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**POST-TRAUMATIC STRESS DISORDER (PTSD)  
IN THE MILITARY AND VETERANS**



**W**hen people think of mental illness in the military it is unsurprising that many of them think of Post-Traumatic Stress Disorder (PTSD), formerly known as shell shock. Whilst this may not be the most commonly occurring condition in those who have served, it's the one the general public tend to associate with the armed forces. For this reason, we have decided to publish this stand-alone brochure focusing on PTSD in the military, which can be read independently, or in conjunction with our brochure on mental health in the armed forces. Inevitably, there will be some overlap between these two publications.

This brochure will briefly outline the basics surrounding PTSD and the military, as well as providing some statistics on how prevalent PTSD is. It is important to keep in mind that PTSD does also affect people who are not in the armed forces, and that many people who serve will never experience symptoms of PTSD. However, as there is an increased risk for those in the armed forces, it is important to have informative resources available.

## What is PTSD and what are the symptoms of PTSD?

Post-Traumatic Stress Disorder (PTSD) is an anxiety related disorder resulting from experiencing a traumatic or life threatening event. Whilst it is normal to have upsetting thoughts after such an event, when these persist for an extended period of time and start to impact daily living, then this may be PTSD. Unfortunately, PTSD does not always have an immediate onset and so it can be difficult to predict whether an event is likely to cause PTSD in a person, especially as, in some people, the onset of symptoms can be delayed by months or even years. These symptoms may come and go over time, but it is advised that you seek psychological treatment if you suspect you are suffering from PTSD.

As with many psychological disorders, each individual will likely experience PTSD in their own way. However, there are four broad areas of symptoms that a person will likely experience if they are suffering from PTSD. We have listed these symptoms on the next page. If you read this and feel that these symptoms match your behaviour then we advise that you seek an appointment with a healthcare professional.



- **Re-experiencing the event:** Arguably this is one of the symptoms that most people think of when discussing PTSD. This group of symptoms may include nightmares or bad memories, it may also include reliving the traumatic event, (more commonly referred to as a flashback).
- **Situation avoidance:** When a person suffers from PTSD they will likely have a number of triggers that cause intense negative emotions or flashbacks. These may include the location where the event took place, people that are associated with the incident, or items that have subsequently become associated. A person will then try to avoid these triggers to avoid the PTSD related emotions. This may lead a person to cut contact with a friend or family member, or in extreme cases this can lead a person becoming housebound.
- **Decreased self-esteem and negative outlook:** The traumatic event a person experiences can cause a great emotional change and can change the way they see the world. Regardless of fault in the incident, many people often feel shame and guilt, and may struggle to feel any positive emotions. They may become uninterested in activities that they used to enjoy and they may see the world as a more dangerous place.
- **Hyperarousal:** This may sound as if it is in contrast with the previous symptom, but PTSD can also lead a person to be constantly alert and on the lookout for danger. This may lead to problems with concentration and sleep, and can make a person more irritable.

Experiencing these symptoms can also cause other, more indirect symptoms. They can cause the breakdown of relationships and careers, which may then in turn lead to more depressive symptoms and anxiety related troubles. Unfortunately, many people turn to illicit substances to deal with their symptoms (and the related disorders) which can exponentially worsen their lives and can lead to substance abuse issues. Suicidal thoughts and feelings are also a common related symptom, especially in military veterans with PTSD. Anybody who is struggling with these feeling should seek medical help immediately.





## Why are those in the military at risk?

Whilst PTSD can affect anyone in the general population, it is much more common in those who have served in the military. Whilst personal factors such as age, gender and family history of PTSD affect everyone equally, the risk for those who have served often comes from their experiences in the battlefield. Whilst most people in civilian life may never be in a life threatening situation, or see somebody die traumatically, these risks or experiences are not uncommon for active service people and as such this increases their chances of developing PTSD. The taking of a life or causing severe injury to an enemy combatant, whilst justified under the rules of engagement in wartime, can also lead to highly emotive responses, such as guilt, which may manifest into PTSD. Being on the receiving end of such an injury can also lead to PTSD, with the victim

reliving the feelings of helplessness and fear that may have occurred prior to, and immediately after, the injury. Many service people not only experience injury and risk to themselves, they also go through these experiences with the men and women they fight alongside. It is well known that those who serve together develop close relationships and as such it can be extremely

traumatic to see a fellow service person suffer capture, injury or death. This can lead to feelings of survivor's guilt and PTSD. The impact these events have on a person can be mitigated in some cases by the amount of perceived control over a situation a person had, and the availability and quality of the support available after the event.

Whilst the risk factors above are focused on the events of the battlefield there is another risk factor for PTSD that is a problem in many militaries worldwide and is often unfortunately overlooked. This risk factor is sexual harassment or sexual assault; with the resulting trauma sometimes referred to as Military

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Sexual Trauma (MST). MST is not reliant on a battlefield scenario and so may occur at any stage during recruitment, training or active service. Unfortunately sexual harassment is a commonly occurring problem, with one study finding 55% of women and 38% of men in the USA military had experienced sexual harassment. With this being such a commonly occurring risk factor there is a real need for more work to be done to reduce occurrences of harassment in the military environment.

## How common is PTSD in the military?

In order to see how much more common PTSD is in the military than in the general population, we must first consider the rate at which PTSD occurs in the general population. The onset of PTSD does not exclusively require exposure to combat, as there are various other causes and triggers of PTSD, from exposure to real or threatened injury, sexual assault, trauma or death (Mann, & Marwaha, 2021). Although many people experience trauma in their lives, PTSD affects approximately 5% to 10% of the general population; affected women more than men (Mann, & Marwaha, 2021). The lifetime prevalence for PTSD in the US is 8.3% (Back et al., 2019). This is greater than the rate of PTSD in the UK armed forces, where PTSD affects 1 in 1000 personnel (Ministry of Defence, 2021) although this figure has been attributed to lockdown restrictions reducing the stressors placed upon military personnel.

