

# SURVEYING THE DAMAGE: THE EFFECTS OF PTSD ON FAMILY LIFE

Aphrodite Matsakis, PhD/VAMC, WASHINGTON, D.C.

*Although we are learning how profoundly the Vietnam war has affected those who fought in it, we still have little information on "the forgotten warriors"—the wives and children of those Vietnam veterans suffering from post-traumatic stress disorder (PTSD). The results of a survey sent to the nation's Vet Centers indicate that more attention must be paid to this issue.*

**W**e do not know how many veterans afflicted with PTSD remain untreated in our country. Since 1969, however, more than 600,000 Vietnam veterans have sought the government's help in the face of readjustment difficulties, and the number is rising steadily.<sup>1</sup> In 1987, our nation's Vet Centers saw an average of 7,300 new clients per month.<sup>2</sup>

Although it has been estimated that only 30%–35% of these new clients had PTSD or significant elements thereof, it has also been noted that psychological casualties are increasing without war activities, and that they will continue to rise.<sup>2,3</sup> PTSD is defined as a delayed response to the war, and PTSD caseloads are on the rise at many Vet Centers.

Experts disagree on the prevalence of PTSD, but several authorities believe that as many as 1.5 million veterans will ultimately need psychiatric help.<sup>2</sup> Based on this figure, approximately 900,000 partners and 1,098,000 children of veterans could also be affected, as can an additional 4.7 million members of the extended families. In an effort to determine the potential effects of PTSD on the afflicted party's children and on marital, emotional, and sexual intimacy, counselors at each of the 189 Vet Centers in the country were asked to complete a questionnaire regarding their observations of the impact of PTSD on family life.

## QUESTIONNAIRE RESPONSES

The results of this survey have been summarized based on the perceptions

of Vet Center counselors who have reported working with a total of 60,111–69,547 Vietnam veterans and 14,707–19,115 partners of Vietnam veterans. Totals represent low- to high-range estimates, as some clients were involved in more than one type of the individual, group, and couples counseling offered.

Responding counselors represent 102 of the 189 Vet Centers, or 54%. Data from Vet Centers that do not offer women's support groups have been excluded from the survey sample, as have responses from counselors who have worked with fewer than 40 wives of Vietnam veterans. Therefore, the total number of Vet Centers considered in the totals is 83, or 44% of existing Vet Centers.

## MOST COMMON PROBLEMS

The effects of PTSD on marital, emotional, and sexual intimacy appear to be rather clear-cut. The majority of responding counselors (90%) agreed on 12 of the most common problems cited by the wives or girlfriends of Vietnam veterans:<sup>4</sup>

1. The veteran's tendency to overreact to the partner's statements and behaviors, and to interpret them as personally insulting (reported by 96% of the counselors).
2. The veteran's emotional numbing, which causes him to shut off emotionally, to be reluctant or unable

## PTSD AND FAMILY

to share on a deep, emotional level, and to otherwise withdraw from the partner or others (97.5%).

3. The partner's feelings of loneliness and social isolation stemming from the veteran's expectation that the partner make him the focus of her life; from his jealousy of her activities outside the home; and from her relationships with others—even with other women, members of her family, or her own children (94%).
4. The veteran's verbal abuse (91%).
5. The partner's fear of speaking to the veteran (91%).
6. The partner's confusion as to which problems are Vietnam-related and which are not (94%).
7. The partner's sense of feeling overwhelmed by her responsibility for the emotional and/or financial stability of the household (94%).
8. The partner's feeling of being responsible for healing the veteran through her love and nurturance; or conversely, her feeling that the veteran's problems are his alone and do not involve her (94%).
9. The partner's feelings of self-doubt, created by the veteran's emotional instability and/or the family's financial problems (94%).
10. The partner's sense of identity loss, prompted by her constant response to the veteran's needs and to family crises (90%).
11. The partner's feelings that she has lost control of her own life, and that she is no longer able to identify or pursue her own goals (94%).
12. The partner's responsibility of dealing with outbursts of anger and violent behavior (95%).

