

# Putting Research to Work for Military Families



**Focus:**  
Multiple  
Branches

## Reintegration Problems and Treatment Interests Among Iraq and Afghanistan Combat Veterans Receiving VA Medical Care

Sayer, N. A., Noorbaloochi, S., Frazier, P., Carlson, K., Gravely, A., & Murdoch, M. (2010). Reintegration problems and treatment interests among Iraq and Afghanistan combat veterans receiving VA medical care. *Psychiatric Services*, 61(6), 589-597. doi:10.1176/appi.ps.61.6.589

**SUMMARY:** The researchers assessed the prevalence and types of community reintegration problems among Iraq and Afghanistan combat Veterans, as well as their interest in various treatments. Between 25-56% of the Veterans reported some to extreme difficulty in several areas of reintegration; almost all (96%) reported interest in services to address these problems.

### KEY FINDINGS:

- Based on VA records, 26% of the Veterans had a diagnosis of PTSD, 28% depression, 5% substance. Based on survey screening measures, 39% had probable PTSD and 35% probable drug or alcohol problems.
- Fifty-seven percent of the Veterans reported problems controlling their anger since coming home from deployment, 35% reported driving dangerously, and 35% reported divorce or separation.
- Forty percent of the Veterans perceived some to extreme difficulty in readjusting to civilian life within the previous 30 days.
- Ninety-six percent of the Veterans reported interest in services for community reintegration problems; the average number of services they considered using was 6.84 out of 12 options (i.e., information on benefits and schooling, self-educational materials, and medication).

### IMPLICATIONS FOR PROGRAMS:

Programs could:

- Offer workshops to help Service members and their families adjust following a deployment
- Disseminate information regarding services available to Service members and their families throughout the deployment cycle
- Educate Service members and their families regarding the possible mental health issues associated with deployment

### IMPLICATIONS FOR POLICIES:

Policies could:

- Support programs that offer web-based integration strategies which could reach a broad array of Service members interested in assistance with reintegration
- Continue to support programs that help Service members cope with functional problems, including driving concerns, help with schooling, and medication management assistance
- Encourage collaboration between DoD and community-based services that provide Service members and their families with mental health support throughout the deployment cycle

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## METHODS

- Stratified random sampling was used to identify 1,500 Veterans from different geographic areas who represented different racial and gender groups.
- Veterans were contacted via mail with a five dollar incentive.
- Questionnaire included questions regarding demographics, physical and mental health, perceived community reintegration problems, and treatment interests and preferences.

## PARTICIPANTS

- Participants included 754 Iraq and Afghanistan combat Veterans from all service branches who made at least one visit to a VA hospital from October 2003-July 2007.
- The majority of participants were female (55%), White (51%), and between the ages of 22-29 years (42%) or 30-39 years (30%).
- Fifty-three percent of participants were Reserves or National Guard, 52% noncommissioned officer, 36% junior enlisted; 74% were from the Army, 11% from the Navy, 7% from the Air Force, and 7% were Marines.

## LIMITATIONS

- Important differences between survey responders and non-responders could have existed which may have biased these results.
- The sample included only Iraq-Afghanistan combat Veterans who had used VA services and may not translate to those who had not yet used VA services.
- The use of screening measures for probable mental health issues are not always accurate and may bias results.

## AVENUES FOR FUTURE RESEARCH

Future research could:

- Examine how interest in help translates to help-seeking or use of services
- Explore whether evidence-based treatment for PTSD leads to improvements in functional and readjustment outcomes
- Assess differences in community reintegration problems based on psychiatric disorders other than PTSD

## ASSESSING RESEARCH THAT WORKS



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