



**Defense Centers for Excellence
for Psychological Health and Traumatic Brain Injury**

**Resilience and Prevention Study – Retrospective Outcomes
Evaluation of Soldier 360° Leader Comprehensive Fitness Course
November 2012**

Key Discussion Points

1. Statistically Significant Impact on Psychopathology.

“Results indicated that following completion of the 360° program, there was a significant reduction in psychological distress scores” (page 21)

“In summary, the hypothesis that 360° will lead to reduced symptoms of psychopathology is supported.” (page 23)

“The fact that this measure (Symptom Checklist-90-Revised Global Severity Index) showed a relatively large effect provides encouraging evidence that 360° could have a beneficial impact on students’ psychological health symptoms, regardless of the degree of psychological distress with which they enter the program.” (page 35)

“Participants with high psychological distress showed marked improvements in the hostility and interpersonal-sensitivity indices of the SCL-90-R, both of which are externalizing behaviors often connected with violence and suicide.” (page 35)

“It raises the possibility that 360° could hold promise for reducing adverse behavioral outcomes (violence, suicide) that have been associated with combat related stress.” (page 35)

2. Statistically Significant Impact on Sleep.

“These results support the hypothesis that 360° can lead to improved self-reported satisfaction with falling asleep, staying asleep, and waking up at the desired time.” (page 28)

“These results support the hypothesis that 360° training can improve the reported degree to which sleep problems affect daily function and cause distress.” (page 30)

“360° contributes to improvements in satisfaction and reduction in problems associated with sleep.” (page 36)

“All participants also reported that sleep problems were less likely to be distressing and interfere with daily functioning, and quality of life.” (page 36)



“Another noteworthy finding is that all participants demonstrated improvements in sleep habits by the end of training. Namely, fewer participants reported that they used nicotine or alcohol before bed, fewer used their bed for non-sleep/non-sex activity, more reported that they developed a ‘wind-down routine’, more slept the same length each night, and more woke up at the same time each morning.” (page 36)

“On the whole, these findings indicate that the 360° program may hold promise for improving sleep habits as well as quality of sleep regardless of whether participants experience high or low psychological distress.” (page 36)

3. Statistically Significant Impact on Well-Being (Health, Relationships, Quality of Life).

“Well-being, as assessed by attitudes toward and satisfaction with health, relationships, and quality of life was shown to improve by the end of training. Specifically, all participants showed significant improvements in their perceptions of importance for command support, family diet, family relationships, health, marriage, psychological health, occupation, quality of life, social support, and spirituality.” (page 36)

“Further, examination of satisfaction scores revealed that across all participants statistically significant improvements in satisfaction were observed for diet, fitness, health, marriage, psychological health, quality of life, and sexual relationships. Relatively higher effect sizes (i.e., greater change in satisfaction) were associated with psychological health, sexual relationships, and fitness.” (page 36)

“The improvements in satisfaction with marriage and financial matters are noteworthy since these domains have been shown to be closely associated with risk for suicide ideation.” (page 37)

4. Overall Impact.

“Overall 360° appears to lead to short-term improvements in symptoms of psychopathology, sleep, and well-being as measured by attitudes toward and satisfaction with health, relationships, and quality of life.” (page 34)

“All participants appeared to demonstrate improvements in most of the measures, with certain important exceptions, regardless of level of psychological distress. . . .even despite sub-threshold levels of distress, they (the low distress group) appeared to significantly improve in these areas (psychological distress) with the same magnitude as high psychological distress participants across most of the measures analyzed.” (page 34).