Beyond Post-Traumatic Stress
Homefront Struggles WITH THE Wars on Terror

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PREFACE

When soldiers return to the United States from the wars in Iraq and Afghanistan, they bring more than medals, battle stories, and visible wounds with them. The unseen effects from their experiences—combat stress and moral injuries, depression and suicide, substance abuse, and higher propensities for violence—ripple through the lives of combat veterans, their families, friends, and wider communities for years to come. Ideally, as part of processing all this, conversations and stories ripple outward as well. Stories, yes, about patrols and hits and battles in "theater," as soldiers call the places to which they deploy. But just as important to hear are stories about what happened relatively "off-stage," at home, about sacrifices made, about discovering new breaking points, and about mustering new strengths. This book chases those ripples, following the journey of a team of anthropologists over four years of fieldwork.

As ethnographers, we undertake writing a kind of "history in the making," a local story of soldiers coming home from war zones, and therefore inflected by regional, national, and global forces. We ask how those struggling after deployments are understood, both institutionally and in community, and give special attention to frameworks like "combat stress" and posttraumatic stress disorder (PTSD). In turn, we follow ways in which these effects radiate outward, drawing the community into their complexities.

We cannot stress enough how early it feels to attempt a written, collective accounting of how these wars play out at home. They are, after all, wars that in some sense are still unnamed, meaning that they probably still do not hold the names that history will eventually bestow as we settle into consistent usage (as with WWI and WWII settling long afterward). In this book's subtitle we refer to the Wars on Terror, a slight alteration of the military's GWOT—the Global War on Terror. For many Americans, the wars' official title appears to sit uncomfortably; it is not used in everyday speech. Naming a war "GWOT" may encapsulate some of the problematic open-endedness of fighting against terror, which is both a tactic and an emotion. The subtitle "Homefront Struggles with the Wars on Terror," in the plural, captures some of the instability surrounding the very naming of the wars. In the rest of the volume we opt for a more neutral, perhaps place-holding term, calling them the "post-9/11 wars." Military personnel use OEF/OIF to refer to the Afghanistan and Iraq wars jointly (OEF refers to Operation Enduring Freedom in

Afghanistan, OIF to Operation Iraqi Freedom in Iraq). Writing in and about the present and recent past, we recognize, places inevitable blinders on our vision. How will history look back on the United States during the period of the post-9/11 wars? Will we be narrated as a martial force that took stands for the "freedom" that most American service members say they fight for? And what will be meant by freedom? Freedom to civil liberties, rule of law, and democracy? Freedom from terrorism, at any cost? Will we be narrated as championing greater global security and global freedoms? As enforcing the prerogatives of global empire?

After a decade of deeply controversial conventional warfare, the United States currently exercises more "surgical" (drone-driven) means of taking out adversaries believed to be terrorists. Many see surgical strikes as an alternative that should have been pursued in the first place, but they raise their own problems, not least that they are now increasingly used across multiple international borders. In the past decade, military, security, and intelligence sectors have easily tripled. Most tellingly, we write from a time and place where, while endless reporting and official diplomatic discussions are ongoing, much of this is not talked about directly, in American communities. Instead, in 2013, while the wars stretch in diffuse ways into the future and even as the United States is out of Iraq and drawing down in Afghanistan, most of the local stories we tell are about how we cope with the challenges war has brought to us and ours. How veterans come home, then, is at the heart of civilians' experience of war itself.

At the beginning of this project, we half-jokingly declared that we didn't want to venture into this research "without a clear exit strategy" (the military metaphors were rife from the beginning). But as can happen, the work expanded, both because of what occurred through our relationship with the army, and because of the nature of ethnography itself. Team members volunteered at Army Community Services and the USO (United Service Organization) facility at Fort Carson, interviewed spouses in their living rooms, volunteered on art projects designed to build community, and attended support groups for spouses and town hall meetings. Those opposed to these wars and to processes of militarization have had their hearing, as well, as we have attended meetings and protests against the war and the army's new helicopter brigade and its proposed expansion of training grounds in southeastern Colorado. Ethnography, the writing of in-depth interpretations of people or cultures—or in this case, a large social institution—is expansive in nature. It is the opposite of sound-biting; instead, it is thickening the description, complicating the questions we ask. The stories in this book move across many sites and contexts, drawing upon interactions circling from homes to battlefields to returning back home again. They unfold in the

wake of repeated deployments, as families and communities welcome back profoundly changed individuals. By actively pluralizing the voices in the conversation, our hope is to offer a new framework with which to reckon war's impact.

We write well aware of all the uncertainties and limitations implied by the "fog of the present," compounded by "the fog of war," whether apprehended from near or afar. As with many ethnographic projects, this one has taken us in unexpected directions, on paths that at first appeared to be false turns but later turned out to be central to how individuals and the community were dealing with the effects of war. We have frequently asked ourselves what contribution ethnographers could make as journalists, psychologists, and others rapidly build a body of material of soldiers' and families' experiences and challenges. We have also come to value the time ethnography requires, how it enables us to recognize patterns and to reflect on and interpret experiences with a group of people or individuals over time.

Such questions fill us with trepidation and humility. We enter the labyrinth that is war's making well aware of the limits of any knowledge we can have gained; what we have learned is inevitably incomplete. And while we have tried to avoid polemics and ideology, this book contends with matters that are inherently political and emotionally laden. Our work is based in neither a clinical nor an empiricist framework; we make no claim to offer recommendations for treating PTSD, or for evaluating the effectiveness of varying treatment modalities or policy protocols: these are tasks for our colleagues in other fields. Rather than testing hypotheses, our approach is interpretivist, which in anthropology we understand as illuminating a specific time and place in all its complexity, with a humanistic orientation to varied, lived experiences. Our hope is that even readers at odds with particular depictions or interpretations we offer will nonetheless recognize our efforts to respect and honor those mostly deeply touched by war.

As semi-native (US citizens but nonmilitary) coauthors, the "we" voice in which this book is written has various facets. At times "we" narrate fieldwork encounters that may have been recorded by just one or some combination of us—Jean, Sarah, or any of the numerous student researchers on the project—simply to avoid belaboring the text with unnecessary detail. Elsewhere we may speak simultaneously as authors and citizens addressing our fellows; we hope any tension between these roles serves both honest and productive ends.

