

GI SPECIAL 2#B71

ENOUGH. BRING THEM ALL HOME NOW.



1st Cavalry Division SOLDIER before going on mission in Sadr City, Baghdad.
(AFP/Jewel Samad)

Rally At Ft. Bragg To Bring The Troops Home!

Greetings from Fayetteville NC, right outside of Ft. Bragg, home of the US Army's 82nd Airborne Infantry and the Special Forces Command.

Many of you attended, supported or helped plan the immensely successful rally here on March 20th of this year. At last night's meeting of our local grassroots peace group, we decided to issue a call for another rally in the coming year, on March 19, 2005.

The last rally was conceived, planned and executed in less than two months.

Consequently, some of the "bigger" ideas we came up with just seemed to be too large for us to carry them out in that time span.

For the upcoming rally, we want to avoid that time constraint, thus this early call for ideas, commitments and discussion (and, ahem, fund raising!). We plan to begin face to face meetings of organizers in late November or early December. Although you are an ally living outside of North Carolina, your input in the planning process is still needed.

So, let's begin the discussion via email.

Is this a good idea?

Who is onboard for helping us promote and / or plan?

How much like the 2004 rally should the next one be?

Who would you like to see at the rally (Michael Moore? Lila Lipscomb? The Dave Matthews Band?)

Let us know!

Lou Plummer
Military Families Speak Out
Bring Them Home Now!
Fayetteville Peace With Justice
lou.plummer@mac.com

[COUNT ON GI SPECIAL FOR SURE, 100%. T)

Do you have a friend or relative in the service? Forward this E-MAIL along, or send us the address if you wish and we'll send it regularly. Whether in Iraq or stuck on a base in the USA, this is extra important for your service friend, too often cut off from access to encouraging news of growing resistance to the war, at home and in Iraq, and information about other social protest movements here in the USA. Send requests to address up top.

IRAQ WAR REPORTS:

Two U.S. Soldiers Killed In North

9.23.04 Pakistan Times.net

Two US soldiers were also killed in separate attacks in northern Iraq.

Soldier Dies Of Wounds

Sep. 23 (UPI)

A U.S. soldier died Thursday from wounds he sustained in an explosion that hit his military convoy in Baghdad Wednesday.

MARINE KILLED IN AL ANBAR PROVINCE

September 23, 2004 HEADQUARTERS UNITED STATES CENTRAL COMMAND
Release Number: 04-09-26C

One Marine assigned to I Marine Expeditionary Force was killed in action Sept. 22.

The release of more details about the incident could place our personnel at greater risk. Therefore, due to force protection consideration, additional details concerning the incident will not be released. **[The bullshit marches on.]**

Carterville Marine Dies In Iraq

9.23.04 WorldNow and WQAD

CARTERVILLE, Ill. A Marine from the southern Illinois community of Carterville has died in Iraq.

Williamson County Coroner Junior Burke confirms that 25-year-old Sergeant Benjamin Smith was killed yesterday at about 10:03 p-m Iraq time in the Al-Anbar province.

Carterville Mayor Bill Maussey is asking all residents to lower their flags to half-staff in Smith's memory.

(Carterville is about eight miles east of Carbondale.)

(Thanks WJPF, Carterville)

Sadr City War Continues: Two Bradleys and Tank Knocked Out, “Several” Wounded;

Iraqi Stooge “Government” Admits It’s No Government At All



A U.S. Army soldier fights from a rooftop stronghold during a battle with insurgents in the Sadr City section of Baghdad Sept. 23, 2004.

The soldiers had to move to the rooftop after their Bradley fighting vehicle was struck by a rocket-propelled grenade and caught fire. Two Bradleys and one tank were disabled by insurgent attacks Wednesday and early Thursday. Several soldiers also suffered gunshot wounds, but were all expected to survive. (AP Photo/Jim MacMillan)

9/23/2004 By Denis D. Gray, Associated Press & Pakistan Times.net

U.S. warplanes fired on insurgent targets in the east Baghdad slum of Sadr City on Thursday in a second day of fighting in the Shiite militia stronghold. Iraqi doctors said 13 people were killed and 149 were injured, many of them children.

An American Bradley fighting vehicle was hit by a rocket-propelled grenade and caught fire, according to a U.S. military report. It was not clear if there were any casualties.

The Iraqi Interior Ministry had no immediate information on the attacks. [So much for the bullshit about “sovereignty.” They aren’t even told what’s going on in the capital of the country. Nothing but a pack of empty suits that obviously the occupation doesn’t even trust enough to keep informed of what everybody else in Baghdad can see with their own eyes.]

The military says that the insurgents have laid down booby traps throughout Sadr City and have repeatedly fired mortars toward an American base on its outskirts.

U.S. warplanes and helicopters roared overhead and residents said **loud explosions could be heard for hours**. Militia fighters returned fire with machine guns, they said.

Sadr aide Naim al-Qaabi described the raids as "the most devastating operation in Sadr City" since the fall of Saddam Hussein in April 2003.

Fighting Erupts In Dhuluiya

DHULUIYA, Iraq, Sept 23 (AFP)

Fighting broke out late Thursday between insurgents and US and Iraqi forces in Dhuluiya, a small town north of Baghdad, after a day of skirmishes, an AFP correspondent said.

