THE NEXUS BETWEEN THE IRAQ WAR AND KATRINA RECOVERY
Clinical and Policy Issues

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This commentary is influenced in large part by the experiences of the author as both a Vietnam War veteran and a Mississippi Gulf Coast survivor of Hurricane Katrina, as well as being a mental health provider during and following both. Please note that almost all of the following is equally relevant to residents of Louisiana. More recent events in the aftermath of Hurricanes Gustave and Ike reaffirm the issues and dynamics described.

KATRINA’S DEVASTATION IN SOUTH MISSISSIPPI

The University of Southern Mississippi Gulf Coast campus, with a pre-Katrina enrollment of 2,500 students, sits directly on the usually placid Mississippi Gulf Coast, about 100 yards from the water. Fully 30% of the university’s 350 staff and faculty were displaced because of destruction or heavy damage to their residences and personal belongings. The destruction to the surrounding southern Mississippi communities was massive, that is,

- More than 235 confirmed deaths and 68 still missing as of December 7, 2005.
- About 68,700 homes and businesses were destroyed, 65,000 sustained major damage, and 60% of the forests in the coastal communities were destroyed, along with much of the shipping and fishing industry.
- Twelve communities in particular were ravaged, from the western communities of Pearlington and Waveland in Hancock County to the eastern communities of Moss Point and Pascagoula in Jackson County.
- Just to mention the devastation in one community: The neighboring community of Pass Christian had 80% of its homes destroyed as well as four out of the five primary and secondary schools, and the town lost 100% of its sales tax revenue as no gas stations or shops were reopened.
- And, of course, Katrina’s devastation not only ravaged the six southernmost Gulf Coast counties but also spawned tornadic activity and wind damage that was inflicted on many communities further north in Mississippi, and forced relocations of untold thousands of displaced Gulf Coast residents to communities north of the Gulf Coast.
- This says nothing about the destruction in neighboring Louisiana, not from Katrina winds or storm surge but from a faulty levee system that resulted in massive flooding after Katrina had bypassed most of Louisiana west of Slidell.

There are several important post-Katrina impacts and developments that bear mention at this point, as they form the basis for some of the convergence of overlapping issues and dynamics facing returning Iraq and Afghanistan War veterans that will be described later (Scurfield, 2006a; 2008):

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Hundreds of thousands of Katrina survivors in Mississippi have been and many still are experiencing an overwhelming sense of loss, grief, and malaise on the destruction of places of employment, small and large businesses, churches, schools, neighborhoods, recreational facilities, historic sites, and even entire communities. This is a loss of so much about life that was familiar and cherished along the entire Mississippi Gulf Coast.

Unlike many of my colleagues and community residents, I was fortunate to still have a home that was habitable (although it took about 18 months to find a reliable contractor and get the damages repaired—a common story in south Mississippi—if you had the funds to hire a contractor).

The pitifully inadequate response from Federal Emergency Management Agency (FEMA) and broken promises from too many of our political leaders continue to have extremely negative impact on Katrina survivors’ attitudes toward and trust in our government.

The ongoing battles with the insurance companies as to what damage was caused by wind and rain versus storm-surge water are and have remained extremely contentious; many homeowners have been left feeling that they are being ripped off by their insurance companies—with disastrous financial consequences.

Many renters feel that they have been almost totally left out of meaningful recovery assistance and support.

Finally, many Mississippians are upset at the disproportionate amount of media coverage directed to New Orleans and the corresponding lack of almost any widespread media coverage of the Mississippi Katrina story.

THE PARALLELS AND NEXUS BETWEEN THE IRAQ WAR AND KATRINA

First, I want to mention the “political” issues concerning the war. These issues are real and profound, regardless of whether you are adamantly pro-the-Iraq War and pro why our country is fighting this war and fully support our president’s policy of “staying the course” until the job is finished no matter how long that may take; or, conversely, if you are adamantly against this war and want our troops home yesterday, see this as the biggest foreign policy blunder that our country has ever made and that it will have decades-long tragic negative repercussions; or if you are somewhere in-between these two positions. The parallels and nexus that I am describing are reality, period. And such reality has profound consequences.

To give those of you who have never been in a war zone a small taste of the daily reality of life in a war zone, I recommend that you view (accessible online at www.guardian.co.uk/video/page) the brief 10 minute video, Inside the Surge by British photojournalist Sean Smith. Sean was embedded with a U.S. military unit in Iraq for 2 months. I need to emphasize that this film contains graphic visual scenes—it is, after all, a realistic slice of what our troops face day after day after day in the war zone. Also there are some “political” statements made in the last couple of minutes of this documentary, statements that some may not appreciate. For example, one soldier states that he would love to have President Bush or other politicians to come to Iraq and spend some time with him to really understand what our troops are facing. In fact, he offers to extend his deployment to do this.

Clearly, it is impossible to completely separate this war, indeed any war, and politics. Military personnel in war do have extremely strong opinions pro and con about the war they are fighting, what the political aspects are, and what the country back home is saying and doing in support of or in opposition to the war and in support of or in opposition to our troops and to their families.

