

Examining Associations Between Relocation, Continuity of Care, and Patient Satisfaction in Military Spouses

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SUMMARY: Military families experience permanent change of stations (PCS) frequently, which may influence their opportunities to receive continuous medical care. This study examined the associations between PCS, continuity of care, and patient satisfaction by having 175 female military spouses complete questionnaires regarding their experiences with the military health system. Results suggested that discontinuity of care may be one of the reasons that military spouses were not satisfied with the care they received.

KEY FINDINGS:

- Military spouses who experienced more PCS moves and had more providers were likely to report lower continuity of care scores.
- Military spouses who received continuous care were more likely to have higher satisfaction scores than those who received discontinuous care.
- Military spouses who reported good patient-provider relationships were more likely to be satisfied with their health care.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Develop workshops for military families on how to quickly build relationships with their new health providers after a PCS
- Offer support groups for military spouses who just experienced a PCS so that they can share information and receive more social support
- Provide outreach services that increase awareness of available support to military families experiencing PCS or deployment

IMPLICATIONS FOR POLICIES:

Policies could:

- Recommend professional development for health providers working with military families on how to build quality relationships with patients and be cultural competent
- Encourage the development of telemedicine options for military families who have already established positive relationships with providers but have to move due to a PCS
- Continue to support programs that assist military families with challenges associated with PCS and deployment

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METHODS

- Participants were recruited via social media or by word of mouth. To be eligible, they had to currently be or had been a military spouse in the previous five years and received primary care at a military treatment facility within the last five years.
- Measures included number of PCS moves, continuity of care (length of time assigned to the current provider), patient-provider relationship, and patient satisfaction.
- Data were analyzed to examine the associations between relocation, continuity of care, and patient satisfaction.

PARTICIPANTS

- Participants were 175 female military spouses with an average age of 31.8 years (age range = 20-53 years, SD = 7.1).
- The majority of participants were White (80%), followed by Latino (10%), Asian American (3%), Black (2%), Native American (1%), and other (4%).
- Service members' branches of Services were Army (45%), Air Force (27%), Navy (17%), Marines (10%), and Coast Guard (1%).

LIMITATIONS

- The sample only included female military spouses, which limits the ability to generalize the results of the study to male spouses.
- Only self-report data were used in the study; therefore, the data may be subject to memory bias and may not accurately represent past events (e.g., number of PCS moves, continuity of care).
- Patient satisfaction was measured by two general questions without referring to each specific provider; therefore, it was impossible to determine whether the satisfaction level was directly associated with patient-provider relationship.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Recruit both female and male military spouses so that the results can be applicable to both genders
- Use documented data to determine the number of PCS moves and continuity of care so that the results are more accurate
- Examine other factors (e.g., culture, pay grade) that may potentially influence military families' satisfaction with the military health system



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