The fighting started when a US military patrol came under rocket-propelled grenade fire near an abandoned police station, a military spokesman said.

Dhuluiya is 40 miles north of Baghdad.

TROOP NEWS

Forgotten Casualties: Used, Abused, And Thrown Away; Sending The Unfit Back To Iraq

Sept. 22, 2004 By Lynn Harris, Solon.com. Full article at:
<http://www.salon.com/mwt/feature/2004/09/22/ptsd/index.html>

"It is a national disgrace that front-line and combat soldiers need to fight for medical care and benefits when they return home from war." "First I fought the war," Lemke says. "Then I had to fight a war for my treatment."

"Everything is uncertain, you're denied care, and you know they don't give a damn whether you get well or not. It's getting to the point where soldiers will do anything to get out of here," says a 45-year-old non-commissioned officer in medical holdover at Fort Knox who was afraid to give his name.

Mike Lemke, a 45-year-old Army National Guard police sergeant from Colorado Springs, Colo., volunteered for active duty after seeing the twin towers fall on TV. "I wanted to, you know, kick some tail," he says. He was sent home from Iraq in August 2003

because of orthopedic and cardiovascular problems -- and with memories and feelings he couldn't shake. He'd seen what was left of one of Saddam's prisons, prowled by feral dogs with rotting limbs in their mouths; he'd mingled constantly with civilians, never knowing if one was armed. "You never feel completely safe," he says. "That stays with you."

Lemke could not sleep for his first 22 days in the medical barracks in Colorado's Fort Carson, where he remained for more than a year on "medical holdover" -- a period during which wounded soldiers await treatment and subsequently either return to duty or get a medical exit from the Army. He experienced flashbacks and temper surges and would hit the dirt at the sound of a jackhammer.

No one approached Lemke to inquire about his mental health. Only when a nurse practitioner happened to ask him how he was sleeping did the story come out -- and even then it took him two weeks to accept her suggestion that he seek counseling.

Why didn't Lemke ask for help? "There's a culture here of unless your legs have been torpedoed off or your arm's shot off, then it's not a combat injury," he says. "I did the same thing that everyone does in the military: You suck it up. You don't whine."

Lemke is still on medication and in therapy, and is not employed.

He is angry at the Army for many reasons, including his treatment during the medical holdover. But the issue that will most directly affect his future is his dispute with the Army over his disability rating.

The Army Medical Evaluation Board (MEB) -- the body that works in concert with the Physical Evaluation Board (PEB) to determine wounded soldiers' medical retirement and disability status according to the detailed specifications in Army Regulation 635-40 -- gave Lemke a 10 percent disability rating for PTSD, which classifies it as "mild" and as allowing for "adequate" job and social functioning.

Whether a soldier is given a 30 percent rating or a rating less than that has major financial implications. A 30 percent rating grants a soldier lifetime disability benefits, along with the military's regular retirement benefits. Anything less than 30 percent results only in a one-time severance payment: two times the soldier's base pay times total years of active duty (up to a maximum of 12 years). Had Lemke received medical retirement, he estimates that he'd have gotten \$1,200 to \$1,600 every month for the rest of his life. His severance payment is far less. His 12 years of part-time duty convert to six years of active duty.

Result, in his case: "For someone who was available to the government for 12 years, it's \$26K and adios," he says.

Lemke is one of a number of returning soldiers, mostly Army National Guard and Reserve, who say they are struggling not only to heal from physical and psychological wounds, but also to get proper mental health treatment while in the Army's care -- and adequate financial compensation when their medical condition forces them to leave the Army.

"The DOD [Department of Defense] is taking great care of the acutely injured, the injuries you can see, the burns, the lost arms and legs that they're treating with state-of-the-art prosthetics," says Stephen Robinson, executive director of the [National Gulf War Resource Center](#), a veterans' advocacy organization in Silver Spring, Md. **"But they're doing a horrible job with the other injuries that aren't quite so evident."**

Soldiers -- especially National Guard and Army Reserve soldiers in " medical holdover" -- say they run into roadblocks to needed mental health care, severance arrangements that appear to downplay invisible injuries in particular, and even attempts to send mentally unfit soldiers back to Iraq.

The Center for American Progress recently published his [11-page report](#) criticizing the military's handling of mental health issues. "There are unseen costs of war that have dramatic national implications in terms of benefits and care and reintegration into society," he says.

"It is a national disgrace that front-line and combat soldiers need to fight for medical care and benefits when they return home from war."

Robinson, who has spoken with thousands of Iraq war veterans, describes the typical cycle: "When soldiers come back they have to go through complicated workman's-comp-type paperwork to prove that something they did in the war is the reason they're sick," he says. "That can take from four to 16 months. So they come home injured, and rather than being integrated into society, they're stuck in medical limbo waiting for their disability rating and then being diagnosed with a preexisting condition" -- which, he adds, implies that they shouldn't have been sent over in the first place.

He claims, anecdotally, that the MEB is underevaluating soldiers by a fairly consistent 10 to 20 percent -- a key percentage if it leaves a disability rating under 30 percent. Robinson's hypothesis: The DOD simply does not want to foot these potentially substantial bills. That, or given the number of soldiers who will yet come home injured, it simply can't.