There is a timeless line in the movie, Ulysses (Strick, Haines, & Joyce, 1967). His best friend says to Achilles, who is agonizing on the many already dead and more to follow in the next day’s battle, whereas the Senate many miles away back home continues to deliberate about the war. “War is young men dying and old men talking. It has always been that way.”

If you view the video Inside the Surge or some other documentary of actual in-country combat operations, you will see merely a tiny sample of what so many U.S. troops, and Iraqi military, and an exponentially larger number of Iraqi civilians, live and die with on a daily basis. Before describing the parallels and nexus between the Iraq War and Katrina, I do want to emphasize that there is one distinctive element intrinsic to all wars that is illustrated quite well in this video. This is in contrast to almost any other trauma, be it the trauma of hurricanes, other natural disasters, or other human-induced trauma.
Military personnel are uniquely sanctioned by our country to go into harm’s way to be perpetrators of violence against others, and to be willing to risk injury or death, and to risk the lives and health of one’s comrades-in-arms, in service to our country.

Being a “licensed perpetrator” of death carries with it a remarkably potent legacy of impact that may be the most enduring and problematic outcome of being a combatant and has enormous distinctive consequences and implications for what is needed for postwar recovery.

On the other hand, both as a Vietnam War veteran and Katrina survivor, I am acutely aware of the convergence of major parallel experiences and reactions postwar and post-Katrina (Scurfield, 2006a; 2008):

- The massive destruction from Katrina was intertwined with the very visible presence of uniformed National Guard and Reservists standing guard duty for months, mile after mile along the railroad tracks that run parallel to the gulf and separate much of the worst hit areas closest to the beaches from less devastated areas further inland. Military humvees, deuce, and a half military trucks full of soldiers, helicopters—everywhere. Concertina (razor) wire stretched in double rows alongside the railroad tracks, mile after mile after mile, interspersed by checkpoints manned by uniformed and armed military personnel. Meals ready to eat and water trucks, gasoline smells and ever-present noise of generators, the terrible stench from the storm surge much and debris, and rotted organic materials strewn over miles; this included the bodies of missing victims as well as the putrid smell and sight of rotting carcasses of more than 3 million chickens and pork bellies from shipping containers scattered across miles from the port of Gulfport.
- Then, there were the inescapable heat and humidity—oppressive and omnipresent. For those who fought in a war that was in a country with profound heat and/or humidity (such as the Asian theater in World War II or in Vietnam, Iraq, or Afghanistan), immersion in the stifling heat and humidity in the aftermath of Hurricane Katrina, where there was no electricity and finding water was a paramount daily task, were powerful reminders of surviving in the war zone.
- Also as there is for soldiers returning from deployment, there was a strong sense of disorientation when coming home; coming “home” to a world that was now unfamiliar. During the first year post-Katrina, whenever I would go down Highway 90 next to the Gulf of Mexico, I would have to pay extremely careful attention so as not to miss a turn. The obliteration of almost all that was familiar, mile after mile after mile was mind-numbing. It began to blend together in a desolate landscape, shattered, of seemingly never-ending palates of gray and grime and ruin. It was devoid of what used to be grand, colorful, and vibrant antebellum homes, restaurants, piers, and marinas.
- The trigger of exposure to massive destruction. Even now, the destruction of familiar landmarks is so extensive that I still find myself driving by “unfamiliar” roads that I had known intimately from years of commuting and pleasure driving. No wonder too many people still are walking around disoriented, as if living in a strange place. And the piles of storm debris, the destroyed shell remains of homes and other structures, and the absence of street lights—how could immersion in such widespread destruction not propel many war veterans back to their own personal war zones and their experiences returning to a world that was now unfamiliar to them?
- Another painful parallel is the powerful sense of being forgotten. Our country seems to engage in selective amnesia about veterans from a previous war anytime there is a new war. Many Korean War veterans felt this way when the Vietnam War came along, Vietnam vets felt this way when the Persian Gulf War I came along, and many veterans of all three eras have felt pushed aside and forgotten in the middle of the attention being paid to Iraq and Afghanistan veterans. And as came out in the aftermath of the Walter Reed Army Hospital expose (Scurfield, 2007a), there was a significant segment of Iraq and Afghanistan War veterans who have been left to languish in substandard facilities and with inadequate staffing and resources to address their postwar recovery needs.

Similarly, many Katrina survivors from New Orleans and Mississippi feel that they have been forgotten, their plight not recognized, and their massive recovery needs woefully unaddressed. And now, Camille survivors and their families, not to mention Florida survivors of past Hurricanes such as Andrew, perceive that public awareness regarding the storms that they all survived has been swept away in the wake of Katrina. And many survivors of Hurricanes Gustave and Ike and the massive recovery facing such communities as Galveston have been forgotten only weeks afterward in the middle of the financial crisis that has swept our country.

