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Vietnam Veterans' Experiences with Combat-Related Limb Loss: The Importance of Social Support



Report prepared for the Amputee
Veteran Research Project, An
Initiative of the Indiana Ohio Center
for Traumatic Amputation Research.



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A. EXECUTIVE SUMMARY

A1. Background and Methods

The Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research (IOCTARR) conducts policy-focused research on the various physical and mental health needs of veterans with combat related amputations, also known as traumatic amputations. The aim is to help determine the best ways to implement the rehabilitation processes for traumatic amputees of present and future conflicts.

Researchers at IOCTARR hypothesized that United States military personnel who experience an amputation resulting from combat are likely to have unique rehabilitation needs, especially over the life-course. Most such needs are not well understood and are not adequately addressed. However, the multiplicity of conflicts the nation currently faces underlies the urgency of both better understanding and more fully treating such veterans. Indeed, the Department of Defense (DOD) now considers the goal of vastly improving the long- and short-term rehabilitation of military personnel experiencing traumatic limb loss to be a critical issue. Despite this, little is known about the long-term outcomes of traumatic amputation arising from war. Without this information, the care of US personnel experiencing limb loss will remain less than optimal.

The Center received a funding award from the DOD in 2006 to examine these issues with Vietnam veterans who experienced combat-related limb loss (Grant#W81XWH-09-1-0375). Such veterans have lived with their amputations close to, or slightly more than, 40 years.

Understanding their experiences, the basic thrust of the project, should shed substantial light on the nature of both the short and long-term needs of current combat-related amputees.

The Amputee Veterans Research Project (AVR) unfolded in three phases:

- Phase I developed a large data set of the Vietnam Veteran amputees (the registry database, n=453) who agreed to participate in various phases of the study. The registry collected demographic and injury-related information from each participant.
- Phase II collected in-depth interview data from a randomly drawn sample (n=20) of registrants. These interviews probed participants' health and welfare needs during the first 12 months of injury and over the life-course.
- Phase III constructed a 159 item survey instrument administered to the entire registry to understand the health and quality of life issues associated with traumatic amputations. Nearly half completed the survey (n=247). Researchers also conducted follow-up interviews with two sets of respondents (the Phase II interview veterans and a new set of veterans) to develop a keener understanding of survey results, especially around social support issues.

This report summarizes the main findings from the final set of interviews (n=18) that focused on the nature, and experiences with, social support

A2. Conceptual Definitions of Social Support and Care Giving

It is well documented that having strong networks of social support can help combat exposed veterans adjust to their injuries and experience and improve their long-term prospects and quality of life¹. Social support refers to those aspects of social relationships that provide a sense of self-worth and offer resources in tackling life's troubles.² As such the primary purpose of these interviews was to better understand the nature of social support. All of the veterans were asked to describe who they perceived as supportive and then were probed about the variety of ways they were supportive. In terms of the kinds of support received, well identified categories of support that are commonly used to understand support in the literature emerged. In addition, some veterans described instances of caregiver support. These kinds of support are defined in Table 1 below and are used to categorize the findings.³

TABLE 1: TYPES OF SOCIAL SUPPORT

Type	Description
Emotional	This type of support often involves physical comfort such as hugs or pats on the back, as well as listening and empathizing. With emotional support, a friend or spouse might give you a big hug and listen to your problems, letting you know that they've felt the same way, too.
Esteem	This type of social support is shown in expressions of confidence or encouragement. Someone offering esteem support might point out the strengths you're forgetting you have, or just let you know that they believe in you. Life coaches and many therapists offer this type of support to let their clients know that they believe in them; this often leads to clients believing in themselves more.
Informational	Those offering informational support do so in the form of advice-giving, or In gathering and sharing information.
Instrumental	Tangible support includes taking on responsibilities for someone else so They can deal with a problem or in other ways taking an active stance to help someone manage a problem they're experiencing. Someone who offers you tangible support may bring you dinner when you're sick, help you brainstorm solutions (rather than telling you what you should do, as with informational support), or in other ways help you actively deal with the issue at hand.
Caregiver	By care giving, we meant intensive unpaid assistance and support that involves extensive levels of a variety of types of support provided to the individual over a specific period of time.

¹ Solomon, Z., Mikulincer, M. and Avitzur, E. 1988. Coping, locus of control, social support, and combat-related posttraumatic stress disorder: a prospective study. *Journal of Personality and Social Psychology*, 55 (2): 279-85.

² Berkman, L.F., Glass, T., Brissette, I and Seeman, T.E. (2000) 'From social interaction to health: Durkheim in the new millennium. *Social Science and Medicine*, 51, 843-57.

³ House, J.S. *Work, Stress and Social Support*, Reading MA: Addison Wesley 1981

A3. Summary Of Key Findings

LIMB LOSS CHALLENGES

We asked the veterans to briefly describe what it has been like living with combat-related limb loss for the past 40 somewhat years. The top ten consequences and challenges of living with combat-related limb loss -- either mentioned by at least half of the veterans when discussing what life has been like since their injuries, or mentioned by at least one veteran when asked what the biggest challenge was, or was perceived by the veterans as a physical consequence of their limb loss -- are:

1. Adjusting to civilian life
2. Accepting limb loss, and wanting to feel normal.
3. Living with physical limitations, not being able to do things, and declining mobility over time.
4. Learning to use, and problems with, a prosthesis.
5. Dealing with life-long pain (stump, phantom, back, other pain).
6. Maintain emotional health and dealing with PTSD.
7. Dealing with the stigma of limb loss and the Vietnam war.
8. Dealing with the government and benefits.
9. Experiencing co-morbidities such as diabetes, overweight issues, cancer, heart related concerns, arthritis, hepatitis C, and emphysema.
10. Problems with the stump area and skin issues.

It was like, what am I going to do now?... We were going to have a son and teach him how to play baseball (Brad, Above Elbow).

Being accepted by my friends and family but not wanting pity...I wanted to feel as normal as the next person (Ken, Above Knee).

I'm not as strong as I used to be. My upper body is diminished. I cannot walk great distances (Lewis, Below Knee).

The most challenging aspect was the ability to manage every new prosthetic. Each different than the old, which brought in new problems that I had to resolve (Josh, Above Knee).

I have phantom pain. Sometimes I can't sleep, it's hurting so bad. I also got arthritic pain. The good leg is worse than my bad leg because I have favored it so much (Marvin, Below Knee).

My emotional health is not good. I'm being treated for PTSD. I take a large amount of medication to keep my mental status in check (Lewis, Below the Knee).

The stigma attached to being a Vietnam veteran has bothered me (Victor, Above Knee).

Dealing with the government and the stress and anger...when they will blatantly deny [benefits you deserve] (Aaron, Above Knee).

The last four years my health really went downhill. I've got 25% lung function. I've got Type II Diabetes from Agent Orange. I just don't function well (Steve, Below Knee).

I have trouble with the skin on my stump. My stump sweats. The only thing I do is take the leg off for days (Nathan, Below Knee).

THE VETERANS' SUPPORT NETWORK

We asked the veterans to think about those people in their life whom they have found particularly supportive...that is people whom they could count on to be there for them or whom they could look to for help if they needed something. We asked them to reflect on this question in terms of the first few years after their injury and currently.

Nearly all of the veterans identified their wives or girlfriends, their parents, siblings and/or children, extended family, and veteran peers, especially those who had also experienced limb loss. Almost all of the veterans were members of veteran organizations such as Disabled American Vets (DAV) or Vietnam Veterans of America (VVA).

A few veterans also identified their friends (n=4), physical or mental health therapist (n=2), dogs (n=2), field medics (1), general social networks (n=3), care providers (n=1) and religious figures (n=1).

Wayne

Wayne lives in the mid-eastern region of the US. He was drafted into the Army in 1970 and injured in Vietnam in 1971. In addition to his below the knee amputation, he suffered a head injury and broken bones. He reports his current health to be very good but also reports being overweight/obese and having limb pain. His major challenge living with limb loss was learning to adapt to having an amputation, taking him about ten years before he accepted it. When asked to describe his sources of support, Wayne identified a strong support network.

At that time I was injured I was married, and my immediate family consisted of my mother, father and brother. I've been married more than once. I was married 13 years to my first wife. I was married to her before I went into the service. I have been married to my current wife for seven years.

I have three kids. They're grown, and they are 36, 32, and 27. My kids grew up with my combat limb loss and experiences. They just grew up with it, and even to this day, it's not anything special to them.

I belong to the VFW and Disabled Veterans of America. My Army unit has a reunion every two years. There were a few veterans around here that I struck up friendships with.

When I was injured, I was recently married, so I had my wife, and my parents were very good. My dad was ex-military, so we had something in common. But they were very supportive of me, especially afterwards. My first wife was supportive, and now my present wife, she's very good, and I've got a brother—both my parents are gone—but I've got a brother that's supportive too. And I guess my kids. They've always been real good about things and supported me a lot in my life. None of my family were that, feel sorry for you, type thing. They were just there to give you support, and help you do what you felt like you wanted to do.

WIFE OR GIRLFRIEND SUPPORT

When asked who was the most supportive person in the veteran's lives, by far the veterans mentioned their wives or girlfriends. This included ex-wives as some of the veterans had been divorced at least once.

They were further asked to describe the general attitude of their wives towards their limb loss and experience in combat and to describe how their wives were supportive.

Finally, they were asked whether they ever found such behaviors to be well-meaning but not supportive. Only two of the eighteen veterans answered yes to the over-support question. More common, was to describe instances of social support, especially esteem and emotional support. These included:

1. General Support
2. Esteem Support
 - a. Accepting and adjusting to amputee status
 - b. Standing behind the veteran in terms of what he wants to do
3. Emotional Support
 - a. Companionship - always there, cares for me, my 'rock'
 - b. Not prying about Vietnam experience, understanding
4. Instrumental Support
 - a. Someone to count on and take care of things
5. Informational Support
 - a. Giving advice

We just supported one another. But it's been wonderful.... I know in my personal situation I came back to a spouse who was very supportive (Richard, Army, KD)

My wife has been one that has always been supportive. She's never looked at me as an amputee. She's always looked at me as just another person which is, in itself, is a lot of support (Josh, Marine, AK).

My wife has been very supportive. She kind of learned, with my attitude, you know, that I was going to try things she'd say, okay go ahead, do it yourself (Brad, AE, Army).

She provides great mental support. She knows basically what happened but the other things that transpired over there are really hard to share with her. But I guess the best way I can explain it is that she's my best friend, my wife and she has been my rock. She was the best thing that happened to me (Lewis, Navy, BK)

My wife recognizes and understands what my combat experience was in Vietnam. She doesn't pry. If I talk about it she's not one that asks a lot of questions. We have a regular everyday man and wife relationship. What was in the past, to her, is in the past (Josh, Marines, AK).

My current wife has been very supportive. She's helped me deal with things that I haven't been able to deal with. She realizes when I reach a point that I can't deal with it anymore and she'll tell me let it go and she'll take care of it (Aaron, Army, AK).

She said to me, what are you going to do with your life? I said I don't know. And she said, well why don't you go back to school? She was the one that pushed me to go back to school. It was definitely her that made a big difference in my attitude (Jeff, Army, BBK).

SUPPORT FROM CHILDREN

Several veterans mentioned support received from their children (n=6). Overall the support the veterans received from children came not in the form of direct care giving or instrumental support, but through the children accepting their fathers and not treating or viewing them differently because of their limb-loss. In this effect the children played a major role in providing esteem and emotional support for the veterans. Harry's description below of his son's support is very similar to how the other veterans described the support they received from their children.

Harry

Harry lives in the mid-western part of the US. He was drafted into the army in 1966 and injured in January of 1968. He is a right above the knee amputee. He reports his overall health as good. He also reports currently experiencing arthritis, stump pain, other bodily pain, and PTSD. He is currently divorced after being married for 25 years, and his ex-wife recently passed away. He has three adopted children. Harry is closest to his oldest son and credits him for being the most helpful to him. Much of the support received from his son can best be categorized as esteem support, as Harry explains:

Probably who has been most helpful has been the son I semi-adopted. He's very good at not letting me feel sorry for myself. He had a phrase he used to use a long time ago. I was handi-abled not handicapped. Doing what I actually needed to have done but being, treating me as if I was normal otherwise. You know, as much as possible he treated me as the leg wasn't a problem....[So my adoptive son's] probably been the closest and done more for me than almost anybody else....Probably the best thing that my kids do is not treat me any different. I mean they obviously worry about me if I have to get to the, go to the hospital for something. Want to know if, make sure what the doctor's saying, if there's something we need to do, if I'm getting my medicine and all that kind of stuff. But it's more like treating me no different than if I wasn't an amputee. I think that's probably the best thing they've done....[so] he's the one, I guess when he was around 20 or something started me riding. He just harassed me until I did it basically and we used to sit and talk a lot about things. He asked a lot of questions and he went to the, something else that was very big to me. When the Moving Wall came to Cincinnati the first time, my wife couldn't find time to go with me. I was afraid to go by myself and he was the only one that would go with me.



A4.Implications for Social Support and Current Veterans

B. METHODS

This report provides descriptive findings from the final set of data collected for the Amputee Veterans Research Project. The specific aim of these interviews was to collect some context data on nature of living with limb loss, the biggest challenges with such, but most importantly, aimed to gather data regarding the nature and experiences with a wide variety of social support and care giving surrounding living with combat-related limb loss. The complete interview guide is available in Appendix 1.

We completed interviews with eighteen Vietnam veterans. The interviews were completed between June 1st and August 31st, 2010. Two members of the research team who were trained in oral history research conducted the interviews by telephone. The interviews were audio-recorded and lasted 30-60 minutes. Questions were structured but open-ended. That is, every veteran was asked the same set of questions but questions were open-ended to allow the veterans to share their own experiences from their perspective.

Analyses were completed by one member of the team with substantial experience in qualitative research on illness and disability from a sociological perspective, along with a graduate student research assistant. Interviews were transcribed verbatim by a professional transcriber and the resulting transcripts were imported into NVivo 8 qualitative software to facilitate managing the data.

