

Physiological cost of war



The main concern before the Iraq adventure, in the United States revolved around the almost forgotten veterans of the Vietnam War who had at one time put their lives in harms way and were still paying the price and coping with persistent dysfunction. These veteran's healthcare problems and the provision of proper resources and services for these aging men were proving to be an irritant of the bygone days, and then the Gulf War came to us; or rather we went to it with open arms.

The wheel has turned full circle once again and today a whole new and young generation of veterans has come to replace the old veterans before they are all gone into the pages of history. Perhaps this new problem of new health care issues that has been forced on our conscious may also make us spare a few thoughts for our older veterans. They are still reeling from the psychological harm done to them ages ago and perhaps this will serve as a notice to us that in all probability, the new generation of veterans will also carry similar scars into their and our futures too.

They have done their part and we must not forget to do ours, by taking care of them and by not forgetting them as we forgot some of the old ones. Post Traumatic Stress Disorder It was " Shell Shock" in World War 1 and " Combat Neurosis" in World War 11 and now it is PTSD. Since the evolution of mankind there have been battles and wars and irrespective of their outcomes, they have had all types of long terms effects on mankind and the American Psychiatric Association have finally recognized it as " Anxiety Disorder" and termed it as PTSD.

Let us hope and pray that there are no more future wars and this scourge does not have to be redefined any more and given another fancy name.

PTSD, as we shall call it by its current term is a result of traumas, and usually after an individual goes through one; it sets in within a few months and lasts several years or even lifetimes. Usually in wars soldiers and civilians are often subjected to violence and brutalities during battles and wars while participating in them or even witnessing them and these experiences causes' traumas.

PTSD however, may also be caused by non-combat incidents of violence and brutality towards civilians and combatants, with many veterans never having been aggressive yet suffering from profound feeling of guilt just because of their having been associated with such acts. It has however to be noted that violence in warfare is clearly the reason for triggering PTSD.

The symptoms for PTSD can vary like the re-experiencing of traumatic events, such as flashbacks or intrusive thoughts, nightmares, obsessive recollections, avoidance symptoms like fear of being with people, signs of hyper arousal like easily being startled or irritated, increased arousal, avoidance of experiences or people who trigger memories of such events, nervousness, over-reaction to sudden noise, difficult in sleeping, cold sweats, nightmares, difficulty in relating emotionally to others, bouts of rage with depressions, feelings of extreme alienation and meaningless, isolation from people, in extreme cases thoughts of murder or suicide etc. For these symptoms to develop, it can take anything from a few months to years to reach the stage where it is fully blown up. As soldiers are led to believe that admission of bad feelings are signs of weakness, their superiors usually discourage them from seeking professional help and thereby making it difficult to identify PTSD timely.

To improve the quality of their lives and their interests, soldiers should take care of themselves as best as they can and not succumb to peer pressure, and seek help from a qualified mental health professional. PTSD can be treated through therapy, medication or a combination of both (Post Traumatic Stress Disorder). Health Care of Veterans The principle responsibility for the provision of health care for veterans is with the Department of Defense (DOD) and the Department of Veterans Affairs (VA). The individuals entitled to receive medical care and rehabilitation services are either from the regular military, National Guards or from the reservists, however, their benefits, treatment and the services they avail differ in some ways.

The designated agencies and institutions that take care specifically of the health problems and disabilities which arise during or after having returned from active duty of veterans do not provide their services to the general public. Risk of Veterans A number of studies have reported that serious flaws are existing in the response these veterans are getting from the nation. The collection and reporting of the veteran's occupational and environmental health and safety (OEHS) is not being recorded properly and the utilization of data is at times critically wrong in identifying the exposures that had put the members of the armed services at risk. The correct knowledge of such exposures is vitally important for proper diagnosis and treatment and veterans at times at risk of negative health effects and even of becoming disabled.

Recommendations in this regard have already been made to the Department of Defense and the Department of Veterans Affairs, which have also been

largely accepted by them. It is necessary that the Department of Veterans Affairs puts in place procedures to hold the government responsible based on available proof to prove that the veterans were not exposed to alleged toxic or other dangerous substances as claimed by them to be the main causes of their disabilities. These procedures should also include provisions to cover for the spouses and children of service personnel who also may have been affected genetically or by secondary exposures. Transition Services

The transitional factor in veteran's term is also an important one because when individuals transit from the Department of Defense to the Department of Veterans Affairs health and rehabilitation facilities, due to the lack of data sharing between them key information about the seriously injured veterans is found lacking. This obliges the Department of Veterans Affairs to depend on the unreliable data sharing arrangement made between them and the local military treatment facilities. This is a major issue where veterans are concerned and in particular this is harmful to those of them who are disabled and need vocational and other necessary services. These haphazard arrangements and practice also need to be addressed at the highest forums of the country with urgency (Health, 2006). Post-Traumatic Stress Disorder

PTSD has become amongst the greatest challenges being faced by the country to meet the required levels of health care and rehabilitation for military personnel. PTSD needs to be redefined as a disability because it can prove to be chronic as well as invisible and it can also be episodic. During the chronic stage it can be controlled and not be defined as a disability through coping strategies and in its episodic manifestation stage where a

singular or more major life functions is affected, it may be mistreated as being temporary and be limited to the prevalent statutory definition of disability. “ The Institute of Medicine has been studying PTSD on an ongoing basis for more than two years.

