

## **Military Resistance 8F1**



### **Drugged To Death:**

**“These Are Healthy Young People Who Are Dying In Their Sleep Because Some Physician Prescribed A Combination Of Medications That Killed Them”**

**“The Spate Of Deaths Fuels Criticism That The Military Medical Community Puts Too Much Emphasis On Pharmaceutical Products”**

**“Many Of Those Drugs Have A Similar Fundamental Effect On The Body, Slowing The Central Nervous System And Increasing The Risk That A Patient’s Heart Or Breathing Will Stop During Sleep”**

**“The Safest And Most Effective Treatment Includes Various Forms Of Talk Therapy In Which Troops Forge Personal Relationships With Counselors”**

5.31.10 By Andrew Tilghman and Brendan McGarry, Army Times [Excerpts]

At least 32 soldiers and Marines assigned to their services’ most-supervised medical units for wounded troops have died of accidental prescription drug overdoses since 2007.

The 30 soldiers and two Marines overdosed while under the care of special Army Warrior Transition Units or the Marine Corps Wounded Warrior Regiment, created three years ago to tightly focus care and attention on troops suffering from severe physical and psychiatric problems as a result of combat.

Most of the troops had been prescribed “drug cocktails,” combinations of drugs including pain killers, sleeping pills, antidepressants and anti-anxiety drugs, interviews and records show. In all cases, suicide was ruled out.

**It is unclear how many troops across the entire military have died from drug toxicity.**

**Pentagon officials have not provided information about accidental drug deaths across the military despite a Military Times Freedom of Information Act request submitted nearly two months ago.**

Data on military deaths is compiled by the Armed Forces Institute of Pathology and maintained at the Pentagon’s Defense Manpower Data Center.

The Army deaths have shocked that service's medical community and prompted an internal review. But despite a "safety standdown" in January 2009, the number of fatalities continued to rise last year — to 15 in 2009, up from 11 the year before.

Meanwhile, the total number of soldiers assigned to the 29 WTUs nationwide dropped from about 12,000 to about 9,000.

The internal review found the biggest risk factor may be putting a soldier on numerous drugs simultaneously, a practice known as polypharmacy.

According to an Army analysis from June 2009, about 9 percent of WTU patients — 800 soldiers — were prescribed combinations of drugs including pain, psychiatric and sleep medications.

As a result, the Army medical community began questioning the practice of polypharmacy and has overhauled the way it prescribes, distributes and monitors the riskiest drugs.

An Army Medical Command memo dated May 14, 2009, highlighted the risks: "Certain prescription medications, alone or in combination, may cause adverse side effects that may prove lethal. These high-risk medications include, but are not limited to, narcotic analgesics, anxiolytics, and anti-seizure and insomnia medications."

**The military has a computer system designed to warn doctors when individuals receive drugs that may cause adverse reactions.**

**But doctors are able to easily override the warning notification and allow patients to receive high-risk combinations, military records show.**

The details underlying each death are unique.

Army Sgt. Gerald Cassidy died in 2007 after writing in his journal that he was unsure how much methadone he had taken, his family said.

Army Warrant Officer 1 Judson Mount died in April 2009 after trying a new, higher-dosage patch that releases the narcotic painkiller fentanyl, his mother said.

And Spc. Franklin Barnett died in June 2009 shortly after spending a weekend with his wife and children and appearing to be in good health, his wife said.

Unlike casualties in Iraq or Afghanistan, these fatalities can be avoided through better management of the health care units, said Col. (Dr.) Steven Swann, command surgeon for the Warrior Transition Command.

During the past decade — for nearly all of which the U.S. has been at war on two fronts — the military community has seen a dramatic rise in the use of the types of medications linked to the WTU deaths.

**For example, the military health care system's prescription orders for painkillers nearly tripled, while those for anti-seizure medications rose 68 percent, according to a recent Military Times analysis of Defense Logistics Agency data.**

**Many of those drugs have a similar fundamental effect on the body, slowing the central nervous system and increasing the risk that a patient's heart or breathing will stop during sleep.**

**The spate of deaths fuels criticism that the military medical community — and the American medical community at large — puts too much emphasis on pharmaceutical products rather than other forms of treatment.**

“There is a direct correlation in the increase of use of these medications and these sudden deaths,” said Dr. Bart Billings, a retired Army colonel and psychologist in San Diego who treats troubled troops and has testified before Congress about the risks linked to prescription drugs.