Lemke and many of his colleagues say such problems are particularly acute among National Guard and Reserve soldiers, who make up about 40 percent of deployed troops. (Of nearly 5,000 soldiers on medical hold, all but about 860 are Reserve component troops.) "I don't think they budgeted for the Reserve and Guard component," Lemke says. "And now they want to make the soldier eat it."

Guard and Reserve soldiers say that their low ratings are the final blow in a series of actions that lead them to question the Army's true commitment to caring for them, especially when their injuries are invisible.

"A lot of the people I've had contact with are not doing very well," says Kaye Baron, a clinical psychologist in private practice in Colorado Springs. Baron estimates that 60 to 70 percent of people she sees are in the military, and of that, roughly half have served in or been affected by the Iraq war. "For one thing, **they're injured psychologically or**

physically, and on top of that they feel they're getting disposed of by the military -- like no one really cares."

Baron has also been puzzled by military diagnoses of, for example, personality disorder (which would be a preexisting condition, not qualifying a soldier for benefits) in soldiers whose symptoms are, in her estimation, fully explicable by PTSD. "I don't understand why military mental health is not doing more given that we know combat takes a toll on soldiers and PTSD is a widely recognized phenomenon. I don't know why they're not being more thoroughly examined and diagnosed."

The Army notes that soldiers have ample opportunity to review their files both before they go to the board and after initial findings are returned; should they find anything amiss, they may request a reconsideration. **Still, soldiers who have attempted this describe a maddeningly muddled, even misleading, bureaucratic process. Others say they accept insufficient ratings as a means of escaping the limbo -- and often unpleasant environment -- of medical holdover.**

Soldiers still say, however, that despite the Army's efforts, languishing in medical holdover only compounds one's psychological issues. **"Everything is uncertain, you're denied care, and you know they don't give a damn whether you get well or not. It's getting to the point where soldiers will do anything to get out of here," says a 45-year-old non-commissioned officer in medical holdover at Fort Knox who was afraid to give his name. "The stress here is higher than in Iraq, and I was there."**

Some soldiers say they spend as much time as possible in their rooms, as they fear both crowds and their own temper. The main picture they paint is one of heavy medication -- "You've got soldiers on so much meds all they do is sleep; they can't even make formation," says a 37-year-old reserve soldier in medical hold at Fort Knox -- and of maddening red tape, administrative runarounds, and, at best, indifference.

While each soldier in medical holdover is assigned a case manager to help him work with the medical system, some complain that not all case managers are as caring or as knowledgeable as they need to be. In fact, several of the more experienced soldiers in Fort Knox medical holdover have seen fit to become de facto experts on the Army's byzantine medical and benefits systems. The military policeman on convalescent leave is himself at work on designing a series of flow charts and writing a lengthy booklet about the disability evaluation system to serve as a guide for other soldiers.

According to the Army Medical Command, screening for mental health issues in medical holdover is done via self-reporting in questionnaires, or ad hoc by physicians treating soldiers for physical issues.

"I'm sure that during the course of treatment a soldier will give off signs that will suggest that the individual needs some mental health counseling of some kind," says Cavazos of the Army Medical Command.

Robinson counters that it's essential for Army medical personnel to initiate intervention for mental health issues, even among soldiers coming home for physical injuries.

"Questionnaires are not sufficient to establish physical and mental fitness," he says, especially given the stigma against seeking psychological help or admitting "weakness." **Indeed, the Walter Reed study found that the fear of stigma was "disproportionately greatest among those most in need of help from mental health services." Says Robinson: "Fear of stigmatization will remain a problem until the military changes its culture."**

By some soldiers' accounts, their commanding officers will not be at the vanguard of that change. Their job, after all, is to get soldiers back to duty.

"I was told [by higher-ups] to 'not worry about it,'" says the 45-year-old NCO in medical holdover at Fort Knox, of the insomnia, anxiety and panic attacks that eventually got him on Zoloft, BuSpar, Ambien, and trazodone. "These soldiers come here all wired," he said, referring to the hypervigilance that's typical of PTSD, "and they immediately start telling them that they're going to try to return them to Iraq." According to him, they're told by their chain of command: "Don't settle down because you're going to need that high intensity when you go back."



Spc. Laurence Kiefer of the Montana National Guard
(Salon.com)

Spc. Laurence Kiefer, 30, a crane operator with the quartermaster combat support unit of the Montana National Guard, was brought home from Iraq to Fort Carson in May, in part because of injuries relating to a truck accident.

He was suffering from combat trauma -- at one point he'd had to drive a 22-ton crane at its maximum speed of 10 to 20 mph, for a 17-hour, 350-mile trip, often under fire -- compounded by other stresses, including fear that he'd be sent back to serve in the same unit with hostile command. However, he didn't get summoned for his official "outprocessing" exam for nearly three months. In the meantime, after first "self-medicating" with alcohol, he eventually sought medication and psychological treatment.

Soon thereafter, he was told to pack up and re-deploy.

He appealed to his psychologist, Jacqueline E. Delano, who felt that he wasn't ready, and who later asserted in writing that in a subsequent phone conversation, Kiefer's commanding officer "made statements indicating that he felt Spc. Kiefer was over-exaggerating his symptoms to get out of going back to Iraq" and "was not interested in this psychologist's professional opinion."

