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Helping Vets With Readjustment

BY DENISE M. MAHONE, M.A., M.F.A.

or most combat veterans, the return home to the civilian world is an extremely complicated transition. While the words "welcome home" are profoundly important for any veteran to hear from a civilian, the process of homecoming is nonetheless an arduous one that can last months if not years. Though the transition may seem to be something the veteran must complete on his or her own, or perhaps with the help of the military community, careful listening to the veteran's experience tells us otherwise. We civilians play a crucial role in the process, and veterans cannot truly return without us.

Unlike previous generations of Americans who fought wars overseas, the contemporary veteran's return experience often is marked first by an abrupt shift in place that leaves little time for psychological preparation. It may be merely a matter of hours, rather than days, between taking leave of one's station in a combat zone and finding oneself stateside in a bustling airport, surrounded by the excited chatter of vacationers and people seemingly untouched by war. The first steps back home, especially after multiple deployments, can feel shocking and require a profound readjustment to a no longer familiar ground. But this readjustment is not simply about the veteran becoming who he or she was before. That is an impossible expectation, both for the combat veteran and for the civilians who know him or her.

Many veterans describe the re-encounter with what was once their familiar home-world as now uncanny and strange. A veteran who expertly led convoys through danger, vigilant to every surrounding movement or sign of an improvised explosive device, may now find himself bewildered in a grocery store aisle, staring at the packed shelves of food. The familiar-turned-strange often touches the veteran's relationships as well, so that his spouse wonders why he seems so distant and so

quick to lose his temper with their children. Some veterans long to return to active duty, because, as one veteran put it, "it is better to know you are in hell than to feel like you are in some kind of limbo." For some, navigating the passage back into a civilian life can be so isolating an experience that deep despair and hopelessness emerge, contributing to the estimated 22 American veteran suicides that occur each day.¹

These are some of the vestiges of war that veterans carry long after deployment ends or the war is officially declared over. To the individual, these traces may feel vague or subtle, such as a

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private feeling of never really getting close to anyone anymore, or a heightened sense of things at work needing to be done absolutely perfectly, as if it is a matter of life or death. But, the vestiges also can take such deeply distressing forms as recurring nightmares about the enemies one may have killed, uncontrollable recollection of specific incidents and losses, and feelings of numbness, rage and moral pain.

These kinds of traces are examples of the psychological wounds of war. What we now call combat-related post-traumatic stress disorder (PTSD), with its nightmares, flashbacks, hypervigilance and numbing, has also been called shell shock, combat fatigue and soldier's heart in modern times. But, the traumatized response to combat is by no means a historically recent phenomenon. These wounds were described over 5,000 years ago in the classic Indian text, the Mahabharata, and Homer's Iliad provides an image of the Greek hero, Achilles, as a warrior over 2,500 years ago with what we would now call PTSD.² Indeed, most traditional warrior cultures have names for the particular, expected suffering that besets the warrior's post-combat psyche: the sense of being haunted by the dead, the feeling of soul loss and the experience of a mind in terror.³ Common to ancient warriors and modern combat veterans alike, these psychological wounds of war may range in severity, but they are hardly ever absent.

THE GAP BETWEEN VETERANS AND CIVILIANS

A newly published two-year study by U.S. Department of Veterans Affairs (VA) researchers found that veterans returning from the conflicts in Iraq and Afghanistan are 30 percent to 200 percent more likely to commit suicide than their non-veteran peers, a rate that increases with the age of the veteran.⁴ In response to the fact that more veterans die from suicide than from combat injury, the VA has committed to hiring over 1,900 more mental health professionals in the hope of discerning ways to prevent this worsening trend.⁵

Although these efforts by the VA are welcome and necessary, they risk upholding an illusion that the psychological care of veterans is primarily, if not exclusively, a U.S. Department of Defense (DoD) or VA issue. We civilians may hear of these efforts and assume that our role in veteran care is irrelevant — an attitude that poses both significant practical and spiritual problems.

