



Psychological Resilience among the Military Personnel of Peace and Field Areas

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Abstract- *The Military personnel serving in peace and field area are experiencing greater allostatic load, psychological vulnerabilities and socio-psychological traumas. Certain primary psychological stress dimensions those dealt with modern military operations are namely the isolation; ambiguity; powerlessness; boredom and danger in general and the fear of bullets, mines, bombs and other hazards such as risk of accidents, disease, and exposure to toxic substances in particular those might have surmounted enormous pressure on the resilience and wellbeing of the Military personnel especially the Officers and Jawans deployed in peace and field areas across the countries. Therefore, in the present study a pioneer attempt has been made to assess the psychological resilience of the Army Officers and Jawans of Field and Peace Areas working in different states of India. The study has been conducted on a sample of N = 120 Military Personnel divided in the two subgroups based on their Rank (60 officers and 60 Jawans) and subsequently on their Serving Areas (30 Peace Areas + 30 Field areas). Finally these subjects were further subdivided into two comparable halves based on their intensity of conflicts that may included N = 15 in Low intensity and N = 15 in High intensity conflicts group. In this manner there were eight groups with N=15 subjects in each that comprised of aforesaid sample. These personnel were assessed qualitatively (observation, interview, Fuzzy cognitive mapping, and case study) as well as quantitatively (Resilience Scale). The result based on qualitative data revealed that the soldiers serving in peace area reported lesser conflicts and better resilience as compared to their field counterpart. The result based on quantitative data revealed that the Rank significantly (1,112), = 5.85, $p < .01$ exerted influence on the resilience wherein the Army officers were found more resilient (136.43) as compared to their Jawans (126.02) counterpart. Similarly, the main effects of serving area was also found $F(1,112) = 15.108$, $p < .01$ as statistically significant wherein the personnel serving in Peace area were found more resilient (131.31) as compared to their field areas counterpart.*

Keywords- Military, traumas, bullets, mines, bombs

1. INTRODUCTION

Resilience generally refers to a pattern of adaptation in the context of risk adversity. It has been characterized as the ability to “bounce back” from adversities, “bend, but not break” under extreme stress, handle setbacks, and persevere in spite of ongoing stresses. Resilience has been characterized as a set of good outcomes that occur in spite of serious threats to adaptation or development and as specific coping skills that are marshaled when faced with challenging situations. It is tied to the ability to learn to live with ongoing fear and uncertainty and the ability to adapt to difficult and challenging life experiences. Masten (2001) characterized it as “ordinary magic.” According to the American Association of Psychology, resilience is “the process of adapting to adversity, trauma, tragedy or when faced to significant sources of stress”. Luthar (2006) stated that, “Resilience is a phenomenon or process reflecting relatively positive adaptation despite experiences of significant adversity or trauma. It is a super ordinate construct subsuming two distinct dimensions significant adversity and positive

adaptation and thus is never directly measured, but is indirectly inferred based on evidence of the two subsumed constructs”.

The “hardiness” theoretical model first presented by Kobasa provides insight for understanding highly resilient stress response patterns in individuals and grows conceptually. It is seen as a personality trait or style that distinguishes people who remain healthy under stress from those who develop symptoms and health problems. Hardy persons have a strong sense of life and work commitment, a greater feeling of control, and are more open to change and challenges in life. They tend to interpret stressful and painful experiences as a normal aspect of existence, part of life that is overall interesting and worthwhile (Kobasa, 1979). The hardy style person is also courageous in the face of new experiences as well as disappointments, and tends to be highly competent. The high-hardy persons, while not impervious to the ill effects of stress, are strongly resilient in responding to highly stressful conditions.

Exposure to trauma and adversity is an inevitable part of military combat and a potential



threat to the health and well-being of military personnel. Military personnel also face many of the same occupational stressors as individuals in other occupations and, in some cases, perform their jobs under traumatic stress (Castro & Adler, 2010; Lerner & Blow, 2011). In addition to these stressors, other aspects of military service, such as separation from family and friends, frequent moves, and austere living conditions, place a psychosocial burden on personnel and their families and contribute to the stresses and strains of everyday life. Although combat stress is recognized as a major cause of mental health disorders in service members (Callahan, 2010), any number of stressors may compromise mental health and, thereby, impact fitness for duty, operational effectiveness, and force sustainability (Adler, McGurk, Stetz, & Bliese, 2003). Military organizations therefore need psychologically resilient personnel who can withstand the effects of a wide range of stressors both over the short term and long term.

