



ORIGINAL ARTICLE

Epidemiology of mental disorders in soldiers and review The reduction of effectiveness of life skills training

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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 that is associated with high stress. One of the main concerns in the military, soldiers is maintaining physical and mental health. Purpose of this study was to investigate the epidemiology of mental disorders in soldiers and life skills training to reduce its effectiveness. In the first section, cross-sectional research was designed that 204 soldiers of the military unit, were selected randomly from Morgan table, after recording the demographic characteristics of the sample, mental disorders were assessed by using a standard test SCL 25. Then in the second part of the study, quasi-experimental research design was a pretest-posttest control group. Who went on to finish the work for the service of the occupation soldiers, 13 patients remained in each. The experimental group received 10 sessions of training, life skills training, each session lasting two hours and the control group received no training. Before starting the session, after the end of the session, a questionnaire was administered to assess mental disorders. 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 there is also an element of psychosis, depression and obsessive in other subscales showed no significant difference between the two units. And the economic status, place of residence and experienced soldiers, there was no significant association between risk behaviors and the prevalence of mental disorders. Teaching life skills in the experimental group compared with the control group significantly decreased the overall score is a mental disorder. The results indicated that life skills education can be achieved to reduce mental disorders in soldiers. 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 inevitably. 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 already be felt.

Keywords: psychiatric disorders, life skills training, conscripts.

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INTRODUCTION

The soldiers are part of the main body of the armed forces, military and police, to establish and maintain security and social order in the country's armed forces placed at the disposal period. This statement applies to all the different countries and different goals such as service requirements, professional soldiers, enlisted. 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, [1].

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 [2].

Due to the military profession is a stressful and difficult job. Mental health personnel necessary to perform administrative duties and family connections appear [3]. To cause mass civilian life and conduct missions far from home and risky behaviors are at risk for various diseases [4]. 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 [5]. Military lifestyle has an impact on the mental health of troops [6] functionally mental health closely related with the profession.

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, [6]. Today, despite the profound cultural changes in lifestyles, many people deal with issues of life and basic skills are necessary and this leads them to confront the problems and demands of everyday life, it is vulnerable [7]. Scientific findings reveal that the mental health is needs of today's most important issue to ensure that a person has to know their selves exact; others can understand and provide an effective relationship with them. Know their Negative emotions and stress of everyday identify them under control. To effectively solve their problems and make appropriate decisions and that stereotyped thinking and not accept information without processing. Necessary to meet the basic needs of life skills is dominating ten life skills. Life skills effect on self-perceptions of competence, confidence and self-esteem, so they work great impact on mental health. Along with the improvement of mental health care incentives individual self and others, prevention of mental illness, prevention of health problems and increased behavioral problems.

The main purpose of life skills training program is based on the principle to provide opportunities by the program In addition to the physical health of individuals to acquire, learn life skills or opportunities to acquire skills to the self, other people and the community are effective, competent and confident act. In fact, life skills training programs, psychosocial factors such as self-esteem, self-concept, social support networks, stress, emotions and how to cope with them will be considered. This program is an educational program for mental health promotion and prevention of impairments in social skills that is necessary to teach audiences [8].

Different studies [9-11] all indicated that the training Life Skills is effective on people mental health.

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. 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. According to the soldiers who are serving in the armed forces Psychological and behavioral Given the crucial role of education and life skills, mental health, physical health and their social significance of this study is even more marked.

METHODS

The present study was conducted in two parts:

In the first part, the study examined the epidemiology of mental disorders in terms of a description of the purpose of the survey.

The second part examines the effectiveness of teaching life skills to reduce and treat mental disorders troops the quasi-experimental method with pre-test and post-test in the control group and the target will be applied. Quasi-experimental designs, quasi-complete designs of real experiments And have the ability to control some of the internal validity criteria. Due to limitations in the real world for the humanities researcher, Such as the ability of the researcher to choose the subjects and randomly assign them to different groups or conditions of this project in humanities research is necessary [12]. The random assignment design was used, but due to limitations of the military organization, random selection was not possible for us.

Population: all the soldiers on guard duty military and police serving in Khorasan and Mazandaran all . The soldiers that are available at the Central Prison in Mashhad protection units and prisons serve the province mazandaran.

The sample: in the first study, using a sample size of 204 Morgan And the method of sampling of the soldiers were in the second part of the volunteer soldiers recruited 30 people in both experimental and control groups (N = 15) were assigned randomly.

Data collection and validity of:

Demographic questionnaire:

The questionnaire included demographic characteristics such as age, gender, education, marital status etc.

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 [13] 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.

Life Skills Training Program:

The program includes life skills training sessions, each session lasting 2 hours; the experimental group was trained.

Methods of data analysis: To analyze statistical data and research to answer questions SPSS18 software, descriptive statistics and inferential statistics were used. The descriptive statistics was used of frequency, percentage, mean and standard deviation and inferential statistics, analysis of covariance.

