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The relationship between parental war status and socioemotional functioning of offspring of Croatian war veterans

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Abstract

Introduction: Family dysfunction and inability to adequately respond to parental demands of veterans due to active participation in war and the presence of war-related PTSD has been linked to numerous psychosocial and behavior problems of their offspring. The aim of this study was to examine the relationship between parental war status, and certain aspects of socioemotional development of their children, i.e. emotional competence, and attachment styles.

Methods: Our sample consisted of 141 participants (female: 51.1%, mean age: 25.78), of which 53 were offspring of veterans with PTSD, 39 were offspring of veterans without PTSD, and 49 came from non-veteran families. A structured questionnaire consisted of sociodemographic questions, The Emotional Competence Questionnaire, The Revised Adult Attachment Scale, and Inadequate parental behavior questionnaire.

Results: Children of war veterans exhibited greater difficulties in understanding, expressing, and regulating their own emotions in comparison to children of non-veterans. Higher presence of anxious attachment style, lower levels of close and dependent style, and more frequent inadequate parental behavior during childhood were found in offspring of veterans with war-related PTSD.

Discussion: The offspring of war veterans showed lower emotional competence and a more pronounced anxious attachment style. These findings emphasize the importance of developing interventions and programs for offspring of war veterans that aim to improve their ability to establish close relationships and regulate emotions adequately.

Take-home message: Our findings emphasize the relationship between parental war status and emotional competence and attachment style of their offspring. Interventions and programs aimed at promoting well-being of veterans' offspring should focus on improving their ability to establish close relationships and regulate emotions adequately.

Keywords: attachment styles; emotional competence; offspring; parental war-status; PTSD

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INTRODUCTION

Post-Traumatic Stress Disorder (PTSD) is an extreme reaction to a traumatic event, involving the re-experiencing of the trauma through intrusive and distressing memories or dreams, persistent symptoms of increased arousal, and avoidance of stimuli associated with the traumatic experience [1,2]. Veterans diagnosed with PTSD experience lower quality of life, more frequent health difficulties, and perceive lower support from family and friends [3].

However, war trauma and the associated diagnosis of PTSD not only affect the individual directly involved in the conflict, but also people in their environment, especially spouses and children [4]. Symptoms of avoidance, heightened arousal, and reactivity can significantly impact various aspects of family functioning [5]. Research indicates a link between war-related PTSD and marital discord, low family cohesion, difficulties in resolving conflict situations and controlling aggressive impulses [6,7]. Observing the family dynamics of veterans with PTSD, noticeable difficulties in communication among family members are evident, with frequent verbal aggression or complete absence, i.e., withdrawal from communication [7,8]. The presence of war-related PTSD can also negatively affect the ability to adequately respond to parenting demands [9]. War veterans with PTSD more commonly report low parental satisfaction and self-confidence, as well as high levels of stress related to their role as a father or mother, compared to veterans without the diagnosis [4]. The belief that they have failed as parents and feelings of guilt can further contribute to their emotional and behavioral withdrawal [10]. The presence of war-related PTSD can also result in adopting a parenting style characterized by excessively protective behavior and a need for control or a style dominated by aggressive disciplinary methods.

Since children are greatly influenced by the family climate in which they grow up and adopt the values and behavioral patterns of significant individuals in their environment (role models or parents), offspring of veterans with PTSD are at increased risk for developing numerous psychological, cognitive and behavioral difficulties [11–14]. Previous research indicates higher physiological reactivity to stress, more frequent somatic problems, and higher levels of anxiety and depression among children of this population [15–19]. Additionally, offspring of veterans with war-related PTSD are more prone to aggressive and deviant behaviors and substance abuse compared to children of veterans without the diagnosis [20]. Longitudinal studies confirm the long-term consequences of parental PTSD and associated family dysfunction on the mental health of offspring, including the likelihood of developing and maintaining internalizing (depression, anxiety, suicidal thoughts) and externalizing problems (aggression, impulsivity) years after exposure to the traumatic event [6,16,21]. Behavioral and emotional difficulties can persist into adulthood, making it difficult for offspring to effectively cope with the various stressors of everyday life, such as workplace challenges, global and societal problems [22,23].

