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Needs Assessment to Explore Support for Spouses Affected by Military Life

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Agency Introduction

Serving Minnesota since 1865, Lutheran Social Services (LSS) is the largest non-profit agency in the state. LSS provides services for children, families, older adults, and those with developmental disabilities. The LSS Veteran Case Management, Outreach, Referral & Education (C.O.R.E.) program provides free counseling, financial counseling, and case management for veterans, military personnel, and military families.

Statement of the Problem

Service members and family members currently have more challenging life situations due to multiple wartime deployments (Bowen & Martin, 2011). Spouses of military personnel suffer from problems at home when their loved ones are deployed. Problems may include intermittent single parenting, financial strain, and limited access to resources. These problems can lead to domestic violence, child abuse or neglect, and children's social or academic decline (Lincoln & Sweeten, 2010).

Literature Review

When service members and their family members endure marital and health problems, these problems may be attributed to their participation in combat or warrelated activities. A network of people who share common interests can provide social care by making connections, exchanging information, and helping others solidify community support (Bowen & Martin, 2011). Support groups can provide the instillation of hope, universality, and altruism, as well as information sharing for those who have experienced a loved one suffering a military injury or who have lost a loved one to a military death (Lamorie, 2011). Current military support services are focused on individual or family resiliency. Often, this does not address what military personnel or military families need or want (Bowen & Martin, 2011).

Purpose

The primary purpose of the needs assessment was to determine if there was a need for a support/psycho-educational group. The research project was conducted to determine if there is a lack of services for spouses or significant others of veterans and current military personnel and to identify current sources of stressors and support.

Table 1: Current Sources of Support

Twell I. Control Scores of Support			
Services	Frequency of responses	Percentage of participants	
Disabled American Veterans (DAV)	3	12%	
CHAMP Veteran Affairs Insurance	2	8%	
Veteran Affairs Hospital	2	8%	
Minnesota Assistance Council for Veterans (MACV)	1	4%	
Psychiatrist	1	4%	
None	12	48%	
No answer given	4	16%	

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Figure 1: Interest in Support/Psychoeducational Group