Such “forgotten survivors” of war and natural disasters oftentimes react with anger, dismay, and bitterness, which is a problem on top of any specific issues they might have from their own war or hurricane experiences.

- Trauma is unforgettable. Many of us know all too well that war is unforgettable and that the memories and
the impact—both the good and the bad—are lifelong. Survivors of Hurricane Camille will attest to the same dynamic applying long term to hurricane survivors. An unlearned lesson is that time does not heal all wounds. Furthermore, salt is being poured into veterans’ wounds from revelations uncovered by the expose at Walter Reed Army Hospital and investigations of the Department of Veterans Affairs (VA). Will anything really change ultimately? One hopeful sign is the wave of concern and advocacy from veterans of prior wars and civilian activists not to let this current generation of warriors be forgotten like Korean War veterans or mistreated and forgotten like many Vietnam vets were.

- There has been a powerful connection between the deployment overseas of Mississippi residents in the military, while their families may have been affected by Katrina-ravaged destruction are home alone. This problem is particularly salient for National Guard and Reservist personnel whose families are not usually near any military base and thus do not have access to the support of the military community. Imagine the anguish of military personnel being deployed at the same time that their own families and communities were suffering terribly from Katrina.

One of several post-Katrina letters to the editor of the local newspaper, the Sun Herald, plaintively voices the issues:

*Mississippi needs its National Guard at home.* I am a soldier stationed in Iraq. I belong to the Mississippi Army National Guard out of Poplarville. The National Guard’s stated mission is to be of help to Mississippi communities in times of crisis, such as hurricanes and other national disasters. . . . Mississippi is our state and we are not able to help our own people. Instead we are stuck in a country where the consensus is that we are an occupational force instead of a liberating one. So, why are the powers that be mobilizing full-time Army units to do our job [in the U.S.] for us? Yes, we have been called to duty here in Iraq, but a crisis has arisen in our own land and in our own backyard. . . . We have several more months before we go state side. During that time, our families and loved ones and neighbors must struggle all by themselves with the disaster left in the wake of Katrina. How can we expect the people of Iraq to view us as heroes when they know that our families in our own country have been left to fend for themselves? We here in Bravo Company of the 155th are left feeling totally helpless. (SPC H [Eddie] Perez, Iskanderyah Iraq)

- Protesting the war but not the troops and protesting the lack of funding to finance the massive costs of recovery on the Gulf Coast without criticizing the amount of funding being spent on the Iraq War are inextricably intertwined issues. A substantial number of war veterans, including me, have found ourselves to be in a painfully familiar situation. We want to support our troops overseas, but we believe that the United States is once again engaged in an unnecessary, unjust, and tragic war that should not be happening. Conversely, there is the generally accepted realization that a precipitous pull-out now might well have catastrophic consequences—and yet such consequences might be inevitable no matter what the United States does at this point. At the same time, there is the continuing contrary argument that this war is right and just, and that the country must support the troops.

Yes, once again there is the excruciating dilemma—the civic duty and right to voice opposition to (or support for) what is seen as wrong or right and the obligation to avoid undermining our troops; what to do when there is the desire to support our leaders while facing the responsibility to question them when their decisions appear to be misguided? Ironically, the organization Military Families Speak Out argues that the best way to support our troops is to bring them home now.

- There is a new dilemma exacerbated by the damages wrought by Hurricane Katrina and other subsequent disasters. Are not the enormous costs and manpower required to sustain both our very large military presence overseas and the rebuilding of an entire nation (Iraq) detrimental to our ability to do right by our own people? Is it justifiable for the United States to wage such a war and rebuild an entire nation overseas while leaving Louisiana and Mississippi short of needed funding for post-Katrina recovery? In the words of one protester from Louisiana, “Make levees, not war.”

- Another parallel is the troubled legacy of the Department of Defense (DOD) medical facilities and the VA, for example, the VA, and the post-Katrina federal response. Although there are many wonderful individual DOD and VA providers, the VA as a system continues to have many programs and services that are underfunded, inefficient, error-prone, and certainly not enough medical and regional office sites that could be called anything approaching a state-of-the-art medical and benefits system for our veterans and their families. And Hurricane Katrina survivors experienced all too much what it feels like to have an inept federal response by the very agencies established to serve, protect, and help. These experiences were all too familiar to our veterans living along the Gulf Coast—and in many cases, triggered their own still-smoldering issues from how they were treated after they returned home from war.

- There are significant groups of both war veterans and their families, and survivors of Katrina, who are very resentful and bitter on what are perceived as the government’s broken promises and failed commitments to veterans and their families, and resentment toward the rest
of society that seems to have forgotten what we all went through (see Stein, 2007). Too many veterans have experienced the federal government as having reneged on promises to take care of our military personnel who went into harm’s way to serve their country, such as by the horrible conditions that were uncovered at Walter Reed Army Hospital and the woefully inadequate resources in the VA to serve veterans and their families in a timely and meaningful manner.

