RESOURCES FOR RECOVERY

Advancing the Health and Care of our Nation's Combat Injured Service Members, their Families and Children

Intimacy and Health: The Impact of PTSD and Other Invisible Injuries On Returning Service Members

The impact of injury on intimacy is an often neglected aspect of healthcare and one that is especially important in caring for our nation's service members and families. Many service members returning from deployment experience what are referred to as "invisible injuries". Invisible injuries include posttraumatic stress disorder (PTSD), mild traumatic brain injury (mTBI), depression and anxiety that

can result from combat exposure. Sometimes alcohol, tobacco and drug misuse, as well as impulsive and violent behavior can compound these conditions. All of these problems can compromise intimacy reducing one's ability to enjoy pleasurable relationships and sexual activity.

Whether a returning service member is single, married or married with children, the capacity to resume and establish relationships that provide emotional closeness and sexual togetherness can enhance or undermine individual health, relationship health, and even the health of one's family.

This fact sheet addresses the implications of the "invisible injuries" of war on reintegration and intimacy. There are also "talking points" that providers in settings of primary, behavioral health, rehabilitative and spiritual care can use to facilitate communication around this sensitive and important topic. As professionals, remember to ask about this important aspect of deployment reintegration. If you don't, the service members and their family members who you serve may never discuss it with you.

Reintegration, Invisible Injuries and Intimacy

PTSD and/or the conditions mentioned above may make it more difficult for couples to reconnect. Differences in partners' needs and desires for intimacy can over time lead to frustration, rejection, conflict or withdrawal.



- PTSD symptoms including *recurrent nightmares, avoidance of thoughts, feelings or people/social situations, jumpiness or feeling constantly on guard* often interfere with the ability to experience emotional connection or closeness.
- They can inhibit one's ability to 'let go', thus reducing the pleasure of sexual release.
- Service members who feel in some way changed for the worse by their war experiences, may find it hard to share themselves in intimate, physical relationships or they may worry that they will pass on this negative change to their partner through intimacy.
- Medication used to treat PTSD, depression and anxiety can decrease sexual desire or sexual functioning for some period of time.

In contrast,

- Some returning service members may experience sexual urgency (the need to engage in overly frequent or intense sexual behavior) in order feel a high similar to the emotions of combat.
- Others may be sexually controlling or engage in practices atypical of pre-deployment (e.g. pornography) resulting in sexual stimulation taking priority over emotional intimacy.
- Those with mTBI may behave in a less controlled manner or evidence behavioral or personality changes that make them seem very diferent, even frightening to their partners.

Partners may also contribute to a lack of intimacy:

Some may experience low sexual desire from feelings

Continued; see Talking Points for Improving Intimacy

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of detachment from their returning partner, anger at having been left alone for so long, or feeling over- burdened by their responsibilities. Partners with reduced sexual interest who engage in sex to "keep peace" may communicate that sex is simply a chore.

• Others who engage in sexual activities despite

Talking Points for Improving Intimacy

Communication, compassion and creativity, as in finding new ways of expressing sexual and emotional needs upon reintegration help couples rebuild loving and respectful relationships that may result in being as close or even closer than prior to the deployment.

- Find ways to be close that do not involve sex. Do thoughtful things for each other such as taking over a chore, leaving an affectionate note, or caring for the children so your partner can have some private relaxation time. Small expressions of affection, such as a hug, kiss, or touch on the shoulder, can go a long way.
- Spend time together doing things you both enjoy. Plan a date night, participate in a sport or take a class together. Learning new things can bring you closer.
- Talk about your feelings, hopes, and desires when you and your partner are both calm and ready to listen. Communicating, even about difficult topics, can help you feel more connected. In addition, understanding each other's perspective can help you work together to identify solutions.

a lack of interest may be doing so to help bolster a partner with PTSD or depression.

- Partners may be confused when a service member with PTSD or other "invisible injuries" may alternate between sexual disinterest and sexual urgency. They may try to cope or escape by becoming overly focused on children, church or other activities.
- Respect your partner's need to have some alone time and space. This may in turn encourage emotional and sexual intimacy. Being supportive and recognizing each other's efforts toward building your relationship, no matter how small, is important.
- Invisible injuries may make it tougher to be spontaneous. Depending upon energy level and emotional availability, schedule intimate opportunities for times when both of you are more likely to be available and ready to participate.
- Help your partner redirect sexual, thrill seeking behaviors. Encourage release through physical exercise and safe recreational activities.
- *Get help.* Talk to your doctor, mental health provider or community-based counselor. They may have ideas, treatment options, to include helpful medications. PTSD, depression, substance misuse, or any other problem that is getting in the way of your relationship requires professional help. Seek couples therapy as appropriate.

Resources

http://www.vetcenter.va.gov/ http://www.vetcenter.va.gov/Military_Sexual_Trauma.asp http://www.militaryonesource.com/



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