

# Post Traumatic Stress Disorder (PTSD)

## RCC Fact Sheet

### What is Post Traumatic Stress Disorder?

Post Traumatic Stress Disorder (PTSD) is a condition sometimes suffered by people who have been exposed to a traumatic event. To be diagnosed with PTSD, the following two conditions must be met: the person experienced, witnessed, or was confronted with an event that involved actual or threatened death or serious injury, or a threat to physical integrity of self or others and; the person's response involved intense fear, helplessness or horror. Symptoms of PTSD fall into three categories: re-experiencing, hyperarousal, and avoidant. A person with PTSD feels unsafe, distressed and disconnected.

### Which population is most at risk?

Those with no previous history of psychiatric illness are most at risk for developing PTSD. Women are also more likely to develop PTSD after a traumatic event than men. Of those Service members returning from the Afghanistan War Zone, 11.2 percent experience a mental disorder of some kind between three and 12 months after returning, and 6.2 percent experience PTSD. Of those Service members returning from Iraq, between 15.6 and 17.1 experience mental disorders, and between 12.2 and 12.9 percent experience PTSD between three and 12 months after returning from the War Zone. Of those who screened positive for mental disorders or PTSD, between 23 and 40 percent sought mental health care.

### How does this issue affect wounded warriors and their families?

While most people do not develop PTSD following a traumatic event, PTSD is a very real issue and threat facing Service members, wounded warriors and their families. Of 292 Marine Reserve Soldiers who participated in an anonymous survey after returning from deployment, 36 percent reported relationship problems with their spouse, 27 percent reported significant depression, 24 percent reported alcohol abuse, and 43 percent reported problems with anger and aggression. These symptoms interfere with the quality of life enjoyed by Service members,

wounded warriors and their families and, if left unaddressed, could develop into more serious, potentially fatal problems such as PTSD. It is also important to note that stand-alone PTSD is the exception rather than the rule, and that PTSD is often experienced in conjunction with symptoms, such as those reported by the Marine Reserve Soldiers, including depression, substance abuse and generalized anxiety.

### How can knowledge of this issue help Recovery Care Coordinators?

An awareness of the symptoms and types of PTSD will prepare Recovery Care Coordinators (RCCs) to recognize those symptoms in the recovering Service members they work with. The ability to quickly recognize the signs and symptoms of PTSD allows RCCs to get recovering Service members and their families the necessary care and treatment in a timely manner. In addition to the three symptom categories of PTSD, RCCs should also be aware of the three types of PTSD experiences: acute, which develops within three months after the event; chronic, which lasts for more than three months and is often mistaken for character or personality traits; and delayed, which develops six months to many years after the traumatic event.

### Where can I find more information?

The following resources are available:

- **Defense Center of Excellence for Traumatic Brain Injury and Psychological Health:** [www.dcoe.health.mil](http://www.dcoe.health.mil)
- **Department of Veterans Affairs:** [www.va.gov](http://www.va.gov)
- **National Center for Post Traumatic Stress Disorder:** [www.ncptsd.va.gov](http://www.ncptsd.va.gov)
- **Real Warriors, Real Battles:** [www.realwarriors.net](http://www.realwarriors.net)
- **After Deployment:** [www.afterdeployment.org](http://www.afterdeployment.org)
- **The National Institute of Neurological Disorders and Stroke:** [www.ninds.nih.gov](http://www.ninds.nih.gov)