

# Working with British Army Families: A Qualitative Study of Child Protection Practitioners' Views and Experiences

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## Short Report

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**'Identifies areas of 'good' child protection practice between military and civilian services, and highlights areas that require development'**

# Working with British Army Families: A Qualitative Study of Child Protection Practitioners' Views and Experiences

## KEY PRACTITIONER MESSAGES:

- Closed, often tight-knit army communities can potentially provide protective factors for children; however, this environment can make it difficult to seek help or to speak out when there are concerns about children's safety or wellbeing.
- The needs and experiences of non-serving parents (often female partners) can be overlooked unless, or until, child protection concerns are serious.
- Army-connected children benefit from accessing army and civilian health, education and welfare services; however, transitions and communication between these services need to be improved.

**KEY WORDS:** child maltreatment; child protection; British Army; information sharing; multidisciplinary working

## Introduction

Research or practice guidance about working with UK army families with complex needs is limited. This paper reports a study that explored the views and experiences of health, social work and education professionals who worked routinely with army families in the context of concerns about children's welfare and protection. Contributing to the evidence base about army families in the UK, it identifies areas of 'good' child protection practice between military and civilian services, and highlights areas that require development.

## The UK Armed Forces in the Context of Safeguarding

The British Army is a branch of the UK Armed Forces whose role is to defend the UK and its overseas and Crown territories, promote British interests and engage in international peace-keeping activities and humanitarian operations.

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In July 2019, full-time UK Armed Forces personnel numbered over 152 000, 56 per cent of whom were within the Army and the remainder was equally split between the Royal Navy/Royal Marines and the Royal Air Force (Dempsey, 2018). Over half (54%) of the population are married/within a civil partnership, 21 per cent are in long-term relationships and 52 per cent have children who they support financially (Ministry of Defence (MoD), 2019). While military-connected children are heterogeneous and often benefit from growing up within a close-knit and stable community, their families face unique and multiple challenges that can exert a toll on individuals and relationships. It is not known how many military children there are in the UK owing to inconsistencies in census and school records (McCullough and Hall, 2016). Therefore, no robust data about rates of child abuse and neglect in the UK military exist. The military community, including close family members, is supported by the Armed Forces Covenant: a moral commitment from the government to recognise the sacrifice made by those who have served and ensure that they and their families should face no disadvantage compared to civilians (MOD, 2014). It is not always clear, however, what support should be provided through the Covenant. The UK Armed Forces are committed to cooperating with statutory agencies in supporting military families, and have internal procedures to help safeguard and promote the welfare of children. In areas with a high military population, representatives from the armed forces are members of local safeguarding children boards, for example, the Army Welfare Service has child protection-trained social workers who take part in local child safeguarding forums (Byrne, 2017).

**‘Families face unique and multiple challenges that can exert a toll on individuals and relationships’**

### **Research about Military-Connected Children and Families**

Although there are important differences between the military branches in terms of the nature of their work, disciplinary structure and working culture, there are few studies about army families in particular. Thus it is necessary to consider research on UK military families more generally. Over the past decade, a growing number of such studies have been undertaken (e.g. Gribble, 2017; MoD, 2020; Pye and Simpson, 2017; Thandi *et al.*, 2017). Studies by the King's Centre for Military Health Research have provided insights into: military children's wellbeing (Williamson *et al.*, 2018); the prevalence and risks of unaddressed needs in the military community, including increased risk of mental health problems, alcohol use and aggression (Gribble *et al.*, 2019; Turgoose and Murphy, 2018); experiences of partners who support military-traumatised personnel (Murphy *et al.*, 2017); and transgenerational transmission of traumatic and moral injury (Jones, 2018). These studies identify factors that affect how adults experiencing trauma and stress may face problems maintaining intimate relationships and providing consistent and emotionally responsive care to their children.

Writing about young military-connected children within the USA, Osofsky and Chartrand (2013) identified risk factors that may also apply to the UK context, including the impact of deployment on attachment, change and loss, emotional availability and depression, child maltreatment and domestic violence, and stress during pregnancy. Children may be adversely affected by regular periods of separation from their parents and regular moves, and the

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**‘The fieldwork phase of the study took place in two large army garrison towns, in different parts of England, in 2017’**

potential upheaval that this causes to their social and educational life (MoD, 2020). Older children may experience heightened feelings of anxiety through their ability to recognise the risks associated with deployment (Osofsky and Chartrand, 2013). If parents suffer injury, children may experience bereavement and changing family roles (Thandi *et al.*, 2017). Non-serving parents play a critical role in mitigating the impact of disruption on children's lives and wellbeing (Osofsky and Chartrand, 2013). However, parents' decision-making and help-seeking in relation to their children can be affected by their own wellbeing, the absence or presence of their serving partners and the quality of that relationship, or fear of negative repercussions for their partners and social stigmatisation within the community (Bernthal *et al.*, 2015; Murphy *et al.*, 2017). Information on the extent of domestic abuse within the UK military community is lacking, however, it is widely accepted that risk factors which are known to show a correlation with domestic abuse and barriers to disclosing abuse exist (MoD, 2020). Military connection appears to have an indirect effect on child outcomes: it is the effect of the military setting on the child's parent that better explains child–parent interaction and attachment, and therefore child outcomes (Palmer, 2008; Riggs and Riggs, 2011).

