

Vietnam and the Plight of the Greek-American Family

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Maria and George Vlahos had three sons. They lost one in Quang Tre and fear they are losing another one to PTSD or Post-Traumatic Stress Disorder, the current psychiatric label given to a syndrome known as “shell shock,” “combat fatigue,” or “war neurosis.”

When their first *pallikari* came home in a box, Maria and George made their second son, Bill, promise not to enlist. But immediately after his brother’s funeral, Bill signed up for combat duty in Vietnam. With his brother’s baptismal cross in his pocket, Bill arrived in Vietnam unconsciously searching for his dead brother and determined to kill as many “gooks” as possible to avenge his brother’s death. He fought with a ferocity which earned him the respect of many comrades, even those who were card-carrying members of the Ku Klux Klan and who had initially rejected him because of his dark features and curly hair.

Bill came home without a scratch, but with flashbacks, depression, anxiety attacks, and an intense fear of crowds. Almost any unexpected sound, e.g., popping popcorn or helicopters flying overhead, could send him into a state of combat readiness. Often, he slept on the floor with the weapon by his side.

To this day, Bill does not drive in the rain, attend barbecues, or eat *souvlaki* or *pilafi*. Hot wet weather, burning meat and of course, rice, remind him of Vietnam. In his nightmares, dismembered bodies and teeth without the gold fillings float in the air and dead VC (Viet Cong) come back to life—angry at him. As if pursued by the Furies, Bill still hears the cries of dying men, women, and children.

Bill went to Vietnam an “emotional Greek” but came back feeling “dead” inside. In Vietnam he, like other grunts, learned to suppress his feelings of grief, rage, and helplessness in order to survive. At the same time, however, Bill learned to stifle his feelings of love, tenderness and joy. This emotionally neutral state was entirely appropriate for combat duty; however, it has wreaked havoc on Bill’s civilian life, where emotional responsiveness is necessary in order to

maintain social and family ties, especially with his emotionally intense Greek-American relatives.

This horrible feeling of being “dead” inside, of being devoid of any emotion save for anger or despair, is called emotional or psychic numbing. It is a core symptom of PTSD and is common to survivors of a wide variety of traumas. Psychic numbing, along with other symptoms of PTSD (which can include alienation, cynicism, rage reactions, survivor guilt, and insomnia) can be suffered by any individual who has felt helpless in a situation of great danger or who has experienced an event or a series of events of such magnitude of pain and horror that they would overwhelm almost anyone’s natural coping abilities.

PTSD was officially recognized as a psychiatric problem only in 1980. Yet PTSD is as old as man. The ancient Greeks wrote about it, as did Shakespeare. PTSD or PTSD-like symptoms caused the evacuation of over 10% of enlisted men during WW1 and thousands more during WW2. Some Korean War veterans still suffer from PTSD, as do survivors of natural traumas, such as earthquakes, floods, fires, and hurricanes. PTSD is also prevalent among survivors of the Nazi concentration camps, prisoners of war, refugee children, and victims of physical or sexual assault. Even individuals who, although they do not experience trauma directly, witness trauma on a daily basis, e.g., police officers, firefighters, and rescue workers, can develop PTSD.

Because of his PTSD, Bill has chosen not to marry. So much of his psychic energy is bound up dealing with his war experiences that it is difficult for him to contemplate the emotional demands of marriage and parenting. Bill also finds it difficult to be emotionally close to others, even his own family. Family events, so central to Greek-American life, are extremely stressful for Bill. Even though he loves his relatives and friends, he must sometimes avoid baptisms, weddings, Easter dinners, and other celebrations.

Being with his more prosperous relatives usually makes Bill feel like a failure and ignites his rage at the war, first, for interrupting his career and secondly, for emotionally scarring him to such an extent that he has been unable to pursue his professional and personal goals with the fervor and enthusiasm inherent to his Greek heritage. Bill is also angry that until recently, he was perceived by the media and the public as more like a criminal than a patriot.

Over 58,000 Americans died in Vietnam, among them at least 85 Orthodox Americans (as registered by the Archdiocese in New York.) Many more, however, are dying emotional and spiritual deaths here at home as they suffer daily from PTSD. Some authorities estimate the number of vets in need of psychiatric help may reach as many as 1.5 million. Based on this figure, an estimated 900,000 Vietnam wives and partners and approximately 1,098,000 children may also be affected, not to mention the approximately 4.7 million members of the veterans' extended family.

These family members are the secondary victims of the war. Greek-American parents who lost sons in Vietnam underwent the grieving process and are often still in mourning. However, parents who see their living son stunted in his personal and professional development due to PTSD are also in mourning. "I know what it is to have a 'normal' son," says Maria Vlahos, "and to see Bill crippled by the war fills me with an unending sorrow and rage—rage at the government for not helping him more, rage at the hippies who spit on Bill when he came home, and rage at my friends and relatives who look down on him because he is still tormented."

Like other Greek-American parents whose son suffers from PTSD, Maria and George Vlahos are constantly looking for ways to help their son. Although they are sometimes angered by Bill's intense need to be alone, they realize that they are lucky to even have a relationship with their son. Some of their Greek-American friends, e.g., have seen their vet sons flee to self-imposed exile and other states or even other countries. The Vlahos's are also grateful that their son does not suffer the tumors, bleeding, and vomiting commonly associated with Agent Orange contamination. Neither do they have to bear the grief of having Agent Orange deformed grandchildren as do some Greek-American families.

