Horizon Scanning May 2020

Monthly collection of research and news concerned with veterans' health. This does not represent an endorsement of any of the work or the organisations involved.

Military veterans help draft PTSD guidance for NHS workers

Military veterans who served in Afghanistan and Iraq have drawn up a package of guidance and support to help NHS workers cope with the traumatic stress from treating patients on the frontline of the coronavirus crisis. The advice has been drawn up by the Help for Heroes charity, initially for staff at the Nightingale emergency hospital that opened in east London this month, in the belief that NHS staff are experiencing levels of emotional intensity similar to that on the battlefield.

Carole Betteridge, a former navy nurse who ran a field hospital at Camp Bastion in Afghanistan, said the understanding of traumatic stress had changed dramatically over the past 20 years and lessons could be shared. She spent 26 years in the navy as a nurse and medical planner, and is now head of welfare and clinical services at Help for Heroes.

She said: "There are so many parallels I can see between the military experience and what NHS workers are having to deal with. This is a conflict situation and we have to make sure we care for the carers." Medical staff are being faced with daily life-or-death situations "far more than we did in Iraq or Afghanistan", Betteridge said. The most acute source of anxiety was the feeling that personal efforts had been insufficient, she said. "People in hospitals will want to be able to help everybody, to be able to save everybody, but sometimes that's not possible, and it's difficult to deal with. People always feel they could have done more."

Military techniques that can help are based on clear communication at the time, a buddying up between experienced and inexperienced workers, and a proper rotation of responsibilities so certain carers are not overburdened. Particularly important is trauma risk management, where a team who often may have completed a 12-hour shift come together and reflect on a difficult day's events. Betteridge said: "You should talk about the good things and the things that didn't go so well; discuss how you are dealing with things – and talk about your families and positive things."

https://www.theguardian.com/society/2020/apr/20/military-veterans-help-draft-ptsd-guidance-fornhs-workers

Understanding sexual offences in UK military and veteran populations: delineating the offences and setting research priorities

Louise Morgan

Recent publications have highlighted the need to address inappropriate behaviours, including discrimination, bullying and sexual harassment, within the British Armed Forces; however, no UK work to date pays sufficient attention to sexual offences as defined by the Sexual Offences Act (2003). In trying to ascertain prevalence, nature and consequences of sexual offences in military and veteran populations, one is faced with majority United States (US) research with different definitions of offences, different populations and different research methods. These and UK publications use various terminology, often ill-defined and used interchangeably (eg, harassment, abuse, violence, assault, trauma), meaning it is not always clear what is being discussed, and the criminal acts of sexual offences have become lost, oversimplified and blurred by their incorporation into wider discussions of sexual harassment and inappropriate behaviour. As a result, there is lack of clarity around the topic, and insufficient recognition and weight is given to the nature and complexity involved in understanding sexual offences and their consequences. It is important to distinguish between different types of unlawful behaviour: each are associated with different physical and psychological health outcomes for victims, and management of perpetrators will differ. Some behaviours will be managed through education and awareness programmes; other behaviours necessitate a prison sentence. This article highlights that understanding sexual offences in military and veteran populations is more complex than existing UK publications have acknowledged, and sets out some of the issues that research needs to consider if we are to develop prevention and management strategies.

https://militaryhealth.bmj.com/content/early/2020/03/27/bmjmilitary-2020-001453

Housing Needs of Ageing (UK) Veterans Who Have Experienced Limb Loss

Gemma Wilson, Gill McGill, Alison Osborne & Matthew D. Kiernan

Military veterans can experience limb loss as a direct result of conflict, an accident, illness or injury. Whatever the cause, there is a need to recognise the long-term consequences and challenges of limb loss on maintaining independence in one's home. This study aimed to examine the housing needs of veterans experiencing limb loss, and the impact of limb loss on housing needs and home adaptations of ageing military veterans. Thirty-two military veterans (aged 43–95) participated in this study and up to three life-story interviews were carried out with each participant. Two themes were generated: availability of support and changing housing needs. It is evident from the findings that military veterans

are unique in various ways, specifically due to military culture, geographical relocation and the additional support that is available to the Armed Forces Community. This must be considered in long-term support to maintain independence in the home.

https://www.mdpi.com/1660-4601/17/5/1791/htm

Mind-body skills groups for treatment of war-traumatised (US) veterans: A randomized controlled study

Julie Staples, James Gordon, Michelle Hamilton & Madeline Uddo

Objective: This study evaluated the effects of a mind-body skills group (MBSG) intervention on posttraumatic stress disorder (PTSD) symptoms.