**“These are healthy young people who are dying in their sleep because some physician prescribed a combination of medications that killed them.”**

Many such drugs are tested and approved for use individually, but research on combinations is limited.

“These medications were not tested in combination with other medications,” Billings said. “They were tested only on what they would do on their own.”

**Billings believes the safest and most effective treatment includes various forms of talk therapy in which troops forge personal relationships with counselors while trying to identify, understand and deal with their mental health problems.**

**[This is well known: see the articles following, beginning with “CONFIRMED”. T]**

An accidental drug overdose initially can be confused with suicide.

**After Sgt. Robert Nichols died at the WTU at Fort Sam Houston, Texas, in 2008, the Army Criminal Investigation Command grilled his wife for possible evidence that his death was self-inflicted.**

**“The CID guys were like, ‘Well, you know, was there anything that was on his plate that was too much to handle? Was there anything bothering him?’ ” said Susan Nichols, who now lives in Dallas.**

**“You didn’t have to be Albert Einstein to see where they were going with that. I thought, are you really trying to suggest this? This man? No.” Nichols, who deployed to Iraq in 2007 to a base south of Baghdad, sustained a traumatic brain injury after a mortar round landed near him, his wife said.**

An investigation later concluded that Nichols’ death was an accident.

Medical records show he was taking a cocktail of 11 drugs, including Percocet, Valium, the antidepressant Celexa, the antipsychotic Seroquel, and Depakote, an anti-seizure drug used to treat major depression and bipolar disorder, his wife said.

Some psychiatric medications in the accidental overdoses come with warnings about increased risks for suicidal thoughts and actions.

**MORE:**

**“The Enemy Could Not Kill Him,  
But Our Own Government Did”  
“They Still Haven’t Owned Up To It  
And Said, ‘You Know What? We  
Killed Your Husband,’” Said Susan  
Nichols, Widow Of Sgt. Robert  
Nichols”  
[Drugged To Death: Part 2]**

5.31.10 By Andrew Tilghman, Army Times [Excerpts]

Army Warrant Officer 1 Judson Mount was taking several medications simultaneously while recovering from severe shrapnel wounds at the Warrior Transition Unit in San Antonio.

The painkiller Tramadol and the antidepressant Zoloft were a high-risk combination, medical experts say, and it required close supervision.

But Mount was dead of an accidental drug overdose in the WTU barracks for two days before anyone found the married father of two.

The former enlisted tank commander who deployed to Iraq twice was found, forgotten and alone, on April 7, 2009, in his room next to several jars of pills. The cause of death was an accidental overdose of Tramadol. The “contributory effects” of the antidepressant “could not be excluded,” according to the military autopsy report.

Whatever killed her son, Joyce Mount, a 63-year-old retired bank worker in Tennessee, does not blame the Army.

“It was a person — a pharmacist or a doctor or something — not the Army,” said Mount, whose father was a retired Air Force senior master sergeant. “The Army’s been good to me. They’ve been good to all of us. They were here at the funeral. But I feel like somewhere in the system, somebody has failed or messed up.”

WO1 Mount was one of at least 32 service members to die from an accidental overdose of prescription drugs while under the care of what are supposed to be the military's most highly supervised medical units during the past three years.

Army Sgt. Franklin Barnett, a 29-year-old combat engineer and father of three, also died while under the care of the WTU in San Antonio. He was wounded by a car bomb in Iraq and received a Purple Heart in October 2008.

His widow blamed his June 2009 death on communications failures by Army doctors.

"If the doctors would talk to each other, then they wouldn't have a problem," Diane Barnett said.

"He was on four different kinds of medication that pretty much clashed with each other."

Franklin Barnett was taking "antidepressants and sleeping pills," his wife said — adding that he may not have taken his medications as prescribed.

"He was forgetful — he probably forgot that he took his med and he took some more."

Accidental drug overdoses in the Army WTUs began to draw public attention nearly three years ago after the death of Sgt. Gerald Cassidy, found dead in his barracks at Fort Knox, Ky., in September 2007.

He died after taking a mix of drugs that included several strong narcotic painkillers and Celexa, an antidepressant.

His military autopsy concluded that the drugs' "combined synergistic" effects caused cardiac arrest.

Sen. Evan Bayh, D-Ind., heard about the death and, as a member of the Senate Armed Services Committee, demanded an Army investigation.

**"The enemy could not kill him, but our own government did," Bayh said in November 2007 during a committee hearing.**

Then-Army Secretary Pete Geren called the circumstances of Cassidy's death "unacceptable," and Army leaders promised to investigate.