And too many survivors of Katrina have felt that the federal government has fallen through on promises made in the aftermath of Katrina—such as to do what was and is necessary to help our region recover, hold insurance companies accountable to their policy holders, live up to federal responsibilities to repair and improve a woefully inadequate levee system in Louisiana, and insure that FEMA would make necessary changes so that what did not happen after Katrina also will not happen after the next disaster. (Some of you may have seen the many t-shirts that came out after Katrina announcing what the FEMA evacuation plan was. I will clean up the language and only use the letters “MF” for what was written out, “FEMA evacuation plan. Run, m-f run.”) (Scurfield, 2006a; 2008)

And now there has been the saga post-Katrina of an inexcusable and incredibly inept disaster response by the federal government—that in turn was obfuscated by denial and buck-passing at high agency and governmental levels. Concurrently, once again veterans are seeing how politics and policies proclaim that the nation must fully fund and provide for the current massive war effort—at the expense of programs for the sick, the elderly, children, Katrina survivors—and veterans. Indeed, an adequate budget to address the massive destruction and rebuilding required on the Gulf Coast has been pitted by a number of politicians against the massive budget for the continuing “war on terror.” Mississippi U.S. Congressman Gene Taylor stated,

In this instance [Mississippi’s request for federal disaster assistance], the president of the United States is treating Iraqis better than he’s treating South Mississippians . . . When we faced funding for the war and rebuilding Iraq, the president said he didn’t want that at the expense of anyone else’s funding. But when it comes to helping South Mississippi, anything there has to be offset somewhere else, taken from some other Americans’ funding . . . After running up $2.4 trillion in debt the last 5 years, all of a sudden they’re going to be fiscally responsible?

On the Mississippi Gulf Coast, there is a very strong pro-military presence, not only several military bases but also many retired military personnel and their families who live in the area. Mississippians have a very strong and proud history of military service and support. To see families who were in distress from Katrina while the heads of their families were deployed overseas is heartbreaking, as is the sight of troops being redeployed back to war multiple times while so many families and communities still suffer from Hurricane Katrina and other problems.

- And then, there is the “loss” endemic to both war and natural disaster. Many war veterans describe how they have felt that “I lost a part of me” in the war, to include their youth, their innocence, and their naiveté. One vet who went back with us to Vietnam in 2000 on our Study Abroad History course said, “I went over to Vietnam as a blue-eyed 21-year-old kid from Minnesota—and I returned an old man.”

Others lost limbs, bodily functions, and their physical and/or their mental and spiritual health. Still others describe a loss of faith in our government or in our society at how they were treated during or following the war. And still others describe a loss of faith in God or in a higher power. “I reached out to God to help me when I was in the war and he didn’t answer me. He left me alone with all this friggin’ weight on my shoulders to deal with on my own.” And others describe returning to a world that now was unfamiliar and somewhat alien to them. “Home” would never be the same again after the impact of what they had been through.

All of the above losses have their variants among various Katrina survivors. Those who feel that Katrina wiped out their past life and all that was meaningful to them through destruction of everything that they had owned; those who lost faith in our government because of broken promises, an inept and overwhelmed disaster relief assistance response, and repeated denials by government officials of
serious health problems being reported from residents of formaldehyde-laden FEMA trailers and others who lost their emotional health or their physical health; those who lost their faith and blamed God for the terrible “natural disaster” that happened or for their continuing plight afterward; and those whose homes, possessions, and entire neighborhoods were devastated, lost, gone forever.

PARALLEL CLINICAL DYNAMICS BETWEEN WAR AND DISASTERS

The clinical dynamics that parallel healing from war and disasters like Katrina are equally profound. I will only briefly mention several in the form of a series of myths and realities (these are available in a document on my university Web site www.usm.edu/gc/health/scurfield) (Scurfield, 2006b):

Myth: Heroes and “normal” or healthy persons do not continue to have problems after being exposed to a trauma. If they do, that means that they already had problems and were “predisposed” to having such problems anyhow. “The trauma was merely a trigger.”

Reality: Combat, war, natural disasters, and other traumatic experiences always have a significant impact on all who experience it, both shorter-term and longer-term. The impact may not be a disordered response, but there always is an impact. Indeed, “trauma” is so catastrophic that it will evoke symptoms in almost everyone “regardless of one’s background or premorbid factors.” Viktor Frankl, concentration camp survivor and founder of logotherapy stated (Frankl, 1959), “An abnormal reaction to an abnormal situation is normal behavior.” An Iraq war veteran, “My body’s here, but my mind is there [in Iraq].”1 A Katrina survivor, “I can’t get what happened during Katrina out of my mind; it doesn’t take much for me to remember how terrifying it was and what I lost.”

Indeed, there is compelling evidence that the more anyone is exposed to traumatic stressors, such as war, the greater the likelihood that you will eventually develop posttraumatic stress or posttraumatic stress disorder (PTSD). And so, for example, the longer you are deployed in a war zone and the more you are repeatedly redeployed back to the war zone, the risk will be increasingly higher that you will ultimately develop PTSD. This is the risk of being willing to repeatedly put yourself into harm’s way.

