

# Long-Term Effectiveness of Treatment-as-Usual Couple Therapy for Military Veterans

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Despite the fact that veterans face increased psychological and relationship distress as a result of their service-related experiences, no study to date has explored the long-term effectiveness of couple therapy for veterans. In the present investigation, 238 individuals (113 couples and 12 additional individuals) completed assessments 18 months after termination of treatment-as-usual couple therapy at two Veteran Administration Medical Centers. From pretreatment to 18-month follow-up, couples experienced significant increases in relationship satisfaction ( $d = 0.59$ ) and significant decreases in both psychological distress ( $d = -0.31$ ) and presence of intimate partner violence ( $d = -0.47$ ). Overall, pretreatment demographic, psychological, and relationship characteristics did not significantly moderate maintenance of gains across 18 months. However, African American individuals ( $d = -0.58$ ) and individuals not reporting intimate partner violence at pretreatment ( $d = -0.46$ ) experienced smaller improvements in relationship satisfaction through 18-month follow-up. Further, older participants showed smaller reductions in psychological symptoms 18 months after treatment ( $d = 0.16$ ). Thus, for many veterans and their spouses, treatment-as-usual couple therapy is effective at intervening in psychological and relationship distress long-term. Moreover, the long-term effectiveness of couple therapy with veterans appears to generalize across many demographic, intrapersonal, and interpersonal factors.

*Keywords:* couples therapy; veterans; relationship satisfaction; mental health; violence

MANY MILITARY SERVICE MEMBERS returning from deployment face increased mental health concerns as a result of service-related experiences (e.g., Allen, Rhoades, Stanley, & Markman, 2010; Bagalman, 2013; Kulka et al., 1990). Additionally, veterans are at a high risk for relationship distress. Coinciding with the longest sustained military operation in the history of the United States, annual military divorce rates increased from 2.6% in 2001 to 3.5% in 2014 (Department of Defense, 2014). Moreover, many Vietnam-era veterans experienced increased marital conflict and greater intimate partner violence (IPV) rates after deployment (Kulka et al., 1990).

Furthermore, there appears to be a bidirectional relationship between difficulties in romantic relationships and psychological problems among veterans (Monson, Taft, & Fredman, 2009). For example, research on veterans has consistently documented a link between posttraumatic stress disorder (PTSD) and relationship problems, such as greater relationship distress, more IPV, and decreased emotional and physical intimacy (e.g., Lambert, Engh, Hasbun, & Holzer, 2012; Taft, Watkins, Stafford, Street, & Monson, 2011). Moreover, 43% of suicide attempts in 2014 among service members occurred in part because of a failed or failing relationship within the previous 90 days—the most common psychosocial stressor identified (Pruitt et al., 2015). Additionally, more than 75% of veterans in relationships who screen positive for mental health concerns such as depression and/or PTSD report difficulties with their romantic partners and in family functioning (Sayers, Farrow, Ross, & Oslin, 2009). Given these findings,

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interventions that effectively improve romantic relationships are needed to prevent and ameliorate veterans' individual and couple distress.

#### LONG-TERM EFFECTIVENESS OF COUPLE THERAPY FOR VETERANS

Fortunately, meta-analyses indicate that evidence-based couple therapy interventions produce robust improvements in relationship functioning by end of treatment (Shadish & Baldwin, 2005). However, results from these interventions—virtually all conducted within university settings—may not accurately capture the effectiveness of treatment-as-usual (TAU) couple therapy received by the average veteran who seeks treatment for relationship distress at a Veteran Administration Medical Center (VAMC; Tanielian & Jaycox, 2008). Indeed, while the Department of Veteran Affairs (VA) has recently focused on increasing access to evidence-based couple therapy (Makin-Byrd, Gifford, McCutcheon, & Glynn, 2011), TAU couple therapy in VAMCs likely includes a mixture of evidence-based and non-evidence-based approaches. Thus, the extent to which the results of efficacy trials generalize to TAU couple therapy in VAMCs remains largely unknown.

