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A REDEFINITION AND EXAMINATION OF THE 'DELAYED STRESS SYNDROME'--ETC(U)

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**A REDEFINITION AND EXAMINATION OF THE 'DELAYED STRESS
SYNDROME' IN RETURNED PRISONERS OF WAR FROM VIETNAM**

P. J. METRES

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A Redefinition and Examination of the "Delayed Stress Syndrome"
In Returned Prisoners of War from Vietnam*

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Paper presented at the 84th Annual Convention
of the American Psychological Association
Washington, D.C., 7 September 1976

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Abstract

This study examines the post-return adjustment of the returned POW (RPW) as well as his wife's adjustment two years subsequent to his return to see if a delayed stress syndrome (DSS), in terms of family adjustment, is present at that point in time. Results indicated no significant increase in adjustment problems for either husband or wife from year one to year two. However, it must be noted that the sample was comprised of 45 intact families only; thus, no definitive statement as to whether DSS exists can be made for the total RPW population.

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Introduction:

Reports in the literature of the "delayed stress syndrome" in the Vietnam era veteran have emphasized the psychiatric and psychological problems upon return of the veterans to the United States. Horowitz (1976) has noted that often the veteran appears to make a satisfactory adjustment after return; however, following a latency period, he is faced with a series of frightening nightmares, anxiety attacks and a host of depressive symptomatology. A similar array of symptoms in former Vietnam veterans has been called the "post-Vietnam syndrome" (PVS).

Studies of veterans to date have all but eliminated any reference to the returned prisoner of war (RPW) as a returning Vietnam veteran (Vietvet), have not been longitudinal in design, have tended to set aside or ignore the importance of the pre-morbid personality in explaining the delayed stress syndrome (DSS) and have treated the veteran's military experience as a uniform independent variable.

The present investigation will examine the post-return adjustment of the returned prisoner of war. Furthermore, since residuals from a potentially traumatic experience such as combat and captivity have been reported to have ramifications for other family members, focus has also been placed on the wife's post-return adjustment. In this way, a broadened examination of the DSS in terms of family adjustment may be reported.

The purpose of this study is to answer the following questions:

1. Is there evidence for a "delayed stress syndrome" in returned prisoners of war and their spouses?
2. To what extent does the captivity experience in Vietnam account for variability in the RPWs' and in their spouses' adjustments one and two years post-return?
3. In what way can the "delayed stress syndrome" definition be broadened to include adjustment to the family?

This study is a preliminary investigation and will examine the veteran's experience in Vietnam (captivity), his family's adjustment during the prolonged separation, his psychiatric functioning at the time of his return to the U.S., and various reintegration factors, to determine whether there is any relationship between those variables and other measures of adjustment (interviewer assessment) at one and two years post-return.

REVIEW OF THE LITERATURE:

Military psychiatrists in Vietnam (Bourne, 1970) did not encounter the frequency of major stress syndromes that were noted among soldiers in World War II (Grinker & Spiegel, 1956). Bourne (1970) reported fewer signs and symptoms of traumatic neuroses than anticipated. However, Strange and Brown in 1970 found that 65 percent of men being treated at a Naval Hospital for psychiatric disorders displayed evidence of a depressive syndrome. Borus (1974) found that 25 percent

of Vietvets returning to a stateside post experienced recurring nightmares or obtrusive thoughts. Forty percent felt more irritable and short-tempered although these symptoms appeared to be a temporary phenomenon. Nace et al. (1976) found one-third of the 202 participants in their study fell within the clinically depressed range on the Beck Depression Inventory. Many studies have shown that the Vietvet experienced considerable difficulty in adjusting to life in the U.S. Borus (1974) noted that the 765 Vietvets in his study reported difficulties in adjusting to the often changed and disrupted family situation found upon his return. Figley (1975) and Polner (1971) indicated that family members, on the other hand, claimed that their son/brother/husband (Vietvet) had themselves changed since the Vietnam experience.

Few close observers of the Vietvet population can deny that many clinical problems were presented after the men's return. Horowitz and Solomon (1976), however, have noted that " ... stress response syndromes often begin only after termination of real environmental stress events and after a latency period of apparent relief. They defined DSS as intensive thoughts, emotional attacks, and nightmares which may be precipitated by compulsive repetitions of past trauma or by arousal of new conflicts and damage to defensive-adaptive fantasies about the patriotic purposiveness of the vet's "war work" or wonderful anticipations of fantasied homecomings.

