Engaging Rural Veterans in Improving PTSD Educational Materials

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BACKGROUND

- PTSD treatment is complex and poorly understood
- Benzodiazepines are not recommended for PTSD
- Polysedative use can lead to accidental overdose
- Benzodiazepine and polysedative prescribing in PTSD continues – with high rates in rural Veterans

INNOVATIVE INTERVENTION

- Direct-to-consumer strategies enhance Veteran involvement and shared clinical decision making
- We engaged Veterans in the development of PTSD educational materials

IMPACT

- Twenty-two Veterans + family members
- Rural residents of Vermont and New Hampshire
- Age: 33-62; Era: Vietnam, OIF/OEF/OND
- Individual and group feedback sessions: VA Residential Recovery Center, VA Community Based Outpatient Clinic, Lyndon State College, Lyndonville, VT

- 4 infographic posters and 11 brochures created so far with 3,219 distributed nationwide to 257 VA and community sites

LESSONS LEARNED

- Rural veteran input during development resulted in more acceptable and accessible PTSD educational products
- Key clinical messages about evidence-based treatments and medication risk can be successfully simplified in infographic posters and brochures

FUTURE WORK

- Continue multifaceted educational strategy to foster access to quality PTSD care
- Healthcare provider feedback sessions

What Veterans Told Us

I want to be informed and make my own decision

Comparisons between different treatments – I like that a lot

I want it to address pain, sleep, alcohol use, and bad side effects

I would like an 800 number to discuss medications

I want more information about the non-medicine options

Let the Veteran know that it’s their choice whether they take medication

I want to know all my options