Editorial Comment on "Psychosocial Buffers of Traumatic Stress, Depressive Symptoms, and Psychosocial Difficulties in Veterans of Operations Enduring Freedom and Iraqi Freedom: The Role of Resilience, Unit Support, and Post-Deployment Social Support"

LTC Craig A. Myatt, PhD; Douglas C. Johnson, PhD

(The referred article can be read in this edition's *Previously Published* section.)

Resilience and social support appear to operate synergistically lowering the likelihood of developing posttraumatic stress disorder (PTSD) and depression, according to Pietrzak et al., (2009b). Their recent findings demonstrate that two key variables which appear to confer protection are psychological resilience and perceived social support. Pietrzak et al., (2009b) generated a two-part hypothesis stating, "… Resilience would mediate the relationship between unit support and PTSD and depressive symptoms, and that post-deployment social support would mediate the relationship between PTSD and depressive symptoms and psychosocial difficulties." Resilience, unit support, PTSD, depressive symptoms, post-deployment social support, and psychosocial difficulties served as the six key factors in their hypothesis.

At approximately two years post-deployment for all participants, Pietrzak et al., (2009b) used the Connor-Davidson Resilience Scale (CD-RISC) to measure psychological resilience, the Unit Support Scale taken from the Deployment Risk and Resilience Inventory to measure unit support, the Posttraumatic Stress Disorder Checklist – Military Version (PCL-M) to measure PTSD, and the Patient Health Questionnaire-nine to measure depressive symptoms. The Post-deployment Social Support Scale measured social support following redeployment to home station duties and responsibilities, while the Psychosocial Difficulties Scale measured psychosocial functioning with family, peers, work, school, and finances. The Combat Experiences Scale (CES) was also used in the battery of self-report instruments to assess combat exposure.

Pietrzak et al., (2009b) obtained 272 Active and Reserve component veterans from all services as volunteer participants from the state of Connecticut after initial screening for 1000 potential volunteers among respondents to the Connecticut OEF/OIF Veterans Needs Assessment Survey. Following PCL-M score, logarithmic base 10 transformations for PTSD data that showed a non-normal distribution, Pietrzak et al. (2009b) computed Pearson correlations between measures of resilience, unit support, PTSD, depressive symptoms, post-deployment social support, psychosocial difficulties, and combat exposure. Path analyses demonstrated that increased resilience was associated with less PTSD and fewer depressive symptoms, while increased post-deployment social support was associated with less PTSD and fewer depressive symptoms. Combat exposure scores correlated positively with measures of PTSD, depressive symptoms, and psychosocial difficulties, but correlated negatively with scores on post-deployment social support.

The findings of the Pietrzak et al. (2009b) study in the *Journal of Affective Disorders* demonstrate that resilience and social support lower the likelihood of developing PTSD and depressive symptoms in service members at two years post-deployment. Their conclusions suggest that resilience, unit support and other forms of social support (i.e., Family, peer, and financial) confer a synergistic protective role in service members. While the current study did not explore the synergistic relationship between resilience and social support in the Family members of the post-deployment veterans, its findings and conclusions offer compelling reasons for including Family members in the broader scope of research and applications. Finally, since hardiness as an aspect of resilience is negatively associated with PTSD symptoms (to include depressive behavior), the findings on combat exposure appear inconclusive. The reported combat exposure findings, nevertheless, provide a stimulating prospect for future study in demographically diverse groups that show high-versus low-hardiness and high-versus low-resilience.

LTC Craig A. Myatt is currently assigned to the U.S. Special Operations Command as the Command Psychologist. He earned his Ph.D. in Health Psychology at Walden University with a two-year pre-doctoral fellowship in the Neuropsychology Section, Department of Neuro-Oncology, at the University of Texas M.D. Anderson Cancer Center. His previous assignments include command of the 145th Medical Logistics Bn; command of Delta Comp, 232d Medical Bn; and medical platoon leader for the 2/11th Armored Cavalry Reg and the 1-52d Infantry (Mechanized). His staff officer assignments include deputy G-4 for Task Force 3 Medical Command (Iraq); observer-controller and trainer in Task Force Bravo, 1st Brigade, 75th Division (Training Support); executive officer of the 10th Bn, 5th Medical Brigade; assistant S-3 and S-6 in the 228th Combat Support Hospital; biomedical information systems course developer in the Center for Healthcare Education and Studies at the U.S. Army Medical Department Center and School; and biomedical information systems officer in the Office of the Deputy Chief of Staff for Information Management at the United States Army Medical Command.

Douglas C. Johnson is the Department Head for Research Facilitation at the Naval Center for Combat Operational Stress Control (NC-COSC), and is currently Asst. Professor in Psychiatry at the University of California-San Diego (UCSD) School of Medicine. He earned his Ph.D. in clinical and cognitive psychology at the University of California-Los Angeles (UCLA), followed by two-years of post-doctoral training at Yale University School of Medicine and the Clinical Neurosciences Division of the National Center for PTSD. Dr. Johnson is a former counter-terrorism analyst with the FBI and in 2006 was selected as the American Psychological Association (APA) Summer Research Fellow in Counterintelligence. Prior to graduate training Dr. Johnson served 10-years on active duty, as both enlisted and officer, in the U.S. Coast Guard, and is a 1993 graduate of the U.S. Coast Guard Academy.