

“I Don’t Give a Rat’s Ass What Other People Think”¹

On the Personal, Social and Occupational Impact of Acknowledging the Psychological Effects of Trauma in a Military/Veteran Context

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(Warning: Some of the language used below might be considered less than professional, but so is the language of stigma. It cannot be avoided here.)

Acknowledgement: The ideas presented below have been influenced by many sources. The most important of these were discussions with combat veterans over the course of my career as a psychologist at a Veterans Administration PTSD treatment program. I thank them.

There has been a lot of talk about problems military personnel and veterans have admitting that they have been troubled by their combat experience.² The term applied in official discussions of the subject is “stigma”, which means that if you are identified as having such problems you are branded as weak or inferior. The term stigma is related to the ideas of stereotype and prejudice.

As most veterans know the military is not as unified an organization as most people believe. What goes in one command, or even with one person in a command, does not go with everyone. The same applies for families, friends and civilian employers. So, while admitting that you are having a problem and seeking help is encouraged in one place, it may be career ending, or relationship

¹ The title of the version of this paper meant to introduce these ideas to mental health professionals is: “Get it Right”.

² or for that matter, admitting to being troubled by anything which might be called a psychological problem about any subject.

damaging, in another. As strong as the impact may be with others, the most powerful effect of stigma is the person's own judgment of him or herself.

Self-judgment in these matters often comes from what we have learned from others. If you are calling yourself a coward in your head, listen carefully, it might be in the voice of your drill instructor, or coach, or father, who told you they were just toughening you up. But there is a difference between being toughened up and torn down, and a difference between being prepared for battle and prepared for civilian life.

Previous Important Comments on Stigma

Past efforts to get rid of stigma have presented the following important ideas:

- Negative psychological reactions to combat are not a sign of weakness, but normal reactions to an abnormal situation (war), which get carried outside the combat situation.
- Seeking help is not only a right it is a responsibility, part of the obligation to fulfill your potential.
- The phrase "Not all wounds are visible" (which I have seen attributed to *Doonisbury* author Gary Trudeau) captures the idea that these reactions are no different than physical wounds.

While there is important truth to these ideas, there are some other useful ways to think about the psychological reaction and asking for help.

Stigma in General

While the above views on stigma are important, it may be more important to realize that stigma, like stereotyping, is an inescapable part of being human. Humans are judging creatures. We are always making up stories about what things mean, judging people as strong or weak, smart or dumb, etc. etc. There is stigma attached to ethnic groups, skin shading, height, weight, hair color, hair texture, age, you

name it. There will always be some kind of judgments made. Experiments have shown that if you randomly divide people into two groups and give each group a name, it won't be long before the members of the two groups start making up stories about ways in which the other group is inferior.

Occasionally these quick superficial judgments can be helpful. Sometimes we have to make important decisions rapidly, therefore we cannot fully explore deep complex meaning. For example, in combat the life or death judgment can be made on the other person's clothing or even less of a cue. We have to judge on a quick simple sign, a stigma, if you will.

The Nature of Psychological Reactions

The above understanding of stigma is a first step, helpful but not very comforting. A next step is to understand the nature of the negative psychological reactions after combat or trauma in general. Each of these reactions may have its own stigma term attached to it. For each of these reactions a new better more accurate stigma term is offered. So, even if we can't get rid of the stigma, we can get the name correct.

Current stigma term: **Crazy Vet**

More accurate term: **Stuck Transferer**

This one is often associated with what are often called flashbacks³, which relate to how memory works. We can consider two kinds of memory here:

- a) Reliving memory - it feels like it is happening again.
- b) Intellectual or historical memory - the memory is knowledge that something happened, including some emotion about it, but not the same emotion you felt when it was happening.

³ Flashbacks can be a full reliving of an experience, or just part of it. For example, having intense fear or anger when seeing someone when you are outside the war zone who looks like the wartime enemy.

