

Exploration of Individual and Family Factors Related to Community Reintegration in Veterans With Traumatic Brain Injury

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SUMMARY: This study explored the effect of community reintegration among Veterans who have a traumatic brain injury (TBI) diagnosis. Semi-structured interviews with Veterans and a family member as well as survey instruments assessed community reintegration, depressive symptoms, physical health, and relationship quality. Findings revealed that depression had a significant effect on how well Veterans reintegrated into their communities.

KEY FINDINGS:

- The quality of participants' relationships did not have a significant influence on how well Veterans were able to reintegrate into their communities.
- Veterans who reported more depressive symptoms tended to have less community reintegration.
- Participants with less physical functioning engaged with their community less often than participants who had more physical functioning.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Offer support groups for family members of Service members with a TBI to promote healthy coping and family wellbeing
- Provide outreach services that increase awareness of available supports to families and Service members with a TBI
- Develop workshops for Service members and their families on effective ways to allow for a smooth reintegration transition

IMPLICATIONS FOR POLICIES:

Policies could:

- Recommend that all Service members with a TBI and their families be offered continual consultations with a mental health professional during the transition to civilian life
- Recommend that programs for Service members leaving the military provide information about Veteran Affairs (VA) benefits, especially benefits pertaining to Service members with a TBI and their families
- Recommend professional education on improving diagnosis of depression among Service members and their families

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METHODS

- Participants were recruited from the Philadelphia VA Medical Center via letter in the mail.
- Veterans and family members participated in separate semi-structured interviews that were conducted in their home exploring their experiences with a TBI and community reintegration.
- Data was also collected from the VA Patient Record System, including Veteran measures of community reintegration, depressive symptoms, relationship quality, physical functioning, body pain, PTSD, and family member depressive symptoms.

PARTICIPANTS

- Veterans (N = 83) with a TBI diagnosis and one family member of their choice participated in this study
- Average Veteran age was 40 years (SD = 13.0) and average family member age was 42 years (SD = 1 2.5); a majority of family members were spouses of Veterans (n=59).
- The race of the participants was predominantly White (Veterans = 58%; family members = 60%), followed by Black (Veterans = 35%; family members = 31%), Native American (Veterans = 2%), Asian-Americans (Veterans = 1%; family members = 4%), and other (Veterans = 4%; family members = 5%).

LIMITATIONS

- The study findings cannot be generalized to civilians with a TBI or Veterans who do not use VA services.
- Due to the cross-sectional design of this study, data were not applicable to the long-term effects of community reintegration on Veterans with a TBI.
- The study findings are of Veterans who had family members within close proximity, thus limiting the generalizability to Veterans who may be more isolated or have lower community reintegration.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Utilize a larger sample of participants that includes both Service members and non-Service members with a TBI
- Collect longitudinal data to examine the effects of community reintegration on participants with a TBI over a longer period of time
- Evaluate the effects of community reintegration in Service members who are more isolated from their families



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