

Military Resistance 7K9



[Thanks to SSG N (ret'd) who writes: "Mission Creep: n. A war where the new mission is to secure largess for another creep."]

Americans

From: Dennis Serdel
To: Military Resistance
Sent: November 09, 2009
Subject: Americans
Written by Dennis Serdel, Military Resistance 2009

Dennis Serdel, Vietnam 1967-68 (one tour) Light Infantry, Americal Div. 11th Brigade, purple heart, Veterans For Peace 50 Michigan, Vietnam Veterans Against The War, United Auto Workers GM Retiree, in Perry, Michigan

Americans

Jim Said, "Let's stop at Gettysburg"
I said "OK," I was tired of driving
my old Chevrolet, "We will drive
the rest of the way to the DC Demo

tomorrow," I said.
Then came the Soldiers walking
in a straight line
across an open field that was supposed
to be freedom
before but not now.
A Johnny Reb took a careful aim and
killed a Captain on the other side
but the Union cannons roared
like a train leaving it's tracks
it's been done before and after that
when Americans kill Americans
8000 that day
men on the ground in the grey
and the blue
an Army of One the Best You Can Be
was buried after awhile
some with no names on their stones
when the name tag was gone
or never was there.
Jim said, "My Granddaddy fought
at Shiloh
he left me some sand and a Navy Colt."
He said, "I insured it for \$3000
those old Civil War artifacts
go for a ton of money nowadays."
"Then there was Lincoln
you could sleep in his room
but "It's hard to tell what is real
and what someone is saying,"
I said.
"All we know is that about 8000
Americans killed Americans
on that day," he said.
It was some sort of win for our Country
on that day but
the kindness of a Soldier would walk
around the battlefield late that day
to a Johnny Reb who said, "Just kill
me Mister, I can't stand the pain."
As a shot echoed off the woods
but nobody looked that way,
Americans killing Americans
it happens all the time but now they
call it Friendly Fire, Fratricide
or PTSD.
I said, "Is this the way the Empire
will fall and how to explain it?"
Jim said, "The rot comes from within
Generals and Officers
giving too many orders,

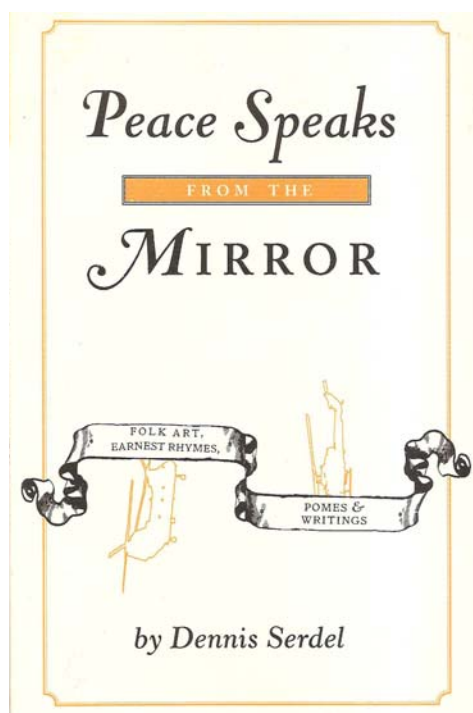
too many firefights, too many tours.”
I agreed with, “Too many incompetent
Leaders, incompetent Reporters
that will write what they are told
to keep their job and not make
anyone mad.”

Jim added, “Yeah, write what
you are told and ask
patriotic questions that Officers
answer with pride, too many
blind Commanders from Obama on down.”
I said, “Slightly above the rank
of enlisted men
is like going into a bee hive to ask
the Queen bee what went down,”
as she orders her Worker bees
to eat up these people
they are good for nothing
except for making
Americans kill Americans.

MORE:

MORE OF DENNIS SERDEL'S WORK IN *PEACE SPEAKS FROM THE MIRROR*:
Get Some While There Still Are Some To Get:

[You know the power of the poems by Dennis Serdel from the front pages of GI
Special: now they're in book form: Ordering information below: T]



DENNIS SERDEL:

Shipped to Vietnam in November 1967.

Returned home in October 1968 to Kalamazoo, Michigan.

Joined Veterans For Peace in January 1990.

Joined Vietnam Veterans Against the War when Iraq and Afghanistan War started.

Books are \$15 Post Paid:

Check or Money Order Payable to Dennis Serdel

Dennis Serdel
339 Oakwood Lane
Perry,
Michigan 48872

**Walt Whitman
Carl Sandburg
Allan Ginsberg
Now: Dennis Serdel**

DO YOU HAVE A FRIEND OR RELATIVE IN THE MILITARY?

Forward Military Resistance 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 wars, inside the armed services and at home. Send email requests to address up top or write to: The Military Resistance, Box 126, 2576 Broadway, New York, N.Y. 10025-5657. Phone: 888.711.2550

IRAQ WAR REPORTS

Two Army Pilots Killed In Salah Ad Din Hard Landing

09 November 2009 Multi National Corps Iraq Public Affairs Office, Camp Victory
RELEASE No. 20091109-01

Contingency Operating Base Speicher, Iraq – Two U.S. Army pilots were killed when a helicopter experienced a hard landing in Salah ad Din Province, Nov. 8.

