Veterans exhibit elevated risk for intimate partner violence (IPV; Marshall, Panuzio, & Taft, 2005)

Strength at Home (SAH) IPV intervention
- Social information processing model of IPV in military populations (Taft et al., 2016; Taft, Murphy, & Creech, 2016)
- Psychoeducation, self-monitoring, improved coping, and communication skills

Research on moderators of SAH treatment outcomes is needed to increase effectiveness
Veterans are at increased risk for alcohol use disorder (AUD; Lan et al., 2016; Smith, Goldstein, & Grant, 2016)

AUD risk factor for IPV use (Shorey, Stuart, & Cornelius, 2011), and recidivism following IPV intervention (Lila, Oliver, Catalá-Miñana, & Conchell, 2014)

AUD is associated with poor treatment attendance (Poole, Creech, Macdonald, & Taft, 2019) and treatment dropout (Olver et al., 2011)
To compare SAH treatment outcomes for veterans with and without AUD.

Veterans with AUD will show smaller post-treatment reductions in IPV.

Differences will remain after accounting for differences in treatment attendance.
METHODS

Participants were 61 male veterans (\(M\) age = 37.18, \(SD = 13.23\); 82% White; 18% met criteria for AUD) who received SAH in previous RCT (Taft et al., 2016).

MINI-S used to assess AUD at baseline.

Conflict Tactics Scale- Revised (CTS2) to assess physical and psychological IPV.

Multidimensional Measure of Emotional Abuse (MMEA) as additional measure of psychological IPV.

IPV assessed at baseline, 3 months, 6 months, 9 months.
RESULTS

- Generalized mixed modeling: time, AUD status, treatment attendance, and cross level interactions
- Significant 3-way interaction (time, AUD status, attendance) on MMEA scores
- Veteran with AUD showed smaller reductions in IPV even at high levels of treatment attendance
- Post-hoc analyses- remained significant only for MMEA restrictive engulfment subscale
Predicted values of psychological IPV as measured by the MMEA over time between veterans classified with vs. without AUD and across levels of session attendance.
• Participants with AUD receive less benefit from treatment, specifically regarding coercive and controlling abusive behaviors.
  • AUD may prevent veterans from receiving adequate dose to address more subtle abusive behaviors

• These behaviors are also associated with externalizing personality pathology (Eckhardt, Holtzworth-Munroe, Norlander, Sibley, & Cahill, 2008; Thomas, Bennett, & Stoops, 2013)
  • Co-occurring externalizing psychopathology might interfere with their ability to benefit from treatment

• Veterans with AUD may not fully engage in treatment if they do not feel SAH is addressing their needs.

• Results support need for adapting IPV intervention to address AUD and related psychopathology
QUESTIONS?
REFERENCES


