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ABSTRACT

Although extensive research has focused upon the adjustment problems of the veterans of the Vietnam conflict, little data is available concerning their children. The purpose of this study was to provide a description of the adolescent children who have lived with Vietnam combat veteran fathers, comparing them (on the basis of social and personal adjustment, relationship with their parents, personality development, and a few personal choices and opinions) with a control group of children whose fathers were not in Vietnam. The experimental group, consisting of 14 girls and 14 boys from a high school in West Virginia, and a control group of equal size, age, and gender were compared on grade point average, school absences, achievement test scores, the Behavior Rating Profile, the Beck Depression Inventory, the Child's Attitude Toward Father and Mother, the High School Personality Questionnaire, and a demographic questionnaire. The results indicated that the children of combat veterans were significantly more troubled. More specific information concerning the child's perceptions of the problem areas and family dynamics would be particularly valuable. Just as their fathers deserve special recognition for the sacrifices which they have made, so their children are entitled to careful observation to detect possible impairment and a more comprehensive investigation into the issue of secondary traumatization. (ABL)

Second Generation Effect of Vietnam: Adolescent Children of Combat Veterans

by

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ABSTRACT

Although extensive research has focused upon the adjustment problems of the veterans of the Vietnam conflict, little data is available concerning their children. The purpose of this study is to provide a description of the adolescent children who have lived with Vietnam combat veteran fathers, comparing them (on the basis of social and personal adjustment, relationship with their parents, personality development, and a few personal choices and opinions) with a control group of children whose fathers were not in Vietnam.

The experimental group, consisting of 14 girls and 14 boys from a high school in West Virginia and a control group of equal size, age, and gender, were compared on grade point average, school absences, achievement test scores, the Behavior Rating Profile (BRP Teacher Rating Scale, Parent Rating Scale, Student Rating Scales: Home, School, Peer), the Beck Depression Inventory (BDI), the Child's Attitude Toward Father and Mother, the High School Personality Questionnaire (HSPQ), and an original Questionnaire. Analyses of variance were computed and the children of combat veterans were significantly more troubled ($p < .05$) as indicated by the BRP (Parent Rating Scale; Student Rating Scale: Home; Student Rating Scale: School); BDI; Child's Attitude Toward Father; HSPQ scales of Tension, Apprehension, Anxiety, and Creativity; with all other variables being nonsignificant. Gender differences were analyzed as were differences between subgroups of veteran children split by the fathers' scores on the Mississippi Scale for Combat-Related PTSD (M-PTSD). Implications for research and practice were discussed.

SECOND GENERATION EFFECT OF VIETNAM: ADOLESCENT CHILDREN OF COMBAT VETERANS

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Although extensive research has focused upon the adjustment problems of the veterans of the Vietnam conflict, little data is available concerning their children. The purpose of this study is to provide a description of the adolescent children who have lived with Vietnam combat veteran fathers. The author compares a group of children of veterans (on the basis of social and personal adjustment, relationship with their parents, personality development, and a few personal choices and opinions) with a control group of children whose fathers were not in Vietnam.

RELATED LITERATURE

From the earliest reports of problems which the VN combat veteran was experiencing, it has been apparent that interpersonal relationships were often disrupted and troubled. The risk to children within the family is supported by research examining the offspring of other adults with affective disorders and studies concerning other traumatic experiences, likewise, indicates a second generation effect can occur (the largest such body of literature dealing with children of survivors of Nazi concentration camps).

A limited amount of literature deals specifically with children of VN veterans. In 1989 Susan Sorrentino reported that the Vietnam PTSD veterans respond to child behaviors with different parenting behavior and physiological arousal than controls, and while this was a study of adults, it contains obvious implications for the children. Anthony P. Jurick (1983) summarizes a family systems explanation concerning the issue of adverse effects upon family members. Presenting a case study of a 10-year-old son of a PTSD veteran, Rosenheck and Nathan (1985) discuss secondary traumatization. Glassman, Magulac, and Darko (1987) discuss a case of folie a famille wherein the VN veteran father's paranoid schizophrenic delusional system was shared by the entire family. Other case studies have been presented by Sarah A. Haley (1984). A Connecticut research project (Reinberg, 1987) provides valuable data concerning the children of VN combat veterans although no control group was included in the study. The National Vietnam Veterans Readjustment Study (Kulka, Schlenger, Fairbank, Hough, Jordon, Marmar, & Weiss, 1988) speaks to child welfare also, and a few projects have been published dealing with the effects on offspring of parental exposure to Agent Orange (Weisman, 1986; Becker, 1982). More research is needed.

