

## Geographic moves take a toll on kids' mental health

March 21 2014, by Valerie Debenedette



Children in military families who relocate have an increased odds of suffering mental health problems, finds a large new study in the *Journal of Adolescent Health*.

The findings are from a study of medical records from the Military Health System Medical Data Repository of more than half a million children of active duty U.S. service personnel in 2008. The study controlled for factors such as the mental health of the parents and the branch of service and rank of the military parent.

About 25 percent of the 548,366 children of military parents included in the study moved during the study period, said Lieutenant Commander



Jeffrey Millegan, M.D., MPH, head of the Mind Body Medicine Program at the Naval Medical Center in San Diego and lead author of the study. The actual number of children of all military personnel who moved during that year is higher, since the lower age cut-off was age 6, he noted.

Geographic moves have been reported to have a negative impact on the mental health of children, but it is often difficult to separate the effect of the move from the circumstances that caused it. Since moves are common in military families, but parental employment and healthcare coverage remain constant, this study group offered a way to look more closely at the impact of a move on mental health status in children.

The military children who moved in 2008 were significantly more likely to have a mental health care visit in 2009 than military children who did not move. This was true for outpatient visits, emergency room visits and psychiatric hospitalization. This increase in mental health problems was somewhat surprising, given previous research has suggested that children of military families do very well psychologically with geographic moves. The discrepancy may be because these prior studies were surveys of military parents and therefore more likely to be affected by reporter bias.

Adolescents who moved had more severe mental health issues than younger children, Millegan said. While children age 6 to 11 and those age 12 to 17 had similar odds of outpatient mental health visits (17 and 16.6 percent, respectively), teenagers had about four times as many emergency mental health visits. Psychiatric hospitalizations occurred in 0.2 percent of the younger children who moved, compared to 0.9 percent in the older group. Mental health problems included adjustment disorders, attention deficit or conduct disorders, alcohol or substance abuse, and suicidal or self-injury behaviors. The absolute magnitude of the increases was small, yet the fact that there was any increase was



somewhat surprising, note the authors.

This study may actually have underestimated the effects of moving, Millegan noted. "The fact that we still saw that association even within the limits of the study is important."

"This reinforces things that we have always known intuitively," said R. Scott Benson, M.D., a child psychiatrist in private practice in Pensacola, FL and a former speaker of the American Psychiatric Association Assembly. "It showed that these children experience these moves as stressors." Parents should consider the effects of a move on their children and give close consideration to their developmental needs, Benson said. Parents and teachers need to help children become acclimated after a move, he added.

Both Benson and Millegan noted that the military has support programs for families to help them during a move, programs that are not matched in civilian life. Larger <u>military</u> bases also have social opportunities for children to help them adjust to a new location, Millegan added.

**More information:** Millegan J, McLay R, Engel C: "The effect of geographic moves on mental healthcare utilization in children." *J Adol Health*. 2014

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