The Center for Research and Outreach

Putting Research to Work for Military Families



Grief and Physical Health Outcomes in U.S. Soldiers Returning From Combat

Toblin, R. L., Riviere, L. A., Thomas, J. L., Adler, A. B., Kok, B. C., & Hoge, C. W. (2012). Grief and physical health outcomes in U.S. soldiers returning from combat. *Journal of Affective Disorders*, 136(3), 469-475. doi:10.1016/j.jad.2011.10.048

SUMMARY: Survey data were used to examine the prevalence of physical health (e.g., back pain, headache, etc.) and somatic symptoms (e.g., dizziness, nausea, sleep problems, etc.), overall general health, and occupational impairment among Army Infantry Soldiers at six months post-deployment. The association of difficulty coping with grief and physical health was also assessed. Results indicate that physical health symptoms post deployment were common and grief uniquely contributed to physical health issues.

KEY FINDINGS:

- The most frequent physical health symptoms reported were: sleep problems (32.8%), musculoskeletal pain (32.7%), fatigue (32.3%), back pain (28.1%), and headaches (16.2%).
- As difficulty coping with grief increased, poor general health, physical health and somatic symptoms increased (i.e., fatigue, sleep problems, musculoskeletal pain, back pain, and headaches), as did four occupational impairment outcomes (i.e., missed days, medical visits, difficulty with physical training (PT), and difficulty carrying a heavy load).
- After controlling for demographics, combat experiences, injuries, posttraumatic stress disorder (PTSD), and depression, grief contributed significantly to a high prevalence of more somatic symptoms (e.g., dizziness, nausea), poor general health, and all four occupational impairment outcomes (i.e., missed work, medical visits, difficulty carrying a heavy load, and difficulty performing PT).

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Offer support groups for Service members who are having trouble coping with grief post-deployment
- Educate Service members and their families regarding comment mental health and physical health challenges associated with deployment and reintegration
- Disseminate information to Service members and military families regarding grief specifically related to deployment and healthy ways to cope

IMPLICATIONS FOR POLICIES:

Policies could:

- Recommend training regarding combat related grief for service providers working with Service members
- Continue to support post-reintegration programs that help Service members and their families adjust following deployment
- Support collaborative efforts among DoD and community-based services that work with Service members and their families to provide streamlined care

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METHODS

- Infantry Soldiers completed anonymous surveys six months post-deployment.
- Participants were recruited via large group recruitment briefings coordinated with unit commanders.
- Data collection took place between November and December 2008 from three different Infantry brigades.

PARTICIPANTS

- Participants in this study were 1,522 Soldiers (92% male).
- In this sample, 73% of participants were under the age of 30, 56% married, and 56% junior enlisted (E1-E4).
- Race/ethnicity data were not provided.

LIMITATIONS

- The current findings, based on a large sample of Active Duty Army Infantry Soldiers, may not generalize to other military branches or components.
- The current data utilized a cross-sectional design and self-reported data; therefore, no causal statements can be made and recall bias is possible.
- The grief construct was measured using a single item and did not specify the type of loss due to death (e.g., fellow Soldier, a family member) which could impact the results.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Examine the impact of combat-related losses and the grief response in military populations
- Include longitudinal designs with more detailed assessments of grief in military units that sustain combat-related losses
- Explore whether type of loss (e.g., fellow Soldier, spouse) influences mental and physical functioning postdeployment differently

ASSESSING RESEARCH THAT WORKS







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