Names in this book are mostly pseudonyms, and we have often altered identifying information. We retain the names of most public figures and of those community members who requested it.

ACKNOWLEDGMENTS

INTRODUCTION

Sharing War: A View from Home

A labyrinth is a symbolic journey or a map of the route to salvation, but it is a map we can really walk on, blurring the difference between map and world.

—Rebecca Solnit, *Wanderlust: A History of Walking*

"I'm seeing things like wives going to shrinks to get psychiatric meds that are *really* for their soldiers!" Jody Newsome, an army wife who also worked at Fort Carson with families of deployed soldiers, found such facts alarming and had sought us out in response. The soldiers, she thought, were wary of seeking help on record at Fort Carson for fear of what it would mean for their careers and their relationships with their "battle buddies." That it was more socially acceptable for nondeploying army wives to seek such medications in response to the stresses of holding down the home front was itself remarkable, something worthy of effort to be better understood.

Jody was one of Jean's social acquaintances. Because she had decided the problem was cultural—that "soldiers' *culture* makes it shameful to struggle"—she turned to us as cultural anthropologists, hoping we might work together with them to better understand stigma's role in creating barriers to seeking care. She introduced us to a battalion commander back from heavy combat in Iraq, that unit's second of two closely spaced deployments. He, in turn, invited us to interview a random sample of his infantrymen to explore how stigma or fear of reprisals in the "microcultures" of smaller units might prevent soldiers from even admitting difficulties, let alone seeking help.

Long-time colleagues who had taught and researched together, we (Jean and Sarah) had frequently discussed starting a project on the wars' impact on the military circles and wider community in the Pikes Peak region of southern Colorado. We decided to create a three-week, intensive course on combat stress and reintegration issues with 10 advanced anthropology students. In October of 2008, the group spent time at places ranging from lockdown psychiatric wards in Colorado Springs to a yurt in the mountains west of the city, ceremonializing with the shamanic-based healers who helped veterans retrieve lost soul fragments from yesterday's battlefields. The center of the project, though, involved three days of interviewing at Fort Carson, during which we spoke with 43 soldiers from a battalion of nearly 400. Little

did we know on those days of interviewing that "our" very same battalion was already fast on its way to becoming *the* battalion locally distinguished for producing a disproportionate number of soldiers wreaking postdeployment havoc at home, including numerous murders. What happened next forms the unusual beginning of the four-year, team fieldwork endeavor upon which we base this book.

The Interviews That "Never Happened"

The blinking answering-machine light announced six new messages. Five of them, it turned out, were virtually identical messages from the battalion's XO (executive officer), who had served as our principal contact with the unit, working with us to produce academic[1] and command authorization documents and arranging logistics for our meeting with soldiers. The messages implored that we get back to him immediately, and Sarah quickly dialed the major's cell. It was the evening following the third and final day of interviewing soldiers.

"Ma'am, where are you right now?" were the first words out of the major's mouth after Sarah identified herself. She said she'd just arrived home, and even explained where her house was, before asking, "So, what's up?" Her awareness of the privilege we had been accorded, and how tenuous our continued access to the post and its soldiers could be, left her cautious.

"Well," he paused. "We might need to get those surveys back, and all the copies. So, um, can you tell me where are they, right now?"

This was not what we had expected. Where to begin? Sarah affirmed our willingness and active interest in sharing the content of the interviews; it was part of our shared plan. She reminded the officer, though, that there were no written surveys to hand over: the research so far consisted of semistructured interviews, and sharing the resulting audio recordings was complicated. The agreement the battalion had signed on to, she noted, promised soldiers who consented to interviews that their identities would be protected, that commanders wouldn't know who had and had not been interviewed. So while we were pleased to share any useful content from this material, we could not do so ethically until the interviews were completely de-identified—a time-consuming, labor-intensive process involving at a minimum transcription and assigning pseudonyms.

What had happened to cause the battalion command to go from authorizing and effectively partnering with us in our interviews with active-duty soldiers to attempting to revoke permission and recall the data, all within just a few hours? In the days that followed, we were assured that battalion command had included their plans, in a brief for the higher-ups in the brigade, to allow anthropologists to interview soldiers. Perhaps it had not been read

thoroughly, for the news somehow went unnoticed by officers preoccupied with next year's looming deployment to Afghanistan.[2] Though it is unclear what triggered the raising of alarm, it seems one colonel across Fort Carson got wind of the project, called the brigade commander, and asked if he knew what was going on in his own brigade. As soon as the brigade commander heard about the interviewing, he issued an order to immediately end the research. That the order came on precisely the day the interviews had been completed was as awkward for the battalion as it was fortuitous for us. Why the sudden caution? Pieces of a picture were starting to fall in place: ultimately, it would show that "our battalion" had produced a disproportionate share of the soldiers charged eventually with 14 local murders between 2006 and 2008.

It was still some time before we understood this. At the time, we began talking with brigade command: first with the brigade's PAO (public affairs officer), and later with the brigade commander.[3] The battalion commander was present at the first of these meetings, his recent admonishment for allowing the interviews hanging heavily in his boss's office. These were new assignments for all three officers, having had nothing to do with whatever baggage past units within the brigade brought with them, except to be held accountable, and respond as needed. The colonel never contested that our signed agreements to uphold soldier confidentiality meant we could not surrender the data. He did request that we submit a new proposal directly to him, requesting his authorization for "the research," but now with a focus on possibilities for future collaboration—and leaving in no-man's-land that the research that had already occurred had been officially authorized (even as a number of other officers across the post who had earlier provided support in writing for the research now retreated into a vague deniability we chose not to question). He also asked us to put in writing some of the assurances we offered about not publishing soon. Though the unit would deploy again without ever signing onto the new proposal, the series of conversations that ensued in the months and years to come would lay the foundation for a complex, sometimes uneasy, but also productive continuing relationship between this fieldwork and Fort Carson officialdom. But at that moment in 2008 only one thing was clear: behind the fences of the fort, it appeared, word had hit to batten down for a legal and media storm rising from soldiers' postdeployment behavior, and we had unknowingly slid in the gate just as it was slamming closed.[4]

Despite the brigade's collaboration with us creating vulnerability for the officers—"I told him we'll have to grow thicker skins," the PAO advised the commander on what working with us would ask—they shared our belief that

this work could heighten their attentiveness to combat stress and reintegration issues, and continued to respect our autonomy. In return for refraining from publishing until command changed, which occurred in August 2010, we would later be permitted unparalleled access to shadow soldiers before and after deployments to Afghanistan, through "Battlemind" trainings, medical and psychological screenings, "Reintegration University" (with sessions designed to prevent, or educate soldiers about suicide, substance abuse, domestic violence, and depression), and later, at Family-Readiness Group meetings and welcoming home, memorial, and change-of-command ceremonies.

