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CHAPTER 2. SPECIFICATIONS OF SERVICE NEEDS

2.01 PURPOSE

This chapter specifies the range of difficulties and conditions for which Vet Centers provide services (either direct services or referral), all included under the general category of difficulties in readjustment from military to civilian life.

2.02 PSYCHOLOGICAL CONDITIONS

Some war-zone veterans manifest psychological difficulties reflecting exposure to war-related stress and possible interrupted post-war readjustment processes. The assessment of PTSD (post-traumatic stress disorder) is made when war-related psychological difficulties are present in a clearly definable set of symptoms.

a. A specific condition, reflecting persisting reaction to unusual and traumatic stress, has been identified recently in the mental health literature. Known as "shell shock" in World War I, "combat" or "battle fatigue" or "traumatic neurosis" in World War II, this condition was not fully recognized by professionals in the United States until the publication of the diagnosis of PTSD in DSM (Diagnostic and Statistical Manual) of the American Psychiatric Association in 1980. Currently the DSM IIIR (Third Edition Revised) specifies that the person has experienced an event that is outside the range of usual human experience and that would be markedly distressing to almost anyone, as:

- (1) Serious threat to one's life or physical integrity;
- (2) Serious threat or harm to one's children, spouse, or other close relatives and friends;
- (3) Sudden destruction of one's home or community; or
- (4) Seeing another person who has recently been, or is being, seriously injured or killed as the result of an accident or physical violence.

b. War confronts combatants with stressors beyond the realm of normal human experience. These include, but are not limited to:

- (1) Difficult living conditions,
- (2) Physical fatigue,
- (3) Sensory overload,
- (4) Threat of annihilation,
- (5) Physical wounds to self and others,
- (6) Threat of capture and torture,

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(7) Isolation, and

(8) Surviving when others do not.

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c. Additional stressors unique to a specific war-zone and its aftermath may also contribute to the traumatic experiences impacting the veteran. For example, lack of clear-cut military objectives and societal support during the Vietnam war significantly added to the stress of some veterans' military experience.

d. It is established that there is a normal human response which occurs in most persons who experience traumatic stress; and that such a response is adaptive, protective and necessary to maintain psychological integrity. The response involves a normal recovery process which has clear and definable manifestations. Further, the normal recovery response may become static, with its normal evolution diverted by a wide variety of individual and social factors. Interruption of the normal recovery process produces a definable condition, now codified as PTSD. This disorder may persist for long periods of time, disappear and reappear, or manifest for the first time only after considerable delay.

e. According to DSM IIIR, the primary manifestations of the disorder are:

- (1) Reexperiencing of the trauma in memories, dreams, or flashbacks,
- (2) Emotional numbing and social withdrawal, and
- (3) Certain other features such as:
 - (a) Insomnia,
 - (b) Survival guilt,
 - (c) Hyperalertness,
 - (d) Cognitive impairment, and
 - (e) Avoidance of activities that resemble the traumatic events.

f. Ordinarily, PTSD is responsive to supportive experiences provided by comrades, friends, family members, and communities. Psychological assistance is provided when the on-line supports of others are not sufficient or have failed. Given adequate opportunities for post-trauma assistance and debriefing, PTSD is not necessarily associated with the development of other psychiatric conditions and in fact may contribute positively to character development.

2.03 SPECIFIC IMPACTS ON THE LIFE CYCLE AND LIFE STYLE

Research and clinical treatment of war veterans after World War II, the Korean war, and the Vietnam war, have shown that normal civilian readjustment can be disrupted, with impairment of functioning in work, education, family, or community. In the absence of definable psychological conditions, this can be attributed to significant gaps in normal life experience which in turn contribute to generalized readjustment difficulties.

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a. Impairment of Employment. This may appear as:

(1) General underachievement.

(2) Frequent job changes.

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- (3) Failure to obtain training.
- (4) Lack of competitiveness.
- (5) Chronic difficulties with authorities.
- (6) Inability to convert skills learned in the military to civilian use.
- (7) Unduly dependent (or conversely, controlling) attitudes.

b. Disruption of Educational Advancement. Some war veterans who pursue education find academic demands unduly stressful or have difficulties with concentration, memory, or motivation. The displacement in peer relations produced by the military interval can set the stage for difficulties over being older and different from classmates. In the case of Vietnam veterans, some individuals experienced particular problems with peers who were hostile or distant on the basis of the great range of opinion about the Vietnam war and its participants.

c. General Alienation and Disillusionment

(1) In the absence of specific psychological disorder, some veterans may develop negative attitudes and a generalized detachment from the normal processes of life as:

- (a) Marriage.
- (b) Career.
- (c) Social and political institutions.
- (d) Community or friends.

(2) This may be associated with personal bitterness derived from the complexities and the unfavorable outcome of the war, or the veteran's reception postwar. Others may have a sense of helplessness and lack of direction and meaning in their lives, which may be derived from war experiences and the peculiarities of their homecoming.

d. Criminal Behavior. While available evidence shows that the incarceration rate for Vietnam veterans is not higher than for the comparable general population, occasional instances of criminal behavior seem to be related to unresolved aspects of war events.

e. Diffuse Impairment of Interpersonal Relationships. Some veterans who do not clearly show PTSD and who otherwise function well in life, nevertheless are impaired in intimate relationships with a spouse, family, children, or friends with a resulting impact on parenting, sexuality, etc.

f. Needs for Information and Orientation. Some veterans responding to war experiences and/or community reactions postwar are abruptly distanced from

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normal debriefing and reintegration processes, including denial (to self and others) of their veteran status, avoidance of veterans' organizations, etc. These veterans may later find it useful to obtain information regarding veterans benefits and services, and contact with other aspects of a normal veteran role.

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