Of the polled counselors, 84% observed that many of the wives of Vietnam veterans experience self-blame for their husbands' depressions, rage reactions, and fluctuating moods. In addition, more than 85% of the counselors surveyed found that veterans with PTSD may experience periods of sexual dysfunction and sexual disinterest and have greater difficulty dis-

closing and expressing themselves with their wives or girlfriends than do non-PTSD-afflicted veterans. However, only 67% indicated that veterans with PTSD desire sex on demand.

A majority of the counselors agreed that when faced with the illness, injury, or death of a family member, veterans with PTSD tend to withdraw emotionally (93%) and suffer increased PTSD symptoms (89%). However, the group was split as to whether or not the veteran is helpful under such circumstances. Approximately 40% of the counselors reported that the veteran is helpful and protective in times of family emergency, whereas another 40% reported that the veteran is not.

### *Veterans with PTSD may experience periods of sexual dysfunction*

The responding Vet Center counselors also disagreed on whether Vietnam veterans with PTSD tend to overdiscipline or avoid disciplining their children. The consensus is that veterans tend to withdraw from their children (73%), tend to be overcritical of their children (81%), and have a low tolerance for children's noises and games, especially war games (85%).

About half of the responding Vet Center counselors report that veterans have special difficulties with the "terrible twos" (the defiance and experimentation displayed by many two-year-old children), and 79% report that veterans have difficulty tolerating their adolescent or preadolescent children's rebellion against parental authority. Nonveteran parents, however, also have difficulty during these stages of child development.

The surveyed Vet Center counselors report psychological or behavioral problems in children of Vietnam vet-

erans suffering from PTSD. The percentage figures listed with each problem below indicate the percentage of counselors who have observed a particular problem in a child. For example, in the case of low self-esteem, approximately 83% of counselors who responded to the survey report observing low self-esteem in children. This does not mean that 83% of children were assessed with this characteristic. Obviously, the problem of low self-esteem among children also exists in nonveteran families.

The most common problems observed in the children of veterans with PTSD are low self-esteem (83%); aggressiveness (76%); developmental difficulties in school (79%); and impaired social relationships (69%). Other problems manifested by the children include feeling responsible for the veteran's emotional well-being (55%); hatred of Orientals, especially Vietnamese people (13%); nightmares, daydreams, or other forms of preoccupation with events that were traumatic to the veteran (21%); symptoms similar to the veteran (65%); preoccupation with power and death (28%); ambivalent feelings toward the mother (41%); and self-mutilation (11%).

The results of this survey must be interpreted cautiously. The questionnaire used was not a refined instrument, and further research is needed to clarify each point. The author and many counselors stress that it is difficult to assume gross generalities about as diverse a population as PTSD-afflicted Vietnam veterans who seek assistance at Vet Centers. Although certain marital and child-rearing patterns may exist among some Vietnam veteran families, this does not mean they exist in all, or even in most Vietnam veteran homes.

The survey data also are limited by the fact that substantial numbers of Vet Center counselors did not reply to certain items. The survey is based on responses from counselors at about half of existing Vet Centers.

At a few Vet Centers, the questions were discussed by the entire staff, but

*continued*

in most cases, responses reflect the observations of only one counselor. Response does not necessarily reflect the combined opinion of the entire staff or even the opinion of the most knowledgeable or experienced counselor. However, in defense of the results of this study, it must be noted that in more than 95% of cases, the respondent was either the team leader or the leader of the women's support group. Both sources can be assumed to have knowledge of the effects of PTSD on family life. Also, the responses of counselors who have worked with fewer than 40 Vietnam wives were not considered in the results.

Survey results are always debatable on many grounds. This is especially true when data on violence in the home are being interpreted. In general, spouse abuse and child abuse tend to be underreported, as family members are often reluctant or ashamed to admit to the violence. In the case of child abuse, both male and female offenders may hesitate to admit to their crime due to shame, guilt, or fear of being turned in to the authorities—an action required by child abuse reporting laws. Some counselors fail to inquire about violence in the home because they fear humiliating the client, or are unaware of the prevalence of domestic violence in our society.

