ABSTRACT

A MOBILE HEALTH APPROACH TO ASSIST VETERANS REINTEGRATING INTO CIVILIAN LIFE

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Civilian reintegration is the process of transitioning from military service to civilian life. For any active or reserve member of armed force, reintegration into civilian life can be very challenging. The reintegration phase has far larger impact than just a change in profession. It is actually a change in every aspect of life, which includes changes in lifestyles, responsibilities, home life, communities and much more. If a veteran is unable to survive the challenges of civilian reintegration it can adversely impact his or her personal and social life. Furthermore, in the long run it may even result in serious psychological conditions. Considering these difficulties that are not always faced by the general civilian population, the U. S. Army describes the reentry and reintegration problem to be as important as preparing soldiers for combat deployment.

Recently community-based prevention models for healthcare are gaining attention since government agencies and services are unable to reach veterans in all walks of community life. Dryhootch(DH) is a veteran-led community organization in Milwaukee. DH has successfully implemented a veteran peer-mentor support program for reintegrating veterans based on the evidence showing the effectiveness of peer-mentorship for mental health problems. A technology-based support system for the DHs’ peer-mentor program is an important area for exploration. It may help in reaching a large group of veteran population, especially tech-savvy student veterans on school campuses. In this thesis we have elaborated the challenges of designing, developing and deploying a technology-mediated intervention for a veteran to veteran peer-mentor program. Based on detailed field studies, we have designed and developed a mobile technology-mediated peer-mentor support system called iPeer for the DH veterans. iPeer provides a remote symptom monitoring system for the DHs’ peer-mentor program along with a social support network for the veterans.

The goal of iPeer is to make the transitioning phase of the reintegrating veterans smoother. Although, the answer to the question that whether or not it helps during the reintegration phase is not immediately available. It requires years of observation of the life of reintegrating veterans through the iPeer system. Nonetheless, this thesis is an attempt to address how we can help the technology-mediated peer-mentor service become a success. The system requires data gathering from veterans, data storage in server and data visualization for mentors. For a successful technology-based service like iPeer the presentation of information is very important. We report on a set of experiments designed to identify the best possible representation of complex visual information in the user interface of the iPeer system. The first experiment focused on how to best present information of a “patient panel” showing symptom change among veterans to their veteran peer mentor. The second experiment explored the best approaches for displaying highly relevant, socially driven location-based information services to veterans. This social/locational approach was designed with feedback from DH on strategies most likely to encourage veteran use of a smartphone intervention for this population. The two types of users for the iPeer system are, veteran peer mentors and the returning veterans seeking to use.