A Soldier’s return from deployment is a time of great excitement and joy. It may also be a time of stress, frustration, or disappointment if the reunion does not meet your hopes and expectations. All Soldiers go through an adjustment period from being a combat Soldier to being your son or daughter, parent or spouse. This adjustment period is normal.

After Operation Iraqi Freedom and Operation Enduring Freedom, your loved ones may have problems readjusting because they have memories of:
- Witnessing or being personally involved in death and destruction
- Seeing destroyed homes and dead bodies
- Seeing friends wounded or killed
- Being ambushed, receiving small arms fire or being exposed to improvised explosive devices (IEDs)

They may also have problems due to:
- Physical injury or illness
- Financial difficulties
- Relationship strains
- Feeling that they no longer fit in
- Dealing with different family routines or roles

WHERE TO GET HELP

- Active Duty Soldiers and family members can contact their unit chaplain, unit mental health team, or primary medical provider.
- Reserve/National Guard Soldiers and family members can contact VA Medical Centers and Vet Centers that provide veterans with mental health services. VA Medical Centers and Vet Centers are listed in the phone book in the blue Government pages. On the Internet, go to www.va.gov and click on the “Find a Facility” tab near the top of the page or go to www.va.gov/rcs.
- All family members and/or returning Soldiers can contact the Military One Source at https://www.militaryonesource.com and register for a free account.
  - Free confidential counseling (up to six sessions) in the civilian community is available.
  - Call U.S. toll free 1-800-342-9647
  - International: Access code + 800-3429-6477 (all 11 digits must be dialed)
  - Por Español llame: 1-877-888-0727
  - Korea: DSN 550-ARMY (2769)
COMMON REACTIONS

Many of the reactions listed below are normal for people who experience high stress situations. It is not uncommon for most Soldiers to experience some or all of the following reactions:

Physical
- Trouble falling asleep
- Oversleeping
- Waking up in the middle of the night
- Difficulty with sexual and nonsexual intimacy
- Fatigue
- Feeling jumpy
- Being easily startled

Emotional
- Feeling overwhelmed
- Depression
- Irritability
- Feeling numb
- Difficulty readjusting to family routines
- Difficulty reconnecting with family
- Discomfort being around other people or in crowds
- Frustration
- Guilt
- Crying spells

Cognitive
- Difficulty with memory
- Loss of interest/motivation
- Concentration problems
- Difficulty talking about deployment experiences
- Loss of trust

These normal reactions may be uncomfortable but in most cases are not causes for concern. Typically, the “common reactions” stop after 6 to 8 weeks.

FLASHBACKS AS A REACTION

- Flashbacks are episodes of reexperiencing the events that occurred during a deployment.
- During a flashback episode, Soldiers feel as if they are “back in the war” and may not be aware of their immediate surroundings.
- Although upsetting and uncomfortable, flashbacks are generally normal and not associated with a more serious problem UNLESS they persist for months or cause significant interference in a Soldier’s activities of daily living.

Flashbacks may occur in response to a “trigger” (for example a loud noise that sounds like a weapons discharge) or spontaneously without a trigger.

WHEN NORMAL REACTIONS BECOME PROBLEMATIC

- Problems that interfere with a Soldier’s ability to do the things that he or she needs to do in any important area of life (work, home, family, social, spiritual) are the clearest signs that a normal reaction after deployment may be turning into a more serious problem.
- If a Soldier’s distress persists longer than 6 to 8 weeks, it may be a sign that your loved one needs professional help.

SOMETIMES the problems are too big to resolve by yourself. Get help if any of the following occurs: atypical behavior, depression, prolonged sadness, suicidal or homicidal thoughts, aggressive/violent thoughts or actions, verbal abuse, reckless behavior/excessive anger, or alcohol/substance abuse.

If you are worried that your loved one is thinking about committing suicide or hurting himself or herself, remember the following tips:
- Act immediately!
- Be direct. Ask, “Are you thinking about hurting yourself?”
- DO NOT LEAVE YOUR LOVED ONE ALONE.
- Get help: Contact a chaplain, doctor, friend, family member, or call 911 or a hospital emergency room.

A suicidal person needs immediate professional help.