In the author's experience, approximately one fourth of Vietnam wives who sought help were battered women; i.e., the woman had endured at least two severe beatings at the hands of her husband, as a result of which her life became organized around avoiding or trying to control her husband's anger. These women are also considered battered since their husbands exert control through psychological humiliation and psychological manipulation, social isolation, economic deprivation, and threats to family members or friends.

According to the survey, approximately 25% of Vietnam wives seeking help complain of physical abuse. The survey, however, failed to use a severity-of-violence scale like those used by previous researchers. This 25% figure is

similar to rates found in other nationwide studies that cite statistics for wife abuse ranging from 28% to 50%.<sup>5-8</sup>

Somewhat of a discrepancy exists between the national rate of child abuse (1.5%) and the average rate of child abuse and wife abuse by Vietnam veterans as reported by counselors who participated in this study (approximately 12% and 3%, respectively).<sup>9</sup> However, both the child abuse and wife abuse figures must be interpreted with great caution, considering the fact that counselors were asked about family violence in the most general manner.

*One fourth of  
Vietnam wives who  
sought help were  
battered women*

Definitions of wife abuse and child abuse vary from one counselor to another. For example, some consider battered women to be only those beaten severely enough to require hospitalization or medical treatment, whereas other counselors consider battered women to be those controlled by their husbands' violence or threats of violence, regardless of the frequency or severity of the beatings.

Some counselors believe that occasional beatings or severe disciplinary action constitute child abuse. Others include in their statistics only children so severely beaten by their parents that outside intervention is required. It is possible that some counselors do not keep accurate records of domestic violence cases. Furthermore, it is possible that wives of veterans who batter children are more likely to seek help at Vet Centers than wives of veterans who are not abusive to children.

Hence, the relatively high rate of child abuse found in this study as compared with the national rate may not be at all representative of the actual rate of child abuse in even the PTSD-afflicted,

help-seeking Vietnam veteran population, much less the Vietnam veteran population as a whole. In this study, any statistics on family violence are tentative, at best. It is hoped that future studies will use more refined and sophisticated instruments to address these and other issues.

### REFERENCES

1. R.D. Lyons, "Vietnam Veterans Turn to Therapy," *The New York Times* (New York, November 13, 1964).
2. A. Matsakis, *Vietnam Wives: Women and Children Surviving Life with Veterans with Post-Traumatic Stress Disorder* (Woodbine House, Kensington, Maryland, 1988).
3. B. Jennings, in "Veteran Centers Offer Refuge to All Who Served in Vietnam," by Marcie Ritz, *The Montgomery Journal* (Montgomery County, Maryland, November 10, 1986), pp. A-8.
4. C.M. Williams, "The Veteran System with a Focus on Women Partners," *Post-traumatic Stress Disorders of the Vietnam Veteran*, T. Williams, ed. (Disabled American Veterans, Cincinnati, Ohio, 1980), pp. 72-117.
5. M.A. Strauss, "Normative and Behavioral Aspects of Violence between Spouses," *Victimology* (March 1977).
6. M.A. Strauss, "Wife Beating: How Common and Why," *Victimology* (November 1977).
7. L. Walker, *The Battered Woman* (Harper and Row, New York, 1979).
8. Lydia Savina, *Help for the Battered Woman* (Bridge Publishing Inc., South Plainfield, New Jersey, 1987).
9. National Center on Child Abuse and Neglect, "Everything You Always Wanted to Know About Child Abuse and Neglect," (Department of Health and Human Services, Washington, D.C., 1983). □

*A listing of Vet Center counselors who have developed written exercises for women's support groups is available from the author. A detailed report of survey results and a bibliography also are available from the author, at Psychology Service (116B), VAMC, 50 Irving Street N.W., Washington, D.C., 20422.*

*Aphrodite Matsakis, PhD, is a staff psychologist at the VAMC in Washington, D.C., and a consultant to the Vietnam Veterans Outreach Center in Silver Spring, Maryland.*