Growing up with a parent who has been exposed to war events, especially with veterans diagnosed with war-related PTSD, often involves emotional unavailability, increased reactivity to family stressors, lack of open communication, and reduced sensitivity to the emotional needs of spouses and children [24–26]. Parental difficulties in emotional regulation can affect the ability of their offspring to express, recognize, and manage emotions [27,28]. This aspect of a child's development plays a significant role in building adequate interpersonal relationships, coping with challenging and stressful situations, and social and psychological adjustment. Offspring of veterans with PTSD experience greater difficulties in recognizing, expressing, and understanding their own emotions and the emotions of others [29]. They are more prone to using maladaptive emotional regulation strategies, such as suppressing behavioral signs of pleasant and unpleasant emotions, compared to children whose parents do not have the diagnosis [30]. According to recent research, the

impaired ability to adequately recognize positive emotions, such as happiness, and negative emotions, such as disgust, in offspring may persist for decades after the father's exposure to war trauma [15,30].

Through interaction and connection with significant individuals during upbringing, a child develops an internal representation of their own worth and the availability of support from others, shaping a model they follow in establishing future relationships [31]. Emotional numbness and behavioral avoidance by parents with PTSD can affect the quality of the parent-child relationship, specifically the attachment the child develops toward the parent, and consequently toward future close individuals [32]. Offspring of fathers diagnosed with war-related PTSD report more diminished care, inconsistent involvement and support from the father, as well as feelings of rejection and neglect during childhood [33,34]. Such parental behavior can contribute to the formation of an avoidant attachment style characterized by difficulties in establishing secure and long-term relationships, suppressing emotions, and problems with intimacy and trust. Inadequate parental responses to a child's emotional needs can also result in the development of an anxious attachment style, involving fear of abandonment, sensitivity to criticism, low self-esteem, and an excessive need for acceptance from family members and significant others [32,35]. Significant associations between the presence of parental PTSD and the development of insecure attachment styles in their offspring have been confirmed in numerous studies conducted on veteran families [19,32,36].

Existing research points to the need for studying and better understanding of the consequences of parental participation in war on the emotional and social functioning of their children. Accordingly, this study aims to determine the relationship between parental war status, the expression of inadequate parental behavior, and the emotional competence and attachment styles of their offspring. It is expected that children whose parents participated in the Croatian Homeland war and especially those who grew up with a parent with war-related PTSD will report more inappropriate parental behaviors compared to children whose parents did not participate in the war. Additionally, it is assumed that, compared to the latter group, offspring of veterans will exhibit more pronounced insecure attachment styles and greater difficulties in regulating, understanding, and recognizing emotions.

METHODS

Study participants and sampling

This study included 141 participants, of which 72 were female (51.1%) and 69 were male (48.9%). The age range was between 22 and 34 years, with an average age of 25 years and 9 months (M=25.78, SD= 1.82). The majority of participants had completed high school (65.96%), were employed (71.6%), and were in an emotional relationship (47.5%). Additional sample characteristics are presented in Table 1.

Invitations to participate and links to the questionnaire were sent to the email addresses of associations of war veterans of the Homeland War, which lasted from 1991 to 1995, in order to collect data on children of veterans. Invitations to participate were also sent to the email addresses of citizens' associations in specific counties in order to collect data on children whose parents did not participate in the war, i.e. non-veterans. Participation in the study was entirely voluntary and anonymous, and participants did not receive any monetary compensation.

Table 1. Sociodemographic characteristics of the participants (*n*=141).

		***N* (%)**
Education status	Elementary school	1 (0.71)
	High school	93 (65.96)
	University	47 (33.33)
Employment status	Student	28 (19.9)
	Full-time	101 (71.6)
	Unemployed	12 (8.5)

Relationship status	Married	17 (12.1)
	Co-habiting/unmarried	67 (47.5)
	Divorced	2 (1.4)
	Single	55 (39.0)

Study instruments

The participants completed a questionnaire consisting of sociodemographic questions (age, gender, level of education, employment status, family structure), questions about their parents' status (participation in the war, presence of psychological difficulties), validated measures for assessing emotional intelligence and attachment style, and a set of questions about the frequency of certain inadequate parental behaviors during their upbringing.

