



# REINTEGRATION PARTNERSHIP PROJECT

## **Summary of Findings & Key Recommendations**

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# SUMMARY OF FINDINGS

## *Mental Health*

- PTSD levels increased at three, six, nine, and twelve months.
- Large increase in PTSD, depression, and anxiety symptoms at nine months.
- Biggest barriers to mental health care include cost, perceived career impact, child care, medication side effects, and confidentiality.
- Anxiety and alcohol use most immediate concern after return.
- Low levels of suicide ideation.
- As mental health issues increase at nine months, so do treatment concerns of confidentiality and career impact.

## *Economic Stability*

- Forty percent of unit members unemployed upon return. Half of these remain unemployed at three months.
- Issues of financial stability spilled into other areas including relationship adjustment and health care.

## *Relationships*

- Relationship satisfaction was and remained high among unit members. Spousal/partner support appears to be an important factor during the reintegration process. Most report having the needed support from their significant other.
- Dealing with child behavior was a concern throughout the year. Decisions about discipline caused difficulties in relationships.
- Adjustment to the household and family routine was the most reported concern after deployment.
- Challenges with adjustment to household and family routine subside over the course of the year. Problems with child behavior do not.

## *Stress*

- The biggest stressors include financial stress and work problems.
- These stressors remain the biggest source of stress throughout the year.
- A slight increase in levels of stress appears at nine months.

## *Physical Health*

- Overall good health reported. Limitations due to physical health were minimal.
- Low levels of combat exposure symptoms.
- Participants satisfied with health care received but have cost concerns.
- Increase in report of memory problems at nine months.

# REINTEGRATION

Summary of Findings and  
Key Recommendations

# PARTNERSHIP PROJECT

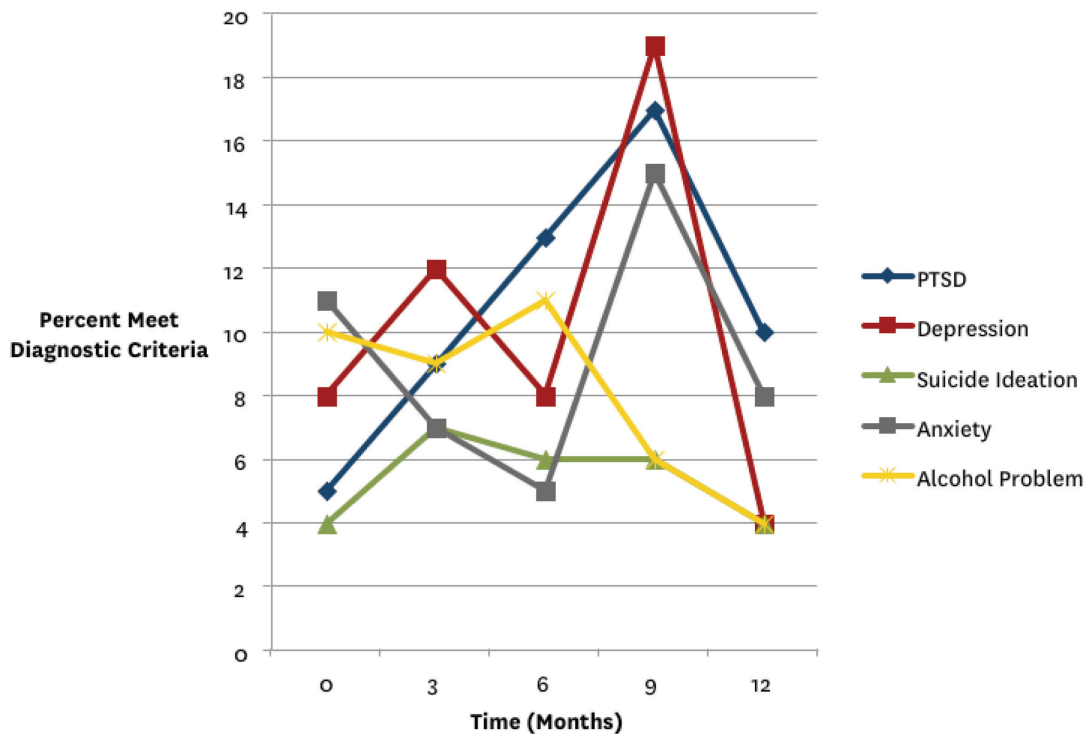
There are approximately 2.6 million men and women who have served in the U.S. military during the post-9/11 period and their transitions home after deployment often create a rollercoaster of mixed experiences. About 40 percent of the fighting and support services deployed to Iraq and Afghanistan are members of the National Guard and Reserve Forces who often return to civilian communities that are ill-prepared to accommodate their reintegration needs. This brief describes the Reintegration Partnership Project<sup>1</sup>, which explored the transition process for California National Guard members and their families after Reintegration Skills Training (RST), an evidence-based problem-solving practice aimed at easing the challenges associated with transition from combat to civilian life. It also reports findings of a follow-up assessment of the reintegration experience for California National Guard members.

