

COMBAT EXPOSURE, NON-COMBAT RELATED STRESSORS AND POST-TRAUMATIC STRESS DISORDER IN PORTUGUESE MILITARY COMMANDOS RETURNEES FROM AFGHANISTAN



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INTRODUCTION

- Several combat situations and non-combat related stressors have been reported in current combat conflict in Afghanistan.
- Accumulating evidence suggests that Post-Traumatic Stress Disorder (PTSD) is the most common sequela resulting from combat (Hoge *et al.*, 2004; Erbes, *et al.*, 2007).
- Recent researches among military veterans returnees from Afghanistan reported that 11.2% met screening criteria for PTSD and 22.3% met screening criteria for Partial PTSD (Hoge *et al.*, 2004; Pietrzak *et al.*, 2009).

Objectives

- Evaluate the prevalence of:
- Combat exposure and non-combat related stressors,
 - PTSD symptoms in Portuguese military veterans deployed in Afghanistan.

Measures

- Socio-Demographic Questionnaire (SDQ; Maia & Osório, 2009).
- Combat & Deployment Experience Scale (CDES, Maia & Osório, 2009).
- Response to Traumatic Event Scale (RTES; McIntyre & Ventura, 1996).

Participants

113 male (mean age 26.7; *S.D.* = 3.3) military commandos (special forces) who had completed at least one deployment in Afghanistan. Most participants were single (64.6%; *n* = 73), reporting having an intermediate school diploma (91.1%; *n* = 103) and were drawn from junior enlisted ranks - private to corporal (80.5%; *n* = 91).

RESULTS

Combat Experiences	(n)	%
Experience participating in demanding operations where you could have been dead	80	71
Experience IED exploding near your combat unit	49	43
Experience having hostile reactions from civilians	49	43
Experience seeing wounded civilians	99	88
Experience seeing killed civilians	23	20
Experience the feeling of no safe place in theater	39	35
Experience being injured as a result of combat situations	10	9
Experience knowing wounded Portuguese military	88	78
Experience carrying wounded Portuguese military	35	31
Experience knowing killed Portuguese military	50	44
Experience seeing dead Portuguese military	12	11
Experience knowing wounded coalition military	96	85
Experience knowing killed coalition military	93	83
Experience seeing wounded enemies	90	81
Experience seeing killed enemies	26	23
Experience having wounded enemies in combat	17	15
Experience having killed enemies in combat	11	10

Non-Combat Experiences			
Adverse Physical Conditions	(n)	%	
Experience having lack of food/water	42	37	
Experience having spoiled or out of order food/water	63	56	
Experience having to eat overly-based food rations	40	35	
Experience having bad sleep as a result of inappropriate conditions	33	29	
Experience having problems with the amount of hours to sleep	57	50	
Experience having uncomfortable humidity/heat weather	106	94	
Experience having unberable weather	68	60	
Unit-Related Problems	Low (n) %	Medium (n) %	High (n) %
Union between the comrades in unit	(0) 0	(14) 12	(99) 88
Support given by superior in unit	(22) 20	(36) 32	(55) 49
Discipline imposed in unit	(2) 2	(21) 19	(90) 80
Pride to belong to unit	(1) 1	(4) 4	(108) 96
Acceptance by comrades in unit	(0) 0	(19) 17	(94) 83
Commitment to the unit objectives	(1) 1	(13) 12	(99) 88
Superior leadership in unit regarding decisions orders or rules	(19) 17	(50) 44	(44) 39
The quality of military training receiving in unit	(3) 3	(16) 14	(94) 83
The quality of military equipment regarding weapons and ammunitions	(21) 19	(79) 70	(13) 12
Military training appropriate for the type of missions	(16) 14	(50) 44	(46) 41

PTSD Status

	No PTSD n (%)	Partial PTSD n (%)	Full PTSD n (%)
Participants (<i>n</i> = 113)	100 (88)	10 (9)	3 (3)

Bivariate Analysis

Variables	1	2	3	4	5	6
1. Age						
2. Combat Experiences	.22*					
3. Adverse Physical Conditions	-.16+	.38***				
4. Unit-Related Problems	.08	-.01	-.34***			
5. Deployment Duration	.13	.43***	.27**	-.13		
6. Post-Traumatic Stress Disorder	-.05	.31**	.32***	-.09	.16+	

Note. +*p*<.1; **p*<.05; ***p*<.01

Multiple Hierarchical Regression Analysis

	Post-Traumatic Stress Disorder			
	R ² (R ² adjusted)	F	β	T
Model 1 Adverse Physical Conditions	.08 (.07)	(1.98) 8.55 **	.28	2.92 **
Model 2 Adverse Physical Conditions Combat Experiences	.11 (.09)	(2.97) 5.90 **	.20 .19	1.92 * 1.76 +

Note. +*p*<.1; **p*<.05; ***p*<.01

DISCUSSION

- Participants in our investigation endorsed multiple combat experiences and adverse physical conditions during military deployment.
- Contrary to our expectations, the prevalence of PTSD was low, but PTSD symptoms are significantly related with adverse physical conditions and combat experiences.

REFERENCES

- Erbes *et al.* (2007) *Mil Med* 172; 359 – 363.
- Hoge *et al.* (2004) *N Engl J Med* 358; 453 – 463.
- Pietrzak *et al.* (2009) *Depression & Anxiety* 26; 739 – 744.

CONCLUSIONS

- This research provides an initial look at the mental health symptoms among Portuguese special forces deployed in Afghanistan.
- Based on these findings, it is essential the creation of special programs that evaluate and monitor all Portuguese military members, as well as to provide them with psychological and psychiatric care if needed.

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