Method: Veterans (n = 108; mean age = 55.97 [SD = 11.72]; 96% male) at a PTSD specialty clinic in the Veterans Affairs Health Care System were randomized to a 10-week MBSG program or standard treatment. PTSD was the primary outcome measure. Secondary outcomes included anger, sleep, depression, anxiety, posttraumatic growth, and health-related quality of life. Results: MBSG participants had significantly greater improvement in the total PTSD score after 10 weeks compared to the standard treatment group. Hyperarousal and avoidance scores significantly improved at 10 weeks and improvements in the hyperarousal symptoms were maintained at 2-month follow-up. MBSG participants also had significant decreases in anger and sleep disturbance. There were no significant differences in the other secondary outcomes.

Conclusions: This MBSG intervention offers promise in helping Veterans with PTSD and its related symptoms.

https://psycnet.apa.org/record/2020-15060-001

• Fighting Spirit: The Military's Battle for Better Mental Health

Depression and PTSD are the greatest threats facing today's armed forces. Meet the men striking back.

How do you fight an enemy you can't see? One that can infiltrate every base, aircraft carrier and submarine and strike down a teenage cadet in the safety of his barracks – yet is just as able to lie in wait for months, or even years, before dealing a fatal blow, long after a soldier has exited the theatre of war and even the military itself? This is not a rhetorical question. This enemy exists, and it is one of the greatest threats facing the British armed forces today. This enemy is mental ill health. https://www.menshealth.com/uk/mental-strength/a32235309/military-mental-health/

Post-traumatic stress disorder is associated with further increased Parkinson's disease risk in (US) veterans with traumatic brain injury

Donna White, Mark Kunik, Hong Yu et al.

Objective: Determining if traumatic brain injury (TBI) and posttraumatic stress disorder (PTSD) are risk factors for Parkinson's disease (PD). This constitutes a research priority for the Veterans Administration (VA) with implications for screening policy and prevention.

Methods: Population-based, matched case-control study among veterans using VA healthcare facilities from 10/1/1999 to 09/30/2013. We identified 176,871 PD cases and 707,484 randomly selected PD-free matched controls. Parkinson's Disease, TBI and PTSD were ascertained by validated ICD-9 code-based algorithms. We examined the association between both risk factors and PD employing race-adjusted conditional logistic regression.

Results: The overall study cohort prevalence for TBI _{mild}, TBI _{non-mild}, and PTSD was 0.65%, 0.69% and 5.5% respectively. Both TBI and PTSD were significantly associated with PD in single-risk factor race-adjusted analyses (conditional odds ratio (cOR) =2.99 (95% CI: 2.69-3.32), 3.82 (95% CI: 3.67-3.97), and 2.71 (95% CI: 2.66-2.77) for TBI _{mild}, TBI _{non-mild} and PTSD, respectively). There was suggestive positive interaction observed with comorbid PTSD/TBI in dual-risk factor analyses, with significant 2.69-fold and 3.70-fold excess relative PD risk in veterans with TBI _{mild} and TBI _{non-mild} vs. those without TBI when PTSD was present vs. 2.17-fold and 2.80-fold excess risk when PTSD was absent.

Interpretation: Our study was the first to demonstrate that both TBI and PTSD are independently associated with increased relative PD risk in a diverse nationwide cohort of military service veterans, and the first to suggest a potential modest synergistic excess risk in those with comorbid TBI/PTSD. Longitudinal research is needed to confirm these suggestive findings.

https://onlinelibrary.wiley.com/doi/abs/10.1002/ana.25726

Postpartum Depression in a Cohort of Post-9/11 (US) Women Veterans: The Role of Military Stress and Trauma

Joan Combellick, Allison Gaffey, Mary Driscoll et al.

Introduction: This study aimed to investigate the relationship between military-related traumatic experiences and postpartum depression in a cohort of post-9/11 women veterans. We hypothesized that women veterans would report high rates of postpartum depression, and that military-related traumas would constitute unique risk factors for postpartum depression.

Methods: This cross-sectional study was based on survey data from post-9/11veterans who were discharged and gave birth between October, 2001 and September, 2015. Bivariate and multivariate analyses included military-related trauma variables, demographics, and factors that have been previously associated with postpartum depression in other populations.

Results: Based on multivariate analyses of 151 respondents, 41% of women reported a definite or possible history of postpartum depression. Military exposures, namely multiple deployments (OR = 2.41, CI = 1.06-5.50), and combat exposure (OR=1.05, CI = 1.01-1.10), were predictive of postpartum depression following the most recent, post-deployment pregnancy.

