The Impact of Work-Related Factors on Soldiers' Treatment: Providers' Perspectives


**SUMMARY:** Situations unique to military settings may impact the continuity of care for Service members and their families seeking treatment for substance abuse and family violence-related issues. This study examined the relationship between military work-related factors (e.g., deployment or permanent change of station) and treatment disruption from the perspective of practitioners. Almost 90% of respondents reported that military work-related factors resulted in treatment disruption or early termination of treatment.

**KEY FINDINGS:**
- Deployment was the most likely work-related factor to result in early termination of treatment or treatment disruption.
- Using deferments that allow for the completion of substance abuse and family violence treatment may not be widely practiced among Service members and their families.
- Treatment disruption could result in exacerbation of preexisting substance abuse and family violence.
- No significant patterns of individual characteristics among practitioners that may result in treatment disruption were found.

**IMPLICATIONS FOR PROGRAMS:**
Programs could:
- Develop training modules for practitioners and chain of command that focus on demonstrating how military work-related factors impact treatment continuity
- Conduct educational workshops and seminars for Service members and their families aiming to mitigate possible stigmas surrounding deferring deployment to complete treatment
- Encourage collaboration throughout deployment between chaplains, treatment practitioners, and Service members to facilitate discussions regarding treatment plans and progress

**IMPLICATIONS FOR POLICIES:**
Policies could:
- Promote proactive communication between Service members and their chain of command regarding their treatment progress
- Support flexible treatment delivery options that provide more options for Service members and their families during work-related transitions
- Promote support groups for family members throughout deployment that promote the continuation of treatment and stress the importance of the Service member resuming treatment post-deployment

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METHODS

- Data were gathered from a survey completed by practitioners offering treatment for substance abuse and family violence to active duty Army Service members and their families worldwide.
- Self-administered web-based surveys were used for gathering information.
- Practitioner responses included their ratings regarding whether military work-related factors disrupted treatment for Service members and their families.
- Data analyses assessed the relationship between work-related factors and levels of treatment disruption.

PARTICIPANTS

- Participants were treatment practitioners drawn from the Family Advocacy Plan (FAP) and the Army Substance Abuse Program (ASAP).
- Two hundred and sixty-four treatment practitioners successfully completed the survey, with most being female (FAP 73% female; ASAP 54% female) representing 55 different Army installations worldwide.
- All respondents were 25 years of age or older with most respondents being between the ages of 45 and 64.

LIMITATIONS

- Information was only gathered from Army treatment practitioners; therefore, findings cannot be generalized to other branches of the military.
- The data do not include self-reporting by Service members or their families, thereby limiting the strength of external validity for these findings.
- This study focused on three specific military work-related factors that may have disrupted treatment but did not examine other work-related factors that may affect treatment.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Gain the perspectives of Service members and their families to further investigate how military work-related factors affect the continuity of treatment for substance abuse and family violence
- Expand generalizability by examining the perspectives of Service members and treatment practitioners from other branches of the military
- Work to discover other potential military work-related factors that may result in treatment disruption or early termination

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