Delano was able to delay Kiefer's departure by insisting on further evaluation; she then diagnosed him with a personality disorder, a preexisting condition that renders him both unfit to serve and ineligible for benefits. A civilian psychologist later asserted that Kiefer's condition was PTSD; Kiefer is currently fighting the "personality disorder" designation.

What recourse do these soldiers have?

Says the 45-year-old NCO at Fort Knox: "The attitude here is: I don't trust these people. I'll wait till I get home and go to the V.A." Vets may apply for benefits through the V.A., which has a more generous ratings system. Five thousand veterans of Iraq and Afghanistan have gone to the V.A. with mental health diagnoses already. For those reasons and others, the V.A. is an appealing resource for soldiers in, and just out of, medical holdover. **"The V.A. has no legal authority. They can't take what we say and turn it against us," says the NCO. "They can't hurt you like the Army can."**

Now back at home and a civilian, Lemke is still doing his best, via word of mouth, to help soldiers who are confused or feeling mistreated by the system, or who are simply struggling with PTSD themselves. He even gets contacted by soldiers' wives who are desperate to find out "what's wrong" with their husbands.

No matter what, he knows what his fellow soldiers have been through. "First I fought the war," Lemke says. "Then I had to fight a war for my treatment."

NEED SOME TRUTH? CHECK OUT TRAVELING SOLDIER

Telling the truth - about the occupation, the cuts to veterans' benefits, or the dangers of depleted uranium - is the first reason Traveling Soldier is necessary. But we want to do more than tell the truth; we want to report on the resistance - whether it's in the streets of Baghdad, New York, or inside the armed forces. Our goal is for Traveling Soldier to become the thread that ties working-class people inside the armed services together. We want this newsletter to be a weapon to help you organize resistance within the armed forces. If you like what you've read, we hope that you'll join with us in building a network of active duty organizers.

<http://www.traveling-soldier.org/> And join with Iraq War vets in the call to end the occupation and bring our troops home now! (www.ivaw.net)

New Zealand Withdraws All Troops From Iraq

September 23, 2004 News Limited

NEW Zealand's military personnel in Iraq will be home Saturday, Defence Minister Mark Burton said in a statement Thursday.

They are to be flown out on a military Boeing 757 and be greeted by Prime Minister Helen Clark at Ohakea base, north of here.

Clark earlier said it was unlikely any further deployments would be made.

"I can't see that at this time. I think Iraq is just too difficult and too dangerous," she told Radio New Zealand Wednesday.

Wounded Soldiers' Family Fucked Over By Command Incompetence: Terrified By False Report, Then Denied Information



Pfc. Eric Dickson

9.23.04 By KEVIN DUGGAN, The Fort Collins Coloradoan

Having her son on the front lines is "horrible," she said.

"I hate it. I absolutely hate it," she said. "I don't feel positive about us being there in the first place, and having him there has made it even worse."

A 19-year-old Fort Collins man wounded while fighting with the U.S. Army in Iraq is expected to make a full recovery, family members say.

Pfc. Eric Dickson, a 2003 Rocky Mountain High School graduate, was injured Saturday when his unit was attacked during an operation aimed at clearing heavily armed insurgents from the city of Ramadi.

During a firefight, a bullet ricocheted off the street and went through Dickson's left foot, said Katherine Wright, Dickson's wife of three months. He was treated at a military hospital in Fallujah and released.

"He'll be out of action for at least a month," said his mother, Alison Dickson. "But it looks like he'll be staying in Iraq."

Although alarmed that he was wounded, Dickson's wife and mother are relieved his injuries are not as bad as originally reported to them late Saturday afternoon by the Army.

They were told Dickson was severely injured in combat and might be flown to Germany for treatment at an Army medical center within 24 to 48 hours.

They also were told to prepare to travel to Europe.

But calls with more information never came. They received no updates on his condition or direction on traveling to Germany, Alison said.

Calls to Army hotlines set up for the families of wounded soldiers and the headquarters of Dickson's unit -- 2nd Infantry Division, 2nd Brigade Combat Team -- in Korea uncovered no new information. Records indicated only that Dickson was severely wounded.

Alison said she was told casualty reports are not updated daily. Any change in Dickson's condition would not be noted for five days, she said.

Eventually, Dickson himself provided an update. He called Tuesday to tell family members he was hurt but doing OK.

"The lack of information was very frustrating," Alison said. "Neither of us got much sleep."

Having her son on the front lines is "horrible," she said.

"I hate it. I absolutely hate it," she said. "I don't feel positive about us being there in the first place, and having him there has made it even worse."

The public might be tuning out the news about the continuing violence in Iraq, she said, but for the families of military members serving there, any news hits close to home.

"This is one of our own over there," she said. "This is a member of our community."

4000 Wounded Unfit To Return To Duty: IEDs Kill Most U.S. Troops

Sep. 23, 2004 ROBERT BURNS, Associated Press

WASHINGTON - For U.S. troops in Iraq, homemade bombs are the main killers, despite the hundreds of millions of dollars the Pentagon has spent trying to curb the weapons made from simple, easy-to-obtain materials.

