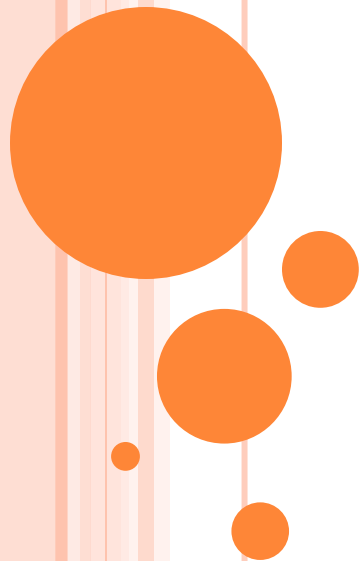


# **POINTS TO CONSIDER IN JUDGING THE VALUE OF INTERVENTIONS FOR MILITARY FAMILIES IN TRANSITION**

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# INTERVENTIONS FOR MILITARY FAMILIES IN TRANSITION

- A number of interventions have been developed to help spouses and children of military personnel
  - cope with the stressors of deployment & its aftermath
  - enhance their resilience in facing potential stressors
- Content of these programs typically is based on
  - the kinds of stressors that military families experience,
  - the problems that they face in coping with them, and
  - factors that facilitate families' resilience



# INTERVENTIONS FOR MILITARY FAMILIES IN TRANSITION

- Therefore, these interventions are **empirically-based...**
- But are the interventions themselves **evidence-based?**
  - For example, how do we know that they actually improve the lives of individuals that they are designed for, however that might be measured?
- Most common critique of the interventions that have been described in the literature: they typically are **not evidence-based.**



# HOW IS “EVIDENCE-BASED” DEFINED?

- Usual focus = **research** evidence, itself complex
- Clinically relevant and patient-centered research designs
- For example:
  - quantitative research, qualitative research
  - group designs, single-subject designs
  - randomized trials or not randomized
  - efficacy or effectiveness studies



# EVIDENCE-BASED RESEARCH

- Methodological points to consider:
  - intervention quality control
  - follow-up rate and duration
  - type of measures and their properties
  - sample attrition



# MORE THAN RESEARCH

- Institute of Medicine (2001)
- **Evidenced-based practice** = integration of best research evidence with clinical expertise and patient values
- Each of these components of the IOM definition is as complex as the research component



# EVIDENCE-BASED PRACTICE

## ○ CLINICAL EXPERTISE

- Use of clinical skills and past experience to identify each patient's unique health state and diagnosis, individual risks and benefits of potential interventions, and personal values and expectations



# EVIDENCE-BASED PRACTICE

## ○ PATIENT VALUES

- The unique preferences, concerns, and expectations that each patient brings to a clinical encounter and that must be integrated into clinical decisions if they are to serve the patient (Reed, 2006)





# ARE INTERVENTIONS FOR MILITARY FAMILIES IN TRANSITION EVIDENCE-BASED?

- The question is not as simple as it seems
- There are many facets to answering this question, and it could help to advance our intervention efforts if it is asked more specifically



THANK YOU

