

One in six US veterans of Iraq war suffers trauma disorders

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Nearly a thousand US soldiers have died in the predatory wars in Iraq and Afghanistan. Thousands more have been maimed. For those who escape physical injury, however, there is the mental stress caused by combat and the specific stress of fighting in colonial-style wars against hostile populations.

According to researchers, large numbers of American soldiers returning from combat in Iraq and Afghanistan show signs of post-traumatic stress disorder (PTSD) and other psychiatric difficulties. The average age of the fighting personnel is just 19, but the prognosis for a healthy life is bleak.

A study published July 1 by the *New England Journal of Medicine* (NEJM) found that one in six soldiers returning from Iraq was suffering from a variety of emotional problems, with lower levels of mental disabilities exhibited among those who served in Afghanistan. The report, conducted by a team from the Walter Reed Army Institute of Research in Washington, D.C., is the first such assessment of war-related psychiatric disorders made while military action is underway. Most studies in the past that have focused on the effects of combat on mental health were performed years after the fighting had ended.

“Research conducted after other military conflicts has shown that deployment stressors and exposure to combat result in considerable risks of mental health problems, including post-traumatic stress disorder, major depression, substance abuse, impairment in social functioning and in the ability to work, and the increased use of health care services.... A problem in the methods of such studies is the long recall period after exposure to combat. Very few studies have examined a broad range of mental health outcomes near to the time of the subjects’ deployment,” according to the investigation.

The all-volunteer forces in Iraq and Afghanistan have been involved in the first sustained ground combat undertaken by the US since Vietnam. The researchers surveyed more than 6,000 American soldiers in the months before and after combat in the two countries. Nearly 17 percent of those who

fought in Iraq showed symptoms of PTSD, major depression or severe anxiety, versus 11 percent for those who served in Afghanistan. The higher rates of psychiatric trauma reported by troops returning from Iraq reflected a greater exposure to combat, with some 90 percent of the soldiers in Iraq having been in a firefight, compared to 31 percent in Afghanistan.

“For all groups responding after deployment, there was a strong relation between combat experiences, such as being shot at, handling dead bodies, knowing someone who was killed, or killing enemy combatants and the prevalence of PTSD,” stated the NEJM researchers.

The NEJM study is not the first indicator of major problems. In February, Mark Benjamin of UPI reported that as many as one out of ten US soldiers being evacuated from Iraq and Afghanistan to the army’s biggest hospital in Europe, the Landstuhl Regional Medical Center in Germany, was being sent there for psychiatric or behavioral health issues.

The NEJM issue also carried an editorial by Dr. Matthew J. Friedman, director of the Department of Veterans Affairs at the National Center for Post-Traumatic Stress Disorder. Friedman discussed the relationship between mental trauma and the nature and character of a war.

“Indeed, there is reason for concern that the reported prevalence of PTSD of 15.6 to 17.1 percent among those returning from Operation Iraqi Freedom or Operation Enduring Freedom [Afghanistan] will increase in coming years.... [O]n the basis of studies of military personnel who served in Somalia [when the nature of the mission changed from peacekeeping to the capture of warlords], it is possible that psychiatric disorders will increase now that the conduct of the war has shifted from a campaign for liberation to an ongoing armed conflict with dissident combatants.

Of course, the war in Iraq was never a “campaign for liberation,” but no doubt many US troops thought it was. The realization by soldiers that they are engaged in a brutal occupation and mass repression, Friedman suggested, will have its own mental and emotional consequences.

He continued ominously: “In short, the estimates of PTSD

reported by [military psychiatrist Charles] Hoge and associates [authors of the *NEJM* study] may be conservative not only because of the methods used in their study but also because it may be too early to assess the eventual magnitude of the mental health problems related to the deployment to Operation Iraqi Freedom or Operation Enduring Freedom.” Besides the change of mission from “liberation” to occupation, Friedman also cited extended tours of duty as a cause of mental health difficulties.

The crisis is further compounded by the fact that military personnel are skeptical that their use of mental health services will remain confidential and are apparently “afraid to seek assistance for fear that a scarlet P could doom their careers,” observed Friedman.

He warned of an increase in psychological problems among soldiers despite an important distinction between the present period and the post-Vietnam war era: “Americans no longer confuse war with the warrior; those returning from Iraq and Afghanistan enjoy national support, despite sharp political disagreement about the war itself.”

Surveys of veterans conducted years after their military service ended have shown a prevalence of current PTSD among 15 percent of the Vietnam veterans and 2 to 10 percent among veterans of the first Gulf War, claimed the *NEJM* report.

Once called “shell shock” or “combat fatigue,” PTSD displays symptoms that include flashbacks, nightmares, panic attacks, feelings of detachment, irritability, trouble concentrating, emotional outbursts and sleeplessness. The National Center for PTSD states that PTSD is a highly prevalent lifetime disorder.

The National Vietnam Veterans Readjustment Survey (NVVRS), conducted between 1986 and 1988, estimated that more than half of all male Vietnam veterans and almost half of all female Vietnam veterans—some 1,700,000 in all—have experienced “clinically serious stress reaction symptoms.”

This translates into a 40 percent divorce rate for male Vietnam veterans, with 23 percent having high levels of parenting problems. Almost half of all male Vietnam veterans suffering from PTSD between 1986 and 1988 have been arrested or jailed at least once, and the estimated lifetime prevalence of substance abuse or dependency among male Vietnam veterans is nearly 40 percent.

There is also another psychiatric fallout from the war in Iraq: suicide.

According to an Army mental-health team studying soldiers in the combat environments of Iraq and Kuwait last year, there were 23 suicides in Iraq in 2003, mostly young and in lower enlisted ranks. The survey showed that nearly 90 percent of soldiers were concerned about not knowing

how long they would be deployed, separation from family, and lack of privacy and personal space.

“Soldiers indicated their most troubling experiences in combat came from seeing dead bodies (67 percent), being shot at (63 percent), being attacked or ambushed (61 percent) and knowing someone who was killed or seriously wounded (59 percent).... Additionally, 72 percent of the soldiers said their unit morale was low and 52 percent said their own morale was low,” according to a March dispatch from the Army News Service.

The *NEJM* study is a preliminary and rather elemental description of the psychological damage inflicted on a whole generation of economic conscripts—that is, working class youth bereft of options—by the Bush administration’s illegal and open-ended wars of conquest.

The possibility of obtaining career training or a college education paid for by Uncle Sam—the mantras of the military recruiters—evaporates with the onset of post-combat mental illness. Research has documented the profound connection between the nature of a war—the reasons why men and women fight—and the degree of psychic trauma endured by the fighters. A rotten colonialist enterprise based on lies is wreaking havoc on the minds of those obliged to carry it out.

Dry scientific data conveys only so much; it takes a poet on the order of Wilfred Owen (1893-1918), who fought and died in World War I, to capture something of this nightmarish ordeal:

*These are men whose minds the Dead have ravished.
Memory fingers in their hair of murders,
Multitudinous murders they once witnessed.
Wading sloughs of flesh these helpless wander,
Treading blood from lungs that had loved laughter.
Always they must see these things and hear them,
Batter of guns and shatter of flying muscles,
Carnage incomparable and human squander
Rucked too thick for these men’s extrication.*

—from *Mental Cases*



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