On the practical side, veterans often face daunting challenges when trying to navigate and understand what mental health care they may

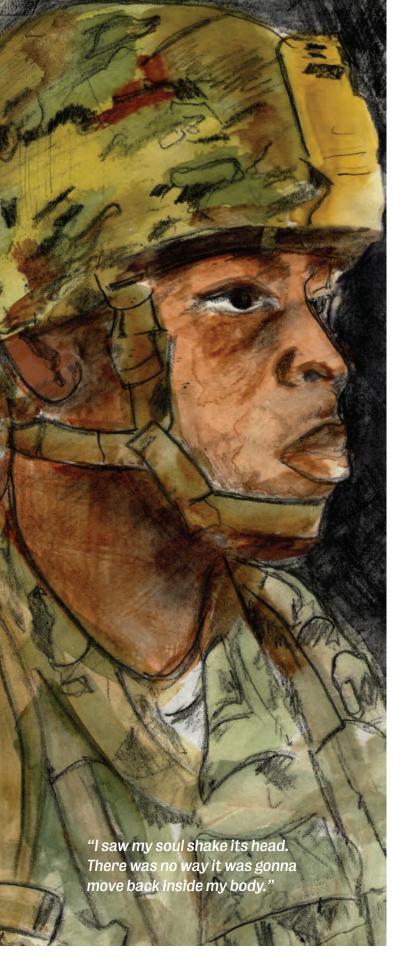


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be entitled to within the VA health system. They must deal with persistent stigma around asking for help or, in the case of those still serving, fear that doing so will endanger one's career. Available VA resources are often such that clinicians may be able to see veterans on an outpatient basis only every few weeks, which impedes the efficacy of any treatment. Getting to a VA medical center can prove challenging, especially for the veteran who lives in a rural area. Despite the approximately 300 VA-supported vet centers nationwide that serve as an alternative, veterans may not know about these centers or may still be wary of working with VA affiliates.

Spiritually, the veteran-civilian divide creates a tear in the web of responsibility and care for veterans. On one side, the veteran may think civilians could never possibly understand combat experiences and may feel that he or she can only talk about them to other veterans, if at all. Veterans sometimes feel civilians must be protected from what he or she has seen and experienced, or veterans may consider civilians to be irredeemably naïve, existing in a blissful bubble.

On the other side of the divide, we civilians may think the veteran's experiences simply have no meaning for us, and that, since the veteran was a volunteer, he or she should bear sole responsibility. We may experience the veteran's reticence as a wall that blunts his or her capacity for relationship — and we may begin to see the veteran as distant and "other." We civilians may not know how to ask about veterans' experiences for fear of upsetting them, or we may not want to hear about it at all — reinforcing the veterans' belief that such things are best kept to themselves.

Unfortunately, our social and political discourse can uphold the divide, particularly when veteran care is conflated with support for war. Most veterans see themselves as serving their community or country, meaning their family and fellow civilians far more than it means serving the government for itself or its political ends.

But, they also know it is much more complicated than this. Today's returning veterans have looked into the faces of civilians in Iraq and Afghanistan who regard them with fear and contempt, curiosity and gratitude, suspicion and rage. All wars evoke and confront us with human cruelty and atrocity, the dehumanization of the enemy and a sense of spiritual betrayal and confusion. This is part of the trauma that most combat veterans carry home with them. Given the fact that these veterans comprise only 1 percent of the total U.S. population, it may seem easy for the other 99 per-

cent of us to live untroubled by the traumatized veterans who have returned. But, without our participation and acknowledgment of the moral bond we share, the problematic veteran-civilian divide can only serve to inhibit the veteran's healing and impoverish all of us spiritually.

HELPING VETERANS RETURN

For Karl Marlantes, the Vietnam veteran and author of *What It Is Like to Go to War*, the cheering and applause given to returning veterans is an inappropriate response to the veteran's complex experience. An attitude instead of solemn and respectful recognition can honor the reality of the veteran's sacrifice and begin to restore a shared ethical regard for the gravity of war's spiritual costs. This can take the form of a silent nod or a sincere, quiet "thank you" and handshake. It can also take the form of new communal rituals for welcoming veterans home, practices marked by shared prayers for the dead and solemn acknowledgment of our collective responsibility.⁶

Civilians should not ask a veteran if he killed anyone, which most often deepens the perceived civilian-veteran divide because of a lack of understanding on civilians' part.⁷ On the other hand, civilians should express gratitude that the vet-

eran returned safely and can ask openended questions like, "Can you tell me about what it was like for you?" It is important to let the veteran take the lead after such a question opens up the door, and for civilians to listen with acceptance.