Part I of this book, "Soldiers Coming Home," eventually details the "media shitstorm" that engulfed the unit, but we work our way there slowly. First we listen closely to soldiers' talk from the interviews with the randomly selected group of infantrymen, before we knew the storm would break. Chapter 1 explores army responses to the stigma soldiers often attach to post-traumatic stress disorder (PTSD). Chapter 2 delves into the significance of soldiers' association with death, drawing on terror management theory to show how death pollution is managed. Chapter 3 details the local murders tied to soldiers in the unit; in chapter 4 we turn our attention to why and how PTSD has become the predominant expression of the suffering of military personnel and their families at this particular historical moment.

Why PTSD?

For the first time, in the post-9/11 wars psychological injuries have taken center stage in the ways we talk about, digest, and engage with war and its consequences. In 2008, the RAND Corporation published *The Invisible Wounds of War*, a comprehensive report that named PTSD, traumatic brain injury (TBI), and depression as the three "signature injuries" of the post-9/11 wars, taking a toll on soldiers equal to or greater than physical injuries incurred in combat. The study estimated that one-third of previously deployed military personnel experienced PTSD, TBI, or major depression, with 5 percent suffering from all three.[5] Based on incidence alone, any of these three conditions could have become emblematic of soldier's postdeployment suffering. But TBI, an injury that is less amenable to treatment and has worse outcomes than PTSD or depression, received relatively little coverage in the media, especially in the wars' early years.

Instead, PTSD captured the public's attention. In most any conversation where the topic of returning soldiers came up, PTSD was mentioned in the first few minutes, serving as shorthand and explanation for the many difficulties they faced in these wars and on coming home. Martin Nunez, a peer mentor for veterans participating in trouble with the law, believes that

"anybody that has been deployed more than one time has PTSD whether or not they have sought treatment or they believe they do." Journalists invoked untreated PTSD to explain domestic violence, reckless driving, and other distress veterans displayed following deployments. Stories about PTSD and its effects have filled radio, television, and newspapers throughout the wars. Building on Erin Finley's analysis of contemporary cultural influences on PTSD, which she calls "one shining fragment of the wrongs that veterans have been done by the military" (2011:9), we offer a new perspective on the contemporary history of the current conflicts by asking "*Why* has PTSD become the predominant symbol of the suffering of military personnel and their families at this particular historical moment?"

The American Psychiatric Association's (APA 2013) most recent definition of PTSD is long and complex, but its essential feature is specific symptoms or behaviors following exposure to a traumatic event or events that last for more than one month and cause difficulty in the person's ability to function in important areas of their life. The APA defines a traumatic event as "actual or threatened death, serious injury, or sexual violence" (APA 2013:309.81 [F43.10]). The person can experience the event directly themselves, witness it happening to others in person, learn about it occurring to a close family member or friend, or be exposed to extreme or repeated details about it; for example, "first responders collecting human remains; police officers exposed to details of child abuse." Symptoms include recurrent, involuntary, and intrusive memories of the traumatic event, recurrent nightmares, flashbacks in which it appears that the trauma is happening again, or psychological distress or physical reactions such as rapid heart rate. One soldier told us about coming home to Colorado Springs and realizing he was driving down the middle of the highway to avoid possible bombs along the shoulders. Another soldier, on temporary leave in Florida during a deployment to Iraq, dove off a rising escalator in a crowded shopping mall when fireworks went off outside, thinking that he was under attack. Persons with PTSD may avoid things that remind them of the event, withdraw from social interaction, have decreased interest in activities, or have exaggerated negative beliefs about themselves or the world. They may be hyper-vigilant, quick to anger or become aggressive, be reckless or self-destructive, startle easily, and have difficulty concentrating and sleeping.[6]

Although many view the symptoms of PTSD as universal biological responses to traumatic events in war, how those responses are interpreted, explained, diagnosed, and treated varies significantly across cultures and through time. The official diagnosis of PTSD, first adopted by the APA in 1980, represents the convergence of psychiatric conceptions of the mind and

memory, historical responses to increasing mechanization of industrial society, and political activism in the United States following the Vietnam conflict. One indication of the cultural and historical aspects of PTSD in the United States is the fact that soldiers from the United Kingdom who fought in Iraq experience consistently lower rates of PTSD. While some of this can be explained by UK soldiers having shorter deployments and less combat exposure in Iraq, UK soldiers in Afghanistan had similar levels of combat but the prevalence of PTSD remained comparatively low. Lebanese anthropologist Lamia Moghnieh cites an American psychiatrist studying the effects of the Lebanese civil war who found little evidence of "psychic traumatization." This is not to suggest that the Lebanese did not suffer from the civil war, but that how they expressed their suffering did not necessarily fit the constellation of symptoms defined as PTSD. Instead, Moghnieh (2011) finds Lebanese engagement with collective, activist processes central to healing suffering after war, often directly related to rebuilding communities. In working with health professionals in Bolivia, Jean found that PTSD was something they had heard about in US media, but it was not commonly referred to even in emerging public discussions of violence against women. Numerous medical anthropologists have questioned the validity of applying PTSD cross-culturally.[7]