These interview data are shared in two ways. First, a thematic analysis was used to make sense of the data. This involves the line-by-line coding of the text of the data and the organizing of its salient excerpts into descriptive categories. Patterns among the categories were then developed into major

themes to present the findings.

Second, we developed profiles of individual participants. These profiles present a rich understanding of the veterans' individual experiences, and the impact on them of these experiences, because they follow each man's story in one overall narrative rather than parceling out their experiences by specific themes as is done in the first half of the report (sections E-H).

The profiles are created by first reading the transcript and then removing all references to the interviewer's questioning and probes. Then the remaining words of the participant are edited to remove passages that are not important to the topic or repetitive. What results is a short narrative presented in the first person in the words of the participants.

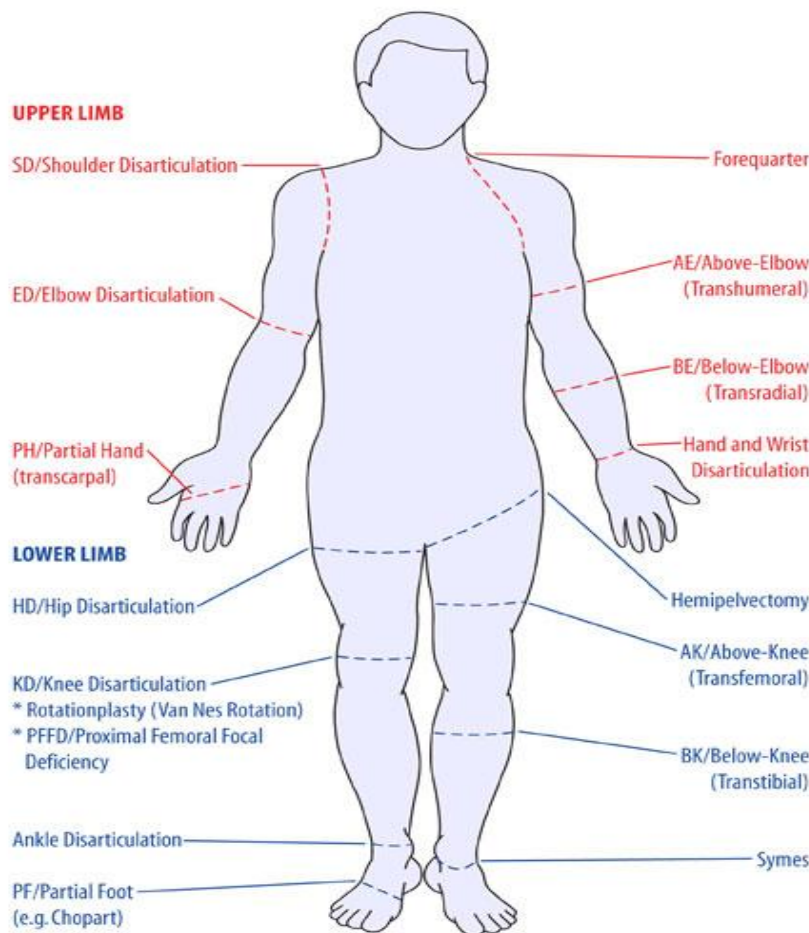
The study received Institutional Review Board (IRB) approval from the IUPUI-Clarian IRB board (Study EX #0908-85B). See Appendix 2 for the informed consent form.

All quotes appear nearly verbatim. Quotes were edited solely for such reasons as removing inaudible words and redundancies, correcting spelling errors, and clarifying idiosyncratic speech. In addition, it was necessary to include words at times to make the dialogue understandable. Following standard procedures, such insertions appear in brackets. The occasional sizable deletions are indicated by ellipses. Care was taken to ensure that at no time did any edits change the substantive meaning of the veterans' experiences or the authentic voices (manners of speech) of the quoted veterans. Finally, to minimize breaches in confidentiality, all veteran names in the report are pseudonyms.

The significance of the verbatim quotes cannot be overemphasized, as they constitute the heart of this report. In order to provide as much context as possible to their interpretation by the reader, each passage of direct quotation is followed by the first name of the veteran, his military division, and amputation level. This latter item, however, necessitated the use of concocted abbreviations to save space and to minimize distracting clutter around the quoted material. A guide to the meaning of these abbreviations and the number of veterans with these amputation levels is provided in Table 2.

TABLE 2: AMPUTATION ACRONYMS

Acronym	Amputation Type	#
AE	Above the Elbow	2
BE	Below the Elbow	1
AK	Above the Knee	5
BK	Below the Knee	6
BBK	Double Below the Knee	2
AKF	Above Knee/ Foot Symes	1
KN	Knee Disarticulation	1



Source: National Amputee Center: <http://www.waramps.ca/nac/terms/faqamp.html>

C. SAMPLE OVERVIEW

A stratified sample of eighteen men was drawn from the veteran registry database of 453 veterans. The strata were based on each veteran's scores on a survey question that asked, "During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors or groups?" Responses included a 5-point scale ('not at all' to 'extremely'). Half the sample were randomly selected from those who scored very low on the scale and the other half selected from those who scored very high. This produced a sample with varying degrees of social functioning in regards to social relationships.

All of the men were white, had a mean age of 62 years, and lost a limb on average at the age of 21. Some 72 percent (n=13) came from the Army and 26 percent (n=5) were in either the Marine Corps, Air Force, or Navy. Half (n=9) had enlisted in the service. Only one man rated his overall health as poor. The rest rated their health as fair-good (56%, n=10) and very good-excellent (39%, n=7).

Table 3 provides sample data on select health problems and injuries, and limb loss status. Pain (experienced all of the time or some of the time) related to the amputation injury, was common. Fully 89 percent (n=16 of the interviewees reported stump pain, 78 percent (n=14) reported phantom pain, and 89 percent (n=16) reported phantom sensation. Over a third (n=7) of the interviewees suffered from depression, and half (n=9) had PTSD. The sample also reported men who experienced head injury (28%, n=5) and broken bones (33%, n=6) at the time of injury, cancer (11%, n=2), diabetes (17%, n=3), back pain (94%, n=17), arthritis (50%, n=9), smoking (17%, n=3), and being overweight or obese (56%, n=9). None reported current problems with drug/alcohol abuse or heart disease.

Over three quarters of the group had only a single amputation (83%, n=15) versus double amputation (17%, n=3). The vast majority were lower limb amputees (83%, n=15). Finally, some 89 percent (n=16) of the men use a prosthesis of some kind.

TABLE 3: SAMPLE HEALTH AND INJURY CHARACTERISTICS (N=18)

Characteristic	%	N	Characteristic	%	N
Head Injury	28	5	Arthritis	50	9
Broken Bones	33	6	Back Pain	94	17
Smoking	17	3	Stump Pain	89	16
Drug/Alcohol Abuse	0	0	Phantom Pain	78	14
Cancer	11	1	Phantom Sensation	89	16
Diabetes	17	3	Use Prosthesis	89	16
Heart Disease	0	0	Single Amputee	83	15
Overweight/Obese	56	10	Double Amputee	17	3
Depression	39	7	Upper Extremity	17	3
PTSD	50	9	Lower Extremity	83	15

D. THE INJURY EXPERIENCE

This section describes.....

D1. Describing Amputation Levels and Other Injuries Sustained

All of the veterans were asked to describe the nature of their amputations. Their descriptions are categorized below by upper limb loss single arm amputations, lower limb loss single leg amputations, and double leg amputations. In addition, they were asked to describe other injuries sustained at the time of their injuries. These are listed under the sub-header, other injuries sustained and mostly include major burns, shrapnel wounds, and hearing loss.

Upper Limb loss Single

- Initially, I lost my hand traumatically on a blast from a rocket-propelled grenade. They tried to save my arm but there was really bad wounds at the shoulders so this, well the second amputation was cleaning up the first one from the field and then the next one, they amputated my arm and shoulder with shoulder disarticulation (Tim, Army, AE).
- There was fragments of bone up above my wrist. So they took it off above the wrist so that there would be less likely problems as a result of infection or sensitive areas, that sort of thing (Greg, Navy, BE).
- [I] leaned into the rear blade or the wind caught it or whatever but the next thing I knew I was about 20 feet away from the chopper on the ground and it pretty much severed most of the arm but when they took me to the base hospital there they had to take the rest off...the right arm [above the elbow] (Brad, Army, AE).

Lower Limb loss Single

- I have a below the knee amputation. On my right leg (Wayne, Army, BK).
- It was caused by what they call a toe popper and it was a can of C-rations—peaches actually—filled full of rocks and dung and it shattered everything in a boot and shattered the leg on up to where they had to amputate about four and a half inches below the knee and it happened when we was on patrol. [It was my] left leg (Steve, Army, BK).
- It's right above knee. I've probably got maybe about a seven or eight inch stump. Then there is a few other shrapnel, minor shrapnel wounds here and there (Harry, Army, AK).
- But when I got shot in my shoulder and the arm and in the lower leg it was a, the leg was the round that went in the back of the knee and the round ricocheted off the kneecap and went down the marrow of my bone lodging in the ankle of my foot. So that took me out of the field (Josh, Marine, AK).
- I'm a left, below the knee amputee with a very short residual stump and that's the extent of the amputations (Lewis, Navy, BK).
- We were out on a recon mission and I had two men previously wounded from land mines and I had called in a helicopter to try to get those medevaced out. We were 26 miles on the

wrong side of DMZ at that time and when the chopper got there [it] was hit with an RPG and it blew up and I tripped a second land mine which blew my right leg off at the knee, blew the calf out of my left leg, blew the ankle out of my left leg, put shrapnel through my knee and thigh of my left leg. Also had a hole blown through my groin of my right leg that was left big enough I could lay my arm down in it...we were there for about four more hours. Out of a 20-man team we had five triple amputees, four double amputees and the rest of us were missing a leg, a hand, or an arm by the time the government got there to get us out which was about three and a half hours later (Aaron, Army, AK).

- We were on a troop deployment...and what led to my injury was we were coming out of a cold LZ, and we took some machinegun fire and a bullet round hit the transmission behind me and caused the airplane to become erratic and we were going down and [as] the pilots tried to put it into a little opening in the jungle I saw that we were going to hit pretty hard and about six feet off the ground I jumped and landed on the ground fine and the helicopter nosed into the trees and it flipped over and the tail rotor caught me in the left leg and severed my leg right at the knee (Ken, Army, AK).
- I've got a right AK, above the knee (Victor, Army, AK).
- Left leg [below the knee] (Derek, Air Force, BK).
- [I lost my leg] below the knee (Nathan, Army, BK)
- I had the leg blown off. My left, below the knee (Marvin, Army, BK)
- Well my legs were knocked half from under me. I was not an amputee at that particular moment. My left leg was so mangled behind the knee that when I got back into an evacuation hospital that's when they amputated; it was a knee disartic (Richard, Army, AK).

Double Lower Limb

- I lost both my legs below the knee. I'm a BK amputation (Colin, Army, BBK).
- It blew my right boot completely off and my left leg was mangled pretty bad from the explosion also. When I actually gathered my wits and sat up I looked and my right foot was still in the boot but it was only hanging by the Achilles tendon at my ankle. It was just a string from the Achilles tendon. The foot was, instead of being out in front of me was hanging down just by that. [My foot] was blown off all but maybe the last, you know, quarter inch or half inch of tissue and muscle that was attached at the Achilles tendon. I have both knees—so I'm off below the knee, I'm bilateral BK. My left leg is actually shorter than the right. The right one is about 10 inches long below the knee. The left one is about two inches below the knee (Jeff, Army, BBK).
- I lost my right leg because of the explosion. I lost my right leg above the knee, just above the knee and then I have a Syme's amputation which is the amputation, partial amputation of the left foot and how that is is they come in at the ankle parallel to your sole to the ankle and then down. They bone it out and then your ankle pad, your heel pad, becomes the walking end of the stump. Yeah, about 80% of the foot, 80 to 90% of the foot (Jess, Marines, AKF).

Other Injuries Sustained

- Generally what happened was I was hit by a blast and hit directly by a rocket-propelled grenade which blew up the right side of my body and I lost my lower orbital rim and I got head injuries and lost part of the right side of my face and I had a sucking chest wound which I lost part of my right lung and I had wounds to almost all the vital organs, losing parts of most of the vital organs on the right side—liver, kidney, right kidney, I don't know, the list is pretty long but just say most vital organs on my right side of my body. I did not receive any wounds to the legs or my left side of my body... I also lost a lot of hearing in my right ear and now as I'm aging I'm losing some in my left ear so it's becoming a problem...I had so many other wounds—I left out lost a lot of teeth and dental wounds and so on, a lot of shrapnel in the mouth —so I was in the hospital a long time...I have a lot of problems with my facial wounds. I lost my right sinus and my nose was smashed so they had to kind of put it all back together and I have a lot of trouble with, when the normal person has like a sinus attack I have a major, my face gets all red and there's no sinus to drain and so on. It can be really uncomfortable. ...And I had a lot of trouble with my right eye...the orbital rim again was gone so they had to do surgery to build up that bottom of my eye to keep the eye structure around it. A lot of cornea abrasions. After the wounding when I was in the hospital in Japan after my evacuation from Vietnam, I had a cardiac arrest and central nervous system seizure and I went into a coma for about less than a day (Tim, Army, AE).
- I lost the sight in my right eye and I've got various scars from the shrapnel. Yes, some [hearing loss]. Nothing major at that time but it's like it's starting to get a little bit worse (Wayne, Army, BK).
- I had the right leg they wanted to take too. It was kind of mangled up. I had rocks and debris in the undersides of my arms that looks like polka dots and everything but other than that no. I got injured, a back injury a little bit but other than that, no....You have hearing loss at the time and then when they hit me with the band saw without any medication then when I woke up I couldn't hear for about eight hours and the next day I couldn't see for about eight hours but it all come back (Steve, Army, BK).
- I had a burn on the side of my face that it ran from right below my ear kind of up towards my eye and I had perforation injuries. But actually when you looked at, when I saw other patients in the hospital that had been involved in lesser calamities there was a number of them that had a lot less injuries than I did because mine, I have impaired hearing in that right ear but I didn't have any injury to my eye and the pieces of that waterproof paper that were blown into my face finally came out so there's no scarring or no burns or anything (Greg, Navy, BE).
- Then there is a few other shrapnel, minor shrapnel wounds here and there. There was hearing loss which has just gotten progressively worse. There was a, I guess I had a hole in my right ear which healed up (Harry, Army, AK).
- I had a wound in the shoulder that came out the back and I had another wound in the right arm that went in above the elbow and came out below the elbow. I had shrapnel in my legs but that was at a different time and another time I was shot in the left arm but a graze wound

that needed no care. The shrapnel in the legs needed no care. I took care of that myself in the field (Josh, Marine, AK).

