The Association Between Deployment-related Posttraumatic Growth among U.S. Army Soldiers and Negative Behavioral Health Conditions


1,834 recently deployed Soldiers were surveyed to assess the relationship between posttraumatic growth (recognized benefits from overcoming a very challenging life circumstance), combat exposure, and negative behavioral health conditions (suicidal ideation, alcohol misuse, depression, PTSD, and adjustment problems). Among recently deployed Soldiers, a significantly higher overall level of posttraumatic growth was reported by those who had moderate to high combat experiences as compared to those who reported low combat exposure.

**Key Findings:**
- Among previously deployed Soldiers, those reporting moderate and high numbers of combat experiences also reported significantly higher overall posttraumatic growth compared to those who reported low combat exposure.
- Soldiers reporting recent suicidal ideation reported significantly lower posttraumatic growth.
- Posttraumatic growth levels did not differ whether or not PTSD, adjustment reactions, depression, or problematic alcohol use were reported.
- The highest mean posttraumatic growth scores were observed in the appreciation of life and personal strength subscales.
- The mean posttraumatic growth score in this sample (M=41.1) was lower than a posttraumatic growth score reported in another study (M=52.0)

**Implications for Programs:**
- Programs could offer classes for Service members and their families about potential growth that can emerge from experiencing traumatic situations.
- Programs could develop modules about recognition and support of posttraumatic growth, including how family members may support one another in fostering this growth.

**Implications for Policies:**
- Policies that guide the assessment of functioning after combat exposure could expand the domains assessed to include posttraumatic growth.
- Policies could fund the development and evaluation of curricula to promote resilience and growth in the wake of trauma.

**Avenues for Future Research:**
- Additional research could be conducted in a broader sample of Soldiers.
- Prospective research could better assert the causal link between the experience of combat trauma and more posttraumatic growth.
At the request of the senior mission commander due to a cluster of violent behavior, a public health field investigation was initiated in a U.S. Army infantry brigade combat team during a 3 week-soldier readiness processing.

Participants who reported a prior combat deployment answered survey questions about post traumatic growth, demographic variables, combat experiences, history of behavioral health diagnoses, suicidal ideation, and alcohol use.

Mean post traumatic growth scores were compared to previously reported post traumatic growth scores in other samples; analyses of variance were conducted to determine differences in means and standard deviation across subgroups, and general linear modeling tested associations between the variables.

1,834 Soldiers participated (92% male).
66% Caucasian, 12% African American, 12% Hispanic, 61% married
45% some college/AA degree, 33% high school diploma, 11% GED.
45% E1-E4, 39% E5-E6, 8% E7-E9
49% 1 deployment, 49% 2 or more, 36% high combat experience, 33% moderate combat, 31% low combat.

The data are cross-sectional and no causal conclusions can be draw.
The data may not generalize to other samples, particularly given that this brigade was having violence problems and may not be representative of U.S. Military personnel.
All behavioral health conditions were self-reported and relied on a 1 item measure of recall of various domains.

Background Information

Methodology:
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Limitations:
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Research Design and Sample

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Research Methods

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Limitations

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Implications

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Not applicable because authors do not discuss implications

Overall Quality Rating

★★★