

Comparison of Psychological Disorders among Soldiers in Two Military Units

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Abstract

Entering the military led to major changes in personal, family and social forces, and is considered a critical juncture. Exposure to such stressful conditions can affect a person's functioning and mental health. The new course in life with all the benefits is associated with high stress. One of the main concerns in the military is that soldiers are maintaining physical and mental health. Comparison was made about psychological disorders among soldiers in two military units. In this study, causal - comparative, 94 soldiers of the Central Prison in Mashhad units and 110 units of soldiers to protect the province's prisons Mazandaran were selected for sampling, after recording the demographic characteristics of the sample, mental disorders were assessed by using a standard test Scl 25. Data were analyzed by using SPSS software and the results showed that among the soldiers: 3 percent of psychosis, 10% of somatization, 11% anxiety, 8% depression, interpersonal sensitivity 10%, 3%, phobia, obsessive-compulsive (18%), 20% of all soldiers have any ideas suspicion of mental disorders, 43.1 % from total soldiers have mental disorders. The results show that in general, mental disorders among soldiers in the unit include also an element of psychosis, depression and obsessive in other subscales showed no significant difference between the two units. There was no significant association between risk behaviors and the prevalence of mental disorders. The importance of mental health in military units to maintain and promote physical and mental health of military personnel and operations and increasing the combat capability of the armed forces of matter are inevitable. Thus providing educational programs on mental health promotion, family knowledge with the characteristics of young and veteran soldiers among them seems necessary and the need to take advantage of therapies has been already felt.

Keywords: Psychological disorders, military, soldiers.

Introduction

When proposed and implemented a youth, entered the military service, has his own Attributes and character, but after this period, many of the traits that are experiencing transformation. It is natural for a young, self-service environment tailored to the characteristics, attitudes, knowledge and thinking differently than before the soldier finds. Due to various aspects of the service, the attitudes and thoughts (both positive and negative), will contribute to all dimensions of emotional, social, educational and a young, inevitably (Salovey and Mayer, 1990; Seligman and Csikszentmihalyi, 2014).

In the military, youth from different provinces with different cultures and from different families come together and a new phase of your life and start taking responsibility. Login soldier led to major changes in the lives of individuals, families and community members and affect people's

mental health this new course in life with all the benefits that are associated with high stress. The stress of military life, along with the difficulties and potential dangers and military training, as revealing of the soldier suddenly entered and given the talent and previous field may lead to problems and control adaptive behaviors and aberrant expression of some of our soldiers (Milliken, Auchterlonie & Hoge, 2007).

Mental disorder has, "clinical significance". DSM-IV-TR specifies the period for each disruption, during which the symptoms must be present for diagnosis. Thus, a fleeting thought or mood, occasionally bizarre behavior, or a fleeting feeling of instability or confusion, do not form mental disorders when diagnosed mental disorder that is severe enough to put the discomfort brought serious consequences. In order to disorder "clinical significance" and there is a need to affected continuous long enough to significantly affect the lives of people affected (McRae, Sonne, Brady, Durkalski & Palesch, 2004).

Commanders and military officials are constantly trying to find the answer "How can we best military missions in the shortest possible time and with minimum loss of precision, alertness and self-confidence done?" Without doubt we can say that the whole idea of fitness and good mental and maintain the proper level of infrastructural response to the question (Raycroft, 1920).

Due to the military profession is a stressful and difficult job. Mental health personnel necessary to perform administrative duties and family connections appear (Lucier-Greer et al., 2016). To cause mass civilian life and conduct missions far from home and risky behaviors are at risk for various diseases (Galesic and Garcia-Retamero, 2011). The findings suggest that a large number of soldiers are at risk for psychological problems. In this study found the soldiers of military units' anxiety, depression and insomnia are, 46.5% and 62.1%, respectively (Moslemi ,Mahdi, Asadi, & Abbasi, 2015).

Military lifestyle has an impact on the mental health of troops (Nock et al., 2015) functionally mental health closely related with the profession. This relationship becomes even more important for those working in the military units. Because experience has shown numerous wars of human history shown one of the key factors in the success of military units on the battlefields, there are employees who have high levels of mental health. So study the mental health of military personnel is of considerable importance; because timely identification of patients at risk and take action to remedy them in a timely manner, the first step is to increase safety and efficiency. But people with mental illness who have not yet been identified at the unit level Not only can the unit and its mission makes it difficult, We also costs a fortune every year but can impose on a country's armed forces. On the other hand, other research findings suggest Military personnel are not immune from mental disorders due to excessive job stress; mental disorders are affected more than the general population (Cooper and Marshall, 2013).

