PTSD NEWSLETTER #4, June 3, 2013.


Compiled by Dick Bennett for a Culture of Peace.

(#1 Jan. 12, 2012; #2, Sept. 10, 2012; #3 March 11, 2013).

http://omnicenter.org/donate/

My newsletters on individual US wars contain additional writings or films about PTSD.


What’s at Stake: During WWI we learned about shell shock. Concussion seemed to be the problem. During WWII great advances were made in saving lives--front-line surgery, rapid response to physical traumas. Sometime the Army began to concede and the public began to discuss the emotional traumas caused by wars. Gradually the condition was named “PTSD,” and that history is available in pieces. I see this as a great advance for the peace movement. The harms of wars are not only physical—smashed cities and slaughtered species (though we have so far paid attention only to humans)—but are also psychological and lasting and lethal. The latest development in understanding and for peace is called “moral injury.” I first heard the term from Jacob George, who suffered from his three combat assignments more severely than most of us realized. Now the first books are being published about what is an epidemic, because US wars endure so long as to be virtually ceaseless and the mentally wounded countless. One book on moral injury stands out as particularly creative for peace--Robert Emmet Meagher’s Killing from the Inside Out—for it presents a powerful argument against the ancient doctrine of “Just War.” I believe pessimism (globally species fare worse than better) is the truthful perspective, but better there be, and the soldiers and their families, scholars and creative writers, and medical workers who have widened and deepened our understanding of the harms of wars to the combatants themselves have given us a new way to resist wars.
Earlier Wars
Fiona Reid. *Broken Men – Shell Shock, Treatment and Recovery in Britain, 1914-1930.*

PTSD

Soldiers Murdering Back Home
IVAW, Another Shooting at Ft. Hood, PTSD Cited

Suicide
Richard Baker: Suicide
Soldier Facing 9th Deployment Kills Himself
Project Recovery at Fort Hood

Diversity of Symptoms and Treatments
John Parrish, M.D., Vietnam War Doctor’s PTSD
Dr. Shay, Diagnosing and Treating PTSD with Literature
Hoge, *The Transition from Combat to Home*
Finley, *Understanding PTSD among Veterans of Iraq and Afghanistan*
Moore and Penk, *Treating PTSD in Military Personnel*
Combat Journalists Too Experience PTSD

Films
*Poster Girl* about Robynn Murray
Rev. Pat McSweeney on Ms. Murray in *The Servant Song*
Heather Courtney: *Where Soldiers Come From*, Soldiers from Youth to PTSD
Global PTSD Films: Iran
       *Marriage of the Blessed*

**Moral Injury**

Nancy Sherman, *Afterwar*

Edward Tick, *Warrior’s Return*

Edward Tick, *War and the Soul* (audio)


We can assume that what has been experienced in war, is being experienced at this moment, and will be in the future are much more numerous and complicated than these exemplary writings and films reveal.

Nos. 1-3

**EARLIER WARS**

Fiona Reid. *Broken Men – Shell Shock, Treatment and Recovery in Britain, 1914-1930.*

[http://www.history.ac.uk/reviews/review/997](http://www.history.ac.uk/reviews/review/997)

Reviewer: **Professor Jason Crouthamel**

Grand Valley State University

With a few exceptions, the history of shell shock in Britain has focused primarily on doctors’ and patients’ responses to mental trauma during wartime. In particular, scholars of psychological trauma have investigated doctors’ dilemmas in diagnosing shell shock, wartime debates over restoring individual health versus military needs, and the ‘crisis of masculinity’ this wound represented in European culture. The history of mental illness is, however, still a developing field, and one of the areas that begs more research is the experience of traumatized men after 1918, in particular their struggle to restore themselves in work and family life. As the focus shifts towards the postwar period, the agency of ‘hysterical men’ becomes apparent as we find evidence of their struggle to gain respect and assert authority over their diagnosis and the memory of the war. Fiona Reid makes an important contribution to the scholarship on shell shock. She
persuasively argues that by studying the shell-shocked soldier in the post-war world, we can gain new perspectives on how the memory of the war was constructed, and changing perceptions the war’s most symbolic victims. Reid argues that while shell-shocked men are largely responsible for contemporary British culture’s empathy for trauma victims, a reaction against a ‘stiff upper lip’ image of British manhood, and a collective memory of the Great War as the epitome of catastrophe and futility, shell-shocked men themselves had a very different set of goals about their image and legacy. Today’s images of shell-shocked British soldiers as tragic, wasted victims of a hopeless war obscures the more complex realities faced by actual men who were eager to salvage their sense of masculinity and restore their sense of honor as legitimate war victims in the eyes of the nation. Reid’s book focuses on the efforts of institutions responsible for the care of these men, in particular the ESWS (Ex-services Welfare Society), as well of the voices of shell-shocked men themselves to recover the attitudes of British civilians and veterans toward mentally ill victims of war. The trenches and military hospitals were not the end of the story for shell-shocked men, Reid argues, but the first part of a long ordeal for disabled men as they sought respect and self-determination in the world of work, family and political and economic restitution.

