



# The Suffering of Veterans

AMY BLUMENSHINE

As I write this, I learn in my e-mail that the parents of a young Iraq veteran asked members of their congregation to pray for Joe (not his real name) when he went missing for three days. Evidently he had drunk himself into oblivion. All gave thanks to God when “something” told him to call his parents. The young vet, who is also the father of a preschooler, is now on a waiting list for a bed (meaning treatment) in the local vets facility. No space is expected for weeks so it is a very scary time for those who worry about his welfare, and more prayers are requested. Will those who love this man ever have reason to feel at ease about him in the decades to come? What kind of parenting will Joe’s child receive from him? The suffering is apparent now and could become much worse.

The statistics about the suffering of veterans are very sobering indeed. After a few years in the military, too many recruits in the prime of their lives, above average in health and fitness, have transformed into people living with chronic disabling conditions. Nearly half of the veterans who deployed in the Iraq and Afghanistan wars have already identified themselves as chronically impaired by their military experiences.<sup>1</sup> The percentage is expected to increase as the troops are downsized. Those who have applied for disability compensation can anticipate decades of diminished lives for themselves and their loved ones. Some will have an ongoing dependent relationship with the Department of Veterans Affairs (VA)

<sup>1</sup>The current best information suggests that 45 percent of those post-9/11 (Afghanistan/Iraq) veterans no longer in the military have made claims to the US Department of Veterans Affairs (VA).

*The statistics about the suffering of veterans are sobering indeed. How can we consider ourselves relevant as a church if we ignore the impact on those sent to execute the military endeavors into which we now put so much of our treasure?*

bureaucracy, whose decisions will have a huge impact on the quality and dignity of their lives.

One cannot overemphasize, however, the importance of remembering that each former member of the military is a unique child of God, on a unique life path. People come from various circumstances and backgrounds before they enter the military and then undergo different experiences. Further, people have varying responses to the same things—including potentially traumatic incidents. It is wrong to stereotype all veterans as troubled themselves and troubling to others. It is also wrong to ignore those who are faring poorly as a result of what they were sent to do. I have been called to bring awareness to the scale and scope of veteran suffering while urging church action in addressing the need for healing—on the individual, family, and societal levels.

How can we consider ourselves relevant as a church if we ignore the impact on those sent to execute the military endeavors where we now put our treasure—a large part of the US federal budget?<sup>2</sup>

As a military chaplain, William Mahedy wrote,

The voice of the veteran is raised in protest against the prevailing currents of our culture; it unmask[s] our delusions. It is a voice of prophecy we fail to heed at our peril. The vets remind us that we also sit in the shadow of darkness, imprisoned by our own moral confusion and stress, each in our own private space immersed in our personal concerns with little relationship to community. We who have been able to trivialize even war can do little else with moral seriousness. The voice of the vets is a call to discover a deeper ethic, a richer way of life; it is a voice of healing.<sup>3</sup>

#### LITANY OF MALADIES

Joe, of my opening paragraph, is unknown to me, so I can't say what led to and triggered his drinking binge. A growing number of chemical dependency interveners identify trauma as the hidden root of substance abuse.<sup>4</sup> There is a legion of known problems juggled by veterans, however. An estimated 43 percent of vets his age binge drink weekly.

Chronic body pain is one of the major categories of distress, for which most disability compensation is allotted. The causes of the chronic pain are very rarely enemy fire but more typically are related to training, carrying body armor/weaponry, and exposure to toxins, vaccines, and the elements—including living in an environment where one is a constant target. Narcotics are often prescribed for these patients. I know a Vietnam-era veteran living in very diminished circum-

<sup>2</sup>I use budget figures from the National Priorities Project at <http://nationalpriorities.org> (accessed July 27, 2014).

<sup>3</sup>William Mahedy, *Out of the Night: The Spiritual Journey of Vietnam Vets* (New York: Ballentine Books, 1986) 105.