AFGHANISTAN WAR REPORTS

**WELCOME TO AFBAGHVIETISTAN:
HAVE A NICE DAY**



A U.S. soldier from Stryker Brigade walks during a foot patrol in Arghandab District, Kandahar province November 1, 2009. REUTERS/ Omar Sobhani

TROOP NEWS

**“I’ve Seen More Desperation Here
Than I’ve Seen Anywhere In My
Career”**

**“Everything Gets Dictated To You Day In
And Day Out”**

11.8.09 By Gregg Zoroya, USA TODAY

American troops are spread out in more than 350 locations across Afghanistan, says Army Col. Wayne Shanks, a media spokesman. One in three soldiers say they can't reach a counselor when they need to, according to an Army survey last year.

"You ain't got no release point here," offers Spec. Philip Bodine, 23. "Back at the rear, at the end of the day, you go home.

"Here, everything gets dictated to you day in and day out. Basically it just gets old."

"I've seen more desperation here than I've seen anywhere in my career," says Nedegaard [Air Force Lt. Col. Randall Nedegaard], "desperate to leave (Afghanistan) or fix the situation or not want to get back into that MRAP (Mine Resistant Ambush Protected vehicle) after getting blown up."

THIS IS HOW OBAMA BRINGS THE TROOPS HOME: BRING THEM ALL HOME NOW, ALIVE



Marine Lance Cpl. Cody R. Stanley of Rosanky, Texas returns to Dover Air Force Base, Del. on Oct. 30, 2009. Lance Cpl. Stanley was killed when an improvised explosive device, or IED, went off while the Marines were patrolling in Afghanistan. (AP Photo/Jose Luis Magana)

Officer Politely Says Army Full Of Shit About Burn Pit Dangers: Rejects Report That Discounted Long-Range Health Risks: Individuals Suffer From A Variety Of Respiratory Illnesses “And Are Not Fit For Continued Military Duty” “All Smoke Traveled Downwind To Where Soldiers Were Living. Everyone Who Served At The Base Was Exposed To The Smoke”

At the time he wrote his memo, Curtis said he believed the burn pits were an acute health hazard and might cause long-term problems, but the only time that military officials in Iraq seemed to do anything about the almost constant smoke was when it interfered with air operations.

Nov 6, 2009 By Rick Maze - Staff writer, Army Times [Excerpts]

The Air Force bioenvironmental officer who was among the first to warn about the potential effects of open-air burn pits on U.S. troops deployed in the war zones said Friday that he does not believe the findings of a 2008 Army report that discounted the possibility of long-range health risks from exposure to the smoke, fumes and ash.

Retired Air Force Lt. Col. Darrin Curtis, a biomedical sciences officer who was deployed to Joint Base Balad, Iraq, in 2006 and 2007, told a Senate panel looking into military contracting issues that he believes the Army lacked the necessary data to conclude, as it did in a report from its Center for Health Promotion and Preventive Medicine, that long-term health effects from breaking smoke from burn pits is unlikely.

According to military regulations, open-air burn pits are supposed to be a short-term waste management solution in forward-deployed areas until other systems, such as incinerators, can be brought on line.

In his memo, Curtis wrote: “Burn pits may have been an acceptable practice in the past. However, today’s solid waste contains materials that were not present in the past that

can create hazardous compounds. This interim fix should not be years but more in the order of months.”

Curtis said he wrote the memo with the intent of making the case for immediate funding to pay for more incinerators to dispose of the waste rather than continuing to use open pits. Incinerators have been installed on many bases, including Balad, but many open burn pits remain in use in Iraq and Afghanistan.

At the time he wrote his memo, Curtis said he believed the burn pits were an acute health hazard and might cause long-term problems, but the only time that military officials in Iraq seemed to do anything about the almost constant smoke was when it interfered with air operations.

“They would have the fires dowsed with water from the fire department to reduce the smoke so air operations would not be affected,” he said.

Curtis’ views on potential long-term health problems was supported by Dr. Anthony Szema, chief of the allergy section at the VA Medical Center in Northport, N.Y., who said he is seeing more young patients suffering from breathing problems.

“Until 2004, I mostly saw 80-year-old veterans,” Szema said.

“However, from 2004 to present, I have begun seeing young men and men who were previously healthy athletes capable of passing basic training and performing combat operations. Now, these individuals suffer from a variety of respiratory illnesses, including asthma and difficulty breathing during exertion, and are not fit for continued military duty,” he said.

“This is an alarming trend since we reported double the rate of new-onset adult asthma diagnoses among Iraq-deployed versus stateside troops.”