Reid’s book is organized thematically, with chapters that focus on the experiences of these men through the landscape of the trenches, asylums, welfare offices and life as civilians. Reid begins by providing background on the battlefield experience of shell shock to highlight the diversity of symptoms and problems raised by psychological wounds. While post-war veterans’ organizations would successfully create a special, empathetic place in public memory for shell-shocked men, during the war men received inadequate and often dismissive treatment from skeptical doctors who were not equipped or trained to cope with the enormous influx of traumatized soldiers. Not all military doctors, however, scorned these men who broke down when faced with their masculine roles as the nation’s warriors. Viewpoints among doctors and the public varied as pre-existing attitudes towards ‘weak nerves’ as a symptom of unmanly disposition competed with growing disillusionment with the military high command and traditional values. Sympathy for shell-shocked men, coupled with growing criticism of callous military doctors, led to civilian campaigns to raise money for special war neurosis hospitals. These campaigns were partly successful and some positive press reports helped generate support for mentally ill veterans, but widespread perceptions linking shell shock and ‘madness,’ and persistent skepticism about a breakdown of masculinity, continued to hang over these men. One of the first attempts at public support was the 1915 War Pensions Bill, which tried to free men of these stigmas with flexible categories, but diagnostic and linguistic confusion over the meaning of ‘shell shock’ frustrated war victims and their families as they sought economic security and respect. Medical and military leaders tried to project an image of control to downplay these problems, which actually fueled growing sympathy for traumatized men as unjust victims of the establishment.

In her analysis of how military doctors approached shell-shocked men, Reid rightly stresses that historians must keep in mind the context in which these doctors encountered this elusive wound. On one hand, socially conservative doctors were skeptical that ‘shell shock’ was really just a form of malingering by weak-willed men, but doctors also saw themselves as vanguards of social progress who advocated humane healing and were caught between the interests of the military – namely to send men to the front – and the interests of medicine. The hard pressed RAMC (Royal Army Medical Corps) had to take in an increasing
number of civilian doctors who believed that the interests of army discipline resulted in the neglect of ordinary soldiers’ health. However, most RAMC doctors, regardless of their perceptions of shell shock as a legitimate or faked injury, were hesitant to engage fully with the problems posed by this wound. Most were untrained in psychology, a field still widely disdained, and they labelled the complex, myriad symptoms of shell shock as another form of shirking. At the same time, these soldiers who lost their self-control and displayed tics, tremors and other visible forms of trauma despite their invisible wounds drew compassion from some doctors and the public. This empathy for men who appeared to lose their manhood would become the basis for the post-war constructions of shell shock as a 'special' wound. Even as doctors and the military mismanaged shell shock, the kernel of compassion for men ‘whose minds the Dead have ravished,’ as Wilfred Owen famously observed, set the scene for post-1918 memory of the war. MORE 

http://www.history.ac.uk/reviews/review/997

SOLDIERS MURDERING BACK HOME
FORT HOOD

Further Reading

- Under the Hood Cafe and Outreach Center
- Linking the Fort Hood Shooting to Terrorism: The Fort Hood Shooting Should Be Analyzed Within the Larger Context of US Militarism
- Fort Hood Shooting: Psychiatric issues 'fundamental underlying causal factor' (CNN)
- Fort Hood Gunman Had Clean Record, Army Says

Contribute to Our Movement

- Make a Donation
- Give Us Your Feedback

Dear Dick,

Last night, President Obama stated that he is "heartbroken" about the shooting on Fort Hood Army base in Killeen Texas. We, too, are heartbroken, because this shooting could have been prevented.

The United States military is an institution that teaches us to devalue the lives of others and to devalue ourselves. When combat stress and other injuries are added to that environment, the
result is volatile.

Fort Hood's base commander, General Mark Milley, would like us to believe that this incident is about one unique individual and his inability to shoulder the stress of combat. Based on our own experiences and 4 years of extensive research and analysis, we are well aware that there is nothing particularly unique about Ivan Lopez's story. A full report on this research will be released next month on Memorial Day.

When we first went to Killeen in 2010, we met with many soldiers who were suffering from Traumatic Brain Injuries (TBI) and Post Traumatic Stress Disorder (PTSD) from combat and from sexual trauma. Instead of being treated, their commanders overturned their doctors' orders and sent them back to war. In some cases, those who reported these injuries were punished or given bad discharges, which create a permanent barrier to care. It is no wonder that this phenomenon manifests as rage and violence. **We cannot allow this to continue - U.S. service members must be provided the right to heal from the invisible wounds of war.**

**Please support our movement by making a donation today.**

Lopez was already being treated for common symptoms of PTSD - anxiety, depression, and insomnia - and was being evaluated for PTSD. Even after his death, the leadership at Fort Hood is going out of their way to deny any relationship between Ivan Lopez's mental health and his actions. The army claims that PTSD is difficult to diagnose. It would be much more accurate to say that it's difficult for veterans and service members to get a diagnosis from a military or VA doctor.

