

# A Veteran's Explanation of PTSD and Suicide Prevention

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The explanation of PTSD by caregivers and other would-be experts would fill a library but has done little good. Something *compels* this writer of the Warrior's Code of Honor to try and help out - not from a college/university professor's eyes or from a medical person's eyes - but from the eyes of a combat veteran who was once in a VA hospital suffering from severe PTSD and overcame it. Perhaps my experience may let others suffering from severe PTSD know that they too can overcome the condition.

- The bad news is that PTSD can never be cured (cured = no issues ever).
- The good news is that it can be overcome (overcome = overpowered, surmounted).

PTSD is acquired in an instant and lasts forever. Some combat veterans feel that their PTSD was acquired from being in combat a long time, and that "Short-timers" claiming to be suffering from PTSD are phonies and combat vet wannabees. They are wrong. One rocket or one mortar or the mere threat of danger can create a lifetime of PTSD.

## **PTSD and A Troubled Mind Are the Same Thing**

What civilian caregivers and other would-be experts who have never seen combat do not know is that there is no difference between suffering from PTSD and having a troubled mind. Both terms describe the same thing. To say that they are not the same is to make a distinction without a difference. *Therefore for the rest of this article this writer will combine the two terms into one as follows: troubled mind/PTSD.*

It is common for combat veterans to deny that they are suffering from troubled mind/PTSD. This denial seems to be a two sided coin:

1. Not Knowing
2. Peer Pressure.

## **Vets Come Home With Troubled Minds/PTSD and Do Not Know It**

Regarding "not knowing," many if not most combat vets come home with troubled minds because battle automatically makes your mind troubled (if you are fighting alongside me and your mind is NOT troubled you are too stupid to be safe so get out of here before you get me killed!). Having a troubled mind in combat 24/7, day after day, month after month becomes the "New Normal" and you do not think anything is wrong with it because it is not un-usual but the usual, common, everyday condition your mind is in when fighting for your life.

The problem is that for many combat vets -- including this writer -- you cannot tell any difference in your head from High School to combat to back home again. To you everything is the same in your head, there has been no change, it seems like you have always been this way, you cannot remember ever being any other way. This is why you deny that you are suffering from troubled mind/PTSD. You sincerely/genuinely do not know that you are.

This "not knowing" is one side of the troubled mind/PTSD denial coin. The other side is Warrior Culture Peer Pressure.

## Peer Pressure Requires Denial of Troubled Mind/PTSD

All the while you are licking your invisible troubled mind/PTSD wounds the Macho-Man Warrior Culture requires you to deny that you have any wounds to lick. Even if you are one of those who know that you have troubled mind/PTSD, if you admit it you fear that your fellow warriors will disrespect you as a “weakling,” a “sissy,” something less than a *real* Macho-Man. You consider this a fate worse than death as proven by the fact that you risked your life in combat to earn/keep their respect.

## Vets Search for Something They Know Not What (Peace Of Mind)

In sum, many if not most vets come home with troubled minds/PTSD, do not know it, even if they do know it they deny it anyway due to peer pressure, and spend the rest of their lives searching for something they know not what that is missing in their lives. That “something” is peace of mind/serenity but they cannot name it, cannot describe what they are looking for because they do not know that their minds are troubled and long for peace of mind in the first place.

## Two Categories of Troubled Mind/PTSD: Non-Lethal and Lethal

### Non-Lethal Troubled Mind/PTSD

1. Non-thrill seeking examples: Waking up screaming back in battle; feeling guilty for living while friends died; feeling naked and vulnerable without a gun close to hand; never entering a store, restaurant, movie theater or bar without compulsively scoping out something to hide behind if bullets start flying... always the "if" there might be a threat; must sit with back to wall or skin on back will crawl with fear; automatically duck, hide head in arms at unexpected sounds; and so on.
2. Thrill-seeking examples: Getting restless and bored super-easy; drinking to excess; drugging; doing dangerous but thrilling sports and other thrilling non-sport activities; have thrilling hobbies; live a thrilling life style; have multiple simultaneous sexual relationships seeking thrills; have multiple marriages seeking thrills; various other thrill-seeking behaviors that one may look back on as regrettable; and so on.

### Lethal Troubled Mind/PTSD - The Death Wish

I call lethal PTSD "The death wish." The question naturally arises: how many combat veterans with PTSD have a death wish? I expose to ridicule my personal belief that many do and are not aware of it. They drive cars like Hollywood stunt-car drivers, ride motorcycles like mad maniacs, etc., and think they are doing it for the “thrill.”

This is true they are doing it for the thrill because virtually all combat vets come home basically “thrill-crazy.” This is the light side of the thrill-seeking coin. It has another side however, the dark side where a hidden death wish may be piggybacking on top of the light side “thrill” thing.

To illustrate/offer proof of why I say this I quote a man very knowledgeable on this subject.