The Emotional Competence Questionnaire (ECQ, [37]) is an instrument used to assess the impact of emotions and mood on an individual's thinking, memory, and behavior, as well as their ability to regulate emotions. The questionnaire consists of 45 items grouped into three subscales: the ability to regulate and manage emotions (ECQ-regulation), the ability to perceive and understand emotions (ECQ-understanding), and the ability to express and label emotions (ECQ-expression). Participants rate the statements on a 5-point scale (1 indicating "not at all," and 5 "always"). The total score on each subscale is calculated as a linear combination of responses, with a higher score indicating greater emotional competence. Previous Cronbach's alpha values indicate good internal reliability of these subscales (above α = .67; [38]), which was confirmed in this study with values ranging from α = 0.76 to α = 0.87.

The Revised Adult Attachment Scale (RAAS,[39]) is used to assess individual differences in attachment styles. It includes 18 items evenly distributed across three subscales: closeness or security (RASS-close), dependence (RASS-depend), and anxiety (RASS-anxiety). Participants rate the extent to which each statement applies to them using a scale from 1 ("not at all characteristics of me") to 5 ("very characteristic of me"). The total score on the subscales is calculated as an average value of responses, with a higher score indicating a greater expression of one of the three attachment styles. The scale shows good internal consistency with Cronbach's alpha above 0.75 [40], and above α = .89 in this study.

The questionnaire of inadequate parental behavior consists of 8 statements created by the authors of this study aimed at assessing inadequate parental behaviors during children's upbringing, such as physical punishment, and parental alcohol and substance abuse. Participants are required to assess how often these behaviors were present in their families during their upbringing using a scale from 1 ("never") to 5 ("daily").

To verify the factor structure, an exploratory factor analysis was conducted, indicating the presence of one factor. To represent the overall level of inadequate parental behavior, a total score was calculated by summing the responses to the 8 items of the questionnaire. A higher score indicates a greater presence of these behaviors during children's upbringing. The questionnaire demonstrated good internal validity, with a Cronbach's alpha of 0.89.

Data analysis

The data was analyzed using the IBM SPSS Statistics program (version 26). Before conducting statistical analysis, the data was examined for outliers. The values of all participants were below three or more standard deviations from the mean on the observed variables indicating the absence of outliers. In order to control for false discovery rate, multiple comparisons were corrected by the Benjamini-Hochberg procedure [41]. Significance was set at $p < 0.05$.

To examine the differences in the observed variables regarding the war status of the parents, three groups were formed: children of parents who did not participate in war, children of war veterans with PTSD, and children of war veterans without PTSD. Among participants whose parents participated in the war, we distinguish between those whose father is a war veteran and those whose parents both have the status of Croatian war veteran. Since these groups did not differ in the observed variables, they were combined into one group, children of war veterans. The mentioned group was

then differentiated based on the presence of parental war related PTSD. To examine the differences between three analyzed groups (children of parents who did not participate in war, children of war veterans with PTSD, and children of war veterans without PTSD) in emotional competence (ECQ-understanding, ECQ-expression, ECQ-regulation) and attachment style (RASS-close, RASS-anxiety, RASS-depend), while controlling for gender, a MANCOVA was carried out. Dependent variables were moderately correlated, and the corresponding correlation coefficients did not exceed the value of 0.8 which would indicate the existence of multicollinearity [42].

The multivariate normality was assumed considering that the Mahalanobis distance of six dependent variables (19.68) was less than critical value of the chi-square (24.32). Assumptions regarding the univariate normality and equality of covariance matrices were violated. Therefore, the values of Pillai's Trace test were considered in interpreting the MANCOVA results [43].

One-way analysis of covariance (ANCOVA) was conducted to test group differences on Inadequate parental behavior score, controlling for gender. In order to examine correlations among measures of emotional competence, attachment styles and presence of inadequate parental behavior while growing up, Pearson's correlation analyses was performed.