The U.S. government and the Department of Defense are doing everything they can to avoid paying - whether in dollars or labor - for the invisible injuries they have caused to those they use to fight on their behalf. The number of US service members who suffer from PTSD due to (often concurrent) deployments ranges from 20% - 50% depending on the source. A lifetime of care for that many veterans is incredibly expensive. Affirming high numbers of incidences of PTSD requires acknowledging that trauma is a common and normal response to war, not a unique and individualized affliction that results from personal weakness and failure.

We collected testimony from 31 soldiers during our time at Fort Hood and are confident that these experiences are quite common. One of these soldiers, Rebekah Lampman, testified about attempting to get mental health support and justice after being sexually assaulted near the end of her 7 years at Fort Hood. She stated, "I went and did everything I possibly could to advocate for myself. And I was getting the run-around, people were telling me that they were working on it, and the paperwork was delayed. They just gave me excuses. And in the meantime, they kept reprimanding me for my emotions and my actions and for everything."

As long as soldiers continue to be punished for seeking care, tragedies will continue to occur. **We must demand the right to heal.**
Please join us by making a financial contribution today.

In Solidarity,

Joyce, Matt, Maggie, and Julia
IVAW Staff

P.S. Our work at Fort Hood over the years would not be possible without Under the Hood Cafe and Outreach Center. They continue to play a vital role to the local community in the wake of this tragedy. A portion of all donations received by IVAW today will be donated to Under the Hood. Please consider making a generous donation so that we can continue to do this important work together.

Iraq Veterans Against the War is a 501(c)(3) charity, and welcomes your tax deductible contributions

SUICIDE

RICHARD BAKER on SUICIDE

“Suicide by Appointment.” In These Times (April 2013). “The Current practice is to treat the injury, not prevent it. Preventing PTSD would be simple: Don’t send people to war. Treating the injury is more difficult, and currently, the VA’s efforts are a failure.” [Did he intend to over generalize; did he mean to say the VA’s efforts to treat suicide have failed? Baker apparently has written a novel, entitled Incoming, about soldier suicide, but I was unable to find it in Google. --Dick]

Facing 9th Deployment, Soldier Commits Suicide - Vanguard News ...
www.vanguardnewsnetwork.com/.../facing-9th-deployment-soldier-c...

Aug 16, 2011 – 13 Responses to “Facing 9th Deployment, Soldier Commits Suicide”. bjt Says: 16 August, 2011 at 3:37 pm. Why do these white Humans keep ...

A series of articles and multimedia about veterans of the wars in Iraq and Afghanistan who have committed killings, or been charged with them, after coming home.

AUDIO INTERVIEW
NEWS FROM FORT HOOD “OPERATION RECOVERY” TEAM

James :

"We are sitting on the porch at 11PM and a thunderstorm has just broken through the desert's heat. 'It's a little crazy what we are doing here,' Sergio reflects and then breaks into his loud boisterous laugh that is drowned out by the sounds of the first beating raindrops in over a month..." [Read more of this blog post.]

Sergio is part of the five member Operation Recovery Team who has been deployed for the past five weeks at Fort Hood, reaching out to service members and veterans about their right to heal.

What we are doing is not easy.

Killeen, Texas, home to Fort Hood is a lonely, desolate, and dry place, dominated by the military base.

We are a team of just five, former soldiers talking to current soldiers about war trauma -- a taboo subject -- on the largest U.S. military installation, home to approximately 50,000 troops and their families.

Sergio and Malachi of Opertion Recovery deployment team

What we are learning

After five weeks of talking to soldiers, we are learning just how widespread the war trauma at Fort Hood is.

Everyone has a story of someone they know who has attempted suicide.

Many soldiers are on psychotropic medications to cope with the depression, stress, anxiety, and insomnia that is rampant at Fort Hood.

You can read more about conditions at Fort Hood in our latest blog post.

As expected, soldiers also are reporting that commanders are spreading rumors about Operation Recovery, that we can't be trusted. Soldiers are being threatened and intimidated by their commanders for talking to us. That is just how desperate they are to keep a lid on things.

But we are here to pry that lid open.

What's next

Throughout July, we will continue outreach and home visits with the hope of deepening our relationships with these service members. People are like walking silos down here, going
through their own emotional pain - alone. Our next step is to connect those we've been talking to with each other, to start building a new community of shared experience and the desire to heal from war.

But in order to get to that point, we must continue the outreach, the one-on-one conversations, and the home visits that are the bread and butter of our organizing efforts here.

Your financial support will make all the difference in our work.

Make a donation today.

In Solidarity,

The Fort Hood Operation Recovery Team

Aaron, Kyle, Malachi, Scott, and Sergio

Iraq Veterans Against the War is a 501(c)(3) charity, and welcomes your tax deductible contributions

Demanding the Right to Heal » Operation Recovery: Fort Hood ...

righttoheal.org/operation-recovery-fort-hood-soldiers-and-veterans-testif...