He said there are several reasons why the military’s air sampling around burn pits may not have discovered the full range of problems: Officials did not measure extremely fine particles, which create the biggest risk; their tests measured only items being burned at the time, which may not have been the most dangerous items routinely tossed into the pits; and air quality tests were conducted at least partly during Iraq’s rainy season, not in the summer.

“This would be like testing for snow in Albany, N.Y., during the summer,” he said. “Testing will not detect any snow, but this does not mean that it does not snow in Albany.”

Another witness before the committee, a former contract representative for contractor KBR, estimated that there were at least 100 burn pits in Iraq and 30 in Afghanistan from 2004 to 2006, with the biggest being a 60-foot-deep, 25-feet-around pit at Camp Speicher, Iraq, that was built upwind of living quarters “so all smoke traveled downwind to where soldiers were living, which in some cases was as close as one-quarter mile.”

The former KBR employee, Rick Lamberth, said efforts were supposed to be made to minimize smoke exposure, and the burning of some hazardous material was prohibited.

But he said he saw some questionable materials get tossed into the pit. "From as close as 10 feet, I saw nuclear, biological and medical waste, including bloody cotton gauze, plastics, tires, petroleum cans, oil and lubricants thrown into the pits," he said.

"The burn pits emitted plumes of smoke and gave off a foul smell," Lamberth said. "The ash that came from the pits looked like burned notebook paper and fell like a black, sooty snowfall. The ash covered buildings and the ground like pollen dust."

L. Russell Keith, a former medic for contract personnel who served two tours in Iraq, said smoke from burn pits was the cause of 30 percent to 40 percent of the patients he saw at clinics.

"Sometimes, the smoke was a yellowish color, but the worst was when the smoke would be a dark greenish color," he said, adding that on those days, he "could expect an increased number of patients, all complaining of burning throats and eyes as well as painful breathing."

"The thick smoke was especially difficult for those working at the military mail office, directly across the road from the pits," said Keith, who was in Balad from March 2006 to July 2007.

"Every spot on the base was touched by smoke from the pit. Everyone who served at the base was exposed to the smoke," Keith said.

FORWARD OBSERVATIONS



“At a time like this, scorching irony, not convincing argument, is needed. Oh had I the ability, and could reach the nation’s ear, I would, pour out a fiery stream of biting ridicule, blasting reproach, withering sarcasm, and stern rebuke.

“For it is not light that is needed, but fire; it is not the gentle shower, but thunder.

“We need the storm, the whirlwind, and the earthquake.”

Frederick Douglass, 1852

**“Hope for change doesn’t cut it when you’re still losing buddies.”
-- J.D. Englehart, Iraq Veterans Against The War**

G-20 Arrest (More Bars in More Places)



From: Mike Hastie
To: Military Resistance
Sent: October 31, 2009
Subject: G-20 Arrest (More Bars in More Places)

G-20 Arrest (More Bars in More Places)

Mike Hastie
Vietnam Veteran
Pittsburgh, Pa.
September 24, 2009

Photo and caption from the I-R-A-Q (I Remember Another Quagmire) portfolio of Mike Hastie, US Army Medic, Vietnam 1970-71. (For more of his outstanding work, contact at: (hastiemike@earthlink.net) T)

Troops Invited:
Comments, arguments, articles, and letters from service men and women, and veterans, are especially welcome. Write to Box 126, 2576 Broadway, New York, N.Y. 10025-5657 or send email to contact@militaryproject.org: Name, I.D., withheld unless you request publication. Same address to unsubscribe. Phone: 888.711.2550

Buried Under A Bullshit Blizzard: The Only Effective Treatment For PTS

[Since the Mad Major did his Fort Hood massacre, the amount of stupid bullshit published about PTS has assumed the proportions of a 500 year landslide, with every ill-informed publicity-seeking fool capable of hitting a keyboard posturing as an expert.

[The article below is reprinted from GI Special 6G17 for whoever may be interested in reality. T]

Confirmed!
**“Only One Treatment Method — Exposure
Therapy — Has Been Proven To Help PTSD
In Studies By Objective Researchers”**

Previous Research Finding Confirmed By Atlanta V.A. Test Program; “81% Showing ‘Clinically Significant Improvement,’ Which Was Still At 81 % Six Months Later”

July 28, 2008 By Kelly Kennedy, Army Times

Three new studies looking at combat stress have found group exposure therapy seems to work, that troops with traumatic brain injuries are more likely to have post-traumatic stress disorder, and that stress debriefings held after traumatic events don't appear to prevent PTSD.

The research comes as the Department of Veterans Affairs works to find the best treatment methods for combat veterans.

It follows a report by Rand Corp. that showed only one treatment method — exposure therapy — has been proven to help PTSD in studies by objective researchers.

The first study looked at a program that had been in place for four years at the Atlanta VA Medical Center. The center's Posttraumatic Stress Disorder Clinical Team began researching group-based exposure treatment.

Past studies have shown group therapy to be ineffective on veterans with PTSD, but authors of this study, published in the April issue of the Journal of Traumatic Stress, said the amount of exposure therapy — 60 hours — in this group may be the key to why it works.

