

Heroes Suffering in Silence

Nicole Dawson

Iowa Western Community College

In 2006, Joshua Kors, a investigative reporter for *The Nation*, stumbled upon a government conspiracy of a heinous mistreatment of service members seeking out mental treatment during their enlistment. From the time frame of 2001- to present more then 31,000 service members were fraudulently misdiagnosed with “personality disorders,” denying them any form of benefits they would have otherwise received for their commitment to serving the United States because it is considered a pre-existing condition prior to service. Many of these service members who are wrongfully diagnosed with personality disorder suffered from injuries while deployed, reported being raped, or simply sought out medical treatment. The Pentagon is fully aware of these personality disorder discharges yet continues to ignore the issue, saving \$17.2 billion in disability and medical benefits. As a result of being persecuted with a false diagnosis, they are heavily stereotyped by their peers and society. This silent epidemic has affected thousands of service men and women, who instead of being seen as heroes, are cast out the military and denied the benefits they deserve. Because of the stigma attached to at this type of diagnosis, these unfairly and often wrongly diagnosed servicemembers suffer in silence.

Kors J. (2018, January 6). *Suffering from a ‘Personality Disorder’: How My Promising Career Was Cut Short by a Dubious Diagnosis.*

Before one can look at the misdiagnosis of personality disorders in the United States military, however, one must first understand how this illness is characterized. Personality disorder is classified as a mental health illness. The individual always displays long-term patterns of thoughts and behaviors that are unhealthy. It is still yet unknown what causes this mental illness to manifest in an individual. There are multiple classifications of personality disorders according to The Diagnostic and Statistical Manual of Mental Health Disorders (DSM-5), the

diagnostic tool used for psychiatric disorders. DSM-5 classifies 10 personality disorders and identifies each to one of three different “clusters”: A, B, or C. Each “Cluster” has a specific emotional characteristic that it’s associated with. Cluster A is classified with Paranoid, Schizoid, and Schizotypal Personality Disorder, which is connected to eccentric behaviors. Cluster B is classified with Antisocial, Borderline, Histrionic, and Narcissistic Personality Disorder, which is connected to dramatic and erratic behaviors. Cluster C is classified with Avoidant, Dependent, and Obsessive-compulsive Personality Disorder, which is connected to anxious and fearful behaviors.

The traits of personality disorder are based off historical observation rather than scientific study, making it broad and very inaccurate to diagnose. There is much controversy and debate sought out amongst health care professionals on the use of this mental health illness.

Psychiatrists usually require detailed and in-depth consultation with both the patient and people with close relations to the patient. Many of the symptoms of Personality Disorder are similar to that of Post -Traumatic Stress Disorder or Traumatic Brain Injury. Burton N. M.D. (2012. March 29). *The 10 Personality Disorders*.

Post-Traumatic Stress Disorder (PTSD) and Traumatic Brain Injury (TBI) are often misdiagnosed as Personality Disorder (PD) to prevent the service members from receiving any type of compensation for the damages that they received while serving. Diagnosing a service member with this disorder is the quickest way to discharge them. Vietnam Veterans of America (VVA) and other advocacy groups have spent a copious amount of time to change how PD is diagnosed with in the United States Military, arguing that the disorder can be mistaken for other service-related conditions. According to records obtained by the VVA, many of these procedures are being conducted improperly. An investigation was sought out by the Government

Accountability Office (GAO) that found many of these discharges were improperly conducted and violated many regulations set forth by the DOD. According to the investigation, between 22 and 60 percent of the service members diagnosed with PD had not been properly evaluated by someone with proper credentials. Spotswood S. (2012, May 10). *Servicemembers Lose Benefits After Improper Discharges For Alleged Personality Disorder*.

In August 2008, five to eight legal requirements were established for separation. The first five requirements are general: formal counseling of a PD diagnosis and a chance to improve behavior, a diagnosis by a psychiatrist or PhD-level psychologist, a statement written by the mental health provider stating the service member is unable to function in the military, written notification to the service member about pending separation, and notifying the service member that PD is not qualified as a disability. The last three requirements are specific to servicemembers who have served in combat: PD was peer-diagnosed by another psychiatrist, addressing other mental health illness and PTSD, the approval of the Surgeon General of the military before separation occurred. Mental health providers must also perform normal psychological tests such as: Structured Clinical Interview for DSM-5 Axis II Personality Disorders (SCID II), Minnesota Multiphasic Personality Inventory (MMPI-II) is a written psychological assessment used to diagnose mental disorders, and ruling out Axis I, part of the DSM "multiaxial system for assessment, mental health disorders such as: depression, anxiety, or other medical causes. Though these requirements have been established to protect service members from misdiagnosis, they are not properly being executed by military. In 2008 there was 0% compliance with the different branches of service for the legal requirement of separation for PD, according to the documents obtained by the VVA. In the year of 2008-2009, only 8.9% of all PD discharges were properly conducted. Spotswood S. (2012, May 10). *Servicemembers Lose Benefits After*

Improper Discharges For Alleged Personality Disorder. Ader.M, Cutherbert Jr. R., Hoechst K., Simon E., Strassburger Z., Professor Wishnie M. (2012, March). *Casting Troops Aside: The United States Military's Illegal Personality Disorder Discharge Problem.*