One of the lessons that the Vietnam veterans have taught us is that reassurance and affirmation from civilians is a vital component to healing and transitioning home. Without it, veterans

must also bear alone the public's confusion and shame about the horrors of war. When civilians, regardless of their politics, tell veterans that they did what we asked them to do, and that we are deeply thankful, this can be a profoundly important assurance for the veteran that one's actions and choices as a soldier within the destructive chaos of war are held within a larger web of communal choices.

The community's blessing and support give the veteran's self-sacrifice its necessary meaning, and, in so doing, gives the veteran a home in the shared civilian world. Out of this, the possibility of shared grief, shared regret and shared healing can arise, countering the devastating hopelessness bred by a sense of impossible, personal responsibility for the horrors of war. I have seen letters written by schoolchildren mean more to veterans than medals earned.

Although the veteran-civilian divide must begin again to heal via a recognition of our mutual, reciprocal relationship, the veteran will always also be different from us. As civilians, we must recognize that the veteran has been changed by the combat experience and needs to find ways to carry forward the lessons learned in meaningful and life-affirming ways. Practical support such as hiring veterans or connecting them with organizations that would benefit from their skills is one way of doing this. We must make a space for the warrior to live within and be supported by the civilian world, so that his or her identity can mature and have a valued place during times of peace.

We civilians cannot be emotionally detached when listening to or working with veterans. Being moved by the veteran's story and accepting how we are each implicated as a witness and participant in the veteran's return does several important things. It reestablishes a shared moral compass; it allows for the crucial widening of collective mourning and responsibility for war; and it affirms the re-emergence of deeper feeling from

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the veteran's armored self in the presence of an accepting other. It narrows the gap between civilian and veteran by allowing our shared humanity to resonate.

Psychotherapists in particular should focus less on symptoms per se at the expense of their meaning, as this can often feel disrespectful. Therapists should also not proceed too quickly to trauma lest this be re-traumatizing, but allow it to emerge as the veteran's story is told, as the therapeutic relationship develops and as the veteran is given skills to support her experiencing, for the first time in the safety of the civilian ground, the fullness of what happened. The veteran's transition to the civilian world does not mean achieving "closure," but rather means finding, in the context

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THE WARRIOR'S PATH: AN ARCHETYPAL VIEW

o see the veteran with more complexity and empathy is not to romanticize him, but to look more deeply into the archetypal structure of his situation. From this perspective, the warrior's path is akin to the archetypal hero's journey, which begins first with a felt call that often comes unsolicited. Remember the wave of people who signed up immediately following 9/11, feeling suddenly some awakening to a new identity? The journey then proceeds with leaving the home world to enter the warrior's world (boot camp), preparation (training) and eventually the descent into Hades itself in which the warrior is psychologically dismembered and the known human world is shattered (the combat zone). This represents the first half of the warrior's journey in which the movement psychologically is first a going out and then a descent.

Should the warrior survive, the second half of the journey is often the most treacherous. Now irrevocably changed, the warrior must find his way back home to the civilian world. This part of the journey is a rebirth and re-memberment, an ascent and moving back toward the world of home. In Homer's epic *Odyssey*, the king of Ithaca's tumultuous return from the Trojan War took him more than 10 years and involved numerous trials and the intervention of the blind prophet Tiresias before he could finally make it home to reclaim his wife and throne.

In a complete cycle of the warrior's path, the warrior is successfully reintegrated into the civilian world as an elder whose wisdom and knowledge caution future generations about the gravity of war and against too impetuous an engagement in the future.¹

Situating the chronic PTSD symptoms and suicides of today's veterans within this archetypal understanding, psychologist and author Edward Tick, Ph.D., sees them as representing the persistent soul wounds of an incomplete initiation, an interruption in the archetypal cycle that has short-circuited the necessary return

home.² PTSD is fundamentally a soul wound, Tick says, and represents a crisis of identity for the warrior whose meaningful integration back into the community has been thwarted, primarily because of abandonment by that community.

TRADITIONAL PRACTICES

What does a successful transition back to the civilian world require? According to Tick, the Plains Indians give us one of the most powerful images of return that can guide us.³ When times of conflict with other tribes made war necessary,

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the warriors surrounded the civilians, protecting them on all sides to ensure their survival. This was first done ceremonially prior to the setting off, depicting the community's dependent relationship on the warriors. After the fighting ended, the surviving warriors returned to the community, but, this time, they took up a place in the center, surrounded by civilians who encircled them. The responsibility of care and protection is inverted, and the return to the community is midwifed explicitly by the civilians themselves. This symbolic form of holding and encircling awakens deep feelings of trust and fundamental care between the two groups, and it begins to address the traumatic tear in the moral fabric which the warrior has experienced.