- I've got some scars from that but mainly it was just the arm (Brad, Army, AE).
- Left thigh, most of the back muscle of thigh was destroyed in the bomb blast or the land mine explosion. Injuries to the groin, right leg, right ankle, right eye (Lewis, Navy, BK).
- I've got a bunch [of injuries related to the explosion], I've got a lot of scar tissue on my left arm. There's a lot of other scars. I've got some scars on my buttocks and also on my hand, my left hand and that's about it (Colin, Army, BBK).
- My left leg was mangled up pretty bad and I had shrapnel throughout my body. I actually still have the wallet, I had a wallet in my right back pocket that went through the wallet into my buttocks. I have shrapnel throughout my body. There was a lot in my face but over the years most of it came out and there was a lot in my left hand and my left ulnar nerve was damaged from shrapnel and when I had eventually got to the hospital, because of the ulnar nerve damage, my left hand was clawed and I was not able to move it for more than a year. Yeah [I had hearing loss], I was actually unable to hear very much for the first couple days and I had severe tinnitus ever since and I actually filed a claim many years later for service connection for my hearing but they were more, so concerned when all my records, it was talking about the traumatic amputations, and the ulnar nerve damage and the shrapnel. They really didn't pay that much attention to my hearing until years later (Jeff, Army, BBK).
- No [I didn't sustain other injuries], not really (Ken, Army, AK).
- Well, from my right leg it had taken meat all the way up from the boot top to above my knee off the inside of the leg and severed the femur and then on the right side I had significant shrapnel wounds from the foot up to about halfway up my calf all by my side...I had shrapnel wounds in the calf, took a big hunk of meat out of my calf. Got shrapnel wounds at my knee. Took like a silver dollar size piece of meat off the interior part of my knee and then like I said on the back side of the thigh a fair amount of shrapnel wounds there too...I did have some hearing loss. [And its remained a problem] I went in for a hearing test when I was working down in Houston during the eighties because I noticed I wasn't hearing. Conversations in the room would muddle things together, you know, and [the doc] said my hearing range loss wasn't overly bad but he said you're just sensitive to it. ...[I also had some infections in my wounds]. On the left end of the stump I was infected (Jess, Marines, AKF).
- Yeah [I had other parts that were affected], the only place I did not get hit was in the right arm and the head. I got it on the left arm, my left knee, or my left leg's pretty screwed up—excuse me, pretty messed up. The shrapnel went in one side and come out the other side, you know, come clear through me, come out my hip. I had—ooh, I had to admit this to you—ah, I still have a lot of shrapnel in me and some shrapnel moved and infected one of my testicles and they had to remove it (Victor, Army, AK).
- Both eardrums were blown right out and I still have hearing loss today for this time. I have a disability rating for that (Derek, Air Force, BK).

- I was laying, when they were carrying me out of the jungle on the back of an APC, I was laying there and I got hit in my right arm as we were leaving...I think it was just a piece of shrapnel that hit me. You know, because we had quite a battle trying to get out of there. Yes, absolutely [I also had hearing loss]. In fact, it was just like muffled and ringing in my ears just so severe for I don't recall how long. I know I complained about it a lot when I was in the Army hospital and they did testing and said it was, the ringing was I forget how you say it, tinnitus or tinnitis....I [also had an infection] from surgery at the Army hospital. I ended up with staph infection and got real sick from that (Nathan, Army, BK).
- And then I had my right leg was, I had a broken by shrapnel that went through right below my knee and I almost lost my foot and my toes—well, you lose your toes if you lose your foot—and then my left arm was all pretty well banged up. A lot of shrapnel and broken bones...Yeah. I have shrapnel in both my legs, up my back, and in my left arm.... I lost partial hearing in my left ear....[and then] Just my toes on my foot were broken and I've never had the toes get to a point where they're any good. [If] anybody touches them or plays with them it's like, it drives me nuts. It hurts and the bottom of my foot is real tender because there's still metal there and like I said, I almost lost that foot. There's a scar that goes from the top of my ankle all the way around the bottom of my foot.....Oh, yeah [there are parts that bother me today from my injuries]. Yeah, like again my right leg, my good leg, has always given me problems as far as soreness and aching and whatever else. And my left hand has, in the last 20 years, just continuously seems to get worse....I also have hearing aids now...I mean I think that age has something to do with it but I've always had a problem with my left ear and not being able to hear out of it very well and when I put my hearing aids in I can hear other things that I don't hear when I don't have them in—birds, chimes, you know, things like that (Marvin, Army, BK).
- I had experienced a fair amount of acoustical trauma prior to this incident. One significant event was when my medic and another medic were literally, my medic everything from his ribcage down was blown away and the other medic was thrown about 100 feet away and at first we couldn't find him and then we found him and it didn't look like it was a scratch but he was deceased. And that was a significant acoustical event at that time. I have, to answer your question more specifically, yes, I have tinnitus that I'm sure is directly related to all the acoustical trauma (Richard, Army, AK).

D2. Immediate Experiences Pre-Injury

Nearly all of the veterans experienced blast injuries through direct combat. These injuries included road mines, shotgun mines, RPGs, land mines and booby traps, etc. One veteran injured in direct combat was injured by his own hand grenade, which detonated prematurely. Two veterans sustained direct combat non-blast injuries. This included one who was injured in crossfire and another who was injured by a helicopter blade after the helicopter was shot down. One veteran sustained injuries in a non-combat situation, when wind blew him into the rear blade of a helicopter. Finally, one was injured in the battle for Hamburger Hill, but the circumstances surrounding his injury remain unclear. His experience is therefore coded as unsure of combat versus non combat or blast versus non-blast injuries.

Direct Combat (Blast Injury)

- I was hit by a 122 rocket, an artillery piece (Wayne, Army, BE).
- I was an infantryman and that morning, leaving our field camp we were put aboard trucks for the first time which we thought was pretty cool because we always had to walk everywhere. I happened to be first truck in line as we were moving out down the road a ways and I can't remember exactly how long we were moving and there was a command detonated road mine set up right underneath me. I was in the back of the truck standing up behind the driver and our whole squad was in the truck. Everybody was injured. I guess mine was the most severe because it was right straight underneath me and it crushed all the bones between the knee and the ankle, they weren't able to be repaired. I had various shrapnel wounds and then I was airlifted out shortly after that to the hospital (Derek, Air Force, BK).
- Our basic philosophy and mission was just to track down enemy coming across the border of Cambodia into Vietnam so we did a lot of traveling up and down the Ho Chi Minh Trail. There was a lot of trails from the Ho Chi Minh Trail coming into Cambodia and around An Loc and our entire unit moved from the Bien Hoa area up to an area called Tay Ninh Base and Tay Ninh Province which was near Black Virgin Mountain and that was a very hot spot at that time. And so we were doing all these search and destroy missions around the area but it was a real hot area. A lot of, North Vietnamese Army regulars we would run into and more so, you know we didn't really run into very many of the Viet Cong. This was pretty well prepared Army and so I got shot March 5th of 1970 and we used to find all these bunker complexes in the jungle and I mean they were amazing craftsmen and building their little outposts. So we ran, we found all kinds of bunker complexes. You know, we did this quite often and we would just search them and this particular day we found one and we still found a lot of supplies and stuff where they had just apparently left when they heard us coming and our commander, he wasn't, I hate to say it but it's true. Our commanding officer at that time, everybody was unhappy with him and he was pretty green and we did a lot of risk taking and we were getting a lot of guys wounded and killed and he took us back in there the next day, you know, just to see if we could catch them. Well, they were waiting for us because the jungle is so thick we went in on the same trail that we had busted the day before and I was in the lead armored personnel carrier and we took like four RPGs and one of them came through the side of the armored personnel carrier and took off my right leg. So then I crawled off the top of the armored personnel carrier and started crawling through the jungle for help but it took my leg completely off except for just, oh, I don't know if it was just a skin or muscle about big around as your finger and so that, I was just trying to crawl for help.

And we were pinned down. We couldn't go anywhere because the driver was hit. I was on the right machine gun and my sergeant got blown off and I jumped off to pick him up off the ground and he motioned and shoved me to go get back on the other armored personnel carrier behind us and I took off running and I looked over my shoulder and nobody was following me so I stopped and looked and this other sergeant was waving me to come back so I ran back and climbed up on top of, got back in the APC and he wanted me to take over his machine gun which I did and he was out of ammo so I went back down and flagged a APC to get some ammunition and as soon as I stood up with more ammunition and started reloading that's when the LPG came through and hit me (Nathon, Army, BK).

- The one that I hit. They call it a shotgun mine and it was a pretty big one and all I can remember is going up in the air and it seemed like 10, 15 feet in the air and I don't know if it was that high or not but I just saw a bunch of black smoke and I thought the guy behind me tripped it and I landed on the ground and when I landed I felt my leg go into the hole and I knew it was me, naturally, and I just laid there for a couple seconds, try to figure out what was going on and then all kind of people were around me. I had two medics come across a minefield to get to me and they did an exceptionally good job of getting me patched up because I'd have never made it (Marvin, Army, BK).
- One of the fellows who was a senior NCO, he physically detonated a land mine. A Bouncing Betty type which of course is the, it's American made and... actually it goes off twice. It goes off in the ground and then it jumps up and like you said about knee-high, waist-high in that general, it goes off again and it throws shrapnel in basically 360 degrees. We were actually getting ready to set up a night defensive perimeter. We just pulled into a night defensive perimeter when it went off and he was coming up a little rise and I was going down the same rise when it went off. I spoke to him because he was an E7 Sergeant First Class and I had made Staff Sergeant E6. He and I were the senior NCOs in the field and he was coming up the rise, I was going down the rise and, you know, we acknowledged each other and I was going to probably come back and speak to him but he detonated it (Richard, Army, Knee Disarticulation).
- I had an explosion, it's called an offensive grenade or it's an artillery simulator. It's half a pound shaped charge of TNT covered with waterproof paper and it had a defective fuse assembly in it and when I threw it, it went off as soon as I released the safety lever and it just essentially blew my hand off, fingers and thumb and there was fragments of bone up above my wrist. So they took it off above the wrist (Greg, Navy, BE).
- Well, what was happening, we were into a place that they called the Rice Bowl and I was walking point and was teaching a new guy to walk point because it was kind of my time to come out of the bush and me and him kind of were going back and forth saying something to him and took another step and I didn't see the trip wire that was across the trail and so I hit a booby trap that was set up (Colin, Army, DBK).
- I found a cache of rice buried right next to the river and the CO said we weren't going to, there were bags and bags and bags of rice, so he said to blow it up. So I threw a hand grenade in and blew it up but the area was heavily, heavily booby trapped and I was the point man out about 50 yards in front of the company and I found a booby trap that like at the last

second I saw it but it was too late kind of thing so I dove and it basically caught the bottom, more of the bottom half of my body. It blew my right boot completely off and my left leg was mangled pretty bad from the explosion also (Jeff, Army, DBK).

- We had just come back off an ops and so we were doing that, there was some stand down time and they sent me off to some training to do some demolition training, come back from that and we were doing it for about a week before I was wounded we had started doing road and bridge security at Liberty Bridge. [And] we had caught some hostiles down below. We had come up over a ridge and through a tree line and caught some hostiles down below us and I was moving in toward a firing position. I wasn't paying attention where I was going and I hit a land mine (Jess, Marine, AKF).

Direct Combat (Non-blast Injury)

- We were engaged with the North Vietnamese regulars. We were trying to push them out of a large village that they had taken over and my company got caught in a cross fire in a rice paddy between the North Vietnamese shoot at us and the Navy supply ships coming up the river shooting at them. So in a very short period of time our company pretty much had been shot up. [My injury] was definitely not [friendly fire]. It was North Vietnamese weaponry that put me where I am today (Josh, Marines, AK).
- We were on a troop deployment...and what led to my injury was we were coming out of a cold LZ, and we took some machinegun fire and a bullet round hit the transmission behind me and caused the airplane to become erratic and we were going down and [as] the pilots tried to put it into a little opening in the jungle I saw that we were going to hit pretty hard and about six feet off the ground I jumped and landed on the ground fine and the helicopter nosed into the trees and it flipped over and the tail rotor caught me in the left leg and severed my leg right at the knee (Ken, Army, AK).

Non-Combat (Non-Blast Injury)

- I made the mistake, we had a little Loach helicopter that was landed and I had correspondence or mail that I was sending up in bags to our forward area and there was two Red Cross ladies that were going up to entertain the troops and something with the seat belt. One of them, she had to get out and go around and I made the mistake, I walked to the rear of the helicopter because he had not shut down and either I leaned into the rear blade or the wind caught it or whatever but the next thing I knew I was about 20 feet away from the chopper on the ground and it pretty much severed most of the arm (Brad, Army, AE).

Unspecified

- I was injured in the battle for Hamburger Hill, 1969 and I had been in Vietnam, it was my first day of my seventh month (Tim, Army, AE).