## STUDY OVERVIEW

The reintegration assessment was a one-year research project exploring the transition process for 126 California National Guard troops and their families. Returning service members were offered three participation options: (1) voluntarily attend a two-day transition support RST program at a neutral, third-location decompression site (onsite group); (2) participate in the RST program through an online service (online group); or (3) elect not to participate in the RST program (control group). Fifty-three California National Guard members chose the onsite RST program, while 39 took the online program and 34 chose not to participate. Data were collected from each group at five intervals, including a baseline measure taken upon their return to California (pre-intervention), as well as measures at three, six, nine, and 12 months. Information was gathered related to issues of physical and mental health, social relationships, economic distress, reintegration goals, stress, and evaluation of the RST program. A drop of participation rate did occur at several intervals. Seventy-three percent of the original unit members completed the three month measure, 52 percent at six months, and 41 percent at nine and 12 months.

<sup>1</sup> Launched in 2011, the Reintegration Partnership Project is a collaboration between California National Guard, the University of Southern California Center for Innovation and Research on Veterans & Military Families, the Los Angeles County Department of Mental Health, and the Science Applications International Corporation.

**Figure 1. Mental Health Trajectory**



## FINDINGS

### *Mental Health*

The study followed the trajectory of symptoms of post-traumatic stress disorder (PTSD), depression, suicidal ideation, anxiety and alcohol misuse throughout the first year of reintegration. The most frequent mental health challenges reported immediately after return were anxiety and alcohol misuse. Although alcohol misuse was an immediate concern, rates fell at each interval and affected only four percent of unit members by the 12-month mark. The number of participants who met the criteria for PTSD was the only mental health challenge to see an increase at the three-, six-, and nine-month marks. The highest rates of any mental health challenge were reported at nine months, when nearly 20 percent of unit members met criteria for a diagnosis of depression. **Figure 1** illustrates the course of mental health symptoms throughout the year.

### *Barriers to Care*

Participants were asked to indicate the biggest barriers to receiving mental health care. Five responses were most identified as barriers to treatment: (1) high cost of mental health care, (2) concerns about the potential negative impact to career, (3) difficulty getting child care or time off work, (4) the side effects of medications, and (5) concerns about confidentiality of treatment. At nine months, large increases were seen in concerns about career impact and confidentiality.



### *Relationships*

Participants reported high satisfaction with marriage and intimate relationships throughout the year with little variation. The most frequently reported readjustment issues were dealing with mood changes, rebalancing household responsibilities, and adjusting to family routine. In general, increases (5-15%) in adjustment issues were reported from baseline to three months, but declined thereafter. When asked to identify relationship concerns that have caused worry over the last three months participants most often described not having enough time to do the things s/he wanted to do and experiencing financial difficulties. These worries remained constant throughout the year. Disagreement with spouse/partner over discipline of children saw the biggest increase after return (23%) and three months (40%). Forty percent of unit members also reported problems with child behavior.