1. May 26, 2014 - Operation Recovery: Fort Hood Soldiers and Veterans Testify on the ...
The Operation Recovery team has created a website to ensure easy ...

PTSD

AUTOPSY OF WAR: A Personal History

http://us.macmillan.com/autopsyofwar/johnaparrish

On the outside, John Parrish is a highly successful doctor, having risen to the top of his field as department head at Harvard Medical School and Massachusetts General Hospital. Inside, however, he was so tortured by the memories of his tour of duty as a marine battlefield doctor in Vietnam that he was unable to live a normal life. The author delivers an unflinching narrative chronicling his four-decade battle with the unseen enemy in his own mind as he struggled with Post-Traumatic Stress Disorder.
Parrish examines his Southern Baptist childhood and the profound influence of his father, a fire and brimstone preacher turned Navy chaplain, while offering a candid assessment of the “God and Country” ethos that leads young men to rush wide-eyed into war. He describes the unimaginable carnage and acts of cruelty he witnessed in Vietnam, experiences that shattered his world view leaving him to retreat from his family upon his return stateside. Living virtually homeless at times, he visited veteran shelters and relived the horrors of war in a series of harrowing flashbacks as he dealt with suicidal thoughts. The author writes honestly and probingly of his episodes of infidelity and battles with sex addiction. Readers follow his steady journey toward recovery and his professional contributions in the field of medicine and technology, as well as a joint program with the Boston Red Sox and Massachusetts General Hospital to aid returning veterans. Perhaps most poignantly, Parrish speaks of his quest to discover the identity of one particular soldier in Vietnam he could not save—and whose memory has haunted him ever since.

*Autopsy of War* is a soul searching memoir that is both an intensely personal narrative and a universally relevant trip through the world of war and recovery.

CONNECT WITH THE AUTHOR  
John A. Parrish, M.D.

RELATED LINKS  
http://us.macmillan.com/autopsyofwar/johnaparrish

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**Dr. Jonathan Shay on Returning Veterans and Combat Trauma**

By DEBORAH SONTAG and AMY O'LEARY

Published: January 13, 2008

Dr. Jonathan Shay is a psychiatrist who specializes in treating the psychic wounds of war. He is also the author of two books, "*Achilles in Vietnam: Combat Trauma and the Undoing of Character*" and "*Odysseus in America: Combat Trauma and the Trials of Homecoming,*" which examine the experiences of combat veterans through the lens of classical texts.

Jason Threlfall

Dr. Jonathan Shay

Book Excerpt: 'Odysseus in America: Combat Trauma and the Trials of Homecoming'
"Across America, Deadly Echoes of Foreign Battles" (January 13, 2008)

Over 20 years ago, Dr. Shay, then a medical researcher studying the biochemistry of brain-cell death, suffered a stroke. During his recovery, he moved from research into clinical work, taking a temporary job substituting for a vacationing psychiatrist at a Department of Veteran Affairs clinic in Boston. When that doctor died, Dr. Shay stayed on, challenged and inspired by the terrible psychological injuries of the combat veterans.

During his stroke recovery, Dr. Shay also began, as he put it, to fill in the gaps in his education by reading the classics: "The Iliad," "The Odyssey," and "The Aeneid." And it was clear to him that his patients at the V.A. clinic were echoing many of the sentiments expressed by the warriors in those ancient texts: betrayal by those in power, guilt for surviving, deep alienation on their return from war.

“I realized that I was hearing the story of Achilles over and over again,” said Dr. Shay. For this series, Deborah Sontag spoke with Dr. Shay, who recently won one of the MacArthur Foundation’s coveted “genius awards,” about his unique perspective on the psychological impact of war.

What happens when someone who has adapted to war comes home?

What others view as a mental disorder — post-traumatic stress disorder, that is — Dr. Shay prefers to see as a psychological injury of war. Initially, when a service member returns from war, he or she often retains the behaviors that they adopted for their own survival while in a combat zone, he says.

“Most of it really boils down to the valid adaptations in the mind and body to the real situation of other people trying to kill you,” he said.

On PTSD, sleep and a breakthrough in treatment.

Dr. Shay has written about the connection between criminal behavior and combat trauma. He refers to the problem as "staying in combat mode." In his writing, he points out that the first adventure of Odysseus after the Trojan War was to sack the city of Ismarus — essentially a pirate raid where the soldiers applied their hard-earned wartime skills to a civilian environment. If this kind of behavior is common, should the courts consider combat service when a veteran has been charged with criminal activity?

On whether the effects of combat trauma should be considered in criminal cases.

Dr. Shay has become an advocate for preventing psychological war injuries as much as possible through a variety of methods. For example, he believes that soldiers should be deployed together, rather than trickling in and out of combat zones individually as was the practice during the Vietnam War. A sense of community and stability are key, he says, in preventing further damage.
Once a Warrior—Always a Warrior: Navigating The Transition From Combat To Home--Including Combat Stress, Ptsd, And Mtbi.  February 23, 2010.  by Charles Hoge.

