Military and Substance Abuse  
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This article is meant to assist soldiers and those who support them to identify the differences between substance abuse and addiction. In addition, it will identify some barriers to treatment and how to assist the soldier to overcome such obstacles. Recovering from addiction is a complex task which is unique to every individual. A soldier may have confounding issues related to their substance abuse such as co-occurring disorders like Post Traumatic Stress Disorder, Anxiety, Depression, or other mood disorders. There are resources at the end of this article meant for the addicted soldier. If you or someone you know is addicted, please reach out to one of the resources below. As you will read further, it may be a matter between life and death.

**STATISTICS**

It has been estimated that the amount of drug and alcohol abuse among military personnel is approximately the same as the civilian community. Despite the commonalities in numbers, there is a disparity in the amount of treatment they receive for drug and alcohol problems. Civilians have more access to treatment due to community support, additional resources, and less stigmas. Many times civilians have the support of family, friends, and even their employers to enter treatment. With respect to the military community it may be very different. As opposed to a civilian, a soldier may have obstacles that impede his or her ability to receive treatment. These barriers, unique to this population, will be discussed in this article.

**OVERVIEW OF ADDICTION**

“Substance abuse” relates to the misuse of alcohol, illicit, and some prescription drugs. Meant to alter one’s mood, they are easily abused, especially during times of great stress. Soldiers abuse these substances for a myriad of reasons. For some, it eases the pain of being away from their family; for others, it soothes anxiety from other problems such as depression, anxiety, or post traumatic stress disorder.
For whatever the reason, continued use of mood altering substances despite consequences associated with their use constitutes abuse or addiction. Although there is a distinction between an abuser and someone who suffers from an addiction, it should be noted that a substance abuser may be on their way towards addiction. In this respect, both need intervention.

Symptoms of abuse include:

- Recurrent substance use which results in the inability to fulfill major roles at work or home
- Use of substances in physically hazardous situations (i.e. drinking while handling a firearm or driving)
- Possible legal problems associated with substance use
- Continued use despite social or interpersonal problems related to use

Symptoms of addiction include:

- Marked increase in tolerance to the substance (i.e. are able to use considerably more than they were able to in the past)
- Withdrawal symptoms
- Difficulty cutting down or controlling use of substance
- Increased time and energy spent on obtaining and using the substance
- Social and occupational roles may be compromised by substance use (i.e. missing work due to a hangover)
- Negative consequences associated with use of the substance(s)
- Desire to cut down coupled with unsuccessful attempts

Whether someone meets the criteria of abuse or addiction, intervention is necessary to decrease the likelihood of more severe consequences. These interventions can be at several different
levels including many different members of the soldier’s support network. It may include superiors, other soldiers, friends, family, or professionals trained in the area of mental health and substance abuse.

Helping someone who is abusing substances takes courage and the support of others. In the past few decades, the military has been more responsive to the treatment needs of their soldiers. However, there are still barriers and stigmas that get in the way of soldiers getting treatment.

BARRIERS AND STIGMAS TO TREATMENT

John has been in the Army for five years. He was deployed to Iraq two years ago and is just coming home from his first tour. While in Iraq, he was on the front lines and witnessed a fellow soldier get killed in the line of duty. John’s wife and three children were ecstatic to have him home. However, it was difficult for John to adjust from being a soldier to being a husband and a father as the roles were so different. All three of his children were under 6 years old so things were stressful.

After the children and his wife would go to bed, however, John was unable to sleep. After a few weeks of sleepless nights, he started to drink alcohol to calm his nerves. Eventually, he began drinking earlier and earlier and his wife started to notice. It got to the point where John would reach for alcohol before even saying hello to anyone when he came home from work. There were times he couldn’t go to work at all due to a hangover.

Soldiers needing treatment are often met with stigmas and barriers which may lead them away from treatment. By inhibiting treatment, these barriers and stigmas only serve to further the damage caused by substance abuse and addiction. The following are a few of the main barriers to treatment. They are by no means an exhaustive list as there are numerous thoughts and beliefs that soldiers have that impede their willingness to get help.