September shapes up as one of the deadliest months in Iraq for U.S. troops.

In the first 22 days of the month, at least 63 members of the Army, Marine Corps, Navy and Air Force died, Pentagon casualty reports show.

More than 7,400 soldiers have been wounded since the war began, of whom 4,026 were unable to return to duty, according to Pentagon figures.

The pace of U.S. military deaths has grown each month since the American occupation force handed over political control to an interim Iraqi government June 28.

At least 15 of the first 29 Army deaths in September were caused by homemade bombs,

The Marine Corps does not announce the specific cause or place of death for its casualties, but Pentagon officials say IEDs are accounting for roughly the same share of Marine deaths as for the Army - about 50 percent. That would equate to at least a dozen Marines so far this month.

At the Pentagon, one senior Army officer who monitors progress against the insurgency said the 155mm artillery shells and other explosives used to arm the improvised bombs are so easily available that the supply cannot be stopped, even though ammunition dumps are under surveillance.

The officer discussed the problem only on condition that he not be identified.

The officer estimated hundreds of millions of dollars have been spent so far trying to counter the IED threat, to no apparent effect.

The most dangerous part of Iraq in recent weeks has been Anbar province, which includes the cities of Ramadi and Fallujah west of Baghdad as well as a long frontier with Syria where Marines have suffered numerous casualties from snipers, mortar attacks and roadside bombs.

At least 30 U.S. troops, mostly Marines, have been killed in Anbar this month. At least 14 deaths were in Baghdad, the rest in various towns and cities, including Mosul, Balad and Baqubah.

Marine Medics Face The Ramadi Death Machine

Sep. 23, 2004 BY MIKE DORNING, Chicago Tribune

RAMADI, Iraq - (KRT)

It had come to this: Miguel Escalera was grateful for the rocket-propelled grenade exploding overhead.

Enveloped in darkness in the midst of a midnight firefight, the 23-year-old Navy corpsman was crouching down on the bed of a truck, frantically feeling along the body of a wounded Marine. With bullets whizzing past him, he dared not turn on a flashlight and make himself an easier target.

Only a few weeks in Iraq and under fire for the first time in his life, Escalera had lost many of his medical supplies. They had fallen away, in a trail of white bandages, as he sprinted from one casualty to the next, so caught up in the adrenaline of battle and his focus on reaching the wounded that he had forgotten to pause and zip shut his medical pouch.

Now, it was as though Escalera had been deprived of sight, too. He had to rely on his sense of touch, groping for the feel of warm liquid as he searched for a bullet wound. And that's when a flash of bright yellow-orange light revealed the blood soaking through the wounded lance corporal's uniform.

"The RPG actually helped me," Escalera said.

Petty Officer 3rd Class Escalera made it through the ambush that night. And so, despite their wounds, did each of the Marines under his care.

The medics who serve among soldiers and Marines in Iraq experience war in a unique way. They bear the duty not only to kill but also to save.

Medics - called corpsmen in the Marines - serve on the front lines. They walk the same patrols as the men they treat. They are showered with shrapnel from the same roadside bombs. They bunk together, eat together and sometimes die together.

At times under fire and often under the most trying conditions, they struggle to hold on to life in cases that might challenge top-level trauma centers. Confronted with the most gruesome wounds, they improvise care in the backs of Humvees, on the hard-packed dirt of open fields and on the tile floors of homes quickly seized for cover in the midst of combat.

The Navy corpsmen in Ramadi know the conflict in Iraq as few others do. Sixty miles west of Baghdad, this provincial capital has been a stronghold of the Sunni insurgency for over a year. Fallujah and Najaf have flared, but Ramadi has smoldered.

Here, war is constant and relentless: a succession of ambushes, sniper shots, roadside bombs, car bombs, grenade attacks and mortar barrages that are taking a high toll on the U.S. Marines in the city.

In six months, 34 Marines have been killed in the 1,000-man battalion based in Ramadi and more than a quarter of its members have been wounded in action. In front-line companies, every third Marine has a Purple Heart. Some of the men have more than one.

The corpsmen are intimately familiar with the human cost. The men who bleed and die in their arms are not just patients; more often than not, they are friends.

"There's nothing worse than hearing your buddy screaming in pain," said Navy Lt. Kenneth Son, battalion surgeon for the 2nd Battalion, 4th Marine Regiment. "Several of my corpsmen were the first on the scene when their best friend lost a limb."

Petty Officer Victor Urena was 19 and still settling in to his first assignment in the Navy when his chief sat him down at a long wooden conference table in January and gave him the news: He would be going to Iraq.

"I shed a tear, as a matter of fact," said Urena, thinking back.

Unlike Army field medics, the corpsmen who go into combat with Marines often do not realize when they enlist that they may wind up on the battlefield.

In keeping with the historic ties between the services, the Navy provides medical care for the Marine Corps. Many Navy hospital corpsmen assigned to the Marines joined the military expecting to serve on ships or land-based Navy clinics and hospitals.

And Urena was one of them. After growing up in Los Angeles, he joined the Navy to get away from what he describes as "a bad crowd." When he enlisted as a hospital man, he said, "I didn't even know about (the connection with) the Marines."