The essential handbook for anyone who has ever returned from a war zone, and their spouse, partner, or family members.

Being back home can be as difficult, if not more so, than the time spent serving in a combat zone. It's with this truth that Colonel Charles W. Hoge, MD, a leading advocate for eliminating the stigma of mental health care, presents Once a Warrior—Always a Warrior, a groundbreaking resource with essential new insights for anyone who has ever returned home from a war zone.

In clear practical language, Dr. Hoge explores the latest knowledge in combat stress, PTSD (post-traumatic stress disorder), mTBI (mild traumatic brain injury), other physiological reactions to war, and their treatment options. Recognizing that warriors and family members both change during deployment, he helps them better understand each other's experience, especially living with enduring survival skills from the combat environment that are often viewed as "symptoms" back home. The heart of this book focuses on what's necessary to successfully navigate the transition—“LANDNAV” for the home front.

Once a Warrior—Always a Warrior shows how a warrior's knowledge and skills are vital for living at peace in an insane world.


For many of the 1.6 million U.S. service members who have served in Iraq and Afghanistan since 2001, the trip home is only the beginning of a longer journey. Many undergo an awkward period of readjustment to civilian life after long deployments. Some veterans may find themselves drinking too much, unable to sleep or waking from unspeakable dreams, lashing out at friends and loved ones. Over time, some will struggle so profoundly that they eventually are diagnosed with post-traumatic stress Disorder (PTSD).

Both heartbreaking and hopeful, Fields of Combat tells the story of how American veterans and their families navigate the return home. Following a group of veterans and their their personal stories of war, trauma, and recovery, Erin P. Finley illustrates the devastating impact PTSD can have on veterans and their families. Finley sensitively explores issues of substance abuse, failed relationships, domestic violence,
and even suicide and also challenges popular ideas of PTSD as incurable and permanently debilitating.

Drawing on rich, often searing ethnographic material, Finley examines the cultural, political, and historical influences that shape individual experiences of PTSD and how its sufferers are perceived by the military, medical personnel, and society at large. Despite widespread media coverage and public controversy over the military’s response to wounded and traumatized service members, debate continues over how best to provide treatment and compensation for service-related disabilities. Meanwhile, new and highly effective treatments are revolutionizing how the Department of Veterans Affairs (VA) provides trauma care, redefining the way PTSD itself is understood in the process. Carefully and compassionately untangling each of these conflicts, *Fields of Combat* reveals the very real implications they have for veterans living with PTSD and offers recommendations to improve how we care for this vulnerable but resilient population.


This practical volume covers the full range of effective treatments for PTSD and discusses their implementation with service members and veterans. The focus is on how to meet this population’s unique needs. From conducting a thorough assessment to choosing an appropriate psychosocial or pharmacological treatment, the expert editors and contributors provide guidance based on years of experience in military contexts. The norms and values of military culture are discussed. Chapters thoroughly describe available therapies, review their strengths and limitations, and use illustrative case examples to demonstrate the treatments in action. Also addressed are clinical issues and co-occurring problems that can arise in this population, such as traumatic brain injury and substance abuse, and strategies for dealing with them.

THEATER REVIEW | CONNECTICUT

War Leaves Wounds Behind the Camera, Too


Matthew Boston, Tim Altmeyer and Erika Rolfsrud in “Time Stands Still,” by Donald Margulies, directed by Rob Ruggiero at Theaterworks.

By SYLVIANE GOLD
Playwrights who know it all can often provide first-rate entertainment. But the very best plays usually come from writers who don’t necessarily have all the answers, who don’t insist on telling us what to think about the developments onstage and who don’t offer neat solutions to their characters’ problems.

Lanny Nagler

Mr. Boston, with Liz Holtan and Mr. Altmeyer.

Donald Margulies, who won the Pulitzer Prize in 2000 for “Dinner With Friends,” has been writing that kind of play ever since “Sight Unseen” in 1992. And “Time Stands Still,” the 2010 Tony nominee currently in an outstanding production at TheaterWorks in Hartford, is his finest work to date. Like the earlier plays, it asks us to ponder the intricacies of love and friendship and the emotional perils of professional success. But this one, expertly directed by Theater Works’s producing artistic director, Rob Ruggiero, goes beyond the personal to explore the moral ambiguities of journalism, a subject that both producers and consumers of the news media tend to avoid.

Mr. Margulies isn’t worried here about journalists’ ethics; his concern is the very underpinnings of the enterprise. “I live off the suffering of strangers,” says Sarah, the conflict photographer at the heart of the play. “I built a career on the sorrows of people I don’t know.” Is she, as she sometimes feels, “a ghoul with a camera”? Or is she a crucial witness to truths that would pass unnoticed without her, as she believes in her less anguished moments? In the no-nonsense performance of Erika Rolfsrud, Sarah is clearly driven by both high ideals and an addiction to danger.

