Active Military Service Members/Veterans

923 Home-Based Telebehavioral Health for U.S. Military Personnel and Veterans With Depression: A Randomized Controlled Trial
David D. Luxton, Larry D. Pruitt, Amy Wagner, Derek J. Smolenski, Michael A. Jenkins-Guarnieri, and Gregory Gahm

Behavioral activation treatment for depression can be feasibly delivered to the homes of active-duty U.S. service members and veterans. Small-group differences suggest a slight benefit of in-person care over in-home telehealth on some clinical outcomes. Telebehavioral health services provided to the home or other locations have the potential to address current and future health needs of military service members and veterans, especially for those who live in rural or underserved areas.

935 Strength at Home Couples Program to Prevent Military Partner Violence: A Randomized Controlled Trial
Casey T. Taft, Sacannah K. Creech, Matthew W. Gallagher, Alexandra Macdonald, Christopher M. Murphy, and Candice M. Monson

This study suggests that the Strength at Home Couples program, a cognitive–behavioral trauma-informed intimate partner violence (IPV) preventive intervention for married or partnered military service members or veterans, is efficacious in preventing physical IPV and reducing psychological IPV.

946 Randomized Controlled Trial of Prolonged Exposure Using Imaginal Exposure vs. Virtual Reality Exposure in Active Duty Soldiers With Deployment-Related Posttraumatic Stress Disorder (PTSD)

Results provide convergent evidence suggesting that exposure therapy is an effective treatment for active duty U.S. Army soldiers with posttraumatic stress disorder from deployments to Iraq and Afghanistan.

960 Evaluating Postdeployment Training for Coping With Intrusive Cognition: A Comparison of Training Approaches
Jillian C. Shipherd, Kristalyn Salters-Pedneault, and Joanne Fordiani

This study suggests that a brief, targeted, acceptance-based training may be beneficial in helping soldiers manage postdeployment intrusive cognitions.

Substance Use

972 Therapeutic Alliances Predict Session by Session Drinking Behavior in the Treatment of Alcohol Use Disorders

The annual societal and personal consequences associated with alcohol misuse are profound. This study shows that more positive patient ratings of the therapeutic alliance in treatment are associated with less alcohol involvement between treatment sessions, most particularly among patients who have not already initiated reductions in their drinking before the first treatment session. Efforts to maximize therapeutic alliances in such cases may warrant attention in the treatment of alcohol use disorders.

(Content continues)
Augmenting Brief Interventions for Adolescent Marijuana Users: The Impact of Motivational Check-Ins
Denise D. Walker, Robert S. Stephens, Claire E. Blevins, Kelsey E. Banes, Lauren Matthews, and Roger A. Roffman

Marijuana is the most widely used illicit substance in the United States, with approximately 25 million people having used marijuana at least once in the past year. An estimated 10% of persons who have ever used marijuana will become daily users, with lifetime marijuana dependence rates estimated at 4% of the general population, the highest of any illicit drug. Given that the great majority of adults with 1 or more marijuana use disorder symptoms report they began smoking before age 18, early intervention efforts with adolescents, particularly those who are using heavily, becomes an important public health objective in order to prevent later problems.

Primary Care

Motivational Interviewing Improves Depression Outcome in Primary Care: A Cluster Randomized Trial
Robert D. Keeley, David S. Brody, Matthew Engel, Brian L. Burke, Kimberly Nordstrom, Ernesto Moralez, L. Miriam Dickinson, and Caroline Emsermann

The results of this study suggest that in primary care settings, where most depressed persons receive treatment and where depression outcomes are generally poor, outcomes may be improved when primary care providers use motivational interviewing (MI) during clinical discussions about depression. Primary care providers may also be interested in learning MI because it can be used to target a range of persistent and problematic health-related behaviors that are prevalent in primary care settings.

Brief Reports

Randomized Controlled Trial of a Very Brief, Multicomponent Web-Based Alcohol Intervention for Undergraduates With a Focus on Protective Behavioral Strategies
Robert F. Leeman, Kelly S. DeMartini, Ralitza Gueorguieva, Christine Nogueira, William R. Corbin, Clayton Neighbors, and Stephanie S. O’Malley

Tertiary Health Research Intervention via Email (THRIVE) has the potential to make a public health impact as an alcohol reduction intervention due to its brevity, Web-based administration, evidence base, inclusion of multiple efficacious components, and free availability. Results from this initial study demonstrate evidence of efficacy for a version tailored to U.S. college students (U.S.-THRIVE) and suggest the potential value of emphasizing in brief interventions indirect protective behavioral strategies ancillary to drinking itself (e.g., watching out for your friends and them for you) rather than direct strategies concerning manner of drinking.

Treatment Moderators and Effectiveness of Engagement and Counseling for Latinos Intervention on Worry Reduction in a Low-Income Primary Care Sample
Carmela Alcantara, Xinliang Li, Ye Wang, Gloria Canino, and Margarita Alegría

This study suggests that a brief, culturally adapted, cognitive–behavioral intervention (Engagement and Counseling for Latinos, ECLA) for depression also reduces worry, especially among employed and low-income Latino primary care patients. Our results also suggest that telephone-delivered ECLA, in comparison to face-to-face-delivered ECLA, may hold strong promise as a method to increase access to effective and high-quality mental health treatments for Latino populations.

Other

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