Perspective of Family and Veterans on Family Programs to Support Reintegration of Returning Veterans with Posttraumatic Stress Disorder


SUMMARY: Understanding the experiences of and preferences for mental health care services available to Veterans and family members upon post-deployment is critical for facilitating Veterans’ reintegration into civilian life. Both Veterans and family members strongly support programs that are focused on joint Veteran and family needs. Participants identified four areas of content for programming: information, practical skills, support, and perspective-taking.

KEY FINDINGS:
- Information specific to posttraumatic stress disorder (PTSD) and learning about Veterans Affairs (VA) hospital services and benefits were listed as critical for programs to provide. Relatedly, emphasis on gaining practical skills to handle issues regarding PTSD and reintegation was vital program content.
- Veterans and family members expressed need for support during post-deployment reintegration.
- Veterans and their families discussed the need to gain one another’s perspective as each felt the other group did not understand what they were going through.

IMPLICATIONS FOR PROGRAMS:
Programs could:
- Create specific content for targeted reintegration programs, such as skills in fostering healthy relationships and perspective-taking for Service members and families
- Include a family component and a supplemental children’s services to help with reintegration
- Provide frequent social activities for families to aid with practicing interpersonal skills and decreasing social isolation

IMPLICATIONS FOR POLICIES:
Policies could:
- Support the facilitation of long-term reintegration programs with the acknowledgment that reintegration is an ongoing process
- Encourage a continuous support system from pre-deployment through post-deployment for both Service members and family members
- Recommend family members and Service members engage in building communication skills in order to better understand the process of perspective-taking

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METHODS

- Veterans were recruited through clinician referral in Oklahoma City VA Medical Center (OKC), recommendations by participating Veterans, and fliers and advertisements at the Central Arkansas Veterans Healthcare System (CAVHS).
- Family participants were recruited only by the participating Veterans.
- A mixture of focus groups and individual interviews were conducted for data collection. Separate focus groups were conducted for groups of male and female Veterans, and family members.

PARTICIPANTS

- Participants were Veterans aged 18-65 years who served in Iraq or Afghanistan after October 2001 and received treatment for PTSD at either CAVHS or OKC within the previous 12 months of the study.
- There were 47 Veterans and 36 family members (34 Veterans and 29 family members declined to participate). Most Veteran participants (70%) were male, 75% of family member participants were female.
- Forty percent were Black and 38.3% White. Over half (59.6%) were in their 20s or 30s. The majority of Veteran and family member participants had children in the home.

LIMITATIONS

- Information gathered from focus groups could be limited because participants might have felt uncomfortable sharing information in a group setting.
- Veterans were inclined to have family involvement in the programs via the recruiting process, and might have represented a self-selection bias that may not generalize to the broader military population.
- Participants were recruited from one area, so geographic differences may not be represented by this sample.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Explore whether and how reintegration varies geographically based on how Service members and family members prefer post-deployment program content
- Investigate the similarities and differences between male and female Service members’ needs during pre- and post-deployment
- Examine the experiences of children during the pre- and post-deployment in order to build effective parenting programs for Service members’ upon returning home

ASSESSING RESEARCH THAT WORKS

Design
- Appropriate Research Plan and Sample

Methods
- Appropriate Measurement and Analysis

Limitations
- Few

For more information about the Assessing Research that Works rating scale visit:
https://reachmilitaryfamilies.umn.edu/content/assessing-research-that-works