

# Post-Deployment Stress: What Families Should Know, What Families Can Do



Almost everyone who has spent time in Iraq or Afghanistan has experienced something very stressful. Studies of Veterans that were deployed to these areas find that traumatic experiences—such as being attacked or ambushed, having to handle or uncover human remains, and knowing someone who was seriously injured or killed—are common. If your family member had similar experiences in Iraq or Afghanistan, he or she is not alone.

Everyone reacts differently to this kind of stress. But many Veterans have thoughts, feelings, and behaviors like these:

### **Thoughts,** they might:

- Be forgetful and have trouble concentrating
- Relive bad memories of traumatic events
- Have thoughts of death or suicide



#### Feelings, they might feel:

- Sad
- Hopeless
- Worthless
- Paranoid
- Anxious
- Guilty
- Angry

#### Behaviors, they might:

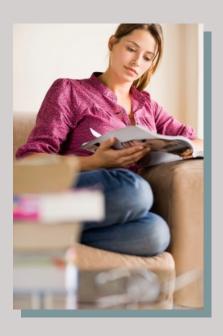
- Avoid situations that trigger flashbacks of their traumatic experiences
- Not want to socialize
- Have low energy
- Use drugs or drink too much



Someone you care about—
perhaps a spouse, child, sibling, or
other family member—who spent
time in Iraq or Afghanistan may
have these same kinds of thoughts
and feelings. It's important for you
to know that these are normal
reactions to abnormal events and
that many Veterans have felt the
same way.

However, these thoughts, feelings, and behaviors could also indicate more serious problems, including posttraumatic stress disorder (PTSD), traumatic brain injury (TBI), depression, or a combination of these.

Dealing with these conditions is very stressful for a Veteran, but it is also stressful for their family. Fortunately, there are lots of ways to get support. This booklet contains information you and your Veteran family member can use now or later to help cope with post-deployment stress.





#### What is Post Traumatic Stress Disorder?

Sharon's daughter Kelly just returned home after a year in Afghanistan with the Army National Guard. Sharon thought Kelly would move into her own apartment after going back to work, but is concerned that Kelly seems to barely be able to take care of herself. Kelly refuses to talk about anything that happened in Afghanistan and is angry all the time. Sharon hears Kelly walking around in the house at night and twice heard Kelly shout out in her sleep.

Sharon's daughter Kelly is having symptoms like those caused by posttraumatic stress disorder (PTSD), a condition people may have after experiencing a disturbing event. Combat experiences—such as being shot at, handling dead bodies, or knowing someone who was killed— can trigger PTSD.

#### Symptoms can include:

Reliving the event. Experiencing the event again—often with the same fear and shock. These kinds of flashbacks can be triggered by loud noises, seeing a traffic accident, or even watching a news report.

**Avoiding reminders**. Staying away from places or experiences that bring back memories of the terrible experience.

**Feeling numb**. Lacking feelings and losing interest in relationships and activities.

**Feeling on edge**. Getting angry or annoyed very easily and having a hard time sleeping, or overreacting when startled.

If a Veteran family member has these symptoms and they are affecting his or her activities at home or duties at the job, it may be helpful for you to talk to someone at your local doctor's office or clinic. You can also call *Coaching Into Care* for confidential information about getting help.

Call toll free: 888-823-7458



## What is Traumatic Brain Injury (TBI)?

Bobby's older brother Jason was a private first class in the Marine Corps. He recently returned from an eight-month deployment in Iraq, where he was exposed to an improvised explosive device (IED) blast. Bobby is worried about his brother—Jason complains about headaches every day, has trouble keeping his balance, and struggles with simple tasks like having a conversation or helping his young kids with their homework. Bobby can tell that Jason feels

frustrated, and isn't sure whether to tell their parents or Jason's wife that he's concerned about how much Jason has been drinking.

Jason's feelings and behavior could mean that he has traumatic brain injury (TBI). TBI can be caused when something hits a person's head very hard or when something goes through the skull and enters the brain. Even the blast waves alone from an IED can cause TBI.

TBI can continue to cause problems long after the injury actually happens.

Symptoms can include:

- Constant headaches
- Confusion
- Light headedness
- Changes in mood or behavior
- Trouble remembering or concentrating
- Repeated nausea or vomiting
- Problems with seeing or hearing



If a Veteran family member has such symptoms, he or she could be suffering from the long-term consequences of TBI. If the symptoms persist, it may help for you to talk to someone at your local doctor's office or clinic. You can also call *The Defense and Veteran Brain Injury Center* for confidential information about getting help: **1-800-870-9244** 



## What is Depression?

Antonio is a sergeant in the Army and has just returned home from a 15-month deployment in Iraq. He is excited to be home especially since he has a one-year-old daughter who was born while he was in Iraq. But he often feels depressed and sad, and he doesn't have much interest in playing with his new daughter or three-year-old son. His wife is worried because he doesn't want to be with other people.

