

Putting Research to Work for Military Families



Focus:
Multiple
Branches

Outcomes of Participation in the REACH Multifamily Group Program for Veterans With PTSD and Their Families

Fischer, E. P., Sherman, M. D., Han, X., & Owen Jr., R. R. (2013). Outcomes of participation in the REACH multifamily group program for veterans with PTSD and their families. *Professional Psychology: Research and Practice*, 44(3), 127-134. doi:10.1037/a0032024

SUMMARY: Multifamily group approaches (such as REACH: Reaching out to Education and Assist Caring, Healthy Families) to care for Veterans with posttraumatic stress disorder (PTSD) are both critical and effective, as they involve family members who are also affected by and affect treatment outcomes. Veterans and family members who participated in REACH have shown improvements over time via self-reported measurements on areas including relationship satisfaction, social support, depression, and anxiety.

KEY FINDINGS:

- Overall, Veterans demonstrated improvements over time on all outcomes, except for relationship satisfaction when it was not distressed at baseline.
- On average, following the end of REACH, Veterans used fewer outpatient mental health services.
- Family members' scores on social support, depression, and anxiety showed improvement over time, as well as relationship satisfaction for those who had distressed relationship scores at baseline.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Incorporate a multifamily group format to educational and treatment programs that serve Service members living with PTSD
- Support group cohesion and human connections as a part of the therapeutic process
- Provide multifamily group programs for nonveterans, Veterans who receive treatment outside the Veteran Affairs (VA) hospital setting, and Reservists

IMPLICATIONS FOR POLICIES:

Policies could:

- Promote treatment and education programs that involve family members
- Encourage family preparations during Service member deployment to ready families for any possible therapeutic processes
- Develop alternative group therapy options for Service members who may be geographically separated from family members

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METHODS

- Participants were Veterans receiving services at the Oklahoma City Veteran Affairs Medical Center (VAMC).
- Veterans were eligible to participate in the study if they had a primary diagnosis of PTSD and had an adult family member or friend willing to participate.
- Individuals who had an active substance abuse problem or who were suicidal or homicidal were excluded.

PARTICIPANTS

- One hundred Veterans and 96 family members who participated in REACH completed the evaluation.
- Veterans were predominately male (99%), between 22 and 85 years old ($M = 55.8$, $SE = 1.25$), and White (87%). Most participants (87%) reported as being married or cohabiting.
- Family members were mostly women (91%), between 20-85 years old ($M = 52.7$, $SE 1.38$), and White (82%).

LIMITATIONS

- Without having a comparison group, it is unclear whether any improvements that were observed were directly related to the Veterans' participation in REACH.
- There was not a subscale directly related to PTSD; therefore, PTSD symptom severity could not be assessed.
- The study had participants from a single site who have been dealing with PTSD for a long time (primarily Vietnam, Persian Gulf, and earlier service- era Veterans), therefore, the outcomes observed cannot be generalized to Veterans from more recent wars.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Include a collection of data from a broad sample who have not been able to access the services of REACH (or similar services) to use as a comparison group
- Use Service members who represent a broader geographic representation, more recent-onset PTSD or Service members who may be participating in programs similar to REACH but are not family inclusive
- Test similar program outcomes with regard to common comorbidities with PTSD, such as substance use disorder and mild traumatic brain injury

ASSESSING RESEARCH THAT WORKS



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