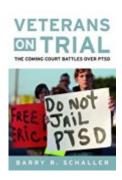
H-Net Reviews in the Humanities & Social Sciences

Barry R. Schaller. *Veterans on Trial: The Coming Court Battles over PTSD.* Washington, D.C.: Potomac Books, 2012. xxiv + 263 pp. \$29.95, cloth, ISBN 978-1-59797-696-1.



Reviewed by Donald MacCuish

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Commissioned by Margaret Sankey (Air University)

Excellent book! Great read! Thoroughly researched! Informative! Yet at the same time, the book is disturbing, especially with regard to chapters 9 and 10 where the author discusses women. More on that later. The foreword to this book. written by Todd Brewster, director of the Center for Oral History at the U.S. Military Academy at West Point, is both interesting and engaging. Mr. Brewster sets the table well for the reader. Implied in the foreword is a nagging question: who is responsible for the psychological wounds suffered by soldiers in combat? This reviewer asked it over and over again. The well-written preface lays out the book quite well. On page xviii the author states that all of the soldiers (case studies) discussed in the book "eventually recovered from their illness, some more than others." But did they really? Perhaps combat-related post-traumatic stress disorder (PTSD) is more like cancer, you can beat it. However, it is always there, in the background, waiting to rear its ugly head once again.

The book is divided into four parts. Schaller begins part 1 with a startling statement: "One-fifth

to one-quarter of the estimated 2 million American troops that have served in Operation Iraqi Freedom (the Iraq War) and Operation Enduring Freedom (the Afghanistan War) are likely to return to civilian life plagued by serious psychological symptoms of post-traumatic stress disorder (PTSD)." This statement is certainly an attentiongetter! His documentation supports the statement, meaning combat-related PTSD is a major societal issue. Later in chapter 1 he references ancient Egyptian, Greek, and Roman writings as well as the Bible. All indicate that combat-related psychological trauma is not a new phenomenon.

In chapter 2 the author discusses the origins of the term "PTSD" and the social and political influences behind its inclusion in the American Psychiatric Association's (APA) Diagnostic and Statistical Manual of Disorders, or DSM. He then traces how the evaluation criteria have changed with each revision of the DSM so that it now includes non-combat-related psychological traumas.

In the second part of the book he discusses the evolution of the term from the Civil War to September 11, 2001. In this section he discusses the various terms to describe psychological trauma. During the Civil War era it was called either "nostalgia" or "soldiers heart" and during WWI it was called "shell shock." During WWII the terms used were "war neurosis," "battle fatigue," and "combat stress." During and after the Korean conflict "stress response syndrome" was used to describe combat stress. This was the term used in DSM-I.

The remainder of part 2 is devoted to discussing the politics of PTSD and the campaign, interestingly led by the Vietnam Veterans Against the War, to have combat trauma recognized by APA and the government as a legitimate psychological disorder. In DSM-III the term "Post-Traumatic Stress Disorder" (PTSD) was included. The author concludes the section with a discussion of the court system's handling of crimes committed by Vietnam veterans suffering from PTSD.

Part 3 is devoted to Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) veterans with PTSD. The first two chapters of this section are, in general, focused on the occurrence of PTSD in these two war zones, and on OIF/OEF veterans and the court system. As noted previously the last two chapters concerning women in combat is very disturbing because the author addresses not only issues of PTSD, but but also Military Sexual Trauma (MST). What makes MST so disturbing is that it is primarily a leadership issue. Most of the assaults were perpetrated by women's superiors, particularly officers. The author does not specifically state it but the nation expects commissioned officers to honorably exercise their fiduciary responsibly to the troops they lead. Violations of such responsibilities are abhorrent.

In part 4 the author first covers the trials veterans' face when they come home. He then mentions what political and military leaders, the psychiatric community, and courts can do to prevent or reduce the problems associated with PTSD. In doing this he proposes solutions. The solutions he recommends make a great deal of sense.

The final question is, are these various institutions willing to take the steps necessary to reduce the incidence of PTSD experienced by our combat veterans? Nobody knows the answer. And that is why this book needs to be read by those civilians responsible for putting our soldiers in harms' way and that means not only the executive branch, but Congress as well.

The principles of this book should be included in all military training and educational institutions of our military. Mental health professionals, including students in psychology and sociology degree programs, should be acquainted with the issues addressed in this book. Judges, prosecutors, and lawyers across the country ought to read this book. In addition, soldiers with PTSD, their family members, and friends will be well served to read this book. The book will help them understand the issues they face as well as the reasons why. Finally, the public in general would receive great benefit by reading this book in order to better understand the societal issues associated with the PTSD. The soldiers suffering from PTSD secure the very freedoms we relish. We owe it to them!

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