Effects of Post-Traumatic Stress Disorder on Veterans

There have been numerous challenges faced by United States military forces over the years, including many who have died in while serving in the armed forces, as commemorated each Memorial Day. Recently, there was an airplane crash in Smyrna resulting in the loss of another service member. After military service, returning to civilian society can be a drastic transition for former soldiers. Military veterans are exposed to a variety of dangerous, life altering experiences, including explosions, shootings, deaths of fellow service members, and many other events that cause tremendous shock to an individual that could then lead to post-traumatic stress disorder (PTSD).

Post-traumatic stress disorder is an anxiety problem that develops in some people after extremely traumatic events. Sometimes those with the disorder will relive the event through flashbacks and/or nightmares. It can create strong feelings of anxiety to the degree that people under its influence avoid anything that could remind them of the life-changing event.

*American Psychological Association*

**Primary Causes**
According to the U.S. Department of Veterans Affairs-National Center for PTSD, this disorder can occur after one or more of the following traumatic events:

- combat exposure
- child abuse
- terrorist attacks
- sexual or physical assault
- serious accidents like a car wreck
- natural disasters including fires, tornadoes, hurricanes, floods, or earthquakes
Anyone can develop PTSD, although the public generally associates this disorder with veterans because of the combat environments they experience. The effects of PTSD are just as significant as the initial cause, leading to depression or anxiety, drinking or drug abuse, physical symptoms, employment issues, or relationship problems.

**Impact on Relationships**

PTSD places a strain on relationship ties as noted by the U.S. Department of Veterans Affairs (VA). It explained that those affected by a traumatic event tend to detach themselves from loved ones, losing trust and closeness with those with whom they once shared those qualities.

Individuals with this disorder react differently – some are very neurotic and others are pensive. Depending on the event’s impression on that person, that will determine how they react. If a situation caused someone a great deal of fear, he or she may become extremely anxious about day-to-day activities. If the person experienced shame or embarrassment because of a certain event, depression could result in the person avoiding things he or she previously enjoyed.

Regardless of the PTSD related behavioral changes, family members and friends should be patient and build that person’s confidence by communicating effectively and building positive social skills and emotional stability.

**Impact on Children**

Children’s relationships with veteran parents that have PTSD suffer more directly than the veteran’s friends or other relatives, according to the VA National Center for PTSD. There is a widely accepted notion that children emulate what they observe from their parents and that is certainly true of children that directly deal with PTSD symptoms. Based on observation made by the VA, children in these environments have been shown to be more depressed and aggressive in school than children in a PTSD-free environment.

The VA reports that these children are often copying the actions of their parents in order to create a bond that may have been interrupted by the parent’s disorder. Sometimes these behaviors and emotions follow the child into teen years and adulthood, creating characteristics of a negative attitude toward their parents for feeling of shame and toward school or work. In order to assist a child that may have difficulties coping with a parent’s mental illness, the child needs to understand the extent of the situation at hand and have an effective means of emotion management and communication.
**Substance Abuse**

Studies conducted by the VA show at least 20% of veterans with PTSD also suffer with Substance Use Disorder. This is an issue because veterans abuse drugs and alcohol in order to cope with the stresses of previous traumatic events. Many use it as a means to forget or neglect the feelings of fear, restlessness or loneliness created by problems with interaction. Substance abuse is an ineffective way of dealing with these issues and that must be understood by those who may observe it so that the proper treatment can be provided to that veteran. The U.S. Department of Veteran Affairs provides health services at several different locations throughout the country. [http://www.ptsd.va.gov/public/problems/ptsd_substance_abuse_veterans.asp](http://www.ptsd.va.gov/public/problems/ptsd_substance_abuse_veterans.asp).

**Employment**

If veterans cannot adequately cope with the stresses of PTSD, it will create problems that disrupt daily actions, including the ability to work. Symptoms of depression are sluggishness, irritability, and lack of motivation, with these symptoms being brought on by the trauma itself and/or the effects of the trauma. Consistently having these symptoms will negatively affect work performance and productivity, as well as physical health. Veterans with PTSD and experience substance abuse often find it difficult to maintain employment, because either the urge to use substances disrupts their ability to concentrate and perform certain tasks or they fail drug tests given by their place of employment.

The *Journal of Rehabilitation Research & Development*’s “Posttraumatic stress disorder and employment in veterans participating in Veterans Health Administration Compensated Work Therapy” concluded that veterans with a diagnosis of PTSD were less likely to be employed. Furthermore, those who did acquire a job received lower hourly wages. This is a detriment to these individual’s income but the federal and local governments contribute tremendously with assisting veterans with benefits.

