

Ptsd development among soldier families

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Introduction

Background PTSD is a condition that one develops due to a continuous and persistent exposure to a stressing situation. PTSD can affect both children and adults in the family. Some of the situations that can cause PTSD range from rape and sexual harassment, exposure to combat, depriving children of one of their parents. Exposure of a family to one of the above situations can cause PTSD on the direct person or their families. In this paper, we will specifically look at the effects of deployment of parents in military combat on the soldiers and their families. Statement of the Problem America has experienced a significant increase in the number of violent conducts in schools in recent times. Some of these violent conducts culminate in the worst-case scenario shooting in schools and public schools. These situations involve people that do not have criminal records. On the face of it, this is good citizens that just decided to break bad. However, on a closer look, this can be attributed to the development of PTSD on the participants due to exposure to stressful situations.

PTSD on Military Soldiers Various research has been developed to study the extent of PTSD in soldiers. It is not surprising that the survivors of different wars have profound elements of having PTSD. Survivors of World War I, Persian Gulf War, and the War in Iraq have been good examples to show that wars cause or at least fuel the occurrence of PTSD. Besides PTSD, combat can expose the participants to other traumas that also extend to their families. An example of such is the sexual trauma that is common among women soldiers. Drivers of the Problem There are various factors that

directly affect the occurrence of PTSD as a social and psychological problem among soldiers and their families. The first one is the direct involvement of the soldier in battle. Soldiers are involved in violent and bloody situations on the battlefield that affects their thinking and psychology, this factor directly affects the people that are directly involved in the combat rather than the family. The rest of the factors directly spring from the first reason. These include the alienation of children from their parents who have been deployed in war zones. PTSD can also develop on women whose husband have been deployed in war zones due to alienation and thought of what could be happening to them

Vygotsky Theory of Cognitive Development

According to Vygotsky, every aspect of mental development and behavior develops on the basis of social interactions among the people. Every aspect of mental development in a child or an individual appears in their life twice. First through observations From the People around and secondly through their intrapsychological experiences. This implies that what children or people associated with soldiers first get to experience what the soldiers are going through or have gone through observation. This is further entrenched in them leading to the development of PTSD.

Research Questions

The research will try to answer the following questions:

1. Does the alienation of children from their father cause the development of PTSD?
2. Does the alienation of children from their mother cause the development of PTSD?

3. Does living with a parent that has been in combat fuel the development of PTSD?
4. Does living with a spouse that has been in combat fuel the development PTSD on the other spouse?

Literature Review Amick-Mcmullan et al In this study, Amick-Mcmullan focuses on the survivors of activities surrounding criminal homicide and by extension looking at events like drug abuse and alcoholism which may be direct effects of PTSD (Amick-Mcmullan et al., 1991). The study was done based on a random telephone interview to establish the validity of the survivors. The study had a total of 12500 panelists that were randomly picked. Out of the 12500 panelists, 9.3% lost a family member in circumstances that can be described as criminal homicide or matters of drug and alcohol abuse arising from traumatic events. Of the 9.3%, 2.3% developed PTSD at the course of their lives while an additional 4.8% developed PTSD within six months of the occurrence of the causative incidence (Amick-Mcmullan et al., 1991).

The concludes that homicide and drug abuse and alcoholism victims either directly or indirectly are at risk of developing drug abuse and alcoholism immediately or within the course of their lives. Chartrand et al The main focus of the study is to establish the impact of the deployment of parents to children. The dependent variable in this study is the children aged between 18 months to five years. In the study, the researchers chose a panelist of 169 childcare providers and parents. This was a significant 73% of the population (Chartrand, et al., 2008). There was an assumption that that age bracket is children learning age. The study found that there were

considerable behavioral changes among children experiencing deployment at that age. This was most true among children of three years and above. The research also found that children under the age of three were not affected by deployment since they were too young to realize what was happening in their family (Chartrand, et al., 2008). The study concludes that for the effects to be mitigated, there must be efforts to make the transition more and smoother for the children. Gentile This was mainly a review on the effects of war on families, the review methodology was used due to the limitation in resources and time hence the need to do it in the shortest and less costly as possible (Gentile, 1943).

To determine the effects of war on the families, a mental health committee conducted discussions with relevant agencies in New Orleans. There were 24 agencies acting as the panelists for the review. It was at the discretion of the committee to decide who to participate and who not to. Open-ended questions were asked in order to elicit the discussion. The review found that war has effects on the mental health of the participants and the interested parties. Some of these effects are PTSD and anxiety (Gentile, 1943).

Holdeman This study focuses on the psychological effects of war on families, friends and other interested parties. The study profiles these as the invisible effects of war on individuals (Holdeman, 2009). The study defines PTSD as the brain injury that negatively affects the moods of behavior and way of thinking leading to depression. The panelists of this study were war veterans from the Iraq and Afghanistan wars. The research also gave consideration to the healthcare systems in the country, the existing gaps in the healthcare systems the cost of healthcare and the quality of the healthcare services

that arise. The study shows the existence of PTSD stress among war veterans in the Iraq and Afghanistan wars (Holdeman, 2009). Lincoln et al The article looks at the psychological factors that worsen the impacts of the deployment of parents and how their children affect their children (Lincoln et al., 2008).