First, nine to 11 people get to know each other and talk about their experiences before they joined the military. Then, they spend several weeks talking about their wartime experiences.

A total of 93 Vietnam veterans, four Gulf War veterans, one Korean War veteran and two Iraq war veterans took part in the study, with 81 percent showing “clinically significant improvement,” which was still at 81 percent six months later.

And the study found something else: VA clinicians indicated to researchers that they do not use exposure therapy out of concern for possible increases in suicide ideation, hospitalizations and dropout rates, but “we found the opposite to be true,” the study's authors said.

Many patients said hearing others' traumatic experiences evoked painful recall of what had happened to them, but “none reported any negative lasting effects, and many indicated that this process helped them put their own experience into better perspective,” the study said.

For example, one-third of the group members said they had frozen under fire. “Learning how common this was helped reduce the shame and guilt that many patients had felt for decades,” researchers said.

MORE: From GI SPECIAL 6E15: 5.24.08:

This Information Could Save Your Sanity, Or Your Life: If Somebody Tries To Drug You Or A Buddy Or Family Member, The Fact The Information Below Appeared In Army Times Can Be A Powerful Weapon Of Self-Defense

Comment: T

Because of the extreme importance of this information to every member of the armed forces, for or against the war, it is being reprinted again from a previous GI Special.

This news report below makes clear that there is now new evidence based research about what works and what doesn't work for troops experiencing PTSD.

The credibility and importance of this research -- initiated by the Department of Veterans Affairs -- is underlined by publication of the findings in Army Times, rather than appearing on some obscure web site or other as somebody or other's opinion.

The V.A. has long practiced drugging troops with all kinds of very dangerous pills as a “treatment” for PTSD. As this article documents, that's useless. And dangerous: overdoses can kill. Benzodiazepines [Valium & Librium are well known examples] are viscerously addictive and potentially deadly drugs handed out to troops like bags of popcorn.

As the article below reports, the only effective treatment for PTSD so far is “exposure therapy; reliving a traumatic experience by writing or talking about it.”

A lot of quacks, including at V.A. facilities as well as privately, are hustling other bullshit phony treatments, ranging from moving your eyeballs around to eating herbs and weeds.

Excuse a personal note, but I've been working professionally with traumatic stress survivors for over 30 years, both military and civilian, both at VA and private facilities, and can testify that the research finding reported in this article is 100% right: the only effective treatment for PTSD so far is "reliving a traumatic experience by writing or talking about it."

But you don't have to believe that.

Here's the report, from Army Times.

Assuming you give a shit about whether troops live or die, send it around, word for word, and be sure to mention it comes from Army Times in case some idiot thinks you sucked it out of your thumb.

Most important, if somebody in command or at the V.A. tries to drug you or a buddy or family member, the fact this information appeared in Army Times can be a powerful weapon of self-defense:

**“Research Has Not Shown Serotonin Re-Uptake Inhibitors, Such As Prozac, Zoloft Or Celexa, To Be Effective In Treating PTSD”
“Exposure Therapy -- Reliving A Traumatic Experience By Writing Or Talking About It -- Is The Only Therapy Proved Effective By Independent Research”**

April 14, 2008 By Kelly Kennedy, Army Times [Excerpts]

“Problems related to getting troops adequate mental health treatment cannot be resolved unless two issues — stigma and access — are addressed,” Todd Bowers, director of government affairs for Iraq and Afghanistan Veterans of America, told the House Veterans' Affairs subcommittee on health on April 1.

Almost 59,000 veterans of the wars in Iraq and Afghanistan have been diagnosed with PTSD by the Department of Veterans Affairs. Army post-deployment health assessments have found that 20 percent of active-duty and 40 percent of reserve-component troops had symptoms of PTSD, and some experts say the real numbers could be much higher.

But because PTSD hasn't been addressed until fairly recently — the first scientific paper about the disorder in veterans of the 1991 Persian Gulf War didn't come out until five years after that war ended — VA and Pentagon officials say much needs to be done to determine good screening techniques and therapies.

"This is the first war where DoD and VA recognized the psychological impact going in," said Army Col. Charles Hoge, chief of psychiatry and neuroscience at the Walter Reed Institute of Research.

Combat vets are not sleeping, experience startle reactions and are hyper-alert.

"All of these things that we label as symptoms are things they need in combat," Hoge said. "No sooner are they transitioned back home than they're right back in rotation."

At the House hearing, Hoge said an Army assessment last summer showed that the numbers of soldiers with PTSD is going up with each deployment.

"There's a direct connection between mental health and multiple deployments," he said, adding that troops also need more time between deployments.

David Matcher, of the Institute of Medicine's Committee on Treatment of Posttraumatic Stress Disorder, said a recent study found that research has not shown serotonin re-uptake inhibitors, such as Prozac, Zoloft or Celexa, to be effective in treating PTSD.