And a number of people who were traumatized during or following Katrina find themselves having exaggerated anxiety or panic reactions when there is even a remote threat of another storm coming our way. And it is easy to predict that whenever the next severe hurricane makes landfall, severe anxiety and other Katrina-related issues will resurface and profoundly affect many Gulf Coast residents.

Myth: Time heals all wounds.

Reality: Not necessarily, if this were true, old folks like me would be paragons of mental health. The reality is that posttraumatic symptoms not only do not necessarily disappear over time but also in a significant subgroup, the symptoms have become worse, probably exacerbated by the aging process, that is, greater likelihood of exposure to deaths of significant others as one grows older, age-related losses of job, career, health, and increased realization of one’s mortality (see discussion in Scurfield, 2004).

Myth: My trauma was not as bad as what others suffered, so I should not be feeling as badly as I do/Or I should feel guilty because I was spared what others suffered.

Reality: Too many veterans and Katrina survivors unfairly compare their trauma with those of others; this is a no-win proposition. “My trauma was not as bad as that suffered by others, so I feel guilty to even mention what happened to me.” No, your trauma is your trauma, and what is its impact on you? Some survivors continue to deny or minimize the very real impact of their trauma experience. They must be willing to face the truth about how the trauma affected them—or it will always have a grip on them.

Conversely, there are war and Katrina survivors who continually bemoan their situation and have little empathy for others, or indeed are very bitter at their situation and resent attention paid to others. This even includes reactions at the community level. For example, many from Louisiana are sharply critical of Mississippi “getting more than their fair share” of post-Katrina money, arguing that this has happened because of Governor Barbour’s Republican and big-money connections being used to put folks from Louisiana at a severe disadvantage. Conversely, many from Mississippi are very critical of how most of the national media attention is focused on New Orleans and that Mississippi is a media afterthought at best.
Unfortunately, it is too easy to become stuck in resentment about what others are getting and what we are not—rather than focusing on the facts that there is more than enough tragedy and devastation to overcome among veterans of all wars and their families, and among all Katrina survivors along the Gulf Coast, that the rebuilding and recovery tasks that remain are enormous and seemingly beyond the resources that are being directed our way. This is especially so for those with financial difficulties who can ill afford an economy in which affordable housing seems to be an afterthought.

Myth: No one can possibly understand what I have been through.

Reality: Most trauma survivors initially feel that either (a) no one else can possibly understand what they have gone through or (b) the only ones who could possibly understand are those who have had the very same trauma experience. However, over time, trauma survivors can come to believe that there are others who may well understand from their own trauma or other life experiences and attitudes how it feels to not want to talk to anyone, or to feel that no one will be able to understand something you have experienced, or how you may have hoped if you could just ignore something festering inside you that it would eventually go away.

Myth: I must have been bad or somehow deserved what happened to me.

Reality: In the aftermath of trauma, many victims and survivors do not believe that the trauma was a random occurrence. Rather, they believe that someone must be blamed, to include blaming others or blaming self. The reality is that bad things can happen to good people and through no fault of your own. However, many war and disaster survivors can get stuck in blaming someone for their trauma: themselves, others, institutions—or God.

Myth: My trauma (be it war, Katrina, or) is the cause of all of my problems that I am having. Or I am behaving or feeling this way just because of Iraq or Katrina.

Reality: No one was a “blank tablet” before being deployed to Iraq or before Katrina. We all were persons with strengths and weaknesses, positives and negatives. You may be having problems now that existed before Katrina, or that are worse in the aftermath of Katrina. If this is so, you must be truthful with yourself as the cause(s) of your current problems or you will put blame and responsibility where it does not belong and you will not address what truly needs addressed.

Myth: I did okay during the trauma and for awhile afterward, so I should not be having all of these negative feelings and reactions now.

Reality: People seldom “break down” psychologically or have emotions that overwhelm and incapacitate them while in the middle of an emergency or trauma such as war or Katrina or in its immediate aftermath. Rather, most survivors suppress or “bury” painful feelings and thoughts and learn how to “detach” from one’s own emotions to survive and not be overwhelmed. Typically, there is a delay in the onset of problematic emotions and thoughts until sometime after the danger has passed—hours, days, or weeks later; in a number of cases months, years, or decades later.

One Southern Miss colleague told me about 8 months after Katrina (Scurfield, 2006a):

I am having much more difficulty now, 8 months later, than during the immediate aftermath of Katrina [when I was on survival mode]. I find myself more overwhelmed by competing demands on me—house, job, parents, other family members—than at anytime in the immediate aftermath of the storm . . . delayed response is harder for me than the immediate aftermath.

I might note that I have written a six-stage postdisaster phases handout that is available on my university Web site (www.usm.edu/gc/health/scurfield/files/six-common-stages-disaster-recovery-rev-april-2007) that include a “delayed” subphase that can occur at any time during five of the six phases (Scurfield, 2008). After Vietnam, this was referred to as “delayed stress” and was an important influence on the thinking that led to the initial diagnostic category of PTSD in the DSM-III in 1980.