## Death Wishes Are Disguised As So-Called “Accidents”

*"Dear writer of the Warrior's Code of Honor. I have just finished my first reading of the Code. I say first because I knew, after reading it the first time, that it would require subsequent readings and thoughtful analysis. I am a retired 26 year veteran. I wrote to thank you for this great insight into the combat veteran."*

*I work as a civilian safety manager for Army Forces Command and see on a daily basis the struggles that combat vets are succumbing to. Yes, the adrenaline rush that leads to the fast bikes, high speed driving, substance abuse and ultimately – very, very sadly – the so-called “accidental” death of those warriors.*

*Please know that I will spread these words of the Code for I feel they are what we need to stop, or at least slow down, the loss of our heroes. Remember, just because an “accident” hasn’t happened doesn’t mean it isn’t about to. Thank you very much.*

*Mario Gabriel Jr.”*

*Aviation Safety Program Manager, Safety Awards Manager.  
U.S. Army Forces Command – Ft. Bragg.*

## **Writer’s Question to Vets: Is The Moment Of Death A Surprise?**

My dear fellow thrill-crazy combat vets, do you think that the vets who had the fatal "accidents" Mr. Gabriel mentioned above knew they were going to die that day?

Or were they in denial that they had a death wish and at the moment of death were surprised?

I invite you to think on it - if your thrill-crazy adrenaline junky behaviors are inching ever-more dangerous, you may be in for a "surprise" orchestrated by your hidden, super-sneaky death wish.

## **The Suicide Iceberg**

The sad truth is that the combat vet death wish is acted out far more often than is commonly known. It may be helpful to think of suicide as an iceberg. At the tiny 10% top of the iceberg sticking out of the water are the death wishes acted out without disguise, like doing yourself in with a gun, etc. These are visible, thus are "news" and reported as such.

But out of sight in the 90% of the iceberg down below the waterline are all the death wishes disguised as fatal “accidents.” Since these suicides are not visible they are not "news" and go un-reported.

This under-reporting is why the American people have no idea just how bad the combat vet suicide situation is now, and how bad it soon will be when the huge PTSD tidal wave hovering over America blocking out the sun fully crashes down upon this un-suspecting and totally un-prepared nation.

## **How The Warrior’s Honor Code Website Is Preventing Suicides**

Combat veterans have saved their own lives by reading the Warrior’s Code, the feedback from other combat vets and the Writer's Notes which together form a Group Therapy. It works like this:

- a) After visiting this website a vet who is blindly doing his thrill-seeking thing starts to pay attention to his activities to see if they are inching ever closer to an "accident." When and if he catches his hidden, super-sneaky death wish in the act, he moderates/slows down to avoid getting a “surprise;”
- b) Reading this website explains to a veteran *why* he thinks and feels like he does;

- c) He sees that he is *not alone*, virtually all his fellow combat veterans have similar thoughts and feelings. Instead of being alone in this world like he thought, he is immensely relieved to find out that he is standing in the middle of a crowd;
- d) According to Sgt A. Brandi ([sgtbrandi.com](http://sgtbrandi.com)) "*He comes to understand that he is NORMAL for what he has been through...NORMAL!*" He realizes that having problems in his life is not un-usual, but the usual for combat vets with troubled minds. These train wrecks are known as, "Personal problems caused by PTSD," and are common to most vets. This commonality brings him the happy realization that he is not a bad person like he thought but is basically an *OK* person who has been ground down into PTSD from doing his duty under fire.
- e) It is impossible for words to adequately describe the relief / comfort/deliverance that such a realization of one's OK-ness brings to a troubled vet who thinks himself Not OK, just as it is impossible for words to adequately describe a beautiful sunrise. No matter, for purposes of clarification and emphasis I make the attempt as follows.

The difference this website makes to a troubled vet who thinks himself Not OK can be likened to the difference between night and day:

1. Before, he is in the black darkness of aloneness and low self-esteem. He feels deficient and Not OK for having train wrecks in his life -- a suicide risk;
2. After, he is in the bright sunlight of solidarity/togetherness with other vets and high self-esteem. He now happily realizes that his train wreck life is normal for a troubled vet (misery loves company) and feels OK -- not a suicide risk.
3. This OK-ness in turn becomes a platform he stands on while girding his loins for the battle with himself for humiliating, embarrassing behavior change such as swallowing his Warrior pride, admitting PTSD, and seeking professional help (you can only be as big as you are willing to be little).

### **Full Disclosure of the Severity of the Writer's PTSD**

In the interests of full disclosure I hereby revise and extend my remarks regarding my personal PTSD experience. At the beginning of this Writer's note I stated that I was once in a VA hospital with severe PTSD. I sort of left out that it was the Psycho Ward of the hospital; I was locked down behind bars and kept heavily sedated 24/7 for a long time because I was a high suicide risk.

From that dark bottom of the PTSD hole in the ground I clawed my way up and out into the bright sunlight of recovery to write the *Warrior's Code of Honor*. I close this note with a universal truth as old as mankind. In modern times it was expressed in the famous *Kill the Bear* scene from the American movie "The Edge" starring Anthony Hopkins and Alec Baldwin:

*“WHAT ONE MAN CAN DO ANOTHER CAN DO”*

Signed,  
Paul R. Allen