

Treating Traumatic Loss Related PTSD in Military Service Members and Veterans

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Overview

- Defining Traumatic Loss
- Traumatic Loss in the Military
- Assessing for Traumatic Loss
 - Persistent Complex Bereavement vs. PTSD
- Using CPT or PE to treat traumatic loss related PTSD

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Traumatic Loss

- Witnessed or learned about the death of a family member, friend, or unit member (Stein et al., 2012)
- Examples:
 - Witness friend shot by sniper fire
 - Witness friend killed by IED explosion on convoy
 - Learned of friend or family member suicide
 - Witness or learn of death of friend from training accident
 - Witness or learn about death of friend via friendly fire

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Traumatic Loss in the Military

- Witnessed or learned about the unexpected death of a family member, friend, or unit member (Stein et al., 2012):
 - 30%
- Witnessed a friend being shot or hit by IED during combat (Hoge et al., 2004):
 - Iraq: 22-26%
- Knew someone killed or seriously injured during combat (Hoge et al., 2004; Toblin et al., 2012):
 - Iraq: 86-87%, Afghanistan: 43%

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Military Culture and Traumatic Loss

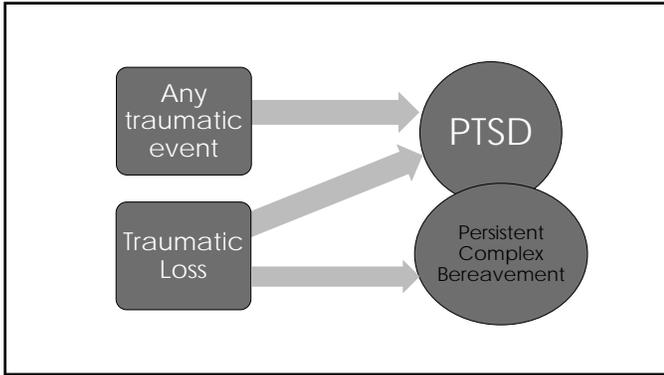
- High danger environment coupled with highly interdependent nature of military deployments
- Losing a service member from same unit can feel similar to losing a close family member
- "Battle Buddies" make promises to protect each other
 - "Never leave a man behind"
 - "Do your job and everyone will come home"
- Losing a loved-one while deployed (cannot provide support or say goodbye) can be traumatic

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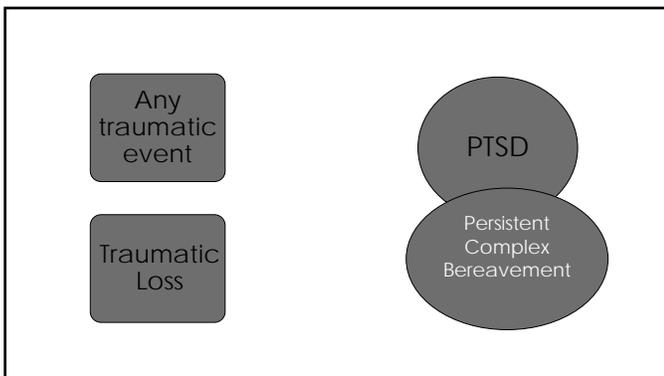
Assessing for Traumatic Loss and Persistent Complex Bereavement

- Trauma vs. PTSD
 - Traumatic Events are *events*
 - Posttraumatic Stress disorder is a *disorder*
 - ❖ Most people experience traumatic events, but most people do not develop PTSD
- Traumatic loss vs. Persistent complex bereavement disorder
 - Traumatic Loss is an *event*
 - Persistent complex bereavement is a *disorder*
 - ❖ Traumatic loss in the military is common, but not all people with traumatic loss experience persistent complex bereavement

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PTSD vs. Persistent Complex Bereavement

- PTSD
 - Reexperiencing a *specific event*
 - Hypervigilance/Hyperarousal
 - Changes in mood and cognition
 - Avoidance of internal and external reminders of a *specific event*
- Persistent Complex Bereavement
 - Intense feelings of loneliness
 - Yearning for, urge to join, and preoccupation with deceased person
 - Disbelief/Non-Acceptance
 - Experiencing pain that deceased experienced
 - Intense reactions and either 1. avoidance of reminders of the *deceased person OR*
2. seeking out reminders to feel close to the deceased person
- Overlapping symptoms
 - Numbness
 - Anger about the death
 - Difficulty trusting or connecting to others
 - Intense reactions and avoid memories of the *death*

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Grief vs. Persistent Complex Bereavement

- Normal Grief
 - Although painful, grieving is an important, helpful, and healthy human reaction to a loss
 - Pain fluctuates - generally reduces in frequency and intensity over time
- Persistent Complex Bereavement
 - An unhelpful reaction causing significant dysfunction
 - Pain is continuous and may worsen over time