The traditional healing of wounded warriors is mediated by communities that acknowledge what they have done and explicitly take responsibility for the warrior's healing process, acknowledge the spiritual changes inherent in the warrior's experience and welcome his reintegra-

tion into the shared world as a transformed soul. Many traditional cultures practice rituals of isolation and tending that gradually ready the warrior for return to the camp, purification and cleansing, making peace with the dead — including the enemy dead — and gathering the community around warriors so that all may hear their stories.

Storytelling is crucial and structurally expresses the reciprocal nature of the warrior-civilian relationship as a moral bond. Warrior's stories must be told, and civilians must listen to and witness what has been done in their name. This civilian witness relieves the warrior of the burden of responsibility for carrying the traumas enacted and received in the name of the community.4 In some traditions, the civilians take on the stain of bloodguilt, so that there is an explicit owning of responsibility for war by the collective.5 Civilians' willingness to take the wounds on in this way allows them to understand the implications of war from a place of deep, empathic suffering and shared mourning in which civilians are meaningful participants. When the warrior ceases to be a figure existing only on the liminal periphery of the civilians' world, war can cease to be some detached event that happened "over there" to "other people."

What we know about trauma of any kind is that when it is not somehow meaningfully told within a safe relationship, when it becomes buried psychically and held internally as a terrible secret, it deepens and worsens. When veterans feel they cannot talk about their experiences, and civilians reinforce this silence, the psychological wounds of war get passed on inter-generationally as unmetabolized trauma that nonetheless manifests itself as a thick, unspoken presence in the family and cultural psyche. Thus the practices of confession, remembering, mourning and bearing witness are not only done for the veteran and the present community, but for future generations as well.

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Remembering what we cannot afford to forget about our capacity to destroy becomes an ethical obligation, and it touches upon the deeper dynamics of the civilian-veteran relationship. Civilians who have not been the victims of interhuman violence or deprivation may enjoy a basic sense of safety not because the human world itself is intrinsically secure, but because there are those who have felt called to encircle us.

Warriors come to intimately understand and be attuned to the violence and aggression that marks our kind, and they train to master it in themselves so that it can be faced in themselves and others. They are not drawn to their path because of some desire to kill or do violence, but because of the recognition that violence would haunt us and consume us if we did not have those willing to confront and contain it. Warriors bear the wounds of our shared aspiration for order, they protect us from ourselves and they bear the projections of our own disowned aggression.

This archetypal understanding of the warrior identity makes intelligible the moral pain that distinguishes the wound of the combat veteran.⁶ Combat is about killing, and despite being trained to kill and despite the dehumanization of the enemy that provides some psychological distancing in the moment, veterans adhering to the warrior's code must kill only out of necessity, not out of pleasure or glory. When the latter happens, the warrior has lost his or her footing. Killing another human being is a violation of the sacred and ethical order, and many warriors feel both haunted by the souls of the enemy dead and experience their own souls leaving them.

The Lakota Sioux call this phenomenon nagi nakape, which means, "the

spirits have left him." Recovering the lost soul involves making peace with and honoring the dead, which for many veterans involves acts of both remembrance and atonement. These tasks can take various meaningful forms. Some veterans have returned to the site where their soul loss occurred, or have performed rituals for the soul of a particular enemy he may have killed, using traditional rituals as guide, while others have done things like offer the gift of an animal to a village that the soldier may have once participated in destroying. These acts of restitution are often deeply healing because they

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directly address the moral wounding that occurs in war because of the death of innocents, the death of comrades and the complicated and intimate relationship to the human "other" whom one has killed.

Often, the rage of combat veterans has to do with a sense of deep moral betrayal by leaders and politicians whose orders the veteran was bound to serve. Serving a cause that is not noble or just leaves the veteran's character in ruins. Veterans necessarily require civilians, then, to provide a bridge back into the communal world that has not been strung with betrayal. We provide a necessary passage and hospitality that is part of the moral contract we share.