Ethical aspects

Informed consent was obtained from all subjects involved in the study. The study was conducted in accordance with the Declaration of Helsinki and approved by the Ethics Committee of Department of Psychology at the University of Zagreb Faculty of Croatian Studies (protocol code: 640-16/23-2/0001).

RESULTS

Considering the war status of the parents, 65.2% of the participants have at least one parent with the status of Croatian Homeland war veteran, with 85.1% of them having a father who is a veteran, while 14.9% have both parents who are veterans. Among participants whose parents are Croatian veterans, 59.8% has at least one parent diagnosed with war-related PTSD. The remainder of the sample (34.8%) comes from non-veteran families. Examining the family structure, the majority of participants (82.4%) grew up in intact families with both parents, 12% lived with their mother after parental divorce, and only 3.8% of participants were raised by one parent following the death of the other.

To test if there were group differences in emotional competence, i.e., expression, understanding and regulation of emotions, and attachment styles, a one-way MANCOVA was conducted for each set of measures, while controlling for gender.

The results of MANCOVA indicated significant group differences in emotional competence (Pillai's Trace = 0.33, $F(6, 272) = 8.97$, $p<0.001$, partial $\eta^2 = 0.165$) and attachment styles (Pillai's Trace = 0.16, $F(6, 272) = 3.86$, $p<0.01$, partial $\eta^2 = 0.078$), after controlling for gender. According to univariate analysis, differences among the groups were found in ECQ- understanding, ECQ- expression and ECQ- regulation (Table 2). Offspring of war veterans with PTSD showed greater difficulties in understanding the emotions of others ($p<0.05$), expressing, and recognizing their own emotions ($p<0.01$), as well as their regulation ($p<0.001$), than the offspring of non-war exposed parents. Furthermore, children of veterans without PTSD had significantly lower scores in all aspects of emotional competence (ECQ- understanding; $p<0.001$, ECQ- expression, $p<0.01$; ECQ- regulation, $p<0.001$), compared to children of parents who did not participate in war. There were no differences between the offspring of veterans with and offspring of veterans without war-related PTSD.

The univariate analysis revealed significant group differences in all observed attachment styles, RASS-close, RASS-anxiety, and RASS-depend (Table 2). Pairwise comparisons showed that, compared to non-veteran offspring, children of veterans with PTSD had higher presence of anxious attachment styles ($p<0.01$), and lower level of close ($p<0.01$) and dependent attachment style ($p<0.01$). Additionally, offspring of veterans without PTSD had lower RASS-close score than offspring of non-veteran parents ($p<0.05$).

The results of MANCOVA indicated that gender was significantly associated with measures of attachment style (Pillai's Trace = 0.1, $F(3, 135) = 4.84$, $p<0.01$, partial $\eta^2 = 0.1$), but not with measures of

emotional competence (Pillai's Trace = 0.04, F(3, 135) =1.9, p=0.132, partial η^2= 0.04). The only gender difference was found for the RASS-anxiety subscale, on which females achieve higher scores.

The differences among the groups in Inadequate parental behavior score were tested with one-way ANCOVA, controlling for gender. The results indicated significant group differences (Table 2); however, the covariate of gender was not associated with observed dependent variable (F(1, 137) =0.116, p=0.689, partial η^2= 0.001). Pairwise comparisons revealed that offspring of veterans with war related PTSD reported greater presence of inadequate parental behavior during childhood in comparison to offspring of war veterans without PTSD (p<0.001), and the offspring of non-war exposed parents (p<0.001). Additionally, significant difference was found between children of veterans without PTSD, and those whose parents did not participate in the war, whereas the latter group had lower scores (p<0.05).

Table 2. Differences in observed variables (*n*=141).