To our knowledge, only one study has explored the immediate (i.e., pre-post) effectiveness of TAU couple therapy in VAMCs. In this study, couples experienced significant pre-post gains in relationship satisfaction for men (within-group  $d = 0.44$ ) and women (within-group  $d = 0.47$ ; Doss et al., 2012), which were generally consistent with the effectiveness of TAU couple therapy with nonveterans in other countries (Anker, Duncan, & Sparks, 2009; Hahlweg & Klann, 1997; Klann, Hahlweg, Baucom, & Kroeger, 2011; however, see Lundblad & Hansson, 2006). Furthermore, the average magnitude of improvement in relationship satisfaction was larger than what would be expected if the couples had not received treatment; indeed, a meta-analysis of distressed couples randomly assigned to waitlist-control groups reveals that couples report nonsignificant deterioration without treatment ( $d = -0.06$ ; Baucom, Hahlweg, & Kuschel, 2003). While Doss and colleagues' (2012) findings are promising, the effect sizes in that study are lower than between-group effects found in a meta-analysis of couple therapy efficacy trials with nonveterans ( $d = 0.59$ ; Shadish & Baldwin, 2005) and within-group effect sizes found for Integrative Behavioral Couple Therapy (IBCT; within-group  $d = 0.86$ ; Christensen et al., 2004).

Given that TAU couple therapy for veterans does not appear to be as initially effective as efficacy trials with nonveterans, it is important to explore the

long-term outcomes of TAU couple therapy with this population. Follow-up results from couple therapy efficacy trials with nonveterans reveal significant within-individual deterioration in relationship functioning (as measured by increased relationship distress and/or divorce), ranging from 30% to 60% by 2- to 5-year follow-up (e.g., Christensen, Atkins, Baucom, & Yi, 2010; Jacobson, Schmaling, & Holtzworth-Munroe, 1987; Snyder, Wills, & Grady-Fletcher, 1991). Further, long-term treatment gains may be less favorable for veterans given the smaller initial gains created by TAU couple therapy combined with higher rates of mental health concerns (e.g., depression, PTSD, substance use) among veterans as compared to individuals in the private sector (Bagalman, 2013). This possibility is further supported by the fact that the strength of association between relationship discord and mental health problems may be higher in military than in civilian samples (Taft et al., 2011). Thus, an investigation of the long-term outcomes of TAU couple therapy is needed to better understand how effective couple therapy in VAMCs is at reducing concerns long-term.

Exploring the long-term effectiveness of TAU couple therapy for veterans is also important as investigations of long-term gains of couple therapy are almost exclusively limited to carefully controlled efficacy trials. In one of only two TAU couple therapy trials exploring long-term outcomes with nonveterans, Anker and colleagues (2009) found that couples who received TAU couple therapy in Norway experienced a 33% divorce/separation rate by 6 months following treatment. In another long-term follow-up study, Lundblad and Hansson (2006) found that couples who attended TAU couple therapy at community family counseling agencies in Sweden significantly improved in both relationship satisfaction and reduction of global psychological symptoms from pretreatment to 2-year follow-up; however, attrition in this study was substantial and significantly related to noncompletion of therapy, making it difficult to obtain accurate estimates. Thus, with a limited number of studies exploring TAU therapy in community samples, and no previous investigations of long-term gains of couple therapy in VAMCs, a large gap remains in our understanding of the long-term effectiveness of TAU couple therapy more broadly and with veterans in particular.

Therefore, the first aim of the present study was to examine the long-term effectiveness of TAU couple therapy with veterans. As an extension to the only investigation of pre-post changes in TAU couple therapy in VAMCs (e.g., Doss et al., 2012), the present study explored the magnitude of change in relationship satisfaction, IPV, and psychological distress from pretreatment to 18-month follow-up

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