Exposure therapy — reliving a traumatic experience by writing or talking about it — is the only therapy proved effective by independent research, he said.

Other treatments exist, but they have been tested mainly by the same people who developed them.

That's an important point because the Defense Department and VA use several such methods, including group and drug therapy, to treat combat veterans.

MORE:

**“Military Psychiatry And
Psychiatry Everywhere,
Prescribes Drugs With No Actual
Physical
Abnormality/Disorder/Disease To
Make Normal”**

**“What It Does Is Nothing But
Poisoning And Imprisoning Ever
After So As To Make And Keep The
Human Being In The Equation A
Psychiatric-Pharmaceutical ‘Patient’
In Perpetuity”**

**“Every School And College Massacre
And Most Work-Place Shootings As Well,
Have Had Psychiatric Drugs And
Psychiatry Written All Over Them”**

There were a far greater number of psychological survivors of the Holocaust than psychiatry cares to admit, none of them getting or needing the always-pharmacological solutions of psychiatry-gone-pharmacologic; of psychiatry gone Big Pharma, of psychiatry gone big money.

From: Fred Baughman, M.D.

Sent: November 09, 2009

Subject: Ft. Hood and the Place of the Psychiatry-Big Pharma Cartel in the US Military and US Life

Saturday evening, November 7, 2009, Don Lemon of CNN had a psychiatrist on, a Dr. Dale Archer, speaking of the Ft. Hood massacre.

Dr. Archer spoke of post traumatic stress disorder — PTSD, and specifically suggested that it was a chemical imbalance of the brain, which means, a chemical abnormality of the brain--a disease.

Googling Dr. Archer's web site, I learned that he is a 'board-certified Psychiatrist and Distinguished Fellow of the American Psychiatric Association...' that "He specializes in chemical imbalances of the brain, personal responsibility and relationships..." and finally, that "He also is the Corporate Medical Director for the Behavioral Health Group which owns and operates 20 substance abuse treatment centers around the country."

'Chemical imbalance' is the 'big lie' that psychiatry uses as its every 'diagnosis' and excuse/reason/indication to give drugs — 'chemical balancers.'

To be sure they do just that, often prescribing 5, 15 or 20 drugs at a time.

Google the tragic stories of soldiers Chad Oligschlaeger and Robert Nichols, and that of Derek Johnson, 22, Andrew White, 23, Eric Layne, 29, and Nicholas Endicott, all of Charleston, WV, diagnosed “Post Traumatic Stress Disorder” (PTSD), and ‘treated’ with the Paxil, Klonopin, and Seroquel, all dying in their sleep more likely from their ‘treatment’ than from any ‘chemical imbalance’/‘disease’ (Julie Robinson, Charleston Gazette, May 24, 2008).

And these are not exceptions.

Military psychiatry and psychiatry everywhere, prescribes drugs with no actual physical abnormality/disorder/disease to make normal and usually to the exclusion or prescribed and un-prescribed human, humane, common sense psychological healing such as that which surely comes of love, things spiritual, and or the human touch.

But how can such things work when the ‘disease’ model is forced down their throats, loved ones are barred, and it is insisted nothing else will do.

What’s more everything they say and do, be it to a veteran, a citizen, a struggling pregnant mother or a school child, is to drive home the ‘disease’ lie, portraying it to be as severe and grim as possible so as to leave not doubt of the necessity of drugs -- only drugs.

PTSD, like depression, like anxiety, like desperation is no doubt a grim and terrible combination of feelings in normal, adaptable, human beings who have experienced grim, horrible things.

But are these exposures as horrible and insurmountable as psychiatry insists.

There were a far greater number of psychological survivors of the Holocaust than psychiatry cares to admit, none of them getting or needing the always-pharmacological solutions of psychiatry-gone-pharmacologic; of psychiatry gone Big Pharma, of psychiatry gone big money.

While the short term memory loss Stan White speaks of in PTSD can surely be due to psychological factors that are overwhelming, psychiatry invariably forces us to ask to what extent such short-term memory loss is due to the drugs PTSD ‘patients’ are virtually always on from the very first contact forward--that which insists it ‘diagnoses’ and ‘treats’ actual diseases when it never does--when what it does is nothing but poisoning and imprisoning ever after so as to make and keep the human being in the equation a psychiatric-pharmaceutical ‘patient’ in perpetuity.

They have no intention of discharging that ‘patient’—ever.

My good friend Patrick Groff was on the front lines in WW II and suggests the psychological outcomes were nowhere near as bad as we see and hear today.

Fully qualified to comment, he writes: “As a veteran from WW II, I am at a loss to understand why so many of today’s military commit so many suicides.

The only thing I can imagine in that regard is the seemingly lack of purpose these young men and women face at present. As I can recall, I often was highly scared, but never to

the point I felt like killing myself. How do modern psychiatrists explain this modern phenomenon?"

Suicides, homicides, Ft. Hood!

Who can claim that one war is any more horrible, evil or effecting than another?

Think, Vietnam! Think My Lai! Think Nazi death camps!