Military Operations Other Than War (MOOTW) have undergone a tremendous metamorphosis and have become increasingly complex and diffuse where peacekeepers were initially deployed to post-conflict areas and had a strictly neutral role, today, they are deployed at various stages of a conflict, ranging from low hostility areas to full-scale combat zones (Broesder, Vogelaar, Euwema, & Buijs, 2009). It is widely accepted that operational demands may negatively affect the well-being of these professionals. Researchers and practitioners have therefore mainly focused on *avoiding* risks factors that have been associated with deployment-related pathology. However, it has recently come into attention that even though most soldiers face major challenges and stressors most soldiers do not develop mental health problems after deployment (Dickstein, Suvak, Litz, & Adler, 2010). Moreover, the majority look back on their deployment as a positive experience in which they learned a lot about themselves, made friends for life, gained new understanding of personal values and priorities, and provided them with the opportunity to meaningfully contribute to peace and violence prevention. And for most soldiers, these positive effects outweigh the negative (Mouthaan, Euwema & Weerts, 2005; Newby et al., 2005; Parmak, Euwema & Mylle, 2011; Schok, Kleber, Elands, & Weerts, 2008). These positive responses are attributed to the resilience of these professionals. Insights into these resilient responses are thus important as they offer an alternative pathway to successful adaptation by *strengthening* resilience factors that enable soldiers to successfully deal with operational demands.

Reich and colleagues (2010) recently published a comprehensive work on it. They concluded that resilience is best defined as the outcome of successful adaptation to hardships. Two equally important components are central to the

meaning of resilience: *recovery* and *sustainability*. Recovery focuses on the healing of emotional wounds. It is indicated by the thoroughness and velocity of time needed to return to a former, more balanced, level of functioning. This does not mean that a resilient recovery is without its emotional scars, but psychological and behavioral functioning is beyond what may be expected given the circumstances. Sustainability on the other hand, refers to the capacity to maintain positive engagements with the environment and to maintain well-being while meeting the demands of the environment. It moves beyond the mere capacity to maintain competence when exposed to stressful events to also include the sustaining of personal interests in goals that give life meaning and bring feelings of pleasure.

An important insight of resilience research is that the presence of positive affective states is not the same as the absence of negative affective states. Both can co-exist at the same time. Moreover, research shows that positive emotional engagements buffers against the negative effects of stress on well-being and health. Experiencing positive emotions after a stressful event for instance, accelerates physiological recovery and buffers against the development of depression (Frederickson, Tugade, Waugh & Larkin, 2003; Zautra, Johnson, & Davis, 2005).

Recognizing the relevance of resilience for the well-being of military personnel and mission success, the concept of resilience has grabbed the attention of the military organization. Reich and colleagues (2010), use the concepts of recovery and sustainability to define military resilience. We include the ability to maintain optimal performance during an acute stress situation, as this is a crucial aspect of military work. The capacity to *sustain* combat motivation and a sense of being able to meaningfully contribute to the mission is especially relevant when confronted with violence by the local people, continually changing Rules of Engagement, or boredom. Military work involves close coordination and team efforts to achieve mission objectives. As such, interpersonal conflicts are seen as an especially debilitating stressor of a soldiers' resilience. When soldiers were confronted with high pressure to perform, even a minor argument among soldiers can have a critical impact on team performance. Possessing strong interpersonal and communication skills that are necessary for effective teamwork is therefore an important resilience capacity. In addition, these skills are also important for promoting access to social support in times of stress (Skodol, 2010). Physical fitness has always been crucial for operational effectiveness to sustain performance in physically demanding environments. Besides importance of physical fitness for sustaining optimal performance, it has also been positively related to mood and self-confidence and has been linked to neurobiological effects that promote



resilience (Cotman & Berchtold, 2002).