E. LIVING WITH INJURY I

All of the veterans were asked to describe their

E1. Limb loss Experiences

All of the veterans were asked to give a general overview of what it has been like for them over the years living with limb loss and having experienced combat. Given the general nature of the question, we received a wide variety of descriptions regarding their experiences living with limb loss. Several veterans gave descriptions relating to how they adjusted to civilian life and accepted their limb loss over the years. The veterans attitudes towards moving on in life despite limb loss appeared to be positive in that most of them were able to accept it at some point in their lives. For instance, one stated, “I knew for myself that I had the rest of my life in front of me and if I kept looking back over my shoulder, guess what. That was not going to work” (Richard, Army, Knee Disarticulation). Another veteran spoke of realizing that he just had to move on when he noted, “All of a sudden you come to the realization. You know, again, that’s the old cliché it is what it is. Well that applies here. And get over it, you know. Learn to accept it and go on” (Wayne, Army, BK). Although living with limb loss was often described in terms that framed it as challenging and not easy to accept, it appears that most of the veterans were eventually able to adapt to living with limb loss. They did cite difficulties they faced, however, in living with limb loss as they noted the challenge of living with limitations in not being able to do the same activities that they had once done before. Jeff, a double below the knee amputee commented, “I guess the thing that over the years has affected me most is sometimes maybe a regret that I’m not able to do more of the things, physically, that I would have liked to be able to do.” Five of these veterans’ experiences are categorized under the theme difficulty in adjusting, as they appeared to have a more difficult time adjusting to their limb loss as compared to others. Living with limitations was also something that the veterans spoke of when commenting on the physical limitations associated with limb loss. These included things such as not being able to run, being regretful because you cannot do physical things with your son such as teach him to play baseball or even not being able to do more simple things such as change the oil on a car.

A handful of veterans also described situations/scenarios that showed the obvious effect that serving in Vietnam and being a traumatic amputee has had on their mental health throughout their lives. This ranged from experiencing dreams of being in combat to not having contact with people and feeling agitated in public spaces and noticing a change in temperament. Staying active was also noted by some of the veterans as an important part of living with limb loss. Some participated in activities ranging from construction work to canoeing and elk hunting. It is not surprising that staying active was noted as important to some of the veterans, as living with limitations of not being able to do certain physical activities was noted as something that was frustrating and one of the hardest things about living with limb loss.

The remaining themes concerned declining mobility due to limb loss, feeling anger, finding comfort in helping others and dating. While a couple of veterans acknowledged that they wondered if women would be interested in them after they were injured, the majority went on to describe positive dating experiences. Some also described issues involving health care and their initial hospital experiences, being discharged, dealing with the attitudes of children in public, rating experiences and worrying about mortality. These wide range of experiences living with limb loss are illustrated below.

Adjusting to Civilian Life/Accepting Limb loss

- To do the activities that I want to do with my friends and that sort of things I pretty much had to find ways to do it to fit in with their way of doing things and I guess it wasn't a whole big change at all. [I] kind of fit right in. If I wanted to do something with them, you know, motorcycle riding, anything like that, I just had to find a way to do it and make it work and just went ahead and did it. I guess I was pretty much accepted just as that. They treated me just like anybody else. Combat part, I guess everybody has a different view of the war they were in. So mine mostly contained skirmish type battles, light fire fights, that sort of thing. Nothing real big. Had friends, you know, injured and killed but it's just something you just live with (Derek, Air Force, BK).
- When you get a [person] like Willie Davis—he was the guy that ran the dive shop in Norfolk, Virginia. He'd let me do anything I wanted to but he'd say now you've got to be careful about this or that and the same way with this fellow, Ray Holland, that was a mechanic. And there was others. You know, there was a number of other people that were willing to allow me to learn things or they'd teach me how to do things and that's what I was looking to do was to learn more and get out and do things. I knew I was going to live another 60 or 70 years probably and I didn't want to be just a total deadbeat. Like my friend says, everybody can't be a deadbeat (Greg, Navy, BE). (laughter)
- I don't know if I ever really thought about [living with limb loss and combat experiences] once I got out. I would think about the injury every step I took but I really wanted to make people think that I didn't have an injury that I could do as much as anybody else could and I pretty much did. There was only a few things that I couldn't do and the way I handled it is just that I didn't—it's not that I was ashamed of what I did because I was very proud of what I did and [I] still am. It was just that I didn't want anybody to think that I was a lesser person than they were. I think again for the first month or so [my self- perception] did [change]. It changed to the point where I didn't know where I was going or what I was going to be but after I went to the hospital with the rest of the guys and really was one of the leaders on that ward, I just think that I thought life was going to be okay. And a lot of people say to me that they just can't believe the attitude that I have or have had and some people today start saying they never really knew that I had this—because I can't wear it right now (Marvin, Army, BK).
- [As far as living with limb loss], there would be times, especially way back after it first happened because it's like, you know, what am I going to do now because here I had planned on being in the banking industry and we were going to raise kids and I was going to be able to hopefully have a son and be able to teach him how to play ball, you know, I played baseball when I was in junior high and high school. But hey, life's what it is (Brad, Army, AE).
- I know that I knew for myself that I had the rest of my life in front of me and if I kept looking back over my shoulder, guess what. That was not going to work (Richard, Army, Knee Disarticulation).
- I figured, you know, we don't go to church but I believe in God and I figured there was a reason this happened and I just need to move forward and I think that helped me because I

think a lot of amputee injuries, 90% of it's mental. You know, if you got the right mental attitude you can go forth and again I was fortunate compared to the others because at least I had the college degree and it just so happened that the telephone company, one of my dad's big bosses, during World War II he was a German prisoner of war of the United States and he says well have your son come down and interview. We want his brains, [we are] not necessarily worried about a loss of limb and that's how I really ended up at the telephone company. And like I said, I had a wonderful career there. Sometimes yeah, I say well boy that was kind of stupid, you know, five days from being back but if you get sucked up in a pity party like that you could go down the wrong path (Brad, Army, AE).

- There was a lot of adjustments to make [but they] never really interfered with my work [though]. In fact, most of the people I worked with didn't even know I was an amputee for a good many years. I never really talked about it for a long time. A lot of people never even knew I was in the military or wounded. But that's something else over the past five to ten years I've become a lot more open and I'm usually wearing a tee shirt or a hat that it's pretty obvious marking me [as a] wounded [veteran] (Harry, Army, AK).
- [I didn't interact with the other veterans in the hospital] too much because I really wasn't there that long. What happened is, and keep in mind this was way back in the late sixties and things have really changed, but I think I was there like for the weekend and, in fact, I wasn't too long on a ward where they put all the amputees together which was good I think. Everybody was kind of together that had the same or similar problems. But then they moved me over into a private room and my folks arrived and that weekend we went out to a motel and then we found a house trailer we could rent and my wife moved over and I don't even think I was in Valley Forge [for] a week. And then while I was getting the arm made they had me working some type of clerical position where I recorded something. And it would be like I'd maybe work a couple hours there and then I'd be gone. I could leave. There was no training. No physical therapy. Of course I was right-handed and I had to learn to be a lefty but there was no well we're going to show you how to do that or anything at that time. You're pretty much on your own. I was very lucky [because] when we were kids growing up we used to play baseball or basketball and horse around, you know, shooting left-handed or batting left-handed so I won't say I was completely ambidextrous but I think doing that helped me make the switch because it never presented a challenge, by now if I rushed and didn't take my time I looked like a doctor or a college professor signing papers. (laughter) (Brad, Army, AE).
- [But adjustment back to civilian life] was good. My degree was in finance so I was planning on going into banking and being that I got out in December I started looking for a job in January. Well, pretty much all your fall quarter graduates, had taken up the jobs. So I really never got anywhere with the banks and of course like I said after I interviewed with the telephone company they actually gave me an offer and it sounded good and my dad had worked there. Well he worked there at the time. My father-in-law worked there and uncles on both sides [had worked there]. So that was a no-brainer for me and it ended up being a good choice and a good career. So I think I adjusted pretty good. Other than you just—you do live with the looks and people ask you what happened or whatever. Of course back then they didn't really thank you too much as far as your service because of the controversy of the war (Brad, Army, AE).

- It did take a little while, [for me to make the adjustment]. I say my personal religio[ous] beliefs helped me adjust quite a bit. Tolerance by my spouse and my family helped quite a bit. The fellows that I still stay in contact with [helped]. There's about five of us (Jess, Marine, AKF).
- All I can say is the attitude of the people that are around you [affects your adjustment]. If you want to stay in a cubby hole and feel sorry for you[re]self the rest of your life and get into booze and drugs and alcohol, you're going to do that and I think you probably would have done that anyway. I think that the guys that didn't do that were guys that were going to say we're going to beat this thing one way or another and did. That's the only thing. I don't know how else to look at it. I mean I saw some people that were pretty bad, I mean a lot worse than me and they had a positive attitude (Marvin, Army, BK).
- [I don't know why some people move forward and others don't after they are injured]. I don't have an answer. Maybe it has something to do with your faith or whatever. Whether you believe that something was done for a reason and fortunately, you know, I was in a better situation than some of [the other combat veterans]. You know, you figure like some guys if they were mechanics or something and lost their hand or hands or legs [they had it bad because] back then you didn't have the wonderful things they have now. The limbs, they're unbelievable what they can do but I guess that's the only thing I could say. I don't know it's just—and probably the people I had surrounding [me helped in my adjustment]. My wife's support and the family and everything. You know, they were right there helping me (Brad, AE, Army).
- Well, I think there's a lot of things that play into [why some veterans adjust and others can't]. One of the things that I had to do was—I was a counselor—and one of the things that I found was that sometimes it depended on how long they were in combat and what they saw and experienced. And sometimes it was a personality thing, you know, where they had that sort of depressive kind of personality to begin with. So I think some of it was just a continuation of their own attitudes and in some instances it was because of what they saw and what they experienced. Some of the people that I knew personally saw some pretty harrowing things in battle and it took a long time for them to get over that. It's not an easy thing to do and no matter what your own mental attitude is like and we were so young. I mean you're talking about guys that are 18, 19, 20, 21 and even older, and some people just couldn't deal with what we had to do and what we saw. And I think it was partly because of their own makeup that they brought with them before they went there and in some instances it was not. It was just caused by that (Jeff, Army, BBK).
- [The military could have done some things differently to ease my adjustment back to the civilian world]. Nowadays I think when the soldier comes back they have support groups and stuff but when I came back we didn't have stuff like that. You came back, you went in the hospital, you stayed in the hospital, and once you got through then you were out. You know, nobody never come to talk to you to see what you were going through or how you were feeling. They never had anything like that back when I came back from Vietnam. I guess [whether or not you're able to adjust is] all in how you look at things. You know, it has to do with how you want to live your life and if you want to be—I hate to use the word—

but if you want to be a cripple and depend on people to take care of you the rest of your life then you can do that. But if you want to make something out of yourself and show that you still can be a man and you can still strive and be in society, I believe it all has to do with your mind (Colin, Army, BBK).

Difficulty Adjusting to Civilian Life/Accepting Limb loss

- [The first twelve months following my injury,] well, 11 months of that was in the hospital. [I spent] six months in bed [and] couldn't do nothing. The last five months I could get up and get around and everything. I loved the guys I was with in the hospital. I come home. That was a different story and I tried not to let it bother me or slow me down, you know, [but] the first year home was really, really bad. You know, adapting myself and losing my girlfriend and when I went to college I could of went anywhere [because] they paid for my education but I chose a very small school [because] I wanted to blend in and Vietnam veterans back then weren't liked and I hid the fact that I'd been in Vietnam. I told them I lost my leg in a motorcycle accident. But later on in life I've done what I wanted to do. I've traveled all over the world. I've not let it slow me down. Even today I still mow my own yard. I still do as much as I can possibly do. You know, try not to let it slow me down. The only thing I can't do is run (Victor, Army, AK).
- [It took time for me to accept my limb loss and settle down back into life]. Probably at least 10 years and maybe more than that and there was a lot of those years I did the pity thing, you felt sorry for yourself, and I think it's just one of those things. All of a sudden you come to the realization. You know, again, that's the old cliché it is what it is. Well, that applies here. And get over it, you know. Learn to accept it and go on (Wayne, Army, BK).
- [I had some difficulty adjusting]. I think I did because number one, the first worst thing that I could have ever done was get married three weeks before I went to Vietnam. Number two, I don't think that my ex-wife could deal with my amputation. I think that she felt that she was getting ripped off and she started cheating on me. Just built a house, had a fairly decent job, going to Manchester Community College, all that stuff and find her in bed with my best friend. That was hard to deal with (Marvin, Army, BK).
- Well, living with the loss of my limb has been a challenge but I think I pretty much accepted the fact that I was either going to go on with my life from the very beginning but that doesn't make the challenges that I went through any easier. I think I tried to do more with my life because of the fact that I was disabled to prove to people that I wasn't disabled, that I could still keep up and do things. It was kind of hard to bear sometimes. I know a lot of times I'd get pissed off because, you know, get up in the morning and hobble around and take your shower and you'd have to put yourself together before you can get clothes on and things like that. I think I got to the point sometimes when I said, you know, why should I have to go through all this shit, you know, nobody ever cares. So, yeah I had an attitude about it but then, you know, nothing you can do about it. You just have to accept it and go on. I think what allowed me more than anything was I wanted to do things. I didn't want to sit around. I wanted to be active. I wanted to be with my friends and do things. So in order to do that I had to find a way to do it and I think I just tried to keep myself active and in as much stuff as I could do physically just to prove to them that I was still as normal a person as the next guy...In some ways [it was difficult for me to accept that I was not the person I was before I

was wounded] but I would say for the most part...it all had to do with attitude. I know a lot of guys that I feel that they just couldn't accept it and they felt sorry for themselves all the time and wanted somebody to take care of them and I didn't want to be that way (Ken, Army, AK).

- You survive. You don't really live. You don't trust nobody. I never made any friends so other than family, I have no contact with people. I don't like people (Steve, Army, BK).