While Bill has chosen to remain single, some PTSD afflicted Greek-American vets are married. In these homes, the wife lives under enormous stress, especially if her husband has yet to seek help. Greek American vets are often reluctant to turn to "psycho" doctors or government institutions for help. Consequently often the wife functions as the Vet's therapist and healer. Often it is she and she alone who holds and soothes the vet during his nightmares, flashbacks, and anxiety attacks. Yet it is usually the wife who bears the brunt of the vet's unresolved angers from the war.

Verbal abuse is a common complaint among help-seeking Vietnam wives. Other common concerns include:

1. Coping with the veteran's hypersensitivity—his tendency to overreact to his wife's statements and behavior and to interpret them as insulting to him.
2. Loneliness and social isolation. (Often the vet feels the need to isolate and shuts out his family. Or he may be overly protective of his family and not permit them to socialize freely.)
3. Fearing to speak to the veteran.
4. Feeling confused about which problems are Vietnam- related and which are not.
5. Self-doubts created by the veteran's emotional instability or the family's financial problems.
6. Feeling as if she has lost her identity in constantly responding to the veteran's needs and many family crises.
7. Coping with the veteran's outbursts of anger, such as destruction of family property.

In Greek-American homes the wife may feel special pressure to keep her husband's problems a secret and to present an image of a happy family life to her relatives and other Greek-Americans. Typically, the wife feels that if she reveals the truth about her life, she might be blamed for her husband's unhappiness or perceived as "crazy" for staying with him.

While filing for divorce is always an option, the Greek-Americans encountered by the author have deeply internalized the traditional value of the sanctity of marriage and are reluctant to disrupt their homes. Rather these women have sought for ways to save their marriages and help their children. In counseling, however, they learn that they are neither the cause, nor the cure, for their husband's PTSD. Furthermore, while there are many things wives and families can do to help, getting an afflicted vet to a counselor still remains the most important step.

Over time, some wives have developed symptoms similar to their husbands. For example, they begin to have their husbands' nightmares and insomnia, jump at the sound of a car backfiring, or easily become irritable around others. In some cases, children have also adopted their father's symptoms and/or become preoccupied with their father's war experiences.

E.g., in one instance, a Greek-American boy became almost totally obsessed with Vietnam. He saw the movie *Platoon* so many times that he practically memorized the script. This child's glamorization of the war was his way of being close to his emotionally distant father, as well as a way of escaping from some of his own emotional and school problems.

Therapy was necessary to help this boy distinguish his father's real war experiences from the movies and to help him improve his social and educational skills. Therapy was also necessary to help the father "let go" of his tight control of the family. In this home, as in several other Greek-American PTSD afflicted homes, the vet was highly protective of his family. E.g., he would wake up three or four times a night to make sure his children were safe, and triple checked their seatbelts. He was also wary of letting anybody in the family stay out late, even his grown sister.

Obviously, this vet loved his children very much, yet, like many PTSD afflicted vets, he had trouble showing that love directly. In addition, because of his high levels of internal stress, he often needed to be away from his children. Their noises and their demands were sometimes just too much for him. This does not mean that this vet rejected his children, but often his children interpreted his need for distance as a personal rejection, or as a sign that they were not "good enough".

Low self-esteem and developmental delays in school are perhaps some of the commonly reported problems among children from PTSD afflicted Vietnam homes. Another common pattern is for one of the children to assume a caretaker role vis a vis their father. Just like their mother, they may feel that it is up to them to make their father happy. Often, they are highly protective of their father and make excuses for his behavior to their friends and relatives. Some willingly restrict their social lives and other interests in order to stay at home with their father. While such dedication to the father is admirable, it can also function to stunt the child's personal development.

This article is based on counseling experiences with and research on help-seeking Vietnam vets and their families, not on the Vietnam vet population as a whole. Not all vets suffer from PTSD and those who do, do not necessarily suffer in the same ways, or to the same extent. Many seemingly well-functioning high-achieving vets suffer from relatively mild cases of PTSD or somehow manage to contain their symptoms so that they do not "show" or drastically affect

their professional and personal lives. Yet the stress of having to “hide” one’s problem creates additional problems.

While many vets are reluctant to seek help because seeking help violates their warrior pride, this is especially the case of some Greek-American vets whose ethnic tradition highly values self-reliance and tends to view emotional problems as signs of “weakness.” Some vets, like their families, are still in denial about their PTSD. Then *eina tipota* or *tha perasi* (it’s nothing or it’ll pass), they often say.

But time does not always heal every wound, and PTSD is a progressive problem. Left untreated, the vet's symptoms only worsen over time. Any vet or family member who suspects that PTSD may be affecting their life can obtain information and help at one of our nation’s Veterans Outreach Centers especially designed for combat vets and their families.

The author’s book, *Vietnam Wives: Women and Children Surviving Life with Veterans Suffering from Post-traumatic Stress Disorder* (see www.matsakis.com for information) contains a complete listing of these centers, as well as other helping agencies. The book also examines the effects of PTSD on marital communication, sexuality, and children and provides concrete suggestions on coping with anger, depression, family violence, alcoholism and drug abuse, eating disorders, and suicide crises.