When looking at armed forces around the world, rates do fluctuate based on the country, and in some cases, the conflicts in which people were deployed. This may be due to a number of factors, such as the type of warfare seen, or the medical treatment that was available at the time. What we do have to consider when looking at these statistics is that many people do not seek treatment for their conditions and may not accurately report their symptoms, especially in military situations where mental health problems may be incorrectly interpreted as weakness; as such there is the possibility that these figures are largely under-representative of the real problem.



In military populations as a whole, the rates of PTSD are estimated to be between 13% and 30% (Straud, Siev, Messer, & Zalta, 2019). The prevalence of PTSD among returning military members can vary depending on the war and time period. Among 60,000 Iraq and Afghanistan veterans, 13.5% of deployed and nondeployed veterans screened positive for PTSD (Reisman, 2016). As many as 500,000 U.S. troops who served in these wars over the past 13 years have been diagnosed with PTSD (Reisman, 2016). These rates all suggest more work is needed to lessen the impact active service has on the ongoing lives of those who choose to serve.



## Treatments for PTSD

Unfortunately, up to 50% of service people who suffer from PTSD do not seek treatment, despite PTSD being a manageable and treatable condition. Whilst countries have different health care systems and routes through which care can be achieved, many countries are now making special services for those in the armed forces who have suffered. Whether you choose to make use of the military services provided, or the civilian healthcare that is available, we encourage anybody who believes they may be suffering from PTSD to seek help. When seeking professional treatment for PTSD you should be offered either medication or psychological therapy. In many cases you will be offered a combination of the two, and your healthcare team will often tailor treatment for your needs; for instance you may need treatment to focus on depression as well as PTSD.



When being offered medication for PTSD, depression treatments such as Selective Serotonin Reuptake Inhibitors (SSRIs) and Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs) have been shown to be successful in treating PTSD symptoms. These are both groups of medications and so the actual drug you are prescribed will differ in name but will likely fall into these categories. Your psychiatrist will work with you to find the most appropriate drug and dosage to suit your needs.

When considering psychological therapies for the treatment of PTSD there are two main categories of treatment that will be used; Eye Movement Desensitization and Reprocessing (EMDR) and Cognitive Behavioural Therapy (CBT). EMDR uses hand movements and sounds whilst a person discusses their trauma. This helps the brain to process the traumatic memories differently and has been shown to improve PTSD symptoms. CBT is arguably the most successful treatment for PTSD and can either focus on cognitive therapy or exposure therapy, or a combination of the two. The cognitive therapy part looks into how thoughts and feelings have changed as a result of the trauma and also looks to change how a trauma makes you feel. Exposure therapy relies on repeatedly discussing the traumatic event until the memories are no longer upsetting, this then helps the sufferer to take control over the thoughts and the related feelings. This may also involve going to safe locations that have become triggers, or exposing yourself to other triggers until they are no longer distressing.

## What to do if you know somebody suffering with PTSD

It can be very difficult to know that a close friend or loved one is suffering from PTSD, as you understandably want to make them feel better. The symptoms of PTSD can also upset the balance in the family home, leaving a partner to take on the majority of the household responsibilities that a returning service person would have otherwise undertaken. Unfortunately, this can cause a great deal of strain on a relationship and may result in feelings of frustration from all parties involved.

When dealing with the effects of PTSD it can sometimes be confusing or unclear how to help the sufferer. Ultimately you are not a therapist and so the medical aspects of PTSD are best dealt with by a trained psychologist. However, there are a number of things you can do to assist the sufferer in their recovery. It may be difficult, but one of the most important things a person who is suffering from a mental health problem needs is a strong support network. Therefore, it is important to be supportive wherever possible and whenever help is requested. It can be frustrating to live with a person suffering from PTSD and you may want them to talk about their experiences to help you understand what they are going through. Whilst this may be coming from a positive place, and with good intentions, it is important to respect a person's boundaries. Many veterans may not be comfortable discussing their experiences, especially with somebody who has not experienced similar events. It is therefore important to not try to force a person to talk about their experiences. If they want to discuss these events they will open up to you in time. Instead they may simply need you to be patient and supportive throughout their recovery.

If you do suspect that a person is suffering, then you may suggest they seek professional help. Again, if a person is not ready for treatment, then pushing them forcibly is not a viable option and may be more damaging in the longer term. However, when a person is ready for treatment, you can be there for them throughout the process, providing encouragement and support. Partners of those suffering with PTSD may be invited into treatment sessions to discuss the sufferers' triggers. Knowing a person's triggers, e.g. certain smells or sounds, will help prepare you to calm your loved one in a time of high stress. If your loved one does not attend treatment, you still may be able to learn certain triggers in day-to-day life simply by observing their behaviours.

When trying to help care for someone with PTSD, it is important to try not to take the symptoms of PTSD personally. A loved one who is suffering may seem more distant and angry than they previously were in your relationship. It is important to remember that this is not your fault and is not a reflection on something you have done. It is also important to remember to look after yourself whilst you are busy trying to help a sufferer. If their PTSD dominates both of your lives, then it will likely lead to a level of exhaustion and irritability on your part. This will only lead to conflict, and so it is important that you take time for yourself to relax and unwind. If the symptoms of PTSD are becoming too much for you to handle, talk to the PTSD sufferer and discuss the possibility of them seeking professional help, whilst explaining that it is becoming too much for you. Provided it is done in a compassionate way, this will likely be best for all parties involved.

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mental illness then please visit our website:  
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