

Putting Research to Work for Military Families



Focus:
Multiple
Branches

Gender Differences in the Impact of Warfare Exposure of Self-Rated Health

Wang, J. M., Lee, L. O., & Spiro, A. (2015). Gender differences in the impact of warfare exposure of self-rated health. *Women's Health Issues, 25*(1), 35-41. doi:10.1016/j.whi.2014.09.003

SUMMARY: Veterans completed questionnaires to examine gender differences relationships among warfare exposure (combat deployment and exposure to casualties), health status, and functional impairment. Both male and female Veterans who were exposed to casualties reported worse health status than those not exposed to casualties.

KEY FINDINGS:

- Combat-deployed male and female Veterans who were exposed to casualties reported worse health status than combat-deployed personnel who were not exposed to casualties.
- Male Veterans who were exposed to casualties were more likely to report functional impairment (e.g., needing assistance with daily activities) than combat-deployed men who were not exposed to casualties and non-deployed men.
- Warfare exposure was not associated with increased risk of functional impairment among women.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Provide courses for family members of Service members about the impact of combat deployment on physical health, and how families can promote well-being in a holistic manner
- Offer classes for Service members exposed to casualties, teaching effective means of coping with stress and reminders of the distressing events
- Collaborate with other service providers to provide resources and support for Service members needing assistance with daily living activities, such as eating, dressing, and walking

IMPLICATIONS FOR POLICIES:

Policies could:

- Support programs and services specifically for Service members exposed to combat and casualties and their families
- Recommend that facilities supporting Service members who were exposed to casualties include programming for children and families
- Encourage routine assessment of both physical and mental health among Service members and Veterans who experienced combat deployment and were exposed to casualties

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METHODS

- Data were from the 2010 National Survey of Veterans; Veterans from all wars starting from WWII through September 2001 and later were included.
- Veterans were recruited via mailed letter using an address-based sampling approach, and included Veterans from all 50 states and the District of Columbia.
- Participants completed scales of warfare and casualty exposure, health status, and functional impairment.

PARTICIPANTS

- Seven thousand seven hundred seventy-nine Veterans completed the online questionnaire (94% male).
- The average age for males was 66 years (SD = 12) and 52 years (SD = 17) for females.
- Twelve percent minority for males, 26% minority for females.
- No data regarding service branch were provided.

LIMITATIONS

- The data were cross-sectional, and causality cannot be inferred.
- Relatively few females were included in comparison to males, which may have limited the significant findings for females.
- Other variables beside warfare exposure likely contribute to health status and functional impairment (e.g., chronic health conditions, mental health diagnoses prior to deployment).

AVENUES FOR FUTURE RESEARCH

Future research could:

- Examine multiple aspects of combat deployment (e.g., duration and number of deployments, degree of exposure to casualties, work and living conditions)
- Explore additional stressors related to post-deployment health and functioning, such as social support and exposure to prior trauma
- Employ longitudinal research designs to examine associations between warfare exposure and health status over time

ASSESSING RESEARCH THAT WORKS



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