What jumps out as different about these wars are veterans and soldiers saturated with psychiatric drugs, and kept on the front lines or sent back to the front lines time after time, as if these drugs sharpen their reflexes, reactions and assessments making them a better sniper, a better pilot of a supersonic fighter, a better leader of men, more likely to survive, more likely to see that their men survive.

Show me that study, that psychiatric literature.

And how do 8, 10 or 13 such drugs at a time sharpen their reflexes, their decision-making--make them better soldiers?

Every school and college massacre and most work-place shootings as well, have had psychiatric drugs and psychiatry written all over them and still we believe them and we dutifully accept their 'disease' 'chemical imbalance' diagnoses and their 'pills' where no real diseases exist, ever have or ever will.

And when the facts can finally be gotten out--yes there were psychiatric drugs, they admit, but they were all 'under treated, is the new explanation.

I have yet to see a word about Major Hasan, perpetrator of the latest 'Columbine' and whether or not he was 'medicated,' 'self-medicating,' or clean and sober and on a warped, tragic religious mission.

Fred Baughman, MD

MORE:

At Walter Reed, "Patients Diagnosed With PTSD And Other War-Related Emotional Problems Are Far Too Likely To Be Treated With Sleeping Aids And Mood-Altering Medications"

[“Sleeping aids” and “mood-altering medications” are happy talk for what are in fact drugs, and most of the drugs prescribed for PTSD have side effects that include suicidal and homicidal ideation, as described in the article above. T]

[Thanks to Alan Stolzer, Military Resistance, who sent this in.]

November 7, 2009 By Anne Hull and Dana Priest, Washington Post [Excerpts]

More than two years after the nation's political and military leaders pledged to improve mental-health care, their promises have fallen short at military hospitals around the country, according to mental-health professionals, Army officials, and wounded soldiers and their families.

Those hospitals include Walter Reed, where the man accused of the Fort Hood shootings, Nidal M. Hasan, spent four years as a psychiatric intern, resident and fellow.

Since the shooting, officials have been looking for warning signs in Hasan's career that could have tipped them off to his potential to carry out the attack.

Some of his Walter Reed colleagues said patients complained that Hasan seemed uncomfortable talking about soldiers' emotional needs and was himself a loner.

A former Walter Reed social worker, Joe Wilson, said problems in the mental-health department were usually not discussed openly.

"Of course you miss the red flags, you can't talk openly about mental health," Wilson said. "You complain about it to each other, but not to anyone else."

The opinion was shared by another mental-health worker who asked not to be named.

Switching a soldier who is unhappy with his psychiatrist to another doctor can backfire and delay the medical board process that determines whether the soldier remains in the service.

"It's a complete disincentive to complain" about any particular health-care provider, Wilson said.

At Walter Reed, some soldiers and health-care professionals complain that there are not enough mental-health providers, and senior Army officials have acknowledged that finding enough people to work with the military is a persistent problem.

They say patients diagnosed with PTSD and other war-related emotional problems are far too likely to be treated with sleeping aids [translation: drugs] and mood-altering medications [translation: drugs].

Many still go without regular one-on-one therapy or meaningful group sessions.

The wife of an amputee soldier recovering at Walter Reed with traumatic brain injury and PTSD said that mental-health services are so uncoordinated and ineffective that the couple decided to pay for private psychotherapy sessions with a civilian provider at \$130 an hour.

The couple sought private treatment elsewhere after spending a few minutes with a Walter Reed psychiatrist, who then referred the soldier to a social worker for treatment.

“It was a joke,” said the wife, who asked not be identified because her husband, a sergeant, is still recovering at Walter Reed. “She was a lovely person, but we have a serious problem here and she just didn’t get it . . . She essentially directed me to a Web site.”

MORE:

Attention All You “Helping” Types: Drop The D From PTSD! “It’s Normal To Be Stressed Out By Trauma, One Combat Veteran Explained, So Why Label It A Disorder?”

November 5, 2009 By Kate Wiltrout, The Virginian-Pilot [Excerpts]

After more than eight years of war, most Americans know that PTSD stands for post-traumatic stress disorder.

Now, say military and medical experts, as well as warriors whose minds were scarred by combat, it’s time to learn some new acronyms.

The second day of a two-day conference on building resilient warriors wrapped up Wednesday in Norfolk with a suggestion that the “D” be dropped from PTSD.

It’s normal to be stressed out by trauma, one combat veteran explained, so why label it a disorder?

His suggestion was endorsed by one of the highest-ranking men in the military - Adm. Mike Mullen, chairman of the Joint Chiefs of Staff.

Addressing the conference by speakerphone, Mullen told the 400 attendees that he now uses the term “combat stress” instead of PTSD.

He changed his vocabulary, he said, after a service member told him the word “disorder” creates a stigma for sufferers - even as the military is encouraging troubled troops to ask for help.

