Predictors of Emotional Distress Reported by Soldiers in the Combat Zone


National Guard Soldiers were given self-report questionnaires while deployed in a war-zone to determine their levels of PTSD and depressive symptoms, and to identify behaviors associated with emotional distress. The findings indicate that female gender and prior deployment influence more aspects of emotional distress than do blast exposure or combat injury. Not feeling supported by the unit and one’s family was associated with many different aspects of emotional distress.

Key Findings:
- Factor analysis of results indicated 5 factors related to emotional distress: negative affect/cognitions, trauma-specific experiences, vegetative symptoms (e.g., energy level, fatigue, and appetite), loss of interest/numbing, and hyper-arousal.
- Negative affect/cognitions is predicted by previous deployment, direct combat experience, and low support from unit and family members.
- Trauma-specific experiences (intrusive thoughts, memories, nightmares, etc.) are predicted by prior deployment, direct combat experience, violent combat exposure or injuries, low support by unit and family, and being female; hyper-arousal is predicted by young age, direct combat experience, poor perceptions of unit support, and being female.
- Vegetative symptoms were predicted by being female, prior deployment, and low family support; greater emotional numbness/loss of interest is predicted by prior deployment, poor perceptions of preparedness, leadership support, and family support.
- Participant responses indicated a probable rate of PTSD and depression as 7% and 9%, respectively.

Implications for Programs:
- Programs designed to foster unit support could place greater emphasis on the importance of support prior to deployment.
- Reintegration programs could include specific components that address the emotional distress experienced by female Service members.
- Pre-deployment programs can educate Soldiers and family members about the importance of consistent communication during deployment for optimal mental health.

Implications for Policies:
- Policy for selecting optimal deployment schedules could consider the combination of prior deployment, prior combat experience, and the experience of each gender in making these determinations.
- Policies governing contact with family members at home while deployed could be altered to increase the amount of communication allowed.

Avenues for Future Research:
- A similar study could be conducted in the early and middle period of deployment to compare mental health at different phases of deployment.
- Future research could be done on additional branches of the Military to determine whether results generalize to different branches.
Methodology:
- 2,677 National Guard soldiers were given surveys in-person at a redeployment transition briefing that was scheduled one month before being redeployed home.
- Survey questionnaires focused on PTSD symptomology (assessed with the PTSD Checklist-Military Version and items from the DSM-IV), depressive symptomology (assessed with the Beck Depression Inventory-II), injury and traumatic brain injury screening (assessed with the Blast Exposure Screening Questionnaire), attitudes and experiences during deployment (assessed with single items about family and friend communication, unit support, and experiences while deployed), and combat exposure and demographics (assessed with questions about race/ethnicity, age, gender, rank, and branch of Military service).
- Participant responses were factor analyzed to determine factors statistically associated with PTSD and depression while deployed in a war zone.

Participants:
- 92% of participants were male. Participant race/ethnicity was predominantly Caucasian (83%), followed by Hispanic/Latino (5%), African American (4%) and Asian (2%).
- Just under half (42%) of participants were married or cohabitating prior to deployment and their mean age was 29.9 (SD = 8.0).
- The majority of participants were enlisted (89%), with just over half serving as Combat Arms (51%), followed by Combat Service Support (35%), and Combat Support (15%).

Limitations:
- Surveys were distributed one month prior to returning home, potentially skewing results.
- Data were only collected at one site, which may limit generalizability.

### Assessing Research that Works

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<th>Research Design and Sample</th>
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Not applicable because authors do not discuss implications

Overall Quality Rating: ★★★★☆