### Study Aims

The principal aim of this study was to advance knowledge and understanding of military children's needs in the context of child welfare and protection concerns. We did this by exploring the views of health, social work and education practitioners about what is working well, and not so well, in terms of current service provision to military families.

### Methods

#### *Interviews and Focus Groups*

The study was commissioned by the NSPCC to identify the health, social and emotional developmental needs of army-connected children. The fieldwork phase of the study took place in two large army garrison towns, in different parts of England, in 2017. Formal interviews (using a semi-structured interview guide) were held to explore the understanding and experiences of professionals working with army families, as well as their perceptions of the child protection issues that arise for them. A total of 18 interviews took place, which involved local NHS, education, family support and social work professionals. Six focus groups involving 18 participants were also held with broader groups of local authority staff in both geographical areas to consider any learning from practice that they have gained in working with army families in the area. All those involved in interviews or focus groups had direct experience of working with military children and families, and a significant number volunteered that they had experience of military life in their own right.

### ***Ethical Issues***

The study was approved by four separate ethical review research committees, as required by the research team's employing organisations and those of the study participants. All participants received written information about the study prior to interviews and focus groups taking place, and the researcher (JH) revisited key issues relating to consent, confidentiality, management of records and withdrawal of consent prior to the conduct of the interviews and focus groups. Participants could contact the research team following their involvement should participation raise any questions or concerns for them in a personal or professional capacity.

### ***Analysis of Transcripts***

The interview and focus group sessions were carried out by JH and were audio-recorded and transcribed. JT, CBJ, NM and LI contributed to the analysis of the transcripts using a thematic analysis approach, as characterised by Braun *et al.* (2019). JH and JT identified the principal themes and codes; and following a second 'layer' of analysis, all members of the research team discussed and developed the themes, exploring areas of disagreement and consensus.

### **Findings**

#### ***Professionals' Views of Risk and Resilience in a 'Closed' Community***

Participants emphasised that there were several, often understated benefits of growing up in the army community. Principal advantages included a strong sense of belonging to a stable network of family and peer support. Children's sense of belonging was also thought to be bolstered by a strong emphasis on self-reliance, community loyalty, personal discipline and adherence to shared behavioural norms. In this environment, participants suggested, children learnt early on how to take on age-appropriate roles and to make secure peer relationships, potentially lessening their reliance on their parents. As one family support worker commented:

'Army life helps children and young people learn to self-regulate and to behave in socially-accepted ways.'

This was echoed by a colleague's view that:

'Children keep each other supported, with mutual recognition of their worries and expressions of support, verbal and at times physical, as well as through jokes and sharing stories.'

Nevertheless, it was acknowledged by practitioners that close-knit communities could inhibit children and adults discussing problems and seeking help for fear of being judged or marginalised by peers. For children experiencing abuse and neglect, participants identified that the culture of privacy could risk their needs going unnoticed until they became more serious. Running through participants' accounts was a consistent message that the differences between army and civilian children should not be overemphasised,

**'Close-knit communities could inhibit children and adults discussing problems and seeking help for fear of being judged or marginalised by peers'**

particularly in the context of child welfare and child protection concerns. In the words of one health participant, they are 'the same but different'. That is, while army children's experiences of family and peer relationships were, for example, different in some important respects from those of civilian children, these differences should not be overstated or generalised. In fact, many participants wanted to emphasise the importance of not stigmatising or making assumptions about army children and families, particularly in the context of child protection support. Participants thus sought to underline the continuities in their work supporting civilian and army families.

### *The Visibility and Autonomy of Partners of Serving Personnel*

Just as for children, participants identified strengths and limitations for partners living in a garrison community. Advantages included ready access to peer support and safe spaces for communal play and co-supervision of children. Nevertheless, the close-knit community could also give rise to a lively gossip culture that, in the context of child protection concerns, could be experienced as one of social policing. Reflecting on the issues affecting partners of serving personnel, one family support worker drew on her own experiences of military life, commenting that:

'Coming from the same background I know that young army mums are often unwilling to talk about problems or worries with others in case the officers' wives told their husbands.'

