

Predictors of Deployment Concerns in Active Duty and National Guard Army Personnel

(Clin Res,Mil/Vets)

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It is well-established that threat perception can play a role in how stressor exposure contributes to negative psychological outcomes (see Ozer, Best, Lipsey, and Weiss, 2008), yet little is known about predictors of threat perception, particularly in deployed military groups. The Neurocognition Deployment Health Study, a prospective cohort study of Army soldiers who deployed to Iraq, presents an opportunity to examine deployment and pre-deployment predictors of military service-related threat perception. This sample includes Active Duty (n=670) and National Guard (n=104) participants assessed prior to (Time 1) and following (Time 2) deployment. Relevant Deployment Risk and Resilience Inventory modules and the PTSD Checklist were administered as part of a larger battery of tests.

Hierarchical multiple regressions were conducted to test whether combat exposure, prior deployment, life events, preparedness, unit support, and pre-deployment PTSD symptoms were associated with deployment threat perception. Among Active Duty participants, combat exposure predicted 6.1% of the variance in threat perception ($p < .001$) after adjusting for demographics. Deployment preparedness and prior deployment experience predicted an additional 3.3% of the variance ($p < .05$). Among National Guard participants combat exposure predicted 27.4% of the variance in threat perception ($p < .001$), but no other predictors were significant. Findings highlight the role deployment and pre-deployment factors play in soldiers' appraisal of war-zone threat.

Saturday Poster Session

Saturday, November 5

5:00 p.m. - 6:00 p.m.

Grand V

Personality Characteristics, Organizational Structure and Job Satisfaction of Sexual Assault Nurse Examiners (SANE)

(Self-Care, Caregvr)

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This NIOSH funded research will present results of investigating personality characteristics of Sexual Assault Nurse Examiners (SANE) and the organizational structure present in their work environments and which, if either, have an impact on job satisfaction and retention. The hypotheses are: there are shared personality characteristics of SANE nurses, these specific personality characteristics relate to job satisfaction, and organizational structure of the work environment is related to job satisfaction. The population utilized was SANE nurses at over 18 locations in medium to large sized cities across the central & western United States. Measurements include the Mini International Personality Item Pool, (Donnellan, et al, 2006), The Conditions of Work Effectiveness Questionnaire II (Laschinger, et al, 2001), the abridged Job Descriptive Index (Stanton, et al, 2001), the Turnover Intention Scale (Kelloway, et al, 1999), and a demographic questionnaire. There is also an organization demographic form. The study will utilize a comparative effect size and goodness-of-fit research design. 125 nurses have completed the measures and data collection continues. Determining what personality characteristics, and/or structures

in the work environment may have an impact on satisfaction and retention will be helpful to trauma organizations as they provide quality nursing care to the sexual assault/domestic violence client populations.

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Grand V

Secondary Traumatic Stress Among Substance Abuse Clinicians in Australia: Does Personal Trauma History Matter?

(Self-Care, Caregivers)

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Background: Among people with substance use disorders, trauma exposure is almost universal and up to one-third have current PTSD. Studies have shown that individuals who are involved in the assessment and treatment of traumatised clients may be at risk of secondary traumatic stress (STS), however, limited research has been conducted in the area. In particular, little research has examined whether having a personal history of trauma exposure or PTSD increases one's likelihood of developing STS when working with traumatised clients. **Aims:** This study aims to determine the prevalence of STS among substance abuse clinicians in Australia, and factors associated with the presence of STS and its severity (e.g., professional experience and training; a personal history of trauma exposure and PTSD)? **Method:** Over 400 clinicians from across Australia completed an anonymous online survey which assessed current level of trauma education and training, trauma screening practices, along with both their exposure risk and levels of STS. Levels of past trauma exposure and PTSD among AOD workers were also assessed. **Results and discussion:** Preliminary analysis indicates that 19% met criteria for STS in the past week. Bivariate analyses on the preliminary data indicated that high levels of stress and higher traumatised client workload predicted STS. A history of prior trauma exposure and PTSD was not associated with experiencing current STS. These findings highlight the importance of providing adequate support for clinicians working with traumatised clients.