The Center for Research and Outreach

Putting Research to Work





Family Perceptions of Post-Deployment Healthcare Needs of Iraq/Afghanistan Military Personnel

Zeber, J. E., Noel, P. H., Pugh, M. J., Copeland, L. A., & Parchman, M. L. (2010). Family perceptions of post-deployment healthcare needs of Iraq/Afghanistan military personnel. *Mental Health in Family Medicine*, 7(3), 135-143. doi:milmed-d-10-00040

SUMMARY: This study documented the perceived healthcare needs of those who have served overseas since 2001, according to family members and friends. Results showed that a substantial number of Veterans and their families are obtaining healthcare outside of the Veterans Affairs (VA) system, and there is a high level of healthcare needs that are directly related to military service.

KEY FINDINGS:

- According to the friends and family of Service members, 35% of those who had been deployed to OEF/OIF were
 exposed to a serious combat incident, including witnessing a nearby explosion (21%), combat injuries (9%) and noncombat injuries (6%).
- Psychological problems such as depression or posttraumatic stress disorder (PTSD) were reported by the social contacts of 13% of those with OEF/OIF experience, as were divorce and other relationship issues.
- Friends and family reported that 9% of those who had been deployed during OEF/OIF were experiencing more than one deployment-related health concern.
- Friends and family reported that only 6% had disclosed relevant deployment experiences to their doctor.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Provide education and training for non-VA primary care physicians about the unique healthcare needs of military
 Veterans and their families
- Encourage non-VA physicians to ask their patients about military experience, particularly deployment
- Provide non-VA primary care physicians with brief screening tools to address the particular needs of Service members in the post-deployment period, such as traumatic brain injury, PTSD, depression, and use of drugs and alcohol

IMPLICATIONS FOR POLICIES:

Policies could:

- Recognize that many Veterans and their families are obtaining healthcare outside the VA healthcare system
- Help Service members understand how their military experiences impact their health, and the health and wellbeing of their families
- Encourage Service members and their families to discuss military-related healthcare concerns with their healthcare providers

This product is the result of a partnership funded by the Department of Defense between the Office of Military Community and Family Policy and the USDA's National Institute of Food and Agriculture through a grant/cooperative agreement with The University of Minnesota.







Putting Research to Work

for Military Families



METHODS

- A convenience sample was recruited from six urban and suburban community healthcare clinics.
- A researcher invited each patient presenting for care at the clinic over a period of three to four days to participate in the study, regardless of military experience.
- Adults who were able to fill out a written survey in English or Spanish were included in the study.

PARTICIPANTS

- Participants were 347 adults receiving care at a community healthcare clinic.
- Participants had a range of OEF/OIF experience; two had served personally, 12% had an immediate family member who had served, and 31% had an extended family member who had served. The majority of known Service members were Active Duty (82%) but service branch was not provided.
- On average, participants were 47.5 years old; 71% were women and over half (56%) were Latino/a.

LIMITATIONS

- Data were collected from a convenience sample in one relatively small geographic area, which potentially limits generalizability.
- Health problems described in this study are perceived needs rather than clinical diagnoses, so the actual prevalence of conditions might be lower or higher than reported.
- Information about healthcare needs was most often reported by the friends and family members of Veterans; thus, it is unclear to what degree they can accurately report both deployment-related experiences and consequences for health and well-being.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Replicate this study with a larger and more representative sample, including more Service members who can report on their own experiences
- Utilize qualitative research to examine the reasons that Service members and their families do or do not disclose deployment-related experiences to their physicians
- Examine physicians' experiences and challenges with serving Service members and their families in primary care clinics

ASSESSING RESEARCH THAT WORKS







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