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.