Post-Traumatic Stress Disorder
Post-Traumatic Stress Disorder (PTSD) is an anxiety disorder caused by experiencing traumatic events such as combat, disasters, terrorism, serious accidents, or physical or sexual assault. PTSD includes three types of symptoms:

1. Re-experiencing or reliving the trauma, such as having flashbacks, nightmares, or becoming very upset when reminded of the trauma.
2. Avoiding or staying away from places or people because they bring back the trauma, isolating from others, and/or feeling numb.
3. Experiencing increased arousal such as being on guard, being irritable, having trouble sleeping, or startling easily.

After a trauma, it is normal to have painful memories and to become upset when reminded of what happened. For most, these reactions lessen over time and thinking returns to normal. For some, however, reactions continue and are severe; they disrupt living, and beliefs remain negative and intense. How people respond to these early, normal reactions, in part, can determine if PTSD develops. For example, because memories and reminders of the trauma are painful, it makes sense to want to avoid them. However, too much avoidance can prevent a person from adequately dealing with the memories and reminders and making sense of what happened. This may lead normal trauma reactions to become more lasting PTSD symptoms.

Although most people recover after a trauma, it is not uncommon for people to develop PTSD. About 7% of the general US population will have PTSD in their lifetime, with women being more than twice as likely to develop it as men. Following a trauma, it can be expected that around 20% of women and 8% of men will develop PTSD. Certain types of trauma, such as sexual assault and combat, can cause even higher rates.

PTSD symptoms can appear very soon after experiencing a trauma. Other problems also commonly accompany PTSD. These include depression, other anxiety disorders, and alcohol and substance abuse. In fact, more than half of men with PTSD have alcohol problems and nearly half of women with PTSD have depression. PTSD can also reduce one’s ability to function in relationships, at work and school, and in leisure activities. In addition, people with PTSD may suffer physical symptoms and may be at increased risk of medical problems.

Developing PTSD is not a sign of weakness; anyone can develop PTSD, but it can be treated with talk therapy or medication, or a combination of both. The VA provides nearly 200
specialized PTSD treatment programs and each VA Medical Center has PTSD specialists who can assist in providing treatment for veterans.

A referral is usually needed to access the specialty programs. To locate a specialized program in the area, go to www2.va.gov/directory/guide/ptsd_flsh.asp not all VA facilities offer the same programs. A veteran’s doctor may help to decide which program is most appropriate.

If you are in a crisis, please call 911, go to your nearest emergency room or call the Veterans Crisis Line at 1(800)273-8255 (for veterans and service members, please press 1). If you just want to talk, call the 24/7 Veteran Combat Center at 1(800)927-8387 to talk to another combat veteran.

The Network of Care web site provides a comprehensive listing of mental health and other resources for service members, veterans and their families. Visit Network of Care at www.networkofcare.org and click on ‘Service Members, Veterans & Their Families in California.’ Choose the county of residence, and click on ‘Service Directory’ to find the services needed.

Traumatic Brain Injury
Traumatic Brain Injury (TBI) is a severe or moderate trauma to the head, where physical portions of the brain are damaged and functioning is impaired. The trauma can range from mild cases which cause limited functional impairments, such as a concussion or headaches. However, on many occasions, the trauma can be much more severe and cause balance problems, mood changes and memory loss.

TBI and PTSD have been called the signature wound of the conflicts in Iraq and Afghanistan due to the frequent and powerful blasts experienced in the field; an injury not commonly seen before.

Long and short-term effects of a TBI include:
- Memory loss
- Difficulty understanding others
- Loss of self-control
- Physical aggression
- Flash anger
- Difficulty expressing thoughts
- Apathy
- Poor judgment and reasoning
- Seizures
- Inappropriate sexual behavior
- Physical disabilities
- Impaired social skills
- Inability to recognize or accept limitations

Veterans who believe they may have suffered a TBI during their time in the military should go to http://www.dvbic.org/audience/service-members-veterans for more information.
Veterans who sustained any injuries during a deployment or at home that resulted in an alteration of consciousness may have sustained a mild Traumatic Brain Injury (mTBI) or concussion and should be evaluated. Please note that the mTBI screen alone does not provide diagnosis of mTBI; a clinical interview is required. The VA offers TBI screening to all veterans and active duty service members who have served in combat.

**Traumatic Brain Injury Services of California (TBISCA)**

Traumatic Brain Injury Services of California (TBISCA) is a group of seven sites located throughout California, whose mission is to ensure that adults with traumatic brain injury have the necessary services to enhance self-sufficiency. They focus on:

1. Information, referral and coordination
2. Community reintegration
3. Supported living
4. Vocational supportive services

To find a listing for all TBISCA sites in California, go to [http://www.bcftbi.org/tbi-resources/support-groups.asp](http://www.bcftbi.org/tbi-resources/support-groups.asp)