



# Working with Veterans

Created by Marc Castellani, Ph.D.

*Presented by Carolyn Cardwell*

*W.G. Hefner VAMC*

*Salisbury, NC*

*(704) 638-9000*

# Topics to Consider



- What are common diagnoses following combat?
  - PTSD
  - Traumatic Brain Injury (TBI)
- Are Veterans more violent than civilians?

# Additional concerns to keep in mind



- Family concerns
  - Spouse used to them not being around
  - Children have grown
- Social concerns
  - Feel estranged or “different” from civilians
  - Miss camaraderie of unit
- Other environmental concerns
  - Physical and mental health issues
  - Unemployment
  - Financial concerns

# Common Reactions to Spending Time in a War Zone

## Reactions that Affect Daily Activities or Physical Body

- Trouble sleeping, overly tired
- Stomach upset, trouble eating
- Headaches and sweating when thinking of the war
- Bad dreams, nightmares
- Lack of exercise, poor diet or health care
- Rapid heartbeat or breathing
- Existing health problems worsen

## Reactions that Affect Behavior

- Trouble concentrating
- Jumpy, easily startled
- Being on guard, always alert
- Excessive drinking, smoking or drug use
- Flashbacks or frequent unwanted memories
- Avoiding people or places related to the war
- Problems doing regular tasks at work or school

# Common Reactions to Spending Time in a War Zone

## Emotional Reactions

- Irritable or angry
- Experiencing shock, being numb, or unable to feel happy
- Feeling nervous, helpless or fearful
- Feeling sad, guilty, rejected or abandoned
- Edginess, easily upset or annoyed
- Feeling hopeless about the future

## Reactions that Affect Your Relationships

- Feeling withdrawn, detached and disconnected
- Emotional shutdown resulting in loss of intimacy
- Mistrust of others
- Being overly controlling or over-protective
- Having lots of conflict

# Anger

- Trained to be aggressive to survive in combat
- Anger is easy to access, and can mask more difficult emotions (sadness, depression, guilt)
- Often directed towards people who “don’t do what they’re supposed to do” (road rage)
- Anger at what they went through (feeling betrayed, victimized)
- Anger at feelings of fear or loss of control
- Anger from physical tension, insomnia/exhaustion

# Adrenaline Train

- Develops from high levels of intensity while in combat
- Expressed through hyperactive behaviors
- Combat Veterans may seek out high-paced, high-risk behaviors that require alertness to match their internal state
- Can also mask more painful feelings

# Guilt

- Can result from both actions the Veteran took and ones s/he didn't
  - Most Veterans feel guilty about experiencing fear
  - Often feel responsible for bad outcomes
- Guilt comes from acting against your moral values and doing things contrary to your beliefs
  - Veterans are required to follow orders
- Survivor Guilt
- Moral Dilemmas: Some Veterans question their religious beliefs or practices

# Grief

- Bereavement
  - Universal sense of loss following the death of someone close to you
  - Symptoms tend to less after 6 months, though pain of loss can last for years
- Traumatic Grief
  - Occurs when you lose someone under violent or sudden circumstances
  - More common if it's witnessed, if you feel responsible *or* powerless, if there are multiple losses close together, if you're angry at someone else you hold responsible, or if you can't mourn at the time
  - Lasts much longer than bereavement, and can persist indefinitely

# Mental Health Outcomes from Iraq and Afghanistan Wars

*Information from 2007*

- Veterans treated at VA medical centers since their return home from a war zone: 263,909 (35% of eligible Veterans)
- Diagnosed by VA with a mental health conditions: 100,580 (38% of patients)
  - Diagnosed by VA with PTSD: 52,375 (21% of patients)
  - Diagnosed by VA with substance abuse or dependency: 43,933 (17% of patients)
- The youngest group of OEF/OIF Veterans (age, 18-24 years) were at greatest risk for receiving mental health or PTSD diagnoses

# Combat Exposure in the NCS

- **Lifetime prevalence of PTSD = 39% among combat veterans**
- **Male combat vs. all other male trauma**
  - **Higher lifetime PTSD prevalence**
  - **Greater likelihood of delayed onset**
  - **Greater likelihood of unresolved symptoms**



# PTSD Prevalence in Vietnam and Gulf War Veterans



- **Vietnam**
- **National Vietnam Veterans Readjustment Study; nationally-representative sample of >3000 theater and era veterans and civilians**
  - Lifetime PTSD: 31% men, 26% women
  - Current PTSD (1986-87): 15% men, 8% women
- **Gulf War**
- **Population sample of >11,000 Gulf War veterans**
  - Current PTSD = 10%
- **Iraq and Afghanistan Wars**
- **Hoge 2004: Iraq and Afghanistan combat units screening positive for PTSD, depression, or generalized anxiety**
  - Iraq 15-17%
  - Afghanistan 11.2%

# PTSD and Functioning in Veterans



- In NCS, combat-related PTSD vs. PTSD due to other causes:
  - ↑ unemployment
  - ↑ being fired
  - ↑ divorce or separation
  - ↑ spousal abuse
- In NVVRS, PTSD vs. no PTSD:
  - ↑ unemployment
  - ↓ health & well-being
  - ↑ limitations due to physical functioning
  - ↑ violence perpetration

# PTSD in Crisis

- Speak softly
- Use de-escalation strategies
- Orient to present
- Ask if Veteran
- Exhibit respect
- Validate
- Allow time
- Offer help



# Traumatic Brain Injury

## 20,000 cases and climbing

- TBI:
  - Impairs frustration tolerance
  - Decreases problem solving ability
  - Decreases mental processing speed
  - Affects impulse control
  - Can lead to agitation & aggression, both in early stages of recovery and chronically.
  - Severity of TBI is critical

How does Veteran status interact  
with violent behavior?

## DOJ Bureau of Statistics (data collected through 2004)

“Compared to other men in the U.S. resident population, male Veterans have had lower incarceration rates. Among adult males, the incarceration rate of Veterans (630 prisoners per 100,000) was *less than half* that of non-Veterans (1,390 prisoners per 100,000”. (*Emphasis added*)

# Veterans in Jails and Prisons

- Veterans constitute 10.4% of US Adults
- Veterans are 11.7% of Jail inmates
- Veterans are 9.4% of State and Federal Prison inmates

**Bureau of Justice Statistics, 2004; US Census Bureau, 2006**

# Veterans in State and Federal Prison

The majority of Veterans in State (54%) and Federal (64%) prison served during a wartime period, but a much lower percentage reported seeing combat duty (20% of State prisoners, 26% of Federal prisoners)

## **DOJ Press Release, April 2007**

- Vietnam-era Veterans (36 percent) were the largest group of wartime service Veterans in state prisons, followed by Veterans of the 1990-91 Persian Gulf War (14 percent).
- Only 4 percent of the Veterans in state prison had served prison time since operations began in Afghanistan and Iraq (using 2004 data).

# Take home messages

- Veterans in general are less likely than the general population to behave violently.
- Persons with a MH diagnosis *are* more at risk for violent behavior, but only slightly.
- Substance abuse or dependence alone increases probability of violence.
- Substance Abuse plus mental illness dramatically increases risk compared to general population (as much as 20 times).

The background of the slide is a stylized American flag. The top-left corner features the blue field with white stars, while the rest of the image is composed of horizontal stripes in a light pink color. The flag appears to be waving or draped across the frame.

# If You Remember Five Things

*PROVE you care*

1. Patience
2. Respect
3. Orientation
4. Validation
5. Empathy