A recent survey of mental disorders and social of psychologists have concluded that deviations. Many of impairment, Due to the increasing complexity and changes in society and social relations, Preparing young people for generations to cope with difficult situations, Therefore, it is necessary given the increasing complexity and changes in society and social relations, preparing young people for generations to cope with difficult situations (Bandura, 2006). Various methods are recommended for the treatment of mental disorders the various methods of treatment based on the medical perspective on mental training are included. Given the importance of mental health and ability to function in combat veterans and the need to identify individuals at risk in order to prevent disorder, so in this study, which is to psychological disorders in the military unit, we compared the However, it also identified factors associated with mental disorders among our soldiers.

Methods

The design of the study is comparative, however, practical proposals were also considered.

Population and sample size

All the soldiers are on guard duty military and police serving in Khorasan and Mazandaran. The soldiers that are available at the Central Prison in Mashhad protection units and prisons serve the province Mazandaran. 94 soldiers of the Central Prison in Mashhad, 110 soldiers of the province's prisons were selected for sampling.

Tools

1-Demographic questionnaire: The questionnaire included demographic characteristics such as age, gender, education, marital status.

2-Inventory of Mental Disorders SCL 25: The questionnaire contains 25 questions and is aimed at assessing the symptoms of mental disorders. It is a Likert-type response spectrum. In Najarian and Davoodi study (2001) observed that the main form of the questionnaire (SCL-90) is quite significant correlation And therefore a valid tool for assessing symptoms of mental disorders. Also the reliability or trustworthiness measured using Cronbach's alpha. Cronbach's alpha for the shortened questionnaire is for mental disorders were equal to 97/0, indicating the high reliability of the questionnaire.

Data analysis

To analyze the data, we used SPSS software. The descriptive statistics were used of frequency, percentage, mean and standard deviation and inferential statistics, U Mann – Whitney, Wilcoxon and test z.

Results

According to the descriptive indexes, 82.35% of 18 to 21 years, 14.22 percent and 3.43 percent of veterans 22 to 25 years old knows 26 to 29 years old. 5.88% of primary school education, 22.06 percent of junior school, high school, 64.71 percent, 7.35 percent of soldiers have a college education. According to marital status, 14, 10.78% were married, 89.22 percent were single. According to according to the situation of the parents, 83.82 percent of the parents of the soldiers are living together, 3.43 percent divorced, 8.82 percent, the father died; 3.92 percent his mother had died. In addition, 0.49% of the drug warriors, 9.8% of cigarettes, alcohol 11.27 percent, 6.86 percent unusual sex relationship (other than marriage) and 71.57 percent of soldiers have no experience with high-risk behavior. According to descriptive statistics of variables related to mental disorders, 10 % of soldiers somatization, 18% of obsessive - compulsive, interpersonal sensitivity 10%, 8% depression, 11% anxiety, phobia, 3%, 20% paranoia, 3% psychiatric, and 17 % percent of soldiers have other mental disorders.

Research Hypothesis: there is a significant relationship between the experience of high-risk behaviors and the prevalence of mental disorders in soldiers.

Table 1. Chi-square test to examine the relationship between the experiences of risk behaviors and mental disorders

Chi-square	df	Sig
5.739	8	0.676

According to Table 1, since the chi-square test at a significance level of 05/0 to 676/0 and larger, so there is no significant relationship between the experience of high-risk behaviors and psychiatric disorders.

To compare two groups of soldiers' prisoners in Mashhad and Mazandaran province, the normality of variables was evaluated by the Kolmogorov-Smirnov test. In all measures of mental disorders, the scale was not significantly lower than normal expression of 0/05. The Mann-Whitney test was used to compare two groups.

Table 2. Comparison of two soldiers at a scale of Mashhad and Tehran Psychiatric Disorders

Variables	U Mann-Whitney	Wilcoxon	Z	Sig
Physical complain	4867.50	9332.50	-0.732	0.470
OCD	4154.00	8619.00	-2.445	0.014
Interpersonal sensitive	4009.00	8474.00	-2.793	0.005
Depression	4528.00	8993.00	-1.588	0.112
Anxiety	4789.00	9254.00	-0.918	0.358
Phobia	4548.00	9013.00	-1.514	0.130
Paranoia thinks	4520.00	8985.00	-1.636	0.102
Psychosis	3366.50	7831.50	-4.401	0.000
Other mental disorders	4768.50	9233.50	-1.012	0.311
Total	4120.00	8585.00	-2.499	0.012

1) Since the level of significance of Mann-Whitney test for obsessive compulsive (0/014) is smaller than 0/05 By 95 percent between Mashhad and Mazandaran there were no significant differences in obsessive-compulsive.

2) The Mann-Whitney test for significance level (interpersonal sensitivity) (0.005) is smaller than 0/05 By 95 percent between Mashhad and Tehran in (Interpersonal Sensitivity) there is a significant difference.