Delayed stress syndromes have not yet been reported in former POWs of the Vietnam War. However, World War II and Korean War POW's had an increased mortality and morbidity rate even after five or more years post-return. Nefzger, 1970, noted that RPWs from Japanese PW camps and Korean PW camps had a significantly higher rate of death and hospitalization for psychiatric difficulties than did a comparable group of survivors of German PW camps and a control group of contemporaries who served in combat.

Difficulties in adjustment in RPWs from Vietnam have been reported at great length in McCubbin, Dahl, Metres, Hunter, and Plag (1974); McCubbin, Dahl, Lester and Ross (1975); Metres, Plag, Ross and Phelan, (1975); and Hunter, McCubbin and Dahl, (1975). While a definite link between the captivity experience and post-return adjustment has been shown, Gelford (1975), has suggested that psychiatric diagnoses in Army RPWs were partially traceable to pre-Vietnam health and adjustment. Nonetheless, research on RPWs has demonstrated that the stresses of separation and captivity have had a considerable impact on the families themselves. Because RPWs families did pay an emotional price during separation and reunion, they too must be included in a redefinition of the delayed stress syndrome.

What is lacking in the present, somewhat narrow definition of DSS is the inclusion of the other members in the family system. In the model that I am proposing is the hypothesis that a change in

behavior of the RPW or Vietvet may have psychological consequences for the whole family. Therefore, we will focus this investigation on both spouses in the Veteran former-prisoner family. In past major conflicts married returned prisoners of war were in the minority. In the Vietnam War, married POW's far outnumbered single returnees. Thus, married POWs are more typical of the Vietnam returned POW and represent the majority of the Vietnam POW population.

Sample and Methodology:

A sample of 45 RPW presently intact families who are participating in a five-year longitudinal investigation by the Center for POW Studies comprised the subjects for this particular study. The sample included 45 men (36 Navy, 6 Army, and 3 Marine Corps RPWs) whose mean age was 33.1 years at time of captivity and whose mean length of captivity was 56.4 months. Their wives averaged 37.8 years of age in 1975. Their children numbered 115 with a mean age of 13.4 years in 1975. There was an average of 2.6 children per family. The criteria for their selection were as follows:

1. Returnees completed the Returnee Captivity Questionnaire in the hospitalization phase of Operation Homecoming (1973).
2. Returnees completed the Survey of Returned Prisoners of War, Section G-Family Adjustment in 1974 (on post-return).
3. The families were interviewed in both 1974 (one year post return) and 1975 (two years post-return) by the professional staff of the Center for POW Studies.

4. The families had at least one child who had endured a portion of the separation period.

The representativeness of the original group from which this sample of 45 families was drawn has been previously established (McCubbin, Hunter, and Dahl; 1975). On the whole, differences between subjects in the present investigation and the McCubbin, Hunter and Dahl (1975) study were not pronounced and were considered to be such that they would not result in data biases.

It needs to be emphasized that this sample was made up entirely of families with children, and all families were still intact two years post-release. In this sense, it cannot be said to be a random sample.

Data were obtained from four basic sources:

- (1) Interview data collected using two instruments, the Family Assessment Form Wife (FAF)¹ and the Annual Family Development Inventory (AFDI)²;
- (2) A psychological questionnaire completed by the returnees at the time of their repatriation and pertaining to the stresses endured in captivity;³

¹Family Assessment Form (FAF) - a 177 item structured interview schedule used with the wife during the period April, 1972 - January 1973.

²Annual Family Development Inventory (AFDI) - a structured interview schedule used March, 1974 - December, 1974. Revised form was used July, 1975 - October, 1975.

³Returnee Captivity Questionnaire (IMEF, Form 6), a 35-item inventory administered at hospitals during post-release phase.

- (3) A questionnaire on family adjustment completed by the men 12 to 16 months following their return;⁴ and
- (4) Official military personnel records containing general background and demographic information.

Predictor Variables:

The particular variables examined for their relationship to post-return adjustment in this investigation were chosen either because they had been identified as significant predictors of adjustment in previous studies (McCubbin, Dahl, Lester, and Ross, 1975; Dahl and McCubbin, 1974), or because they were consistent with the conceptual model of family adjustment to reunion and reintegration.

