Families in the Frontline 1.0: An Evaluation Study of Multi-Family Therapy (MFT) for Veteran Families

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1) To investigate the effectiveness of Multi-family therapy (MFT) versus individual oriented treatment as usual (TAU) on end-of-treatment family functioning of veteran families, as reported by the veteran. TAU consists of supportive counselling or...

Ethical reviewApproved WMOStatusCompletedHealth condition typeOther conditionStudy typeInterventional

Summary

ID

NL-OMON46428

Source

ToetsingOnline

Brief title

Multi-familie therapie (MFT) for veteran families

Condition

• Other condition

Synonym

Severe affected deployment-related family functioning within veteran families

Health condition

Uitzendgerelateerd gezinsdisfunctioneren bij veteranengezinnen

Research involving

Human

Sponsors and support

Primary sponsor: Universiteit Utrecht

Source(s) of monetary or material Support: Landelijk zorgsysteem Veteranen-PAO

Intervention

Keyword: Family functioning, Multi-family therapy (MFT), Post-traumatic stress disorder (PTSD), Veteran families

Outcome measures

Primary outcome

Family functioning as measured using the SCORE-15 which is filled in by the veteran.

Secondary outcome

Secundary measures include family indices (family functioning as noted by the partner, child functioning reported by both parents, and couple functioning as noted by both parents) and outcomes on the level of the individual veteran (PTSD symptomatology, emotion regulation, and mentalization).

Study description

Background summary

The negative influence of PTSD and more specifically deployment-related PTSD on family relationships has been well documented. Despite this fact, there is a dearth of empirically supported family programs addressing family functioning and PTSD within veteran populations. In particular, interventions that are tailored to the needs of veteran families are relatively new and under-studied.

Study objective

1) To investigate the effectiveness of Multi-family therapy (MFT) versus individual oriented treatment as usual (TAU) on end-of-treatment family functioning of veteran families, as reported by the veteran. TAU consists of supportive counselling or trauma-focused therapy, either individually or

group-based. TAU is individually oriented, targeting the veterans' PTSD symptomatology, while MFT is system/contextual oriented, targeting the veterans' family functioning through increasing parents' mentalization and emotion regulation capacities. 2) To examine the effectiveness of MFT versus TAU on other family indices (family functioning as reported by the veteran's partner and the children (aged 12 years and older); child functioning as reported by both parents and the children (aged 12 years and older); couple adjustment as reported by both parents). PTSD symptom severity, emotion regulation, and mentalization, are included indices on a veteran level.

Study design

This is a multisite study in which an observational design will be applied with a two-arm model in which the intervention group/MFT+TAU will be compared with the control group/TAU.

Intervention

Multi-family therapy (MFT), part of the usual care at the participating sites, is a comprehensive group intervention targeting families with children and aims to elicit behavioural changes in family members through the restructuring of interactional patterns in families. MFT provides a context of different subsystems. The interactions and processes on different levels facilitate change in individuals and families, as different perspectives and opportunities to experiment with new behaviour are generated. Once families are able to share their difficulties with other families, they can provide each other with understanding, insight, perspectives and suggestions, and many resources. MFT has been successfully applied to a whole range of problems and disorders. Mentalization based family therapy (the Marlborough model) primarily focuses on enhancing mentalizing strengths (i.e. the ability to understand emotions of the self and the other) and thereby enhancing sensitivity. Therefore, the Marlborough model of MFT seems particularly fit for treatment of the complex consequences of trauma in families.

Study burden and risks

MFT is widely used and considered to be 'good practice'. MFT is part of the standard care in the participating sites. Its effectiveness has been established in a variety of populations. Therefore, it is not likely that this therapy will be counterproductive. Besides one computer task, measurements include questionnaires which are brief and some are even already part of the routine outcome measurement. The assessments are not upsetting. The risk and burden are therefore minimal. When this study ends, care/treatment is offered to the couples when needed. In the long term this study adds to the evidence for programs targeting family functioning among veteran families.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adolescents (12-15 years) Adolescents (16-17 years) Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

- 1. Parents aged >18
- 2. One parent is being deployed (i.e. is a veteran)
- 3. Family disfunctioning: the totalscore on the SCORE-15 (a family functioning measure), as filled in by the veteran, is 37.5 or above
- 4. Parents having at least one child living with them (aged <18)
- 5. Veterans attribute the family problems to the deployment

Exclusion criteria

- 1. Acute suicidality according to the DSM-5
- 2. Current psychotic disorder
- 3. Current abuse of partner or child(ren)
- 4. Neurological-, physical-, cognitive-, or intellectual deficits among a family member which interferes with MFT group participation.
- 5. Families receiving any form of couple, family, or parenting related therapy
- 6. Both parents have been deployed.

Study design

Design

Study type: Interventional

Intervention model: Other

Allocation: Non-randomized controlled trial

Masking: Open (masking not used)

Control: Active

Primary purpose: Treatment

Recruitment

NL

Recruitment status: Completed

Start date (anticipated): 29-11-2018

Enrollment: 120

Type: Actual

Ethics review

Approved WMO

Date: 22-01-2018

Application type: First submission

Review commission: METC NedMec

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register ID

CCMO NL64137.041.17