	Parental war status				
	WE_PTSD	WE	NWE		
Dependent variable	*M*(SD)	*M*(SD)	*M*(SD)	*F*	Partial η^2
ECQ- understanding	57.42 (9.93)	52.87 (7.28)	61.86 (8.37)	11.35***	0.142
ECQ- expression	48.08 (9.78)	46.87 (8.93)	53.57 (8.14)	7.1**	0.094
ECQ- regulation	56.39 (8.72)	59.31 (8.23)	67.63 (10.99)	19.42***	0.221
RASS-close	2.98 (0.43)	3.00 (0.32)	3.23 (0.42)	5.41**	0.073
RASS- anxiety	2.69 (0.71)	2.45 (0.66)	2.25 (0.68)	6.35**	0.085
RASS- depend	2.83 (0.69)	3.11 (0.52)	3.26 (0.63)	6.26**	0.084
IPB	10.47 (4.62)	7.72 (2.73)	6.27 (1.66)	21.02***	0.235

Note: **p<0.01; ***p<0.001; M, mean; SD, standard deviation; WE_PTSD, war exposed with PTSD; WE, war exposed without PTSD; NWE, non-war exposed; IPB: Inadequate parental behavior

To determine the correlation between offspring's emotional competence and attachment styles, and the presence of parental inadequate behavior during childhood, the values of the Pearson correlation coefficient were observed (Table 3). There were moderate correlations between Inadequate parental behavior score and attachment styles, indicating that with the increase in the frequency of inadequate parental behavior, the level of offspring anxious attachment style also increases, while the presence of close and dependent style decreases. Additionally, higher presence of inadequate parental behavior during was associated with greater difficulties in expressing and regulating emotions. Significant correlations were found between emotional competence and certain attachment styles. Participants who feel more insecure about whether they will be loved and accepted and are inclined to believe that they cannot rely on others, tend to have greater difficulties in regulating and expressing emotions.

Table 3. Correlation analysis of observed variables (*n*=141),

	1	2	3	4	5	6	7
1. IPB	-						
2. ECQ-understanding	-,168*	-					
3. ECQ-expression	-,242**	,544**	-				

4. ECQ-regulation	-,402**	,567**	,625**	-			
5. RASS-close	-,308**	,141	,231**	,251**	-		
6. RASS- anxiety	,363**	-,176*	-,322**	-,505**	-,282**	-	
7. RASS-depend	-,416**	,100	,240**	,404**	,507**	-,364**	-

Note: *p<0.05; **p<0.01

DISCUSSION

The findings of this study indicate a significant relationship between parental war status and certain aspects of socioemotional development in their children. Lower emotional competence, i.e., reduced abilities in understanding, expressing, and managing emotions, is more prevalent in children whose parents actively participated in the Homeland War. Differences were also found in attachment style, with children of veterans with PTSD exhibiting a higher presence of an anxious attachment style and lower levels of close and dependent attachment styles compared to children of non-veterans. However, no differences were found in these variables between children of veterans with diagnosed war-related PTSD and children of veterans without this diagnosis.

Previous research on veteran populations confirms the association between parental wartime experience and emotional dysregulation in their offspring [9,29,30]. Children of fathers actively involved in wartime events are more likely to report a lack of tenderness and open communication, inconsistent involvement and support, and sudden mood changes from their fathers [28]. Inadequate parental responses to children's emotional needs during upbringing, such as reduced sensitivity or excessive reactivity, can negatively affect their emotional competence [27,28]. Adult offspring of parents who actively participated in the war have greater difficulties in expressing and understanding emotions and regulating them adequately compared to offspring of non-veterans [30]. Additionally, children of veterans with war-related PTSD have less developed abilities to recognize and label positive and negative emotions compared to offspring of veterans without this diagnosis [29]. They are also more prone to using avoidance strategies for emotional regulation, such as suppressing emotions and inhibiting emotional reactions [30]. Children raised by parents actively involved in wartime events confirm the adoption of their parents' patterns of emotional dysregulation, including difficulties in adequately expressing and managing emotions and suppressing them [28]. They report an increased sense of rejection and neglect from their veteran parents, which, along with their emotional competence, can also affect their ability to establish future close relationships[32,44].