Thus to understand why PTSD has become such a prominent symbol of the post-9/11 wars in the United States requires a culturally informed analysis that takes into account how it has changed in the nearly three decades since its adoption. PTSD has gained broad public recognition and dominated discussions about distress from multiple kinds of trauma even as trauma itself now dominates the way we talk about and understand human suffering. We argue that PTSD serves as an "idiom of distress" that mediates and expresses indirectly social conflicts and problems that, because of differences in power and access to resources, cannot be fully expressed more directly. A key characteristic of idioms of distress is their inherent ambiguity: they comprise a variety of vague symptoms that can arise from multiple causes. Thus, as anthropologist Susie Kilshaw argues, PTSD may be best understood in the context of other war-related diagnoses characterized by unexplained medical syndromes such as Gulf War Syndrome and Desert Storm Syndrome.[8]

PTSD has also become the primary way for soldiers and their families to access mental health and supportive services. But successful treatment of PTSD demands compliance and standardization of treatment that may not adequately deal with all the issues of reintegration that soldiers returning from deployments face. As we discuss in this book, soldiers leaving military service—younger, lower-ranked, male service members in particular—return to a civilian economy as part of a group with the highest unemploy-

ment rates in good times and bad. Many young enlisted soldiers have only a high school diploma and limited work histories. Many joined the military because they didn't like or do well in school, so higher education, though paid for under the GI bill, may be an ill-fitting option for them.[9]

We recognize that depression, TBI, and substance use are each as fraught with tensions and complications as PTSD; we could have analyzed any one of them in the same way. But because of its dominance in discussions of the post-9/11 wars, we were invited by our army contacts to look at PTSD. We also realize that in focusing attention on PTSD, even with the objective of also "moving beyond" it, we run the risk of keeping it at the center of discussions of the effects of war. Many veterans object to the notion of PTSD or the presumption that post-traumatic stress is a disordered, rather than normal, response to experiences in war. This book's title acknowledges that tension; we do, however, refer to PTSD throughout the text, as this is how the term used in the public discourses we analyze.

However, we also offer an alternative way to view PTSD as embedded in the history of wars past and in the politics and economics of contemporary military organizations. In separating PTSD and treatment of trauma from issues of reintegration we hope to widen the spotlight from the soldier to bring out of the shadows the families and communities that have also suffered and endured and participated in these wars. In addition to the many myths of the hero returning from war captured in *The Odyssey* and *The Aeneid*, below we offer the myth of the labyrinth.

Beyond PTSD

The soldier responding to a talk about how war was being understood from home, said, "Problem with PTSD is that it lets everyone put everything about the wars onto the individual soldier." From a society-wide standpoint, PTSD lets the rest of the nation off the hook.

We argue that recognizing and treating PTSD is a necessary, but not sufficient, response to soldiers' and communities' efforts to "come back" and heal from war. The reductive focus on PTSD in both popular and scholarly literature needs decentering. A narrow focus on PTSD too often sidelines attention to other injuries (TBIs in particular, in addition to depression and substance abuse); to soldiers' resistance to medical diagnoses as the sole pathway to reintegration and recovery; to the stress or distress that all those living closest to the wars experience; and to the healing of social fields, both domestically and internationally, damaged through the exposure to combat's inherent stresses and horrors. It is critical to separate PTSD and the treatment of trauma from issues related to reintegration that soldiers might experience whether or not they have PTSD. Neither should a narrow focus upon

PTSD stand in place of tracing the myriad home-based odysseys, which often only grow harder when veterans come back to stay.

This book's title, *Beyond Post-Traumatic Stress*, is therefore not meant to minimize the importance of combat stress injuries as an important reflection of the costs of war. Nor do we want to minimize the historical significance of PTSD in recognizing and legitimizing soldiers' suffering. Attention to PTSD in the media and from the public has spurred valuable research that has established effective, evidence-based treatments. Soldiers and veterans diagnosed with PTSD can access a wide array of services and may qualify for long-term disability benefits. Public acceptance of PTSD may have helped pave the way for increased attention to TBIs. As a medical diagnosis made by a health professional, PTSD has the potential to "end suspicion" that victims of violence and trauma, especially those suffering invisible psychological wounds, are not genuinely suffering, but malingering.[10] Rather, the title indicates the "both/and" strategy of the book: PTSD is one critical measure of war's effects on soldiers and their surrounding community, but this constellation of symptoms serves best as a starting place for inquiring about the effects of these wars, rather than the culmination of that search.

As our work proceeded, we found more and more people frustrated with the single-pointed focus on PTSD. A wife whose husband's TBI was so bad he was declared "terminal" feared PTSD was an easier, and more cost-effective, focal point for the army because prognoses and outcomes were better for PTSD than TBIs, most of which are essentially untreatable. Infantrymen expressed wild variability in their views of PTSD, from finding it an inevitable result of their degree of combat exposure to thinking most diagnosed soldiers were "faking it"; it clearly contradicted aspects of the warrior ethos that underlined individual will and discipline: "Never give up." Veterans increasingly suspected that journalists, other researchers, and activists emphasizing PTSD were using it as proxy for criticism of the war itself, implying that anything with these effects is best prevented.

The book "decenters" or moves beyond PTSD in other ways. We decenter the idea that the injuries of war are primarily individual, primarily medical issues, and instead insist on their social and collective dimensions, which are crucial to recovery, reintegration, and reconciliation with war's impact. We "decenter" the experience of war away from a single-pointed focus on the masculinized warrior-protagonist. We do so by introducing how war's effects play out in a broad range of settings, which here range from private, family-based sites to a broad array of public settings and media-based accounts. In invoking such a chorus of voices, those of soldiers' fellow citizens who are intimately caught up in being at war also become part of the story.