<sup>4</sup>See Jerry Boriskin, *PTSD and Addiction: A Practical Guide for Clinicians and Counselors* (Center City, MN: Hazelden Foundation, 2004).

stances whose major preoccupation is whether his VA-allocated pain meds will last him the month. This has become his life—trying to eke out his pain meds.

For too many vets, chronic pain becomes a gateway to addiction and the illicit drug trade, with all of the attendant personal and societal problems. I struggle with how to come to terms with the awareness that under US military rule, Afghanistan went from supplying zero percent of the world's illegal heroin to 90 percent.<sup>5</sup> Vets struggle with this, too. Guarding the roads has been a common activity of the military in Afghanistan. While the troops and their families were experiencing all the hardships of separation and peril, the guards realized that the truck cargo they were actually protecting included poppy products intended for the international illicit market.

---

*post-traumatic stress disorder is best understood as a physiological reaction to having been in severe life peril; it's as though the body physiology becomes stuck in a permanent fight or flight alert*

---

Another major category is psychological/relational pain. Since its recognition in 1980, post-traumatic stress disorder (PTSD) has changed from being routinely denied as a diagnosis for vets to being commonly applied, especially in the public narrative.<sup>6</sup> PTSD is best understood as a physiological reaction to having been in severe life peril; it's as though the body physiology becomes stuck in a permanent fight or flight alert. Given the mercurial moods and inability to trust, the PTSD sufferer struggles with relationships. One therapist called it “beset by dark emotions and afraid to love.” Conditions that impair a person's capacity to love and be loved are of major concern to those of us who profess a God of love.

While I encourage use of the promising therapies for PTSD, the sorry current situation is that most sufferers continue to live with their PTSD problems. Among those who get to the VA and are diagnosed as needing treatment, most never follow through with therapy, either never showing up or not completing. Of those who do complete, most still have significant symptoms.<sup>7</sup> This current dilemma is

<sup>5</sup>“Afghanistan Opium Harvest at Record High – UNODC,” *BBC News*, November 13, 2014, at <http://www.bbc.com/news/world-asia-24919056> (accessed July 27, 2014). See also Barry Bearak, “At Heroin's Source, Taliban Do What 'Just Say No' Could Not,” *The New York Times*, May 24, 2001, at <http://www.nytimes.com/2001/05/24/world/at-heroin-s-source-taliban-do-what-just-say-no-could-not.html> (accessed July 27, 2014). Bearak's article notes how the Taliban eliminated poppy cultivation in Afghanistan.

<sup>6</sup>In 2008, the Rand Corporation reported 300,000 cases among the post-9/11 troops. The number would be higher today. See Terri Tanielian and Lisa Jaycox, eds., *Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery* (Pittsburgh: RAND Corporation, 2008). For a shorter research brief, see Terri Tanielian et al., “Invisible Wounds of War: Summary and Recommendations for Addressing Psychological and Cognitive Injuries,” Rand Corporation, at <http://www.rand.org/pubs/monographs/MG720z1.html> (accessed July 27, 2014). In addition, an estimated 35 percent of Vietnam vets suffer from PTSD, as do additional vets from other eras. Particularly disturbing is the large number of veterans, both women and men, whose PTSD is a result of experiencing sexual predation and assault by their comrades.

<sup>7</sup>See Jason DeViva, “Treatment Utilization Among OEF/OIF Veterans Referred for Psychotherapy for PTSD,” *Psychological Services* 11/2 (2014).

one of the reasons that some VA staff are recruiting churches to help vets, as their research shows that many vets tend to turn to pastors before therapists.

In addition to PTSD, which many people experience at a subclinical level (that is, suffering some symptoms but not the complete checklist that triggers a diagnosis, health care, and compensation by the VA), many veterans suffer from anxiety or depression. Another large and confounding category of suffering is traumatic brain injury (TBI), projected to be a life-impairing factor for at least three hundred thousand veterans.<sup>8</sup> Veterans who suffer from these psycho/physiological maladies are particularly vulnerable to substance abuse problems.