Myth: I must be crazy or weak to still remember and still be bothered by the trauma after these many months (or years) have gone by.

Reality: Trauma is unforgettable (unless one has psychic amnesia). It is absolutely normal to not be able to totally eradicate the memories of trauma and to be bothered to at least some degree by the trauma—for months, years, or decades afterward. Therefore, a trauma survivor will not be able to totally forget salient memories of trauma—although a number of
trauma survivors resort to artificial means such as substance abuse, psychotropic medications, constant exposure to current danger, become a workaholic, or otherwise preoccupy themselves as a temporary way to forget.

Myth: If I can just forget about the (traumatic) memories, I can move on with my life.

Reality: Because trauma is unforgettable, if you are a survivor of a trauma that happened awhile ago, you have become an expert at detachment, denial, minimization, and avoidance. Because that is what you have been doing in an attempt to forget about the unforgettable traumatic experience. Indeed, to attempt to suppress or “bury” painful memories and to learn how to “detach” yourself from your emotions while in the war zone or while in the middle of a natural disaster or other trauma is almost certainly helpful to be able to continue to function during continued exposure to the trauma. These strategies also will help you to be able to make it through until the emergency conditions have passed. On the other hand, there is absolutely no evidence that doing this will have any impact on whether you will or will not subsequently develop longer-term mental health problems.2

And, at some point, the detachment/denial stops working so well. You may have become exhausted; or you have become so extreme with your detachment/denial that it starts causing other problems in your life—because you may have become too detached from your emotions and from people. And this then is an additional problem on top of the unresolved painful memories and problems from your original traumatic experience(s).

Myth: Most trauma survivors are highly motivated to eliminate or reduce PTSD-related symptoms like isolation, numbing, and physical arousal/hyperarousal to the environment.

Reality: A number of PTSD symptoms also are survival modes that were learned during or following the trauma; and many survivors are very reluctant, ambivalent, or not interested in giving them up (Murphy et al., 2004). They may (a) feel that it is quite justified to stay removed and apart from others, because they are different and do not feel comfortable in many social situations; (b) believe that to let themselves feel emotions once again will only result in painful reliving of traumatic memories; and (c) believe it is wise not to trust and be wary of the environment, and so hyperarousal is a necessary protection against a hostile world.

Myth: If I fully remember and reexperience aspects of my original trauma (through talking about it, thinking about it, or focusing on it), I will lose control and either become sucked back into the vortex of that memory and never be able to come back out again—or I will go crazy, or start crying and not be able to stop crying, or become so enraged that I will hurt someone or myself.

Reality: Trauma survivors do not go crazy from remembering and talking about their trauma. But they may go “crazy” trying so desperately to deny the undeniable—that the trauma happened, that it hurt then and it hurts now, that it has not gone away, and that it needs to be dealt with. This is the challenge that faces both war veterans and survivors of Katrina.

THE OTHER SIDE OF THE STORY: POSITIVES IN THE WAKE OF TRAUMA

It is essential to emphasize that the story that follows in the wake of war and natural disasters is not all about pain, loss, hurt, and tragedy. There may well be either or both significant “positive” and/or “negative” outcomes or impact, both while in the middle of the traumatic events and afterward (Scurfield, 2006a; 2006b; 2008). This impact may be evident immediately, later, or after a very long period of time has elapsed. (Of course, even having many positive war experiences or positive survival experiences from other trauma will not necessarily resolve or ameliorate the grief, hurt, fear, or loss that was suffered or witnessed.)

Most vets and survivors of hurricanes and other trauma ultimately do experience important positives along with the pain and loss. For example, most vets feel that, overall, their military experiences were more positive than negative, to include increased personal strength and ability to function under severe duress, increased pride, and enhanced appreciation of the freedoms that many take for granted. (Conversely, there is a substantial minority, perhaps as many as one third, has serious issues that may be unresolved for months, years, or decades [Card, 1983].3)

Also, there are the sustained and extensive contributions by volunteers and private organizations both to military personnel and their
families and to Katrina survivors. Thousands of volunteers who belong to grassroots organizations have provided critically needed services to our nation’s military and their families—needs that are not being met by governmental programs. Such organizations include the Wounded Warrior Project, Blue Star Mothers, The Fisher House, National Veterans Foundation, Home Front Support Web, Support4MilitaryWives, Quilts for Soldiers, Soldiers Angels, and so many more.

In turn, tens of thousands of volunteers from throughout the country have come to southern Mississippi to help with debris removal and recovery efforts, assistance that has not been adequately provided by governmental organizations. The positive side of this cannot be overstated.

The following letter beautifully expresses the essence of the good that can come shining through in the aftermath of disasters such as Katrina.