METHOD

Subjects

The experimental group consisted of 28 (14M, 14F) students from a West Virginia high school, ages 14 through 17, who had lived with their VN combat veteran fathers for at least 12 years.

The control group was taken from the same school and was matched with the experimental group on number, age and sex of the children. Their fathers did not serve in Vietnam.

All subjects were Caucasian; the mean age for each group was 16 years, 2 months; no significant differences ($p > .05$) were found in GPA or achievement; the SES appeared to be similar although the economic level of the combat veteran children may have been higher (96% of combat veteran were employed compared to 79% of control group fathers, and veterans indicated a larger yearly family income and slightly higher number of years of education); family constitution was different for only 2 vet children compared to control.

Procedures and Instruments

Combat veteran fathers completed:

1. An original demographic questionnaire;
2. Mississippi Scale for Combat-Relating PTSD (M-PTSD; Keane, Caddell, & Taylor, 1986);
3. Impact of Event Scale (IES; Horowitz, Wilner, & Alvarez, 1979).

Subject data included:

1. School records
   a. GPA for previous 3 semesters;
   b. Attendance record for previous 3 semesters;
   c. Most recent state/county achievement test scores.
2. Behavioral observation
   a. Two of each subject's teachers completed the Teacher Rating Scale of the Behavior Rating Profile (BPR; Brown & Hammill, 1986);
   b. Subjects' mothers (in 51 cases), step mother (in 4 cases), or female father designated as most accurate current observer (in 1 case) completed the Parent Rating Scale of the BRP (Brown & Hammill, 1986).
3. Subject self-report and direct assessment

Subjects stayed after school for approximately 2 hours in groups of less than 20 and completed the following in the presence of the researcher:

   a. An original adolescent demographic questionnaire;
   b. Revised edition of the Beck Depression Inventory (BDI; Beck, Rush, Shaw, & Emery, 1979);
   c. Student Rating Scales of the BRP (Brown & Hammill, 1983) which rates self perception of adjustment in (1) home, (2) school, and (3) with peer environments;
   d. Child's Attitude Toward Father (CAF) and Mother (CAM) Scales (Hudson, 1982);
   e. Revised High School Personality Questionnaire, Form A (HSPQ; Cattell, Cattell, & Johns, 1984).

Design

Subject data provided 43 dependent variables. (For discussion purposes these were grouped into 4 categories: social and personal development; relationship with parents; personality development, and a few personal choices and opinions. The 43 measures and their categories are presented on Table 1). Two sets of analyses were completed, each being a two-way analyses of variance. The first was a 2 X 2 factorial analysis of experimental subjects (children of combat veterans = CCVs) and control subjects (children whose fathers did not serve in VN) by total group and by gender, as shown below.

Figure 1
2 X 2 Factorial Design

	CCVs	Control
FEMALE		
MALE		

In the second set of analyses, the M-PTSD was used to further split the experimental group into two groups based upon the fathers' scores on the M-PTSD. (A cutting score of 89; any child whose father scored 89 or above was assigned to the "high M-PTSD" group whereas any child whose veteran father scored an 88 or below was assigned to the "low M-PTSD" group.) In this design, two-way analyses of variance were employed to compare groups of high M-PTSD, low M-PTSD, and control, crossed by gender, as shown below.

Figure 2
2 X 3 Factorial Design

	High M-PTSD	Low M-PTSD	Control
FEMALE			
MALE			

Duncan's multiple-range test was used to determine differences between mean; significance level was set at .05.

