



POST TRAUMATIC STRESS DISORDER IMPACTS ALL LEVELS OF LEADERSHIP

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Since I served in the Middle East for approximately 30 months, the thoughts and reminders of my time there come and go so often that I really cannot acknowledge them. It is also tough acknowledging them to peers or superiors without concerns that they may see weakness.

I had the toughest time dealing with these constant thoughts and reminders as I transitioned from a unit that frequently deployed to taking over duties as a brigade command sergeant major of a Basic Combat Training unit at Fort Benning, Georgia. I continued to embody those traits and characteristics that I thought had kept me and my Soldiers alive for 32 months in the Middle East and incorporated them into my everyday work habits. The 192nd Infantry Brigade could not be doing better.

Unfortunately for most of the first nine months, little did anyone realize their brigade CSM was not doing well at all. I was able to perform my military duties on a daily basis without any negative thoughts whatsoever until I attended a Soldier's memorial service in February 2006.

As I walked into the chapel, my body began to tremble, and my mind began flashing back to memories of the 16 Soldiers I had lost during my last deployment with 2nd Squadron, 11th Armored Cavalry Regiment (ACR). The chaplain began to speak and then the roll call was given. My eyes began to water and then tears rolled down my face like a waterfall. How did I get here? What was the root cause of all the issues? What did I see that triggered these constant memories? I had no control; being a Warrior and a member of a team reduced to this was tough to swallow. After the roll call finished and we all stood up I said, "OK, the worst is over." Then, like a knife in my heart the bugler began playing Taps. My knees buckled and I couldn't feel my legs so I grabbed onto the front bench. The brigade commander, Colonel Charles W. Durr, Jr., looked at me and immediately knew this was having a negative effect on me. We talked briefly later that day about it being worse for me than any memorial I attended in Iraq.

After the memorial service, I began to lose control of my eating habits, and nightmares came every night. I began to work longer hours in order to not have any free time. The only problem is that you can only work so much! What triggered this? Are my fellow Soldiers having the same problems?

On May 5, 2006, while attending a course at Fort Jackson, it all came full circle when I found myself crying continuously for about an hour, thinking about those Soldiers who died in Iraq. I



Courtesy photo

Command Sergeant Major Samuel M. Rhodes, Sr., attends a memorial service for a Soldier while serving in Iraq.

had awakened early in the morning from one of the worst dreams I ever had. It wasn't really a dream — I was there. I have seen the aftereffects of losing two great company commanders and seeing their bodies placed in bags. It was then that I began receiving counseling. I had been diagnosed in March of 2006 with Post Traumatic Stress Disorder (PTSD), but like many leaders I put it off — too busy. Too busy almost cost me forever! From talking with Yvonne Wilbanks, Fort Benning's Alcohol & Drug Control Officer, I learned that PTSD needs to be treated early to try to avoid other serious problems such as depression and substance abuse. Her office, the Army Substance Abuse Program, had sponsored training on PTSD in conjunction with National Depression Screening Day at my unit.

While I did not develop substance abuse issues, I gained weight and was up to 260 pounds. Even at this weight I was still able to run and do PT without a lot of acknowledgment of my weight. I thank God for the ACUs that covered that up. The weight issue has since been fixed through continued dedication and with the help of the medical staff at Troop Medical Clinic (TMC) 5.

Later that summer, I was not feeling very well so the primary physician assistant sent me to the hospital to have some lab work done. Early the next morning I received a phone call from the TMC; the caller was different than normal and sounded a little anxious.

SYMPTOMS OF PTSD

- Reliving a trauma, intrusive memories
- Staying away from places/people that remind you of the trauma
- Feeling on guard, irritable, or easily startled
- Difficulty sleeping, outbursts of anger

PTSD MAY OCCUR WITH OTHER PROBLEMS

- * Depression
- * Anxiety
- * Substance abuse
- * Fear
- * Social anxiety

She said, “CSM, you need to come to the TMC right now.”

I replied, “I am in a meeting.”

