct experiences of transition, including transitions within the deployment cycle (Meadows et al., 2017) and transitions resulting from a change in duty station, which can involve disruptions in spousal employment, schooling, and access to community or social support structures (Meadows et al., 2017; Pye & Simpson, 2017). Generalizing across these different transitions limits the field's ability to understand the unique elements of the military to civilian transition. As this scoping review found, the needs of military families during this time include mental health support to help cope with the emotional transitions, potential changes in

schools for children, as well as changes in support structures for families. Another need is to minimize barriers to care, for example, finding a provider that is culturally competent in military life stressors and hesitancy around seeking and receiving care in general. Financial needs are prominent as the family has to deal with changes due to the service member's change in employment. Lastly, there is a need for more targeted transition support programs to help prepare families for this unique transition. There was particular emphasis on making these services available to rural military families through telehealth service as well as understanding the nature of why the family was leaving (i.e. medical discharge). One way to help distinguish MCT would be to incorporate the familial perspective into existing transition theories.

While there is extensive empirical and theoretical literature about how the MCT can impact the service member, existing theories do not include the family perspective (Castro & Kintzle, 2014, 2017; Pedlar et al., 2019; Thompson et al., 2017) and do not consider how the family is impacted by transition out of service. The results presented here suggest that MCT theories should expand to include how this unique transition can impact the entire military family system. For example, as this review highlights, military spouses are supports not only while the service member is actively serving but also during the transition out of service and beyond, illustrating that the transition trajectory of the military spouse and the health and wellbeing of a veteran are intertwined. Furthermore, this review highlights that military spouses have their own needs regardless of being a support to the veteran and that their life is impacted by this transition.

The MCT themes highlighted in this scoping review, mental health, barriers to care, and financial needs, are not unidirectional or experienced in isolation. For example, research shows the correlation between increased financial strain and mental health symptoms (see, French & Vigne, 2019 for systematic review). Military families who are experiencing increased financial needs due to MCT could also be coping with increased demands on their mental health. Research also shows that military spouses and service members who have more mental health symptoms can experience more barriers to care (Schvey et al., 2021; Sharp et al., 2015). Collectively, these bi-directional and comorbid issues further highlight the need for targeted MTC transition supports for military families.

Considering the lack of available resources for military families, studies highlight the need for family-centered services. While preliminary, findings highlight that services that include coping skills interventions may be effective in supporting military families. However, limited empirical evidence for the majority of these offerings suggests a need for more research to underpin policy and program development. This scoping review also highlights that when working with military families, it is important for clinicians to understand unique military stressors to provide the best care.

### ***Strengths, limitations & conclusions***

This is the first review to examine the perspectives of military families during MCT. This review included both gray and peer-reviewed literature to ensure the maximum number of sources were included in this review. This scoping review was limited to information available through the four databases used for searching. A broader search may lead to the identification of further articles. Additionally, this search was limited to the past 20 years focusing on post-9/11 era of military families, therefore excluding potential military family programs in earlier eras. However, this is unlikely as only one source was excluded from this review because it was published before 9/11/2001.

Future research should focus on understanding and incorporating the unique needs and experiences of the military family. As this scoping review revealed, these unique needs are bi-directional and include: specific mental health services, addressing unique barriers to care, financial guidance and opportunities, as well as targeted transition support to prepare for and cope with the variety of transitions that accompany leaving the armed forces. This scoping review found no literature on how family members may also experience transition differently with differential impacts on health and wellbeing. For example, spouses who remain distant from the military might find it easier to transition out of the service, whereas those who are very closely linked to the community may really struggle. There is also no research on how the age of the child could impact how difficult the transition out of service is for them. These areas should be explored in the future research.

Furthermore, research is needed to empirically test family-based interventions to ensure the provision of high-quality supportive services to military families during this critical time. Finally, future research should explore how the familial experience of MCT can vary contingent on how the service member left the service. For example, the transition could be sudden if the service member is medically discharged or planned years in advance if the service member chose to make a career in the armed forces.

### **Disclosure Statement**

All authors have no conflicts of interests to disclose.

### **Funding**

This review was conducted without funding as a part of an early-career PhD military research international collaboration between the University of Southern California Suzanne Dworak-Peck School of Social Work and King's College London.

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