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When Wars Come Home

Veterans with post-traumatic stress disorder have more help

By AUDREY PARENTE, Staff Writer 



Having lost both legs and his right arm in the Vietnam War, Max Cleland was confined to a bed at Walter Reed hospital. The former senator and Stetson University alumnus now receives counseling for post-traumatic stress disorder. Max Cleland



Huff

PTSD by the numbers

The Veterans Administration operates one of the largest mental health programs in the country.

153 medical centers countrywide provide mental health and PTSD services

900 community-based outpatient clinics operate across the country

20,000 mental health providers are accessible in the system

1,200 veterans seek services daily at the Daytona Beach Veterans Outpatient Clinic, of which 12 percent are mental-health related

1 case worker handles 45-50 cases at the Daytona Veterans Affairs Outpatient Clinic

SOURCE: U.S. Department of Veterans Affairs

More information:

[National Center for PTSD](#)

DAYTONA BEACH -- A war is going on around Army veteran Matthew Huff -- in his mind.

The night creaks. He stays tense and watchful and won't sleep. He doesn't keep a gun; he's afraid he'll use it.

No rest comes until daylight breaks -- then maybe he'll close his eyes for a few hours. Not for long, because bloody chunks of skin and body parts, and a head he almost tripped over in Iraq, flicker through his brain.

Huff, 25, of Deltona, is experiencing post-traumatic stress disorder.

A new Veterans Affairs regulation published in July makes getting help easier and decreases wait times for veterans like Huff who seek health care and disability compensation related to PTSD.

Secretary of Veterans Affairs Eric K. Shinseki recently announced a simplified claim process, which reduces the evidence needed if the trauma claimed by a veteran is related to fear of hostile military or terrorist activity. The regulation is based on scientific evidence, Shinseki said, that concluded a veteran's war-zone deployment is linked to increased risk of PTSD.

Previously, specific war zone circumstances had to be corroborated for a PTSD diagnosis.

Huff is among 37 percent of all returning military men and women from the Iraq and Afghanistan wars who seek Veterans Affairs services. More than 40 percent of that group seek help with mental health issues.

About 1,200 veterans seek services at the Daytona Veterans Affairs Outpatient Clinic, of which 12 percent are mental health-related, said Fanita Jackson-Norman, program manager for the Department of Veterans Affairs Orlando VA Medical Center Seamless Transition Program, which includes Volusia and Flagler counties.

Huff said in an interview several months ago he seeks help coping with flashbacks, hyper vigilance and emotional numbness. His therapist said he continues receiving counseling, but missed his last appointment. He did not return calls from The News-Journal last week.

In the earlier interviews, Huff described his ordeal: "I don't sleep that much at night and usually go to bed when the sun comes up and sleep for four hours," he said. "I don't want to get a job and be late. I can't fall asleep and get up at 6. I used to stay up for days in the military."

PTSD was not something he prepared for when he joined the Army in 2003.

"We were told it was pretty much guaranteed we were going to combat," he said. "I thought it would be good for me to get that discipline. Mom was not happy about it. My grandfather on my father's side was in the Navy, and I, of course, thought I was going to be strong and be tough and not let anything affect me."

During combat in Iraq, Huff didn't think he was mentally affected.

"Literally daily we had mortar attacks on our FOB (forward operating base). We had IEDs (improvised explosive devices), car bombs and, at one point, it had gotten so bad we weren't even coming into the city. We were in our vehicles," he said. "I was driving a Humvee when two vehicles in front of me made the turn. I started straightening out the wheel when there was a loud explosion and dirt everywhere.

"All the doors had blown open. The guy in the turret behind me, I thought was injured, so I started laying down suppression fire. I got out of the vehicle. Chunks of skin and body parts -- one of them I almost tripped over was a head.

"I wasn't too nervous at the time," he said. "I thought about it, but it's like thinking about winning the lottery."

The reality for Huff now: His combat experiences are not easily overcome.

After his tour in Iraq, Huff was stationed in Germany for training. He also serviced vehicles that came back from Iraq.

He had little time off. When he did, he traveled a bit around Europe.

"When I left Germany, I was out of the military and I went to New York for about a year and then moved back to Florida," he said. "I was working odd jobs -- the downside of being an infantry soldier, you don't have many skills -- and slowly I realized I wasn't like I was before."

Aggressiveness in combat equates to bad temper in civilian life, Huff said. The need in battle to leave no room for error equates in his civilian life to a lack of tolerance for anything less than precision -- in all areas, including relationships, he said. Anyone being a few minutes late or doing something spontaneously, he explained, becomes more than an annoyance. Vigilance of roadside dangers in a combat zone equates to irrational interpretation of traffic hazards and pedestrian traffic.

"When you come back to civilian lifestyle, you realize the aggressiveness you have is pretty much useless here," he said.

Huff's case manager at the local VA clinic, Marilyn Macquarrie, said all veterans come back changed.

"This is normal. It's a normal reaction to abnormal events," said Macquarrie, who is responsible for assessing all those who pass through the local clinic. "We try to normalize them."

She handles 42 to 45 cases simultaneously, making referrals for services as needed.

"That number is certainly being looked at, because that is a very high number for one case manager," Jackson-Norman said. "But I think there are enough mental health care professionals."

The clinic's mental health department has four psychologists, three social workers and three psychiatrists, she said. In addition, a separate Daytona Beach Vet Center opened six months ago in Holly Hill, with a team leader and two counselors. Also, local agencies receive funding to offer help, she said.

"There's a coalition of community partners in the Volusia/Flagler area that assists in taking care of the veterans under the Florida BrAlve Fund," Jackson-Norman said.

For more information on PTSD services, contact the Daytona Beach Veterans Affairs Clinic at 386-323-7500.

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