Beyond intrapersonal characteristics, interpersonal variables, such as social support or other aspects of the social environment, have been thought to play a role in promoting and sustaining resilience in the face of adversity (Rutter, 1999). The quality of one's social environment, both before and after an overseas military deployment, has been found to be associated with mental health upon return from deployment (Brewin, Andrews, & Valentine, 2000; Fritch, Mishkind, Reger & Gahm, 2010). In their study of reserve and National Guard Operation Enduring Freedom/Operation Iraqi Freedom (OEF/OIF) veterans, for example, Pietrzak et al. (2009b) found that postdeployment social support was negatively associated with traumatic stress and depressive symptoms, even after adjusting for combat experiences. Additional analyses examining the characteristics of veterans who demonstrated a "resilient" mental health trajectory (i.e., they experienced high combat exposure and reported low PTSD symptoms) revealed that these individuals experienced fewer psychosocial stressors and greater family support and understanding (Pietrzak & Southwick, 2011). Hence, these findings reveal that interpersonal variables related to the social environment may also contribute to health and well-being, both directly and by moderating the impact of adverse experiences. Conversely, a poor social environment may be detrimental to health or may exacerbate the impact of adverse experiences on health (Mavandadi, Rook, Newsom, & Oslin, 2013; Mulligan, et al., 2012).

The vast majority of studies on psychological resilience in military personnel have been cross-sectional (Bartone et al., 2012; Goldmann et al., 2012; Green et al., 2010; Pietrzak et al., 2009b, 2011; Pietrzak & Southwick, 2011). This has resulted in difficulties with the interpretation of findings, as observed relationships may reflect the influence of resilience related variables on health and well-being, the influence of health and well-being on resilience-related variables, or the sharing of a common substrate between the two. In addition, most studies have focused on psychopathology. It was expected that intrapersonal and interpersonal variables would have sizable direct effects on post deployment mental health and would moderate the impact of combat experiences on mental health. Eisen, Schultz, Glickman, Vogt, Martin, Princess, Bonsu, Drainon, and Elwy (2014) determined whether military service members returning from Afghanistan and Iraq who exhibit higher levels of resilience, including hardiness (encompassing control, commitment, and challenge), self-efficacy, and social support after returning from deployment are less vulnerable to subsequent mental health problems,

alcohol, and drug use. Greater hardiness predicted several indicators of better mental health and lower levels of alcohol use 6–12 months later, but did not predict subsequent posttraumatic stress symptom severity. Postdeployment social support predicted better overall mental health and less posttraumatic stress symptom severity, alcohol, and drug use.

In their classic study, Fikretoglu, Brunet, Poundja, Guay and Pedlar, 2006 assessed the impact of deployment on functioning. They observed that the risk factors were negatively associated with psychological and physical functioning, and positively associated with psychological and physical functioning. Low- as well as high-magnitude deployment risk factors were associated with functioning. Deployment risk and resilience factors were associated with a host of problems in physical and psychological functioning for veterans. A survey containing PTSD and depression screening measures, and questionnaires assessing resilience, social support, and psychosocial functioning. Lower unit support and post deployment social support were associated with increased PTSD and depressive symptoms, and decreased resilience and psychosocial functioning. Path analyses suggested that resilience fully mediated the association between unit support and PTSD and depressive symptoms, and that post deployment social support partially mediated the association between PTSD and depressive symptoms and psychosocial functioning. General ability of results is limited by the relatively low response rate and predominantly older and reserve/National Guard sample. These results suggest that interventions designed to bolster unit support, resilience, and post deployment support may help protect against traumatic stress and depressive symptoms, and improve psychosocial functioning in veterans (Pietrzak, Johnson, Goldstein, Malley, Rivers, Morgan & southwick, 2009).

