

Skype therapy? It's working for veterans

July 5 2013, by Tony Perry

Ruben Moreno Garcia, who served three combat tours in Iraq, now lives with his family in this Imperial Valley community and works as a mechanic in Yuma, Ariz.

Kathryn Williams, a [clinical psychologist](#) for the Department of Veterans Affairs, has an office in the San Diego neighborhood of La Jolla, more than a hundred miles away.

Williams and Moreno Garcia meet once a week for an hour or so to discuss his progress in coping with post-traumatic stress disorder, the condition common to U.S. military personnel who served in Iraq and Afghanistan.

Their sessions are over the Internet, using a firewall-protected connection and a different password for each session.

"Being in your own living room for sessions, that's comfortable," said Moreno Garcia, 31, who studied computers before enlisting in the Army.

Williams concedes she was somewhat suspect of the therapy-by-Internet method.

"I've been doing therapy face-to-face for 10 years, so I was skeptical," Williams said. "But after one or two sessions, you forget about the camera."

Dr. Nilesh Shah, director of telemedicine for the VA San Diego, is blunt

about his assessment of the method, particularly in helping the growing number of VA patients that need long-term management for conditions such as PTSD, diabetes or obesity.

"It's the future," he said.

In the past nine months, 240 veterans served by the VA San Diego have had nearly 900 therapy sessions for PTSD using videoconferencing.

In most cases, the patient came to a VA clinic where the technology was already in place to meet with a therapist located elsewhere. For a few patients, such as Moreno Garcia, sessions were done in their homes using Cisco Jabber or Skype.

The veterans are spread throughout California. The program is being extended to veterans in Nevada, Oregon and Alaska.

Initial studies about the effectiveness of the videoconferencing approach have been positive, according to Steven Thorp, a clinical psychologist for the VA San Diego. He was the lead researcher in a recent study of 207 veterans enrolled in a 12-week course of PTSD therapy.

Veterans receiving the traditional approach to therapy - patient and therapist in the same room - showed progress more quickly in dealing with hyper-vigilance, mood swings and other aspects of PTSD.

But in the longer-term, videoconferencing patients progressed at a rate such that at the end of the 12 weeks, there was no difference between the two groups, according to the study published last year in *Psychological Services*, a journal of the American Psychological Association.

"The face-to-face method is never going away - it's been around a long

time," Thorp said. "But this is only going to get bigger."

There are occasional technical problems in using the Internet for live transmission: pixelation, choppiness and freezing. In one case, a therapist did not notice for three sessions that the patient was in a wheelchair, according to the study.

A decrease in empathy is also a possibility. "Physical contact, like shaking hands and handing tissues to a sobbing client, is not possible" with [videoconferencing](#), the study noted.

Still, the approach is seen as a boon for [veterans](#) who do not live near a VA hospital or clinic. There is a VA clinic in El Centro, but Moreno Garcia, who makes a 100-mile round trip each day to his job as a mechanic with the Border Patrol in Yuma, decided that making appointments was dicey.

Born in Mexicali, Mexico, Moreno Garcia spent six years on active duty in the Army, during which he became a U.S. citizen.

Assigned to an engineer company, Moreno Garcia spent much of his time in Iraq "outside the wire," responding to situations where U.S. vehicles had been attacked by roadside bombs. "They couldn't get anyone out until I arrived," he said.

Promoted to sergeant, he lost a stripe when he punched a superior who Moreno Garcia said was disrespecting his comrades. His marriage fell apart and he began to drink. Two of his high school friends were killed in Iraq.

Tears came to Thelma Moreno's eyes when she remembered how her son looked and acted when he returned home three years ago.

"I had prayed to God and the Virgin Mary to bring him back to us," she said. "But he was so different, so unhappy. I would tell him, 'Ruben, relax, you're not there anymore, you're safe, here with the family.' "

Finally, she said, her son decided to seek help.

For two years, Moreno Garcia has been working with Williams, although the two have never been in the same room.

"You can go whole weeks, and then something happens and your brain is back in the war, with the hyper-vigilance and fight-or-flight," Moreno Garcia said. "You need help managing moods and feelings. That's where Dr. Williams helps."

His mother is happy with the progress he's shown: being better able to concentrate and maintain a positive outlook on life. "We have our son back," she said.

But she worries about other soldiers who are not yet receiving help. "Any soldier who comes home from war needs our support," she said.

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Citation: Skype therapy? It's working for veterans (2013, July 5) retrieved 27 April 2024 from <https://medicalxpress.com/news/2013-07-skype-therapy-veterans.html>

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