

## PUTTING RESEARCH TO WORK FOR MILITARY FAMILIES

Posttraumatic Stress Disorder in Veterans and Military Personnel: Epidemiology, Screening, and Case Recognition.

Gates, M. A., Holowka, D. W., Vasterling, J. J., Keane, T. M., Marx, B. P., & Rosen, R. C. (2012). *Psychological Services*. http://www.apa.org/journals/ser/



In this article, researchers review the empirical literature on the epidemiology and screening of posttraumatic stress disorder (PTSD) in military and Veteran populations, including an overview of screening instruments for identifying PTSD in military and Veteran populations.

#### **Key Findings:**

- Evidence suggests that the prevalence of PTSD is underestimated and that the actual prevalence of PTSD in deployed U.S. military personnel may be as high as 14–16%.
- In terms of risk factors, weak to moderate associations with PTSD have been reported for pre-trauma factors (e.g., younger age at trauma, prior psychiatric history). In contrast, characteristics of the trauma (e.g., trauma severity, perceived life threat, combat-related injury) and post-trauma factors (e.g., lack of social support, exposure to additional life stressors) have been strongly associated with risk of PTSD in multiple studies.
- Screening programs such as those implemented by the DoD and VA have been successful in identifying individuals with
  presumptive or probable PTSD. Although numerous symptom checklists and self-administered questionnaires have been
  developed, there is no compelling evidence that one screening instrument outperforms the others in Veteran and military
  populations.

#### Implications for Programs:

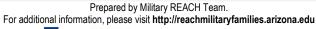
- By detecting and treating patients as soon as possible after the onset of symptoms, screening may contribute to a shorter duration of disease and more favorable outcomes.
- Use of multiple screening measures may increase the accuracy of identifying presumptive or probable PTSD.
- Given the concern that PTSD may affect personal or professional perception of military personnel, programs should actively encourage reporting of such symptoms, and put measures in place to protect confidentiality.

#### Implications for Policies:

- Policy makers should continue to screen for and provide access to treatment for mental health concerns among military servicemembers.
- Policies should be implemented that will buffer possible personal and/or professional pitfalls associated with diagnosis of PTSD.

#### **Avenues for Future Research:**

- Longitudinal designs with predeployment assessments are needed to help determine if deployment and/or combat exposure is causally related to PTSD symptoms.
- Additional meta-analysis with improved rigor will help support and build a better understanding of screening and assessment of PTSD.









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#### **Background Information**

#### Methodology:

- Researchers searched for studies related to the prevalence, epidemiology, or screening of PTSD among armed forces personnel and Veterans in the PubMed and PsycINFO databases.
- Narrative (vs. meta-analytic) methods were used to conduct this review of the literature.
- This study focused on military servicemembers and Veterans.

#### Participants:

For this research, a total of 507 article abstracts met inclusion criteria; 158 were cited in the review.

#### Limitations:

- The review relies on a narrative approach; a meta-analytical approach would have strengthened the findings.
- The research is limited by the lack of articulated criteria for selection of research articles reviews. These limitations include
  wide variation in prevalence estimates due to study design and methods, diagnostic criteria and characteristics of the study
  population.
- Many of the screening instruments are based on retrospective, self-reports. Individuals with symptoms of PTSD may be less likely to participate in screening programs and/or seek treatment.

### **Assessing Research that Works**

Research Design and Sample				Quality Rating:	$\rightarrow \rightarrow \rightarrow \rightarrow$
	Excellent (***)	Appropriate (★★★)	Limited (★★★)	Questionable (xxx)	
The design of the study (e.g., research plan, sample, recruitment) used to address the research question was		$\boxtimes$			
Research Methods				Quality Rating:	$\Rightarrow \Rightarrow \Rightarrow$
	Excellent (***)	Appropriate (★★★)	Limited (★★★)	Questionable (XXX)	
The research methods (e.g., measurement, analysis) used to answer the research question were		$\boxtimes$			
Limitations				Quality Rating:	$\qquad \qquad $
	Excellent  Minor  Limitations  (****)	Appropriate Few Limitations (★★★)	Limited Several Limitations (★ ★ ★ )	Questionable Many/Severe Limitations ( )	
The limitations of this study are		$\boxtimes$			
Implications				Quality Rating:	$\rightarrow \rightarrow \rightarrow \rightarrow$
	Excellent (***)	Appropriate (★★★)	Limited (★★★)	Questionable (XXX)	
The implications of this research to programs, policies and		$\boxtimes$			
the field, stated by the authors, are	$\hfill \square$ Not applicable because authors do not discuss implications				
Overall Quality Rating					$\rightarrow \rightarrow \rightarrow \rightarrow$

Prepared by Military REACH Team. For additional information, please visit http://reachmilitaryfamilies.arizona.edu