By March, Urena was in Ramadi. And the situation was even worse than he imagined. Within weeks, several Marines had died and others had lost arms, legs and eyes. Explosions of makeshift bombs hidden along the roads were common.

But whenever Urena's confidence wavered, a new friend was at his side: Petty Officer 3rd Class Fernando Mendez-Aceves, a veteran corpsman who took the young man under his wing.

Both were young Hispanic men from Southern California. They spent so much time together and looked enough alike that, for a time, the Marines nicknamed Urena "Mendez Jr."

Older and wiser at 27, Mendez was full of advice. Advice on women: Don't be shy with them. Advice on fitness: Lift weights. And advice on Marines: Bond with them, but don't get too close - you may lose some of them.

One afternoon Urena learned a Marine who bunked across the room from him was killed by a hidden bomb. Urena encountered Mendez in the small, heavily fortified combat outpost where they lived.

"I told him `Man, I don't want to die here. I don't want to go home with no arm,'" Urena said.

"Don't talk like that," Mendez responded. "Nothing's going to happen to you. These are good Marines. They'll protect you."

Every time the two corpsmen cut off a piece of clothing on the wounded Marine, they found another injury. As they worked, the Marine's face grew paler and his lips began to turn purple. He was moving closer to death.

They had been patrolling along a road. Lance Corp. Sean Carroll was walking a short distance behind Petty Officer Elias Monarrez when a hidden bomb exploded. There was a flash, a boom and a burst of debris. When Monarrez ran into the settling cloud of dust, it seemed as though the Marine had vanished.

And then Monarrez saw him: blown to the other side of the road, covered in trash and all manner of debris. His leg looked oddly flat.

As Monarrez examined Carroll, he began to comprehend the full scale of the Marine's injuries. One leg was nearly severed. There were two grapefruit-sized shrapnel wounds on his back. The bone of his shoulder blade was visible. And there were more wounds on his chest, pelvis and head.

"If somebody had come up to me as a training exam and given me all those injuries, I'd say that person's dead," said Petty Officer 3rd Class Tyrynn Dennis, who rushed over to help. "When you actually know the person, you do everything you can. You try everything."

Monarrez and Dennis worked furiously, bandaging and splinting the leg, then dressing the wounds, one by one. As Carroll drifted in and out of consciousness, Monarrez shouted at him and tapped his face to keep him awake.

By the time the medevac helicopter flew off, Monarrez and Dennis had exhausted their medical supplies. They held out little hope that the lance corporal would survive.

Surgeons could not save the leg, but months later, Carroll is still alive.

A choice had to be made. And Dennis was the one who had to make it - by a road in a remote land, as bullets flew through the air, as a Marine shouted across a field for a corpsman's aid, as the lieutenant beside him demanded an answer.

"Is he dead?" the platoon leader asked again.

The gunner on the Humvee collapsed as soon as he was hit: Pfc. Benjamin Carman, a good-humored 20-year-old who lifted the spirits of his squad with silly jokes. Dennis liked him a lot.

The bullet entered Carman's arm, passed through his chest and exited out the back. He wasn't breathing. He had no pulse.

"Corpsman!" yelled a Marine who had come halfway across the field. "We need a corpsman down here."

Should Dennis stay with Carman, hoping that he might resuscitate the gunner and keep him alive until he could be evacuated? Or should Dennis answer the other Marine?

Dennis ran across the field. With the uneven ridges and the enemy fire, he fell several times. Perhaps that was the only thing that kept him from getting hit, he later concluded.

When Dennis got there, the wounded Marine, a sniper, was spitting up blood. Punctured lung, Dennis thought. The sniper could have waited a little longer.

As for the gunner, it was a long shot, but who knows. A little more time working on Carman and the gunner might have lived.

Sitting outside his barracks more than three months later, the decision still weighs on Dennis.

"I think about it every day. I replay it all the time," he said.

Sometimes, it is also a corpsman's duty to go through the bodies of the dead, to feel for a heartbeat one final time before closing the eyes of a fallen Marine and sending him on for the journey home.

On April 6, less than a month after the battalion arrived, insurgents struck the Marines in a coordinated series of ambushes. A dozen members of the battalion died.

At the base, Urena jumped into the back of a Humvee loaded with bodies. The vehicle was covered with blood. And the wounds were grisly; one body was missing a leg and had no hands. But Urena turned over the Marines one by one, checking their necks for pulses.

And then, among the dead, he saw a familiar face: Mendez.

"I just froze," Urena said.

Mendez had been riding in a patrol that drove into one of the ambushes. Insurgents were waiting on the rooftops and in the alleyways of a commercial strip. Only one Marine survived in Mendez's vehicle.

According to Son, the battalion surgeon, several witnesses saw Mendez dragging wounded Marines toward safety before he was cut down by gunfire.

At the base, a few corpsmen took Mendez into a lounge fashioned into a makeshift morgue. Son stood over the body and said a silent prayer before zipping shut the body bag.

Urena remembers standing outside, sobbing. And then another corpsman came to his side.

"Don't cry," the corpsman advised. "The Marines will see you."

There's a rule among the corpsmen: show weakness or grief and the warriors around you may lose confidence in the men who are supposed to save them.

Besides, there was no time for mourning. More casualties coming in. Urena had to get back and help.

