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FUNCTIONING OF VETERANS AND THEIR FAMILIES AFTER THE MISSIONS

ABSTRACT

The article presents numerous problems of veterans and their families which they face after their participation in peacekeeping missions. Despite a significant improvement in their life conditions, medical support, psychological and social rehabilitation they continue to have problems which cause unnecessary tension and conflicts.

Keywords:

trauma, rehabilitation, subsidiary operation, adaptation to new social roles.

It is estimated that in the years 1953–2012 about 100 thousand Polish soldiers and military employees and nearly 3 thousand police officers took part in peacekeeping missions. Each of them according to the ‘Law of veterans’ will have the right to stay in the House of Veterans, with a priority for those who have been injured during the missions.

37 thousand soldiers participated in stabilization missions in Iraq and Afghanistan. 22 soldiers and 2 civilians were killed in Iraq and 44 soldiers in Afghanistan¹.

¹ Settlement, which is reached by the Ministry of Defence and the victims’ families. They receive 100 thousand zlotys of amends and 150 thousand zlotys of compensation. These amounts may vary and are in many cases higher than in this regulation. The individual amounts of compensation are due to the severity of injuries and the degree of impairment of health. According to the gen. Majewski more than 28 thousand soldiers and army employees participated in the mission in Afghanistan. He calculated that the soldiers of our contingent trained 11 thousand soldiers and Afghan police, and in the process of reconstruction of Ghazni province and the financed 194 aid projects, including the construction and repair of roads, water supply, schools, orphanages, bridges, municipal buildings and hospitals (see. Opole. Welcoming of the last change of soldiers returning from Afghanistan, Daily newspaper Gazeta Wyborcza on 10.12.2014).

Of these, nearly 700 received the status of injured veteran (according to the level of disability) among them nearly 100 people suffered serious damage to health that significantly hinders normal functioning. (According to the statistics of Operational Command of the Armed Forces 819 Poles were affected, including 346 wounded).

Nearly 85% of these injuries and impairments relate to people from the corps of professional privates and non-commissioned officers.

Military Bureau of Sociological Research shows that nearly 90 percent of the respondents admitted that in Afghanistan they were exposed to shelling and 83 percent experienced immediate threat to life. As further elements of the stressful situation 64 percent of respondents indicated the need for the use of weapons, and of these 54 percent participated in a firefight with the Taliban. Most of them took part in combat operations, were under attack or have seen injured or killed people.

In addition to these traumatic experiences respondents reported that during the mission they improved their ability to cope with the stress in difficult situations (84 per cent of responses) and the ability to preserve the cold blood (82 percent)².

These traumatic experiences affected their mental state. Studies of Military Bureau of Sociological Research show that 12 percent of respondents needed to obtain professional psychological or psychiatric help. Most often the respondents observed the following symptoms which hindered normal functioning after the mission. One in eight soldiers returning from a mission had trouble sleeping (13 percent) and repeated bouts of anger (12 percent). Another group (11 percent) presented aggressive behavior and frequent reliance upon alcohol (7 percent.).

Almost 1/3 of respondents presented at least one type of emotional disfunctioning. This was reflected in their family life. As much as 14 percent of respondents said that their relationships with their spouses or partners worsened, and 6 percent had trouble adjusting to living in the family.

Every sixth participant in the mission reluctantly confided to relatives about what happened to them in Afghanistan — 15 percent said they did not talk about it with their family, and 71 percent rather little³.

The problems mentioned above indicate the existence of the so-called. secondary negative effects of missions that usually are not recorded

² J. Zauer, G. Predel, *Social aspects of service abroad study Military Bureau of Sociological Research (for example, soldiers XI change PKW Afghanistan)*, WCEO, Warsaw 2013.

³ *Ibidem*, p. 17.

in the 'after mission' reports. They are psychological 'wounds' and social difficulties generating traumatic experiences caused by a shift in the existing partnership relations in the family, lack of acceptance, a sense of rejection and problems with returning to daily service. Many veterans emphasize in interviews that the effort and the risk taken on a mission is perceived by their environment, which did not participate in the missions as an additional source of high income, so they should not complain that others are honored and they can wait.

