

BOOK REVIEWS

The power of weakness: Review of the book by Mark Neville and Jamie Hacker Hughes “Battle Against Stigma”

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Jamie Hacker Hughes and Mark Neville's two-volume tome, “Battle Against Stigma,” published by Grafos of Barcelona in 2014, is a far from typical study of the psychological effects of combat on the participants. Several factors make this work a highly original one.

The first is that it is a collaboration by specialists from very different fields. The co-authors are Jamie Hacker Hughes, renowned British military psychologist and president of the British Psychological Society, and Mark Neville, a photojournalist who accompanied units of the British Army on patrol in Afghanistan.

The first volume features selected photographs by Neville taken in 2010 in the Afghan province of Helmand. Panoramic pictures from the field of battle are accompanied by a short, succinct commentary that illuminates the psychological aspect of war. British officers and soldiers in the conflict zone add their own sincere and candid testimony of the feelings, impressions, impulses and moods they experience while on duty in a combat zone. The vivid, detailed descriptions of military life combine with the photographic record to give the reader the opportunity to view the psychology of war in 3D, so to speak. The effect is akin to being an actual witness of the reported events. The second volume of the book is written by J. H. Hughes, and follows on logically from Neville's multi-sourced, three-dimensional, dynamic view of the war. Hughes writes of how the specific conditions of this conflict - fought thousands of miles away in a foreign land where the geography, climate, and culture are all vastly different from those at home — can greatly affect the mental state and psychological wellbeing of those serving in the military.

The second factor that makes the work unique is the diversity of those who gave their testimony. Among those sharing their thoughts and views are specialists from many branches of the military plus a wide range of civilian experts as well as ordinary citizens. There is academic opinion from Professor J. H. Hughes on psychological trauma and the issue of stigma; there are contributions from ordinary soldiers like Simon Peacock, Mike Flynn, reservist Jack Wood, plus officers such as Major Chris Hunter and Colonel Stuart Tootal and others, reflecting on their own experiences in the wars in Iraq and Afghanistan. There are the thoughts of veteran's family member Marianna Oddyseos, charity worker Walter Busuttill and mental health specialist Wendy Frappell-Cooke, etc.

The third factor is that the book analyses a problem that is particularly acute for veterans of active service with the armed forces of many English-speaking nations, particularly the USA, Canada, Australia and the UK. That problem is the stigma attached to former combatants who have suffered psychological trauma.

The authors describe stigma as the process whereby those who display certain unusual behavior or personality traits encounter exclusion and discrimination by society.

The book tells us how modern warfare has a high potential to inflict psychological trauma on the participants. A British soldier embarking on a single six-month tour of duty in Afghanistan faces a one-in-four chance of being killed or wounded. Judging by the testimony of these combatants, it demands considerable levels of courage to fight against a skilled, resourceful and often unseen enemy across terrain littered with improvised explosive devices. The risks faced by the soldier and his comrades and the constant fear which hovers throughout the murky days, nights, months and even years, subsequently lead to feelings of "inadequacy," such as guilt, despair, loneliness, confusion, shame and rejection. This in turn can sometimes result in deteriorating health, difficulties in finding or holding down a job, or problems in relationships with friends and family.

Almost every combatant will experience some kind of psychological problem stemming from the stress of engaging in battle. Essentially, "the qualities that make a man a good warrior also make him a bad patient." As a result, according to the authors, it is not merely the individual soldier but his entire family who are waging war. Once the conflict is over, all of the veteran's close friends and relatives are affected by the psychological consequences.

However, in contrast to a soldier's physical injuries, such as the loss of a limb or damage to an internal organ, which are seen by society as a symbol of his bravery, heroism and strength, mental illness is often perceived as a sign of weakness and can therefore incur stigma, often in the form of labels: "psycho," "madman," "lunatic," "crackpot," etc. Owing to this, while a soldier with a physical injury will invariably request and receive the appropriate treatment, a significant section of those with psychological trauma are unwilling to seek the necessary professional help. Primarily, this is mostly due to the soldier's desire to avoid being branded as weak in the eyes of his comrades, family or friends. Secondly, there is the fear that receiving treatment from a psychologist will attract the label, "mad," and this could affect the veteran's future career prospects. Thirdly, there is the warrior's confidence that he, himself, can and should solve his own problems, and a fourth factor is a

reluctance to admit to anyone about possible problems such as alcoholism, drug addiction, aggression, etc.

As a result, it is human weakness, as shown in the book, which becomes a formidable force preventing veterans from seeking assistance. Around 60% of those known to suffer from symptoms of PTSD seek help only when pressured to do so by fellow veterans, with 7.4 % requesting treatment following advice from their wives, another 7% were encouraged by community mental health branches and 4% sought assistance after contact with relevant charitable organizations.

Consequently, the authors highlight the phenomenon of “psychological barriers,” which can prevent traumatised soldiers and veterans from seeking any help, despite access to one of the world’s most advanced systems for providing psychological assistance.

The book describes a multi-tiered preventive-reactive system of psychological assistance currently available to war veterans and reservists in the UK. To use a military metaphor, this system comprises four “lines of defence” in the battle against psychological trauma.

The first line is called Trauma Risk Management (TRiM). This process, established in 2008, involves a structured dialogue between serving military personnel - non-medical, but specially trained - and soldiers who have experienced traumatic events and may be in need of emotional and psychological support. The system operates on the principle of “a problem shared is a problem halved.” The UK Armed Forces have trained more than 10,000 staff since 2008 to act as TRiM practitioners to provide such assistance via individual or group debriefings. These sessions take place during periods of respite after combat operations.

The second line is the Field Mental Health Team, or FMHT. These practitioners are also deployed in the theatre of operations, but are qualified mental health nurses.

The third line is the Department of Community Mental Health (DCMH). There are 15 of these departments in the UK, plus additional branches in Germany and Cyprus, and each provides access to a wide range of specialists, such as a consultant psychiatrist, a clinical psychologist, a mental health nurse and a social worker.

The fourth line is the mental health charity, Combat Stress, set up in 1919 by the wives, families and friends of those veterans in need of psychological aid after returning from the Great War. The organization has 14 departments across the UK, and also boasts three medical centers, each with 85 beds.

The book illustrates the characteristics of various methods of psychological assistance: stress counseling, awareness-raising, cognitive therapy, cognitive-behavioral therapy, self-help, etc.

According to the authors, however, this highly impressive array of psychological assistance available to combat veterans cannot be effective unless society triumphs over one human weakness: the fear of stigma.

Indeed, the book itself is becoming an effective weapon in the battle. The authors have published this work at their own expense and distributed free copies to combat veterans. The simple and honest language inspires confidence and trust.

The testimonies regarding psychological treatment undergone by serving soldiers and combat veterans will be of interest to any mental health professionals

in Russia whose work involves providing psychological rehabilitation to veterans. Especially useful is the comparative analysis of the psychological effects of combat on serving military personnel during hostilities, of the structure of psychological rehabilitation, and of the specific technology employed in rendering psychological assistance.

The book is useful to practitioners, psychologists, researchers, teachers, military, clinical, extreme psychology, and other professionals.

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