RESULTS

Table 1: Distribution of respondents by age:

Collective Frequency percent	Frequency percent	frequency	age
82.35	82.35	168	18-21
96.57	14.22	29	22-25
100.00	3.43	7	26-29
	100.00	204	total

According to Table 1, 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.

Table 2: Distribution of respondents according to education

Collective Frequency percent	Frequency percent	frequency	education
5.88	5.88	12	primary school
27.94	22.06	45	Junior school
92.65	64.71	132	high school
100.00	7.35	15	university
	100.00	204	total

According to Table 2, 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.

Table 3: Distribution of respondents according to Location:

Collective Frequency percent	Frequency percent	frequency	Residential city
73.53	73.53	150	native
100.00	26.47	54	Non native
	100.00	204	total

According to Table 3, 73.53 percent and 26.47 percent are non-native or native troops from cities.

Table 4: Distribution of respondents according to the economic status of the family

Collective Frequency percent	Frequency percent	frequency	Family economic situation
15.69	15.69	32	poor
94.12	78.43	160	medium
100.00	5.88	12	good
	100.00	204	total

According to Table 4, 15.69 percent of the poor economic situation of the soldiers, 78.43 percent are average and 5.88 percent of soldiers are economical.

Table 5 : Descriptive statistics of variables related to mental disorders

Collective Frequency percent	Frequency percent	frequency	SCL
10%	10%	21	Physical complain
28%	18%	36	compulsive - Obsessive
38%	10%	21	Interpersonal sensitive
47%	8%	17	depression
57%	11%	22	anxiety
61%	3%	7	phobia
80%	20%	40	Paranoia thought
83%	3%	6	psychiatric
100%	17%	34	other mental disorders
		204	total

According to Table 5, 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 part 1:

Research Hypothesis 1 : there is a significant relationship between Locations of the soldiers.

Table 6: Chi-square test to examine the relationship between mental disorders and Location

Significant level	Freedom degree	Chi-square
0.244	2	2.824

Base on the findings in Table 6. Since the chi-square test at a significance level of 0.05 to 0.244 and larger, so there is no significant relationship between Location and mental disorders.

Research Hypothesis 2: There is significant relationship between socioeconomic status families and soldiers have significant mental disorders.

Table 7: Chi-square test to examine the relationship between family socioeconomic status and mental disorders

Significant level	Freedom degree	Chi-square
0.167	4	6.461

According to Table 7, since the chi-square test at a significance level of 0.05 to 0.167 and older, so between family socioeconomic status and mental disorders, there is no significant relationship.

Research Hypothesis part 2:

there was a significant relationship between the experience of high-risk behaviors and the prevalence of mental disorders in soldiers.

Table 8: Descriptive statistics for the control and experimental groups:

group	Mean	Std. Deviation	N
experiment	44.9333	15.19618	15
control	40.6667	11.44344	15
Total	42.8000	13.39429	30

According to Table 8, the mean scores on tests of mental disorders, psychopathy scores equal to 44.93 and 40.66 in the control group.

Table 9: Loan test to check homogeneity of variance

F	df1	df2	Sig.
6.79	1	28	.736

According to Table 9, since the level of significance at 0.736 and 0.05 times is greater during the test, the variances of the groups are similar (with homogeneity) it is therefore a prerequisite for the analysis of covariance is established.

Table 10: Analysis of covariance to examine the effect of education on mental disorders

Source	Type III Sum of Squares	df	Mean Square	F	Sig.	Partial Eta Squared
Corrected Model	1003.385 ^a	3	334.462	5.316	.007	.420
Intercept	994.581	1	994.581	15.808	.001	.418
group	577.351	1	577.351	9.177	.006	.294
Pretest Scl	724.660	1	724.660	11.518	.003	.344
group * Pretest Scl	658.078	1	658.078	10.460	.458	.122
Error	1384.153	22	62.916			
Total	48926.000	26				
Corrected Total	2387.538	25				

1. Because of the significant interaction between group and pre-test a scale equal 0/458 and 0/05 times greater, the second precondition analysis of covariance was also established.
2. According to the results, since meaningful group level (0/006) and pre-test scale (0/03) is smaller than 0/05, With 95% confidence, life skills training resulted in a significant reduction in the scale of mental disorders duty soldiers who have been trained in comparison with the control group.

DISCUSSION AND CONCLUSIONS

Military forces are usually the first group that called in response to the rape, riots and natural disasters. These missions that may take a long time, these forces often lead to separation from their family living. On the other hand, in addition to the involvement of military forces in time of war, long after the end of war-related mental and physical effects can be sought [14]. Mental health is closely related to job performance. This association of individuals who work in military units far more strong, because experience has shown numerous wars of human history 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 it is important to investigate the mental health of military personnel. For action to identify those at risk and their treatment, the first step is to increase health and increase their efficiency [4].

According to Table 5, 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.

