

# The effects of the iraq war assignment



The Effects of the Iraq War Shelly Johnson Research Writing/COM 220 August 20, 2010 Instructor Sharon Cronk-Raby The Effects of the Iraq War The media and the military are focused on the positive effects of the Iraq War and how the soldiers have a job to defend the country, which is true. There are also many negative effects the war has had on the soldiers and their families. It is safe to assume that all soldiers are affected by their experiences in war. These soldiers are coming home to fight a whole new battle, their mental health.

Although the military thinks they are ready to assist the soldiers coming home from the Iraq War, they have no comprehension of the psychological effects of this war. The Iraq War has taken a toll on soldiers and their families. Throughout history, there have been many accounts of nightmares and other emotional troubles associated with the effects of war. These nightmares and traumas are also known as PTSD or Post Traumatic Stress Disorder. When a soldier experiences PTSD, he replays the events of trauma as images, thoughts or frightening dreams, which causes intense psychological distress (Litz & Orsilla, 2007).

Many recall seeing the murder of women and children, the smell of burning flesh, and the screaming children as they destroyed their homes, which haunts them every day (Welch, 2005). The consequences of combat can be particularly disturbing when these soldiers are handling the remains of civilians, enemy soldiers, and their own United States soldiers. These soldiers who return from war and have PTSD will have difficulty sleeping, become irritable and have angry outburst and have a hard time concentrating. They tend to have impairment in their social lives and work environments.

Between 8. % and 14% of soldiers returning from Iraq report serious functional impairment because of either post traumatic stress disorder or depression, according to a report in the Archives of General Psychiatry (“ About one-tenth of soldiers returning from Iraq may be impaired by mental health problems. ” 2010). Alcohol misuse or aggressive behavior, including slamming doors, punching holes in walls or threatening or perpetrating physical violence in anger was present in about half of the cases of PTSD or depression (“ About one-tenth of soldiers returning from Iraq may be impaired by mental health problems. ” 2010).

These soldiers will each have their own issues or problems, whether they are social, psychological, or psychiatric. Most soldiers are not immediately impacted by their experiences; however, they are at risk of chronic mental health issues from war experiences (Modell, 2009). There seems to be more attention on this war as opposed to past wars because of the length of time spent in these combat situation. Each Veteran returning home will have their own story of what he or she witnessed or what experiences they had. Many will know soldiers who killed themselves in Iraq or know soldiers who were killed in Iraq. A soldier with a wounded child.

This is one of those traumatic images that cause PTSD. (“ Pictures of our soldiers in Iraq that will never make the news” n. d. ). According to a report in USA Today (“ Army reports record number of suicides for June. ” 2010), soldiers killed themselves at a rate of one per day in June of this year. That is 32 soldiers who took their own lives. Of this number, 22 of these soldiers had been in combat, to include 10 soldiers that were deployed two or more times. Are these suicides linked to PTSD or other mental health disorders?

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Seeking help for a psychological illness is a sign of weakness to many military members.

Last year the Army reported its worst year for suicides, which confirmed 244 cases (" Army reports record number of suicides for June. " 2010). A soldier looking at the dog tags of fallen fellow soldiers. (" Pictures of our soldier in Iraq that will never make the news" n. d. ). Marriage and family life suffer greatly from deployments. Wives of soldiers sent to war suffered significantly higher rates of mental health issues than those whose husbands stayed home, according to the largest study ever done of the emotional impact of war on Army wives (" When soldiers deploy, family deploys. 2010). Wives of soldiers deployed to Iraq or Afghanistan between one and eleven months, had an 18% higher rate of suffering from depression than those whose husbands did not go to war (" When soldiers deploy, family deploys. " 2010). The study most likely underestimated the true mental impact of these deployments on wives, in part because of a military stigma over seeking mental health care for depression or other issues. Then there are the concerns for the children of deployed parents, who suffer more emotional issues, particularly if the deployments are long or the parent who is still at home to care for them are having mental health issues (" When soldiers deploy, family deploys. " 2010). Many of these children are being raised in a single parent home because the other parent is absent due to deployments. They have the same worries as adults, wondering if their mother or father will make it home from the war. They will have many holidays and birthdays that the deployed parent will miss. This may affect the relationships between the soldier and his spouse and child.

Missing significant events can leave a child feeling abandoned and angry. When the deployed soldier is reunited with family and friends, this can be trying on their coping skills and produce shame and lead to withdrawal or depression (Litz & Orsillo, 2007). There will also be a significant impact on the family relationship if the Veteran has physical wounds from his or her deployment. This can change their quality of life and well being of the entire family. There may be a disconnection with the soldier and the family members, which comes from feelings of guilt from what they were forced to do and what the soldiers seen in combat.

An interview with one Veteran of the Iraq War says, “ He sleeps in one of their children’s rooms because he has nightmares and panic attacks that cause him to hit and fight in his sleep” (Modell, 2009 p4). He is physically sick from the nightmares, so he is running to the restroom in the night. He wakes up in sweats and has to get up to shower in the middle of the night. He has not shared a bed with his wife in three years. Another story told by a Veteran was similar. When he returned from Iraq, he became paranoid and thought he needed to protect his family.