RESULTS

Each analysis of variance yielded a main effect for group, a main effect for gender, and an interaction of group by gender. Of primary importance to the research questions were the group main effect and the interaction of group by gender. While there were no significant ($p > .05$) interaction effects on either the 2 X 2 or 2 X 3, significant main effects ($p < .05$) for group are reported on the following pages. For clarity concerning what the 43 dependent measures were, all have been included for the 2 X 2, but for brevity, only significant results of the 2 X 3 have been included.

Table 1

Means, Standard Deviations, and Results of Analyses of Variance for Main Effects from the 2 X 2 for CCV Versus Control

Dependent Measure	CCV Mean (n=28)	CCV SD	Control Mean (n=28)	Control SD	F Value	p
Social/Personal Adjustment						
School Absences (3 sem)	15.86	18.16	12.50	11.00	0.69	NS
Grade Point Average (3 sem)	2.46	0.89	2.79	0.70	2.78	NS
State/County Test Scores						
Total Reading	56.42[a]	27.70	64.69[a]	27.07	1.25	NS
Total Language	54.62[a]	28.57	60.69[a]	28.49	0.60	NS
Total Math	55.54[a]	28.10	65.50[a]	27.54	1.67	NS
Total Basic Skills	55.77[a]	28.33	65.19[a]	28.10	1.49	NS
Behavior Rating Profile[b]						
Parent Rating Scale	9.04	3.05	11.25	2.89	7.80	<.01
Teacher Rating Scale	12.98	2.56	13.66	2.06	1.38	NS
Student Rating Scales						
Home Scale	9.39	2.96	12.39	2.74	15.07	<.001
School Scale	11.18	3.45	13.21	2.22	7.16	<.01
Peer Scale	10.39	2.82	11.43	2.63	1.99	NS
Beck Depression Inventory[c]	10.00	9.67	4.96	6.76	5.01	<.05
Relationship With Parent						
Child's Attitude Toward Father[d]	24.46	22.32	14.46	10.80	4.73	<.05
Child's Attitude Toward Mother[d]	24.07[e]	23.11	16.50	16.32	1.92	NS

[a] 26 responses

[b] On BRP, higher score = more positive

[c] On BDI, higher score = more depression

[d] On CAF and CAM, higher score = less satisfaction

[e] 27 responses

(table continues)

(Table 1 continued)

Dependent Measure	CCV Mean (n=28)	CCV SD	Control Mean (n=28)	Control SD	F Value	p
Personality Development						
High School Personality Questionnaire[f]						
A Warmth	5.46	1.88	5.71	1.84	0.25	NS
B Intelligence	6.32	2.07	6.79	1.85	0.80	NS
C Emotional Stability	5.86	2.12	6.57	2.17	1.54	NS
D Excitability	6.07	2.09	5.32	1.61	2.20	NS
E Dominance	6.39	1.87	6.25	2.53	0.06	NS
F Cheerfulness	6.18	1.85	6.11	2.48	0.01	NS
G Conformity	5.43	2.17	6.21	1.73	2.27	NS
H Boldness	5.00	1.68	5.61	2.17	1.35	NS
I Sensitivity	4.93	2.39	5.25	2.59	0.23	NS
J Withdrawal	6.11	2.11	5.50	1.60	1.44	NS
O Apprehension	5.57	2.25	4.11	2.36	5.46	<.05
Q_2 Self-Sufficiency	5.82	2.06	5.50	1.84	0.38	NS
Q_3 Self-Discipline	5.75	1.78	6.32	2.06	1.27	NS
Q_4 Tension	6.29	1.96	4.46	1.64	16.14	<.001
Extraversion	5.63	1.90	6.30	1.93	1.69	NS
Anxiety	5.80	1.90	4.68	1.86	4.95	<.05
Tough Poise	6.23	2.44	6.45	2.25	0.12	NS
Independence	6.47	1.73	6.22	2.65	0.17	NS
School Achievement	6.43	2.40	6.93	2.16	0.68	NS
Neuroticism	4.89	2.10	4.21	2.45	1.18	NS
Delinquency Proneness	5.88	1.56	5.98	1.86	0.0	NS
Creativity	5.40	1.99	6.55	1.94	4.79	<.05
Leadership Potential	5.49	1.87	6.41	2.16	2.98	NS

[f]HSPQ scores indicated here are sten scores; higher score = greater tendency toward characteristic.