And so he did.

Guardman Gets Purple Heart; 200 More Off To Bush's Afghan Slaughterhouse

September 23, 2004 TOM GORDON, Birmingham News staff writer

Still in pain from shrapnel in his back and missing the peripheral vision in one eye, Alabama National Guardsman Michael Austin received a Purple Heart on Wednesday evening in his Marshall County hometown of Grant.

Meanwhile, about 200 members of two Birmingham area-based Guard units began preparing for security duty in Afghanistan.

According to a Guard news release, the units will report to their armories in mid-October, stay several days and then report to Fort Bragg, N.C., for training before heading overseas.

The 26-year-old Austin, a sergeant in Company B of the 711th Signal Battalion, was wounded in late August in the Iraqi city of Najaf.

Austin's wife, Lindsay, said he came home in early September after being treated at Walter Reed Army Medical Center. He is to return to Walter Reed Oct. 3 for further treatment **and assessment of his future military status.**

"He's doing good; he's still hurting a little bit from the shrapnel that's still in his back," Austin said. "He has a fairly large piece behind his lungs."

Another piece of shrapnel damaged Austin's right eye, taking away the peripheral vision, his wife said. Surgeons cut under his breast bone to remove shrapnel and his spleen, and they removed shrapnel from his diaphragm.

U.S. Soldier, Now War Resister, Speaks Out

23-Sep-2004 By Charlie Smith, Straight.com

A 19-year-old U.S. army deserter has told the Straight that he fled to Canada last March because he didn't want to be sent to Iraq. Brandon Hughey, now a resident of St. Catharines, Ontario, said in a telephone interview that he enlisted in August 2002 because it was the only way he could attend college. He said that he received an order last February to go to Iraq.

"I thought it was immoral, and I asked if I could receive a discharge, but I was denied more than once," Hughey recalled. "Coming to Canada, I felt, was my only option because, basically, I'm not going to take part in a war against innocent civilians, which basically this conflict in Iraq is."

Hughey also said he knows of two other U.S. military deserters in Canada, and has heard rumours of more who might be in the country.

He noted that his father, a Republican who voted for George W. Bush, disagreed with Hughey's decision until he started researching international law.

"He has come to the conclusion that [the war] is wrong," Hughey said. The founding fathers never intended for our country to become a colonial power. So he is in full support of my decision now."

Omaha Family Awaits Man Injured In Ambush

September 23, 2004 OMAHA, Neb., The OmahaChannel.com

A Marine who was critically injured in Iraq is headed back to Nebraska this week.

Gunnery Sgt. Lionel Trujillo was hurt during an explosion in the Anbar province Sept. 3. His unit was ambushed and an improvised explosive device exploded. The three people with him died. Trujillo had only been in Iraq a few weeks before he was injured.

Trujillo's family in Omaha is preparing to welcome him home Friday from a base in California where he was treated. **His sisters and mother will take care of him, although they know it will be tough.**

"He was not ready to lose friends," said Ruth Nunez, Trujillo's sister. "He already saw that in Desert Storm."

Armchair Asshole Thinks Troops Shouldn't Express Their Views: Wants Them Punished

9.20.04

Letters To The Editor
Army Times

I watched some of the show "Off to War" on cable television about a National Guard unit deploying to Iraq. **There were soldiers discussing how they did not want to go to war and how President Bush was making a mistake by sending them.**

They went on and on with this belligerent attitude toward the war and disrespecting their service and country.

I feel that they should be punished to the fullest extent possible for these acts. It troubled me to see so-called soldiers acting and talking this way on camera.

Phillip Roberts
Miramar, Calif.

[Hey Phillip, unless you're just a gutless, whining, cowardly piece of shit, I'm sure you're on your way to Iraq, right? I mean, somebody has to take the place of the troops you want "punished." So, a real brave man wouldn't stay here in the USA and let others do their dying for him, would he? And it doesn't matter if you're 15 or 70, you can find a way to get there. After all, the soldiers fighting for the

resistance come from every age group, and you don't have to be healthy either. Some of them can barely walk around. Already been in the armed forces? All the better, so have the resistance troops you'll be fighting, including a war against Iran. So, Mr. Shit Mouth who wants soldiers punished for having opinions, get your worthless scrawny butt to Iraq right now. In fact, we'll help you buy the ticket. You can go free-lance. All you need is a rifle, and they got plenty over there. And while you're at it, why don't you take Bush and Cheney and the rest of the traitors who lied the country into their war with you?]

IRAQ RESISTANCE ROUNDUP

Resistance Blows Up Oil Well And Pipeline & Kills Oil Corporation Executive

September 23, 2004 The Associated Press & By Abbas Fayadh (AP)

Insurgents killed a senior official of Iraq's North Oil Co in this north-eastern city today less than two weeks after his boss escaped an assassination attempt here, officials said.

Sana Toma Sulaiman, the deputy director of the company's oil products department in the Nineveh province, was shot dead as he headed to work in a taxi in Mosul, said Hazim Jallawi, a spokesman for the Nineveh governor's office.

The resistance attacked an oil well near Baghdad and a pipeline in the south, officials said.