Five days after the storm . . . I decided to venture out and see who I could help. I have a young lady friend who lost everything and she decided to join me . . . We then proceeded to a low-income neighborhood in D’Iberville that was hit hard. Almost every family we went to said “they didn’t need anything, but the people down the street did.” In this little community, they were looking out for each other. They were doing the best they could to spread the resources out amongst all of them. And my young friend was shaking hands, giving out meals, smiling and laughing. I watched her as she interacted with everyone and I realized that even through her loss, she found a way to give. She gave hope and joy and love. That is the greatest lesson I learned: through it all, our spirit and lives are what live on. Thank you, my young friend, for the lesson. I will always remember it. (Hafford, 2005)

The resilient people of the Mississippi Gulf Coast have not only survived, many have been enriched—and continue to enrich others. Personally, I am blessed to have a renewal and enhanced appreciation of the importance of my relationship with my wife and daughter (we experienced together the harrowing onslaught of Katrina) and with our sons who were in California and our extended family. And so many friends and relatives cared and reached out across the miles. And that kind of outreach is a potent antidote to even the devastation of a Katrina—or of war.

Yes, a remarkable and palpable spirit of caring and resolve persists that we will not let our nation’s worst natural disaster keep us down. I find people here are more sensitive and reaching out to others than before Katrina (and this always has been a friendly place). And tens of thousands of volunteers continue to offer assistance and caring, many with faith-based organizations, uniquely filling a desperate need that exceeds the inability of cumbersome federal programs to provide.

Lest we forget—again. Should not this powerful post-Katrina spirit of appreciation and responsiveness to the interconnectedness among us all, further illustrated by the massive national response to the mass murders at Virginia Tech, be channeled similarly into paying proper homage, respect, and attention, not just now but for decades to come, to our nation’s finest who are suffering the price of having served in harm’s way, many with lifelong disabilities and hurt?

The 32 people murdered at Virginia Tech received an amazing and heartfelt plethora of national media coverage and public attention for several days. And very rightfully so. This included front page stories, color photographs and columns about each victim, and all national magazines and television stations carrying major in-depth coverage. And Virginia Tech rallied, shouting out, “as terrible as the deaths are, we shall survive and not be defined by this, and we will not forget those who were killed.” What a wonderful community and national outpouring of grief, caring, reflection, recognition, and determination.

Conversely, as a Vietnam veteran, I am acutely aware of the contrast, the deafening sounds of silence about almost all of the deaths in Iraq and Afghanistan of American service men and women. These deaths were recorded in small boxes at the bottom of a page in newspapers, such as “A Marine died Friday during combat in Anbar province”; some notices add name, rank, and hometown. No photographs; no columns of testimony about each war casualty; about their lives and dreams that had
been snuffed out in the war zone; and no coverage of what family, friends, former school mates, and teachers had to say about them. No nation glued to the television, no other national media coverage, and no sharing in a national communal grieving and homage.

In fact, more than 3,300 killed in action (KIA) in Iraq and Afghanistan all have arrived back in the United States in caskets—in the middle of the night. This is a purposeful political decision to keep our war casualties shrouded in secrecy—diametrically opposite the national spotlight that shone on Virginia Tech. And the same for those wounded-in-action and arriving on medical evacuation flights. No television cameras, no interviews about how they survived, and their thoughts of their comrades-in-arms who were killed—in contrast to wounded survivors at Virginia Tech. I was in tears as one wounded Virginia Tech survivor described his fortune to be alive and his grief on those killed. Yes, this is how the coverage and homage should be.

This is one of the many lessons unlearned about our American way during and following every war that we have fought. We engage in war with our eyes wide shut about the full human cost, now and later. The remarkable disparities between how the casualties of Virginia Tech have been appropriately recognized, mourned, and honored, in vivid contrast to wounded survivors at Virginia Tech. I was in tears as one wounded Virginia Tech survivor described his fortune to be alive and his grief on those killed. Yes, this is how the coverage and homage should be.

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THE INEVITABLE AND PROFOUND TRADE-OFFS BETWEEN WAR AND DOMESTIC ISSUES

Freedom is not free—and our military and their families know this all too well. The reverberations of the casualties and sacrifices on a personal level from the Iraq War will continue to inflict an ever-widening swath on the hearts of hundreds-of-thousands of families throughout America—and on millions of people in Iraq and Afghanistan—not to mention the millions of veterans and their families from previous wars. I hope and pray that the ever-accumulating sacrifices, injuries, psychiatric casualties, and deaths from this war among both Americans and Iraqis, and the escalating number of family members deeply wounded by the ricochet of what happens to their loved ones both during and after combat, are truly necessary and for the right reasons.