This finding is consistent with other research: Research in other countries suggests that the prevalence of mental disorders in the military community is higher than normal people. [15]. Schei [16] the study

showed that the prevalence of mental disorders among military personnel is 48 percent. Iversen and colleagues [17]) conducted a study in the British Army showed prevalence of mental disorders was 27.2%. Yan and colleagues [18] investigated the Chinese army recruits concluded that mental health population groups such as the military, is higher than the degree of disorder in the general population of China. In the national survey of mental health and illness, the rate of mental disorders among the top 15 in the country was 21% [19]. Soltanian and colleagues [20] found that the prevalence of mental disorders among youth in psychiatric disorders among military was about 24 percent more than the normal population [21]. Montazeri *et al* [22] stated that the prevalence of mental disorders among young Iranians soldiers is 44 percent. Roberts *et al* [23] reported Psychiatric disorders in youth are in the range of 1 to 51%.

One of the reasons for the high prevalence of psychiatric disorders among veterans can note that the 204 soldiers who were tested, Almost 40% of them were soldiers who had recently entered service. The result of Farsi and colleagues [15] suggests that most cases of mental disorders in the first 6 months of service will be occurred. This can be caused by sudden changes in life style, such that the person is still able to use appropriate coping mechanisms. Over time, the use of appropriate and environmentally adaptive mechanism reduces the rate of psychological disorders.

Another reason for the high prevalence of mental disorders can be hard work, low productivity and low salaries. Basically, the major part of people's daily life is spent working. There is a direct relationship between satisfying of life, salary, satisfying from boss and coworkers, reciprocal trust and mental health and satisfying of life. [24]. Dehbash *et al* [25] showed there is a positive relationship between mental health and salary means that more salaries cause to more mental health. Hobbi *et al* [26] showed in a study organization services cause to lead technical, social and cognitive skills among militaries families and this issue protect them against social and mental disorder.

These results are consistent with other research: Physical and mental health of employees who are satisfied with their jobs, are less than those who aren't. [27-30]. Yasae *et al* showed [31] there is significant relationship between mental disorder and work exhaustion. Studies showed there is a longer relationship between job satisfaction and mental health. Sapington [26], Hoobi *et al*. [32] stated the spirit, vitality and performance of military personnel affected by the services, facilities that puts organization to them and their families. Mohammad Virdi [34] showed in his study a significant correlation between job satisfaction and mental health dimensions is straight forward. Results of studies shows with increasing age the mental health will be improved. So among personnel, soldiers at service are more in danger to give mental disorders. While chronic physical problems are uncommon in juveniles and adolescence but mental disorder are common among this age group [25]. Mazokvpakys [33] examined the mental health of employees paid in a warship, He showed a high prevalence (48.8%) cases of psychological disorders among veterans suggest that soldiers at more than any other employee of warship are at risk of, compliance and performance problems.

According to Table 10, the results indicated that life skills training had significant effects on reducing psychological disorders. These results are consistent with results:[35-44].

In line with the hypothesis of unwanted results [41, 45, 46]:

Life Skills Training program has successfully been able to improve the mental health of soldiers. As a result of this program, soldiers experience more empathetic relationships with one another, and they can modify some of his bad behavior. Soldiers could be more efficient ways of self-actualization give way to communicate with others and also learn skills learned in the sense of when and how to utilize these skills. The upshot of this was due to the skills of the soldiers adjust to the situation surrounding the spread and reduce the severity of their incompatibility. Learn and practice these skills reinforce or change attitudes, values and behaviors of human. Thereby creating positive and healthy behaviors of many mental disorders can be prevented. Soldiers train in various skills, ability to deal with stress factors increases.

- And strengthen their positive beliefs. All this makes Factors that hinder a person's mental health is not restored, because it seems most of mental disorders comes from disability to act base on practical planning after that not achieving to goals and lack of enough knowledge and false beliefs about him and world around himself.
- One of the questions and concerns of the occupation troops and continuing education, it seems If the educational content, topics such as life skills training, mate choice, and the choice of academic major and career choice ... add not only can be more effective but also increase the mental health of soldiers and their willingness to attend training classes.
- In fact, the group of soldiers and soldiers trained in the use of problem-solving skills to deal with the events, there is a difference. Trained soldiers have been able to obtain a comprehensive survey of logical decision problems; While aggressive when faced with difficult problems, usually less braveness strategies they use and to verbally and physically with those around you.

Military operations need physical and mental health [25]. 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. Suggest holding educational curriculum for commanders to identify mental problem nature of soldiers and taught them new way to decrease psychological damages to have effective interaction with soldiers.
4. Establishment of counseling centers in all military police units.
5. Most of the troops by supporting spiritual leaders, especially in the early months of service.
6. Relationship with soldiers' families to inform of problems outside of the military environment is significantly impaired ability to combat troops.
7. 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.
8. A comparative study was conducted among soldiers in the country's prisons.
9. Employing graduates, psychologist, or psychiatrist as a directive in units of the prison service.

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