Antonio has many of the common symptoms of depression. Depression can interfere with your ability to work, sleep, eat, interact with others, and enjoy doing things that you used to like. Depression can also have long-term chronic effects that make it hard for a Veteran to function and keep him from feeling good.

Here are some of the most common signs of depression:

- Feeling hopeless, sad, or "empty" most of the time
- Losing interest or pleasure in activities that you used to enjoy
- Lacking energy or feeling very tired
- Thinking about death or suicide
- Having ongoing physical problems—such as headaches, stomach problems and pain—that don't get better even when they have been treated



If a Veteran family member is experiencing these kinds of symptoms and they are affecting his or her activities at home or duties at work, it may help for you to talk to someone at your local doctor's office or VA clinic.

You can also visit the website for the *Depression and Bipolar Support* 

Alliance at: www.dbsalliance.org

#### **Combined Problems**

Being part of or seeing upsetting events can cause PTSD, TBI, or depression, so it is possible to have more than one of these problems at the same time. Be sure that your Veteran family member describes all of his or her symptoms to someone at a local doctor's office or clinic. Treatment for combined problems may be different from treatment for just one of them.

#### **SUBSTANCE USE AND ABUSE**

PTSD, TBI, or depression can affect many parts of a person's life. Like Jason, your family member may be drinking or using drugs to try to deal with his or her problems. This might help for a little while, but alcohol or drugs can actually make the problems worse.

It's often hard to know when alcohol or drug use is becoming a problem. Here are some signs to look for:

- Feelings of guilt about alcohol or drug
- Family and friends commenting on how much he or she is drinking
- Drinking or drug use that makes it hard for him or her to live up to responsibilities at home or at work
- More alcohol or drugs are needed to get the same effect
- He or she has tried to cut down on use but can't.

If you think your family member has an alcohol or drug problem, encourage him or her to see a health care provider for help.

#### **HELPING MANAGE THE TRANSITION**

The transition from deployment to home can be hard for everyone, especially if your Veteran family member is having problems like the ones described above.

You and your Veteran family member have many ways to get help—some of them listed in this booklet. But there are also some simple things that you can do immediately.

#### **USE THE RESOURCES AVAILABLE TO YOU**

- The VA is committed to supporting the health, well-being, and job performance of Veteran personnel and to helping Veterans' family members deal with post-deployment stress.
- Use the many organizations whose goal is to help your family make a smooth transition from your family member's deployment to home. They can suggest ways to cope with symptoms of PTSD, TBI, and depression and to get you all back on track faster.



#### TAKE CARE OF YOURSELF

- Exercise and eat well (stay away from junk food).
- Get enough sleep by keeping a regular sleep schedule and avoiding vigorous exercise before bed.
- Stay away from alcohol, tobacco, and caffeine.
- Think about the things you like to do, and make time to do them.
- Set realistic goals and don't take on more than you can handle. If you find it hard to tackle large problems, break them into smaller ones. Then start with the small tasks that are most important.
- Try to find a time soon after your family member returns home when the two of you can spend time alone together.

#### PAY ATTENTION TO YOUR FEELINGS

You may expect to feel nothing but happiness when your family member comes home, but post-deployment stress can bring up other feelings, too, like anger and frustration. It is natural to have a mix of feelings while you and your family adjust to post-deployment life.

Manage your anger by walking away from situations that make you angry or talking things over with people who have made you angry. Exercise can also help.

Post-deployment stress affects Veterans and their families—if you are feeling depressed and are thinking about hurting yourself, ask for help from a family member or health care provider or call the Veterans Crisis Line

(1-800-273-8255, Press 1 for Veterans).

If you need immediate help, call 911.



#### **TALK WITH OTHERS**

Communication is key to dealing with post-deployment stress and can help make the adjustment easier for everyone.

**Your Family Member.** Talking with your returning family member is an important way to become comfortable with each other again after a separation, and talking can provide very important support for you both. Your family member may not want to talk about deployment, and you may not want to talk about your own post-deployment stress. But often the best thing for families is to talk openly about thoughts, feelings, and behaviors. This will let you work together to move forward. It is normal for families to need time to adjust when a military member returns home. Keeping the lines of communication open can help. It may be helpful to set aside a time every day to check in; for example, in the morning before your day begins or before going to sleep at night.