Part II of the book moves beyond not just PTSD, but also soldiers themselves by shifting the spotlight away from the battlefield to issues of reintegration. As our fieldwork engulfed sites all over the Colorado Springs region, we increasingly described the project as about "Deployment Stress," broadly conceived.[11] The army has expanded its programs to support the families of deployed soldiers, but we still know very little about how multiple deployments affect individuals and families who often stand outside the spotlight focused on veterans and soldiers. In chapter 5 we explore the limitations in human abilities to codeswitch, which in this context means the way soldiers and families must move between often radically different sets or "codes" of norms and behaviors as they undergo multiple deployments. Instead, we offer the labyrinth as better reflecting the complex paths that soldiers and families and community must trace in bringing soldiers "all the way home." In chapter 6 we examine how spouses' volunteer work, predominantly women's work, has been brought under the chain of command, becoming more imperative to military missions even as spouses have lost autonomy over this work. Chapter 7 paints the landscape of the proliferating number of providers of health, social, and pastoral services as well as community organizations who are seeking to meet the ever-expanding needs of returning soldiers and their families.

The Post-9/11 Wars in Comparative Perspective

All wars have their singularities and distinctions, and the engagements the United States and its allies[12] undertook in Afghanistan and Iraq are no exceptions. Training "to fight the last war" may be a perennial problem, but from military perspectives, the Global War on Terror presents unique territory by any measure. Three particularities of *this* decade of American warfare stand out: the profile of surviving-but-wounded service members; the singular nature of the wars themselves; and the significance of the all-volunteer force (AVF).

The post-9/11 wars are set apart from prior conflicts through both the high survival rate of wounded and the unique profile of the injuries sustained. Colorado falls in the quartile with the second-lowest casualty rates nationally; nonetheless, standing at the entrance to Fort Carson, on the border between the military world of the post and the civilian world of Colorado Springs, looking at the eight sandstone tablets carved with the names of the 357 fallen soldiers who were stationed there, we sense the magnitude of war's costs and what it might mean for their home communities.[13] For these wars in particular, however, the impact is as much about the wounded as the dead. Due to advances in emergency medicine and field treatment of trauma, far

more soldiers are surviving multiple injuries, which frequently include severe damage to the head, face, and extremities. In these wars there are 9.2 wounded service members for every service member who dies (compared with 2.2 to 1 for all other US wars from 1775 to 1991).[14] As a consequence, there are numerous survivors who face learning to recover or cope with injuries at the same time they confront reintegrating with family and friends. In addition, those able to work must retool their skillsets to find new employment. Contending with the legions of wounded service members promises to be expensive. According to the Associated Press, a record 45 percent of the 1.6 million veterans who served in Iraq and Afghanistan are seeking compensation for service-related injuries: well over twice the rate of Gulf War veterans (at 21 percent; Kane 2012).

We know that explosive blasts, largely from improvised explosive devices (IEDs), result in concussive events, any single one of which would take weeks to return to baseline rates. But as one wife of a soldier told us, "our military do not have the option" to recover from an initial insult to the cranium. "They get blown up, they go down the road and they get blown up again. I know guys that have been blown up two or three times in one day. On *one mission*. They come in, they're messed up, they know they're hurt and they get called out on another mission four days later."

The psychological and behavioral problems of the current conflicts are being treated with any number of psychotropic medications, and prescription drug use—and abuse—in theater and afterward have reached startling levels. The title of one article on the issue speaks volumes: "The Prozac, Paxil, Zoloft, Wellbutrin, Celexa, Effexor, Valium, Klonopin, Ativan, Restoril, Xanax, Adderall, Ritalin, Haldol, Risperdal, Seroquel, Ambien, Lunesta, Elavil, Trazodone War" (Senior 2011; see also Bray et al. 2010, Larson et al. 2012, and Levine 2010). The in-theater use of these medications is often "off-label" at the prescribers' discretion and based on the needs of the moment.[15]

The open-ended, uncertain nature of the post-9/11 wars poses a second area of distinction. Again, the inherent ambiguity of declaring a war on terror (an emotion) or on terrorism (a political tactic and practice) has obscured what mission accomplished, or ultimate success in either Iraq or Afghanistan would look like (short of removing all risk of terrorism, an impossible goal). What began in 1991 with President George H. W. Bush's call for a "new world order" in which "enduring peace must be our mission" took on a more sobering tone in 1999 with what many called a military "humanitarian intervention" in the former Yugoslavia under President Clinton. This shifting landscape of appropriate use of military force modulated yet again when, after September 11, 2001, President George W. Bush declared a War on Terror, and that those "not with us are with the enemy" (Douzinas 2007:3).

For many American citizens, haunting doubts spring from the stories emanating from places like Abu Ghraib and Guantanamo prisons, from Winter Soldier depositions, or NATO meetings where veterans return Operation Enduring Freedom (OEF)/Operation Iraqi Freedom (OIF) medals in shame and disgust, events that have themselves been profoundly distressing. The absence of weapons of mass destruction in Iraq alone, after an invasion based upon "proof" of their existence, configures the contexts through which Americans reckon with these wars. There is a sharp and conspicuous lack of consensus that we went to war only after exploring all other choices. The convergence of a professionalized, committed, and careerist all-volunteer force coupled with unprecedented growth in contracting, security, and intelligence sectors, creates a very different kind of nation than one committed to standing down after wars that were unavoidable. This alteration in American foreign policy renders many Americans tormented by the idea that we turned to lethal force when it was not necessary to defend and ensure our very existence. Many of the questions explored in this book relate to shame and guilt, or to anger and betrayal. How all of these feelings influence PTSD and postwar struggles at home cannot be understood without acknowledging the wider context of the contestable legitimacy and cost-benefit analysis of the wars.

For service members on the ground, the diffuse geographical nature of the wars finds them battling in low-intensity, urban- and village-based exchanges of fire, in which civilians can be indistinguishable from the enemy and where counterinsurgent combatants are typically not uniformed or aligned with a localized nation-state. When there are no clear battle lines, there can be no truly safe zones either. While only one in seven deployed service members in Iraq and Afghanistan are technically frontline combatants (the "teeth" in the tooth-to-tail ratio, where the other seven are "tail," providing support and services) the absence of clear battle lines means that supposed noncombatants, including women,[16] may find themselves in the line of fire or subject to blasts from IEDs (Bruno 2009).[17]

Since the Civil War, US home fronts have been physically distant from the sites of conflict. Global warfare takes on new meaning when families can often communicate with their soldiers via phone or Internet nearly daily. In the current conflicts, electronic communication has transformed the separation of deployment, bringing the conflicts closer to the families of deployed military personnel. This may overload families back home and create "a false sense of connection between the soldier and family; in reality, the longer the time away, the more frequent the tours, the farther apart they grow" (Arella and Rooney 2009). At the same time the general public is kept at greater distance, with coffins of dead service members not shown, news like the torture

at Abu Ghraib prison only reaching the public through leaks, and Iraqi and Afghan civilian death tolls shielded from the average citizen. Soldiers and their families speak of "compartmentalization" as a necessary coping skill, to keep battle and home hearths in their places, and of building careful barriers, withholding news when necessary to keep worry and stress at bay.