Measures of these variables were collected during three specific time periods which were:

1. Pre-captivity, e.g., rank, length of marriage, age.
2. Captivity (husband) and separation (wife), e.g., length of captivity, frequency of harsh treatment by the captor, and wife's assessment of quality of the marriage during separation.
3. Reunion, e.g. husband-wife assessment of the degree of satisfaction with their reunion.

⁴Survey of Returned Prisoners of War - Section G, a 62-item questionnaire developed under the auspices of the Air War College in collaboration with the Center for POW Studies, sent to the returnees 12 to 16 months following release from captivity.

Adjustment Criteria

The measures of personal adjustment for the RPW and his spouse were derived from the family follow-up interviews completed one and two years post-return, that is, in 1974 and 1975, and these ratings were recorded in the Annual Family Development Inventory.⁵ Upon completion of each interview (which lasted from 2-5 hours in the family's home), trained interviewers reviewed the interview schedules, and, based upon all the material they had received, including their own clinical impressions, assessed the adjustment of the individual family members. The derived assessment was scored on a 1 to 5 scale for each family member, a score of "1" representing "very poor" adjustment while a score of "5" represented "very good" adjustment. An interjudge rater reliability of .92 was obtained.

Data Analysis:

Pearson product-moment correlations between the various pre-captivity, captivity/separation, and reunion variables and the first and second-year personal adjustment measures for both spouses were then computed to determine the degree of relationship between them.

⁵The Annual Family Development Inventory - a comprehensive, structured interview schedule which covered basic family history, marital adjustment, child adjustment, family environment, role responsibilities, and a family interaction task.

Results

1. RPW Husband's Adjustment one year post-return:

The mean adjustment was 3.7 (S.D.=0.77) on a five-point scale, denoting a slightly better than "satisfactory" adjustment. Five demographic, separation, captivity, and reunion variables correlated significantly with the RPW's first-year level of personal adjustment:

- a) rank ($r = .33$); i.e., the higher the rank, the better the level of personal adjustment.
- b) husband-wife reintegration score ($r = .60$); i.e., the better the husband-wife reintegration, the better the RPW's level of personal adjustment.
- c) frequency of harsh treatment by the captor ($r = .37$); paradoxically, the harsher the treatment, the better the RPW's level of personal adjustment one-year post-return.
- d) quality of marriage during separation ($r = .64$); i.e., the better the wife's perception of the marriage during the separation period, the better the RPW's personal adjustment one-year post-return.
- e) interviewer's recommendation that wife engage in professional counseling during separation ($r = -.58$); i.e., if the wife had been recommended for counseling, the one-year adjustment of the RPW was lower than if she had not been recommended for counseling during his absence.

Regression analyses showed that the variables which were uniquely related to the RPWs' first-year personal adjustment were: (1) rank

and (2) quality of the marriage during separation, as perceived by the wife.

2. RPW Husband's Adjustment Two Years Post-Return: The mean adjustment score after two years was found to be 3.6 (S.D. = 0.93). Four variables were significantly related to this criterion:

(a) length of marriage - the longer the marriage the better the adjustment.

(b) education of the RPW - the greater the amount of education, the better the adjustment.

(c) commissioned officer versus enlisted status of the RPW - commissioned officers were rated as having better adjustments.

(d) age - the older the RPW, the better the adjustment.

Regression analyses showed that officer versus enlisted status was the only variable uniquely related to this criterion.

3. Wife's Adjustment One Year Post-Return: Wives received a mean adjustment rating of 3.6 (S.D. = 0.91) one year post-return. Length of solitary confinement, number of children, frequency of harsh treatment of the husband by the captor, and length of husband's captivity were all significantly related to one-year post-return measures of wife's adjustment. Number of children ($r = -.32$) was the only variable uniquely related to the criterion, i.e., the greater the number of children, the lower the wife's one-year post-return adjustment rating.

4. Wife's Adjustment Two-Years Post-Return: After the second year post-return, the mean adjustment score for the wives was 3.6 (S.D. = 0.78).

Only one variable, frequency of harsh treatment by the captor, was found to be uniquely related to the wife's adjustment rating two years subsequent to her husband's release ($r = .35$). Paradoxically, the greater the frequency of captor harsh treatment the better the adjustment of the wife two years post-return.