While recognizing that the diagnosis, treatment and prognosis of PTSD may in some cases be uncertain, and in all cases will be highly individualized, NCD recommends that Congress conduct further oversight hearings into the VA’s understanding of the PTSD problem and into the agency’s ability to deal with it effectively, and that all necessary resources be made available to enhance VA’s work in this area. ” (CRS Order Code RL 32961, June 24, 2005)

Cost of War to Connecticut The direct cost to Connecticut due to the war from the year 2001 till the middle of 2006 has been the following according to official sources: While failing to give any priority to Connecticut’s security concerns, the present administration’s war has claimed a heavy toll of 9, 604 young and brave Connecticut men and women lives in Iraq.

A tremendous strain has been put of the families of 3, 655 Reservists and National Guards who were deployed in Afghanistan and Iraq with many of them being called repeatedly to report for duty. The figures for the above two statistics are according to the Department of Defense as on 5/31/06. In Connecticut the administration has failed to secure the ports and borders adequately. The people of Connecticut are collectively trying to transform the war policies around and are pressing for the redeployment of the American Forces as quickly as possible. Connecticut is struggling to honor the sacrifices of the 268, 947 veterans who have served for the nation and is trying to ensure that their due earned benefits are given to them.

Due to the war, 40, 100 jobs in the manufacturing industries have been lost and at present 75, 000 people are searching for jobs in Connecticut. The annual income per family has dropped to around US\$ 274 since the 2000's in Connecticut and the rising costs of consumables has reduced the purchase powers of the minimum wage earners to the lowest levels in 50 years. The people of Connecticut also feel that instead of creating jobs that pay well, the administration is providing subsidies of billions of dollars in corporate tax for overseas shipping jobs, while refusing to increase since the last nine years the minimum wage levels. The Connecticut people have to pay \$ 3.

20 for a gallon of gasoline on average, which is 111% more than what it was in January 2001, thus forcing families in Connecticut to bear an additional \$2, 695, 339, 147 cost of \$2, 001 per every two-car family on gasoline in comparison to 2001 as per the figures of the " House Government Reform Committee, Dem. Staff, 7/06". Health insurance costs have sharply raised in Connecticut since 2000 by \$ 1, 009 per family, which is a 66 percent rise, with the number of residents not insured reaching 407, 000, which amounts to a 61, 000 increase of residents since the year 2000. College costs for the 172, 775 Connecticut students have soared as the federal financial aid by GOP has been reduced.

Thus, attending a 4 year public college is costing 32% more and of a 4 year private college costing 22% more in comparison to the fall of 2000, thus a typical student who borrows for graduation from college is in debt of \$ 19, 093. Unfortunately for Connecticut students the administration has cut \$ 12 billion from the federal student aid programs making it harder for colleges to manage properly. Due to the war, the record out of control budget deficits is

proving to be heavy taxes for the Connecticut families. It is to be noted here that during the last 5 years, the administration have turned a \$ 5. 6 trillion surplus that was projected for 10 years into a record debt, and it borrowed another staggering \$ 1 trillion, which is more borrowing than the combined totals of all the past 42 U. S. president's administration put together.

The net economic impact amounts to a debt burden of \$ 31, 393 per every typical middle-income Connecticut family of four (Official Website of the U. S. House of Representatives). In Connecticut the average outpatient psychiatric care expenses for every veteran comes up to \$2, 317 a year, which is considerably much more than being spent in other states. (Veterans Health Care) Cost of War in General Due to PTSD While more than 1. 2 million have so far gone for the war effort in Afghanistan and Iraq since 2001, with over a fourth of them having served their tour of duty more than once, Yale researcher's studies indicate that approximately 196, 000 veterans have symptoms of PTSD and its treatment costs \$ 274 million, which is almost 13 percent of the total medical budget.

Yale researchers expect that with the troops engaged now in two wars the numbers of PTSD cases in veterans will further raise. Furthermore, data collected from recent surveys conclude by suggesting that between 10 and 20 percent of the soldiers presently in Iraq meet the criteria by which PTSD is measured. (Yale, n. d.) According to a report in the Associated Press dated 28th July 2006, every third soldier returning from war will have mental health related problems, which could lead to PTSD. The report continues by mentioning that 3 to 5 percent of the soldiers are diagnosed with severe mental health problems after they leave the combat zones, while a

staggering 13 percent soldiers suffer severe mental health issues at the time of being in the combat zones.

