The Effects of Interpersonal Support on Treatment Outcomes Using Cognitive Processing Therapy (CPT) (2021)

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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.