The Center for Research and Outreach

# **Putting Research to Work** for Military Families

Focus: Multiple Branches

## Longitudinal Changes in Combat-Related Posttraumatic Stress Disorder Among Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn Veterans With Hazardous Alcohol Use: The Role of Avoidance Coping

Lee, J., Possemato, K., & Ouimette, P. C. (2017). Longitudinal changes in combat-related posttraumatic stress disorder among Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn Veterans with hazardous alcohol use: The role of avoidance coping. *The Journal of Nervous and Mental Disease*, 205(10), 805-808. doi:10.1097/NMD.000000000000713

**SUMMARY:** Veterans are at high risk for posttraumatic stress disorder (PTSD), so it is important to understand the risk factors that contribute to PTSD severity. To explore PTSD risk factors among Veterans, this study analyzed data from two time points (baseline and one year later) regarding their childhood, combat severity, post-deployment social support, coping strategies, and PTSD symptoms. Results revealed that post-deployment social support and an avoidant coping style (i.e., avoidance of dealing with stress) were associated with Veteran's PTSD severity.

#### **KEY FINDINGS:**

- Avoidant coping and poor post-deployment social support were associated with Veteran's PTSD symptoms at baseline.
- Avoidant coping had a significant effect on Veteran's increase of PTSD symptoms one year after baseline.
- Alcohol abuse and childhood family environment were not associated with Veterans' PTSD symptoms at baseline or at one-year follow-up.

#### **IMPLICATIONS FOR PROGRAMS:**

Programs could:

- Offer support groups for Service members who experienced combat trauma to increase their social support
- Promote the benefits of social support and proactive coping on Service members' mental health
- Educate Service members about common PTSD symptoms and where to seek help

#### **IMPLICATIONS FOR POLICIES:**

Policies could:

- Recommend that all Service members with PTSD symptoms be offered support (e.g., workshops, peer support groups) during their reintegration
- Raise awareness about the importance of proactive coping strategies on Service members' well-being by providing classes and workshops for Service members and their families
- Recommend education of professionals on common risk factors (e.g., avoidant coping, poor social support) that contribute to Service members' PTSD severity

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#### METHODS

- Participants were recruited from Veterans Affairs (VA) primary care clinics by staff referral. To be eligible for the study, they needed to have hazardous drinking problems and showed at least mild PTSD symptoms.
- Each participant completed self-report measures at baseline and one year later (retention rate = 60%). Participants completed measures that included childhood family environment, combat severity, post-deployment social support, coping strategies, and PTSD symptoms.
- Data were analyzed to examine the associations between combat severity, post-deployment social support, avoidance coping, and PTSD severity.

#### PARTICIPANTS

- Participants were 150 OIF/OEF/OND Veterans (88% male).
- The average age of participants was 29.48 years (SD = 7.01) and most of them were White (83%); the race/ethnicity of the other 17% of participants was not reported.
- The military branches that the Veterans used to serve in were not indicated.

#### LIMITATIONS

- The sample was limited to Veterans who had PTSD symptoms and drinking problems, so findings may not apply to Veterans who do not have such symptoms.
- The length of time that Veterans had left military Service was not collected or reported; without considering that variable, it is difficult to examine the association between combat severity and PTSD symptoms.
- Veterans who left the study were more likely to use the avoidant coping strategy than Veterans who stayed; therefore, the effect of avoidant coping on PTSD symptoms may have been understated.

#### AVENUES FOR FUTURE RESEARCH

Future research could:

- Recruit Veterans both with and without drinking problems so that the findings can be better generalized
- Explore other factors (e.g., socioeconomic status) that may contribute to Veterans' PTSD severity
- Use methods to lower the attrition rates (e.g., using web-based assessment) so that the findings are less subject to self-selection bias



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