Some family members remain angry at the Army.

**"They still haven't owned up to it and said, 'You know what? We killed your husband,' "** said Susan Nichols, widow of Sgt. Robert Nichols, 32, who died at the WTU in San Antonio.

**Diagnosed with post-traumatic stress disorder and suffering primarily from psychiatric problems, Robert Nichols was taking a mix of 11 drugs that left him groggy and confused during the last few weeks of his life.**

They included Percocet, Valium, Celexa, the antipsychotic Seroquel, and Depakote, an anti-seizure drug used to treat major depression and bipolar disorder, Susan said.

“I blame those who prescribed the pills and were watching over him,” she said. “They should have been able to see the signs that something was wrong.” □

MORE:

# **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.

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## **ACTION REPORTS**

# **“What Was Noticeably Different Was - This Time - ALL Accepted Traveling Soldier” [Outreach To New York Army National Guard]**

From: Alan S; Military Resistance Organization  
To: Military Resistance Newsletter  
Sent: May 26, 2010  
Subject: New York National Guard RR Station Outreach - a bit different

Again Tuesday evening 5/25 found Army National Guard Soldiers patrolling one of the main RR Stations here.

What was noticeably different was - this time - ALL accepted Traveling Soldier newsletters (last 2 issues) instead of flatly refusing them. A couple claimed difficulty in terms of where to put the lit but folding them in four made their pockets accommodate the publications easily. **[See below for more about Traveling Soldier.]**

Two DVDs of "Sir! No Sir!" were handed out plus one of "Querido Camilo." Naturally, cards were distributed as well.

One young private wanted to see my vet ID because he wanted to be sure I was truthfully reporting naval service. He was doing his job.

Another knew of us from previous outreaches and, as many do, mentioned the snacks.

It's good to be remembered, isn't it?

**MORE:**

## **ACTION REPORTS WANTED: FROM YOU!**

An effective way to encourage others to support members of the armed forces organizing to resist the Imperial war is to report what you do.

If you've carried out organized contact with troops on active duty, at base gates, airports, or anywhere else, send a report in to Military Resistance for the Action Reports section.

Same for contact with National Guard and/or Reserve components.

They don't have to be long. Just clear, and direct action reports about what work was done and how.

If there were favorable responses, say so.

If there were unfavorable responses or problems, don't leave them out. Reporting what went wrong and/or got screwed up is especially important, so that others may learn from you what to expect, and how to avoid similar problems if possible.

If you are not planning or engaging in outreach to the troops, you have nothing to report.

### **NOTE WELL:**

Do not make public any information that could compromise the work.

Identifying information – locations, personnel – will be omitted from the reports.

Whether you are serving in the armed forces or not, do not identify members of the armed forces organizing to stop the wars.

If accidentally included, that information will not be published.

The sole exception: occasions when a member of the armed services explicitly directs identifying information be published in reporting on the action.

**MORE:**

## **FYI:**

# Traveling Soldier Is Published By The Military Resistance Organization:

**CHECK OUT TRAVELING SOLDIER**

<http://www.traveling-soldier.org/TS29.pdf>

**THIS ISSUE FEATURING:**

**THE UNFAIR TREATMENT OF SINGLE SOLDIERS:**

**“The Army Treats All Single Soldiers As If They Were Children”**

**By: SGT. I.T.A.**

**ARMY LIFE: STUPID IN COMMAND**

**By Soldier R, Traveling Soldier Correspondent**

**Reporting from Germany**

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/>

**MORE:**

## **MILITARY RESISTANCE TEN POINTS**

### **Mission Statement:**

1. The mission of Military Resistance is to bring together in one organization members of the armed forces and civilians in order to give aid and comfort to members of the armed forces who are organizing to end the wars of empire in Afghanistan and Iraq. The long term objective is to assist in eliminating all wars of empire by eliminating all empires.

