Reviewer's report

Title: Mental health and resiliency following 44 months of terrorism: A survey of an Israeli national representative sample

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Reviewer: Simon Wessely

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General
This is a fascinating population based study of how Israel has adapted to the Second Intifada, which, lest we forget, has proportionally cost Israel far more than were killed in 9/11 as the authors say, the equivalent in the USA would be 300,000 killed, a truly terrifying statistic.

The method is a telephone survey, basically a public opinion poll. Nothing wrong with that we have done the same. What is impressive is that they got an 84% contact rate and then a 71% participation rate (they should however quote the true response rate and not let their denominators float a bit here). Anyway, itâ€™s a lot better than we managed in London. I assume they are using a quota sample anyway to ensure a representative sample they give all the relevant statistics on the sample and then note that it is indeed representative compared to normal census data.

The whole study took place in a single day (May 5 2004) is that right? The polling organisation must be one very slick operation if that is the case.

The instrument used was sensible, and clearly built on their previous JAMA paper. A welcome addition is to include other social and societal problems, not just terrorism. Despite that one assumes that it was very clear that the study was about the Intifada we tried to get round that having a survey called â€œproblems facing Londonersâ€ but we doubt anyone was fooled.

The measure of outcome was the SASRQ yet another PTSD questionnaire, and although I have never used it, I guess it is as good or as bad as all the others. As ever, I am doubtful that you can get diagnoses of PTSD as opposed to traumatic stress reactions from a questionnaire, but again, never mind. In fact to be fair to the authors I see that they make the same point themselves.

Other issues covered included other mental problems, personal optimism, sense of safety and self efficacy, help seeking and so on and so forth, all of which seem very sensible.

We move now to analysis. Somewhat predictably they elect to use conditional logistic regression to deal with confounders. I have a general reservation with this approach, which is of course the usual way in which multiply confounded data is analysed. The problem of collinearity is not addressed. I would prefer first some straight tests of association, which they do, but then a careful look at what might be confounding what, based on much more simple procedures that throwing everything into the Logit. One ends up with a statistically parsimonious model, but there is a considerable risk that it is statistically accurate but relatively meaningless.

Results: the exposure to terrorism is seriously disturbing in this sample, and reminds us of the realities of life under the Intifada.

As you would predict, general symptomatology was common, but PTSD less so, much as in the previous study and in the Shalev study. This is an important finding, since there is a massive difference between symptoms and disorder, even if people frequently confuse the two. The latter involves actual loss of function it is not enough to have symptoms, one has PTSD only if it is interfering with oneâ€™s ability to earn a living, look after a family and so on and so forth. What I am not clear about is whether or not the criteria for PTSD used in this study does include functional impairment.

Despite the level of terror, the majority of respondents continued to feel optimistic about their own future, and the future of Israel. Likewise, although most felt that they were still exposed to danger, most all had a considerable degree of knowledge about what to do if exposed to terrorist incidents, in marked contrast to London! Clearly the long tradition of civil defence, often rehearsed, with the civilian population in Israel
makes a difference.

Next they show something very interesting, that objective threat/exposure did NOT correlate with PTSD or stress symptoms, which certainly goes against some other literature. Instead these outcomes were related to fairly predictable factors, such as gender, minority status (being Arab, much as we found being Muslim in London), levels of education and so on.

Overall they are able to make very interesting comparisons with their previous studies. Distress has lowered either because the tactics employed against suicide bombers are starting to work, or because people are habituating to danger. Both possibilities are considered by the authors, and of course they are unable to distinguish between them. On the other hand, the perceived need for mental health treatment seems to have increased quite why it is hard to say.

The authors then talk about the resilience of the population, based on their own data, and advance a Durkheimian perspective as to how external threat can increase resiliency and sense of purpose. Old man Durkheim doesn’t get a reference though, perhaps he deserves one. Instead Hobfall 1998 is cited in the text. I assume this is reference 31. Anyway we said something similar in an analysis of new data from the London Blitz.

Overall this is a fascinating and important study, both in its own right, and for what it says about resilience/trauma in other countries/cultures. It is an original and important contribution to the literature, and none of my comments indicate any serious or substantial reservations.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

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Discretionary Revisions (which the author can choose to ignore)

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What next?: Accept after minor essential revisions

Declaration of competing interests:
I declare that I have no competing interests