When the play begins, she has come a little too close to the latter. With one arm in a sling, one leg in a cast and a face pitted with shrapnel scars (the work of the makeup artist Joe Rossi), Sarah has returned home from a German hospital after falling prey to a roadside bomb in Iraq. Carrying her gear and watching her every painful move is James, the war correspondent who has been her companion for some eight years. . . .The play’s title accurately describes what happens when a camera shutter clicks, but “time stands still” is also a lie. Time moves right along, and as John Lasiter’s sterling lighting takes the loft through the days and nights of Sarah’s recuperation, and her many mood swings, we learn that James, in the sympathetic performance of Tim Altmeyer, has war wounds of his own — and that the two of them appear to have very different definitions of healing. . . .
**POSTER GIRL**

June 29, 2011

Contact: Dick Bennett, 442-4600; Gladys Tiffany, 935-4422

Subject: Film of Female Iraq War Vet PTSD Victim

**THIS FILM BY ITS HAND-HELD REALISM AND ITS FOCUS ON ONE PERSON HAS AN INTENSE IMMEDIACY MANY FILMS LACK.** You will be pained and grieved by this film but you will be glad you saw it. Dick

The film “Poster Girl” will be shown SUNDAY, July 10, 6:30 p.m., at the OMNI Center for Peace, Justice, and Ecology, 3274 Lee Ave., 2 blocks off North College between Office Depot and Liquor World.

*Poster Girl* is a 2010 documentary film about an American female soldier's experience with Posttraumatic stress disorder after returning from the *Iraq War*. The film showed at the 37th *Telluride Film Festival* on September 3, 2010. It was nominated for the *Academy Award for Best Documentary (Short Subject)* at the *83rd Academy Awards* on January 25, 2011, but lost to *Strangers No More*— It will be shown on HBO in September.

The documentary short film is a production of Portrayal Films and was conceived by *Mitchell Block* and produced by Mitchell Block and Sarah Nesson and directed and photographed by first-time *Sarah Nesson*. Sarah is the niece of Ralph Nesson of Fayetteville.

*Poster Girl* is the story of Robynn Murray, an all-American high-school cheerleader turned “poster girl” for women in combat, distinguished by *Army Magazine*’s cover shot. Now home from Iraq, her tough-as-nails exterior begins to crack, leaving Robynn struggling with the debilitating effects of post-traumatic stress disorder (PTSD).

POSTER GIRL is an emotionally raw documentary that follows Robynn over the course of two years as she embarks on a journey of self-discovery and redemption, using art, poetry, and public speaking to redefine her life.

Rev. by Pat McSweeney, “Robynn Murray Unwilling Poster Girl,” in *The Servant Song (Spring 2011)*.
Last October, at the Agape’s St. Francis Day event, six remarkable women reported on the toll that various wars had taken on their respective lives. The audience listened with collectively held breath.

Robynn Murray’s account was riveting. The youngest of the Women and War group, she is a veteran who (barely) survived unspeakable events in Iraq. In addition to being directly involved in brutal military action, she was subjected to sexual harassment and had her complaints casually dismissed by commanding officers. Appointments with medical doctors led to “drugs and more drugs and more drugs”. She returned to the States shattered in spirit and physically fragile. Robynn’s candor about her persistent PTSD and dependence on drugs was heartbreaking. MORE http://agapecommunity.org/2015redesign/wp-content/uploads/2015/01/Servant-Song-Spring-2011-final.pdf

*Pat McSweeney activist and peacemaker, advocates for Fr. Roy Bourgeois and attended recent plowshares trials, just a few of her contributions to nonviolence.*

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From: Heather Courtney <quincyhillfilms@gmail.com>
Date: Sun, Apr 7, 2013 at 5:35 PM
Subject: Emmy-winning film on the costs of war
To: vfp@iabv.com

Hello,

I contacted your Veterans For Peace chapter last year about my Emmy-winning documentary, *WHERE SOLDIERS COME FROM*. The film focuses on the four-year journey of childhood friends, from teenagers stuck in their small town, to National Guard soldiers looking for roadside bombs in Afghanistan, to 23-year-old veterans dealing with the silent war wounds of PTSD and Traumatic Brain Injury (TBI).

As an organization that helps the families of soldiers and veterans, I thought you might be interested in using the film as a community-based tool. Some Veterans For Peace chapters and other veterans and military family groups have organized community screenings of *WHERE SOLDIERS COME FROM* to build understanding of what soldiers, veterans and their families are going through, in a workshop setting to open up a dialogue between veterans and their families and loved ones, and as a fundraiser for their organization.

You can watch a trailer at www.wheresoldierscomefrom.com/trailer.php. It is a different war film in that it follows the full experience – over the course of the film, we see the young men before they become soldiers, during their deployment, and after they come home and work to reintegrate back into civilian society. It would be a great film to organize a Memorial
Community and veteran groups can purchase *Where Soldiers Come From* for screenings from our educational distributor [New Day Films](https://www.nwd.org/). Feel free to share this information with others. If you have questions or want to discuss a possible event in detail, please email me at [quincyhillfilms@gmail.com](mailto:quincyhillfilms@gmail.com), or call me at 512-565-1628. Also, we are very flexible on price so let us know what works for you. Thank you for the important work your organization does, and I look forward to hearing from you.