Discussion

The data reported on the returned prisoners of war in this study were gathered longitudinally - during the period of confinement and separation, during the initial reunion and reintegration period, and one and two years post-return. These data do not show the presence of a "delayed stress syndrome" in RPWs and their spouses one and two years after return, using measures of husband/wife adjustment as indicators. Earlier investigations (Metres, 1975; Metres, Plag, Ross, and Phelan, 1975; Hunter, 1975), however, have indicated a relationship between post-release adjustment difficulties and captivity experiences. However, prior investigations were based on data from psychiatric examinations performed during the initial hospitalization after the POWs returned from captivity, rather than one or two years following release.

One finding, that harsh treatment in captivity is associated with later better adjustment runs contrary to the vast array of Post-Vietnam Syndrome studies and reports. Gelfond (1975) goes so far as to suggest that difficulties in adjustment in Army RPWs can be primarily explained by pre-captivity (Vietnam experience) variables alone. Several profound differences between the experiences of the RPWs and

Vietnam veterans who were not captured may explain this discrepancy between the two groups. First, POWs were by and large removed from traditional combat roles, i.e. carrying weapons, flying aircraft, etc., yet were engaged in intense psychological warfare face-to-face with their enemy (captor). Secondly, the POWs who returned were primarily commissioned officers, older in age, married, with children, more educated, and skilled in aviation. Thus, in contrast, most of the Vietnam veterans were younger, primarily draftees, single, less educated, and less experienced in military specialties. In other words, the RPWs had more experience with life in the military, more education, were in a higher socioeconomic class, and were more committed to a military career. Third, and perhaps most important, RPWs were treated as the only "heroes" of the Vietnam War. From the intensive and extensive planning for their return, with the participation of relatives, former POWs, and health professionals, as well as senior Defense Department officials, to the extensive follow-up medical examinations and services provided for the RPWs, they received many benefits for their survival from the Vietnam experience. It would be extremely difficult to assess the impact of the financial benefits, increased promotions, selection for key positions, including command, post-graduate education, and choice of duty following release from captivity on the morale and subsequent adjustment of the RPWs. If these benefits are added to the intense media coverage of the return

of the POWs and the hero treatment they received from the American public at large, it would be impossible not to note a profound difference in the treatment Vietnam veterans as a whole received when compared with a small group of RPWs. The return of the Vietnam veterans (as noted in the Journal of Social Issues, 1976), was met at best with apathy, and at worst with hostile recrimination from friends and colleagues.

Thus, our data suggest that clear evidence of a "delayed stress syndrome" in this group of Vietnam veterans, at least for the present, does not exist. Both the RPWs and their spouses in this particular sample appear to have made a reasonably satisfactory overall adjustment to their life situations, and, in general, the RPWs seem to be back into the mainstream of their careers.

It is important to note that Nefzger (1970) and Beebe (1974) have noted an increase in death and psychiatric hospitalization rates occurring at about a five year period after captivity; this point in time has not yet been reached for the Vietnam RPW population.

Summary and Conclusions:

This investigation sought to answer the following questions:

- (1) Is there evidence for a "delayed stress syndrome" in returned prisoners of war and their spouses?
- (2) Are certain captivity and separation experience variables related to the RPW and his spouse's adjustment one and two years post-return?

Nefzger's findings on World War II and Korean War ex-prisoners of war which indicated a significantly higher mortality and morbidity rate for former captives of Japanese and Korean prison camps were performed retrospectively and not prospectively. Thus, a delayed stress syndrome may manifest itself in the RPW family population at some future time, but this issue must be continually researched to determine whether the cumulative effects of the Vietnam experience will have consequences for the RPW population.

The apparent factors accounting for the relative absence of the 'delayed stress syndrome' in these RPWs can perhaps be explained by a number of factors:

- (1) differing nature of the Vietnam combat experience from captivity;
- (2) increased age, experience, intelligence, military training in the RPW sample over Vietnam veterans as a whole;
- (3) well-planned and executed annual health and psycho-social follow-up examinations of the RPWs and a sample of their spouses;
- (4) hero status accorded to the RPWs with attendant financial, military, and psychological benefits.

The select nature of the sample (intact families, with children and only Army, Navy and Marine Corps returnees) also makes it difficult to make any definitive statement as to whether the DSS exists in the total RPW population. However, continuing preventive health and research programs, including a study of comparable Vietnam veterans

and their families, are required to monitor the yet unknown long-range effects of Vietnam incarceration on those who have fought and were captured, and their loved ones who waited for them, not knowing whether or not they would, in fact, ever return.

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