

The Effects of Interpersonal Support on Treatment Outcomes Using Cognitive Processing Therapy (CPT)

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RESEARCH BRIEF

This study examines the causal relationship between social support and PTSD symptom severity

WHY IS THIS RESEARCH IMPORTANT?

- Currently there are **two primary models** that explain the relationship between PTSD symptoms and social support: the **social erosion** and **social causation models**. However, it has not been applied during treatment.
- **Prevalence of meeting diagnostic criteria for PTSD** varies across studies **ranging from 10-15%** for service members who have deployed to Afghanistan or Iraq.
- Better social support (quality of a service member's relationship with nonmilitary social supports) has been associated with **fewer PTSD symptoms and increased coping**.
- Many studies on this topic have been cross-sectional. This study looked at data over time of individuals who attend therapy in a group or individually and examines three types of social support, "Appraisal, Belonging, and Tangible Support."

HOW WAS THE RESEARCH CONDUCTED?

This research analyzed data from two randomized clinical trials **examining the effectiveness of Cognitive Processing Therapy (CPT)** in **322 active duty service members** who were deployed after 9/11/2001. **133 participants received individual therapy** and **189 received group therapy**. The average age of participants was 33 and ranged from 20-53 with 92% of participants identifying as male. Individual sessions were 60 minutes and group sessions were 90 minutes. Participants were assessed for outcomes at baseline, immediately post-treatment, and 6 months after treatment.

WHAT DID WE FIND?

- Compared to participants who dropped out of treatment prior to the post-treatment assessment, those who completed treatment were significantly older, but they did not differ on any other demographic variables. **227 of the original 322 participants completed post treatment assessments**.
- Results indicated that **PTSD severity and social support were related**.
- This study compared those who received CPT treatment in a group to those who received CPT treatment individually. Results were consistent with findings from the parent study, that **baseline PTSD severity predicted post-treatment PTSD severity more strongly for those who received group CPT**.
- In the military context, these findings suggest that **older military personnel**, such as senior officers and noncommissioned officers, **may have less social support**. These individuals are more likely to serve in leadership positions, with large numbers of military personnel working for them, but only a **limited number of peers who might provide social support**.
- It does not appear that group therapy for PTSD provides added benefit with regard to increasing social support.

ACTION STEPS

- For patients with chronic or severe problems associated with both PTSD and social support, clinicians might consider **family-centered models of care**.
- Consider **prioritizing individual treatment** over group interventions for PTSD among military populations.
- Offer or include **interpersonal skills** training prior to, alongside, or following treatment for PTSD which could be beneficial for patients with histories of trauma.