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PTSD: The spouses speak out

As soldiers return home from war, many become part of a 'silent epidemic' that affects them and their loved ones.

By JEFF WILKINSON
jwilkinson@thestate.com

On Christmas Day, 2007, Alexis Lane's fiance, a hard-driving tanker in the U.S. Army's 1st Armored Division, got down on one knee and proposed to her in front of her family.

He had been among the first troops to enter Baghdad in 2003, where he lost many friends. The two had met in California, while he was on leave from his second deployment in 2006-2007, when he lost more friends. And he was proposing, in part, because Lane, of Chapin, had helped him deal with all the bad memories.

"I'm thankful for you and your family and all the things you've done for me since I got back from the war," he told her. "Will you marry me?"

Two years after their February 2008 wedding, the couple had split. They had been intimate just once – on their wedding night. Lane, then 19, was not allowed to sit on the same sofa or sleep in the same bed with her husband. She was not permitted to touch him. They rarely left their shuttered house, and when they did, it often involved heavy drinking sessions with his Army buddies that ended in drunken brawls.

After coaxing him to the Veterans Administration for treatment, Lane's husband asked her to leave.

"He said, 'You're too young to take care of me the rest of my life,'" she said. "So Christmas for me is a constant reminder of who he was and how I lost him."

It is a story shared by others as well.

With the Iraq war winding down – the last U.S. troops are leaving that country this month – more and more service members are returning home. Many are returning with injuries, including psychological trauma, and many are in the Midlands.

Lane has lost track of her now ex-husband. She thinks he is back in California. Efforts by The State to reach him were unsuccessful, so he is not named in the story.

Lane since has penned a yet-to-be-published book about her experience: "PTSD: The Wives' Side." She said she wrote it "because I thought I was the only one to go through it."

But Lane's experience is not unusual.

Twenty percent of troops returning from Iraq and Afghanistan are diagnosed with post-traumatic stress disorder, according



- C. Aluka Berry /caberry@thestate.com

Symptoms of PTSD

Signs of post-traumatic stress disorder include:

- Isolation, not wanting to leave the house
- Substance abuse
- Workaholic
- Showing little or no emotion, "flat affect"
- Emotional numbing, unable to show love or caring
- Abnormal anger

Hyper-vigilance at home and in public

- Trouble sleeping
- Aversion to sex
- Flashbacks

For more information: Go to the U.S. Department of Veterans Affairs website at www.ptsd.va.gov.

Coming Monday How trauma dogs are helping

to the U.S. Department of Veterans Affairs. Other estimates range as high as 40 percent. But less than half of returning service members actually seek help for it.

some with scars of war

Symptoms are numerous, including flashbacks, insomnia, disinterest in sex, violence and feelings of isolation, guilt and depression. Those suffering from PTSD can have trouble holding a job, more frequently contemplate suicide and are more likely to become homeless. The divorce rate among PTSD couples is 30 percent higher than the national average.

With troops returning from Iraq and Afghanistan in ever-increasing numbers, the “silent epidemic,” as it is called, could become more pronounced, especially in Columbia and South Carolina. In a recent McClatchy study of disabled veterans from the Gulf War, Iraq and Afghanistan by zip code, Columbia ranked 28th out of 890 areas nationwide in the concentration of disabled vets, due to the presence of Fort Jackson, the McEntire and Shaw air bases, and a large contingent of National Guardsmen and Reservists.

“There are a lot of young women with young children whose husbands are living in the woods and not with them,” said Jennifer Rogers, who runs PAALS, a Columbia firm that trains service dogs to help people with PTSD and other challenges. “They are living next door to you and you would never know it. And they are really, really young.”

‘They live in anxious misery’

Alison Thirkield, a psychologist at Fort Jackson’s Moncrief Army Community Hospital’s Warrior Transition Unit, said PTSD is not just a reaction to high levels of stress from being deployed and struggling to transition home.

“Just because you’ve been through combat and are having a hard time doesn’t mean you have PTSD,” she said.

There are four basic areas that lead to a diagnosis:

- The service member must have witnessed or experienced a horrific traumatic event, either to themselves or to others, such as losing a friend in battle.
- He or she then frequently struggles with the event or events through nightmares, flashbacks or other intrinsic memories.
- The victim becomes hyper-vigilant and aware, ready to fight or flee at a moment’s notice.
- He or she adopts avoidance behaviors, bunkering themselves in their homes and pushing away friends and family members.

Gary Phillips, 67, of Columbia, has been dealing with effects of PTSD since 1968. During the Vietnam War’s Tet offensive, Phillips, a platoon leader, witnessed three horrific events that he still won’t talk about.

He dealt with constant nightmares. He struggled to go outside. He fought in his sleep, once kicking his wife across the room without realizing it.

“I was a prisoner of war in my own house,” he said “And, when you have PTSD, your spouse has to deal with all the crap.”

Among reasons for the spike in PTSD among Iraq and Afghanistan veterans is the constant threat of violence from roadside bombs, mortars, suicide bombers and even civilians.

“If they are in Iraq and go out into a market, there is likely someone who means them harm,” Moncrief’s Thirkield said. “When they come back, it’s hard to shake that belief system. Our bodies have a way to deal with danger. But modern warfare is often more than our bodies are designed to handle. Your survival system gets stuck on ‘on.’”

Elizabeth Codega, a social worker with the Dorn VA Medical Center’s PTSD clinical team, said often the service member, like Lane’s then-husband, pushes away his or her spouse because they are ashamed of their behavior.

“They live in anxious misery,” she said. “They think, ‘Why would those people want to be around me?’ And it devolves into depression.”

Also, fear for the spouse’s safety often can exacerbate the service member’s anxiety. “It’s one more person to worry about.”

While spouses want to help, they often don’t have the skills to cope with their own challenges in the relationship, much less those of their husband’s or wife’s.

“They need to get their own support,” Dorn’s Codega said.

'I learned it the hard way'

In 2004, Meaghan Long's husband, Raymond, returned from a deployment in Iraq.

A third-generation soldier, the staff sergeant was a squad leader an engineering unit working near Balad – clearing roadside bombs, building bridges, bases and infrastructure.

In June of that year, heavy mortars began raining onto Balad Air Base. When Long awoke from being hit, he had a concussion, lacerated liver and was peppered with shrapnel. Around him lay about two dozen dead, dying and wounded soldiers, he estimates.

After his return, Meagan Long noticed the change in her husband. Then, one day, something panicked Raymond.

"He went in the back yard and said, 'I have to dig trenches. I have to put up barbed wire,'" she said. "It was very scary. I had to take him to the emergency room."

Despite the incident and his injuries, Long was not diagnosed with PTSD and was deployed a second time to Iraq in 2006-2007.

After that deployment, the couple moved to Columbia, where Long, now 40, was to become a drill sergeant at Fort Jackson.

But Raymond Long's PTSD became worse: Depression, anxiety, headaches, panic attacks and anger.

"My world came crashing down," Meaghan Long said. "I knew no one here and didn't have a support group."

Eventually, Meaghan Long found and began talking with other wives on-line through the Wounded Warrior program. It has given her the support she needs to help her husband through his challenges. The Dorn VA center and Fort Jackson's Warrior Transition Unit also have support programs.

Both Lane and Long say they are eager to talk with any other wives who might be having similar problems.

"We all have to help each other," Long said. "You have to take care of yourself because, if you don't, you will crumble and fall, and not be able to take care of anyone."

"I learned it the hard way."

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