All of the above problems are risk factors for suicide as well as a long list of other self-inflicted harm.<sup>9</sup> The heightened risk for suicide must be considered life-long, especially since the demographic at highest risk of suicide in the general population is senior white men. Other factors of military life increase the suicide risk for veterans.<sup>10</sup> Researchers point to the disruption of social mores and ties, familiarity with weapons of death, and having been taught to override the human resistance to kill—as is now intentional in training. (Since a post-WWII study showed that most GIs were not firing to kill, military training now promotes “muscle memory”—acting to kill without use of the deliberative faculties. The moral agency of the combatant is intentionally diminished.) I am among those who suspect that this training increases the incidence of moral injury.

## MORAL INJURY

It is within the context of large numbers of healthy people being sent into probable harm (on the call of their country) that we explore the evolving concept of moral injury.<sup>11</sup> Moral injury is a term that has gained traction since 2009 when a group of VA psychologists published a review of research about what troubles vets. They found that moral transgressions—violating internal, often unconscious, codes of human behavior—led to increased utilization of VA medical services of all kinds, physiological as well as psychological.<sup>12</sup>

In the context of war, moral injuries may stem from direct participation in acts of combat, such as killing or harming others, or indirect acts, such as witness-

<sup>8</sup>Tanielian and Jaycox, eds., *Invisible Wounds of War*, xxi. That number would be closer to 400,000 today if it continued at the same rate.

<sup>9</sup>As widely reported on the Internet, at least twenty-two veterans die by suicide daily. See, for example, <http://www.usatoday.com/story/news/nation/2013/02/01/veterans-suicide/1883329/> (accessed August 13, 2014). Other harms triggered by the veterans' behaviors include relationship loss, job loss, high-risk activity consequences, homelessness, and criminal justice system involvement.

<sup>10</sup>See Amy Blumenshine, “Self-Inflicted Harm Among Military Veterans: Our Militarized Society’s Cry for Help,” *Caring Connections: An Inter-Lutheran Journal for Practitioners and Teachers of Pastoral Care and Counseling* 9/2 (2012), and Blumenshine, “Self-Inflicted Harm Among Military Veterans: Our Militarized Society’s Cry for Help: Part Two,” *Caring Connections: An Inter-Lutheran Journal for Practitioners and Teachers of Pastoral Care and Counseling* 10/1 (2013).

<sup>11</sup>I recommend reading the series on moral injury at <http://projects.huffingtonpost.com/moral-injury> (accessed July 27, 2014).

<sup>12</sup>See Brett T. Litz, Nathan Stein, Eileen Delaney, Leslie Lebowitz, William P. Nash, Caroline Silva, and Shira

ing death or dying, failing to prevent immoral acts of others, or giving or receiving orders that are perceived as gross moral violations. The act may have been carried out by an individual or a group, through a decision made individually or as a response to orders given by leaders.<sup>13</sup>

We in the theological community readily accept the importance—if not the primacy—of the conscience, cultivation of the soul, and the peace of the inner life, but this is less often the case in both psychology and the military. The military stresses obedience to commands over personal moral agency.

The Soul Repair Center was founded at Brite Divinity School to focus on helping veterans recover from moral injury. I recommend their pioneering work to all. Indeed we are all pioneers in exploring how—measurably—the character and conscience and souls of our military are impacted by what they are sent to do in our name. Center co-founder Herm Keizer, a retired military chaplain, often quotes his seminary professor as teaching, “When you violate your conscience, you commit suicide of the soul.” The other co-founder, Rita Nakashima-Brock, has written of her particular experiences as a daughter of a veteran, along with the anguished stories of other veterans.<sup>14</sup>

Veterans have long used “soul” language to describe what happens to them. For example:

Everything spiritual that had formed the foundations of my soul and guidance in life felt like a lie, as did my social teachings. My soul had been scooped and cleaned out just as one scrapes a pumpkin to make a jack-o’-lantern. Every seed, every strand of pulp of my beliefs were gone. I was souled out, and the windows to my soul [“the thousand yard” stare of his eyes] were positive proof.<sup>15</sup>

Moral injury often accompanies PTSD but can exist independently. PTSD is best understood as the body’s reaction to mortal threat whereas moral injury occurs due to moral dilemmas and impacts the person’s sense of self. As one Vietnam vet explained to me recently, “I’m just trying to decide if I’m a good man or an evil one.” Another Vietnam veteran and active church attendee explained, “I just don’t think God will ever forgive me for what I’ve done.” I want to emphasize that these are individuals and families who have been struggling for over forty years. Their pain is very real to me.

Identifying and addressing moral injury may be a solution to the puzzle of those who are not helped by current PTSD treatments. The therapies identified by the VA as most effective focus on controlled reexperiencing of the past threats to

---

Maguen, “Moral Injury and Moral Repair in War Veterans: A Preliminary Model and Intervention Strategy,” *Clinical Psychology Review* 29 (2009) 695–706.

<sup>13</sup>Shira Maguen and Brett Litz, “Moral Injury in the Context of War,” *National Center for PTSD of the U.S. Department of Veterans Affairs*, April 15, 2014, at [http://www.ptsd.va.gov/professional/co-occurring/moral\\_injury\\_at\\_war.asp](http://www.ptsd.va.gov/professional/co-occurring/moral_injury_at_war.asp) (accessed July 27, 2014).

<sup>14</sup>See Rita Nakashima Brock and Gabriella Lettini, *Soul Repair: Recovering from Moral Injury after War* (Boston: Beacon, 2012).

<sup>15</sup>Michael Orban, *Souled Out: A Memoir of War and Inner Peace* (Candler, NC: Silver Rings, 2007) 18.

life so that the body can learn that it is now safe (resetting the limbic system). If the traumatic experience is moral, however, like killing a little girl, reexperiencing that horror will not help the person, but make them worse. Most cannot tolerate the therapy and drop out. Many never tell anyone what is troubling them. A recent participant in our Healing of Memories workshop said, “I’ve been waiting 42 years to tell my story.”<sup>16</sup>

### MORAL CASUALTIES

Surely it is bizarre that, in a society remarkable in the eons of human history for the relative safety and longevity of its members, we entertain ourselves watching people get killed. Over and over the fictional story plays: the good guy kills the bad guy and nobody suffers—the myth of redemptive violence. The life and family of the “bad guy” are deemed of no consequence. More recently in video games, viewers pull the trigger themselves. Fictive killing is but one of the many ways our modern culture numbs us to the significance of life, blocking our reverence, and teaching lies about killing.

---

*A veteran is someone who at one point wrote a blank check to the US government payable up to and including his or her life itself. The gravity of this alleged transaction is staggering indeed.*

---

Crossing the lethality line, taking someone’s life, matters; it really, really matters. Imagine having to make this point! Sending humans to kill or be killed is of huge moral peril—not just to the individuals involved but to their communities as well. I know this from hearing veterans’ stories and paying attention to their suffering as well as reading their memoirs and the daily news. I also find these truths in ancient literature including our Bible. In current scientific research, I find it in studies of neuropsychology and field theory.

Family systems studies remind us that the person who disrupts the system is not always the symptom bearer. The pain of the veteran can show up in someone else’s behavior. Richard Rohr, Christian spiritual director, insists, “If we do not transform our pain, we will be sure to transmit it.” We are an interconnected web of life—remember Paul’s one body of Christ (1 Cor 12:12–13)?