Mental health issues are also diagnosed when soldiers undergo their follow-up screening during the three and six month period, where another 4 to 5 percent are diagnosed with PTSD. However, PTSD symptoms are comparatively higher amongst the soldiers of the National Guard than the regular Army soldiers. In view of the stress related problems in the combat zones, 200 mental health experts have been sent to Iraq to help soldiers through counseling so as to prevent suicidal tendencies and other mental problems. (Soldiers Return Home with Mental Disorders) According to Congresswoman Rosa L. DeLauro (Conn. -3) m, approximately every sixth soldier returning from the war zone demonstrates PTSD symptoms and she has therefore requested for better mental health services for soldiers and their family members. (DeLauro)

Another report in the March 12, 2007 issue of the Achieves of International Medicine suggests that soldiers younger than 25 years seemed more vulnerable to PTSD. (One of Three War Vets Have Mental-Health Problems) The fighting with an insurgency in Iraqi with unclear enemies and on the front lines have left soldiers highly vulnerable to PTSD and many are turning to alcoholism and drug abuse and at times they do not get timely treatment or proper counseling. A study by the found that 80% of the soldiers diagnosed with symptoms of PTSD were not referred for further mental-health services or evaluation. Studies have also confirmed that repeated deployment of soldiers increased the risk of PTSD. (Iraq War Vets Face Mental Illness) Conclusion

We will start the conclusion with the following quote: " Every gun that is made, every warship launched, every rocket fired, signifies in the final sense a theft from those who hunger and are not fed, those who are cold and are not clothed. " - President Dwight D. Eisenhower April 16, 1953 War is not just a business for the administration but war is everybody's business as it is concerned directly with the mothers and the families of troops on the battlefields and indirectly with the mothers and families of those who are affected due to the consequences of war. War concerns directly with the young men and women who because of their traumatic experience sometimes turn into the living dead.

The clock that ticks the total running cost of the war in Iraq alone at the early hour of 3/16/07 was as at a staggering U. S. Dollars 374, 213, 602, 800. - And increasing by the thousand every few seconds and it seemed to be in a rush to overtake the " dooms day clock", (Farabaugh, 2006). While history has always been littered with exaggerated gross underestimates of war costs and some of their fine examples are; Abraham Lincoln had originally calculated the civil war to cost \$ 250 million and to last 90 days but the civil war had its final price tag of \$ 3. 3 billion and it lasted four years. The First World War was to be a short and inexpensive one as per forecasts and the Vietnam War cost 90% more than its forecast.

The 1991 Persian Gulf or rather the Kuwait War ended up costing \$ 76 billion in war costs directly but for a change these were paid for by the U. S. allies, however, it did cost a relatively lower number of 148 combat deaths. A decade later the taxpayers of the United States are still absorbing billions of dollars towards the cost of providing treatment for the injuries and

disabilities of the veterans of that particular war, where one third of the 1990/1991 Gulf War veterans numbering 206, 000 have filed for disabilities claims out of which 159, 000 have been approved. If this postwar casualty rate is considered extraordinary, then God help us all with the postwar casualty rate of our present war.

The former economic advisor to the White House, Lawrence Lindsey had suggested that the intervention in Iraq could cost the United States about 2% of its Gross Domestic Product or roughly put \$200 billion. His estimates were rapidly dismissed by the White House and in a few months later he was dismissed from his position. Approximately a year and a half later his prediction began proved to be wrong and a gross underestimation of the Iraq intervention. The U. S. taxpayers up to now have committed approximately \$180 billions for the buildup to the war for overthrowing Saddam Hussein's regime and for the occupation and rebuilding process in Iraq, and this is not inclusive of the special aid and trade deals cost for buying allies.

And the biggest source of underestimation that the war would be a “cakewalk” has been proven wrong. (Hartung, 2004) References DeLauro, Calls for Mental Health Services for Returning Soldiers [http://www. house. gov/delauro/press/2005/April/vet_mh_04_11_05. html](http://www.house.gov/delauro/press/2005/April/vet_mh_04_11_05.html) 16 March, 2007 Health, 2006, Chapter 4, National Council of Disability, Chapter 4 [http://www. ncd. gov/newsroom/publications/2006/progress_report. htm#chapter_four](http://www.ncd.gov/newsroom/publications/2006/progress_report.htm#chapter_four) Accessed: 16 March, 2007 Iraq War Vets Face Mental Illness, Addictions [http://www. jointogether. org/news/headlines/inthenews/2006/iraq-war-vets-face-mental. html](http://www.jointogether.org/news/headlines/inthenews/2006/iraq-war-vets-face-mental.html) 16 March, 2007 Kane Farabaugh, 2006, Iraq War at Heart

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