While stress is a normal part of life, deployment and reintegration introduce unique stressors into military families’ lives. For the service member, severe stress may come from being in a war zone, living with constant risk, and dealing with harsh conditions.

Combat stress is a short-term reaction to being in these conditions, and lasts for more than four days. Symptoms can include strong emotions, concentration problems, trouble sleeping, exhaustion, or physical reactions like a racing heart, sweating, or nausea. These reactions are common—8 to 30% of service members in war zones experience combat stress. Most are able to return to duty within a few days or weeks.

About 14% of veterans experience post-traumatic stress disorder (PTSD), an anxiety disorder that results from experiencing a traumatic event. Symptoms can start immediately after or months after a trauma, such as threat of death or harm. These can include reliving the event through memories, painful emotions, flashbacks or dreams. A person with PTSD may also feel numb and detached or avoid certain situations, people, or emotions. He or she may act as if the current situation is still dangerous, for example, startling easily or constantly being on the lookout for danger. Acute PTSD lasts 1-3 months, chronic PTSD lasts over 3 months, and delayed PTSD can begin months to years after the trauma.

Getting help to deal with combat-related stress takes courage and strength. Learning about combat stress and PTSD is a first step. Talking to a combat stress control team, a spiritual leader, or professionals at health-care clinics is another step toward managing stress related to trauma, but only a doctor or mental health professional can officially diagnose PTSD. Some combat stress is manageable with rest and support while more intense reactions like PTSD may require treatment such as psychotherapy or medications.

Ignoring these challenges won’t make them disappear, but instead can isolate the service member from family and friends and result in unhealthy coping patterns. Some service members may worry that a diagnosis of PTSD could make them be viewed as weak and hurt their career. If symptoms get worse, though, it could get in the way of doing duties necessary on the job. It is better to get help and start taking control. Talking to other service members and veterans who have experienced PTSD can be very helpful. Resources for learning more and getting help can be found on page 2 of this newsletter.

**Your Baby/Toddler:**
- Starts to understand simple language between 6-12 months. As they become toddlers, they may experience frustration at not being able to communicate with words.
- Experiences basic emotions such as love, fear and anger in the first year. Toddlers start to experience complex emotions like pride, jealousy and shame.

**Parent Tips:**
The following book is a resource for parenting when times are tough at home.

*The Parent’s Guide to Psychological First Aid: Helping Children and Adolescents Cope with Predictable Life Crises*
By Gerald Koocher and Annette La Greca
Resources for Combat Related Stress

Director of Psychological Health (DPH): 715 – 684 - 9719
The DPH can provide mental health assessments, case management, 24 / 7 consults and referral services. All service members are eligible for the DPH program regardless of branch.

MOS (Military One Source): 1 – 800 – 342 – 9647
MOS is a virtual resource for all Active Duty personnel, National Guard and Reserves. This free program provides relevant and essential resources and education materials to military members and their families. They can also provide face to face counseling for relationship issues and telephonic financial counseling. They also have a healthy habits coaching program that provides support for service members and their families who want to make life style changes.

Vet Centers / Readjustment Outreach Centers:
Brooklyn Park (763) 503 – 2220, New Brighton (651) 644 – 4022, Duluth (218)722-8654
The Vet Centers are open to any service member or their families if they served in any combat zone and received a military campaign ribbon. Services offered at no cost include individual and group counseling, family counseling for military related issues, and mental health issues including TBI, depression etc.

National Center for PTSD, Department of Veterans Affairs
http://www.ptsd.va.gov/
Center for the Study of Traumatic Stress
http://www.centerforthestudyoftraumaticstress.org/

ADAPT is gearing up for the next wave of the project. You can help us better understand reintegration in military families and have a say in future resources and services provided to reintegrating military families!

If you live in Minnesota, are a parent of a 5-12 year old, and have been deployed (or your spouse/partner has been deployed) since 2001, we want to hear from you!

To learn more about the ADAPT project, go to www.cehd.umn.edu/fsos/adapt. For more information, you can call us at 612-624-4830 or e-mail us at adapt@umn.edu.

“Like” us on Facebook!
Follow us on Twitter @adaptmn!

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Upcoming Topics Volume 12
Supporting a Family Member with PTSD

http://www.cehd.umn.edu/fsos/adapt