**2. Military Resistance does not advocate individual disobedience to orders or desertion from the armed forces. The most effective resistance is organized by members of the armed forces working together.**

**However, Military Resistance respects and will assist in the defense of troops who see individual desertion or refusal of orders as the only course of action open to them for reasons of conscience.**

**3. Military Resistance stands for the immediate, unconditional withdrawal of all U.S. and other occupation troops from Iraq and Afghanistan.**

**Occupied nations have the right to independence and the right to resist Imperial invasion and occupation by force of arms.**

**4. Efforts to increase democratic rights in every society, organization, movement, and within the armed forces itself will receive encouragement and support.**

**Members of the armed forces, whether those of the United States or any other nation, have the right and duty to act against dictatorships commanding their services, and to assist civilian movements against dictatorship.**

**This applies whether a political dictatorship is imposed by force of arms or a political dictatorship is imposed by those in command of the resources of society using their wealth to purchase the political leadership.**

**5. Military Resistance uses organizational democracy.**

**This means control of the organization by the membership, through elected delegates to any coordinating bodies that may be formed, whether at local, regional, or national levels.**

**Any member may run for any job in the organization. All persons elected are subject to immediate recall, by majority vote of the membership.**

**Coordinating bodies report their actions, decisions and votes to the membership who elected them, and may be overruled by a majority of the membership.**

**6. It is not necessary for Military Resistance to be in political agreement with other organizations in order to work together towards specific common objectives.**

**It is productive for organizations working together on common projects to discuss differences about the best way forward for the movement.**

**Debate is necessary to arrive at the best course of action.**

## Membership Requirements:

7. It is a condition of membership that each member prioritize and participate in organized action to reach out to active duty armed forces, Reserve and/or National Guard units.

8. Military Resistance or individual members may choose to support candidates for elective office who are for immediate withdrawal from Iraq and Afghanistan, but do not support a candidate opposed to immediate, unconditional withdrawal.

9. Members may not be active duty or drilling reserve commissioned officers, or employed in any capacity by any police or intelligence agency, local, state, or national.

10. I understand and am in agreement with the above statement. I pledge to defend my brothers and sisters, and the democratic rights of the citizens of the United States, against all enemies, foreign and domestic.

----- (Signed)

(Date)

----- (Application taken by)

Military Resistance: [Contact@militaryproject.org](mailto:Contact@militaryproject.org)  
Box 126, 2576 Broadway, New York, N.Y. 10025-5657  
888-711-2550

### MORE

## Pissing And Moaning Don't Cut It: Join Military Resistance: MILITARY RESISTANCE MEMBERSHIP APPLICATION

Name (please print): \_\_\_\_\_

Armed Forces? (Branch) \_\_\_\_\_

Veteran? Years: \_\_\_\_\_

Union: \_\_\_\_\_

Occupation: \_\_\_\_\_

Mailing address: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Phone (Landline): \_\_\_\_\_

Phone (Cell): \_\_\_\_\_

\$ dues paid \_\_\_\_\_  
(See next: Calendar year basis.)

Armed Forces Members	@	Dues waived
Civilians	@	\$25
Students/Unemployed	@	\$10
Civilian/Military Prisoners	@	Dues Waived

Comments:

NOTE: Civilian applicants will be interviewed, in person if possible, or by phone.

**Military Resistance: [Contact@militaryproject.org](mailto:Contact@militaryproject.org)  
Box 126, 2576 Broadway, New York, N.Y. 10025-5657  
888-711-2550**

## **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 Afghanistan, 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**

## **AFGHANISTAN WAR REPORTS**

# **Foreign "Servicemember" Killed Somewhere Or Other In Afghanistan:**



# Nationality Not Announced

June 1 AP

A foreign servicemember died following an IED strike in southern Afghanistan today.

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## **“It’s Near-Impossible To Find Anyone In Afghanistan Who Doesn’t Believe The US Are Funding The Taliban”**

**[The point here isn’t that these conspiracy fantasies are true. The point is that the U.S. Imperial government is so widely hated in Afghanistan that even locals who collaborate with the occupation assume Washington to be practicing complete evil. No wonder the armed resistance to the U.S. occupation has immense popular support, when even allied locals despise the Imperial politicians in DC. As if more evidence were needed that the U.S. war on Afghanistan is utterly hopeless. T]**

25 May 2010 Daniella Peled, Guardian News and Media Limited [Excerpts]

It’s near-impossible to find anyone in Afghanistan who doesn’t believe the US are funding the Taliban: and it’s the highly educated Afghan professionals, those employed by ISAF, USAID, international media organisations – and even advising US diplomats – who seem the most convinced.

One Afghan friend, who speaks flawless English and likes to quote Charles Dickens, Bertolt Brecht and Anton Chekhov, says the reason is clear. "The US has an interest in prolonging the conflict so as to stay in Afghanistan for the long term."

The continuing violence between coalition forces and the Taliban is simple proof in itself.

Commanding this country would give the US power over India, Russia, Pakistan and China, not to mention all the central Asian states.