The third characteristic of the post-9/11 wars is that they are the first large-scale, protracted engagements[18] fought and serviced exclusively by the professionalized AVF. Debates rage on about whether the AVF has disrupted or severed the social contract between the citizenry and the state (Fleming 2010; Krebs 2009), widening a cultural and social divide between civilians and military personnel. In a 2010 lecture at Duke University, then Secretary of Defense Robert Gates observed:

> *Indeed, no major war in our history has been fought with a smaller percentage of this country's citizens in uniform full-time—roughly 2.4 million active and reserve service members out of a country of over 300 million, less than 1 percent.*
>
> *This tiny sliver of America has achieved extraordinary things under the most trying circumstances. It is the most professional, the best educated, the most capable force this country has ever sent into battle. Yet even as we appreciate, and sometimes marvel at, the performance of this all-volunteer force, I think it important at this time—before this audience—to recognize that this success has come at significant cost. Above all, the human cost, for the troops and their families. But also cultural, social, and financial costs in terms of the relationship between those in uniform and the wider society they have sworn to protect.[19]*

Greater consensus exists around the idea that the AVF has enabled a more efficient and effective force (Rostker 2006), bringing a higher level of professionalism, combat-readiness and mission-flexibility, and discipline than in the largely conscripted forces from previous wars, as reflected in significantly lower rates of desertion, mutiny, and fragging (violence against superiors) than in Vietnam and in earlier conflicts (Cancian 2011).

As Gates notes, the costs have come mostly in the form of overstretching and overstressing existing forces. The Department of Defense created the AVF during a time of relative peace[20] in which the US military "downsized, outsourced, and privatized" (C. Lutz 2001:217). Thus, when the quick victory of overcoming Hussein's forces in Iraq led to a long and violent conflict, the AVF faced shortages of manpower leading to repeated tours of unprecedented number (Yingling 2010)—up to five yearlong tours for regular army.

Maintaining the needed numbers of troops in combat has also meant that the tempo of deployments has accelerated and dwell time (time at home in between deployments) has shrunk accordingly, often broken up with numerous trips away from home for training. Army officials acknowledge that shortened dwell time is associated with low morale and other problems.[21]

The army has also relied heavily on National Guard and reserve units both in support and in place of active-duty service members. These units make up 28 percent of the service members deployed to Iraq and Afghanistan, with 37 percent deploying more than once (O'Neil 2012). The fact that reservists deploy and return home in greater isolation, without the support and solidarity of active-duty service members, may contribute to their greater susceptibility to PTSD, which they contract at twice the rates (42 percent for reservists) of active-duty troops (20 percent) (Milliken et al. 2007).

In his speech at Duke, Gates also noted that skeptics' predictions that only "the poorest, the worst educated, the least able to get any other job" would join the military did not come to pass. However, his subsequent statement that "in broad demographic terms, the Armed Forces continue to be largely representative of the country as a whole—drawing from America's working and middle classes," doesn't tell the whole story either.[22]

To fill its need for new soldiers, the army must compete with civilian employers and colleges. When unemployment is low, the military is less competitive and the number of eligible, highly qualified young people willing to enlist drops (Warner 2012).[23] But the pool of less-qualified but willing recruits is relatively constant. In the early years of the war the US economy was booming, making recruitment harder,[24] so to fill their quotas for new recruits the army increased the number of low quality (LQ) recruits they could accept by lowering standards for education and aptitude scores (Kaplan 2008) and issuing more waivers for criminal history, drug and alcohol involvement, and personality disorders, among others.[25] This lowering of standards may have contributed to mental health problems and violence during reintegration. Thus the AVF relies disproportionately on poor and working class "young men of at least modest ability" who come from "disadvantaged circumstances, experience minimal connectedness to others, and report a history of adolescent fighting" (Elder et al. 2010:455).

By framing the AVF not only as a professional force, but a force made up of *volunteers* who choose to enlist, public rhetoric is directed, or even *mis*-directed, from recognizing the underlying economic forces that contribute to an individual young person's decision to enlist. Military service can and often does provide young men and women with a host of tangible benefits such as travel, education, training, and opportunities to "mature, learn how

to work with others and gain self-confidence" (Pew Research Center 2011:1). Although young African American men and women have seen the military as a means of upward mobility (Kelty et al. 2010), the unpopularity of the wars in Iraq and Afghanistan may be changing this. However, these benefits are a powerful motivation for enlistment for white youth from working class families hardest hit by a changing economy, increased costs of higher education, and residence in small rural communities with few opportunities.

Young men who enlist in their late teens quickly surpass their civilian peers in income, enabling many to marry at younger ages and aid them in the transition to independence.[26] In 2009, wages for enlisted personnel corresponded to the 90th percentile of wages for civilians with a high school diploma, some college, and associate's degrees, and wages for officers corresponded to the 83rd percentile for civilians with bachelor's or graduate degrees (Department of Defense 2012:xvii).

Beyond class, enlisted service members may be viewed as regional, ethnic, racial, or rural draftees, as southern, nonwhite, and nonurban Americans have enlisted in the military in numbers disproportionate to other groups. This has meant the post-9/11 wars have created a different distribution, by class and geography, of the places deeply affected—and increased the places relatively unaffected—by being a nation at war.