An additional secondary traumatic effect of participation in the mission are problems in the personal lives of their participants, resulting in the problems in relationships as well as numerous separations and divorces⁴.

Family problems will generate a number of conflicts and tensions in their personal and professional lives.

These separations and divorces, according to Lieutenant Colonel Dr. Radoslaw Tworus Head of the Department of Psychiatry and Combat Stress in Military Medical Institute indicate that many veterans are not always able to adapt to life after the missions due to the fact that the stress exceeds the adaptive capacity of a soldier, becoming thus traumatic stress, a peculiar form of combat trauma.

Symptoms of PTSD⁵ can be different: nightmares, terrible images coming back even during the day, states of numbness, apathy and isolation from the environment, but also anxiety, fear, states of arousal, aggression, irritability, lack of concentration. The most important in his view is not to marginalize these visible changes in behavior and make excuses — 'he was away for a few months so he has changed'.

Both families and superiors should worry that the soldier sleeps worse, eats less, drinks more alcohol than he used to, or on the contrary —

⁴ This sphere of veterans' life and their families is not sufficiently covered by the preventive treatment which would restrict and eliminate the traumatic consequences of family breakdown. It is, therefore, important to know these spheres of veterans life and their families to reduce and eliminate additional traumatic experience that many of them have experienced.

⁵ There are three main symptoms. One is constantly reliving the disaster again — either in a very realistic dream, or in memories. Sometimes very innocent stimulus can evoke such memories, which are accompanied by very strong emotions — sometimes as intense as those that someone had experienced in the time of the incident. Another possible symptoms are: agitation, the state of continuous readiness — as if the threat was going to return. Finally, seemingly opposite: numbness, anesthesia emotions, withdrawing from contacts even with relatives.

that he stopped drinking. They should be bothered by every change, e.g. if he always said that he hated dogs, and suddenly he buys himself one to have an excuse to go out and escape from everyday life⁶.

Military reports estimate that PTSD concerns in Poland approx. 7–10 percent of soldiers, while in the US Army, this percentage amounts to approx. 30 percent.

These significant disparity in the diagnosis of PTSD can be explained by different criteria applied for a diagnosis of PTSD symptoms, which in the case of the US are more liberal and friendly to injured veterans than the criteria applied to the Polish soldiers.

Another factor that significantly ‘reduces’ the number of Polish veterans with PTSD is the fear of stigma in the army, the shame of admitting to the use of psychiatric help and psychological fear of possible consequences at workplace⁷.

These individual emotional and psychological veterans’ problems are often combined with two negative social trends.

The first of them is generated by the continuing changes in the army, reducing staff levels and the liquidation of many garrisons and limited opportunities of promotion and position⁸. Additionally, in the environment of professional privates there are limited future prospects of the service due to the temporary contracts and the necessity to leave from the army.

⁶ For many veterans of the hardships of the mission do not end when they return home. Dr. Lt. Col. Tworus in his interview in the daily *Gazeta Wyborcza* of 19 Dec. 2014 stated that in 2014 from January to October — more than 30 patients were treated with PTSD. In 2013 more than 50 soldiers, in 2012 close to 60, in 2011, approx. 50, in 2010 — 25, in 2009 approx. 30, in 2008 approx. 60, in 2007 more than 80. The vast majority of them were cured in Warsaw Military Medical Institute. PTSD symptoms are also treated in major military hospitals, among others, in Krakow, Bydgoszcz and Wrocław. More than 70 per cent of cases are treated in Warsaw, currently 17 veterans are being treated in MMI; http://wyborcza.pl/1,91446,17156723,Dla_wielu_weteranow_trudy_misji_nie_koncza_sie_p_o.html#ixzz3rZ4c2eri (09/09/2015).

⁷ According to the quoted Dr. Tworus of Military Medical Institute in the military environment it is common to think: if the commander finds out that I use psychiatric help he will not extend my contract or will not send me to officer's school. The opinions of the respondents indicate that the employment policy is not unified especially among Privates who end contracts after 12 years.