"The US uses Israel to threaten the Arab states, and they want to make Afghanistan into the same thing," he says. "Whoever controls Asia in the future, controls the world."

"Even a child of five knows this," one Kabuli radio journalist tells me, holding his hand a couple of feet from the ground in illustration.

And as for the British, apparently they want to stay in Afghanistan even more than the Americans. The reason they want to talk to the Taliban is to bring them into the government, thus consolidating UK influence.

The proof is manifold, they say (although it does tend to include the phrase guaranteed to dismay every journalist: "everybody knows that ...").

Among the things everybody knows are that Afghan national army troops report taking over Taliban bases to find identical rations and weapons to their own US-supplied equipment.

The US funds the madrasas both in Afghanistan and in Pakistan, which produce the young Talibs.

US army helicopters regularly deliver supplies behind Taliban lines.

The aid organisations are nothing more than intelligence-collecting agencies, going into regions the army cannot easily reach to obtain facts on the ground. Even the humblest midwife-training project is a spying outfit.

One political scientist, who works as an advisor to US agencies in the north of the country, recounts how people fear the continuing influence of the warlords, illustrating his point with descriptions of violence and corruption that extends into the realms of banking, government and trade.

Afghans hate these warlords, he says, but the US wants them kept in place.

"If they were removed, and competent and clean people brought in, we would bring in revenues of our own. We could have our own economy, and demand foreign investment with transparency. We would have a true army, to protect us and serve Afghanistan."

Afghans have a historical suspicion towards any foreign power involved in their country and maybe with the resilience of a nation which has seen off one occupier after another, they are willing to wait it out, confident the will of the US will break before their own.

**In the meantime, as my literature-loving friend – who works for a number of US agencies – tells me, there is no contradiction in survival.**

**"I like Benjamin Franklin in my pocket," he smiles. So much for hearts and minds.**

[Thanks to Sandy Kelson, Military Resistance Organization, who sent this in.]

**IF YOU DON'T LIKE THE RESISTANCE  
END THE OCCUPATIONS**

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

**THERE IS ABSOLUTELY NO COMPREHENSIBLE  
REASON TO BE IN THIS EXTREMELY HIGH RISK**

**LOCATION AT THIS TIME, EXCEPT THAT THE PACK OF TRAITORS THAT RUN THE GOVERNMENT IN D.C. WANT YOU THERE TO DEFEND THEIR IMPERIAL DREAMS:**

**[That is not a good enough reason.]**



U.S. Army soldiers with Alpha Company, 2nd Battalion, 1st Infantry Regiment of the 5th Stryker Brigade, keep eyes on two Taliban fighters, armed with AK-47 assault rifles, who were seen in motion after one soldier shot at them when they entered the nearby intersection May 8, 2010, in Afghanistan's Kandahar province.



U.S. Marines from 3rd Battalion, 6th Marines during a firefight with Taliban soldiers in Karez-e-Sayyidi, in the outskirts of Marjah district, Helmand province, May 15, 2010. REUTERS/Asmaa Waguih



U.S. marines from the 3rd Battalion, 6th Marines patrol in Marjah district, Helmand province, May 19, 2010. REUTERS/Asmaa Waguih

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## **TROOP NEWS**

# **German President Forced To Resign After Telling The Truth About War On Afghanistan: He Said Germany Soldiers Were There To ‘Protect German Economic Interests’”**

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

May 31, 2010 By JUDY DEMPSEY, The New York Times [Excerpts]

BERLIN — President Horst Köhler of Germany resigned Monday amid a barrage of criticism for remarks he made during a visit to Afghanistan.

It was the first time in four decades that a German president has quit the post, the nation’s highest even though it is largely ceremonial.

Mr. Köhler set off the criticism when he said in an interview with Deutschland Radio, the public broadcasting station, that German soldiers serving in Afghanistan or with other peacekeeping missions were deployed to protect German economic interests.

In the radio interview, which was conducted on May 22, Mr. Köhler, a former director of the International Monetary Fund, emphasized the importance of the nation's economy.

"A country of our size," he said, "with its focus on exports and thus reliance on foreign trade, must be aware that military deployments are necessary in an emergency to protect our interests, for example, when it comes to trade routes, for example, when it comes to preventing regional instabilities that could negatively influence our trade, jobs and incomes."

Mr. Köhler's resignation is certain to lead to a fresh debate over the role of German troops in Afghanistan and in other international missions.