MORE:

In Conclusion, After Fort Hood:

Be Sure You Have Necessary And Appropriate Accessories For Your Visit To The Military Psychiatrist



A US soldier in Tikrit, Iraq, answers a US Army psychiatrist's questions. AFP/File/Daniel Mihailescu)

OCCUPATION PALESTINE

**“It Is Impossible To Forgive
What Is Actually Happening”
“Not The Scandalous American
Treatment Of The Goldstone
Report”**

“Not The Mendacious Talk About The ‘Restraint’ Of The Settlement Activities”

“Since Obama Pretends To Be The Opposite Of Bush, This Is Double Treachery”



[Thanks to Mark Shapiro, Military Resistance, who sent this in.]

11.7.09 Uri Avnery, Gush Shalom [Israel] [Excerpts]

MAHMOUD ABBAS is fed up. The day before yesterday he withdrew his candidacy for the coming presidential election in the Palestinian Authority.

I understand him.

He feels betrayed. And the traitor is Barack Obama.

A YEAR ago, when Obama was elected, he aroused high hopes in the Muslim world, among the Palestinian people as well as in the Israeli peace camp.

At long last an American president who understood that he had to put an end to the Israeli-Palestinian conflict, not only for the sake of the two peoples, but mainly for the US national interests. This conflict is largely responsible for the tidal waves of anti-American hatred that sweep the Muslim masses from ocean to ocean.

Everybody believed that a new era had begun. Instead of the Clash of Civilizations, the Axis of Evil and all the other idiotic but fateful slogans of the Bush era, a new approach of understanding and reconciliation, mutual respect and practical solutions.

As high as the hopes were then, so deep is the disappointment now.

Nothing of all these has come about.

Worse: the Obama administration has shown by its actions and omissions that it is not really different from the administration of George W. Bush.

FROM THE first moment it was clear that the decisive test would come in the battle of the settlements.

It may seem that this is a marginal matter. If peace is to be achieved within two years, as Obama's people assure us, why worry about another few houses in the settlements that will be dismantled anyway? So there will be a few thousand settlers more to resettle. Big deal.

But the freezing of the settlements has an importance far beyond its practical effect.

To return to the metaphor of the Palestinian lawyer: "We are negotiating the division of a pizza, and in the meantime, Israel is eating the pizza."

The American insistence on freezing the settlements in the entire West Bank and East Jerusalem was the flag of Obama's new policy.

As in a Western movie, Obama drew a line in the sand and declared: up to here and no further!

A real cowboy cannot withdraw from such a line without being seen as yellow.

That is precisely what has now happened.

Obama has erased the line he himself drew in the sand. He has given up the clear demand for a total freeze.

Binyamin Netanyahu and his people announced proudly - and loudly - that a compromise had been reached, not, God forbid, with the Palestinians (who are they?) but with the Americans.

They have allowed Netanyahu to build here and build there, for the sake of "Normal Life", "Natural Increase", "Completing Unfinished Projects" and other transparent pretexts of this kind.

There will not be, of course, any restrictions in Jerusalem, the Undivided Eternal Capital of Israel. In short, the settlement activity will continue in full swing.

To add insult to injury, Hillary Clinton troubled herself to come to Jerusalem in person in order to shower Netanyahu with unctuous flattery. There is no precedent to the sacrifices he is making for peace, she fawned.

That was too much even for Abbas, whose patience and self-restraint are legendary. He has drawn the consequences.

“TO UNDERSTAND all is to forgive all,” the French say.

But it is impossible to forgive what is actually happening.

Not the scandalous American treatment of the Goldstone report.

Not the loathsome behavior of Hillary in Jerusalem.

Not the mendacious talk about the “restraint” of the settlement activities.

The more so as all this goes on with total disregard of the Palestinians, as if they were merely extras in a musical.

Not only has Obama given up his claim to a complete change in US policy, but he is actually continuing the policy of Bush.

And since Obama pretends to be the opposite of Bush, this is double treachery.

Abbas reacted with the only weapon he has at his command: the announcement that he will leave public life.

THE AMERICAN policy in the “Wider Middle East” can be compared to a recipe in a cookbook: “Take five eggs, mix with flour and sugar...

In real life: Take a local notable, give him the paraphernalia of government, conduct “free elections”, train his security forces, turn him into a subcontractor.

This is not an original recipe.

Many colonial and occupation regimes have used it in the past.

What is so special about its use by the Americans is the “democratic” props for the play. Even if a cynical world does not believe a word of it, there is the audience back home to think about.

That is how it was done in the past in Vietnam. How Hamid Karzai was chosen in Afghanistan and Nouri Maliki in Iraq. How Fouad Siniora has been kept in Lebanon. How Muhammad Dahlan was to be installed in the Gaza Strip (but was at the decisive moment forestalled by Hamas.)

In most of the Arab countries, there is no need for this recipe, since the established regimes already satisfy the requirements.

Abbas was supposed to fill this role.

He bears the title of President, he was elected fairly, an American general is training his security forces. True, in the following parliamentary elections his party was soundly beaten, but the Americans just ignored the results and the Israelis imprisoned the undesirable Parliamentarians. The show must go on.