Similar to the study conducted by Levin, Laufer, Stein, Hamama-Raz, and Solomon, (2009) tried to explore the relationships between resilience and posttraumatic growth. The results revealed that high levels of resilience were associated with the lowest posttraumatic growth scores. The results imply that although growth and resilience are both salutogenic constructs they are inversely related. Bonanno, Mancini, Horton, Powell, Leard Mann, Boyko, Wells, Hooper, Gackstetter and Smith (2012) determined the psychological cost of deployment on US military personnel deployed in support of the operations in Iraq and Afghanistan. Each analysis revealed remarkably similar post-traumatic stress trajectories across time. The most common pattern was low-stable post-traumatic stress or resilience (83.1% single deployers, 84.9% multiple deployers), moderate improving (8.0%, 8.5%), then worsening-chronic post traumatic stress (6.7%, 4.5%), high-stable (2.2% single deployers only) and high-



improving (2.2% multiple deployers only) covariates associated with each trajectory were identified. The final models exhibited similar types of trajectories for single and multiple deployers. Further, Seelig, Jacobson, Donoho, Trone, Crum-Cianflone and Balkin (2016) examined the relationship between self-reported sleep parameters and indicators of resilience in a US military personnel. Resilience metrics included lost work days, self-rated health, deployment, frequency and duration of health care utilization, and early discharge from the military. The results of study reveals presence of insomnia symptoms as significantly associated with lower self-rated health, more lost work days, lower odds of deployment, higher odds of early discharge from military service early, and more health care utilization.

Exploring the level of psychological resilience among the military personnel of peace as well as field areas is an arduous task as the army officers and Jawans are experiencing tremendous stress while serving at different posts. Selecting military profession itself is a very challenging job. According to our observation, the person with high self-esteem and high self-efficacy could abruptly jump in this profession. Further, it is also implied that there might be certain other psychosocial factors behind preferring this occupation. One such is poverty, that has pushed lots of personnel in this job as the basic necessity for livelihood and hope to better of their future life is the other factors to select this profession wherein the officer while forgetting their life threat prefer to render their incessant service to the country. Further, the great patriotic feeling may also be the other reason for the same. The military service give lots of opportunities and future prospectus to those youth who could not attained higher education. It gives ample opportunities to pursue their education even after job wherein the soldier can become officers and so on. Serving for the sake of own motherland is a matter of great proud to the people who got opportunities in the area. However, only the wearer knows where the shoe pinch. Means to say that only the military personnel know the hardship while serving in this profession. These personnel undergoes with various socio-psychological and physical vulnerabilities while serving in peace and field area. They experienced high level of stress surmounted with high allostatic load while performing their duties. Such stress are experienced by the Jawans as well as military officer both while deploying at various field during the course of their duties. Hence, the military personnel both officers and Jawans undergo with various socio-psychological problems during the services that lower their resilience. Thus, working in field areas seems to be quite stressful as compared to the peace areas. They work in harsh condition in complex site alongwith fear of attack and death that aggravate their stress by lowering the

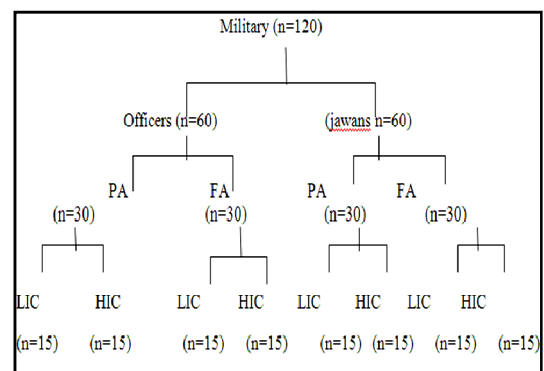
resilience. As a result, the soldier might experience heightened psychological distresses, loneliness, depression and anxiety. The negative affects while dealing with the stressful events of field areas reduces their coping that causes problem to their resilience, wellbeing and global happiness. Thus, in the present study, a pioneer attempt has been made to analyze the levels of resilience among military personnel deployed in field and peace areas.

2. METHODOLOGY

STUDY AREA: The study was conducted in peace as well as field areas of north and north-east (ferozepur, hussainwala, pathankot , Jammu & kashmir and Sikkim) in India.

