

## PRESS RELEASE

### Lighting up in uniform

#### Study looks at what makes soldiers reach for a pack of cigarettes or not

Is it possible to predict which soldier will start smoking and which one will maybe quit? Yes, says Christopher B. Harte of the Veterans Affairs Boston Healthcare System and Boston University School of Medicine in the US, especially when factors such as alcohol use, gender, a soldier's rank, war zone stressors and unit support are considered. A new study<sup>1</sup> led by Harte, published in the Springer journal *Annals of Behavioral Medicine*<sup>2</sup>, looks at smoking behavior in the military.

Using data obtained as part of the Neurocognition Deployment Health Study, Harte and his team examined the prevalence and quantity of cigarette smoking among 1,082 US Army regular active duty soldiers and activated National Guard soldiers serving between April 2003 and September 2006. Iraq-deployed and non-deployed soldiers were assessed. Army soldiers show the highest rate of tobacco use within the greater US military service.

Although it builds on previous work done on the topic, the Neurocognition Deployment Health Study is the first longitudinal study of its kind to consider the link between smoking and a comprehensive array of operational stress characteristics. These include direct combat exposure, non-combat war zone stressors, war zone threat appraisal and the cohesive functioning of a soldier's unit. Sociodemographic characteristics, traumatic stress and alcohol use were also taken into account as potential predictors of whether a soldier would be likely to change his or her smoking habits.

The researchers believe that the demands specific to the operational environment of a war zone or a garrison have unique effects on soldiers' smoking habits. Soldiers who started smoking while in war zone areas were more likely to hold a junior rank and consume more alcohol. Highly stressful war zone events after or even outside of direct combat made soldiers reach for a pack of cigarettes more readily.

On the other hand, better support by one's unit, especially in the first phase of deployment, helped more soldiers to quit smoking, probably because of the buffering effect that emotional and practical support has against operational stressors. Their compatriots who quit smoking generally experienced lower levels of non-combat war zone stress, were female, and did not consume large amounts of alcohol. In general, females who were deployed were more likely than their male counterparts to quit smoking once they returned from their tour of duty.

These findings can help to develop comprehensive military health programs that aim to reduce or prevent the initiation of tobacco use after deployment, as well as those geared to reducing mental health problems which result from deployment related stressors. Such programs would alleviate both economic and health consequences of smoking and help to bolster military readiness and performance for future military operational activities.

“Given the numerous public health and military readiness consequences of smoking, identifying characteristics that influence smoking behavior in this population is a critical step towards developing successful smoking prevention and cessation programs,” writes Harte.

References:

1. Harte, C.B. *et al* (2014). Prospective Examination of Cigarette Smoking Among Iraq-Deployed and Nondeployed Soldiers: Prevalence and Predictive Characteristics, *Annals of Behavioral Medicine*. DOI 10.1007/s12160-013-9584-5
2. *Annals of Behavioral Medicine* is an official journal of the Society of Behavioral Medicine.

**The full-text article is available to journalists on request.**

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