BUT ABBAS is not satisfied with being the egg in the American recipe.

Abbas does not want to become a Palestinian Marshal Petain. He does not want to head a local Vichy regime. He knows that he is on a slippery slope and has decided to stop before it is too late.

I think, therefore, that his intention to leave the stage is serious. I believe his assertion that it is not just a bargaining ploy. He may change his decision, but only if he is convinced that the rules of the game have changed.

OBAMA WAS completely surprised.

That has never happened before: an American client, totally dependent on Washington, suddenly rebels and poses conditions.

That is exactly what Abbas has done now, when he recognized that Obama is unwilling to fulfill the most basic condition: to freeze the settlements.

From the American point of view, there is no replacement.

There are certainly some capable people in the Palestinian leadership, as well as corrupt ones and collaborators. But there is no one who is capable of rallying around him all the West Bank population.

The first name that comes up is always Marwan Barghouti, but he is in prison and the Israeli government has already announced that he will not be released even if elected. Also, it is not clear whether he is willing to play that role in the present conditions.

Without Abbas, the entire American recipe comes apart.

Netanyahu, too, was utterly surprised.

He wants phony negotiations, devoid of substance, as a camouflage for the deepening of the occupation and enlarging of the settlements.

A “Peace process” as a substitute for peace.

Without a recognized Palestinian leader, with whom can he “negotiate”?

In Jerusalem, there is still hope that Abbas’ announcement is merely a ploy, that it would be enough to throw him some crumbs in order to change his mind. It seems that they do not really know the man. His self-respect will not allow him to go back, unless Obama awards him a serious political achievement.

From Abbas’ point of view, the announcement of his retirement is the doomsday weapon.

DANGER: POLITICIANS AT WORK



**“White Power In Black Face”
“Hundreds Of African-Americans
Marched On The White House
Saturday”
“We Demand That Obama Withdraw All
The Troops From Afghanistan Right
Now”**

[Thanks to Mark Shapiro, Military Resistance, who sent this in.]

November 8, 2009 AFP

Decrying Barack Obama as “white power in black face,” hundreds of African-Americans marched on the White House Saturday to protest policies of the first black US president, and demand that he bring US troops home.

More than 200 people gathered for the first public demonstration by African Americans against the Obama administration since his historic inauguration in January, and slammed the president for continuing what they described as Washington’s “imperialist” agenda around the world.

“We recognize that Barack Hussein Obama is white power in black face,” civil rights activist Omali Yeshitela, chairman of the Black is Back coalition which arranged the protest, called into a megaphone as the group marched outside the mansion’s gates.

“He is a tool of our imperialist enemies and we demand our freedom. And we demand that Obama withdraw all the troops from Afghanistan right now.”

Protesters also called for Obama to order troops out of Iraq and to scrap Africom, the controversial year-old United States Africa Command, and demanded “hands off” Venezuela and ends to the Cuba embargo and the Zimbabwe blockade.

Several demonstrators held up placards bearing messages such as “US out of Afghanistan” and “Stop US war against Iraq.”

CLASS WAR REPORTS



Tens Of Thousands Of Irish Workers Protest In Streets: “Go To The Supermarket Every Week And Tell Us Where Lower Prices Are”

Nov 6, 2009 By Antonella Ciancio, Thomson Reuters

Police estimated that around 20,000 protesters took to the streets in Dublin, the largest of the marches, where workers held banners criticising the government's proposed cuts and its action to cleanse the banking sector.

ICTU President Jack O'Connor told protesters that the number gathered in Dublin was more like 70,000 and that 80,000 people had protested across the rest of the country.

“The government has been extremely unfair with the ordinary workers,” John Kidd, chairman of the Dublin Fire Brigade, said while marching down Dublin's main thoroughfare O'Connell Street.

“We have never benefited from the ‘Celtic Tiger’. We are asking the government for a fairer society,” said Kidd, one of 100,000 emergency workers who will vote on industrial action next week.

IMPACT, Ireland's largest public sector union, wants the country's 310,000 public servants to join a 24-hour strike on November 24.

The Organisation for Economic Co-Operation and Development (OECD) urged Dublin to cut expenditure boldly this week, saying spending in politically sensitive areas such as education and health should reflect deflationary realities.

“Tell the OECD to go to the supermarket every week and tell us where lower prices are,” said Phyllis Plant, a 60-year-old cleaner.

NEED SOME TRUTH? CHECK OUT TRAVELING SOLDIER

Telling the truth - about the occupations or the criminals running the government in Washington - is the first reason for Traveling Soldier. But we want to do more than tell the truth; we want to report on the resistance to Imperial wars 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 Veterans Against the War to end the occupations and bring all troops home now! (www.ivaw.org/)

**POLITICIANS CAN'T BE COUNTED ON TO HALT
THE BLOODSHED
THE TROOPS HAVE THE POWER TO STOP THE
WARS**



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