

Using Peers Directly during *in vivo* Homework of Prolonged Exposure Treatment for PTSD

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Background: Prolonged Exposure (PE) for PTSD is a highly effective evidence-based treatment. However, the dropout rate of 25-35% is a major concern. In our study of about 70 dropouts from two large trials of exposure therapy with combat veterans, we found that a large percentage reported difficulty during *in vivo* exposure homework (Hernandez-Tejada et al., 2014). Qualitative interviews with this sample also indicated that the limited availability of a peer “workout buddy” who offered support during *in vivo* exposure trials would be likely to enhance treatment retention. We developed such a peer support program, where peers accompanied veterans during exposure homework 3-4 times per week, for 3-4 weeks and hypothesized that dropouts who decided to re-engage in treatment with a peer would evince improvement in depression and anxiety scores.

Methods: Participants were veterans of OIF/OEF/OND who dropped out of PE and continued to meet criteria for PTSD. A repeated measures single arm design (pre-, post-treatment) was used to derive within subject evaluations of PTSD (PCL-M) and depression (PHQ-9) over time (follow-up pilot data are currently being collected at 3&6 months). Data were analyzed with SPSS-22. Multiple imputation was applied to missing data.

Results: 28 veterans (34% of those approached) re-entered treatment when offered peer support during exposure. Considering outcomes: the PCL-M was reduced from a $\bar{x}=65.32$ (SD=10.447) to $\bar{x}=49.57$ (SD=4.90) at posttreatment. PHQ-9 was reduced from $\bar{x}=15.80$ (SD=5.0529) to $\bar{x}=11.48$ (SD=0.464) at posttreatment.

Conclusion: Peers are routinely consigned to tertiary roles in PTSD treatment, such as offering testimony toward the usefulness of treatment, facilitating referrals or participating in support groups. However, peers have rarely been directly involved in exposure components of care. Our findings indicate that peers who offered support during *in vivo* exposure homework were effective in returning combat veterans with PTSD back to treatment, which was subsequently effective in reducing symptoms of PTSD and depression.

Biography:

Dr. Melba A. Hernandez-Tejada is a Research Associate Professor at the College of Nursing and a Research Scientist at the Ralph H. Johnson Veterans Affairs Medical Center. Dr. Hernandez-Tejada holds degrees in Health Administration and Clinical Psychology, and completed a postdoctoral fellowship in Health Disparities at MUSC. Her research experience and interest are concentrated in the following areas: Improving access and increased health care utilization and engagement in treatment for both physical and mental health conditions through innovative use of social support and telehealth, particularly among minority groups. She has also applied this focus to work with veterans, most specifically those with a mental health condition such as depression, and PTSD. Finally, she has engaged in practice level efforts involving raising awareness among providers regarding adequate screening, identification, diagnosis and referral of elder mistreatment survivors, and treatment options for elder abuse victims.