⁸ The report published by National Security Bureau concerning the future prospects of service shows that in the period 2016–22 over 30 thousand soldiers will be forced to leave the army, of whom many took part in missions. The possibility of their transition to the non-commissioned officer corps are very slim, and the majority in this group will not have a chance to stay in the army.

The second is caused by intensified processes of stigmatization and victimization of injured veterans due to the fact that the number of supporters to opponents of our commitment in Afghanistan is like 1 to 7⁹.

This reluctance and presented hostility to veterans and their problems also results from the entanglement of policymakers into activities that accept the use of prohibited practices during investigations against alleged terrorists, which probably took place on the Polish territory.

An important factor that significantly affected the functioning of the veterans' environment and their families was the lack of the Law on veterans between 2002 and 2012.

Since 2002, i.e. the time when decisions were made about our military involvement in stabilization missions until the adoption and of the Law on veterans they received limited assistance¹⁰.

The most painful part was the lack of legal solutions which would include support and assistance for people directly or indirectly affected in missions.

During this time only non-government organizations and associations supported veterans and their families¹¹.

The Law on veterans which was enacted on 18 August 2011 and came into force in March 2012 enabled the veterans support, rehabilitation and assistance in their adaptation to new social roles.

Adoption of this law meant that according to Polish law, veterans, victims are entitled to health care and social assistance. It enables them to obtain:

- Treatment out of turn, free medicines and medical devices and specialized services;
- Wearing the badge 'For the Wounds and Injuries';

⁹ More information on this issue was presented by the author in the article *Social aspects of victimization of participants in armed conflicts*, [in:] *Society and the war. War and Peace — retrospection and the present*, ed. M. Bodziany, WSO WL, Wrocław 2014, pp. 301-316

¹⁰ See: The Act of veterans of 19 August 2011 *Journal of Laws of 2011*, No. 205, item. 1203.

¹¹ During this period the majority of the wounded with the negative decision of the military medical commission had no future in the army. The actions of established associations and foundations intended not only to meet their current needs, provide treatment and rehabilitation, but also to influence the Ministry of Defence in order to create jobs that would allow to employ injured veterans. The number of these jobs steadily grew, which allowed now for nearly 70 veterans to continue to perform military service.

- A free uniform and financial help for education;
- Benefits for injured veterans, regardless of age, discounts on fares in public transport, additions to a pension, and priority in employment in units subordinated to the Ministry of Defence;
- The right to obtain free psychological help out of turn, additional leave, benefits after 65 years old and a place in the House of Veterans;
- Reimbursement of fares and accommodation at the ceremonies organized by the Ministry of Defence or the commanders of military units and the assistance of honor at the funeral.

However, these positive changes which have been introduced with the Act do not fully meet the expectations of the environment.

The characteristics of these feelings and desires of the environment with particular emphasis on injured veterans are presented in Table 1 below.

Table 1. Characteristics of the feelings and desires of the environment of veterans

Characteristics of feelings and desires of veterans environment (with particular emphasis on veterans injured in relation to the Act of 19 August 2011)	
Advantages	Danger (fear)
Soldiers wounded in the missions in Afghanistan and Iraq (with the status of veteran victim) should find employment in a number of positions in the army. In 2012. Ministry of Defence prepared for them, however, only 28 jobs — now there are 67.	The report of National Security Bureau shows that in the period 2016-22 30 thousand professional privates will leave the army.
Military Hospital number 23 in Ladek Zdroj opened the House of Veterans where they prepared space for 30 people — participants of foreign missions. Ministry of Defence announced that it will increase the number of seats depending on demand.	2200 professional privates in 2015 left the army with no pension rights. The possibility of transferring some of these people form the corps of professional privates to non-commissioned officer corps is very limited (far below the expectations of the environment).