This could lead to a sense of powerlessness and anxiety for parents, particularly when they were struggling. On a practical note, it also meant that many partners were isolated from familial and non-army social support, and that as one social worker commented: 'army families are not always in control of their own destinies'.

Participants also highlighted that serving personnel's partners were not very visible in army life, and that there were few services dedicated to them. This spoke to a wider cultural attitude that partners and children were peripheral parts of army life unless, or until, they had considerable problems, such as being the victim of domestic abuse or there were concerns about their parenting. This view was typified by participants' comments such as: 'the wife and family are just add-ons' and 'the army is your family - your wife and children are incidental'.

Participants reported, in this context, that army partners may have less autonomy and ability to speak out about problems in their relationship or home life because of the informal surveillance that exists between families, and to a certain degree between non-serving women, living in an army community. These reflections by professionals raise questions about the extent to which (often female) partners are able to seek formal or informal support from people 'outside' the army context and the potential challenges that this may create in building trusting relationships with child welfare and protection services.

### *Transitions, Connections and Gaps in Army and Civilian Support Services*

Interview and focus group participants emphasised the need for civilian and army services to work both separately and together. The role of civilian services is evident given that the British Army does not provide direct education, health

**'Army partners may have less autonomy and ability to speak out about problems in their relationship or home life'**



and welfare services to personnel's partners or children, although it was recognised that army services had, over the past decade, become more sensitive to the needs of families and partners. As one social worker and one health participant noted: 'army welfare workers are becoming a lot more visible'; and 'I do not feel the army closes rank over child protection issues nowadays'.

Study participants (who worked in army garrison towns) widely considered army-civilian partnerships to be broadly effective and to have evolved in response to the needs of families living in the towns. It was widely acknowledged that school staff played a key role, as they were often the first civilian adults that army children encountered, and they were frequently the first point of referral for concerns about abuse and neglect. As one social worker participant commented, garrison schools were:

'much more like inner city schools than rural schools despite their location and as a consequence they have developed real skill in dealing with vulnerable families.'

Nevertheless, participants flagged concerns that children with additional emotional and behavioural needs, and children who were leaving army life were more vulnerable to getting 'lost' in the gaps between civilian and army provision. Several participants highlighted the importance of better 'tracking' of children and young people during their army life and, critically, after their parent's demobilisation, when they may face challenges adjusting to living in civilian communities. Participants highlighted that there was a lack of strategic planning across agencies for children and young people as they transitioned in and out of army communities, coupled with a paucity of dedicated funding or support pathways. This in turn limited the opportunities to provide timely and proactive support to children and families.

## Discussion

This study makes a contribution to the limited knowledge base about British Army families who need and are in receipt of child protection services. The study's principal limitation is that it explores only the views and experiences of health, education and social work professionals *about* army families. There is an evident need for future research to focus on, and work with, army children and families. Usefully, this could explore their needs and experiences, while being sensitive to the issues that families may face while still part of the army community.

In this study, participants emphasised that their work with the unique, complex nature of army families overlapped in numerous ways with their work with civilian families. Participants did not consider that army families were more 'vulnerable', or that army children were more at risk of abuse or neglect. This finding is noteworthy given that it does not place the same emphasis on parental mental health needs and risk factors for domestic abuse within army relationships as indicated by the research literature (MoD, 2020). Furthermore, participants stressed that while there were challenges involved in interagency working, these were comparable with those in the civilian-only context. This view was nevertheless potentially at odds with participants' views that army life is underpinned by powerful institutional and interpersonal power structures

**'Army services had, over the past decade, become more sensitive to the needs of families and partners'**

**'There was a lack of strategic planning across agencies for children and young people as they transitioned in and out of army communities'**

**‘Professionals [need to] understand the different cultural and social context in which army life is shaped’**

that are likely to affect the timing and nature of child protection referrals and working relationships between civilian and army agencies.

Nevertheless, practitioners did emphasise that identifying and responding to army children at risk of harm and abuse requires that professionals understand the different cultural and social context in which army life is shaped. For example, recognising the challenges and benefits of living in a ‘closed’, highly regulated society with clear behavioural norms, and how this environment may contribute to some children's ability to adapt and thrive despite moving home, being frequently separated from one parent, and coping with parental disability or death. However, further research is needed to substantiate such a view. Finally, this study identifies a need to develop understanding about the potential vulnerability of non-serving parents who can become socially and institutionally ‘invisible’ and who, not infrequently, provide care and support for a partner who has experienced complex trauma. This is likely to be a small group who nevertheless require enhanced and timely support, as may their children.

With limited national policy or guidance, child protection work with army families relies on close cooperation between local agencies and a small number of professionals who have experience working in garrison towns. To ensure that all army children are consistently supported and, critically, that ex-army children do not face additional or undue risks when they leave the army, the gaps in the policy and provision net need to be better understood and closed. We hope that this study advances knowledge of the needs of army children in the context of child welfare and protection issues, and serves as a useful base to direct future research, practice and policy development for army families and their children.