Terror Management and Stigma

What the military calls GWOT ("Gee-Watt"; the Global War on Terror) is clearly its own, very specific version of what anthropologists and psychologists have called terror management: it is a socially organized, culturally based response to a threat that triggers fears connected to death, and to one's own mortality. Our examination of war as opening up labyrinthine corridors at home is inflected by numerous other forms of terror, and its management. Fear for one's own safety, or that of a battle-buddy or deployed loved one, each implies its own dreads and horrors, as do events in combat, or agonies about the use of lethal force and its costs, particularly to innocents. Each form of terror is tied to its own deaths, real or imagined.

At home, we argue that these mortality-related terrors are often managed through stigmatization, or the branding of something that feels dangerous, as different or other. This branding serves to define, and to help contain and manage, the threat represented by the affliction. The forms of stigmatization tied to combat veterans—links with death, combat-based PTSD—are paradoxical in that, unlike most forms of stigma, the associated work and its performers are simultaneously lionized and sanctified. These processes are historically underwritten by militarized hypermasculinity (whether for male or female soldiers), misogyny, and homophobia.

Part III of this book extends questions about stigma and terror management at home into public and community settings cleaved by sharp social and political divisions. Chapter 8 explores ways that Colorado Springs is idealized by soldiers while also being a place where the impact of the military presence is controversial for many residents. How has the area's history of actively seeking military investment affected regional enterprises, schools, nonprofit organizations, and law enforcement? Chapter 9 inverts the angle on stigmatization, exploring military representations of civilians and civilian life as "flabby," unchallenging, and undisciplined. The exceptionalism and contempt in such depictions help further muzzle and disengage civilians, who are admonished that veterans' deployment experiences are incomprehensible, incomparable, and incommensurable with other experiences. We also present civilians who contradict these pernicious stereotypes, who are actively engaged in being a nation at war and with reaching across the divide to help veterans navigate the labyrinth. This section concludes in chapter 10, with accounts of public gatherings convened to promote military-civilian communication, from town hall–style meetings to informal dialogs. In these later chapters, we argue that the anxieties and fears intrinsic to warmaking fuel polarizing dynamics, enforcing walls between intimates, and rendering those once familiar as strangers. Facing wars' costs includes understanding the labyrinth at home as a project of social terror management.

Coming Home, *Re*integration, and "New Normals"

Homecomings are at the heart of soldiers' relationships to family and community. These include hopes that what happened over there can be left over there, that war does not have to be brought back home. However, it's clear that for many, at the very least, memories do come home to roost; combat-based PTSD is about nothing if not memory and memories.

Endless representations of *home*coming and *re*integration, however, are not without irony, when we speak largely of very young adults who often went directly from parents' homes into the most paternalistically supervised occupation imaginable. Soldiers stationed at Fort Carson are rarely native to the Rocky Mountain West, and many if not most will not have spent much time here as civilians, due to the deployment tempo over the preceding decade. "Home," then, for many is felt more in a nationalist vein, and "re-" integration misleadingly suggests reestablishing something that existed before, their integration, when that last looked quite different, largely in the form of adolescents for whom adulthood and separation from parents, family, and home coincided with joining the army.

A counterpoint to home and reintegration imagery is the way that, during the period of our fieldwork, 2008 to 2013, some in the military community

used the phrase "the new normal" to sum up how many at home attempt to cope with the effects of war brought home. For a pacifist-leaning young woman falling in love with her soon-to-be soldier husband, this meant grappling with fears around loving someone who will be absent across multiple deployments, in danger, fighting, and at risk both of being killed or hurt, and of killing or hurting others in ways that may haunt him later. For army spouses, parents, siblings, and children, all of whom are their own kinds of "veterans" of multiple deployments, the new normal signals their struggles to accept a loved one returning from theater "a completely different person," as one wife we met concisely put it. For officers attempting to intervene in aspects of "warrior ethos" or army culture that prevent soldiers from seeking help for combat stress, a new normal communicates that old attitudes must change. How to do this, when the "never give up" element of soldier ethos may mean that succumbing to PTSD looks so much like giving up? How to return to a normal that these young people may never have had chances to establish? For soldiers and their families, then, the phrase "the new normal" captures their sense that what is considered abnormal for most has become typical for them.

A Particular Place, Representing Many

Though this account digs into one American setting, it does so with awareness that any military site counts with manifold global and national interconnections to other places. Folks and the stories they carry in the Pikes Peak region have linkages across the United States and sweepingly beyond: to Afghanistan and Iraq, of course, but also to Germany, South Korea, Bosnia, Somalia, and the countless other places that due to duty tours and international conflicts they have been sent in recent decades.

Southern Colorado is but one of numerous American landscapes where sizable cities host sizable bases: the Virginia Beach area, San Diego, El Paso, Tacoma/Seattle (Figure 1). That said, there is nowhere better to explore reintegration challenges than in the city of Colorado Springs, dubbed the "Best Hometown in the Army." Fort Carson, the army's fast-expanding post on the city's southern border (and just one of five military installations surrounding the city), is now one of the country's largest army posts, and one of the named "Centers of Excellence" for addressing PTSD. Famous for "America's Mountain" Pikes Peak, the Garden of the Gods, and numerous other tourist destinations, Colorado Springs pilgrimages may include visits to the extraordinary chapel at the Air Force Academy, on the town's northwest side, or to Focus on the Family's immense "parachurch," just off the highway. Beyond "Focus," more than 50 additional evangelical organizations are headquartered here, making it a key focus for the conservative religious right. Regard-
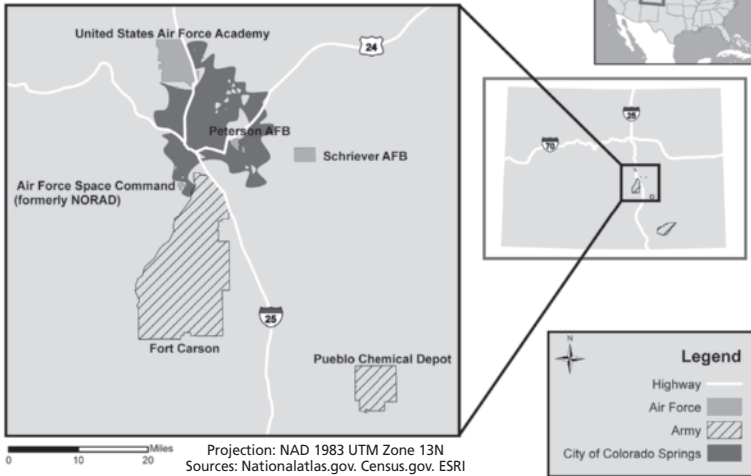
FIGURE 1. Colorado Springs area and military installations (map by Michael D. Brown).

ing partisan politics, with Colorado considered a quintessentially "purple" state (which can vote either Democratic Party "blue" or Republican "red"), much of the red in the mix emanates out of the Pikes Peak region, with Colorado Springs at its center.

