

Research Brief

Protective Factors and Risk Modification of Violence in **Iraq and Afghanistan War Veterans**

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Research Highlights:

- Many service members from the recent conflicts in Iraq and Afghanistan struggle with alcohol abuse and post-traumatic stress disorder (PTSD), which have been associated with a higher risk of post-deployment violence and aggression. In developing interventions to address this issue, an important first step is to identify protective factors empirically associated with decreased aggressive behavior.
- Although 33% of the sample indicated they had committed an act of non-combat related aggression in the past year, veterans with fewer psychosocial protective factors seemed to be at a higher risk for violence and aggressive behavior. Decreased odds of violence were significantly associated with increased perceptions of self-determination, older age, satisfactory social support, higher resilience, and being able to cover basic needs.
- Rehabilitation programs focused on improving veterans' wellbeing, including resilience and social support, as well as their living, financial, and vocational situations could help to reduce the risk of violence and aggression. Investigating the influence of psychosocial protective factors also benefits clinicians by providing evidence-based and patient-centered tools for assessing veterans' risk of violence.

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Abstract:

"Objective: After returning home, a subset of Iraq and Afghanistan War veterans report engaging in aggression toward others. This study is the first to identify variables empirically related to decreased risk of community violence among veterans. Method: The authors conducted a national survey from July 2009 to April 2010 in which participants were randomly drawn from over 1 million US military service members who served after September 11, 2001. Data were collected from a total of 1,388 Iraq and Afghanistan War era and theater veterans. The final sample included veterans from all 50 states and all military branches.

Results: One-third of survey respondents self identified committing an act of aggression toward others during the past year, mostly involving minor aggressive behavior. Younger age, criminal arrest record, combat exposure, probable posttraumatic stress disorder, and alcohol misuse were positively related to violence toward others. Controlling for these covariates, multivariate analyses showed that stable living situation and the perception of having control over one's life were associated with reduced odds of severe violence (R2 =0.24, x27 = 145.03, P< .0001). Greater resilience, perceiving positive social support, and having money to cover basic needs were linked to reduced odds of other physical aggression (R2 = 0.20, x28 = 188.27, P < .0001). Conclusions: The study identifies aggression as a problem for a subset of Iraq and Afghanistan War veterans who endorsed few protective factors. Analyses revealed that protective factors added incremental value to statistical modeling of violence, even when controlling for robust risk factors. The data indicate that, in addition to clinical interventions directed at treating mental health and substance abuse problems, psychosocial rehabilitation approaches aimed at improving domains of basic functioning and psychological well-being may also be effective in modifying risk and reducing violence among veterans"



Implications

For Practice

About one third of veterans in this study reported aggressive or violent incidents in the past year, and 11% reported severe acts of violence in the community. Risk factors associated with violence among veterans in this study were consistent with those cited in research among veterans from previous eras, which included younger age, PTSD diagnosis, alcohol abuse, and past criminal arrests. However, reduced odds of severe violence among veterans were significantly associated with stable living conditions and a sense of having control over one's life, even when controlling for these risk factors. Veterans with other protective factors, such as having enough money to cover basic needs and having positive social support, were also less likely to engage in violence. Because a veteran's social environment and psychological well-being set the context for whether or not a veteran is at risk for aggressive behavior, it is important to establish the presence of these protective factors in the veteran's daily environments. Although many of these protective factors are present when service members live on a military base, they do not necessarily remain in place post-deployment. In order to assist veterans in the post-deployment transition process, they should be provided with employment assistance and help to ensure that their basic needs are met upon their return home. The majority of veterans in this sample possessed multiple protective factors and were consequently at a lower risk of violence. Developing protective factors for all veterans should be seen as a necessary part of the post-deployment process.

For Policy

Investigating psychosocial protective factors is beneficial for both veterans and for clinicians working with the veteran population. Information about the influence of protective factors could provide an important framework for patient-centered intervention programs for veterans at risk of aggression. Data collection focused on protective factors is also less stigmatizing and more feasible for the veteran population than asking questions about a history of criminal behaviors or violence. Rehabilitation programs for veterans should focus on maintaining and improving basic functioning, rather than just mental health and substance abuse issues. Policy makers should insure that programs for veterans improve financial and living situations, so that protective factors that reduce the incidence of violence are firmly in place upon their return home post-deployment. The Department of Veterans Affairs (VA) administrators and health providers already address poor coping skills, homelessness, unemployment, and lack of

social support, but these aspects of programming should be expanded for both men and women veterans. Continuing and extending these interventions can potentially reduce the risk of violence and aggressive behavior among veterans.

For Future Research

Future research should aim to enhance knowledge of the influence of protective factors on aggressive and violent behavior through largescale epidemiologic studies that include psychometrically developed measures of violence. Risk assessment interviews for veterans, as well as measurements of violence obtained from collateral sources, can also be utilized to paint a more complete picture of factors that increase veterans' risk of aggression. Because this study can only establish that potential aggression remains a concern, not prevalence, researchers can also focus on research methods that indicate prevalence of postdeployment violence among Iraq and Afghanistan veterans. Researchers should also use longitudinal analyses of protective factors to allow for causal interpretations of data. The variance of rates and types of violence based on whether the target of violence is a friend, family member, or stranger serves as an additional area of future study. Finally, many of the factors explored in this study can be further investigated. For example, researchers can explore various components of work life, including job satisfaction and employment stability, in relation to potential aggression.

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