Access to Programs

John’s drinking progressed and it got to the point where he became mean when he was drunk. He would run out of alcohol and take the car to go get more despite his wife begging him not to drive while under the influence. He started to miss work more regularly and eventually got fired from his job.

One morning, John woke up and started for the refrigerator. His wife had enough and threatened to leave him if he drank again. They had fought before about his drinking and he knew she was serious. John didn’t want to lose his family or his wife so he agreed to sit down and talk with her.

The first thing John said to his wife was that there was no treatment that they could afford. He felt like he wanted help but there was nowhere to turn. Luckily, his wife has already contacted the VA about treatment options. John was surprised to hear that there were options available to him. He would not have known this had his wife not investigated it.
There are programs available to help soldiers with both mental illness and substance abuse. However, many soldiers believe there is little access to these services. In addition, gaining access to those programs may be difficult if a soldier is impaired by a substance abuse problem, especially if it is accompanied by a mental illness. Soldiers may not know where to go, what’s available, or what the consequences are for accessing those services.

**Stigmas to Treatment**

Despite John knowing he needed help. He convinced his wife that he didn’t need treatment because he didn’t want the military to know that he had an alcohol problem. Without treatment, however, he continued to drink.

John’s wife again made a plea for him to get treatment. John’s reply was that treatment was for people who were “weak” and couldn’t handle it on their own. He insisted that he was stronger than his addiction and that he would be able to beat it on his own.

Being a soldier implies strength, courage, and fearlessness. However, there is a stigma associated with substance abuse that at first glance appears to contradict these attributes. To some soldiers, they see substance abuse as a sign of weakness. It may be perceived in a negative light going against some core principles. This simply isn’t the case. False ideas about substance abuse include it being some sort of flaw of character. However, substance abuse is a sign of a struggle, not of a weakness.

Common fears of getting treatment are that it will hurt the soldier’s career or that his or her superiors or fellow soldiers may look down upon them. There may be embarrassment and shame for having the problem. This only serves as a barrier to them asking for help thereby putting them at risk for further consequences from their substance use.

The truth behind substance abuse and addiction treatment is that it is a sign of strength. It is a sign that a soldier is taking care of a problem that needs to be professionally addressed. Getting treatment for substance abuse takes strength and courage. It is a fearless act that can serve to save one’s own life.
There is also a stigma that goes along with “failure.” Recovery from substance abuse is difficult and may take a great deal of time. Setbacks are normal and are not failures, simply a normal part of the recovery process. Of course, the goal of any recovery program if someone is addicted should be abstinence. However, if there is a relapse it is imperative that one commits him or herself back to recovery immediately and begins working again on their substance abuse issues.

**Attitudes Toward Counseling**

Not surprisingly, John continued to drink and his wife eventually left him. With each drink he took, his belief that he could one day beat his addiction on his own slipped away. One day, when visiting his kids, his wife again intervened and suggested counseling.

John argued that a civilian counselor would not understand what he went through in Iraq. He believed that they would judge him and not understand why he drank and how it felt to lose your children. Begrudingly, he went to see a counselor that his wife suggested.

The counselor was a civilian yet she was trained in addictions and specialized in treating addiction in the military. It was evident in the first session that she was skilled and trained to address John’s needs. Although she had never been in combat, she seemed to understand the dynamics and some of the experiences John went through. John opened up about his addiction and she was able to educate him on alcoholism and how to stay sober.

John continued to go to counseling and was able to stay sober.

The mental health field has been supporting veterans for many years. However, there is still a stigma associated with seeking counseling. A counselor may be seen as someone who doesn’t understand the soldier’s life because they are a civilian. They may be seen as an “outsider” or someone who could potentially limit their clearance or placement in the military. Questions of confidentiality often come up as a result of this.

Some soldiers have had bad experiences with counseling in the past. Others may believe that counseling is solely for people who have mental illness. There is also the idea that many soldiers have that they cannot be helped by anyone, much less someone who does not know them. Counselors are trained to deal with substance abuse issues and the problems that go along with them. The prognosis of resolving some of these issues can be good provided the soldier is motivated and has support.