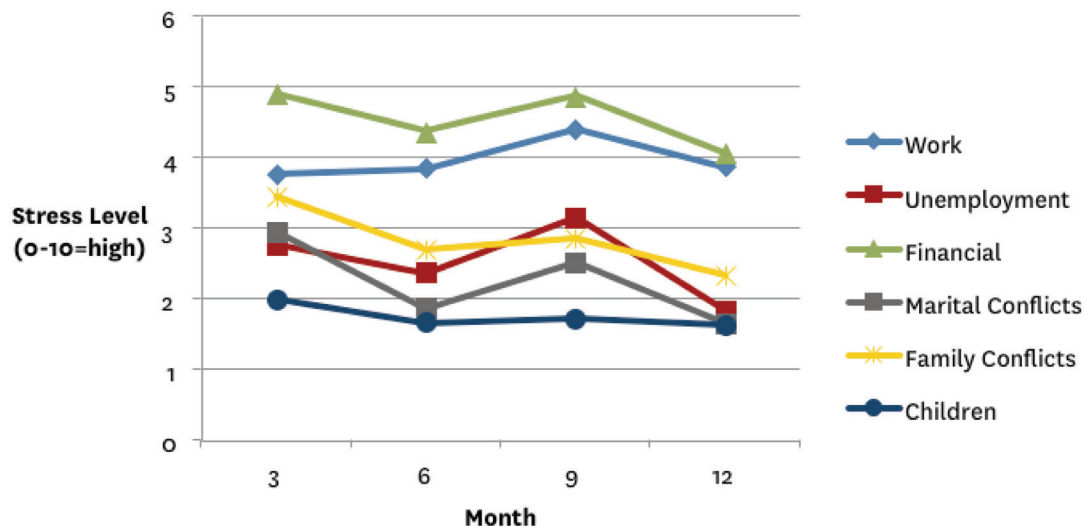
### *Economic Stability*

Although most participants reported having at least their basic needs met, financial security remained a concern throughout the year. Service members reported unemployment benefits as insufficient in providing adequate support after deployment. Almost 40 percent of unit members were unemployed at the first measure, half of these remained unemployed at the three month measure. Unemployment rates steadily decreased over the 12 month period. Once employment was secured, most participants reported confidence in their ability to retain their employment status.

### *Stressors*

The amount and causes of stress showed little variation. Financial problems were the most frequently reported contributor to stress. Overall, levels of stress decreased at six months but increased at nine months. **Figure 2** represents the average stress level (0-10 high) of the six most frequently reported causes of stress.

