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

# Reintegration and Intimacy: The Impact of PTSD and Other Invisible Injuries

Reintegration is about more than coming home. It is about resuming and establishing relationships that provide pleasure, comfort and support. Intimacy — the capacity to enjoy closeness and sexual togetherness — is an important part of reintegration whether a service member is single, married or married with children. Intimacy enhances personal health, relationship health and family health.

Many service members returning from deployment will 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 or violent behavior can compound these conditions. All of these problems can compromise intimacy reducing one's ability to enjoy pleasurable relationships and sexual activity.

### **Intimacy and You**

The symptoms of PTSD (described below) 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 (often expressed as 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.
- These symptoms can interfere with one's ability to 'let go', thus reducing the pleasure of sexual release.
- When service members feel in some way changed for the worse by their war experiences, they 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, or the need to engage in overly frequent or intense
- sexual behavior driven by a need to seek a high or rush similar to the emotions evoked by life and death combat situations.
- Others may be sexually controlling, focusing on sex rather than their partner's emotional needs, or engage in practices atypical of pre-deployment (e.g. pornography). In such cases, sexual stimulation takes 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 different or even frightening to their partners.

## Partners may also contribute to a lack of intimacy:

- Some may experience low sexual desire due to not feeling emotionally close to their returning partner, feeling angry at having been left alone for so long, or 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 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.

Continued; see Tips for Improving Intimacy

Resources for Recovery is developed by the Center for the Study of Traumatic Stress (CSTS). CSTS is part of the Department of Psychiatry, Uniformed Services University, and a partnering center of the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury.

# **Tips 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 end up being as close or even closer than prior to the deployment. Here are some suggestions:

- 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.

- 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 the release of 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/ http://couragetotalk.org







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