### **Conflict of interest**

There are no conflicts of interest.

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### **References**

- Berenthal EM, Lathlean J, Gobbi M, Simpson RG. 2015. Mothers' decision-making during times of stress as a lone parent: A qualitative study. *BMJ Military Health* **161**: i26–i33. <https://doi.org/10.1136/jramc-2015-000526>
- Braun V, Clarke V, Hayfield N, Terry G. 2019. Thematic Analysis. In *Handbook of Research Methods in Health Social Sciences*, Liamputtong P (ed). Springer: Singapore; 843–860.
- Byrne A. 2017. *Supporting military families: Learning from case reviews*. NSPCC Knowledge and Information Service: London.
- Dempsey N. 2018. *UK Defence Personnel Statistics*. House of Commons Library: London.
- Gribble RJ. 2017. What's it like to have a partner in the military?: The social and psychological experiences of women. Doctoral dissertation, King's College London.
- Gribble RJ, Goodwin L, Fear NT. 2019. Mental health outcomes and alcohol consumption among UK military spouses/partners: A comparison with women in the general population. *European Journal of Psychotraumatology* **10**: 1–13. <https://doi.org/10.1080/20008198.2019.1654781>



- Jones E. 2018. Trans-generational transmission of traumatic memory and moral injury. *Military Behavioral Health* 6(2): 134–139. <https://doi.org/10.1080/21635781.2018.1454362>
- McCullough J, Hall M. 2016. *Further and Higher Progression for Service Children*. The University of Winchester: Winchester. Available: [https://www.scipalliance.org/assets/files/UoW-research-paper\\_Further-and-Higher-Progression-for-Service-Children.pdf](https://www.scipalliance.org/assets/files/UoW-research-paper_Further-and-Higher-Progression-for-Service-Children.pdf) [12 February 2021].
- Ministry of Defence. 2014. The Armed Forces Covenant. Available: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/49469/the\\_armed\\_forces\\_covenant.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/49469/the_armed_forces_covenant.pdf) [12 February 2021].
- Ministry of Defence. 2019. UK Regular Armed Forces Continuous Attitude Survey Results 2019. Available: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/811689/Armed\\_Forces\\_Continuous\\_Attitude\\_Survey\\_2019\\_Main\\_Report.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/811689/Armed_Forces_Continuous_Attitude_Survey_2019_Main_Report.pdf) [12 February 2021].
- Ministry of Defence. 2020. Living in our shoes: Understanding the needs of UK Armed Forces Families. Available: <https://www.gov.uk/government/publications/living-in-our-shoes-understanding-the-needs-of-uk-armed-forces-families> [12 February 2021].
- Murphy D, Palmer E, Hill K, Ashwick R, Busuttill W. 2017. Living alongside military PTSD: A qualitative study of female partners' experiences with UK Veterans. *Journal of Military, Veteran and Family Health* 3(1): 52–61. <https://doi.org/10.3138/jmvfh.4011>
- Osofsky JD, Chartrand LCMM. 2013. Military children from birth to five years. *The Future of Children* 23(2): 61–77. <https://doi.org/10.1353/foc.2013.0011>
- Palmer C. 2008. A theory of risk and resilience factors in military families. *Military Psychology* 20(3): 205–217. <https://doi.org/10.1080/08995600802118858>
- Pye RE, Simpson LK. 2017. Family functioning differences across the deployment cycle in British Army families: The perceptions of wives and children. *Military Medicine* 182(9–10): e1856–e1863. <https://doi.org/10.7205/MILMED-D-16-00317>
- Riggs SA, Riggs DS. 2011. Risk and resilience in military families experiencing deployment: The role of the family attachment network. *Journal of Family Psychology* 25(5): 675–687. <https://doi.org/10.1037/a0025286>
- Thandi G, Oram S, Verey A, Greenberg N, Fear NT. 2017. Informal caregiving and intimate relationships: The experiences of spouses of UK military personnel. *Journal of the Royal Army Medical Corps* 163(4): 266–272. <https://doi.org/10.1136/jramc-2016-000679>
- Turgoose D, Murphy D. 2018. Anger and aggression in UK treatment-seeking veterans with PTSD. *Healthcare* 6(3): 86–97. <https://doi.org/10.3390/healthcare6030086>
- Williamson V, Stevelink SA, Da Silva E, Fear NT. 2018. A systematic review of wellbeing in children: A comparison of military and civilian families. *Child and Adolescent Psychiatry and Mental Health* 12(1): 46–57. <https://doi.org/10.1186/s13034-018-0252-1>