

# Putting Research to Work for Military Families



**Focus:**  
Multiple  
Branches

## Easing Reintegration: Telephone Support Groups for Spouses of Returning Iraq and Afghanistan Service Members

Nichols, L. O., Martindale-Adams, J., Graney, M. J., Zuber, J., & Burns, R. (2013). Easing reintegration: Telephone support groups for spouses of returning Iraq and Afghanistan service members. *Health Communications*, 28(8), 767-777. doi:10.1080/10410236.2013.800439

**SUMMARY:** Female partners of OEF/OIF Service members participated in a year-long study focused on education, skill-building, and support for Service members. At baseline, six, and twelve months participants were assessed to measure changes in mental health, marriage quality, family coping and communication. Partner depression and anxiety significantly decreased and perceived social support increased during the course of the study.

### KEY FINDINGS:

- Half of the partners attended at least six monthly support group calls, 26% attended three or fewer, and 22% attended nine or more sessions; most partners endorsed wanting more frequent sessions.
- Partners reported significant improvements in depression, anxiety, and social support over the course of the group; however, no differences emerged in marriage quality, family coping, or family communication.
- Partners struggling with a Service member's illness or injury were more burdened and they reported greater depression and anxiety and less social support and marriage quality compared to partners who did not have a Service member with an illness or injury.
- Although the partners caring for injured or ill Service members improved over the course of the study, they did not reach the level of functioning of the non-caregiving partners.

### IMPLICATIONS FOR PROGRAMS:

Programs could:

- Consider offering telephone support groups to partners of returning Service members as a means of increasing social support and minimizing mental health issues
- Provide education to partners of recently returned Service members about warning signs that suggest increased risks for their own physical and mental health problems
- Offer workshops during reintegration to help families and Service members adjust to the Service member's return, especially when the deployment has included combat exposure

### IMPLICATIONS FOR POLICIES:

Policies could:

- Continue to support for the implementation and evaluation of the spouse telephone support program
- Continue the development of adjunctive support programs for military spouses to mitigate the challenges associated with the reintegration period
- Promote reintegration programs that include attention to assisting Service members' family in adjusting to the Service member's return

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## METHODS

- Co-habiting partners of previously deployed Service members were recruited via a study website, flyers, referrals, and the Wounded Warrior Project; Service members gave consent for their partners to participate.
- Groups of five to ten partners selected their own 60-minute weekly meeting time with a master's level counselor. Each group met 12 times over the course of a year.
- Each group spent time checking in and reviewing strategies from the previous call, discussing new didactic information, and practicing and discussing ways of implementing strategies.
- All data collection took place over the phone at baseline, six, and twelve months; demographics and measures of depression, anxiety, quality of marriage, social support, family coping, and family communication were collected.

## PARTICIPANTS

- Eighty-six female partners of Service members were enrolled in 14 different telephone support groups.
- Participants' average age was 37.4 years (SD = 9) and most of the sample was either White (85%), Black (11%), or Latino (11%).
- Couples' average length of marriage was 10.4 years (SD = 8.2) and the average number of children was 1.5 (SD = 1.2). About half (51%) of the participants were employed.
- Almost half of the Service members were National Guard or Reserve (48%) and most (78%) were Army. The average number of deployments was 2.6 (SD = 2.8) and 64% were injured during deployment.

## LIMITATIONS

- There was no control group and therefore it is unclear if the effects are due to the intervention and not to time or other factors.
- The sample size was small which limits the generalizability of these results.
- Some of the participants recruited through the Wounded Warrior Project knew each other, which may have biased the results.

## AVENUES FOR FUTURE RESEARCH

Future research could:

- Utilize a randomized trial of this intervention to help establish whether effects are due to the intervention or other factors
- Examine which parts of the intervention have the largest impact and seek to develop and support those aspects
- Develop longitudinal studies to assess how couples adapt and support their partners over an extended period of time

## ASSESSING RESEARCH THAT WORKS



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