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Assessing for Traumatic Loss and Persistent Complex Bereavement

- During the Trauma Focused Psychosocial Interview
 - "Give me a summary of what happened"
 - "Did you know anyone that was seriously harmed or killed during this event?"
 - "Tell me about your relationship with this person"
- Assessment Instruments
 - Persistent Complex Bereavement Inventory (Lee, 2015)
 - Traumatic Grief Inventory Self-Report (Boelen & Smid 2017)

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PASSWORD #1:
strong

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General considerations when working with traumatic loss

- Make sure the client has PTSD
 - Do not pathologize normal grief
- Grief focused therapy best match for someone with persistent complex bereavement but no PTSD
- Comorbid complex bereavement and PTSD is okay

Any traumatic event

→

Traumatic Loss

→

PTSD

→

Persistent Complex Bereavement

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Conceptualization of clients traumatic loss-related PTSD

What is keeping those with PTSD from traumatic loss “stuck” in the recovery process?”

- Difficulty accepting their loved one is “really gone”
- Difficulty accepting finite nature of human life and relationships
- Difficulty tolerating or accepting natural grief related emotions, such as sadness and loneliness
 - In military populations, often presents as chronic anger

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Overcoming common traumatic loss-related therapist barriers

- You can successfully conduct either CPT or PE even if the event was not directly witnessed
- You can use imaginal exposure or challenge stuck points on more than just “the event”
 - Learning about the death
 - Funeral/Role Call
 - Telling family members
- Don't be discouraged if there is an increase in sadness throughout treatment. For some, treatment begins the grief process.



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Goals when working with traumatic loss

- Tolerance of remembering the death, and the natural healthy emotions associated with it*
- Acceptance of the reality of the death
- Advancing focus beyond the moments of death to the way they lived their life
- Loss Focus to Restoration Focus

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What to listen for

Beliefs that perpetuate anger:

- Unfairness
 - They shouldn't have died because...
 - It should have been me instead because...
- Power and Control
 - I didn't keep my promise to "have their back"
 - Leadership should have protected him/her

These function to avoid natural and healthy sadness by using anger, which maintains PTSD

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What to listen for

Fear and avoidance of experiencing sadness and grief

- Emotional/Distress Tolerance
 - If I feel sad, I am:
 - a weak person
 - a bad soldier
 - If I allow myself to feel sad/cry
 - I will be depressed forever
 - I'll go crazy
 - Become unable to function



This avoidance inhibits processing, which maintains PTSD

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What to listen for

Fear and avoidance of experiencing positive emotions

- Intimacy Themes
 - There is no point in getting close to people because you will lose them
 - If I get close to others, I will let them down like I let my friend down
- Hopelessness Themes
 - The family's lives are ruined forever
 - Life is fragile and so there is no point to living
- Recovery Themes
 - See upcoming slides

This avoidance inhibits processing, which maintains PTSD and depression

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When clients stay stuck

Explore with the client what it might mean to your client to recover from PTSD

- If I recover from PTSD, I am no longer honoring my friend
- I shouldn't do things I enjoy because my friend no longer can
- If I no longer have reexperiencing symptoms, I will forget about my friend
- If I no longer feel guilty, I am betraying my friend



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Strategies when working with traumatic loss

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Questions to explore:

- What would the deceased person say to you now? What would they want for you?
- How can you honor the deceased person? How would they want to be honored?
- How would you want to be remembered?
- Thoughts on the afterlife and God (theirs and loved ones)
- What do you think it would mean if someone felt absolutely no sadness about the death of someone close to them?
- If you choose to not experience joy, who benefits?

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Strategies when working with traumatic loss

Provide Psychoeducation

- Identify and normalize natural grief-related emotions
- Discuss differences between sadness/grief and depression
- Remind your patient that the ultimate goal of therapy is not to feel only positive emotions
- Discuss how avoidance of grief/sadness functions to maintain PTSD

"Joy and pain are two sides of the same coin"

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Strategies when working with traumatic loss

Behavioral Experiments

- Explore ways that the client can honor their lost loved one
 - Doing things they liked to do, visiting their grave site, exhibiting a good quality that they possessed
- Practice approaching positive reminders of their loved one
 - Talking with others about positive memories of them
- Practicing behaviors that build on intimate relationships
 - Spending time, showing affection for loved ones
- Writing a letter or an imagined conversation with deceased person.

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Summary

- The nature of military life and deployments make traumatic loss a common experience for military service members
- Most people with traumatic loss will not develop persistent complex bereavement or PTSD
 - May develop PTSD only, PCB only, or both
- Natural emotions associated with grief are normal, healthy, and important to experience and process
 - Not everyone grieves in the same way
 - PTSD can inhibit the natural grief process
- PE and CPT can be used effectively to help someone recover from PTSD and comorbid PCB associated with traumatic loss

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Questions?

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