If there was fear, or terror in the original event, and the event is in reliving memory there will be some fear when it is remembered. If the event resides in historical memory, then when you are reminded of the event you won't feel the fear again. You may feel sadness that it happened, or relief that it is over, or many other things. Most but not all of our experience is supposed to move from reliving to historical memory. When trauma memories do not make this transfer, then we have the PTSD symptoms of flashbacks and nightmares. The failure to transfer may also contribute to avoidance of social contact and unwanted anger and rage. The common stigma insult for someone with a problem like this might be "crazy vet", but a more precise insult might be the phrase "stuck transferer". After all, if you are going to stigmatize someone you might as well get it right.

Current stigma term: **Asshole**

More accurate term: **Pain Blocker**

This one is about Anger/Rage – of the unwanted regretted variety. Based on over 30 years of discussion with combat veterans, I endorse the idea that the anger reaction is a way of trying to hide at least sadness, fear and/or pain. Thus, in a very simplified form, the choices are:

- a) having the "weakness" of dealing directly with the fear and sadness from the trauma situation, or
- b) having the "weakness" of the anger to hide it.

Sometimes when people hide their fear or sadness do not need anger to do so. They can just wall it off with numbness or callousness, which ends up spreading out to also block their positive feelings. Alcohol, drugs and other addictive habits also help with this wall. If your idea of strength is to go through life without emotion, and defining anyone who does not want to do so as weak, that is to stigmatize them, even if I disagree who am I to argue?

Since we have already used "crazy vet", a good second choice for inaccurately stigmatizing someone with the anger reaction would be "asshole". Again, this would be unnecessarily imprecise. The better

stigma insult might be “pain blocker”, which would have the added benefit of also applying to the person with no demonstrated anger, or other visible emotions.

Current stigma term: **Weak**

More accurate term: **“Bum” Amygdala**

Hyper-arousal is the term for one of the categories of symptoms of PTSD. It refers to extreme emotional reactivity, sometimes seen as a startle response or “jumpiness”. It is reasonable to understand that living through extreme stress, especially for long periods of time, leads to malfunction of the nervous system. I don’t think that this is fully understood, but the idea is that the biological systems which get us “up” to take on continued extreme threat are changed and become over-reactive.

If general hyper-arousal is the situation, until the systems can repair themselves, or be repaired (Sometimes memory transfer seems to do it.) it will mean the survivor of trauma will have to learn and practice ways to compensate, to “dial it down” every day. If one is to be stigmatized for this, by the self or others, there should at least be accuracy. For now research suggests that instead of using the term “weak” saying one has a “bum amygdala” (one of the parts of the brain associated with fear reactions) would be the proper stigmatizing phrase.

More on Self Stigma

We have already addressed the contributions of unreasonable and inaccurate judgments to destructive self-criticism. There are a couple other factors that contribute to veterans willingness to believe the worst of themselves. These are the negative judgments that come from the combat experiences. Survivor guilt, the guilt that comes from just surviving or not having the “worst” wound, is well known. The other, not as often considered, is that no one ever always acts perfectly in combat. Everyone can look back and see a decision that can be interpreted as having been a mistake, and often a life or death

mistake. These mistakes can be about doing something, or not doing something. No one is immune. It doesn't much matter even if you were doing what you were supposed to do, or ordered to do. It doesn't matter if it was something beyond human capability, because of exhaustion, or inability to watch everything all the time, read minds, or to function effectively when trying to block grief. Everyone did something they can say was wrong, and the underlying self-criticism adds to the tendency to make negative self-judgments for needing and/or asking for help. Perhaps what makes war hell, and not just terrible, is that there are no right answers, and it is impossible to leave instead of making one of the wrong answers.

When Stigma is not a Problem

What is written above is mainly directed to people who acknowledge that stigma might be a problem for them, either in that it prevents using helpful resources, or interferes with their fully using the help they are getting. There is another group of people to be addressed, those who suspect they have some problems related to combat or other trauma, but who think there is no way anyone could help so they don't ever explore the possibility. Some of these people may claim they don't give a "rat's ass" about what other people think. But that can't be why they don't seek help. Everyone cares at least a rat's ass. Nobody is too busy to even check out chances for help. On the other hand someone might not go because it would be too painful to try and have it not work. That I would believe. To this person I say read some recent articles on the subject, see if you can audition a few counselors. Knowing how counseling for these problems has evolved, I think you might be surprised.