**Global PTSD Films: Iran**


Makhmalbaf and his family have won numerous awards and produced some of the most important Iranian films after the Islamic revolution. *Marriage of the Blessed* is one of Makhmalbaf’s earlier movies dealing with difficult social issues. It is the story of Haji, a shell-shocked young revolutionary war photographer who is taken from an asylum to live with his fiancée and her middle-class family. The idealist Haji comes face to face with the practical concerns of his fiancée’s family, and his fiancée is caught in between. The film captures the crisis of conscience and loss of idealism of not only Haji but also Makhmalbaf, who was a strong early supporter of the Islamic revolution. Haji begins to critique hypocrisy in the system, the new role of the government, and the effect of materialism and capitalism in the society. The result is one of the most powerful and despairing films about the consequences of the Iran-Iraq war.

**Moral Injury**

**Books**


7 customer reviews

Movies like *American Sniper* and *The Hurt Locker* hint at the inner scars our soldiers incur during service in a war zone. The moral dimensions of their psychological injuries—guilt, shame, feeling responsible for doing
wrong or being wronged—elude conventional treatment. Georgetown philosophy professor Nancy Sherman turns her focus to these moral injuries in *Afterwar*. She argues that psychology and medicine alone are inadequate to help with many of the most painful questions veterans are bringing home from war.

Trained in both ancient ethics and psychoanalysis, and with twenty years of experience working with the military, Sherman draws on in-depth interviews with servicemen and women to paint a richly textured and compassionate picture of the moral and psychological aftermath of America's longest wars. She explores how veterans can go about reawakening their feelings without becoming re-traumatized; how they can replace resentment with trust; and the changes that need to be made in order for this to happen—by military courts, VA hospitals, and the civilians who have been shielded from the heaviest burdens of war.

2.6 million soldiers are currently returning home from war, the greatest number since Vietnam. Facing an increase in suicides and post-traumatic stress, the military has embraced measures such as resilience training and positive psychology to heal mind as well as body. Sherman argues that some psychological wounds of war need a kind of healing through moral understanding that is the special province of philosophical engagement and listening.

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**Warrior's Return: Restoring the Soul After War. 2014**

by **Edward Tick**

... 46 customer reviews

War touches us all—leaving visible and invisible wounds on the warriors who fight, disrupting their families and communities, and leaving lasting imprints on our national psyche. In spite of billions spent on psychological care and reintegration programs, we face an epidemic of combat-related conditions such as PTSD (Post-Traumatic Stress Disorder). With *Warrior's Return*, Dr. Edward Tick presents a powerful case for changing the way we welcome our veterans back from service—a vision and a path for transforming the wounds of war into sources of wisdom, honor, and growth.

After more than 35 years of working with veterans, Dr. Tick has learned that our conventional ways of addressing the trauma and woundings of war fall far short, usually focusing only on symptoms and temporary relief. Drawing on lessons from cross-cultural wisdom, mythical archetypes, and proven methods from psychology, he offers this book as a valuable resource to help families, caregivers, and returning veterans understand and cope with the life-changing effects of combat, including:

- Re-examining PTSD—why we must expand our understanding of the full psychological and spiritual impact of war’s invisible wounds
- Archetype of the warrior—service in combat as a “journey to the underworld,” and why the return home is the most crucial stage
- The warrior’s path—timeless wisdom from tradition, classical philosophy, great leaders, and
religious and mythological sources

- How cultures around the world have welcomed home their returning warriors for centuries—and what we can learn from them
- The warrior’s initiation—how the old self dies on the battlefield and a new, more mature self evolves in its place
- Restoration—methods for overcoming disillusionment and soul-fatigue to restore the warrior’s sense of purpose, motivation, and connection
- Coming home—specific steps for reintegrating our warriors back into our families and communities
- Honor—how a warrior can retain personal integrity and self-respect even when they have participated in a war they don’t believe in
- Forgiveness, reconciliation, and atonement—ways for warriors to close the circle and begin healing what was destroyed

“This is not a hopeless situation,” states Dr. Tick. “Lifelong suffering after war is not inevitable if we understand war’s impact on the heart and soul, both for ourselves and our culture.” For veterans and those who wish to support them, Warrior’s Return offers step-by-step guidance for initiating our transformed warriors into valued members of our community—with an essential map for the hero’s journey home.

A portion of the proceeds will be donated to Soldier’s Heart. Visit soldiersheart.net.


