

Putting Research to Work for Military Families



Focus:
Multiple
Branches

The Comparative Effectiveness of Cognitive Processing Therapy for Male Veterans Treated in a VHA Posttraumatic Stress Disorder Residential Rehabilitation Program

Alvarez, J., McLean, C., Harris, A. S., Rosen, C. S., Ruzek, J. I., & Kimerling, R. (2011). The comparative effectiveness of cognitive processing therapy for male veterans treated in a VHA posttraumatic stress disorder residential rehabilitation program. *Journal of Consulting and Clinical Psychology, 79*(5), 590-599. doi:10.1037/a0024466

SUMMARY: Researchers examined the effectiveness of group cognitive processing therapy (CPT) relative to trauma-focused group treatment as usual (TAU) at a Veterans Health Administration (VHA) posttraumatic stress disorder (PTSD) residential rehabilitation program. Participants were two cohorts of male patients who were treated either with cognitive processing therapy or treatment as usual. Measures on PTSD, depression, quality of life, coping, and psychological distress were compared at intake and discharge with those Veterans who received cognitive processing therapy showing significantly more symptomatic improvement.

KEY FINDINGS:

- Veterans treated with cognitive processing therapy as opposed to TAU exhibited more symptom improvement on PTSD symptoms and depression, psychological quality of life, coping skills, and psychological distress (depression, anxiety, and psychoticism).
- No significant differences were found between the treatments groups regarding physical or social quality of life.
- Cognitive processing therapy groups were significantly more likely to be classified as recovered or improved on the PTSD Checklist.
- When expert consultation was provided to therapists, the cognitive processing therapy participants showed greater improvements in depression and psychological distress measures.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Enhance education, activities, and curriculum related to coping behaviors and dealing with mental health symptoms
- Disseminate information regarding possible symptoms of mental health problems Service members may face after deployment and where individuals and families can find help for those problems
- Offer workshops based on cognitive behavioral therapy during reintegration to help families and Service members adjust to the Service member's return, especially when the deployment has included combat exposure

IMPLICATIONS FOR POLICIES:

Policies could:

- Continue to support programs and efforts to address mental health issues among Service members and their families
- Recommend partnerships among military-based and community-based programs to help military families feel more comfortable participating in leisure activities that are not on installations
- Recommend training for community providers to educate them about unique factors that contribute to mental health symptoms for military couples

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METHODS

- Veterans enrolled in a VHA PTSD residential rehabilitation program who participated in trauma focused treatment as usual (TAU) were compared to those who participated in group cognitive processing therapy (CPT) on PTSD and depression symptoms and quality of life and coping.
- Outcomes were also compared for those in cognitive processing therapy between the year when clinicians participated in expert-led consultation to the year without consultation.
- Statistical analyses were used to examine differences in changes from intake to discharge between treatment groups (CPT versus TAU).

PARTICIPANTS

- Participants were military Veterans from the following service branches: Army (58%), Marines (24%), Navy (12%), Air Force (7%).
- The sample size was 197 males (104 cognitive processing therapy cohort, 93 treatment as usual cohort), which an average age of 52 years (SD = 9.2 years).
- Racial/ethnic composition of the sample was predominately White (59%); no specifics were provided about the other racial/ethnic groups.

LIMITATIONS

- This investigation was not a randomized controlled trial and lacks the ability to make causal inferences solely to the implementation of cognitive processing therapy.
- This study relied on self-report measures of PTSD rather than a clinician administered measure, hence, PTSD scores may be influenced by demographic variables, symptoms, personality, and compensation-seeking.
- The results may not generalize to outpatient settings or other military populations such as female Service members.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Explore the role of age and period of military service on PTSD treatment outcomes as the population of Service members seeking services changes
- Examine the effectiveness of cognitive processing therapy using a randomized controlled trial as well as longitudinal follow-ups to examine the rate of inpatient and outpatient treatment utilization after treatment with cognitive processing therapy
- Gather more data from Service members of diverse racial and ethnic backgrounds and assess the role of culture in the treatment of PTSD

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