Living with Limitations

- I never dwelled on my own time in Vietnam and what I saw. I mean I have memories of it and I do think about it occasionally but I never dwell on it. I guess the thing that over the years has affected me most is sometimes maybe a regret that I'm not able to do more of the things, physically, that I would have liked to be able to do. Just simple things like I would take my son out and teach him how to play catch but I couldn't run to catch the ball, you know, things like that are what bothered me (Jeff, Army, BBK).
- Well as for experiencing limb loss, it's been a real learning experience where I've had to learn what my limitations are. And many times, especially in my younger years, I overreached those limitations or overstepped those limitations and paid the penalty for it. So now, I've learned pretty much when it's time to say I better stop here and not do anything else, not walk another mile or that type of thing (Wayne, Army, BK).
- I think the biggest thing [about living with limb loss over the years] is the fact that I can't do what I used to do. I was an avid runner. Loved to run. Based on the injury and the fact that I have such a small residual stump it precludes me from even attempting to run and I wouldn't do that anyway because it would do more damage than good. It's prevented me from doing a lot of things that I used to do and enjoyed. I find it hard to really explain everything. It's just that normal functionality has been limited (Lewis, Navy, BK).
- There was one time I replaced the faucet in the kitchen or in our bathroom which either my dad and my father-in-law couldn't believe that. How the heck did you get up underneath there and get that done and I used to climb up on the roof. Of course we had a ranch house but I wouldn't do that now. And in all those years that I was quartermaster at the VFW we used to have fundraisers and I'd work the cash register and people were amazed at how I could handle money with just the one arm. But there's things I'd never try, [like] attempt to change oil on a car. Or even hanging pictures [is] just a little more difficult or that type of stuff. Once in awhile that'll get frustrating and my wife's been really good about that and her dad, we just lost him last year, but we'd save projects for him and when he'd come up to visit he would be my handyman. But [if] it's like electrical work—since we moved out here something went wrong with the fan. Well, I can't attempt that so you've got to hire somebody to do it. That's probably where a lot of the frustration comes in (Brad, Army, AE)

Staying Active

- I was very young when I lost my leg. And even my job, you know, I could drive a semi truck. I've parachuted with my son. I've done everything I can possibly do except run. I try not to let it slow me down at all (Victor, Army, AK).

- I've always been able to get around pretty well. You know, through my life I've played softball and jumped on a trampoline and did a lot of swimming, I scuba dived, I've bungee jumped, I bowl, you know, all that and just the last, over the last year it's been a lot less. I don't play ball anymore. I used to play football too. But [I] just don't do the things that I did then and a lot of older people don't either (Marvin, Army, BK).
- [Describing what it has been like living with limb loss is] hard to do. I've come from a background or family where no matter what goes on you just get up and do what you have to do and I think that's the kind of attitude I've had the whole time. There was some things I couldn't do and I didn't worry about them. I did the things I could do and I did a lot of things that surprised a lot of people that I was actually doing them. I used to ride horseback when I was wearing a prosthesis, [I went] canoeing, [and] raised two kids. I used to, you know, with my son toss [a ball] in the back yard. I didn't go after the ball. I had one of my dogs. A sort of heeler, he would always get the ball and bring it back to me (Harry, Army, AK).
- [When I was younger] I did construction work. I went and worked with my brother-in-law one summer when there wasn't any classes being offered I wanted and did siding. I played baseball, swam, softball, you know, just about everything—horseback riding, elk hunting. I was fairly active, quite active. I played basketball one season with an intramural type group and I figured out well I can't run up and down the court but I can be under the basket at one end and at the top of the key at the other end. I could get down there on defense but then I decided that's too much strenuous work and playing softball I went through a lot of limbs—artificial limbs—because of collisions and I played catcher and first base and I get run over. But collisions are not conducive to artificial limbs. They don't move like everything else. [I] went up and down ladders. Walked on scaffoldings. I worked on roofs. Even when we had a two-story house I got up on a ladder and did spray painting on that house and trim painting. As the years went on though I started saying well, you can't do this anymore. You can't get on the roofs anymore. You're getting too old for that. And then it was the next thing, don't climb on ladders. So a number of activities started trimming off...[But I] went horseback riding where it started to snow early that season so we were literally up to our butts in snow drifts and I did deer hunting in Utah, up in the mountains west of Provo. Out of four of us we got one elk...[And at that stage in my life it was important for me to be active]. Yeah, it was. I felt it was important to do that. I didn't want to let my disability hold me back from doing things I wanted to do. [And] in [those] early years I got certified as a diver, a scuba diver. So those were important things to me...I found I couldn't do everything but I could do a lot of things I wanted to do with a limb loss. I started wearing, and this is interesting, I went to a peg leg on the right side because I found I could ride horseback easier and I had had one made for swimming, just for stabilization in the water and then I found I could ride horses easier with this than with a footed leg. And then I started walking with one and walking I discovered I was more mobile with it and when I finally went to have one built for regular walking as opposed to the swim leg which wasn't really built for regular walking stress, I had to really fight the VA to get it because they were of the mindset that cosmetic[s] is better and I'm going no, mobility is better (Jess, Marine, AKF).

- I rode about 40,000 miles on a motorcycle after I lost my hand. And I dove. I used to be a scuba diver, that sort of thing and that was all stuff that I wanted to take up (Gary, Navy, BE).

Declining Mobility Due to Limb loss

- I can't walk as far as I used to. I'm not as strong as I used to be. My upper body strength is diminished. I do not use crutches now because of that fact and I do use a wheelchair when the prosthesis is off and sometimes when it's on. I cannot walk great distances and that limits my mobility and I think it's had an effect on the fact that my health has declined (Lewis, Navy, BK).
- [When I went back to college] I wanted to go into recreation and wildlife. I got almost all the way through it and they told me that even if I finished it I wouldn't be able to take the job that I wanted because of the limb and back because it was escalating at that time and that was in the mid-seventies. So I started electronic engineering, got my associate in it and I worked at it for a year before my hand starting shaking real bad and I haven't been able to do it since. Then it's just bouncing from job to job (Steve, Army, BK).
- The last year has been pretty bad. There's been times that I've had to keep my leg off for four or five days, seven days, and that ran pretty much for about six months before I could get my leg healed up to be able to walk on it again (Marvin, Army, BK).
- It's never been easy [to get around] because of the short stump and I mean I worked but I've worked so many different jobs it's not even funny and I'd work at a job until I start abusing sick leave or whatever and then I'd have to go to a different job because I'd come home at night and I'd take the stump socks off just soaked with blood. So you just keep on going. You know, you doctor it up and then you go back in the next day, you know...[It's never been easy, not even now]. Now, you know, when you can't hardly breathe you have a hard time doing much of any kind of activity. You don't have any enjoyment. There's no real joy. I don't know what that word is anymore (Steve, Army, BK).

Feeling Anger

- I had to learn how to use crutches for because of my leg and then since I couldn't see out of one eye, the depth perception was gone, I had to adapt to that and frankly I had to settle down a little bit because I was one of those guys that was mad at the whole thing and it took me awhile to just kind of accept the fact that that's just the way it is. I think it was just a time thing. That, plus my family had a lot to do with it, kind of hanging in there with me, but I think most of it is just, again, accepting what happened and knowing there's not anything you can do about it, just picking up and going on. I was definitely mad at the Army for putting me in that situation (Wayne, Army, BK).
- I went through Okinawa for two weeks and then to Valley Forge where they did a bone block revision and then [I] got gangrene so they had to take the pylon off and clear that out and do another one. Then he made the prosthesis. I never got any training. All the training I got was on my own. The first 12 months you realized that you wasn't welcome back here in the United States. The anger started building higher and it stayed with me all these years. [My family was mostly supportive at that time]. Yeah, well even you couldn't understand. If

you're not in a situation, heavy combat, it would never be able to tell you. I wouldn't want anybody to experience [what I did] and I feel for these young men coming back. I mean they get a lot better treatment than Vietnam veterans did but it's still second grade sometimes (Steve, Army, BK).

Helping Others

- I went to work helping others. When I'm doing that I don't even think about my own issues. Who I'm working for and helping others, the family or other veterans or doing something active, it takes me out of thinking about my own issues and thinking about more global, broader issues and it's good for me (Tim, Army, AE).
- I went to work for the VA because I thought I could make a difference and help some of the fellow veterans (Jeff, Army, BBK).

Dating

- [When I was first injured I did think about if girls would ever be interested in me or not]. You know, you think about stuff like that when you're laying in the hospital and tubes [are] running in and out of you and you take in different things. You know, all kinds of things go through your mind like that...I don't know [how I reached the point where I was self confident enough to ask out my wife all those years ago]. I guess you just have to kind of swallow your pride and see if they will love you for what you are instead of what you used to be. And that's one thing about it is, you know, me not having any legs never bothered her. That was one good thing and I guess that's something [that] has never bothered her at all (Colin, Army, BBK).
- [When I was at Fitzsimons I did think about if girls would ever be interested in me]. That was definitely on my mind. Was I going to find somebody that just didn't feel sorry for me, you know, because of the way I was and really appreciated me for who I was? [But] actually for me it worked out pretty good. I really never had a lot of problems in that area. And here I think it depends on the severity of your disability. I think that was another thing that motivated me to do the best that I can to recover from my wounds and to recover to be as whole as I once was and that was, I think that was a factor (Ken, Army, AK).
- [When I was in the hospital I did think about whether or not I would ever have a normal relationship or sex life]. I thought about it but I didn't ever focus on it. Before I met [my wife], I had a lot of girls that I dated. When I was in Colorado I was dating girls in about every town I could think of. We'd chase them (Nathan, Army, BK).
- [My wife's] brother was my boss and he introduced us. He warned her I was trouble. I drank a lot and raised hell and when I come home I was wild and crazy, you know, and I drank a lot. I chased women a lot and he warned her. You know, he's trouble. Stay away from him. But that didn't stop me. So it didn't stop her either. But I straightened up after I got married. Had to. Had two kids...[I did date someone before that though]. I come home on convalescent leave and seen her and she came out to Valley Forge to see me and to be very honest, she couldn't handle it, you know, me being hurt this bad and she left which was fine. She stuck with me until I got out of the hospital but I knew it wasn't right. You know, I could tell. And I come home, I'd been home maybe two or three months and we talked. You

know, she says it's time and I say yeah, it is time. So nope, she wasn't supportive. She hated the Army. Me, I just loved it (Victor, Army, AK).

- [I dated a girl before I went to Vietnam and it didn't work out]. [We] dated on and off and she was a gal I knew in high school and we had dated on and off while she was in college and I was doing college and Marine Corps. And [we were] in and out of each other's life quite a bit but that was kind of more like we're good friends. But between her and my spouse there was another young lady that I was very serious about and very interested in and that got serious but then we split up because I wanted to get married and she thought I wasn't that serious about her in particular just because she was around. She was somebody I was dating so therefore my affections for her were skewed. But, I think that didn't work out because personality-wise we were quite similar. Very, very closed mouthed about ourselves and our feelings and very guarded and then I met my wife about six months after that breakup. I'd been discharged from the hospital in January of '70 and I had met my wife about May through a mutual friend. In fact, we were at a social event and she was there with a fellow I knew and I knew he had this girlfriend from a certain area and she was from that area so I just said oh, this is his new girlfriend and it really wasn't. She had kind of conned him into taking her to the event. So then after I knew that I said I have to call her up. So I called her up and we started dating and within about five, six months we were married [and] we're still married. [I didn't worry if girls would still be interested in me after I was wounded]. That never crossed my mind. Never worried me one bit (Jess, Marine, AKF).

Health Care Experiences

- [I'm not happy with the VA]. I just think there's not enough veterans that are hired at the VA hospitals that can understand what people are going through that even remotely know what you've been through. I just don't think they hire the right kind of people to take care of wounded veterans...I go to the VA as little as I can because I don't like their service. I just think it's substandard and I don't like the way that they treat veterans. There's some people there that do a good job but there's other people there that I'd rather not be there (Marvin, Army, BK).
- I have VA health insurance. I'm 100% service connected. I have access to health insurance but I don't trust the VA so I don't report it. I'll speak frankly. I don't trust the VA. I have trouble getting care and I don't trust that if I have [a] serious health care [issue] they'll [not] use up all my insurance and I'll get dumped. So I don't report it to the VA. There are certain services that the VA has that I've found to be very useful and I think the doctors are actually better than the private sector. I've had better luck with some services and they seem to be available. Other services in the VA, I can't seem to even get an appointment so I will use a private [doctor]. So I'd say I use both, probably 50/50. I try to use the VA but I have a lot of trouble getting appointments (Tim, Army, AE).
- [I] Just [have] the VA health insurance. [If I need medical care] I go to the Tampa VA Hospital and they have a clinic. It's like an outpatient clinic. Because I was wounded and medically retired from the Army I also have—and my wife does [too]—[we have] TRICARE—civilian medical care, but I've never really used it. I have to be quite honest and I'm scared to go to the VA so I'd really hesitate if there were any actual procedure that I had to go through. I've been there for just some cardiac testing and things like that but let's say

surgery or something, I'm real hesitant [to go to the VA for that] just because of so many things I've heard and things I've experienced. It's just kind of scary. And maybe it's that way with civilian care too but I'm not sure. I know for one thing—[I] can't recall the state, [but] they were doing a lot of colonoscopies with equipment that wasn't properly sterilized. So now they are testing, I'm not sure how many hundreds [of patients] for AIDS and Hepatitis [because] they know that some of the patients did have AIDS. You just hear things like that and I've personally gone in a couple of times—one [time] in particular was [when] I kept having trouble with my stump breaking open and bleeding and they wanted to just do exploratory surgery and I told them no, I think I'll just wait and treat it myself and see if it heals. And it did and I've never had any trouble with it (Nathan, Army, BK).