Discussion: These findings suggest that military-related factors may increase the risk for postpartum depression among women veterans. Clinicians should be vigilant in screening for military service and exposures to provide early referral and additional support as needed.

https://www.tandfonline.com/doi/abs/10.1080/21635781.2020.1751351

Do different types of war stressors have independent relations with mental health? Findings from the Korean Vietnam Veterans Study.

H. Lee, C.M. Aldwin & S. Kang.

Objective: South Korea had the second largest contingent of soldiers in the Vietnam War, but little is known about their adaptation, especially in later life. Previous work in a different sample found very high rates of posttraumatic stress disorder (PTSD; 41%) among Korean Vietnam veterans (KVVs; Kang, Kim, & Lee, 2014), compared to 19–31% for American Vietnam veterans. We explored possible reasons for this high rate of PTSD, as well as anxiety and depressive symptoms, utilizing both vulnerability factors (e.g., war stressors) and protective factors (optimism, unit cohesion, and homecoming experiences).

Method: The sample included 367 male KVVs surveyed by mail (M age = 72, SD = 2.66). Using hierarchical regressions controlling for demographics, we examined the relative contributions of different types of war stressors and then the protective factors.

Results: Combat exposure was significantly associated with the three types of negative psychological symptoms, but their associations became nonsignificant when "subjective" war stressors (malevolent environments, perceived threat, and moral injury) were added. In the final models, malevolent environments were the strongest predictor for all three outcomes. In addition, moral injury was independently associated with PTSD symptoms, while perceived threat was marginally associated with depressive and anxiety symptoms. Among psychosocial factors, only optimism was negatively associated with the mental health outcomes.

Conclusion: KVVs had very high rates of combat exposure, but malevolent environments played a more important role in their mental health in later life. These findings suggest the importance of considering adverse environmental factors in understanding PTSD in future studies. https://psycnet.apa.org/record/2020-13727-001

Harry Helps Launch New Mental Fitness Tool for Armed Forces

The Duke of Sussex has helped launch a new mental fitness tool, aimed at assisting military personnel with their wellbeing. The HeadFIT project, led by Harry, has been three years in the making. It has been designed to offer personnel round-the-clock access to ways that can enhance mood, drive and confidence. In a video on the platform's website, the former soldier urged members of the Armed Forces to train their "mind and body as one".

"Today, when we talk about fitness, we don't just mean how fast you can run or how much weight you can carry," the duke said in the footage. "This is about mental fitness, strength and resilience, not just while wearing a uniform, but for the rest of your life. If you want to be truly fit, strong and healthy, you need to train your mind and body as one. Some people run, others swim, cycle or lift weights in order to be physically fit. But what do you do to stay mentally fit? Think about what you can do to unlock your potential, and to perform at the highest level."

[HeadFIT] has been made in partnership with The Royal Foundation's Heads Together campaign, the Ministry of Defence and King's College London, with clinical advice from psychologist Dr Vanessa Moulton. The HeadFIT platform includes tools such as breathing exercises, body posture and relaxation techniques. It was designed for all defence personnel from new recruits, long-serving personnel and veterans to civilian staff and those in uniform.

https://www.forces.net/news/harry-helps-launch-new-mental-fitness-tool-armed-forces

Captain Tom Moore celebrates 100th birthday

The war veteran who has raised millions for the NHS has celebrated his 100th birthday in style, with tributes have pouring in from around the country. With celebrations under way, the total Captain Tom Moore has raised by completing laps of his garden for NHS Charities Together topped £30m [30th April]. Captain Tom was also made an honorary colonel, and became an honorary member of the England cricket team. The occasion was also marked with an RAF flypast and birthday greetings from the Queen and prime minister.

https://www.bbc.co.uk/news/av/uk-52488385/captain-tom-moore-celebrates-100th-birthday

• Military dog of the month...

... is Cairo who, along with his person, US Navy SEAL Will Chesney, was part of the team tasked with tracking down Osama bin Laden's compound in 2011.

Will has written a book about what was called Operation Neptune Spear and his life with Cairo. "I never thought I would write a book, but there were some articles I had seen that weren't factual," Will shared. "[Operation Neptune Spear] was the biggest mission in history and Cairo was a really good dog. I thought, 'Why not write a book about my dog?' I wanted to get the true story of Cairo out there." Will penned "No Ordinary Dog," the factual story and timeline of Cairo and his work, their relationship, and Will's own personal struggles with mental health.



https://www.military.com/off-duty/2020/04/28/untold-story-navy-seal-and-canine-hero-who-caughtbin-laden.html