

Post Traumatic Stress Disorder and Substance Abuse



***Impacts ALL LEVELS
of Leadership***



What IS Post Traumatic Stress Disorder (PTSD)

PTSD is an illness which sometimes occurs after a traumatic event such as:

- Combat or military exposure***
- Child sexual or physical abuse***
- Terrorist attacks***
- Sexual or physical assault***
- Serious accidents, such as a car wreck***
- Natural disasters, such as a fire, tornado, hurricane, flood, or earthquake.***



Post Traumatic Stress Disorder (PTSD) AND the Military

PTSD is like any other physical injury from War and experts think PTSD occurs:

- In about 30% of Vietnam veterans, or about 30 out of 100***
- In as many as 10% of Gulf War (Desert Storm) veterans, or in 10 out of 100***
- In about 6% to 11% of veterans of the Afghanistan War (Enduring Freedom), or in 6 to 11 out of 100***
- In about 12% to 20 % of veterans of the Iraq War (Iraqi Freedom) or in 12 to 20 out of 100***

* VA National Center for PTSD 2007 at www.NCPTD.va.gov

Post Traumatic Stress Disorder (PTSD)

SYMPTOMS

PTSD symptoms can start immediately after the event or months and even years later. There are 4 major types of symptoms:

- Reliving the event – flashbacks**
- Avoidance – may include isolating from others**
- Numbing – trying “Not to feel”**
- Feeling anxious, angry, or “keyed up”**



Why Me? - PTSD

People who live through a traumatic event may feel scared, confused, angry, or out of control.



In your life, have you had any experiences that were so frightening, horrible, or upsetting that, in the past month, **YOU**...

- 1. Had nightmares about it or thought about it when you did not want to?**
- 2. Tried hard not to think about it or went out of your way to avoid situations that reminded you of it?**
- 3. Were constantly on guard, watchful, or easily startled?**
- 4. Felt numb or detached from others, activities, or your surroundings?**

PTSD symptoms which last longer than 4 weeks or interfere with your life may require professional assistance.

PTSD impacts ALL levels of Leadership

PTSD may occur with other problems:

•Depression

•Anxiety

•Substance Abuse

•Fear

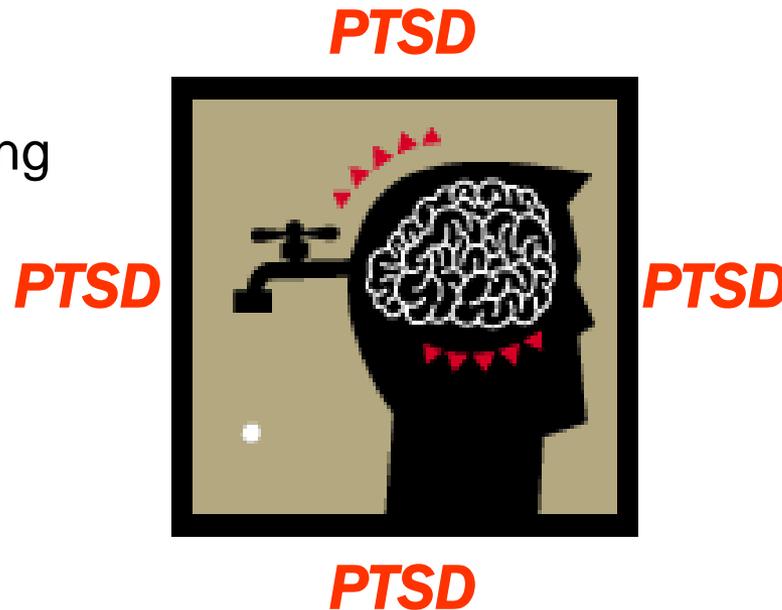
•Social Anxiety

•Anger

- Feeling hopeless about the future
- Experiencing shock, being numb, unable to feel happy
- Jumpy & easily startled
- Trouble concentrating

- Avoiding people or places related to the trauma
- Rapid heartbeat or breathing
- Feeling nervous, helpless, or fearful
- Not trusting others, being over controlling, having lots of conflicts

- Headaches and sweating when thinking of the war
- Sad, guilty, rejected, or abandoned
- Too much drinking, smoking, drug use



- Trouble sleeping, overly tired
- Bad dreams or flashbacks
- Stomach upset, trouble eating
- Irritable or angry
- Edginess, easily upset, or annoyed

PTSD and Substance Abuse

****Self medicating by drinking or abusing drugs is a destructive way some cope with traumatic memories.***



Check the ones that apply:

- Is anyone concerned about your drinking?
- On a day when you drink alcohol do you consume 5 or more drinks?
- Have you been unable to remember what happened the night before because of drinking?
- Has anyone been physically or emotionally hurt because of your drinking?
- Have you driven after consuming enough alcohol that would have put you over the legal limit?

**** ANY yes answer, discuss with your healthcare provider, ASAP Counselor and go online to www.MilitaryMentalhealth.org to complete an alcohol assessment.**

PTSD and Substance Abuse

00013 Philosophy of Responsible Drinking

00013 is a teaching tool to guide Soldiers on what
“right looks like”

- 0** drinking under 21
- 0** drinking on duty
- 0** drinking and driving
- 1** drink per hour
- 3** drink maximum per day

***0** medication and alcohol mixing

**** DESIGNATED** drivers are individuals who have not consumed alcohol in the last 24 hours.



PTSD and Family Members

- ***Spouses and partners need to be prepared for change,***
- ***Soldiers can explain to their family members that most PTSD symptoms will go away in time but there will be a re-adjustment period.***
- ***Spouses and family members are often the first to notice problems and can assist in getting their Soldiers help.***
- ***Spouses, family members, and friends need to be aware of***
suicide warning signs:

- | | |
|-------------------------------------|---------------------------------------|
| ✓ Current suicide thoughts/plan | ✓ Alcohol/drug abuse |
| ✓ Perceived lack of resources | ✓ Sudden purchase of firearms/weapons |
| ✓ Perceived loss of military career | ✓ Legal problems |
| ✓ Domestic issues | ✓ Depression/PTSD |
| ✓ Financial issues | ✓ Traumatic childhood experiences |
| ✓ Relationship problems | |
| ✓ Prior suicidal behavior | |

WHERE TO GET HELP

- National Center for Post Traumatic Stress Disorder – 800/296-6300 or <http://www.ncptsd.va.gov>
- Military One Source – **800/342-9647**
(if overseas precede number with U.S. access code)
- Military Mental Health Organization – www.mentalhealthscreening.org
- National Depression Screening Day – www.MilitaryMentalHealth.org (anonymous screening)
- Chaplains, Troop Medical Clinics, Mental Health Providers, Emergency Rooms, and National Depression Screenings



Fort Benning Numbers

- | | |
|--------------------------------|---------------|
| ➤ Army Substance Abuse Program | 545-8362/1138 |
| ➤ Family Life | 545-5301 |
| ➤ Community Mental Health | 544-3590 |
| ➤ ACS | 545-5485 |
| ➤ Duty Chaplain | 545-2218 |
| ➤ Emergency | 911 |



Photographs provided by:



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