She said, “CSM, don’t make me come get you.”

I went into the physician assistant’s office, and he began to tell me about the lab work and how I was showing signs of heart disease. He said if I didn’t do something about it soon, he couldn’t predict the timeline.

We talked about the findings and about my family history; my father and his brother both passed away at the ages of 64 and 65 from heart disease so the family history was not helping.

Having received this information along with a booming blood pressure, I took a hard look in the mirror and continued receiving counseling from a combat stress doctor from Walter Reed Medical Center via the telephone. I was also counseled by him in Iraq during my last deployment. I started dieting and working out harder and harder. The TMC folks continued to stay on top of me every day about my blood pressure checks and monthly lab work.

I found out during this period that the root causes of all my issues were the anxiety and the emotional instability I was dealing with from my extended stay in the Middle East.

Though we as leaders choose to fight most of our individual battles by ourselves, it’s great to know we have excellent medical personnel who care about Soldiers of all ranks. We definitely don’t appreciate them enough! I remembered Ms. Wilbanks had

SUICIDE WARNING SIGNS

- ✓ Current suicide thoughts/plan
- ✓ Perceived lack of resources
- ✓ Perceived loss of military career
- ✓ Domestic issues
- ✓ Financial issues
- ✓ Relationship problems
- ✓ Prior suicidal behavior
- ✓ Alcohol/drug abuse
- ✓ Sudden purchase of firearms/weapons
- ✓ Legal problems
- ✓ Depression/PTSD
- ✓ Traumatic childhood experiences

also told me leaders can be helpful to their Soldiers by being aware of symptoms of PTSD and making it a priority to get training and assistance for each Soldier. I believe my experiences have made me more sensitive to helping my Soldiers.

After six months, I lost more than 40 pounds and can run like the wind again; I feel terrific! Emotionally, I still have issues whenever someone mentions a Soldier’s death, but all in all I have recovered to a degree.

Who would have thought a Soldier could have a PTSD incident while running down the road in a garrison environment? I was running down Moye Road at about 0545 hours when all of a sudden three loud bursts of gunfire rang out. My heart felt like it stopped on the first burst. Then there was a second burst and then the third. My eyes began to water — I knew instantly what those three volleys were for. It was a firing squad from the 1st Battalion, 50th Infantry rehearsing for a funeral support mission. I tried to continue running, but I found myself remembering that time and time again this has happened over the last four years.

Post Traumatic Stress Disorder in my opinion is not curable and will remain a part of my life forever. I am dealing with it by trying to replace any bad memories

with the great memories of those fallen comrades and what this life is because of their efforts.

We as leaders do not get trained on how to react to losing our Soldiers or even losing our fellow leaders during combat. We continue to learn and grow through the struggles of our current conflict. It’s an instinct to be a Warrior. It’s also an instinct to be saddened by the memories that come and go due to the loss of these great Americans. I am not able to develop the instinct to allow the memories of these events to disappear from my mind. Ms. Wilbanks explained that when these memories interfere with normal functioning or if the thoughts turn to suicide, to get help immediately.

As I sat in the 47th Infantry Regiment’s reunion last year, I talked to some of the heroes who fought in previous wars. I talked to them specifically about what I was feeling and going through on a daily basis.

The best words I heard were, “Never forget, but let it go.” I would add, “Never forget, get help, and let it go.”

Command Sergeant Major Samuel M. Rhodes, Sr., is currently serving as the brigade command sergeant major for the 192nd Infantry Brigade on Fort Benning, Georgia.

WHERE TO GET HELP

- National Center for Post Traumatic Stress Disorder — (800) 296-6300 or <http://www.ncptsd.va.gov>
- Military One Source — (800) 342-9647 (If overseas precede number with U.S. access code)
- Military Mental Health Organization — www.mentalhealthscreening.org
- National Depression Screening Day — www.MilitaryMentalHealth.org (anonymous screening)
- Emergency call 911
- Chaplains, Troop Medical Clinics, Mental Health Providers, Emergency Rooms, and National Depression Screenings