(table continues)

(Table 1 continued)

Dependent Measure	CCV Mean	CCV SD	Control Mean	Control SD	F Value	p
	(n=28)		(n=28)			
Choices/Opinions						
Education Aspiration Level (Responses rated 1-8)	6.41[e]	1.76	7.21	1.45	3.38	NS
Number of School Activities (Responses range 0-9)	1.96	1.17	2.82	2.31	2.78	NS
Number of Community Activities (Responses range 0-3)	0.71	1.01	0.86	1.04	0.27	NS
Number of Vietnam Movies Seen (Responses range 0-40)	11.48[e]	12.75	7.26[e]	9.03	2.55	NS
Should US have been in VN? (Yes=1; No=2)	1.62[a]	0.57	1.69[a]	0.47	0.30	NS
Has your life been affected by VN? (Yes=1; No=2)	1.56[e]	0.51	1.68[g]	0.48	0.84	NS

[e] 27 Responses

[a] 26 Responses

[g] 25 Responses

Table 2

Means, Standard Deviation, and Results of Analyses of Variance for High M-PTSD Versus Low M-PTSD Versus Control

Dependent Measure	High M-PTSD (n=9) M	SD	Low M-PTSD (n=19) M	SD	Control (n=28) M	SD	F value	p
BRP Parent Rating	(8.67)	3.54	9.21	2.88	11.25	2.89	3.88	<.05
Student Rating Home Scale	(9.78)	3.19	(9.21)	2.92	12.39	2.74	7.46	<.01
School Scale	11.33	3.08	(11.11)	3.70	13.21	2.22	3.49	<.05
Beck Dep. Inv.	(14.89)	10.61	7.68	8.52	4.96	6.76	5.07	<.01
HSPQ Q_4 Tension	(6.44)	2.46	(6.21)	1.75	4.46	1.64	8.07	<.001

Circled mean score indicates which group had significantly more problematic score over group indicated by arrow.

DISCUSSION

The argument could be made that the veterans of this study may be different from the combat veteran group as a whole. In comparison to the statistics which have been presented consistently (from the Egendorf study of 1981 through the National Vietnam Veterans Readjustment Study released by Kulka et al. in 1988) the veterans here have a much higher than average rate of employment, a far lower rate of divorce, and a lower rate of seeking psychological or counseling services). These behaviors might suggest that they are, as a group, better adjusted than the average Vietnam combat veteran. Yet there is evidence in the M-PTSD and IES scores that they have been affected by the war and do have symptoms of PTSD. If they are well adjusted compared to a cross-section of combat veterans, then the significant results might take on even greater meaning. As was the case in some of the research of the second generation effect on children of adults with affective disorders (Beardslee, Bemporad, Keller, & Klerman, 1983), the findings from this study might be expected to increase in significance with greater pathology of the parent.

CCVs Versus Controls

Social and Personal Development

When comparing the CCVs with the Control (as Table 1 indicates), the CCVs have mean scores which are less positive for every one of the 12 dependent variables that relate to this question. Four are significantly different: one where the parent made the observations (BRP: Parent Rating Scale), and three where the subject made the report (BRP: Student Rating Scales, Home and School; and BDI). The BRP scores indicate lower adjustment within those environments as well as problems in the parent-child relationship. The fact that teachers do not notice differences between groups is consistent with other literature. In their review of 24 studies of children with parents who have other affective disorders, Beardslee et al. (1983) conclude that those studies relying upon peer and teacher ratings show less impairment, whereas information obtained from parent and the child reveals higher levels of impairment. While the teachers might not identify these children, the school experience, does appear to be less positive for these children of combat veterans. They may be uncomfortable around authority figures, are most more tense, and experience a great deal more internal turmoil in school than the control subjects.

Significantly higher scores of depression are consistent with other research on VN veteran children (Rosenheck & Nathan, 1985; Reinberg, 1987). While clinical depression was not tested or diagnosed in this study, it is appropriate to interpret these scores as symptoms of depression and problems of adjustment.