SAMPLE: In the present study a sample of N=120 military personnel's (officers and jawans) posted at peace and field of north and north-east areas in India. The selected in the present study will be from 20-45 years of age. The selected samples of N= 120 subjects will divided into two groups based on their ranks, i.e officers (N=60) and Jawans (N=60) subjects. These subjects were again divided into two equal comparable half based on their current postings i.e, from peace area (N=30) and from field area (N=30) . The subjects finally were divided into two comparable half based on intensity of conflict LIC (N=15) and HIC (N=15). Thus, there were 8 groups with N = 15 subjects in that comprises of aforesaid sample. Thus, purposive sampling has been used in the present study and classification of the sample is as follows:

Fig 1: Sample Classification



Notation: PA= Peace area , FA= Field area, LIC= Low intensity conflict, HIC= High intensity conflict.

3. QUANTITATIVE ANALYSIS

RESILIENCE SCALE: It was developed by Wagnild and Young (1993) with the purpose to identify the degree of resilience. It has 25 items arranged with seven point scale. The score ranges from minimum of 25 to a maximum of 175. The higher the scores more will be the resilience. It is a



reliable measure where the cronbach value of internal consistency ranges from $r = .76$ to $r = .91$. Test retest reliability have ranged from $r = .67$, $r = .84$ ($p < .01$).

4. PROCEDURE

The objective of the present study was to assess psychological resilience among military personnels of peace and field areas of north and north east in India. For approaching the subjects first of all a pilot study was conducted in order to explore the study areas. For permission of data collection in specific field or peace areas of military units were taken from concern authorities. Beside this information regarding locations were collected from the commanding officer. In this study both qualitative and quantitative analysis measures were used. In qualitative analysis the field observation, interview and fuzzy cognitive mapping were used whereas in quantitative analysis the self reported questionnaire 25 item Resilience scale were used. Further the study was also intended to identified the difference between officers of peace and field areas on dimension. 25 item Resilience scale. Similarly the study further makes out the difference between Jawans of field area and piece area on dimension. Again, the study further makes out the difference between personnel serving in low intensity conflict and personnel who are serving in high intensity conflict. For accomplishing in the present study a sample of $N = 120$ Officers and Jawans posted in Peace and Field areas. The sample selected in the present study was from 20-45 years of age. **The selected samples of $N = 120$ subjects were divided into two groups based on their ranks, i.e officers ($N = 60$) and Jawans ($N = 60$) subjects. These subjects will be again divided into two equal comparable half based on their current postings i.e, from peace area ($N = 30$) and from field area ($N = 30$). The subjects ertr again sub-divided into two comparable half based on intensity of conflict LIC ($N = 15$) and HIC ($N = 15$). Thus, purposive sampling was used in the present study.** The quantitative measures is self report in nature that was administered by the researcher herself by asking open ended question, from the participants. Beside this the researcher have done pilot study and asked various personnel about the problems in military. Thus $2 \times 2 \times 2$ Factorial design was followed and eight groups, were formed first group was named as army officers, peace area and low intensity conflict, second group was formed as army officers, peace area and high intensity conflict. Third group was army officers, field area & low intensity conflict, fouth one was army officers, field area & high intensity conflict. And fifth group were formed as jawans, peace area, low intensity conflict, sixth one was jawans, peace area & high intensity, seventh group was jawans, field area & low intensity conflict and the eight group was jawans, field area & high intensity conflict. each group

comparison of 15 subjects that the from a complete sample of $N = 120$ subjects results have been presented separately for each measure. These subject were assessed with the help of $2 \times 2 \times 2$ ANOVA. The result is as follows:

Table 1.1 : A $2 \times 2 \times 2$ ANOVA performed on Army Officers and Jawans on the measure of Resilience

Source	ss	df	ms	F	p
Total	1934468.000	120			
RA	1373.633	1	1373.633	5.858	<.01
SA	3542.533	1	3542.533	15.108	<.01
CO	120.000	1	120.000	.512	n.5
RA×SA	360.533	1	360.533	1.538	n.5
RA×CO	192.533	1	192.533	.821	n.5
SA×CO	93.633	1	93.633	.399	n.5
RA×SA×CO	929.633	1	929.633	3.965	<.05
Error	26261.867	112	234.481		

