

Putting Research to Work for Military Families



Focus:
Multiple
Branches

A Prospective Study of Depression Following Combat Deployment in Support of the Wars in Iraq and Afghanistan

Wells, T. S., LeardMann, C. A., Fortuna, S. O., Smith, B., Smith, T. C., Ryan, M. A. K., ... Blazer, D. (2010). A prospective study of depression following combat deployment in support of the wars in Iraq and Afghanistan. *American Journal of Public Health*, 100(1), 90-99. doi:10.2105/AJPH.2008.155432

SUMMARY: Data from Military Service members were used to investigate the association between deployment to Iraq and Afghanistan, combat exposure, and new-onset depression. Deployed men and women with combat exposure had the highest rate of new-onset depression, followed by those not deployed, and then by those deployed without combat exposure.

KEY FINDINGS:

- Rates of new-onset depression were higher among Service members exposed to combat (6% for men, 16% for women) than their non-deployed peers (4% for men, 8% for women). Service members deployed without combat exposure had the lowest rates of depression (2% for men and 5% for women).
- Male Service members with the highest percentages of new-onset depression were more likely to be younger, less educated, unmarried, current smokers, enlisted, in the Marine Corps or Army, diagnosed with posttraumatic stress disorder (PTSD) at baseline, and to drink alcohol.
- Female Service members with the highest percentages of new depression were more likely to be enlisted, less educated, a current smoker, diagnosed with PTSD at baseline, and to drink alcohol.
- Male combat specialists were at lower risk for depression than either health care specialists or male Service members whose duties included service supply and functional support.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Develop outreach for Service members who are most at risk for developing new-onset depression, including community education campaigns
- Provide support to families and Service members to help identify resources for dealing with new-onset depression
- Offer workshops for Service members and their families to increase skills in dealing with new mental health diagnoses

IMPLICATIONS FOR POLICIES:

Policies could:

- Recommend the development of programs that provide support for Service members with new mental health diagnoses and their families
- Encourage training for professionals who work with military families regarding the possible challenges associated with reintegration
- Continue to support programs that assist Service members during the transition back into their families after deployment

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METHODS

- Participants from the Millennium Cohort study, selected from a random sample of all US military personnel serving in October 2000, were used in this study.
- Participants who completed a baseline and follow-up assessment were included; those reporting past depression or taking medication for anxiety, stress, or depression were excluded.
- The Defense Manpower Data Center provided military and demographic data.

PARTICIPANTS

- Participants included 40,219 Service members (75% male).
- Non-deployed Service members (n = 30,669, 76%) were: 72% male, 41% born 1960-1969, 71% White, 71% enlisted, 53% Active Duty, 48% Army, 28% Air Force, 20% Navy/Coast Guard, and 4% Marines.
- Those deployed without combat exposure (n = 4,831, 12%) were 82% male, 44% born in 1960-1969, 74% White, 75% enlisted, 60% Active Duty, 27% Army, 52% Air Force, 18% Navy/Coast Guard, and 3% Marines.
- Participants deployed with combat exposure (n = 4,719, 12%) were 84% male, 41% born in 1960-1969, 67% White, 71% enlisted, 62% Active Duty, 65% Army, 24% Air Force, 7% Navy/Coast Guard, and 6% Marines.

LIMITATIONS

- Participants chose to complete the surveys associated with the study; those who completed surveys may differ from those who did not in important ways that may impact results.
- All mental health data was self-report, which may have influenced participants' desire to answer in socially desirable ways.
- The definition of combat exposure was broad and included events that often accompany combat, but do not necessarily indicate actual engagement in operations.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Investigate the association between PTSD and depression within groups of Service members who have experienced deployment
- Examine the course of depression in Service members over time (among combat-exposed, non-combat-exposed, and non-deployed groups)
- Evaluate rates of clinical diagnoses of mental health disorders in different groups of Service members

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