- July 1st I went on the golden age of Medicare and I've got United Health Care. That's my supplemental through retirement through the telephone company. And of course [I have] the VA. Normally I go to a private doctor or civilian doctor, and it's through United Health Care. Now what I've had to do, because I have an artificial arm and the VA changed how they do things, you usually have to see a primary care physician who then refers you to an orthopedic person who then sets up an appointment with a prosthetic place so that you can have, like in my case I needed a strap replaced. And usually that's what I go to the VA for and at the that time I met with the primary care doctor [and] we talked about medication and he says well you realize with your disability you can get your medication free through the VA. I says, oh. He says, now you'll have to change a couple of different types of medication because they do things a little different. I said that's not a problem. Mainly I was taking Lipitor for cholesterol and they switched me to Simvastatin and I said well let's try it and see if it works. I mean the price of medication has gone up and United Health Care they, a few years ago United the telephone company decided to throw that into your family deductible. So you have to spend like \$2400 for your deductible before they start picking up quite a bit of the stuff. And in our case that was almost all medicine (Brad, AE, Army).
- [I tend to use the VA for issues related to my limb loss and prescriptions and I use a private physician if I get a cold or something]. [I didn't use the VA] very often. The same situation. Used to be you didn't have any problem. You could go to a prosthetics shop and I think probably there was some abuse [because], you know, they'd have you sign a form and then who knows what they charged. But again they cracked down on that and said you had to go to a primary care physician. [One time] they made a new arm because it had been, well in fact I still wear the original one I had in 1969, but they did make me a new arm before we came out here. It's like one VA doctor told me. He says, you know, if you've got other health insurance you want to keep it because if you bust up your knee you could probably get in to see an orthopedic surgeon and have that taken care of through your regular doctor a lot quicker than we can at the VA. So it may be two months at the VA before they could do something. Basically that was it. Just anything to do with the prosthetic. If I needed new straps or cables, that's what I'd use the VA for. I think I was entitled like even get like tee shirts and that type stuff. But I thought, well I had a good decent job at the telephone company, the VA doesn't need to buy my tee shirts. I can buy them (Brad, AE, Army).

Hospital Experiences

- Probably some of the most hardcore people I ever encountered was the staff at the Philadelphia Naval Hospital. There was a woman by the name of Wheeler. She was either a

Lieutenant Commander or a Commander and she was in charge of the physical therapy department and when I went to Philadelphia—that was one of the worst places I'd ever been from the standpoint of a physical facility and...Portsmouth was like the Holiday Inn by comparison. The only place that we saw any cockroaches or any mice or anything was in the mess hall area and the housing that we had, my understanding was it was temporary structures that were set up for the World War II people. It looked like it hadn't been painted and I think they were probably the same beds. I mean it was kind of a dilapidated facility but I don't think physical surroundings make that much difference in that particular environment but it was the fact it would have been, it would have been nicer if it had been a little bit more up to standards, if you will (Gary, Navy, BE).

- I wasn't at Walter Reed. I didn't have all that garbage that was happening at Walter Reed at that time. There was marijuana at Walter Reed so I wasn't involved in that situation. I wasn't around the woe is me I'm an amputee situation. I didn't have any of that. So that could have been a real plus but at the same time from what I'm seeing happen today, they're doing things a little bit differently now and so for me not being around the amputees doesn't seem to have had an affect on me. At the same time, since I wasn't around them, I can't go the other way with you. I don't know (Richard, Army, Knee Disarticulation).
- Occasionally this one therapist would get out this book of upper extremity prosthetics and just say well if you have any questions you can ask me and I'll look it up. I said, I'd rather read the book. No, I couldn't do that. Well, when I had the opportunity I got two of those manuals. I have two in my upper extremity collection...But you had a person that was almost downright hateful on occasions when you wanted to do anything. And I talked about wanting to ride my motorcycle and dive and stuff like that and they just told me I was crazy. You know, only somebody that was mentally ill would want to do anything like that. So as far as people that maybe were putting forth disincentives instead of encouragement were some of the people that were part of that professional staff of that organization. So, I mean that was, you know, at the time that was quite an irritating factor when you had to put up with these people that had all these negative comments (Greg, Navy, BE).

Being Discharged

- I'll start with Philadelphia Naval Hospital where I was in a ward that were all amputees. Some triple amputees, double amputees, myself, a single amputee, and the comradeship we all held there together during the long period that I had stayed there. I was given retirement orders to end my stay in the military. I talked to a Navy lawyer, about me staying in the Marine Corps and giving them the benefits of what I learned and be able to teach others. And of course the lieutenant told me well, that's all fine and good. You could sign up for six years which was the maximum you could sign up at any one time but if you couldn't hold your end up physically or mentally during that period of time the Marine Corps can let you go and you would lose whatever benefits you would get if you leave now, as if you were in 30 years. So his advice was to take the retirement and find another career. So I did exactly that. I signed the papers and they gave me a bus trip ticket to Connecticut and [I] took the bus to New York City where my cousin and her husband picked me up and brought me to their home in Connecticut. [At that time] I [was] trying to get my mind in a place where I could actually fend for myself. I wasn't getting paid by the Marine Corps anymore and I needed to get some kind of job or go to the VA and sign up for whatever the VA could give

me. So that was a good four [or] five months with [my cousin and her husband] before I was able to work out that I'd sign up with the VA for benefits and because their benefits were, monetarily, were more than what the Marine Corps would give me if I stayed as a retired Marine with only four years and a few months under my belt. That was a very hard decision. It was like leaving home for the first time. Something that was very familiar, something you want to do all your life, something you didn't want to be taken away and it was gone in a stroke of a pen. There's not too much you can say about it and you're out and it was like closing your door to your home and you couldn't come back. So it hurt. It was some strong feelings there in that I was being abandoned after working very hard over the four years I spent in the Marine Corps (Josh, Marines, AK).

- [It was] very [difficult for me to retire from the Army]. The Army's where I grew up and I had 21 days left when I got hit and I would have made the military a career. I know I would have and the first thing I remember when I was in the vac hospital, you know, I didn't really know how bad I was hurt and I asked the doctor I said am I going to be able to jump again and he looked at me and said are you kidding me. I says no, I want to know, can jump again? And, no. I said well if you can't jump there ain't no sense in being in the Army. Of course back then they didn't keep us amputees anyway. So I took it very hard because I loved the Army. Loved what I did (Victor, Army, AK).

Attitudes of Children in Public towards Limb loss

- Probably one of the hardest things is when you're around kids because kids are very honest and you know where adults may look and stare and not say much but a kid [will] come right out and say what happened to your arm or why's your arm broken. We used to have a neighbor kid and he'd ask me every day he see me, well when are you going to get your arm fixed. And he'd have you go through the same thing again (Brad, Army, AE).

Rating Experiences

- First time in '82 they started treating me for [PTSD]. I was seeing a psychiatrist three times a week for close to 10 years. And then they finally diagnosed [me] and added [PTSD] to my disabilities in 1996. They diagnosed me at 50% disabled because of Post Traumatic Stress Disorder but I don't know if you know how the government keeps their math. When I was first going to get out the government told me 100% paid \$1275 a month. This was 1971 and they were going to give me a 80% disability rating. Well, stupid me, I took in my mind and took 80% the \$1251. The \$1251 has nothing to do with the 80%. It only counts for the 100%. Within three months of signing out of the papers I sued the federal government and spent five years in court [trying] to get 100% disability rating because 70% only paid \$350 a month. After five years, [I was successful]. It took me five years of being in court with them and I've had to go back and do it. They've wrote me letters two different times after that five years stating that my money-making capabilities superseded my physical disabilities therefore due to government regulations I was no longer disabled and terminated my pension. And I had to go back and refight them. The second time it took about two and a half years. The third time I got it down to about eight months. I'd had more practice (Aaron, Army, AK).
- I think [the VA rated my disability], I'd have to look at the paperwork for sure but I'm thinking it's 75 or 80 I believe. [It hasn't changed over the years], basically I had the option

of going through the VA or the Army and they told me that I would be better off if I actually took a disability retirement from the Army as far as money-wise and everything. So that's what I did. So, you know, whether they do an evaluation I don't know. I mean it's not going to change I don't think (Brad, AE, Army).

Worrying About Mortality

- I'm doing much better but I feel like I'm still on a process. I'm also at an age now of 62 where a number of my friends who are Vietnam veterans are dying of cancers related to Agent Orange which has kind of raised that back up in my mind. I guess I think a lot [about] people when they get into their sixties and seventies, [I] start thinking more about mortality especially those of us that have been real close to it. So it becomes a concern. But I would say I'm definitely doing better than I was three years ago, absolutely much better (Tim, Army, AE).

Other Limb loss Experiences

- I get a lot of looks from little kids and they'll ask me how I lost my leg and, you know, little kids don't need to know about war. They don't need to know about this kind of problem or what happened so I'll make up some story... And people I work with, some of them realize I've been without two legs and some of them just think it's one because it's so visual that it's one leg. So that has never been a problem for me in that regard (Jess, Marine, AKF).
- [As far as living with limb loss and the memories of combat,] living with, let me see. Which one do I want to start with? Living with the combat experiences, well, like any other veteran I've got some neat tales to tell. I'm blessed because I did survive and I think that's the most important thing. I'm not the name on a wall in Washington DC. I came home and then when I came home I've had an absolutely terrific life. I've never been an alcoholic. I'm not a drug addict. I've never succumbed to that. I don't run around and never [ran] around with women of loose morals. So again I'm just absolutely blessed. I've had a great life. I've made a difference in a lot of folks' lives. That's through my employment plus I was very active with the Boy Scouts of America and youth members within my church community. I've been on a number of boards and committees within the church. [So] I think what probably helps as much as anything else and—plus I was involved with different veterans' groups in different ways—but I think the key is you can't look over your shoulder. You can't look at what's behind you, that's history and we learn from history and we profit from history but the future's ahead of us and if we don't look forward we're dead in the water (Richard, Army, Knee Disarticulation).
- And people until then didn't even know I had it. And today people are saying well we never knew or never tried to help you because you never wanted help. But the older I get the more help I want. From what I can remember the captain telling me when I was in the hospital when I first got there said, [he said] amputees weren't supposed to live after they were 50 years old. And I don't know if that's how it was back then in the sixties where amputees got into their fifties [and] started dying off because of being overweight and the heart couldn't take it and they died. And [when] I [turned] 50 I said what's going to happen now? I'm 63 now so I'm still going (Marvin, Army, BK).

- [I fell into a pretty rough crowd when I got out of the hospital]. And a lot of times that could happen but the thing about it is you need somebody to talk to but the thing is you never know how people are feeling until you've walked in their shoes. You know, they can talk all day but have somebody that's been through what this soldier's been through. If he's lost a limb, have somebody that's lost a limb talk to him. He knows what he's going through and how he feels (Colin, Army, BBK).
- [A] sense of humor is very important. Everybody needs a sense of humor in what they're going. You've got to see the humor in things. You've got to see what's funny about it, you know (Jess, Marine, AKF).

E2. Experiences with Prosthetic and Assistive Devices

The majority of veterans described using prosthetic devices during their lifetime in addition to other assistive devices such as wheelchairs, canes and crutches. Some of the veterans described using both assistive devices and prosthetic devices. A few veterans mentioned adaptive driving, including low force steering systems and hand controls. Two noted increased wheelchair use due to physical ailments they are currently facing. The majority of veterans noted using prosthetic devices.

Prosthetic Devices

Describing Current Prosthetic Use

- I wear an arm fulltime and I've got different terminal devices. You know, different hook type things. I've got hands. Working in a prosthetic shop I had access to whatever technology. I have a set of tools where you can plug in ratchets with sockets and screwdrivers and stuff and hammers. So I can do mechanical type work, low profile hacksaw and various other things. A lot of stuff I made myself. I have an adaptation of a hunting knife. I have a canoe paddle. I have a golf club. I don't play golf. It's mostly for miniature golf when I was playing with the kids. I've got fire arms. I've got a number of different modifications depending upon the type of firearm and the type of shooting...Some of the stuff that I've made, I've collected upper extremity devices so I probably have the largest collection of upper extremity terminal devices east of the Mississippi. I used to say that kind of facetiously and then a couple of years ago I got around to calling a lot of these museums and short of the Smithsonian I think I do have more and I have copies of about 100 patents as well that follow those because I'm going to put all on a website. That's another project I'm working on (Greg, Navy, BE).
- I have an artificial leg which I wear every day. I use crutches to get around in the evening and at night. There's times where I have a cane when I need it. Other than that I do pretty good. I mean I've had some replacements. I've had five artificial legs since '68. Actually it's six, I'm sorry. The first one I only had for three days, four days when I was at the Philadelphia Naval Hospital and I couldn't wear that any longer because of the fact that they had to go back in and do surgery to fix my leg because of the improper surgery that was done initially. I was right at the knee at that time and what happened was when they cut the bone they left a jagged edge and so walking on the leg put pressure on the end of the bone which protruded through to the skin so then they were, the word to me was we can go in and open you up and file down the bone and refit you with a similar type of leg but we think you'd do much better if we cut you four inches above the leg from where they amputated you and give you a different artificial limb which is a suction type device rather than a harness device. The first leg I had, if you can imagine putting on a shoe and lacing it up and would lace up the portion that was on the leg up and then I'd have a harness that you would wrap around your waist and another belt that would go over your shoulder and lace into the belt, you laced around your leg and that would keep the leg on. Whereas the second option they described would be held on by suction and that you put your leg into the prosthetic and you screw in a valve and let the air out and the leg would remain on by like a suction cup. So I chose the second choice and that's what I've had over the years (Josh, Marines, AK).