Sending humans to war is one of the ways we act as though we don’t matter to each other. At many of the veterans events I attend, someone will define veterans in this way: a veteran is someone who at one point wrote a blank check to the US government payable up to and including his or her life itself. The gravity of this alleged transaction is staggering indeed. There is incredible virtue in pledging one’s “wild

<sup>16</sup>Fr. Michael Lapsley developed the Healing of Memories workshop. We use this modality in Minnesota to help veterans heal their memories. For more information, see <http://www.healing-memories.org> (accessed July 27, 2014).

and precious life” to a good cause.<sup>17</sup> As Lincoln famously noted in his Gettysburg Address, we cannot sanctify more than the gift of life itself. It is gravely sobering to consider the many lives lost from being sent to war. I count the lives lost during war and those lost in self-destruction after the war. What happens when someone finds one’s cause unworthy? The casualness of writing a blank check on one’s life is also staggering. How could a human being be so expendable and disposable?

Of course, the majority of those who enter the military do not comprehend the significance of participating in the kill or be killed enterprise. As one struggling vet explained to our group, “It’s true my recruiter didn’t tell me the whole truth but if he did, no one would sign up.”

---

*“There are things I haven’t told my therapist because I don’t think my therapist could handle it,” explained one veteran.*

---

Mostly, we operate unconscious of some universal emotional laws.<sup>18</sup> One is that I have a right to life. As I go about my daily activities, I expect the people I meet to respect that right and not to kill me. Those who don the uniform and arms of war put themselves in a different category. It is accepted in the craziness of human war making that combatants have the right to kill each other. This is not always apparent to them until they are in a war zone. At a physiological level, living in that climate of “death at any moment” has an impact. It can be hard to ever feel safe again. Back at home, too many veterans construct “bunkers” for themselves, often removing themselves from the human community.

While in life-threatening circumstances, some military members do things to survive that they later regret. The treatment centers for PTSD and substance abuse are hearing some of these stories, but it is very common to never voice them. “There are things I haven’t told my therapist because I don’t think my therapist could handle it,” explained one veteran. War is full of moral dilemmas—a moral sewer according to Chaplain Mahedy. The young people navigating these complex life-and-death decisions are, in some states, not deemed old or mature enough to order a beer or rent a car.

I think the truth is that none of us really wants to hear or know of these pains; there is plenty of peril—for both the vet and the witness—in the uncovering. We must tread carefully in the space sanctified by suffering and death. We risk normalizing the evil of war suffering or yet again exploiting the virtue and suffering of veterans for some agenda. Along the way is the potential personal dis-ability humans can experience when confronting the truth about the great dis-ease of our society—how we are destroying ourselves.

<sup>17</sup>In her poem “The Summer Day,” Mary Oliver asks, “Tell me, what is it you plan to do with your one wild and precious life?”; in *New and Selected Poems*, vol. 1 (Boston: Beacon, 1992) 94.

<sup>18</sup>Thomas Lewis, Fari Amini, and Richard Lannon, *A General Theory of Love* (New York: Random House, 2000) 13.

## REALITY CHECK

Let me step back from the life-and-death dramatic framing of the war enterprise to expand the picture. Many people (some VA staff, military chaplains, and veterans themselves) tell me quietly things they would not say publicly. First, I am told that many of the applications for disability compensation submitted by about eight hundred thousand post-9/11 veterans are false. It's not really that bad, say these whisperers. According to them, many of the applicants are malingerers who are just trying to get free health care or checks from the government. (The federal VA budget requested for 2015 is \$164 billion, an amount that doesn't include all the state and private spending on veterans' needs.)

To that argument, I respond with concern about the moral corruption indicated by a person's allegedly false self-representation as a disabled person. This is not something the person is likely to have done before their military experience. Moreover, contrary to the whisperers, I have heard many, many stories from veterans deeply hurt by the way their suffering was denied and dismissed in the claims process.<sup>19</sup> There is a documented trail of unjust denials of benefits related to radiation exposures, Agent Orange, Gulf War illnesses, and PTSD, to list just a few. Also ironically, the extent of resilience, the capacity of the human to function in spite of the injury, is marked against them in the benefits determination. The vets call this being "F'd by the F [function] scale."

