

Young working class soldiers most exposed to war trauma, UK report finds

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Towards the end of last year, ForcesWatch—whose official remit is to take issue with “unethical military recruitment”—published *The Last Ambush? Aspects of mental health in the British armed forces*. The report highlights the fact that young soldiers from disadvantaged backgrounds are most exposed to battlefield risk and are more vulnerable to post-conflict mental health problems.

While noting that the study of “mental health in military groups has developed appreciably since the Vietnam War,” the authors concede that research in the field is extremely limited, and even distorted, due to the fact that “most of the quantitative research in the UK is directly funded by the Ministry of Defence.”

Given this proviso, the report’s findings are all the more damning.

The study focuses on six indicators of mental health pathology to investigate the relative risks for different groups within the armed forces and in comparison to the general population. These are post-traumatic stress disorder (PTSD), common mental disorders (types of depression and anxiety), alcohol misuse, violent behaviour after deployment, self-harm, and suicide.

The report draws on over 150 sources, including 41 British military mental health studies. This is supplemented by the findings of 10 US quantitative studies and around 100 further published sources, as well as informal interviews with veterans.

The study illustrates the following findings:

¥ Young recruits from disadvantaged backgrounds are at greatest risk, as they are more likely to be given jobs that are more exposed to traumatically stressful events on the battlefield.

¥ Young recruits from disadvantaged backgrounds are more vulnerable to stress and more likely to lack strong social support after they leave the armed forces

to manage the effects of a mental health problem.

¥ Compared with older personnel, younger recruits are significantly more likely to suffer post-traumatic stress disorder (PTSD).

¥ Compared with older personnel, younger recruits are significantly more likely to drink at levels harmful to health, and to behave violently on their return from war.

¥ Mental health problems are alarmingly common among war veterans who have left the forces since 2003.

ForcesWatch notes that the UK is the only state in the European Union (EU) to recruit minors, referring to the policy of recruiting 16- and 17-year-olds (applications to join the British military are accepted from 15-year-olds). All but 19 state armed forces worldwide now officially recruit only adults, those 18 years of age and upwards. The report declares:

“In the last five years the Infantry, which is just 14% of the armed forces but has suffered by far the highest fatality rate in Afghanistan [six times

as many fatalities as the rest of the Army to date], accounted for 31.7% of all new armed forces recruits aged 16 or 17 (versus 24.1% of all adult recruits),” says the study, before adding: “This and other evidence gathered in this report points strongly to the conclusion that those who enlist youngest face the highest mental health risks.”

Acknowledging the age-old policy of recruiting cannon fodder from the poorest, most vulnerable sections of society, the report states that “most Army recruitment takes place in disadvantaged regions and targets mid-teens, with the poorest social groups encountering recruiters most often (e.g., in schools).”

Among personnel who have left the forces in the last decade, the incidence of PTSD, alcohol misuse,

common mental disorders and self-harm is appreciably higher in each case than that found in either current armed forces personnel or the general population.

Compared with the general population, studies of ex-armed forces personnel have found that PTSD (for those deployed to Iraq and/or Afghanistan) and alcohol misuse are both more than three times as frequent; self-harming behaviour approximately 30 percent higher; and common mental disorders a staggering 90 percent higher.

The principal pre-military risk factors are “youth and factors associated with a socio-economic disadvantage such as a background of childhood adversity, a history of anti-social behaviour and/or under-achievement in school.”

When comparing the youngest age groups in the armed forces and general population, harmful levels of drinking were around three times as common in the military group (26.1 percent vs. 8.4 percent). After leaving the forces, the long-term suicide rate has been between two and three times as high.

Under a section entitled *Stress: A normal response to the abnormality of war* the authors note that there is no such thing as “getting used to combat.”

Other post-war studies have also found that war stress has a cumulative effect. “The Vietnam War stimulated a larger field of research,” said the report, “but the assumption that stress reactions indicated the personal deficiencies of certain veterans was still common.”

It was only in 1980 that PTSD was officially recognised as “a clinical diagnosis for individuals whose daily functioning was appreciably impaired by chronic re-experiencing of traumatic events.”

In the centenary year of the First World War, the report serves as a reminder that the main victims of imperialist wars remain predominantly working class youth.

Two direct quotes in the report deserve citation.

The report begins with the experience of one young soldier. Vince Bramley was a young machine-gunner with 3 Parachute Regiment at the night-time battle of Mount Longdon in the Falklands War (1982), and described its aftermath: *“It wasn’t until daylight, when I ran into the bowl on the summit and saw the number of dead people there, including my own friends and colleagues, that the shock hit me. Nobody touched me, but it was as if somebody had punched me in the*

stomach and looking in mind states of shock my friends who had survived as well and were in this bowl, and I hadn’t realised until then that I wasn’t the only one crying. And there were Argentines who had been taken prisoner, and they were crying as well. I think all of us were shocked at the extent of what we’d done to each other. And then you begin to realise you’re not the rough, tough British paratrooper that the programme of training had made you out to be. You realise you’re human, and you have human feelings, and that the men beside you are no different.” The report concludes: *“Veterans’ trauma proceeds from the crucible of war, in which extreme violence leads to substantial numbers of psychologically wounded people. Many will live with this insidious legacy of warfare for the rest of their lives. The scourge is war itself. We as a society must realise that we cannot support wars without also condoning the traumatisation of combatants and civilians alike. We can choose health or war, but not both.”*



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