- [I use a prosthetic arm] and it still works. It's had quite a few straps and cables but it, it's even like when I had the new one built—I've had two of them built since—when I went to work for the telephone company I thought well I'm going to need a spare arm and at the time I was having problems getting that through the VA which is, this is, you know, way back in the, well I went to work for the telephone company in 1970 so that's why I joined the DAV because my neighbor said join the DAV you'll get your appointment. And I did and they made me an arm in Columbus but it just never really, I don't know what we did wrong but it just never felt right. So, like I said, I didn't, in fact, I only went to get the strap replaced and that's when they talked me into getting the new arm. They says well it's been over 30 years. You're entitled to one. So, which it is lighter. I still haven't, I've worn it a few times but it's a lot more lighter than the original arm but the original arm just feels comfortable and that's what the guy told me, he says, you know, like anything if you're comfortable with it and fortunately with an arm amputee you don't get the changes that you do with the leg amputee because of weight and that type stuff (Brad, Army, AE).
- I have a prosthetic leg that's an above the knee amputation on my right leg. I have an ankle brace inside my left boot to hold my ankle together and I had a knee brace over the outside of my left leg to hold my knee together and I also use a cane or a wheelchair. I use a cane if I'm walking with my artificial leg and if I have the leg off I use a wheelchair (Aaron, Army, AK).
- I've got two artificial legs. I've got the type that you put the sheath over the stump and it's got a screw at the end and it goes down into a cylinder in the leg and then it goes down in and locks. But I don't use any crutches or a cane or anything and I've also got some hand controls on my vehicle that I have. [I used a wheelchair] for a good while but most of the time, how I got around was I walked around on my knees. That's how I got around (Colin, Army, DBK).
- [I] very rarely [use assistive devices]. I have them. I have a cane and I have some crutches but I haven't, I was never really good with the crutches and haven't really used them much. I have a number of prosthetic legs. I have a spare set because I'm so active that I have a tendency to break them and mash them up. So I always have a spare set and in addition to that I also have a set of legs that were made many years ago that are actually made to be worn in the water...because of my work at the VA whenever they came out with a new type of prosthesis that they wanted to test and they needed to try it on a bilateral, you know, meaning a double amputee, that I was usually the one that they asked to try it first. Like, for example, when MossRehab in Philadelphia came out with polypropylene legs, I was the first double amputee to get them. And then when they came out with the running legs, I was one of the first to get them. So, when they came out with the Seattle foot, which was an energy storing foot, I was one of the first double amputees to get that. Like I say, a lot of times they would, Washington would ask me to be a guinea pig because I was familiar with it and with how it should feel...I do have an electric wheelchair, one of those little three wheel carts that I got from the VA. Basically only because sometimes I go places where we're going to be walking all day and it would just be physically impossible for me. I'd wind up with sores on my legs from the prosthetics rubbing or whatever (Jeff, Army, DBK).
- I wear a prosthetic leg right now and I have worn one for 42 years. When I take my leg off in the evenings, I use crutches. Sometimes [I use a wheelchair] (Ken, Army, AK).

- I use a cane and on occasions when I don't have my one leg on, my right prosthesis on, I will use crutches. I have a wheelchair but I haven't used it for years. So that's the extent of my uses. I have prosthesis on both legs. [I also use a cane]...I went to a peg leg on the right side because I found I could ride horseback easier and I had had one made for swimming, just for stabilization in the water and then I found, oh, I could ride horses easier with this than with a footed leg. And then I started walking with one and walking I discovered I was more mobile with it and when I finally went to have one built for regular walking as opposed to the swim leg which wasn't really built for regular walking stress, I had to really fight the VA to get it and because they were of the mindset that cosmetic is better and I'm going no, mobility is better and that (Jess, Marine, AKF).
- [I have a prosthesis and I don't use other assistive devices]. Not unless I absolutely have to, no. In the evenings when I take my prosthetic leg off, I do use my wheelchair (Victor, Army, AK).
- Very briefly at the hospital when I first came back it was a wheelchair. I had a couple of revisions on my stump. I ended up going to crutches and then within a year to a prosthetic leg and since then nothing else just the leg (Derek, Air Force, BK).
- [I] just [use] my prosthetic leg. At one time years ago I had a left foot gas pedal but just throughout my life I've learned to drive a car with either foot and because I've been doing it for so long I can, if there's enough room on the floor of the car I can drive left-footed, you know just move my right leg out of the way or I drive with the right foot with the gas and the left foot with the brake which, you know, most people ride the brake and I've been doing it for so long I know better. [The new leg is] working real good. I still have trouble because the shape of my leg and by this time they had been around three years that I pretty much kind of hobbled around and I guess because of my own pride and not wanting to be disabled, you know, I would still try to, now I never used a wheelchair. I would still walk and use a cane or just not walk at all and then I did, ...I tried not to use a cane and then that would, I would just not even walk except from the house to the car or something (Nathan, Army, BK).
- I have a leg, prosthetic leg, and I use that. I have never had a wheelchair. I've been in them when I was in a hospital and stuff but I've never had one at home. I do have crutches and canes but I don't use them often. But over the last year I've had to use them more so than I ever have in the last 42 years and I don't know if it's because of age or not...[But] I think that once you get a little older you just can't do the stuff you did when you were younger (Marvin, Army, BK).
- I use a C-Leg which is the best and the brightest and—there are two things I'd fight you over. That would be, you take my C-Leg away from me and take my computer away from me. I had an old friction knee on the first one and it was a wooden shin and it was a plastic socket but a wooden shin and I mean it was well made. It really did what it was supposed to and that was to get me up and walking but you compare it with the C-Leg and there is no comparison. It's like going from a Model A to a high performance vehicle...My physical therapist at DeWitt Army Hospital was outstanding. He got my strength up. He also really gave me an idea of what to expect and lastly and probably more importantly I was motivated. It was, I did not, crutches, neither crutches nor wheelchair, I had no desire to use either one

of those for the rest of my life...I use crutches now in the evening once when I remove my prosthesis and the only time I've used a wheelchair is when, if, I've had, get breakdown on my residual limb (Richard, Army, Knee Disarticulation).

Limited Use

- I have a prosthesis. It's very difficult to use because of the weight and because my shoulder, what's left of the clavicle, the area and so on in my right side—I keep trying to say shoulder but I don't have a shoulder—but that whole area was broken badly and I don't have any movement. I have very little ability to move that side of my body and the prosthesis requires some movement which I've never had and the other thing is I have a lot of pain in that side and wearing the prosthesis makes it worse. The third part of that answer is I had so many other wounds—I left out lost a lot of teeth and dental wounds and so on, a lot of shrapnel in the mouth and so on—so I was in the hospital a long time and during that time I became adept at using one hand and so when I would wear the prosthesis it was actually a hindrance to me rather than a help. So for all those reasons I haven't used it much (Tim, Army, AE).

Cosmetics

- There was a time when I was young that I was concerned about my looks and concerned about the vanity part of being a young person where I would have liked to have filled out a shirt a little better or not been asked a lot of questions that I would have liked to have had something and tried to use it more but it was just too painful. So in my youth, yeah, I did want to use [a prosthetic] more. It was mainly a cosmetic thing. It was not useful to me functionally (Tim, Army, AE).

Experiencing Pain Due to Prosthetic Use

- I used a cane quite a bit there and of course the prosthesis and it still causes a great deal of pain, messes up my back, but it's better than using crutches. I hate crutches (Steve, Army, BK).

Assistive Devices

General Use

- Well of course I used a wheelchair at first along with crutches and then I went from crutches to a cane and now I haven't used anything for years...I've had this one for about two years now. It's a newer one (Wayne, Army, BK).
- [I used a wheelchair] for a good while but most of the time, how I got around was I walked around on my knees. That's how I got around (Colin, Army, DBK).
- I use a cane if I'm walking with my artificial leg and if I have the leg off I use a wheelchair (Aaron, Army, AK).
- I used a prosthesis for over 20 years then switched to crutches. The crutches I use on and off, depending on what I'm using but I used crutches primarily for 10 years or so and I guess for about the past five or six years I've been doing the electric wheelchair most of the time. Basically with using the crutches and the prosthesis, I've lost all the cartilage in my knee and

my shoulders. So they're not very good for weight bearing anymore, for very long anyway (Harry, Army, AK).

- When I take my leg off in the evenings, I use crutches. Sometimes [I use a wheelchair] (Ken, Army, AK).
- I have an artificial leg which I wear every day. I use crutches to get around in the evening and at night. There's times where I have a cane when I need it. Other than that I do pretty good (Josh, Marines, AK).

Using for Extended Mobility Days

- I have a wheelchair and if we're going to go someplace that's going to require a lot of walking or standing a lot, if we go to some outdoor event or something like that I will take my wheelchair (Ken, Army, AK).

Adaptive Driving

- [I haven't ever had a modified car,] not in the true sense of a specially modified car, no. Well, I take that back. Way back when, you know, now you can put your high beams on from using a lever around the steering column. Way back when they didn't have it, it was foot mounted and so I had a switch put up on the dashboard (Richard, Army, Knee Disarticulation).
- The one thing that I did do was that I got a low force steering system for my vehicle because my left thumb joint and my left shoulder has been worn out due to overuse over the last number of years and I have a Ford Expedition. It's a 2003 and it has a very stiff steering in it when it was new. So I got the VA to install a low force system and it allows me to drive without much strain. If I give an example, before the vehicle had that modification put on it, if I drove to Charlotte, North Carolina it was about a day and a half before my left arm had kind of straightened out to the point where I could begin to do anything and on longer trips. That's about a six hour run from here to Charlotte. I could feel the strain clear over in the middle of my chest but since I've got that low force system put on there it's been an absolute lifesaver (Greg, Navy, BE).
- I've also got some hand controls on my vehicle (Colin, Army, DBK).
- I'm not sure out here in Missouri they picked that up but in Ohio I always had to have either a spinning knob or well, obviously you got to have automatic transmission and power steering or a spinning knob (Brad, Army, AE).

Wheelchair (Increased Use Due to Physical Ailments)

- Crutches, wheelchair and prosthetic device...I can't walk as far as I used to. I'm not as strong as I used to be. My upper body strength is diminished. I do not use crutches now because of that fact and I do use a wheelchair when the prosthesis is off and sometimes when it's on. I cannot walk great distances and that limits my mobility and I think it's had an effect on the fact that my health has declined. It's manually powered. It's a manual wheelchair of which I have two. I have one that I constantly carry in our van and the other one is used primarily in the house, one of which was bought by myself and the other one was

bought by the Veterans Administration after a little protracted fight to get them to do it (Lewis, Navy, BK).

- I used a prosthesis for over 20 years then switched to crutches. The crutches I use on and off, depending on what I'm using but I used crutches primarily for 10 years or so and I guess for about the past five or six years I've been doing the electric wheelchair most of the time. Basically with using the crutches and the prosthesis, I've lost all the cartilage in my knee and my shoulders. So they're not very much good for weight bearing anymore, for very long anyway (Harry, Army, AK).

Adaptive and Accessible Housing

- I've learned that, I think faucets and plumbing are the worst thing there is because nothing works the same way. I know in this house here I never realized that most toilets your handle is in the front while the two toilets, we got ADA type toilets that we had put in here. Well, the handles are on the side. Sometime when you're out at the store, the plumbing store or hardware see how many side handles you can find. It's hard to do. (laughing) I finally found a supply place in Springfield and I think I bought three of them just so I have them on hand when they break (Brad, Army, AE).

E2. Biggest Challenges Living with Limb Loss

The veterans were asked to describe the biggest challenge they faced due to their limb loss. They gave a wide range of answers varying from dealing with the physical pain to wanting to feel “normal.” Three noted that learning to use, and problems with, a prosthetic device was their main challenge. Stigma was also mentioned by two veterans, one who stated he feels that people stare at him, and another who stated that the stigma attached to being a Vietnam veteran has bothered him more than anything. Not being able to do things because of their limb loss was by far the most common theme of the biggest challenges, as the veterans spoke of not being able to do the same things they once could before they were injured. Other biggest challenges included negative attitudes of co-workers, dealing with the government, not having housing that was not wheelchair accessible and maintaining one’s emotional health.

Not Being Able to Do Things

- The frustration you get when you, of course I’m stubborn and my wife learned that pretty quick and I would say, no, I don’t need help. I’ll do it myself. And so she just went with that but probably the frustration of not being able to do the things that people with two arms can do as far as fixing things or whatever. Of course I’ve done some amazing things with one arm but it still, it, that second arm helped like if you’re holding a wrench or trying to do two things (Brad, Army, AE).
- Not being able to run and, you know, some of the dexterity things that you should be, that you’d like to be able to do if you had. For a number of years I coached youth soccer and, you know, it’s awful hard to teach a young person soccer maneuvers when you can’t do them yourself (Richard, Army, Knee Disarticulation).
- Oh, that’s a little tough. I’d say I’ve always pretty much done everything I wanted to do. Challenges I guess would just overcome the limitations of the limb itself. The ability to like run or physical activities. My skill level would be lower than other able-bodied people. I guess that’s just pretty much the biggest challenge. I’ve been pretty much pain free. The equipment that I’ve had since day one has been pretty good. Very few problems like that. So it’s, I guess pretty much every day like anybody else (Derek, Air Force, BK).
- Challenging thing is not being able to do something I’m trying to do. You know, I can’t get into a position to work on something. You need to be down kneeling and or under a sink or something. You’ve got to get curled up into a crouching or sit cross-legged or something. I can’t do that. Or if I go to sit down on a seat often I’ll, if I’m not careful I can pinch my stump between the chair and the appliance and boy that hurts. Slipping on stuff. You know, all of a sudden I’ll, if there’s like a grape or some water or anything on where you’re not expecting it to be and I’m walking and I lose the balance and the traction and you just flip and I’m going down. It’s just a matter, I’m going down. Ice presents me problems and so anything like that that you’re trying to get there, you would get there regularly, you could do it regularly but it’s frustrating that you can’t do it now (Jess, Marine, AKF).
- I guess it’s kind of weird but I guess the most challenging thing is before I lost my legs I was into, I loved sports but now I can’t really do sports like I loved to do. You know, but I do a lot of things that, you know, like we went to Disneyworld one time and I told my wife, I said if I can get on the ride I’ll ride it, you know, and everything that I could get on I did. I rode it

(Colin, Army, DBK).

- Just the fact that I can't do what I used to do prior to the limb loss. I think that's been the most challenging part (Lewis, Navy, BK).
- And also the fact that I, accepting the fact that I just couldn't do everything and that was that I wanted to do. Being an athlete before I was injured was pretty depressing, you know, that I couldn't go out and play town team basketball, you know. I could to a certain extent but not like I used to and having to accept that I wasn't the person I used to be. That was a challenge basically (Ken, Army, AK).

Wanting to Feel Normal

- Being accepted. Being accepted by my friends and family and stuff for what it was and not, being accepted but at the same time not wanting pity. People would try to help me and do these kind of things and that's the worst thing you can do for a disabled person is to try and baby them. It makes them feel a lower form of person and I didn't want to feel that way. I wanted to feel as normal as the next person and I think those challenges were some of the hardest to overcome (Ken, Army, AK).