Denis MacShane, a British Labour legislator and German expert, said that Mr. Köhler was only speaking the truth but that German commentators did not want to recognize what he had said.

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## **NOT ANOTHER DAY NOT ANOTHER DOLLAR NOT ANOTHER LIFE**



The casket of Army Staff Sgt. Scott W. Brunkhorst at Arlington National Cemetery April 13, 2010. Brunkhorst, 25, of Fayetteville, N.C.; died March 30 in the Arghandab river valley, Afghanistan, of wounds from an IED. (AP Photo/Kevin Wolf)

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## Honorable Work For A Soldier



Louisiana National Guard Specialists Alvin Dunn and Bryan Jones carry a hose to fill a tiger dam on a beach in Grand Isle, La., June 1, 2010. When completed, the water-inflated dam is expected to protect the island's entire shoreline along the Gulf of Mexico. (AP Photo/Patrick Semansky)

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## 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**

## **The Gulf War Has Come Home to America**



Photograph by Mike Hastie. Taken soon after the U.S. started bombing Iraq on March 19, 2003

From: Mike Hastie  
To: Military Resistance  
Sent: May 31, 2010  
Subject: The Gulf War Has Come Home to America

**The Gulf War Has Come Home to America**

**America is in the Middle East to steal oil,  
and control that part of the world.**

The key word here is, "Control."  
In control.  
In charge.  
No sweat.  
No problem.  
It's a done deal.  
Bank on it.  
Piece of cake.  
It's in the bag.  
Afghanistan is now America's longest war.  
Or, should I say America's longest heist.  
Iraq is in second place.  
Vietnam is in third place with a bronze medal.  
It's a long historical recipe.  
You "Shock and Awe,"  
then rewrite history later.  
It has always worked in the past.  
Piece of cake.  
It's a done deal.  
But now,  
there is another Gulf War going on that the  
American media cannot hide.  
It's impossible.  
The blood is so visible.  
The death can be seen everywhere.  
For once,  
no one is in charge.  
Except Mother Nature.  
Over 40 million gallons of oil is swimming  
in the sea.  
And the oil continues to spill from this volcano.  
There is no end in sight.  
It has become America's personal Gulf War.  
It has become America's own D-Day.  
This was not supposed to happen.  
The oil industry is unsinkable.  
Everyone could see this truth on the Horizon.  
It's a done deal.  
No problem.  
You can put this oil money in the bank.  
You can fill it up.

It is all a lie.  
Just like lying is the most powerful weapon in war.  
It's the greatest con game in the world.  
800 U.S. cruise missiles were launched into Baghdad  
in the first 48 hours of that war.  
The Gulf War.  
Iraq had nothing to do with September 11th.  
The Gulf War has now come full circle.  
The U.S. National Guard has come full circle.



They have finally hit the beaches.  
Our beaches.  
And the oil?  
No problem.  
It's in the bag.  
Everywhere.  
And a lot of Americans will end up in  
an environmental hospital.

Mike Hastie  
U.S. Army Medic  
Vietnam 1970-71  
May 31, 2010

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](mailto:hastiemike@earthlink.net)) T)

## OCCUPATION PALESTINE

### This Is What Solidarity Looks Like



A Jewish man holds a Palestinian flag and wears a Palestinian scarf during a demonstration against the Israeli murder of peace activists on board a ship to Gaza. Downing Street in London May 31, 2010. REUTERS/Luke MacGregor

[To check out what life is like under a murderous military occupation by foreign terrorists, go to: [www.rafahtoday.org](http://www.rafahtoday.org) The occupied nation is Palestine. The foreign terrorists call themselves "Israeli."]

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## DANGER: POLITICIANS AT WORK



### **NEED SOME TRUTH? CHECK OUT TRAVELING SOLDIER**

Traveling Soldier is the publication of the Military Resistance Organization.

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/](http://www.ivaw.org/))

# CLASS WAR REPORTS



**Military Resistance** [www.militaryproject.org](http://www.militaryproject.org)

*This is how Obama brings the troops home,  
BRING THEM ALL HOME NOW, ALIVE.*



*Military Resistance is a near-daily news bulletin for service members  
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**POLITICIANS CAN'T BE COUNTED ON TO HALT  
THE BLOODSHED**

**THE TROOPS HAVE THE POWER TO STOP THE  
WARS**

**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](mailto:contact@militaryproject.org): Name, I.D., withheld unless you request publication. Same address to unsubscribe. Phone: 888.711.2550

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