The global presence of the US military and the deeply cleaved international relationships of the wars stand in tension with trying to ground part of a post-9/11 story in a particular place like Colorado Springs. We train our gaze on a specific location not to produce a regional or parochial account, but by way of underlining that these stories have counterparts across the United States, and on or near this nation's more than 700 military installations abroad (Johnson 2004; C. Lutz 2009). One goal, then, is to ask how local experiences align with the transnational "global" that typifies approaches to US military culture. This orientation refuses assertions that the army can be taken only as a whole, insisting that local actors—soldiers, family, and community members—experience its existence in situated, piecemeal encounters set in specific places and times.

Spoken and Unspoken

In listening in across many sites, we attend both to what is said and also to what has remained unspoken, to silences and omissions. Most obviously absent in the conversations that inform this book is any semblance of balanced attention to the effects of the wars on Iraqi and Afghan lives, not to

mention Pakistani, Yemeni, Somali, and so on, the other countries where this war unfolds. This imbalance, because it reflects what we heard, admittedly shapes this book. In community settings an unspoken orthodoxy around this appears to reign: we are at war, and embrace an unapologetic, single-minded attention on our own. It is not that the presence of the hundreds of thousands of Iraqis and Afghans affected by the wars is, or could be, wholly absent here. Rather, their collective presence is notably, significantly muted; it is both close at hand and walled off, seemingly inaccessible. Those who migrate between deployments and home are painfully aware of how small the world is, and in this sense the millions of lives battered by the wars are inextricably present in the complicated passages of all who survive them, combatants, uniformed and otherwise, and civilians alike. And, while the words of our subjects do occasionally wind around to witnessing or participating in the maiming or killing of children and other innocents, these stories emerge slowly, from memories ever present, threatening in the background shadows, as in therapy sessions whose content professionals later share with us (in broad strokes, without identifying details). In most exchanges, though, people avoid going there, having learned to do so as they learn the conventions of how we are admonished to talk about war.

Direct questions about what a combat veteran has seen or caused regarding killing are taboo, and soldiers anticipate them with fear. We rarely heard them, however, except as examples offered of crass and intrusive blunders. It is as if to speak openly of the symmetrical—or far greater suffering—on the other side of the elusive lines of these battles were forbidden territory, the epitome of civilian insensitivity that would simply dig into the wounds of veterans. Keeping such territory off-limits upholds a central assertion forwarded by veterans and military communities in many contexts: that deployment/combat/war creates experiences that are incomprehensible to civilians and both incomparable and incommensurable with other forms of experience. Because this book studies how this de facto censuring operates, it also reflects that prejudicial concern with us-and-ours, of avoiding talk of those we have injured, which itself is a testament to the mental and emotional predispositions of war.

Story Lines and Myth

Embracing a humanistic anthropology brings readers into others' lives, through circulating their stories and thoughts, and then providing interpretive tools, for example, liminality and codeswitching (elaborated in this introduction), through which to better understand them. Writing in this way points us toward those aspects of anthropology, not surprisingly, most shaped by our sister disciplines in the humanities. For example, history, per-

formance studies, and religious studies mutually inform our symbolic anthropological approach to both army ceremony and the ritualistic performances of grieving and reconciliations (Carden-Coyne 2009; O'Brien 1990; Paulsen 2005; Schechner 1985, 1993). Turner's notion of liminality—a state of being "betwixt and between" in time and space—provides a way of understanding complex PTSD as acute and transitional, even when it (paradoxically) becomes a chronic state or "liminoid" (Szakolczai 2009; V. Turner 1967, 1972, 1974), as in the soldier who knows he or she will deploy again and therefore does not "ramp down" from the hypervigilance necessary for survival in theater.

Liminal between-ness resulting from multiple deployments helps explain soldiers hitting the limits of "codeswitching." Linguistic approaches celebrate the ability of human beings to move rapidly and easily, or switch, between different languages and linguistic codes (Molinsky 2007), such as between professional jargon to informal slang, or from English to Spanish. Culture itself may constitute the process of developing and integrating multiple repertoires of behavior: for example, behaviors expected in the workplace, among friends at a neighborhood gathering, at a formal ceremony, or in a classroom (Mahler, personal communication, 2010). We began to use codeswitching metaphorically, and found that commanders readily latched onto it as shorthand for soldiers' having to switch between behavioral codes, such as between being a lethal soldier in combat and a loving husband and father on leave or between deployments. Soldiers also compared moving between "battle mode" and being home to turning a switch off and on. We argue, however, that the concept, though appealing in its simplicity, does not reflect the complexity of environments and social contexts where theater commingles with home through email and Skype, or soldiers alternating door-to-door searches with playing soccer with Iraqi or Afghan children. We also argue that many who deploy repeatedly in the current conflicts slam up against the limits of human flexibility and resilience in moving between such extreme and contradictory settings.

What kinds of stories did soldiers, their family members, and others in the community living closest to the wars tell us? Those of deployment veterans struggling to come "all the way home" certainly resonated, both for us and for our veteran consultants, with Jonathan Shay's compelling book *Odysseus in America* (2002), and others (Glantz 2009; Scurfield 2006; Tick 2005). Focusing primarily on the postwar struggles of Vietnam veterans, Shay draws upon Homer's epic *The Odyssey* as an analogy for the journey home from war often being longer and equally "embattled" as the literal battles themselves. Shay emphasizes how Odysseus possessed qualities that were fearsome on the battlefield, but could also "sow trouble" at home, even