

## Death rocks counselors who work with soldiers returning from war

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The suicide of a New Hampshire Air National Guardsman from Merrimack, just one day after he arrived home from Iraq, was a blow to counselors who have been working closely with returning service men and women.

But the tragedy has also deepened their resolve to “try even harder” to help those coming home from war.

The death of Tech Sgt. David Guindon, 48, from a self-inflicted gunshot wound on Aug. 18 “was just heartbreaking,” said Caryl Ahern, the readjustment team leader at the Vet Center in Manchester, which offers counseling and other services to veterans and their families.

Ahern said the 157th Refueling Wing of the NH ANG, based in Newington, had an excellent four-step demobilization plan in place for the returning airmen.

“They thought they were being compassionate, to say give these folks a few days with their families, and then we will have our demobilization meetings. They were planned for later that week,” she said.

Instead, the Vet Center staffers found themselves providing grief counseling to the other four members of the unit who served with Guindon in Iraq.

Ahern said Guindon’s suicide has made officials at the Guard and her own Vet Center think even harder about what kinds of immediate services these returning veterans may need.

“Perhaps what we can learn from this is that it might be a good thing to very quickly meet with the soldiers as they’re returning,” she said. “There could be some kind of assessment done just to assess their safety, to assess lethality right away, to see if there’s any immediate help they might need, any immediate support.”

“They deserve that after what this country has asked them to do.”

### **‘Just devastated’**

Bonnie Rice is the family readiness program coordinator for the NH ANG’s 157th wing. She said Guindon’s death has hit everyone hard.

“Our base here is a pretty tight community. They’re just devastated to lose one of our own members.”

Rice said Ahern and the base chaplain had already met with the airmen’s families, preparing them for what

to expect from the reintegration process. "And then the members were to have their briefing two days later," she said.

"We really did have a really good plan in place. It just didn't happen," she said.

Because of the tragedy, Rice said, "We are going to try even harder."

"We will at least talk with them a little bit more that day they arrive home and make sure they go home with numbers that they can call."

### **The Vietnam lesson**

It took years for the nation to respond to the many Vietnam veterans who were having trouble readjusting to civilian life. This time around, the military and support services are determined to do what they can for this new generation of returning veterans.

Dr. Ehsan Biswas, chief of mental health services at the VA Medical Center in Manchester, said his clinic has seen about 20 soldiers who have served in Iraq.

"A lot of people are coming in because their family members think they're not the same people anymore," he said.

"They describe they were a happy-go-lucky person before they went to war. When they come back from the war, they are up most of the night, they are much less socially interactive. They're more avoiding, like they're not going out with friends or enjoying things. They are losing interest in usually pleasurable things that they used to enjoy before the war."

Some are more irritable and angry; others are drinking too much, he said.

### **The guilt factor**

"And a lot of people we see have huge guilt because these are all people with high morals and ethics and they had to kill people over there, and at some point, in a weird way, they had to enjoy that killing, because they had to do everything to protect themselves and their platoon. And that is killing them once they are back in the country."

Biswas said it's normal to have some trouble readjusting after any combat experience. But when symptoms interfere with everyday life, veterans should be screened for Post-Traumatic Stress Disorder, he said.

Biswas said soldiers are often relieved when he gives them information about PTSD. "They have been wondering all this time, 'Maybe I'm unique, maybe I'm weak,'" he said. "When they find it is in a printout, they find out it is an already established situation and there may be some treatment available."

### **A place to talk**

Experts say many returning soldiers try to shield their loved ones from the more unpleasant aspects of their

combat experiences, something that only increases their sense of alienation and estrangement. A place like the Vet Center, where veterans from past and current conflicts can meet, and everything is kept confidential, can be a godsend, they say.

Al Porsche is a Vet Center counselor; he's also a Vietnam veteran. "What I think I give them is the opportunity to take the leap of faith to share their story, to talk about things."

"I think I make it a little easier for them to take that first step. They sense, being a combat veteran myself, there's a bond there."

### **It takes time**

The readjustment process, Porsche said, "may take a few months or may take longer, depending on the combat trauma experiences they've had."

And he said, "There has to be an awareness on the part of veterans' family members that they need a little time. They can't just go back to the way they were. That's the goal, but it's going to take a little time."

One lesson from the Vietnam experience was that the longer veterans put off getting help, the more ingrained the mental health problems could become, "and it becomes much more difficult to intervene," Porsche said. "That's what we're trying to prevent in the current generation of veterans."

### **More to learn**

There are painful but important lessons from Guindon's death, Ahern said.

"I go back to those words that war is horrific, and there is a tremendous impact on those who fight for their country and put their lives on the line," she said. "And they deserve all of the appreciation and support that we can possibly give them."

"And we need to keep learning from these experiences how to better respond to this particular deployment."

Because, she said, "All the information that is coming back from Iraq is that the number of traumatic experiences and the level of severity of these experiences is very high."

### **A significant risk**

A recent study of Army and Marine combat infantry units that had served in Iraq found "a significant risk of mental health problems," including depression, anxiety, PTSD and alcohol abuse.

The overwhelming majority of soldiers and Marines in the study groups reported being exposed to traumatic combat experiences, including being attacked or ambushed, being shot at, knowing someone seriously injured or killed, seeing dead bodies or human remains, and seeing injured women or children whom they were unable to help.

## **Barriers to help**

But what worries counselors most is the study, published last month in the *New England Journal of Medicine*, also found there are critical barriers to getting professional help, “particularly the perception of stigma among those most in need of such care.”

Half of those who met screening criteria for a mental disorder said they feared that seeking help would harm their careers; 65 percent feared they would be seen as “weak.” Sixty-three percent of these soldiers or Marines voiced concern that their unit’s leadership might treat them differently, and 59 percent feared members of their unit would have less confidence in them.

## **The stigma concern**

Nick Guyol, a social worker at the NH National Guard’s family assistance center in Manchester — one of six such centers in the state — admits it’s difficult to overcome that perception of stigma. “That really is a tough one, because it’s such a contrast with the warrior who can do anything and be anywhere and kick anybody’s butt.”

“There’s this: ‘Do I want to be labeled crazy? Will they lock me up? Will I get a black mark on my record?’ All that stuff, it’s hard to overcome.

“A lot of them aren’t going to, but it’s OK to seek out helping systems. It’s a sign of strength, not weakness, to admit you’re not King Kong,” Guyol said.

## **Call in some help**

Here’s what Guyol wants soldiers to understand: “If you’re in a firefight and you need help, it’s OK to ask for help over there: Where’s close air support that can bring in an A-10?”

In the same way, “If you’re having an emotional firefight, you need some help there, too,” he said.

Guyol said family members can’t fully understand what their soldier has gone through. “But they can care,” he said. “And they will, and they do.”

## **Listen, really listen**

The job for the rest of us, Ahern said, “is to welcome them home and to listen to them, to really listen to them, where they’re at right now, whether they need to talk or whether they need some space to try to make sense of their own experiences.”

We owe them nothing less, the counselors say.

<http://www.veteransforcommonsense.org/index.cfm?Page=Article&ID=1932>