3) Since the level of significance of Mann-Whitney test for psychosis (0.000) is smaller than 0/05 By 95 percent between Mashhad and Mazandaran there is a psychiatric.

4) Since the level of significance of Mann-Whitney test for psychopathy scale (0/012) is smaller than 0/05 By 95 percent between Mashhad and Mazandaran in scale, there is a mental disorder.

5) For (Physical complain, depression, anxiety, phobia, paranoia thought, other mental disorders, according to the Mann-Whitney test at a significance level of greater than 0/05 ($p > 0.05$) there was no significant difference between the two groups in Mashhad and Mazandaran.

Discussion and Conclusions

According to the descriptive indexes, the results showed that 3 percent of psychosis, 10% of somatization, 11% anxiety, 8% depression, interpersonal sensitivity 10%, 3%, phobia, obsessive-compulsive, 18 percent, 20 percent, beliefs and suspicions species also, 43.1% of all soldiers with mental disorders. These results suggest that the prevalence of mental disorders among soldiers in military units (43.1%) is also higher than the prevalence among the general population and youth population of the country. Research in other countries suggests that the prevalence of mental disorders in the military community is higher than normal people. (Rona, Hyams, Wessely, 2005). Schei (1994) the study showed that the prevalence of mental disorders among military personnel is 48 percent. Iversen and colleagues (2009) conducted a study in the British Army showed prevalence

of mental disorders was 27.2%. Yan and colleagues (2008) investigated the Chinese army recruits concluded that mental health mental health population groups such as the military, is higher than the degree of disorder in the general population of China. Also, Roberts and Attkisson (1998) reported Psychiatric disorders in youth are in the range of 1 to 51%.

According to research conducted by the prevalence of psychiatric disorders in prisoners is high, so if you do not accept diagnostic for separating soldiers at risk the danger of exacerbation of mental disorders coexists with detainees for the soldiers there. For example, the prevalence of personality disorder was among prisoners in Shahre Kord prison was about 55/2 percent (Vakil Zadeh et al., 2002). With regarding to high mental disorders among solders suggest that commanders be careful to the exemption from duty, exemption from combat, guard, gun, do not serve a prison in the central corridor, trying not to shift the turret, and avoid using the deployed soldiers and escorted prisoners to court and sensitive posts for the people are more careful there needs to be up to the soldiers and the prisoners were not inflicted harm to himself.

The main objectives of securing the country's prisons are one side detention of offenders and bringing the offenders and hand them a happy return to society on the other side. Due to achieve these aims requires specialized manpower and mental health. Results of this study demonstrated that most psychiatric disorders among veterans of paranoia, anxiety and obsessive compulsive disorder, respectively. OCD is a highly prevalent among the soldiers, but the treatments of mental disorders are harder than other psychiatric disorders and obsessive. Spreads of obsession have certain consequences. For example, the obsessive preoccupation of intellectual soldiers, prisoners may be sent to court or jail visit with family during the turmoil of thoughts, may be have problems ton keeping count of prisoners.

One of the important features that concern intellectual Paranoia mental disorders associated with injury or harm, to hurt the person. So regarding to working at jail and relation with prisoners always there is a threat to person who has paranoia an inevitable situation. Ashtiani (2011) research showed that most of the problems related to mental health staff in the military, for the paranoid, obsessive-compulsive and interpersonal sensitivity and the least amount of noise, phobia, aggression, somatization and anxiety, respectively.

In order to high percent of mental disorder among solders at service it is necessary to make a plan to improve mental quality by responsible. Survey suggests family history of Soldiers in individual counseling sessions is one of the reasons could be contributing troops in disorders of psychological, cultural and social fabric of the family. So that the soldiers who had family problems, economic situation and location were poorer, the same level of psychological distress than those indicated. The result of educational courses in the form of direct or indirect virtual training courses for family strengths can improve the effectiveness of training. Military operations need physical and mental health (Dehbash, 2008). So it is suggested that counseling centers Armed Forces training courses - continuous treatment, in addition to identifying those at risk, to treat soldiers with combat forces will be to maintain and improve the nearest resort and the Military for young people to Smile.

Suggestions for the future

1. The filing of beginning psychotherapy to soldiers training in risk identification.
2. The use of various methods such as psychotherapy, group therapy, individual therapy and eclectic treatments to strengthen the mental health of soldiers.
3. Establishment of counseling centers in all military police units.
4. Most of the troops by supporting spiritual leaders, especially in the early months of service.
5. With regard to the impact of local switching, satisfaction, service, and improve the mental health of soldiers in the division recommended, and more careful study is necessary.

Conflict of interest

All of authors declare that have no conflict of interest.

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