Exposure to combat and traumatic events increases risk of violent offending among military personnel

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**QUESTION**

**Question:** Do deployment, combat history or post-deployment mental health problems impact on violent offending among military personnel?

**People:** Participants were randomly sampled in two phases. Phase 1: 17,689 personnel either trained and deployed in Iraq or trained but not deployed. Phase 2: 6,628 new recruits who may be deployed in Iraq were added to the sample, as well as 1,789 personnel deployed in Afghanistan. Special Forces personnel were excluded.


**Risk factors:** Sociodemographics, behaviour and experiences before joining the military (obtained from self-report questionnaires); deployment status (served in Iraq or Afghanistan since 2003); combat experience; exposure to traumatic events (adapted Combat Experience Scale); and mental health conditions. Mental health in the past month was assessed using set cut-off scores on the General Health Questionnaire-12 (GHQ-12), Post-traumatic Stress Disorder (PTSD) Checklist (PLC-C) and the WHO Alcohol Use Disorders Identification Test. Aggressive score was assessed using a validated measure at phase 2.

**Outcomes:** Offences, including cautions, reprimands, warnings and convictions. Offences were identified through linkage to the Ministry of Justice Police National Computer Database (PNC), and further classified according to legal descriptions.

**METHODS**

**Design:** Prospective cohort study.

**Follow-up period:** Participants were followed until death, first violent offence, or end of follow-up (July 2011).

**MAIN RESULTS**

The study included 13,856 personnel (median age 37 years, 89.7% men) who completed questionnaires at either phase 1 or 2, 59% of whom were still in service at the end of follow-up. A total 887 offences were committed by 15.7% of participants (n=2,197; 97% men). The majority of these were violent offenders (n=1,598; 10.1% of the whole sample), with almost a third of violent offenders (n=423; 3.1% of the whole sample) committing serious interpersonal violence (at least actual bodily harm). Drug or alcohol-related offences were committed by 6.4% of participants (n=891). Prevalence of violent offence fell with age (20.6% at age≤30 vs 4.7% at age>45). Preservice violent offending was a strong predictor of future violent offending (hazard ratio 3.85, 95% CI 3.07 to 4.82, p<0.0001). Deployment did not increase the risk of violent offending compared with non-deployment. Combat roles were more associated with violent offences than non-combat roles (see table) as was increasing exposure to traumatic events. PTSD, alcohol misuse and high aggression scores were all associated with increased risk of violent offences (see webextra table).

**CONCLUSIONS**

Violent offending is the most common type of offence among military personnel, and is more common in those with premilitary history of violent offence, those serving in a combat role and those exposed to traumatic events. Alcohol misuse, aggression and PTSD symptoms are also associated and may be targets for evidence-based interventions.

**Notes:** Women were not included in the analysis beyond phase 1 as they are not deployed in combat roles.

**ABSTRACTED FROM**


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