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**Combat-related Posttraumatic Stress Disorder  
and Interpersonal Functioning  
in Veterans of the Vietnam War**

**A thesis presented in partial fulfilment  
of the requirements for the degree  
of Doctor of Philosophy in Psychology  
at Massey University**

**Carol Margaret Vincent**

**1994**

Data reported in this thesis was collected as part of a national survey investigating the mental health of a community sample of New Zealand Vietnam War veterans. This thesis investigates the relationship between combat-related PTSD, interpersonal functioning and coping in these veterans.

The results of this study confirm findings from previous research showing that a significant proportion of Vietnam War veterans are likely to have PTSD and that these veterans are likely to be presenting, some twenty years after their combat experiences, with a complex set of psychological, social, and interpersonal problems. The results also confirm studies showing that PTSD veterans, compared to non-PTSD veterans, are more likely to utilise coping strategies related to denial and disengagement in their attempts to deal with ongoing stress.

In the present study, the poorer interpersonal functioning of veterans with PTSD was revealed primarily in increased interpersonal problem severity, rather than in poorer family functioning or lower dyadic adjustment. These results support a mediating model which proposes that PTSD is related to a range of problems which these veterans encounter when initiating and maintaining interpersonal relationships and that these problems are manifested in lower levels of family functioning and poorer dyadic adjustment.

The strength of the relationship between PTSD and interpersonal problems appears not to be affected by variables such as initial combat experience, other

dimensions of interpersonal functioning (family functioning and dyadic adjustment), concurrent diagnoses of anxiety and or depression, and the characteristic coping styles of the veterans. These results are consistent with the inclusion, in the DSM-III-R definition of PTSD, of symptoms of diminished interest in significant activities, detachment or estrangement from others, and constricted affect.

The interpersonal problems reported by these veterans and the apparent link to poorer family functioning and dyadic adjustment suggests that it is important to develop a comprehensive treatment plan that includes attempts to improve individual interpersonal skills as well as attempts to reduce the interactional problems in the family and dyadic relationships of the veterans.

## ■ Acknowledgements

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Special thanks to Associate Professor Nigel Long for his outstanding supervision skills. His advice, support, encouragement and, above all friendship made a challenging task possible. My appreciation also goes to Ross Flett and Kerry Chamberlain for their support and valuable advice. Thanks also to Kerry and Nigel for allowing me the autonomy and flexibility which enabled me to complete this task more easily.

I am grateful to all the Vietnam War veterans who made this research possible by so willingly giving their time and sharing their experiences. This study was supported by a research grant from the New Zealand War Pensions Medical Research Trust Board and I would like to acknowledge the assistance of Margaret Faulkner of the New Zealand Income Support Service.

Thanks to my friends and family who have given me unfailing support and encouragement, and especially my mother for always believing in me and teaching me that I can do anything by believing in myself.

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Over the past fifteen years an extensive literature has emerged relating to the condition known as posttraumatic stress disorder (PTSD). A great deal has been written about the history, etiology, epidemiology, effects and treatment of the disorder, and although PTSD may develop following a range of traumatic events, much of the work has been concerned with the disorder in combat veterans.

This thesis focuses on PTSD as it pertains to combat veterans, and investigates the relationship between combat-related PTSD and interpersonal functioning and coping, aspects of the disorder which have received little attention to date. The data utilised in this study was collected from a community sample of New Zealand Vietnam War veterans.

Prior to examining potential outcomes of PTSD, it is important to have an understanding of the definition and diagnostic criteria of PTSD, and of what distinguishes PTSD from other mental health disorders. The definition and model of PTSD most commonly utilised is that outlined by the American Psychiatric Association in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV: American Psychiatric Association, 1994). The fourth edition of this manual was published in recent months and was not available when the research reported in this thesis was undertaken. This research utilises the definition and diagnostic criteria for PTSD as outlined in the previous edition, DSM-III-R (American Psychiatric Association, 1987). The first chapter of the thesis presents an overview of the method for classifying mental disorders as presented in the manual and discusses the definition and diagnostic criteria for PTSD specified in DSM-III-R.

While the concept of PTSD is relatively new, the concept of psychological trauma arising from battle is not. The first part of chapter two considers early conceptualisations of combat trauma and the subsequent development of the concept of combat-related PTSD. Recent literature and research concerned with combat-related PTSD is then reviewed, with a focus on the prevalence and etiology of the disorder, concurrent diagnoses, and the association between combat-related PTSD and interpersonal functioning and coping.

The data utilised in the study was collected by mailed questionnaire. The full research methodology is detailed in the third chapter. This includes sample selection, research procedure, and questionnaire development.

Data analyses focus on the relationship between PTSD, coping, and three dimensions of interpersonal functioning; interpersonal problems, family functioning, and dyadic/marital adjustment. The results of analyses, together with a sample description, are presented in chapter four.

In the fifth and final chapter, the major findings from this study are discussed in relation to previous research on interpersonal functioning and coping in combat veterans. Methodological limitations of the study, and possible research and treatment implications suggested by the results are also discussed.

# ■ 1: Diagnosing and Classifying PTSD

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