In the year of 2010 all branches of the service complied 100% with the all legal requirements; however, they were self-reported by the different branches, according to the documents obtained by the VVA. The number of illegal PD discharges had significantly decreased after Department of Defense received negative public relations from 31 senators, Vietnam Veterans of America, GAO, Congress, and the media. Meanwhile, there was an increase in "adjustment disorder" discharges. Adjustment Disorder (AD) is defined as a response to a stressful life event, but the intensity to the response is not appropriate. In 2008-2010 6,492 service members were separated for AD; 2009-2010 the Coast Guard discharged 166 AD discharges; 2007-2010 the Air Force discharged 1,821 AD discharges. The military is substituting this disorder for PD. In 2008 AD was not the subject of the GAO investigation or the within the midst of congressional hearings. To this date there has been very little examination in to the use of AD, so it is unclear if it is being used to separate service member illegally. Spotswood S, *Servicemembers Lose Benefits, usmedicine.com.* Ader. M, *Casting Troops Aside.* The Denver Post (2012, March 22). *U.S. Military Illegally Discharging Veterans with Personality Disorder, Report Says.*

With multiple statistics gathered by advocacy groups, there are supporting testimonies from the internal structure of the military that prove the pressure of purposely misdiagnosing service members. Investigative report Kors spoke with military doctors about the pressure from their superiors about the fraudulent diagnosis. These doctors' real names and duty station are not used with in his reporting of *The Nation*, to prevent the retaliation from their commands for

coming forward. Dr. Michael Chen, a psychiatrist in the Army, stated, “They wanted the diagnoses to be personality disorder, instead of PTSD.” The psychiatrist stated that the service members never had the PD but showed significant signs of PTSD and TBI. Soldiers he saw were not only suffering from PTSD, but some also had visible wounds such as missing appendages and were diagnosed with PD. Dr. Chen confronted his commanding general and superiors about the absurdity of the false diagnosis but was still pressured to produce the false diagnosis, the doctor explained. Dr. Brian Harrison decided to speak out about PD, even though it was in violation from his superiors not to speak to any sort of media. Harrison’s superiors stated to him, “If they are not suicidal or homicidal, they’re fit to go back.” In some of the experiences that these service members faced while enlisted, it is obvious that they were retaliated against by their commands for seeking out help. The Department of Defense does not realize the devastating life impact it is creating on these veterans. Kors J. (2007, October 15, 2007). *The Nation*.

In 1988, Heath Philips, age 17, joined the US Navy. He was sexually assaulted by six assailants on numerous occasions. His assailants would shove a shampoo bottle or a toilet brush handle up his anus. He tried to report the incidents to his superiors multiple times but was never believed. Phillips eventually hit a low point attempting to end his own life. He went AWOL multiple times to avoid his attackers. He was later diagnosed with a PD, and he was later discharged as “other than honorable” because of his multiple unapproved absences. Even after 30 years of being separated from the Navy, Phillips was continually denied mental health services for the assault. Three times, the Board of Military Corrections (BCM) also denied to upgrade his discharge to “honorable.” Flynn. M. (2018, June 5). *He went AWOL after being sexually assaulted. After 30 years, the Navy finally believed him., The Washington Post*.

In 2002, Amy Quinn joined the US Navy to protect her country. She surpassed all requirements within boot camp. Her Master Chief made advancements towards her, which she rejected. The same Master Chief made it his mission to try and have her separated from the navy after being rejected. While deployed to the Red Sea for Operation Enduring Freedom, she was raped and abused numerous times by her fellow shipmates. They sprayed her with aircraft cleaner and lit her on fire. She filed an official grievance about the incident to her supervisor, who told her she was overreacting. Her report was not taken seriously, and the sexual assaults continued. She was retaliated against by her command for reporting the incidents and was discharged for having a “personality disorder.” Quinn A. (2016, May 19). *The Guardian*

In May 2007, Sgt. Chuck Luther had served seven months in the Middle East when a mortar went off, causing him to slam his head on concrete. He reached out for medical help after suffering from headaches and blindness in his right eye. At Camp Taji, the doctors stated he was malingering, and his symptoms were caused by personality disorder. He had passed eight psychological screenings prior to his deployment. He insisted to the doctor he did not suffer from a personality disorder. Sgt. Luther was confined to a small closet under 24-hour watch for a little over a month. The guards forced sleep deprivation, blaring heavy music in all hours of the night. The guards restrained Luther to the ground injecting him with an unknown medication that would cause him to become lethargic. He was forced by his commander to sign paperwork stating he suffered from the pre-existing diagnosis. He was told that it was the only way he would be able to get back home, and if he did not sign, then the torture would continue. The 36-

year-old sergeant suffered no mental health illness prior to his enlistment. Kors J. (2010, April 26). *The Nation*.

Not a single person has been accountable for these fraudulent discharges. The Department of Defense hasn't made any effort to go through the estimated 31,000 service members files to rectify their heinous PD discharges. Citizens need to understand what's happening in the military medical system.

Military doctors are under a Hippocratic oath to protect and serve patients, but they are also under a military oath to obey their command. That's where the conflict of interest comes in, when the command is telling doctors and nurses to get rid of service members who are not wanted. These providers are caught in a no-win situation: Disregard their Hippocratic oath and obey their command, or obey their oath, do what's right for their patients, and risk losing their careers.

A broader awareness of the way personality disorder discharges are being used to dispose of unwanted servicemembers needs to sweep this nation. These servicemembers' voices need to be heard, and these wrongful discharges need to stop. If no action is taken then these discharges are going to continue, and our heroes, who risk their lives to protect this great nation, will continue to suffer unfairly.

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