**Children.** Children are usually comfortable with routines, so they may have a hard time with the changes that occur when your family member comes home. Depending on their age, they may have questions and concerns. It is often more scary for children when they feel kept in the dark, so if your child asks questions, try your best to explain what is going on in a way that they will understand. Children need to know that it's okay to ask questions—a lot will be changing when your family member comes home, but expecting children to follow the same family rules is important, too. As with your returning family member, think about scheduling a regular time with your children to check in. Reassure them that someone will always be available to take care of them.



**Health Care Providers.** If you are feeling overwhelmed after your family member comes home, you can talk in private with a health care provider, such as a doctor, nurse, psychologist, or other mental health professional. They will be familiar with the ups and downs that families can experience when a military member returns home. Make an appointment specifically to discuss how you are feeling. Don't feel like you've got only one chance to ask a health care provider for help. After your first appointment, set up another appointment so that you and the provider can follow up on your progress. If you decide to meet with a mental health professional, you may meet on a regular basis (likely once a week) until things settle down and you feel less overwhelmed.

Other Family Members of Veterans. It can be helpful to connect with other people who have recently welcomed a Veteran family member home. Your local VA may have a network you can use to contact other military family members.

Coaching Into Care. Coaching Into Care is a national clinical service offered by the Department of Veterans Affairs that provides information and help to Veterans and their loved ones. They work with family members and friends who become aware of a Veteran's post-deployment difficulties. Licensed psychologists and social workers are on staff to talk you and your Veteran through this difficult time and ultimately connect you with the help that you need. Lines are open 8am—8pm Eastern Time, at 1-888-823-7458.



#### **Treatment**

If you are a family member of a Veteran dealing with PTSD, TBI, or depression, remember that treatment is available and that most people who are in treatment get better. Treatment can improve life in many ways. It can lead to better physical health and job performance. It can also improve your family relationships.

There are many ways to treat PTSD, TBI, and depression, and there are many ways to treat post-deployment stress so people can feel more like themselves. The kind of treatment and how long it will be needed will differ for every individual, but the sooner one takes action to deal with post-deployment stress, the sooner they will be able to feel better again.

Learning About Symptoms. Symptoms related to PTSD, TBI, and depression are common and can cause stress for Veterans and their families, but not everyone experiences post-deployment stress in the same way. Use this booklet and the resources listed here to learn how to recognize symptoms and stress that can be treated by a health care provider.

Learning About Treatment. If you or your Veteran family member has identified thoughts, feelings, and behaviors that are part of post-deployment stress, you might want to learn more about how to get help.

Your health care provider will tailor treatment to meet your Veteran's needs. For example, treatment might involve discussions with a health care provider in person, medications, or both. This booklet and the resources listed in it give you more information about available treatments.

Getting Treatment. If you or your Veteran family member has concerns about getting care for a personal or emotional problem, call responders at *Coaching Into Care* (1-888-823-7458) can help. *Coaching Into Care* will help you learn about how to help a loved one enroll in care at a VA medical center so they can receive the treatment they need.

Getting Support. If you are a family member caring for a wounded or disabled Veteran who is already in VA care, call the VA Caregiver Support Line (1-855-260-3274). Trained staff members can inform you about Benefits and supports for family Members.

# Resources

#### **Veterans Crisis Line**

- (800) 273-8255 + press 1 for Veterans
- www.veteranscrisisline.net

#### **Coaching Into Care**

- (888) 823-7458
- Email: CoachingIntoCare@va.gov
- www.va.gov/coachingintocare

#### **VA Caregiver Support Line**

- (855) 260-3274
- www.caregiver.va.gov

#### **Make the Connection**

http://maketheconnection.net/

# Returning Service Members (OEF/OIF/OND)

www. oefoif.va.gov

#### **VA Benefits**

- (800) 827-1000
- www.vba.va.gov/VBA

#### The National Center for PTSD

- (802) 296-6300
- www. ptsd.va.gov



#### **National Alliance on Mental Health**

- ◆ (800) 950-NAMI
- www.nami.org

#### Iraq and Afghanistan Veterans of America

www.iava.org

#### The Defense and Veteran Brain Injury Center

- (800) 870-9244
- www.dvbic.org

#### **Depression and Bipolar Support Alliance**

www.dbsalliance.org

# **Substance Abuse and Mental Health Services Administration**

- (800) 662-HELP
- getfit.samhsa.gov/Drugs/
- getfit.samhsa.gov/Alcohol/