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TITLE: Spouses/Family Members of Service Members at Risk for PTSD or Suicide

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<b>13. SUPPLEMENTARY NOTES</b>					
<b>14. ABSTRACT</b> The purpose of the study is to gain new knowledge about the experiences of family members of service members who are experiencing symptoms of PTSD or severe depression. The study is multi-method, with an initial qualitative phase (Phase 1), and a follow-up longitudinal, quantitative phase (Phase 2). During Year 5, the revision of the approach and recruitment was approved by USAMRAA/TATRC on 10/23/2014. This prompted IRB revisions, the final versions of which were approved by GMU IRB on 12/2/2014 and by AHRPO by 12/17/2014. Multiple recruitment efforts quickly yielded all desired participants in the male soldier/female spouse group for Phase 1. However, participants in the other two groups (female soldier/male spouse; single soldier/parent) have been much more difficult to recruit. A total of 2 female soldier/male spouse dyads have been enrolled, with no single soldier/parent dyads. Based on the recruitment difficulties and impending end of the project, TATRC officials (Michelle Lane and Kate Nassauer) recommended that we focus on engaging as many dyads in these two groups as possible for Phase 1 for the remainder of the project period.					
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## **INTRODUCTION**

This project focuses on marriages/romantic relationships and family relationships of service members with significant risk for PTSD and/or suicidality. Social support is one of the strongest buffers against PTSD (Brewin, Andrews, & Valentine, 2000; Ozer, Best, Lipsey, & Weiss, 2003), and relationship difficulties have been cited as the most common trigger of suicides in service members over the past several years (Keuhn, 2009). Thus, a healthy interpersonal environment is key for service members who may be struggling with behavioral health problems. Unfortunately, spouses of service members or veterans with symptoms of PTSD or depression have significantly elevated levels of psychological and interpersonal distress (Monson, Taft, & Fredman, 2009). It also appears quite likely that parents and other close relatives of service members with PTSD or depression experience significant distress, but there currently are almost no empirical data about relatives other than spouses or children. Based on the clear interaction between individual psychological problems in service members and their interpersonal environment, the ultimate objective is to gather data that will inform the future design of interventions for relatives of service members that will increase relatives' resilience and, consequently, their ability to provide support for service members. The purposes of this project are to: (1) identify the primary needs of relatives of high-risk (PTSD/depression) service members, and (2) identify potential distress and resilience mechanisms in these relatives. The original research project proposed two phases. Phase 1 employs individual interviews to (a) better understand the needs of romantic partners and (b) begin to identify needs of other types of family members (e.g., parents), who are rarely the focus of research. Phase 2 was to employ longitudinal assessment of service members and partners/relatives using interview and self-report measures to (a) validate information gathered in Phase 1 and (b) examine the longitudinal associations among service members' psychological functioning and the family environment. This information will, in turn, be used to identify primary targets for family intervention that can increase partners'/relatives' resilience and improve service members' psychological functioning. Due to recruitment difficulties, efforts are now focused solely on Phase 1, per directives from TATRC.

## **KEYWORDS**

PTSD  
Suicide  
Marriage  
Family

## OVERALL PROJECT SUMMARY

Please note that tasks below refer to the newly approved SOW from the approved NCE (23 OCT 2014).

**Task 1a.** COMPLETED. Approval for all revised procedures were obtained on 17 DEC 2014.

**Task 1b.** COMPLETED. Manual revision was completed prior to IRB submission.

**Task 1c.** COMPLETED. Training was completed in DEC 2014.

**Task 1d.** COMPLETED. Eligibility screens were prepared and ready in early JAN 2015.

**Task 2a.** PARTIALLY COMPLETE. Eleven female spouses/partners were enrolled for Phase 1 interviews. Only two male spouse/partners were enrolled. No parents/other relatives were enrolled.

**Task 2b.** PARTIALLY COMPLETE. RAs completed interviews for all enrolled participants (13).

**Task 2c.** PARTIALLY COMPLETE. Supervision meetings were held as needed, based on interview frequency and protocol issues.

**Task 2d.** PARTIALLY COMPLETE. Transcripts were created for all interviews conducted.

**Task 3a.** PARTIALLY COMPLETE. Open coding is underway.

**Task 3b.** INCOMPLETE. Axial and selective coding cannot begin until open coding is complete.

**Task 3c.** INCOMPLETE. Report relies on completed coding.

**Tasks 4-7.** All remaining tasks are in relation to Phase 2.

## KEY RESEARCH ACCOMPLISHMENTS

- Approval of revised Phase 1 protocol.
- Completed enrollment for male soldier/female partner dyads.

## **CONCLUSION**

Despite approval of revised procedures, recruitment of female soldier/male partner dyads and single soldier/parent dyads remains difficult. Extensive efforts continue to be made to fill these groups (e.g., contacting BOSS groups, individual Blue Star Mothers chapters, national non-profits, individual installations, colleagues with connections to units, press releases, interviews with news outlets, guest blogs on popular social media sites, contacts at MEDCOM, FRGs). We will continue these extensive efforts with the goal of enrolling as many dyads as possible. In the past, there are often certain outlets that prove highly fruitful (e.g., nearly 100 eligibility screens completed by male soldiers/female partners after a posting on Army Wives 101). Thus, we hope to have similar success at some point with one or more outlets for other dyads.

## **REPORTABLE OUTCOMES**

- None.

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