In this paper, the author clearly indicates the risk factors, the required adjustments in order to mitigate the issue, and possible outcomes in the case of this adjustment and lack of. The study concludes that the pre-existing conditions of depression and anxiety among children, in general, make them vulnerable to changes in behaviors in case of deployment of a parent (Lincoln et al., 2008). According to the paper, the risk factors are a child and parental substance, and family violence. Morina et al The objective of this study is to investigate the effects of war on people in the long-run. The study considers the quality of life among the people in Kosovo nine years after the war (Morina et al., 2011). The quality of life was viewed on the lenses of PTSD, anxiety, the study established that families that had experienced death as a direct result of war were much more susceptible to PTSD and anxiety and generally low quality of life than families that had never experienced deaths directly arising from war. The study also concludes that war survivors in families were more likely to develop mental health complications long after the end of the war (Morina et al., 2011). S. J & D. G According to the guidance provided in this paper, PTSD occurs due to exposure to stressful events such as military combat on soldiers (S. J & D. G, 2012).

According to the paper, most diagnoses arise directly from exposure to injury to oneself or colleague, death, horrible events on the battlefield and helplessness (S. J & D. G, 2012). There are other direct symptoms that have a direct correlation with the PTSD, these include, re-experience of stressful and traumatic events in the form of dreams and flashbacks, active avoidance of these events limited responsiveness and hyperarousal (S. J & D. G, 2012).

Asukai et al This study looks at the efficacy of Japanese patients with PTSD arising from different sources (Asukai et al., 2007). The study was conducted in a random manner and controlled. In the study twenty-four subjects, twenty-one women and three men with PTSD arising from different sources including exposure to war were randomly assigned to two groups. Group one, prolonged exposure without regard to treatment and the second group was the control group where the exposure to treatment was made ten weeks of exposure (Asukai et al., 2007). The study found that individuals that were placed in group one were fast showing improvements after treatment compared to the second group. The study was trying to promote the evidence-based treatment of PTSD (Asukai et al., 2007).

Purpose and Rationale

Theoretical framework

The study will use an adaptation of Gujarati (2004) model. In this case, the general regression model will look as follows, $Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \dots + \beta_n X_n + \mu$. Where: Y = The manipulatable variable X_1, X_2, \dots, X_n = Causative variables β_0 = The Autonomous variable $\beta_1, \beta_2, \dots, \beta_n$ = X variable coefficients explaining the responsiveness of Y to X . μ = stochastic disturbance error term, it explains the changes in Y that are not

explained by the variations in the causative variables. Empirical Model The specific model for this particular study was: $Y = \beta_0 + \beta_1ACF + \beta_2ACM + \beta_3LWP + \beta_4LWS + \mu$ Where: Y = The extent and development of PTSD in a family ACF = Alienation of children from their father ACM = Alienation of children from their mother LWP = Children living with parents who have seen or have been part of combat LWS = Living with a spouse who has been a part of combat or has seen combat $\beta_0, \beta_1, \beta_2, \beta_3$ and β_4 , = Beta coefficients μ = stochastic disturbance error term. Due to the multicollinearity aspect among the independent variables, the following will be the separate equations, ACF = Alienation of children from their father $Y = \beta_1 + \beta_2ACF + \mu_1$... 3 ACM = Alienation of children from their mother $Y = \beta_3 + \beta_4ACF + \mu_2$ LWP = Children living with parents who have seen or have been part of combat $Y = \beta_5 + \beta_6LWP + \mu_3$ LWS = Living with a spouse who has been a part of combat or has seen combat $Y = \beta_7 + \beta_8LWS + \mu_4$ Definition and Measurement of Variables PTSD Development (Y)

This is the dependent variable of the research, it is to be measured by looking at the growth of the number of PTSD diagnosis in the healthcare system. Alienation of children from their father (ACF) This is the variable that measures how much alienation of children from their fathers can cause PTSD among children. It is to be measured by looking at the growth of male parent deployment in military combat. Alienation of children from their mother (ACM) This is the variable that measures how much alienation of children from their mothers can cause PTSD among children. It is to be measured by looking at the growth of female parent deployment in military combat.

Children living with parents who have seen or have been part of combat (LWP) This is the variable that measures the extent to which living with a parent that has been part of combat or has seen combat can cause PTSD among children. It is to be measured by the growth of the number of military deployments that consists of parents in the line of duty Living with a spouse who has been a part of combat or has seen combat This is the variable that measures the extent to which living with a spouse that has been part of combat or has seen combat can cause PTSD among spouses. It is to be measured by the growth of the number of military deployments that consists of married people in the line of duty Statement of the Hypothesis The hypothesis in this paper is to be stated in the negative.

The following is the null hypothesis for the research

1. The alienation of children from their father due to military deployment does not cause the development of PTSD.
2. The alienation of children from their mother due to military deployment does not cause the development of PTSD
3. Living with a parent that has been in combat does not fuel the development of PTSD among children.
4. Living with a spouse that has been in combat does not fuel the development of post- PTSD among spouses.

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