**Figure 2. Stressors**



### Physical Health

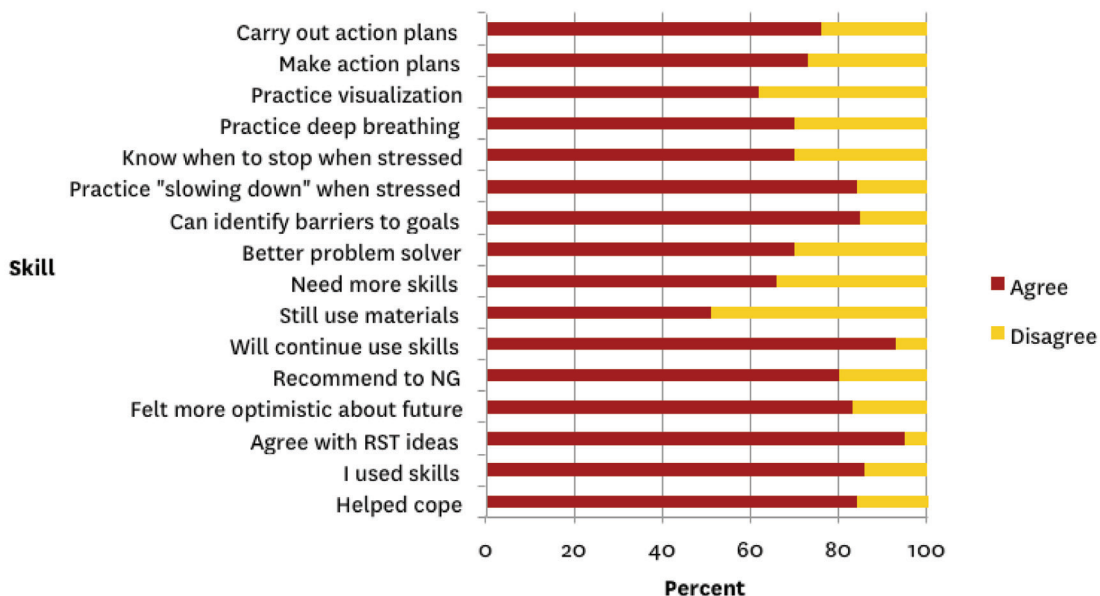
The participants reported overall good health all year. The majority of participants identified their health as excellent, very good, or good at each measurement point. A quarter of the unit members indicated experiencing pain that interfered with their normal work “a little bit” at baseline and three months. Limitations in physical health were not often reported. Combat exposure symptoms were also relatively low at the baseline measurement. The most frequently reported symptoms were irritability and sleep problems. Approximately 20 percent of unit members reported problems with memory at nine months and ringing in the ears at three months. At least a quarter of the unit members reported experiencing no combat exposure symptoms at each measurement point.

Regarding their physical health care, participants were also asked their satisfaction regarding their experiences with health care professionals. Overall high rates of satisfaction were reported as participants described receiving good medical care. Despite this, a few frustrations with physical care did emerge. Forty percent of unit members questioned the accuracy of their health diagnosis at three months and a third found getting appointments difficult. The majority of unit members also disagreed that they could afford medical care.

### RST PROGRAM

A positive significant impact of the RST training on mental health and relationship functioning was not statistically identified. However, participants indicated strong satisfaction with the RST program throughout the year. Members reported utilizing the skills learned and becoming better problem-solvers. Despite the satisfaction with the program, the majority of participants (approximately 68% at each measurement) indicated needing additional skills in aiding their reintegration process. There did not appear to be differences in satisfaction rates among those who participated in the in person RST retreat and the online training. **Figure 3** demonstrates the evaluation of the RST program at three months.

**Figure 3. Evaluation of RST Training at 3 Months**



## KEY RECOMMENDATIONS

### *Mental Health Needs*

#### **Manage alcohol use after deployment.**

- **Education** should focus on the potential for alcohol misuse particularly during first three months of reintegration. Include the possible physical, mental, financial, and legal consequences associated with use and how to recognize excessive behavior.
- **Provide** resources for professional substance misuse help. Include military and community organizations.
- **Support** research that explores the trajectory and causes of alcohol misuse specific to California National Guard reintegration.

#### **Target education and interventions.**

- **Educate** California National Guard members and families on the trajectory of mental health issues, particularly the potential for development and/or increases in mental health symptoms around month nine.
- **Provide** opportunities for mental health education and intervention during initial months of reintegration and throughout post-deployment year.

#### **Reduce the stigma of seeking services.**

- **Educate** California National Guard members and families about factors of confidentiality and the rights of an individual seeking mental health services.
- **Include** the potential for positive career impact from seeking improvements in psychological health.
- **Consider** additional practices and policies that ensure protection of California National Guard careers and confidentiality.

### *Individual and Family Needs*

#### **Employment**

- **Provide** early education on the employment challenges faced during reintegration, including the impact of financial stress on mental health and familial issues.
- **Provide** resources for managing financial difficulties during initial months of reintegration. Continue job searches and trainings through nine months after return.
- **Analyze** insufficiencies in current laws protecting California National Guard employment.

#### **Readjustment**

- **Provide** training and services related to readjustment around three months after return. Programs should involve both the service member and their spouse/partner.
- **Provide** education skills for addressing child behavior concerns.
- **Support** continued research specific to reintegration experience of California National Guard.

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