



## Combined PTSD and Depressive Symptoms Interact with Post-deployment Social Support to Predict Suicidal Ideation in Operation Enduring Freedom and Operation Iraqi Freedom Veterans

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### ABSTRACT

“Rates of suicide are alarmingly high in military and veteran samples. Suicide rates are particularly elevated among those with post-traumatic stress disorder (PTSD) and depression, which share overlapping symptoms and frequently co-occur. Identifying and confirming factors that reduce, suicide risk among veterans with PTSD and depression is imperative. The proposed study evaluated whether post-deployment social support moderated the influence of PTSD–depression symptoms on suicidal ideation among Veterans returning from Iraq and Afghanistan using state of the art clinical diagnostic interviews and self-report measures. Operations Enduring and Iraqi Freedom (OEF/OIF) Veterans (n=145) were invited to, participate in a study evaluating returning Veterans’ experiences. As predicted, PTSD–depression symptoms had almost no effect on suicidal ideation (SI) when post-deployment social support was high; however, when, post-deployment social support was low, PTSD–depression symptoms were positively associated with SI. Thus, social support may be an important factor for clinicians to assess in the context of PTSD and depressive symptoms. Future research is needed to prospectively examine the inter-relationship between PTSD/depression and social support on suicidal risk, as well as whether interventions to improve social support result in decreased suicidality.”

### RESEARCH HIGHLIGHTS

- Statistics released by the VA in 2013 indicate that 22 veterans die by suicide every day. Previous research indicates that suicidal ideation is a robust predictor of future suicide attempts. To further understand risk factors that might contribute to the suicidal ideation among veterans and subsequently inform prevention and intervention efforts, DeBeer, Kimbrel, Meyer, Gulliver, and Morissette (2014) explore the interaction between post-traumatic stress disorder (PTSD) and depressive symptoms and social support.
- Findings indicate that there is an association between symptom severity, post-deployment social support and suicidal ideation. Regardless of the severity of their symptoms of PTSD or depression, veterans with high levels of support were less likely to attempt suicide. However, when social support was low, PTSD/depression symptoms increased the risk of suicidal ideation.
- Future research should investigate the effectiveness of social support interventions in reducing risk of suicidal behavior in Veterans with PTSD and depressive symptoms.

# BRIEF

## IMPLICATIONS

### FOR PRACTICE

Healthcare providers serving veterans struggling with PTSD-depression symptoms should consider evaluating the strength of social support systems (e.g., family, friends, and individuals within the community who provide emotional sustenance and instrumental assistance), particularly how veterans perceive their social support. If the clinician finds that a veteran with PTSD-depression symptoms does not have a strong social support system, the clinician should consider implementing strategies that help veterans increase their perceived or actual social support levels. Healthcare providers should recommend therapy as a means of reducing suicidal ideation risk for veterans with PTSD-depression symptoms. In addition to therapy as a preventative measure, Veterans experiencing PTSD-depression symptoms who have high levels of social support should be encouraged to utilize and rely on their support systems.

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### FOR POLICY

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VA has provided significant resources to individuals with PTSD and other mental health problems, including health services and clinician training in evidenced-based therapy to reduce PTSD-depression symptoms (i.e., cognitive processing therapy, prolonged exposure, cognitive behavioral therapy for depression, acceptance and commitment therapy) (Beauregard et al., 2014). Research indicates that both cognitive processing therapy and prolonged exposure therapy that are implemented throughout VA reduce suicidal ideation in veterans (Gradus, Stivak, Wisco, Marx, & Resick, 2013). Given the importance of social support, healthcare providers serving veterans might offer additional educational resources that teach veterans how to form healthy and positive social support systems or how to reconnect with their support system. State and local policymakers might offer resources to family members or other individuals who work with veterans struggling with PTSD-depression symptoms. These resources could better inform family members and friends on how to positively support their veterans and engage them in treatment.

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### FOR FUTURE RESEARCH

Given findings that social support moderates the influence of PTSD and depression on suicidal ideation, future research should evaluate whether social support prospectively predicts suicidal ideation and behavior. Future research might also evaluate the development of different types of social support systems for veterans, as well as shifts in social support, particularly during times of high stress (e.g., deployment, post-deployment). Researchers should continue exploring the best ways to assist veterans with low levels of social support, including incorporating social support interventions into existing treatments for PTSD and depression to examine whether this further reduces suicidal ideation and risk for suicide. It would also be beneficial to also evaluate changes in social support in relation to suicide risk. Future research should further explore how social support shapes the treatment a veteran receives and long-term recovery from mental health problems.

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