Notation: RA= Rank, SA= Serving Area, CO = Conflict

From the table 1.1 it is quick clear that the main effects of Rank in the measure of resilience was found $F(1,112) = 5.858$, $p < .01$ as Statistically significant. Similarly, the main effects of serving area was found $F(1,112) = 15.108$, $p < .01$ as statistically significant. Similarly, the main effect of conflict on the measure of 25 item Resilience scale was found $F(1,112) = .512$, $p > .05$ as statically non significant. It shows that the above two factors have played significant role in the dependent measure of resilience scale. Further, two way interaction between $RA \times SA$ was found $F(1,112) = 1.538$, $p > .05$ as statistically non significant. Similarly, the two way interaction between $RA \times CO$ was aslo found $F(1,112) = .821$, $p > .05$ as statistically non significant. Further, the two way interaction between $SA \times CO$ was found $F(1,112) = .399$, $p > .05$ as statistically non significant. Finally, the three way interaction between $RA \times SA \times CO$ was found $f(1,112) = 3.96$, $p < .05$ as statistically significant.

The average score of Army Officers, Peace area, low and high intensity conflict on the dimension of locus of control was found 136.43 whereas the average score of Army Officers, Field area, Low and high intensity conflict on the dimension of Resilience scale was found 122.08. It shows that Army Officers who were serving in a peace area had better resilience factor as compare to their counterpart. Further, the mean score of Jawans, Peace area, Low and High intensity conflict on the dimension of Resilience scale was found 126.2, whereas the average Score of Jawans, field area, High and Low intensity conflict was found 118.78. It shows the jawans, who served in a



peace area had better resilience as compare to their counterpart. i.e. Jawans Serving in field area's . The average Score of Army Officers, Jawans , Peace area , Low & high intensity conflict was found 131.31 whereas, the mean score of army officers, jawans, field area, low and high intensity conflict was found 120.43. It shows that Army Officers who are serving in a peace area had better resilience factors compare to their counterpart i.e, army officers serving in field area's. Almost all veterans experience difficulty controlling distressing memories of military experiences, particularly when there has been combat experience. The first symptoms were increasing irritability and sensitivity, sleep disturbances, and often recurrent nightmares, difficulty falling or staying asleep and difficulty in concentrating. Sometimes they feel anxiety and panic attacks. The emotional numbing and feeling of disconnection that are common after traumatic events may create distress and drive a wedge between the survivor and his family or close friends. Some military personnel's and veterans have difficulty in experiencing loving or feeling some emotions, especially when upset by tragic memories.

Table 1.2 : Average Score of Army Officers and Jawans of peace and field Area with High and low intensity conflict on the measure of Resilience scale.

	Peace Area		Average	Field Area		Average
	LIC	HIC		LIC	HIC	
Army Officers	138.06	134.08	136.43	119.09	124.26	122.08
Jawans	124.08	127.06	126.02	124.07	112.86	118.78
Average	131.43	131.02	131.31	122.03	118.56	120.43

Notation : LIC= Low intensity conflict, HIC= High intensity conflict.

The average score of Army Officers, peace Area, Low intensity Conflict was found 138.06, whereas the mean Score of Army Officers , Peace area& high intensity conflict was found 134.08. It shows that the army Officers serving in low intensity peace area were more resilient as compare to their counterpart i.e. army officers serving in peace area's with high intensity conflict. The average score of army officers, field area, low intensity conflict was found 119.09, whereas the average score of army officers, field area and high intensity conflict was found 124.26. It shows that the army officers, serving in high intensity conflict of field area are more resilient as compare to their counterpart. The mean score of Jawans, peace area and low intensity conflict was found 124.08, whereas the average Score of Jawans, peace area and high intensity conflict was found 127.06, which means Jawans serving in high intensity peace area are

more resilient as compare to their counterpart i.e. jawans serving in peace area with low intensity conflict. The mean Score of Jawans, field area and low intensity conflict was found 124.07, whereas the average score of jawans, field area and high intensity conflict was found 112.86, which means Jawans serving in low conflicted field area are more resilient as compare to their counterpart. Additionally, soldiers face isolation and emotional disturbance due to family separation and operational deployments and do not get time to discuss their problems with their peers in order to timely cope up with military/personal problems which leads to stress, development of depressive tendencies, suicidal and fratricidal killings. Therefore, army should provide training to all jawans, irrespective of their ranks to identify psychological illness factors, like behavioural changes, poor work performance, changes in dietary patterns, substance abuse, social isolation, etc.