There are also other alternatives to going to see a counselor. Other options include self-help groups such as Alcoholics Anonymous or Narcotics Anonymous. There are many books out there
surrounding addiction including workbooks. The important thing is that the soldier is addressing the substance problem directly. Remember that professional help may be necessary.

**WHAT A CAREGIVER CAN DO**

*How to help with issues related to accessibility*

When addressing issues related to accessibility, basic needs have to be met before soldiers can get the services they deserve. Helping them may include providing information geared to helping soldiers with problems related to substances abuse. It would be helpful if, with the soldier’s permission, appointments could be scheduled and transportation could be provided. In the event that the soldier needs to set an appointment, offer to sit with them while they do it. Remember that reaching out can be scary and a supportive partner may be beneficial.

Often individuals in the support system do not want to “get the soldier in trouble.” It is important to note here that if there is a substance abuse problem, the soldier could be in danger. Not speaking up could lead to further problems, including death. Remember, individuals who meet the abuse or addiction criteria use substances with reckless abandon. They may drink and drive, overdose, or become suicidal. If there is a potential for substance abuse, speak with a professional to obtain more information.

*How to help someone with stigmas attached to treatment*

When addressing the stigmas of addiction, education is the key. Providing education to soldiers as well as their superiors allows them to assist others. In addition, it allows them to assist themselves in the event that they too are suffering from some type of substance abuse or addiction. Teaching soldiers that treatment is an asset, not a liability is imperative. It is important to empower the soldier so that he or she knows they are doing the right thing.

Prejudice among substance abusers and addicts are out there. By addressing some of the fears associated with seeking treatment, a soldier can decrease the stigma he or she puts upon themselves. It
would be helpful to explore with the soldier what it means to them to be an addict or to have a problem with substances. There may be unique negative connotations not discussed here.

_How to help attitudes towards counseling_

The counselor who John went to see was a civilian, someone not attached to the military system. Some soldiers may prefer to go this route due to issues of confidentiality. However, for whatever reasons, a soldier may need to seek counseling within the VA system. Counselors here may also be civilians without combat or direct military experience. In both scenarios, it is beneficial to ask what their experience is with addictions.

Helping a soldier see that someone else can help is a challenging task. Education is again key here. Encouraging the soldier to ask questions that he or she may have is a central component of the counseling relationship. If their concern is about confidentiality, have them ask the counselor about this before engaging in counseling. Challenging the notion that counseling is only for individuals with “emotional problems” or the “mentally ill” is essential. Sharing a personal experience about going to counseling may help reduce the stigma and impart some of the benefits of counseling.

It may be helpful to ask a counselor if he or she will talk to the soldier anonymously. In this case, the soldier is free to ask any questions they may have regarding what counseling is like and what the benefits are. It is important to note that a consultation like this cannot answer every question; it is simply a means to assist the soldier in becoming comfortable in speaking with someone.

**CONCLUSION**

Addiction is a problem that isolates thousands of soldiers every day. They suffer in silence with stigmas and barriers creating a wall around them that impedes treatment. Speaking up against substance abuse in the military is a necessity. Remaining silent only perpetuates a problem that breeds in secrecy.
It is the job of every individual, civilian, veteran, and professional, to break down stigmas and shatter these barriers. Addiction wins when soldiers and those around them remain silent. Through assessment and education, we can continue the war on addiction waged so many years ago.

References

Books

Unfortunate Hero: The Soldier's Path From Trauma and Addiction (2010) – Evans, Katie

Websites


http://oas.samhsa.gov/veterans.htm - Substance Abuse and Mental Health Services Administration

http://www.samhsa.gov/militaryfamilies/ - Substance Abuse and Mental Health Services Administration

http://www.military.com/features/0,15240,156956,00.html – War Vets Fighting Addiction

http://acsap.army.mil/sso/pages/index.jsp - Army Substance Abuse Program Website

Gift from Within Articles

http://www.giftfromwithin.org/html/safety.html Trauma and Addiction

http://www.giftfromwithin.org/html/military-family-resources.html Military Family Resources

http://www.giftfromwithin.org/html/articles.html#veterans Articles for Veterans

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