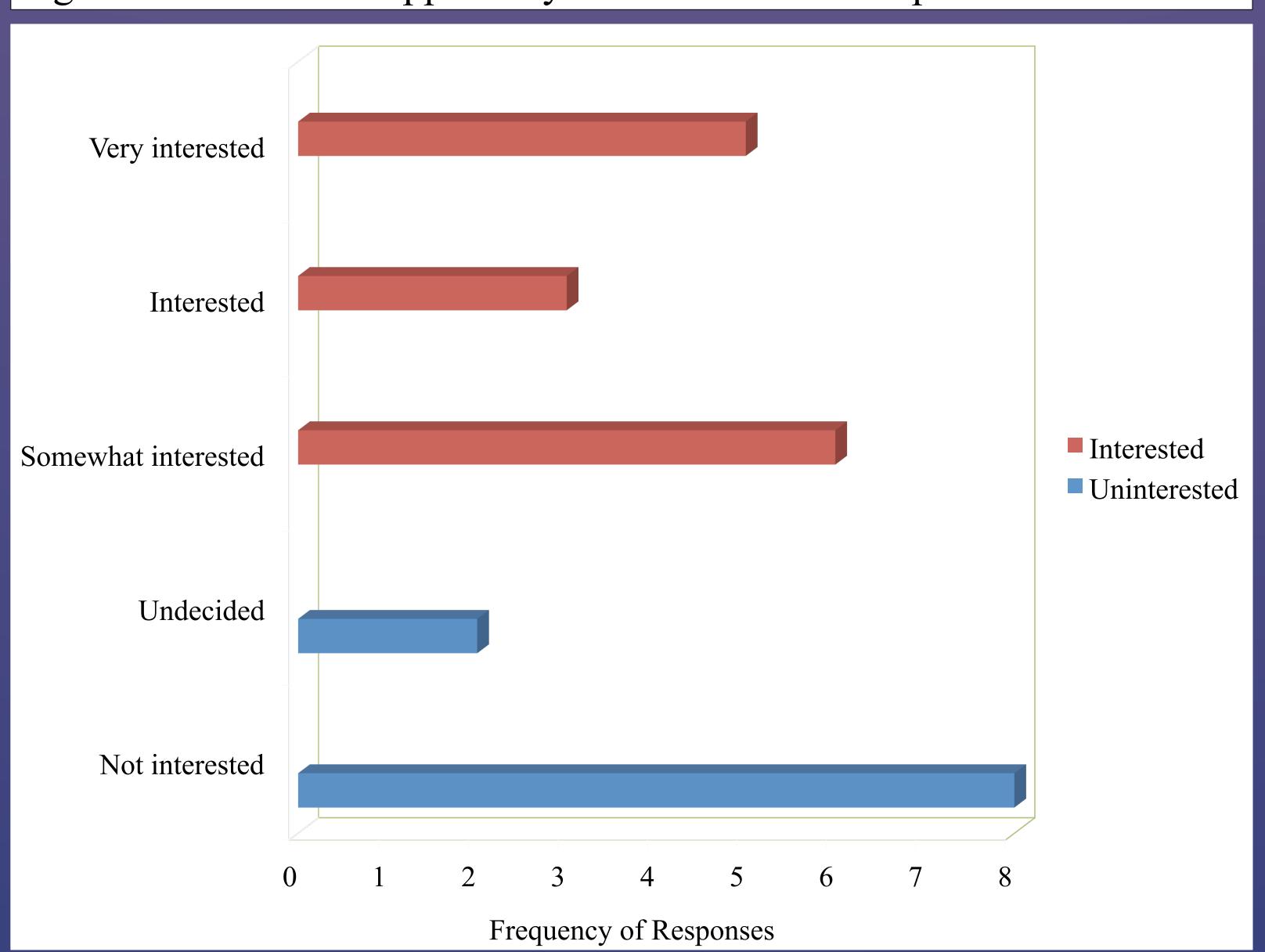


Table 2: Reported Stressors of Participants

Stressors	Frequency of responses	Percentage of participants
Financial problems	6	24%
Work-related problems	6	24%
Health problems	9	36%
Addiction problems	2	8%
Victim of abuse	0	0%
Emotional problems	7	28%
Marital issues	3	12%
Parenting issues	4	16%
Spiritual/religious issues	1	4%
Caregiver stress	5	20%
Family issues	10	40%
Sexual problems	2	8%
Pre-deployment adjustment	3	12%
Post-deployment adjustment	3	12%
None	2	8%







Methodology

A survey design utilizing a convenience sampling method was used to explore the needs of spouses or significant others of veterans and current military personnel. A self-report survey consisting of questions related to current supports and stressors was distributed to participants that are spouses or significant others of veterans or current military personnel by five local agencies (Lutheran Social Services, The Thro Company, Brown County Veteran Service Office, Blue Earth County Veteran Service Office, and Addiction Stress Clinic Psychological Services). The survey included Likert-type scale responses, open-ended questions, and close-ended questions.

Data/Results

There were 85 surveys distributed from May 2012 to June 2012, and 27 surveys were returned. Two surveys were omitted from analysis, resulting in a 29.4% response rate. Fourteen out of 25, or 56%, of the participants expressed some level of interest in a support group designed around current stressors in their lives. Most participants (40%) indicated family issues as the biggest stressor in their lives, with health problems being the second (36%). About 60% of the participants felt they agreed or strongly agreed they have local support in the community that addressed their mental wellness. About 33% of the participants currently utilize services provided by the Veteran Affairs (VA) organizations. Stressors with the lowest percentage reported by participants included being a victim of abuse (0%), spiritual/religious issues (4%), addiction problems (8%), sexual problems (8%), predeployment adjustment (12%).

Limitations and Strengths

Limits of this research include a small sample size with a low response rate. This could increase the likelihood of respondent bias, as military personnel may feel stigmatized as weak if they seek help; this may be transferred to family members. Participants may feel predisposed to agree to a new service when they are given only general information and are not provided with any specific costs (Rubin & Babbie, 2011). Convenience sampling could be seen as a disadvantage because of a lack of representative people within the study, and there may be inherent bias as the sample was not chosen at random. Also, families that may underutilize services were not surveyed.

Strengths of this research include the timing of this research, as 2,700 Minnesota National Guardsman returned from Iraq this past spring, and an assessment of services for Minnesota military family members is much needed (Shenoy, 2012). Another strength of this survey was that participants were able to answer questions anonymously, which may have encouraged more open and honest responses and decreased the fear of any potential stigma. While the response rate for this research is low, it falls into the documented range (27-59%) for research on military families and personnel (Blough et al., 2010; Newell et al., 2004).

Recommendations and Implications for Practice

At this time, LSS could invest in a support or psycho-educational group, as 14 participants expressed interest in a support group. The implications for social work practice are to help veterans and families navigate the VA system and to help veterans deal with emotions associated with their new situations. Rural communities may not offer support services for spouses of military personnel and accessibility may present a challenge. According to the U.S. Department of Defense, the average military family moves every two to three years (Lincoln & Sweeten, 2010). Homelessness and discrimination are additional important considerations for social workers. A generous amount of research and policy should focus on suicide prevention among military personnel and veterans, as suicides are at the highest rate, almost to one military suicide per day in 2012 (Burns, 2012) and have increased every year since 2004 (Franklin, 2009).

References

Available upon request.