And yet no matter how noble the cause, and no matter how heroic or how necessary the inevitable personal sacrifices incurred by war may appear to be, there is an inevitable and profound trade-off that both our country’s political leaders and our citizenry too often seem unwilling to fully and honestly appreciate, acknowledge, and take into account when formulating and carrying out our national and international policies. Such unacknowledged yet profound trade-offs are dramatically illustrated by the almost unfathomable amounts of money required to fund the current war—and the enormous amounts of money that also are required to fund the recovery from Katrina, Gustave, Ike, and other more recent disasters.
And this does not include what is required to do justice to our nation’s poor and disadvantaged; the continuing plethora of violence against women and children; our out-of-control health costs and health insurance crisis; our crumbling road, bridge, and utilities infrastructures in many communities; and on and on.

Former President Dwight David Eisenhower spoke of this so eloquently after he had returned from Europe as the commander-in-chief of the victorious Allied Forces following World War II:

Every gun that is made, every warship launched, every rocket fired, signifies in the final sense a theft from those who hunger and are not fed, those who are Cold and not clothed. This world in arms is not spending money alone; it is spending the sweat of its laborers, the genius of its scientists, the hopes of its children.

Postscript: The Iraq War Hits Close to Home

Around Christmastime, 2004, the husband and father of a mother (a former MSW student) and young daughter who I know was just such a casualty, KIA in Iraq. And this tragedy also illustrated the wonderful support provided through the military’s casualty assistance program and from both the military and civilian community in honoring a fallen hero and assisting the surviving family members (Scurfield, 2006).

I found myself worrying about how both mother and daughter would handle this tragedy, both short term and longer term. In particular, I thought about the daughter and how the Christmas season would always be bittersweet—infused with the memories of the traumatic death of her father (and his “broken promise” that he would return safely to her); and, yet, hopefully, over time, she also would cherish her treasured memories of him and the remarkable person that he was.

And I wondered, if I were the one who had to talk initially to a child whose parent had just been killed, how would I respond if she (he) were asking, “Daddy, when are you coming home again?” or if a dad or mom had promised that he or she would return—but did so in a coffin. And, while mere words are never adequate at such a time, the lyrics from a song by Lonestar, “I’m already there,” kept singing in my head, as they seemed to offer words and a message that might be fitting.

This is what your daddy would have wanted to say to you if he could have, and I am sure that he is thinking it right now, up in Heaven.

I’m already there. Take a look around.
I’m the sunshine in your hair. I’m the shadow on the ground.
I’m the whisper in the wind. I’m your imaginary friend.
And I know I’m in your prayers. I’m already there.

I’m the beat in your heart. I’m the moonlight shining down.
I’m the whisper in the wind. And I’ll be there to the end.
Can you feel the love that we share? I’m already there.
I’m already there. (Lonestar, 2001)

NOTES

1. This quote is from an Iraq veteran who stated that he could not get past the memories of Iraq, and that his experience there felt unresolved (Corbett, 2004, p. 34; see Scurfield, 2006).

2. For example, the research data on the outcome of very brief interventions in the aftermath of disasters are very mixed, with considerable evidence that it may not be at all beneficial in reducing the risk of subsequently developing PTSD.

3. Major negatives from war, and in the aftermath of natural disasters from those who feel abandoned or forgotten, can include the following: loss of civic pride; loss of faith in America; cynicism; inability to make friends; and experiences of grief at death, suffering, and other losses such as loss of homes, possessions, and even communities.

4. The echoes and aftermath of the casualties of Katrina overlay and are infused with the casualties of the wars in Iraq and Afghanistan. Indeed, in the Afterword of my third book, War Trauma. Lessons Unlearned From Vietnam to Iraq, I wrote my initial thoughts about some of the parallels and nexus between the Iraq War and Katrina.

REFERENCES


*Raymond M. Scurfield is a Professor of Social Work at the University of Southern Mississippi (USM)—Gulf Coast and Director of the Katrina Research Center. His M.S.W. and D.S.W. are from the University of Southern California. Dr. Scurfield was an Army ROTC Distinguished Military Graduate, Dickinson College, and served 4 years on active duty as an Army social worker, to include a psychiatric KO team in Vietnam in 1968-1969. He also has co-led two return trips to peacetime Vietnam. Dr. Scurfield has 14 teaching and service awards during his tenure at USM, to include MS NASW Outstanding Social Work Educator of the Year (2001), and MS NASW Social Worker of the Year (2006) in recognition of his post-Katrina counseling and disaster recovery leadership. Prior to Southern Miss, Dr. Scurfield had a distinguished 25-year career with the Department of Veterans Affairs. He directed regional and national post-traumatic stress disorder (PTSD) mental health programs in Los Angeles, Washington, DC, the Pacific Northwest, and in Hawaii and American Samoa. Dr. Scurfield’s 60+ publications include several about Hurricane Katrina and a trilogy of books about war trauma, the most recent War Trauma. Lessons Unlearned From Vietnam to Iraq (2006). He has made over 350 media appearances, conference and training presentations, to include 60 Minutes, Nightline, New York Times, Washington Post, Boston Globe, Christian Science Monitor, National Public Radio and numerous public radio stations nationwide. Dr. Scurfield is recognized nationally and internationally as an expert in PTSD, especially in the areas of war-related trauma and post-disaster recovery.*