The average score of average score of the Army Officers, Jawans, peace area and low intensity conflict was found 131.43, whereas the mean score of army officers, Jawans, peace area and high intensity conflict was found 131.02 . It shows that army officers, Jawans serving in a low conflicted peace area are slightly more resilient as compare to their counterpart . The mean score of average score of the Army Officers, Jawans, field area and low intensity conflict was found 122.86, whereas the average score of the mean of Army Officers, Jawans Field area and high intensity conflict was found 118.56, Which shows army officers, Jawans who are serving in field with low intensity conflict area are much more resilient as compare to their counterpart. i.e., army officers and Jawans serving in a field with high conflicted area.

5. CONCLUSION

The Military personnel serving in peace and field area are experiencing greater allostatic load, psychological vulnerabilities and socio-psychological traumas. Certain primary psychological stress dimensions those dealt with modern military operations are namely the isolation; ambiguity; powerlessness; boredom and danger in general and the fear of bullets, mines, bombs and other hazards such as risk of accidents, disease, and exposure to toxic substances in particular those might have surmounted enormous pressure on the resilience and wellbeing of the Military personnel especially the Officers and Jawans deployed in peace and field areas across the countries. Therefore, in the present study a pioneer attempt has been made to assess the psychological resilience of the Army Officers and Jawans of Field and Peace Areas working in different states of India. The study has been conducted on a sample of N = 120 Military Personnel divided in the two subgroups based on their



Rank (60 officers and 60 Jawans) and subsequently on their Serving Areas (30 Peace Areas + 30 Field areas). Finally these subjects were further subdivided into two comparable halves based on their intensity of conflicts that may included N = 15 in Low intensity and N = 15 in High intensity conflicts group. In this manner there were eight groups with N=15 subjects in each that comprised of aforesaid sample. These personnel were assessed qualitatively (observation, interview, Fuzzy cognitive mapping, and case study) as well as quantitatively (Resilience Scale). The result based on qualitative data revealed that the soldiers serving in peace area reported lesser conflicts and better resilience as compared to their field counterpart. The result based on quantitative data revealed that the Rank significantly (1,112), = 5.85, $p < .01$ exerted influence on the resilience wherein the Army officers were found more resilient (136.43) as compared to their Jawans (126.02) counterpart. Similarly, the main effects of serving area was also found $F(1,112) = 15.108$, $p < .01$ as statistically significant wherein the personnel serving in Peace area were found more resilient (131.31) as compared to their field areas counterpart. In the present scenario of stress-related deaths, efforts should be made on part of the Indian army to build resilient armed force. Resilient people understand and manage the negative situations effectively and deal with them with a positive and realistic attitude by focusing more on their strengths rather than their weaknesses. Thus, keeping in view the verity that only a healthy armed force can increase and maintain the capacity of the army to guard the nation's interest, the prime focus of the government as well as the defence authorities should be on improving the organizational culture within the army aiming at harmonious officer-jawan relationship by refining leadership behaviour in the army and simultaneously increasing their sensitivity toward the needs of the soldiers.

Suggestion

Since the soldiers all the time are ready to fight and become martyred for the sake of their motherland therefore this trait be reinforced properly by increasing their salary. Special quotas or reservation be provided to the soldier in general after completing their job and their children and family members in particular, and concern authorities should provide the Psychological and counselling practices to overcome stress and anxiety that may include consciousness and awareness of things; practice of being positive in your thoughts and actions; developing your tact, modifying behaviour, trait, habits and actions. Therefore, there is a need of psychologist, dietician and counselling psychologists to overcome their physical, social-cultural and psychological problems. Most importantly the Defense Ministry should release appropriate funds to update their weapons, tanks, missiles, grenade, fighter planes, steamers etc. The

country should become atomic power for which skill empowerment is required. Beside facilitating the soldiers with physical weapons there is a need to empower them psychologically that is only possible by enhancing their capability, capacities and abilities.