Another reality is that the majority of our twenty-three million veterans, including many who were in a war zone, never fired a shot at an enemy. Many veterans even feel guilty because they never experienced the life-and-death situations of other veterans, which civilians often assume. Some voice regret over never "using the skills they were taught" in killing others. Yet, they suffer. Space does not allow me to recount the many stories I know of veterans who did not personally kill who are still suffering diminished lives in the aftermath of their military experiences. I explain that while some of us are at the point of the spear in causing harm to others, the rest of us are at varied distances on the shaft. Harm is caused in a variety of ways. Recent news articles describe the climate of sexual abuse and toxic leadership present in some parts of the military.

As Kelly Denton-Borhaug convincingly writes in this issue, "Being honest toward reality is very hard to do."<sup>20</sup> The suffering of veterans is a lens for seeing what is wrong, but we have to pay attention. Be alert to framing that blames veterans for, denies, or minimizes their suffering. Suffering can exist along with the pride of accomplishing very difficult tasks under adverse circumstances at considerable personal cost.

If we truly want to help those who have been in our nation's military, we

<sup>19</sup>Make the Connection shows videos of vets describing their difficulties at <http://maketheconnection.net/stories-of-connection> (accessed July 27, 2014). You can see the multiple injuries for which Afghanistan/Iraq vets are seeking compensation at an advocacy group's site, <http://www.thewaitwecarry.org> (accessed July 27, 2014).

<sup>20</sup>See Kelly Denton-Borhaug, "United States War-Culture and the Political Economy of the United States," in this issue (*Word & World* 34/4 [2014]), 367.



must first be honest about what it is that hurts them. The church is uniquely positioned to help people as they make meaning of their experiences, especially putting those experiences in a life-promoting moral frame. Can we together respond to the veteran's question: "Why did you send us to die without telling us why?"<sup>21</sup>

As a nation, as a church, we have failed to do sufficient soul-searching related to the wars waged in our name. This is a shared societal burden—not the responsibility of each individual veteran. To return to Joe's dilemma in the opening paragraph, I encourage you to unpack the multiple meanings of "I hurt"—the common complaint of the suffering veteran (while remembering, of course, that not all veterans are suffering).

Look deeply into the suffering of veterans to better understand the impact of our military choices. We owe it to each other and to the future generations. Along with the Apostle Paul, I know that God is always with us in this exercise: "For I am convinced that neither death, nor life, nor angels, nor rulers, nor things present, nor things to come, nor powers, nor height, nor depth, nor anything else in all creation, will be able to separate us from the love of God in Christ Jesus, Our Lord" (Rom 8:38–39). ☩

*AMY BLUMENSHINE is called as a diaconal minister by the Minneapolis Area Synod of the Evangelical Lutheran Church in America (ELCA) to address the suffering of veterans and their families. She founded and convenes the Coming Home Collaborative, an open and growing volunteer association of people who are concerned with the psychological and spiritual healing of veterans, especially those currently reintegrating with their families and communities. For more information, see <https://www.facebook.com/Coming.Home.Collaborative>, [www.listentovets.org](http://www.listentovets.org), and [www.mpls-synod.org/veterans-ministry](http://www.mpls-synod.org/veterans-ministry). Blumenshine co-authored *Welcome Them Home, Help Them Heal: Pastoral Care and Ministry with Service Members Returning from War* with John Sippola, Don Tubesing, and Val Yancey (Duluth, MN: Whole Person Associates, 2009).*

<sup>21</sup>This line was part of a refrain in the Vets Play Project, a work created out of hundreds of interviews with veterans, using their own words, performed in November 2013 at Fort Snelling in Minneapolis, Minnesota. For more information, see [http://footprintscollective.org/vet\\_play\\_project.php](http://footprintscollective.org/vet_play_project.php) (accessed July 27, 2014).