War and PTSD are on the public's mind as news stories regularly describe insurgency attacks in Iraq and paint grim portraits of the lives of returning soldiers afflicted with PTSD. These vets have recurrent nightmares and problems with intimacy, can't sustain jobs or relationships, and won't leave home, imagining "the enemy" is everywhere. Dr. Edward Tick has spent decades developing healing techniques so effective that clinicians, clergy, spiritual leaders, and veterans' organizations all over the country are studying them. This book, presented here in an audio version, shows that healing depends on our understanding of PTSD not as a mere stress disorder, but as a disorder of identity itself. In the terror of war, the very soul can flee, sometimes for life. Tick's methods draw on compelling case studies and ancient warrior traditions worldwide to restore the soul so that the veteran can truly come home to community, family, and self.
Much has been written about just war theory in recent years—some of it to justify the wars in Iraq and Afghanistan and some of it to condemn them. Robert Meagher does neither. He weighs just war theory in the balances and finds it wanting.

Meagher is Professor of Humanities at Hampshire College in Amherst, Massachusetts. He has “directed and participated in a range of events and programs concerned with healing the spiritual wounds of war in veterans, their families, and their communities.” He also served as an invited commissioner for the National Truth Commission on Conscience in War. He writes extensively, not only on the physical and mental traumas of war but also on what he calls the “moral injuries” of war.

*Killing from the Inside Out* is “the work of years—years of reading and years of listening—nearly fifty years, in fact, of research, teaching, activism, and advocacy.” The book’s title comes from what the mother of a veteran of two deployments to Iraq said about what the army and the war did to her son “so that he could imagine nothing better to do with his life than to end it.” Before Noah Pierce put a gun to his head—and before he wrote that his life had been hell since he was part of the 2003 Iraq invasion—he “bore no physical wound, no sign of injury.” His wound explained his mother, “kills you from the inside out.” It is this kind of wound that Meagher terms a “moral injury.” Noah “thought of himself as a murderer, and a bad person,” said his mother, “because he still had the urge to hurt people, kill people.” She credits the U.S. Army with turning “her son into a killer,” of “training him to kill,” but forgetting to “un-train him.”

Meagher explains that the book project began due to a conversation with a friend, “an ex-Marine captain who served in Iraq and took part in the invasion of Fallujah.” The captain remarked that any serious critique of war “was and is and will be undermined before it starts by the unthinking and all but universal acceptance of just war doctrine.” He wanted the just war theory “to be taken down, discredited, revealed for the lie that it is,” and challenged
Meagher to be the one to do it.

And Meagher has certainly done it. MORE  https://www.lewrockwell.com/2016/04/laurence-m-vance/just-war-theory-immoral/

If you read only one book on World War I, read Jack Beatty’s *The Lost History of 1914: Reconsidering the Year the Great War Began*. If you read only one book on World War II, read Ted Grimsrud’s *The Good War That Wasn’t — And Why It Matters: World War II’s Moral Legacy*. If you read only one book on the Vietnam War, read Nick Turse’s *Kill Anything that Moves: The Real American War in Vietnam*. And now I can say that if you read only one book on the morality of just war theory, read Robert Meagher’s *Killing from the Inside Out: Moral Injury and Just War*. I cannot recommend it highly enough.

Laurence M. Vance [send him mail] writes from central Florida. He is the author of *The War on Drugs Is a War on Freedom; War, Christianity, and the State: Essays on the Follies of Christian Militarism; War, Empire, and the Military: Essays on the Follies of War and U.S. Foreign Policy*; and many other books. His newest book is the second edition of King James, His Bible, and Its Translators. Visit his website

Contents #1

DOCUMENTARY FILMS

Book: Philipps, David. *Lethal Warriors*

*Hidden Battles* Documentary Film

Suicides

*Poster Girl* Documentary Film

IVAW Outreach

Contents of #2

Chloe Fox: Rev. of Castner, *The Long Walk*
Suicides July 2012
Women Homeless Veterans
Staff Sgt. Robert Bales
Book: *Lethal Warriors*
Diagnosis
Gandolfini’s documentary, *Wartorn*

**Contents #3**

**PTSD TODAY**

Arkansas: Jacob George, Music and Poetry Performance
Arkansas: Wounded Warriors Gather
Obama To Troops: More Support
Zoroya, Guilt and PTSD
McClelland, PTSD Spreading to Families

**PTSD IN EARLIER WARS**

World War II
Animated Film about WWII Battle of the Bulge PTSD
Google Search First Page
Korean War Google Search

Blog:  http://jamesrichardbennett.blogspot.com/

For research purposes, specific subjects can be located in the following alphabetized index, and searched on the blog using the search box. The search box is located in the upper left corner of the webpage.


PART OF THE HISTORY OF OMNI’S ANTI-WAR FILM SERIES: 2011

OMNI’s Video Underground appears on the second and fourth Sunday nights of each month.  In addition to other films, we are sponsoring a dozen films in 2011 presented by Gerald Sloan on second Sundays to examine the US Empire:  Causes, Consequences, and Alternatives.  We are now showing films June-September on some of the Consequences of militarism and wars.

END US WARS AND PTSD/Moral Injury NEWSLETTER # 4

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Dick Bennett


Blog:  http://jamesrichardbennett.blogspot.com/

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