<p>Actions taken to improve the conditions of veterans' service, their health (including rehabilitation, environmental meetings, organizing events for veterans), information activities conducted through the 'Courier Veterans' allows for a systematic presentation of opinion and guidance for this environment.</p>	<p>There is an urgent need to develop retraining programs for veterans. This is important for many victims in the missions in Iraq and Afghanistan because their pensions are often so low that it is difficult for them to buy drugs, attend rehabilitation, not to mention home adaptation to the needs of the disabled person.</p>
<p>Creating Veteran center in Warsaw and establishing May 29 as Veterans Day is honoring the effort of this environment to build the world a security.</p>	<p>Ministry of Defense delays to reach an agreement in court with veterans and their families.</p>
<p>International cooperation to improve the quality of life of veterans and their families.</p>	<p>The lack of an effective response to numerous cases of stigmatization of participants in peacekeeping missions.</p>

Source: developed on the basis of own research (interviews with injured veterans).

Table 1 indicates that the environment of injured veterans expects that the number of posts enabling to perform further service with the restrictions should be significantly increased. Creating these additional posts would allow the veterans to use their skills and experience which they gained in Afghanistan and Iraq.

The House of Veterans was created in military health resort in hospital number 23 in Łądek Zdrój where the 30 most seriously injured soldiers can obtain complete and specialized assistance in long-term treatment.

The cost of treatment is covered by the Ministry of Defence, however, there are individual cases of depriving veterans of their rights.

Media very quickly inform the society about such cases and present the negative picture of the army accusing it of heartlessness and discrimination of the injured soldiers.

The case of 36-year old senior sergeant Mariusz Saczek reflects this situation.

He was wounded on July 27 2010 together with six other soldiers from the crew of Wolverine when a mine exploded under his vehicle.

M. Saczek suffered a fracture of the spine in three places and damage to the spinal cord. He has leg paresis and moves in a wheelchair or on crutches. He had damage to the spleen and liver, as well as the hearing. He spent two years in hospital. The Minister of Defence Thomas Siemoniak pointed out that the soldier received 325 thousand zlotys of compensation and is paid 4,513 zl disability pension. In his opinion, the amount is fair, but everyone has the right to appear before the Court, arguing that the compensation or reparation should be higher—said the minister, acknowledging that no amount can compensate the loss of health.

The injured soldier admitted in conversations with journalists that he got a compensation, insurance and benefits for medications from the Ministry of Defence, but he stated that the money would be spent soon, and he must use a rehabilitation and treatment to the end of his life. He applied for treatment in military hospital numer 21 in Busko-Zdrój and he received a reply that he was invited for treatment and medical rehabilitation in July 2018 due to a queue of 4,000 patients. Thanks to the intervention of Veteran Centre M. Saczek was admitted at hospital.

An important element in building trust in the environment and their families in the military institutions is the Centre for Veterans¹².

Its opening in December 2014 led to the creation of the center representing the interests of veterans who participated in stabilization and peace-keeping missions abroad. The subordination of the Centre to the Director of the Department of Social Affairs has raised some controversy when it comes to conflicts of interests between veterans fighting for compensation and the Ministry of Defence. The employees of the Centre, on one hand,

¹² The Center for Veterans headed by the Director Lt.-Col. L. Stępień is divided into 3 sections — the Tradition section of information and consultation, section of education and promotion. The section education and promotion deals with the cooperation of institutions and military units acting for veterans, in cooperation with NGOs working in the environment of veterans. It prepares promotional materials and publications; organizes and conducts meetings, is responsible for the contacts with the media, including social media on and international cooperation. Information and consultation section maintains contacts with veterans, families of dead soldiers, provides legal information, assists in obtaining the rights and benefits, intervenes in the veteran matters, helps the families of dead and injured soldiers. The tradition section serves to ensure commemoration of soldiers who died while participating in activities outside the country, collects and prepares materials relating to the participation of soldiers in operations outside the country. It organizes and participates in conferences, screenings, exhibitions and expositions related to the participation of soldiers in operations outside the country, is responsible for maintaining the Tradition Center in the Hall of Veterans and the library.

should support the veterans in solving their problems, and on the other hand, they must bear in mind the interests of the army.

In situations of conflict of interests the employees of the Centre strive to fulfill the roles of facilitation and encourage both parties to reach a compromise.