- Denise M. Mahone

NOTES

- 1. Edward Tick has beautifully elaborated this archetypal structure of the warrior's journey in *War and the Soul: Healing Our Nation's Veterans from Post-Traumatic Stress Disorder* (Wheaton, III.: Quest Books, 2005).
- 2. War and the Soul.
- 3. Edward Tick, "War and the Soul" (workshop, Duquesne University, Pittsburgh, March 12-14, 2010).
- 4. In his presentation "The Warrior's Path, Combat Experience and the Communalization of Trauma," Roger Brooke discusses the Xhosa tradition of the *ukubula*, the confessional telling of all that happened. The community has to tolerate the pain of listening, no matter how difficult that may be. (Readers might recall this process with the South African Truth and Reconciliation Commission, formed to help the nation investigate human rights abuses, unite and heal after the end of apartheid.) For more information on this presentation and other papers, see www.rogerbrookephd.com.
- 5. War and the Soul, 241.
- 6. For a recent discussion of the moral injury of combat trauma, see Tony Dokoupil, "A New Theory of PTSD and Veterans: Moral Injury," *Newsweek*, Dec. 3, 2012, www.thedailybeast.com/newsweek/2012/12/02/anew-theory-of-ptsd-and-veterans-moral-injury.html.
- 7. Edward Tick, "Atonement" (unpublished paper, 2010.) Tick and his wife, therapist Kate Dahlstedt, provide healing retreats and journeys of return to veterans via their organization, Soldier's Heart, www.soldiersheart.
- 8. Jonathan Shay, *Achilles in Vietnam: Combat Trauma and the Undoing of Character* (New York: Scribner, 1995).

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The veteran's transition to the civilian world does not mean achieving "closure," but rather means finding, in the context of the irrevocable changes war has rent on one's being, a foothold for one's identity across two worlds.

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This work belongs to all of us. Though the intense suffering of many veterans does require the care of trained professionals, such care is always nested within a larger community of care. Though our culture has come to think of psychology as a science of mind, "psyche" means soul, and, in the work with veterans, acknowledging this root meaning of the word is essential to trusting the depths to which we must try to understand the veteran's experience. We civilians are vital to the veteran's return, just as the veteran's soul wound opens us to our own capacity for deep witness to the divides within ourselves between the armored and the wounded, action and receptivity, heroism and retreat.

The warrior's story and pain require a deep listening to both the veteran and to the heart of our inner self, a center which comes to encounter itself via the other. This listening must acknowledge our own violence and destruction that the veteran, in turn, witnesses and enacts on our behalf. As the Jesuit thinker, Edwin McMahon wrote, "If we aren't in touch with our own inner life, we have nothing to do but prepare for war."

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NOTES

- 1. Greg Jaffe, "VA Study Finds More Veterans Committing Suicide," *Washington Post*, Feb. 1, 2013, http://articles.washingtonpost.com/2013-02-01/national/36669331_1_afghanistan-war-veterans-suicide-rate-suicide-risk.
- 2. Jonathan Shay, *Achilles in Vietnam: Combat Trauma and the Undoing of Character* (New York: Scribner, 1995).
- 3. Thanks to Roger Brooke, clinical psychologist and professor of psychology, Duquesne University, for compiling these names for the psychological wounds of war in various cultures. According to Brooke, the Hopi of the Southwest call PTSD the *tswana*, which means "a mind in terror," which evokes the hypervigilance, hyperarousal and flashbacks of combat veterans. The Xhosa of South Africa call it the *kanene*, which is the shadow that follows the warrior around, never letting him forget what he has done.
- 4. Janet Kemp and Robert Bossarte, *Suicide Data Report, 2012* (Washington, D.C.: U.S. Department of Veterans Affairs, Feb. 1, 2013). See https://www.va.gov/opa/docs/Suicide-Data-Report-2012-final.pdf.
- 5. Jaffe, "VA Study."
- 6. Brooke is currently developing ecumenical ceremonies incorporating traditional rituals of return. Contact: brooke@duq.edu.
- 7. Timothy C. Hanifen, "Three Gifts You Can Give Returning Veterans That Will Last a Lifetime," helped inform these points. See www.marineparents.com/postmc/3gifts.asp.
- 8. Edwin M. McMahon, *Beyond the Myth of Dominance:* An Alternative to a Violent Society (Lanham, Md.: Sheed & Ward, 1993).

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