His wife wanted him to get help, but he was afraid as he thought it would be the end of his career. Eventually his wife left him. One night, he felt like he had lost everything and loaded a gun and put it to his head and pulled the trigger, but moved his head just in time. As a result, he was placed in a military psychiatric ward and was diagnosed with PTSD. He was charged with illegal possession of a firearm, dishonorably discharged from the military and got five years in jail (Modell, 2009). These are just a couple of stories of how the effect of this war has taken a toll on soldiers and their families.

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According to SFC J. Johnson, the United States Army has set up a facility on each military post called the Warrior Transition Unit or WTU. This was set up so that the soldiers returning from Iraq with injuries would have a place for them to go. Not all of these men and women need to be in a hospital environment once they are on their way to recovery. When a soldier has physical injuries such as the loss of a limb, being paralyzed and confined to a wheelchair, or even the smallest thing such as a broken leg, which affect his or her readiness to perform their current job duties, they are placed in the Warrior Transition Unit.

These wounded soldiers are accommodated with treatment plans and rehabilitation to promote job readiness. They are assigned a nurse case manager and a primary care provider who will evaluate his or her needs and place him or her in the appropriate programs. Most of the soldiers who are diagnosed with PTSD or depression will be placed in anger management, as many of them have anger issues. Many of these soldiers are having reintegration problems, which require marriage, family or de-stress counseling. There are many soldiers required to call in at least twice a day to a platoon leader, depending on their risk level.

If there have been threats of suicide or hospitalizations, they are placed on high risk. Many of these soldiers having a hard time being back in their home environment and adjusting to being back with their families are placed in barracks, which have been set up for these soldiers in the WTU (SFC J. Johnson, personal communication, July 23, 2010). There will be a comprehensive assessment of each soldier's mental health to determine whether they are fit for duty. This evaluation is done by a group of people

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who includes a nurse case manager, a counselor, a psychiatrist, primary care provider, and the Company Commander.

The soldiers can return to duty, medically retired from active duty, or discharged or separated from the military if they are deemed not fit for duty. Being fit for duty will mean, most often than not, another deployment back into a combat situation, which causes further mental health stressors (SFC J. Johnson, personal communication, July 23, 2010). “ If soldiers who are struggling with serious functional impairment as the result of a previous deployment are deployed again, there is a potential that this could impair their performance in combat.

This has implications for the safety of unit members and mission success” (“ About one-tenth of soldiers returning from Iraq may be impaired by mental health problems. ” 2010). Many of these soldiers have been deployed at least three to four times. They also can be returned to duty with or without assignment limitations and retraining. Once these soldiers are medically retired from the military, they must apply for their disability benefits through the Veterans Affairs office.

On July 23, 2007 a lawsuit was filed by “ hundreds of thousands of veterans” against the VA, alleging that they deliberately conspired to deny them “ disability pay and mental health treatment” (Yen, 2007, p. 1). The suit also alleges that the VA worked with the Pentagon to “ misclassify PTSD claims as pre-existing personality disorders to avoid paying benefits” (Yen, 2007, p. 1). One would assume, if these soldiers indeed had pre-existing disorders, the military would have seen signs before they were sent into combat.

The Government Accountability Office said the VA is a world leader in PTSD treatment (Welch, 2005). It also said the department does not have sufficient capacity to meet the needs of new combat veterans while still providing for veterans of past wars (Welch, 2005). Many of these soldiers are being diagnosed with anxiety disorders by military physicians instead of PTSD, so they are paid less in disability they are entitled to from the United States Department of Veterans Affairs. The psychological assessment of these Veterans returning from Iraq will be complicated and clinically challenging.

For many, surviving the challenges of war can be rewarding, maturing, and growth-promoting. The demands, stressors, and conflict of being involved in war also can be traumatizing, spiritually and morally devastating, and transform soldiers in a damaging way, the impact of which can last a lifetime (Litz & Orsillo, 2007). In conclusion, it is too soon to tell what the war's true effects will be for these men and women, except to prepare for Veterans suffering from some type of mental health issues, for sure they will come.

Unless something is done about these injustices, the legacy for Iraqi Veterans with disabilities will be one of broken families, drug addiction, alcoholism, unemployment, and homelessness (Yen, 2007). Once an individual has been trained to react unconsciously, to kill or be killed, how does the military reintegrate these men and women? In war a person's thoughts become reactive instead of proactive. Survive replaces live. These are the effects of the Iraq War. References About one-tenth of soldiers returning from Iraq may be impaired by mental health problems (2010, July 12). Mental Health Weekly Digest, p11. oi: A231246750 Army reports record number of suicides for June. (2010, July 18). USA Today. Retrieved from <https://assignbuster.com/the-effects-of-the-iraq-war-assignment/>



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