At the same time, actions were taken to honor veterans who participated in stabilization missions. In the second chapter of the Act of veterans May 29 was established as Veterans Day. Military badge 'For Wounds and Injuries' was established and a fund which is administered by the Minister of National Defence was created¹³.

The needs and problems of this environment started to appear in artistic multimedia shows which aroused a great deal of controversies and discussions.

Examples of such activities related to the use of public space for projection of social and political issues were screenings made by Krzysztof Wodiczko. Especially two shows about veterans aroused great excitement and hot discussions about artistic expression of this issue. The first one took place in Wroclaw on 24–27 July 2010 where in the scenery of Partisan Hill he presented the 'Candle of the veteran'. Three years later in Krakow on the Town Hall Tower he presented another show about veterans¹⁴.

These activities presenting personal dramas and traumatic experiences of the participants of missions despite anti-war message allow to get to know problems faced by veterans.

Analysis of the existing practice of military life indicates that not in all units mission participants can expect support and honoring their achievements even on Veteran's Day. The differences in behavior of various superiors depend on the fact whether they had participated in missions or not. Those commanders who had participated in the missions support their subordinates and help them with returning to the service.

¹³ In 2015 the main idea of Veteran's Day celebrations were 'Pride. Respect. Brotherhood. Honor. Support'. These values indicate not only the achievements of veterans, but also the continuing need to support this environment especially those who have suffered serious wounds and lost health. This group has a number of problems in the normal functioning and requires regular medical care and help in overcoming the trauma.

¹⁴ Both dealt with the problems of Polish war veterans (from Iraq and Afghanistan) and their families struggling with the difficulties of returning to civilian life. Participants and their relatives want the society to understand their feelings, their existential situation and difficulties with social reintegration after the traumatic experience of war.

However, in some units where small numbers of soldiers took part in missions commanders have indifferent attitudes towards the veterans and sometimes they do not even know that their subordinates have the status of an injured veteran and in this respect they have certain rights and privileges of Veteran's Day.

Establishing on May 29 Veterans Day should be an opportunity to show the achievements and efforts of the participants in the subsequent stabilization missions not only in the military environment, but also the local community should be proud of their missionaries. Such activities enable to overcome existing stereotypes and stigmatization regarding our involvement in missions in Iraq and Afghanistan.

However, policemen, firemen and civilian employees who took part in the missions do not receive such support and understanding from the society as soldiers.

This differentiation regarding the treatment of participants in the missions because of the membership in different professional groups should not take place. These professional groups may use the experience of the army to solve the problems of their veterans.

Summary

The content presented above shows that in recent years, especially after introducing the Law of veterans a significant improvement has been seen in both their personal and professional situation. This does not mean, however, full comfort and satisfaction for this environment, as in many cases the veterans still have problems with adaptation and return to service in the army.

That is why some of them suggest modifications in the existing Act in order to adapt it to the changing needs and expectations of the environment.

At the same time the implementation of the statutory rights of injured veterans in the institutions which are subordinate to the Ministry of Defence can not raise any doubts and ambiguities.

While in the army the situation of veterans and their well-being is steadily improving, still a substantial group of the public stigmatizes and discredits the military effort and sacrifice of the participants of peace-keeping missions.

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FUNKCJONOWANIE WETERANÓW I ICH RODZIN PO ZAKOŃCZENIU MISJI

STRESZCZENIE

W artykule przedstawiono problemy, z którymi weterani i ich rodziny borykają się po zakończeniu misji stabilizacyjnych. Wprawdzie pod względem opieki medycznej, psychologicznej oraz rehabilitacji nastąpiła znaczna poprawa losu osób poszkodowanych, nadal jednak występują problemy, które wywołują napięcia i konflikty. Krytyka części społeczeństwa i związana z nią stygmatyzacja weteranów wywołuje poczucie odrzucenia i deprecjacji wysiłku żołnierzy uczestniczących w misjach.

Słowa kluczowe:

trauma, rehabilitacja, działania subsydiarne, adaptacja do nowych ról społecznych.