One example is the partnership between the U.S. Department of Veteran Affairs with the U.S. Department of Housing and Urban Development (HUD), described in a report from the Congressional Research Service, *Veterans and Homelessness*. The program provides rental assistance and supportive services to veterans in need of housing, which has created a momentous decline in veteran homelessness compared to the soldiers of the Vietnam War and prior. This is a result of a more sophisticated evaluation process of veterans, which was developed after that time and has resulted more effective policies and programs to provide assistance. Furthermore, it has helped more effectively identify individuals with PTSD, which has increased the statistical percentage of veterans with the disorder today compared to those in pre-Vietnam.
Effective Treatment/Evidence-Based Practices
Mental health professionals have worked to find the most effective means of treating and rehabilitating individuals with post-traumatic stress disorder through evidence-based practices. Several such treatments were discussed in *PTSD treatments grown in evidence, effectiveness* from the American Psychological Association:

- Prolonged Exposure Therapy is a treatment in which a therapist guides a patient in thoroughly recounting the traumatic event(s) in a gradual, repeated manner in order for the patient eventually gain complete control over their feelings and thoughts of the event.

- Eye-movement desensitization and reprocessing (EMDR) is a process that allows patients to recount their traumatic event while also completing guided eye movements and hand taps conducted by a therapist. This form of treatment is considered controversial by some because no particular reason that is effective has been isolated.

- Cognitive Processing Therapy centers in on individuals with post-traumatic stress disorder who have shown thinking processes based on false pretenses (i.e. their self-value is now dictated by the traumatic event they were involved in). It exposes patients to aspects that are related to the event but typically focuses more directly on cognitive functions to assist in altering unsound thinking.

Additional Resource Information
For data on the previous treatments and others, see the following report of research conducted by the National Center for PTSD within the U.S. Department of Veterans Affairs. [http://www.ptsd.va.gov/Public/understanding_TX/CourseList/Course_NCPTSD_Treatment_1435/assets/00015006.PDF](http://www.ptsd.va.gov/Public/understanding_TX/CourseList/Course_NCPTSD_Treatment_1435/assets/00015006.PDF)

Where to find help?
If you are a veteran or know a former service member that expresses these symptoms or are in need of assistance with a preexisting diagnosis of PTSD, contact the U.S. Department of Veterans Affairs at these toll-free numbers:

- Benefits: 1-800-827-1000
- Health Care: 1-877-222-VETS (8387)
- Website at [www.va.gov](http://www.va.gov)
**Local Resources**

**Persons in crisis**
- Mobile Crisis line: (615) 726-0125
- Crisis Center: (615) 244-7444
- If a crisis is life threatening, dial 911

**Assistance**
- **Courage Beyond: A Program of Centerstone**
  - 1101 6th Ave. N, Nashville, TN 37208
  - [https://couragebeyond.org/](https://couragebeyond.org/)
- **Operation Stand Down Tennessee**
  - 1125 12th Avenue South, Nashville, TN 37203-4709; 615-248-1981
  - [http://osdtn.org/](http://osdtn.org/)
- **Overwatch Alliance**
  - 1000 North Chase Drive, Nashville, TN 37216; 615-851-0800
  - [http://overwatchalliance.org/](http://overwatchalliance.org/)

**Healthcare**
- **Tennessee Valley Healthcare System**
  - 1310 24th Avenue South, Nashville, TN 37212; 615-327-4751 | 800-228-4973
  - [www.tennesseevalley.va.gov](http://www.tennesseevalley.va.gov)
- **Charlotte Avenue VA Outpatient Clinic Women Veterans Healthcare Center**
  - 1919 Charlotte Avenue, Nashville, TN 37203; 615-873-6503
- **Women Veterans Healthcare Center**
  - 1919 Charlotte Avenue, Suite 300, Nashville, TN 37203; 615-327-4751
- **Albion Street VA Clinic (Meharry/Nashville General)**
  - 1818 Albion Street, Nashville, TN 37208; 615-873-6700
- **Nashville Vet Center**
  - 1420 Donelson Pike Suite A-5, Nashville, TN 37217; 615-366-1220 | 877-927-8387

**Quote:**

"WE NEED TO CHANGE THE CULTURE OF THIS TOPIC AND MAKE IT OK TO SPEAK ABOUT MENTAL HEALTH AND SUICIDE."