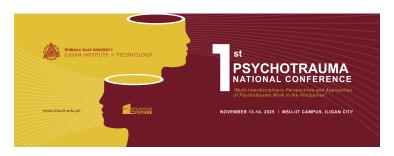
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The Role of Posttraumatic Cognitions in CPTSD Latent Dimensions in Combat-Exposed Soldiers

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Complex posttraumatic stress disorder (CPTSD) is marked by core PTSD symptoms and disturbances in self-organization (DSO). While the ICD-11 defines CPTSD through two higher-order factors, emerging evidence supports alternative models to the traditional structure. The present study aimed to: (1) identify the best-fitting model of CPTSD symptoms in Filipino combat-exposed soldiers, and (2) examine how posttraumatic cognitions contribute to the expression of these symptoms. Competing models were evaluated using confirmatory factor analysis (CFA). Posttraumatic cognitions were tested as predictors of each CPTSD symptom cluster in the best-fitting model. The correlated six-factor model demonstrated superior fit compared to alternative models. Posttraumatic cognitions significantly predicted symptoms across both PTSD (intrusions, avoidance, threat) and DSO (affective dysregulation, negative self-concept, relational disturbance). While negative cognitions predicted DSO symptoms, significant associations with PTSD symptoms were also observed. These findings support the conceptual and empirical utility of the six-factor model and suggest that posttraumatic cognitions exert a differential but residual influence across CPTSD symptom clusters. Results align with the Memory & Identity (M&I) theory, which posits that trauma-related cognitions affect both trauma memory processing and self-identity, contributing uniquely to symptom expression.

Keywords: CPTSD, six-factor model, posttraumatic cognitions, Memory & Identity theory, Filipino soldiers, trauma, DSO

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