In Rashidiya, some 15 miles north of the capital, Baghdad, saboteurs blew up an oil well, setting it on fire, said Jassim al-Dulaimi, who is in charge of security at the area's oilfields. Until midday Thursday, fire fighters were still trying to extinguish it, 14 hours after it exploded, he said.

The well, with a capacity of 5,000 barrels a day, supplies refineries in nearby Taji and Baghdad's Dora refinery, al-Dulaimi said.

Saboteurs also attacked a pipeline with explosives Thursday in the southern city of Najaf, ceasing oil flow from fields near the city to a refinery in the southern city of Basra, an official with the South Oil Co. said on condition of anonymity.

The products department is in charge of supplying Nineveh with oil and gas.

GET THE MESSAGE? TIME TO GO HOME!



Iraqi children gather near a tread from a destroyed U.S. tank in Baghdad's Sadr City. B (AFP/Ahmad al-Rubaye)

Occupation Cops Ambushed In Miqdadiya

23 September 2004 Aljazeera

In Miqdadiya town, northeast of Baghdad, five Iraqis, including three policemen, were injured when an explosive device went off. **The blast occurred when an Iraqi police patrol passed through the area, sources said.**

OCCUPATION REPORT

Liberation Bush Style; Iraqi Scientist Kept In Prison For Telling The Truth & Ridiculing Rumsfeld

September 23, 2004 Luke Harding, Guardian Newspapers Limited 2004

Other scientists still being held without charge include Amer Al Saadi, Saddam's chief scientific adviser who studied at Battersea College of Technology- now part of Surrey University- in the 1960s.

In February 2003, Dr Saadi appeared on TV to rubbish the US Secretary of State Colin Powell's claim that Iraq had weapons of mass destruction. In April 2003, three days after Baghdad fell, Saadi gave himself up to the Americans; they have kept him in jail ever since.

Saadi's German wife, Helma, says her husband's only crime was to have mocked Donald Rumsfeld, the US defence secretary, in a press conference before the invasion.

"Under the Geneva convention, prisoners of war should be either charged or released once a conflict is over," she says at her home in Baghdad.

"My husband is in a black hole of illegality. He was the only one who told the truth. Because of this the Americans have kept him in prison for one and a half years."

**OCCUPATION ISN'T LIBERATION
BRING ALL THE TROOPS HOME NOW!**

Swiss Pull Official Out Of Baghdad: Situation Much Worse In "Few Weeks"

September 23 swissinfo-interview by Scott Capper

The Swiss authorities have temporarily moved their development aid coordinator in Iraq, Daniel Beyeler, from Baghdad to the Jordanian capital, Amman.

In an interview with swissinfo, **Beyeler said the decision to leave the country had been prompted by the deteriorating security situation in the Iraqi capital.**

Daniel Beyeler: Above all, it was for security reasons. The situation is not stable enough in Iraq. If you work in humanitarian aid, you have to move around a lot. And this means you could be a target.

We also wanted to ensure the safety of our partners and employees. We are concerned that if we walk around with them we will be putting them in danger, and that is not our aim.

If I am not around, my two Iraqi colleagues can travel [more] easily. But if I'm with them, they are seen to be working with foreigners, and that could make them a target. **The general [security] situation has deteriorated drastically over the past few weeks.**

DANGER: POLITICIANS AT WORK

GEORGE BUSH: POLITICAL GENIUS The Commander-in-Chief Speaks

In a rare admission of error, Bush said he should not have said - as he did Tuesday - that the CIA was just guessing in a report this summer that gave a gloomy intelligence assessment that raised the prospect of Iraq tumbling into civil war. "I used an unfortunate word, 'guess,'" Bush said. "I should have used 'estimate.'" (Sep 23 By TERENCE HUNT. WASHINGTON, AP)

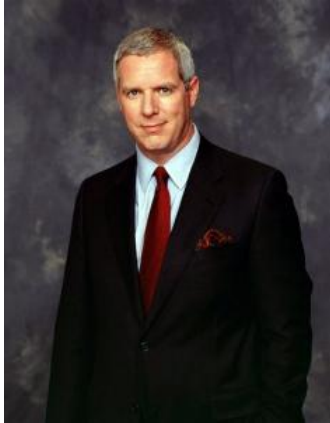
What do you think? Comments from service men and women, and veterans, are especially welcome. Send to contact@militaryproject.org. Name, I.D., withheld on request. Replies confidential.

TERRORIST LEADERS MEET IN N. Y. CITY: DISGUSTING SLUDGE ON LEFT IS BUSH'S IDEA OF IRAQ "LIBERATION"



Bush hosts a meeting with his hand-picked puppet "Prime Minister" of Iraqi Ayad Allawi in New York, September 21. Allawi said on Tuesday he had pressed the president of Pakistan to contribute troops to the U.S.-led multinational force in his country. The president of Pakistan told him to go fuck himself. (Larry Downing/Reuters)

IDIOTS-IN-ACTION: CASE #634



John Miller seen in this Jan. 10, 2002 handout photo in New York. **Miller, now the head of the Los Angeles Police Department's counterterrorism bureau was detained by federal authorities Sept. 23 after trying to board a flight at Los Angeles International Airport with a loaded handgun in his carryon luggage.** (AP Photo/ABC, Inc., Virginia Sherwood, File)

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