Similar findings were obtained in this study, with participants exhibiting more pronounced anxious attachment styles experience greater difficulties in expressing and regulating emotions. Compared to participants in this study whose parents did not participate in the war, children of veterans diagnosed with PTSD have greater difficulties in establishing close relationships, fear of rejection, and a greater perception that they cannot rely on people in their environment. Regarding gender differences, the anxious attachment style is more pronounced in female participants, which is consistent with previous research [45]. Studies conducted on veteran families indicate a greater tendency towards insecure attachment, namely anxious and avoidant attachment styles in children of veterans with war-related PTSD [19,28]. Consistent with the findings of recent studies on veterans and their adult offspring, growing up with a parent with excessive need for affirmation and attention and pronounced anxiety about possible rejection is associated with a higher likelihood of developing an anxious attachment style in their children. Additionally, the severity of PTSD symptomatology in veteran fathers played a significant role in attachment difficulties of their children [32].

In comparison to previous studies, this study's sample did not reveal significant differences in emotional competence and attachment styles among children of the veteran population. Some studies conducted on adult offspring of veterans also suggest potential adaptation and resilience to the

detrimental effects of their father's PTSD symptomatology [15]. The frequency of using maladaptive strategies for expressing and regulating emotions decreases with the age of veterans' offspring, regardless of the presence of wartime PTSD. Additionally, a study conducted on children of veterans 40 years after their exposure to war did not confirm a significant association between the presence of parental PTSD and patterns of insecure attachment styles in adulthood [15]. Regarding the family climate in our sample, it is possible to infer partially based on the frequency of inadequate parental behaviors during upbringing. Children whose parents actively participated in the war reported a higher presence of inappropriate parental behavior compared to children of non-veterans. This was particularly pronounced among offspring of parents with PTSD, consistent with the findings of previous research [46]. On the other hand, a more recent study on adult offspring of veterans does not confirm a significant relationship between parental wartime PTSD and neglect during upbringing [15]. Although significantly higher presence of inappropriate parental behavior was identified in children of veterans with PTSD, it's important to note that all groups achieved lower average scores on the respective scale. Additionally, the majority of participants, regardless of parental status, grew up in intact families with both parents. This may serve as a possible explanation for the deviations from previous research findings.

Study limitations and implications

There are certain limitations of this study that must be considered when interpreting the results. The conclusions regarding family dynamics and parental behavior were drawn based on the offspring's self-assessment. In order to gain deeper insight into the relationship between the family environment of veterans and the socioemotional development of their offspring, it is necessary to consider the perspective of the veterans themselves and their spouses. It would be beneficial to observe variables such as the parenting style, and emotional competence of the parent that participated in the war, as well as the spouses. The method of assessing parental PTSD differs from previous research, as in this study, the severity of PTSD symptoms was not observed, and no additional information about wartime experiences was collected. Another limitation is the very small sample size and the fact that this is a cross-sectional study.

Despite these limitations, this study contributes to the existing literature regarding the relationship between parental war status and certain aspects of their children's socioemotional development. Even after nearly thirty years, it is still of great importance in Croatia to understand the consequences of the Homeland War and the impact of war trauma on the quality of life of veterans and their families. This is particularly evident when it comes to determining the impact of often disrupted family dynamics of veterans on the socioemotional development of their offspring as they begin to build meaningful relationships with others and start their own families. The findings of this study emphasize the importance of developing interventions and programs that support the well-being of all children whose parents actively participated in war, regardless of the presence of PTSD. Furthermore, when developing guidelines for the veterans' children, it is important to focus on enhancing their ability to establish close relationships and regulate emotions adequately. These problems can be addressed in psychotherapy, either through traditional face-to-face sessions or through the increasingly popular online modality[47].

CONCLUSION

This study revealed a significant relationship between fathers' war status and emotional competence and attachment style of their offspring. Existing interventions recognize the importance of involving spouses and children and observing family dynamics when working with PTSD veterans. However, in addition to programs aimed at the mentioned population, the results of this research indicate the need to develop interventions that provide mental support to all children whose parents have actively participated in war, regardless of the presence of PTSD. Additionally, when forming the guidelines for the offspring of veterans it is necessary to consider their emotional difficulties, as they are more prone to suffer from relationship problems.

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