Parent-Child Relationships

As Table 1 indicates, mean scores for Child's Attitude Toward Mother and Father are both higher (more problematic) for the CCVs, but significantly so only on the CAF. The magnitude of this might be better understood when considering that scores above 30 indicate clinically significant problems. Eight (or 29%) of the CCVs compared to only 3 (or 11%) of the noncombat veteran children fall in this range. The results of this study corroborate other research findings indicating father-child relationships can be especially stressful for adolescent children of Vietnam veterans.

Personality Development

Nineteen of the 23 dependent measures of the HSPQ were not significantly different. This can be supportive of the hypothesis that these groups were quite comparable except for the fathers' combat duty. The scales wherein significance did occur were ones that were anticipated due to other research findings, namely Apprehension (self-blaming, guilt-prone, insecure, worrying, easily overcome with moods, lacking self-confidence or self-assurance, being scrupulous and fussy/perfectionistic and lonely); Tension (frustrated, overwrought, tense, irritable, in turmoil, sensitively aware of being criticized by parent for untidiness, fantasy, and neglect of good goals, has high level of undischarged drive); Anxiety (excitable, tense, affected by feelings, shy, and undisciplined; not able to adapt quickly to stressful situations) and Creativity. What makes each of these constructs unique is not well defined, but the results clearly indicate a pattern. Of these, Tension was significant at the $p < .001$ level. On the sten scores for Tension, 12 (43%) of the CCVs had scores of 7 or above, while only 3 (11%) control subjects scored that high. Further testing for tension, self-concept, perfectionism, and anxiety could be revealing. (Also, even though GPAs and achievement test scores were not significantly different, lowered scores on Creativity for all CCVs may have implications on their learning styles, as they may be less confident, less willing to take risks, and more rigid in their thinking.) Perhaps most importantly, these "overly-controlled" children may be exhibiting pro-social behaviors and their problems go unnoticed to teachers and others who might be able to secure for them assistance.

Choices and Opinions

Little is revealed, but it was surprising that VVCs did not feel more affected by the war than the controls. In fact, slightly more members of each group said that they were not affected by the war than said that they were. Although previously discussed differences between children and families do exist, apparently the children are either not cognizant of the differences or have not been taught to attribute them to the Vietnam conflict.

High M-PTSD Versus Low M-PTSD Versus Control

Perhaps more caution should be employed in interpretation of the results of the 2 X 3 analyses, since only the fathers' scores on the M-PTSD were used to assign to groups and some of the scores may have been understated; the low M-PTSD group may actually contain some subjects who would be more correctly placed in the high group.

Even so, results of the analyses of the data in this way reiterate the likelihood of problems within the areas of parent-child relationships, the child's behavior at home, the child's comfort at school, and most noticeably, the symptoms of depression of the high M-PTSD group ($p < .01$) and tension ($p < .001$) for both veteran children groups.

IMPLICATIONS FOR RESEARCH

The overall findings present strong evidence that the adolescent children of VN veterans have been adversely affected by their fathers' combat duty in that war. Each area of significance in this preliminary study could be investigated in future research.

More specific information concerning the child's perceptions of the problem areas and family dynamics would be particularly valuable; such data

might be obtained via structured interviews or structured analogue family communication assessment.

Additional information concerning differences in cognition; further investigation of gender issues; examination of aggression; a longitudinal study; examination of children of different ages; and studies with increased attention to the assessment of the impact of the war upon the father would all be advised.

IMPLICATIONS FOR PRACTICE

In terms of assessment, several areas of disturbance should be measured including depression, anxiety, parent-child relationships, self-concept, tension, and perfectionism. Tense, depressed adolescents are often quiet sufferers whose pain goes undetected; therefore a major contribution of this and similar research can be to alert professionals as to what kinds of problems to look for in these young people.

With regard to treatment modalities, family therapy, group counseling and individual counseling could be appropriate, depending upon the individual circumstances.

Just as their fathers deserve special recognition for the sacrifices which they have made, so their children are entitled to careful observation to detect possible impairment and a more comprehensive investigation into the issue of secondary traumatization.

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