REFERENCES

- [1]. Callahan, D. J. (2010). Combat-related mental health disorders: The case for resiliency in The Long War. *Journal of the American Osteopathic Association*, 110, 520–527.
- [2]. Castro, C. A., & Adler, A. B. (2010). Reconceptualizing combat-related posttraumatic stress disorder as an occupational hazard. In A. B. Adler, P. D. Bliese, & C. A. Castro (Eds.), *Deployment psychology* (pp. 217–242). Washington, DC: American Psychological Association.
- [3]. Broesder, W., Vogelaar, A., Euwema, M., & op den Buijs, T., (2009). The peacekeeping warrior. *Manuscript submitted for publication*.
- [4]. Dickstein, B.D., Suvak, M., Litz, B.T., & Adler, A.B. (2010). Heterogeneity in the course of post-traumatic stress disorder: Trajectories of symptomatology. *Journal of Traumatic Stress*, 23, 331-339.
- [5]. Mouthaan, J., Euwema, M.C & Weerts, J. (2005). Band of Brothers in United Nations Peacekeeping: Social bonding among Dutch peacekeeping veterans. *Military Psychology*, 17, 101-114.
- [6]. Newby, J.H., McCarroll, J.E., Ursano, R.J., Fan, Z., Shigemura, J., & Tucker-Harris, Y. (2005). Positive and negative consequences of deployment. *Military Medicine*, 170, 815-819.
- [7]. Parmak, M., Euwema, M. C, & Mylle, J. J. C. (2011). Situational adaptation: Soldiers' behavioural tendencies modify during a combat deployment. *Manuscript submitted for publication*.
- [8]. Schok, M. L., Kleber, R. J., Elands, M., & Weerts, J. M. P. (2008). Meaning as a mission: A review of empirical studies on appraisals of war and peacekeeping experiences. *Clinical Psychology Review*, 28, 357-365.
- [9]. Reich, J.W., Zautra, J.W., & Hall, J.S. (2010). *Handbook of adult resilience*. New York, Guilford Press.
- [10]. Frederickson, B.L., Tugade, M., Waugh, C.E., & Larkin, G.R. (2003). What good are positive emotions in crises? A prospective study of resilience and emotions following the terrorist attacks in the United States on September 11th, 2001. *Personality Processes and Individual Differences*, 84, 365-376.
- [11]. Mavandadi, S., Rook, K. S., Newsom, J. T., & Oslin, D. W. (2013). Suicidal ideation and social exchanges among at-risk veterans referred for a behavioral health assessment.



- Social Psychiatry and Psychiatric Epidemiology*,
 48, 233–243.
- [12]. Zautra, A., Johnson, L., & Davis, M. (2005). Positive affect as a source of resilience for women in chronic pain. *Journal of Consulting and Clinical Psychology*, 73, 212-220.
- [13]. Skodol, A.E. (2010). A resilient personality. In Reich, J.W., Zautra, A.J., & Hall, J.S (Eds). *Handbook of Adult Resilience*, pp. 112-125.
- [14]. Cotman, C.W. & Berchtold, N.C. (2002). Exercise: A behavioral intervention to enhance brain health and plasticity. *Trends in Neuroscience*, 25, 295-301.
- [15]. Taylor, M.K., Markham, A.E., Reis, J.P., Padilla, G.A., Potterat, E.G., Drummond, S.P.A., Muijca-Parodi, L.R. (2008). Physical fitness influences stress reactions to extreme military training. *Military Medicine*, 173, 738-742.
- [16]. Rutter, M. (1999). Resilience concepts and findings: Implications for family therapy. *Journal of Family Therapy*, 21, 119–144.