Stigma

- Another issue is I still feel that people stare at me when I wear shorts, especially young children (Lewis, Navy, BK).
- I guess the stigma attached to being a Vietnam veteran. You know, that has really, really bothered me more than anything. But physically, nothing really. Just nothing really. You know, the pain but that, you know, you just suck that up and go on. You know, explaining to people, oh, what happened to you? You don't look like you're 100% disabled. I even have a service dog. What do you need a service dog for? This is just recent, you know, in the last few years. Why do you have a service dog? You don't look like you need a service dog. I said well you have no damn, no darn idea. I said she's more than just a service dog, she's a companion. I don't trust people. I have very, very few people I let get close to me. I guess that's really about it (Victor, Army, AK).

Attitudes of Co-workers

- I don't know. Most challenging. I think it was the attitudes of some of the people I worked with which really irritated me. They figured that I really didn't need a job because I was getting compensation in that I was taking a job away from somebody else that probably needed it worse and the one guy told me if it wasn't for the goodness of the heart of the company I was working for I'd be out on the street shining shoes. Of course, several years later he came back and apologized profusely and begged my forgiveness and everything else because he finally saw what I was doing from another perspective. That was, I was working for the Hanger Limb Company in Washington, DC and the time. That guy, I'm sure he's probably dead and gone now but it was attitudes of some of the other workers because they didn't have, as I recall in that particular group, I don't think any of them were veterans and they didn't understand the big hoopla, if you will, why I would get into a training program and why I was working for the company but geez they were only paying me \$65 a week. I

mean that's hardly a get rich quick scheme. I'm sure everybody else there except, I bet you the janitor actually made more money than I did (Greg, Navy, BE).

Learning to Use, and Problems with, a Prosthesis

- Nothing comes right to mind on that frankly. I would have to think about it I guess a little bit but I just, nothing really comes to mind. Just again, learning to adapt with a prosthesis and I guess that's the main thing (Wayne, Army, BK).
- I would say the most challenging aspect of my limb loss was the ability to manage each and every new prosthetic that I moved into over the years. Each one of them was totally different in character than the old one which brought in new problems that I had to resolve during those periods of time and not stop doing my every day duties (Josh, Marines, AK).
- I would say [the limb loss and the PTSD are] both equal [in terms of being troubling] because there's been times when I have to take the leg and just throw it in the corner there for a few days to let it heal up and then work at it again and it's not conducive to any work environment that I know of and I don't get along well with people so there you have it. It just don't work (Steve, Army, BK).

Dealing with Pain

- Pain. Physical pain. It can get so bad. In fact, they're treating me with pain medicine now which I did not, I avoided for a long time but had to finally succumb to and, yeah, over the years just sometimes the pain is so bad. About 10 years ago I had to be hospitalized it was so bad. I didn't sleep for days and I a couple of times I've had to be hospitalized for actually just for pain (Tim, Army, AK).

Emotional Health

- The most challenging is to maintain your own personality and not lose it and stay out of trouble by not killing somebody. That's a challenge (Steve, Army, BK).
- I would say [the limb loss and the PTSD are] both equal [in terms of being troubling] (Steve, Army, BK).
- Well, I'm not sure how to answer that. I think the most challenging thing is every day getting up and putting your leg on and going at it. There's days that you just say to yourself why am I doing this. You know, just lay in bed and you just drive yourself to keep going and I think that is one of the most important things I've been able to do throughout my life. That's been the challenge of it all (Marvin, Army, BK).

Physical Limitations due to Environment

- Oh, boy, most challenging? Psychologically, a lot of people want to try to ask you to explain it and I don't think there's any way to explain it unless you've been through it. Physically, it would be probably recently because the house we live in, the way it's set up it's very difficult for me to get in and out and there's no way to build a wheelchair ramp. We went through round and around with the VA about that. It's just not practical and I can't afford to move. So what we ended up with is I have an older model electric chair I keep in my van and in the house I have a, because they also, I don't qualify for making the house accessible, the

amount of money that it would take. I have my \$2000 electric wheelchair in the house that allows me to do pretty much everything I need to do in here except to go up and down steps. It can raise and lower it. So I can work in the kitchen. I do a lot of cooking and I, you know, clean up the kitchen and dishes and stuff and I can do pretty anything I need to with that chair. If I need to go out, it's using the crutches on the steps which sometimes is not a problem but other times it can be very much of a problem (Harry, Army, AK).

Dealing with the Government

- Dealing with the government was probably my most challenging or gave me the most stress and anger of anything that I ever had to do in my life. When they'll blatantly sit there and, in other words, in '96 when they gave me the Post Traumatic Stress Disorder, added that disability, they had my leg grow back on their paperwork and it took me two years to get that straighten out. In other words, you can't just go in and pull your pants leg up and show them that it ain't there. I had to go back and get the original papers and the original authorizations and everything. Then the doctor's signature who did the surgery and prove it. And when the government has the papers and they don't want to give you them that gets real fun to do except I learned very early on I keep the originals and give the government copies. I have the original of every order ever written from 1966 on. I've got a file that's 23,000 pages long. The other thing I have learned about the government and inviting the system is if they deny, I have appealed my cases as much as 17 times. Every time you appeal your case the rules change. If you appeal it long enough or enough times their own rules bite them in the ass. Does that make sense to you? In other words every time they change the rules change till sooner or later they box themselves out. But it's very mind stressing and it kind of puts the hold, every time you fight them you kind of go into war mode or you go back to war. You've got to re-live everything again. I mean I'm sure with college you could get plenty of books to read but if you can imagine 23,000 pages of files which are all doctors and 95% of them handwritten, not typed, trying to translate that and get something that will stand up in court and get somebody that will willingly come to court and say that they signed it. It's loads of fun. You get to the point you don't know who you want to go kill because there's, it's like the letters I got telling me I was no longer disabled. Nobody or no organization or no anything signs it. It's just an order with no signature except it says the Department of Army. So you kind of don't even know who to go to fight. So the only thing you can do is fight everybody (Aaron, Army, AK).

F. LIVING WITH INJURY II

All of the veterans were asked to describe their

F1. Physical Health

The effects of aging in addition to being a traumatic amputee are seen throughout the veteran's health histories. The veterans frequently described health issues relating to weight, blood pressure, cholesterol and diabetes. These were the most frequently cited health concerns that the veterans noted. The weight issues ranged in severity as the veterans spoke of being 10 to 15 pounds overweight to being morbidly obese. Common reasons cited for weight problems by the veterans included limb loss, which limits one's ability to stay active, lack of exercise, diet and performing a sedentary job. Type II diabetes was mentioned by two veterans, both of whom cited Agent Orange as the cause of the disease.

Four veterans stated that their general health status was good while most of the others listed various ailments in addition to/other than those noted above (weight, blood pressure, cholesterol and diabetes). These ailments ranged from trouble with circulation in the legs that required surgery to asthma/lung damage that was attributed by the individual to Agent Orange. Two veterans had prostate and bladder cancer, the latter attributes his cancer to Agent Orange exposure, although his medical doctors do not. In addition to cancer, veterans also experienced other major health problems including a heart attack and hepatitis C. Finally, one veteran mentioned how he experienced difficult memories from Vietnam 30 years later, after undergoing a painful surgery that almost led to the loss of his right leg. The triggered memories created renewed fears about his health that led him to seek counseling. Other physical problems included emphysema, acoustical problems and arthritis.

A handful of veterans noted having skin problems related to their stumps. These problems most frequently stemmed from the use of prosthetic devices and included developing abrasions, sores and rashes. Some veterans noted the use of Ampu-balm or other moisturizer in helping to soothe the skin pain they experienced.

Good Health Status

- [My health over the years has been] overall excellent. I also tended even as a youngster to watch what I ate. I'm what you call trim, very active, [I'm involved in] different sports, different activities, different levels of activities. Just pretty much try to take care of myself (Derek, Air Force, BK).
- [My physical health is] excellent...I have used my amputation as my weight monitor. I am heavier though now than I was when I was wounded because when I gain weight my residual limb swells and when my residual limb swells, not so much donning my leg but, you know, you feel like you're putting five gallons into a four gallon bucket and so, my limb loss has helped me maintain my weight. Type II Diabetes, no, I don't have that and that's not just because you're an amputee but if we served in country it's because of the defoliant that was used (Richard, Army, Knee Disarticulation).
- [My health over the years has] been pretty good. When I first got out, I didn't have a whole lot of problems. But through the years I picked up falciparum Malaria which is reoccurring

and I've had bouts of that six times. I fell and fractured my right hip—stupid but it's my right that's amputated and I fractured that hip and they had to put pins and plates in it and eventually I had to have them taken out. I still have a lot of shrapnel in me and some shrapnel moved and infected one of my testicles and they had to remove it. A little over a year ago [I] fell and I got a very bad staph infection and they thought they were going to have to amputate my left leg but they saved it, thank God. But just, you know, stupid things. I've got to go in. I ran my hand through a glass and had to have two operations on my hand to fix it and I broke an arm because I fell, you know, just stupid stuff. But when I got real, real sick before I quit work it was from malaria and then from that I got pneumonia and I said that's it. How much longer have I got? I want to enjoy it. How much longer can I walk good and everything so I said heck with it I'm going to retire early. So I did...[But my physical health today is] pretty good. Like I said, I just come off of this staph infection last August and since then it's been pretty good. I can't complain. My blood pressure's good, my cholesterol is good, what's good is good but what's bad is bad but they give me a lot of medicine. But it's gotten much better. I took off a lot of weight. So it's a lot better than it was. Mental health? Now that's a different story (Victor, Army, AK).

- My health has been generally good because I'd always been active. When I worked for the VA the bulk of those people were World War II and Korean veterans. Most of them were smokers and drinkers which, you know, I'll drink a bottle of beer with a plate of spaghetti or something but I don't do any recreational drinking, never have and [I] don't smoke but it's the type of a thing where that was a high stress, sedentary type job and those guys that held that position were smokers and drinkers and in about 1970 in about a year or year and a half there was between probably I'd say 10 or 12 of those people either died of heart attacks sitting at their desk or they had to take disability retirement as a result of quadruple bypasses or something of that nature. So, it was clear to me that these people [had] old habits [that were] taking a toll on them and I had three small children and we were always doing something—camping with the kids or whatever—and I took up caving. I did that off and on for a number of years and then I also backpacked on the Appalachian Trail or other areas around. There was always places to go and hike and train, if you will...But I hadn't been hospitalized since this spring, since 1961, and I had a prostate biopsy that got infected and so I spent five days in the hospital with that but, you know, everything's clear now and I'm doing fine (Greg, Navy, BE).

General Health Issues

- I've had a lot of trouble in recent years with circulation problems in my legs, my father had them and all through my family people have circulation problems. It might be a hereditary thing. I don't think it has anything to do with my wounds. I have a lot of problems with my facial wounds. I lost my right sinus and my nose was smashed so they had to kind of put it all back together and I have a lot of trouble with, when the normal person has like a sinus attack I have a major, my face gets all red and there's no sinus to drain and so on. It can be really uncomfortable. I know when I usually tell people that I have these bad wounds and one of my big problems is sinus problems they think it's kind of strange but it actually is. And I had a lot of trouble with my eye over the year, my right eye, which I was able to, they were able to save my right eye and the orbital rim again was gone so they had to do surgery to build up that bottom of my eye to keep the eye structure around it. A lot of cornea abrasions. As far as health problems go, initially right after the wounding I, I'm kind of

bouncing around here a little bit but I forgot to mention that after the wounding when I was in the hospital in Japan after my evacuation from Vietnam, I had a cardiac arrest and central nervous system seizure and I went into a coma for about less than a day. It's hard to give a health history. It's been pretty dramatic...I had about three years ago I was having some trouble with circulation and the doctor made an error and I almost lost my right leg and I was in the hospital for three weeks in 2000, I think six or seven. And it was a very painful surgery to save my leg and my wife said actually my life was in jeopardy and but they didn't tell me that at the time. But it triggered a lot of memories of what had happened 30 years earlier, over 30 years earlier, and triggered some fears about my health. So it was a profound experience and again I went back into counseling and worked on those fears about my health (Tim, Army, AE).

- Right before I retired I had five different things wrong with me at the time. I had a torn muscle under my shoulder blade. I'd have to go back and look and see what it was but I had five little individual things that was wearing me out. I had sleep apnea plus stress plus the torn muscle under my shoulder blade. I think I had some problems as far as my stomach was concerned with gastric reflux and when I came home one day and they'd offered me a buyout, that was a thing that was going on at the time back in '97, I told my wife, you know, I said is there any way we can survive this retirement financially. I said I'm just beat down. You know, I'm just crawling to work. And she said well I think we can figure it out somehow so I took the retirement and I spent about a year just specializing in all these various ailments, you know, the one that bothered me the most I did first and then I got a CPAP machine. I had surgery on my nose so I could breath better because I'd had my nose broken a time or two (Greg, Navy, BE).
- The only problem I ever, in fact, until we moved out here—I think that has more to do with age than—I had, shortly after I started for the telephone company in the early seventies I had what they call a fissure. I think it's like f i s s u r e. It's like a little cut down in your rectum and I had to have that taken care of and other than that I never, you know, I haven't been in a hospital for any type of operations or anything (Brad, Army, AE).
- I have asthma. I've had lung damage from exposure to Agent Orange. I can't walk without assistance. Like I say, I have a wheelchair in the house. I just put in a second chair lift for me to go up and down my stairs in my house because I can't walk the stairs anymore. From having both ear drums blown my equilibrium is off also from the explosion. My eardrums were blown. I see a psychiatrist at least once or twice a month at Ft. Harrison in Montana which since I started seeing them, it's helped a lot to get some of the pressure off. I still can't be around the public without getting angry (Aaron, Army, AK).

Weight, Blood Pressure, Cholesterol and Diabetes

- Well, I'm generally healthy I guess. I've had the usual diseases that people have and other than being overweight [there] is nothing major that's wrong with me right now. Blood pressure, you know, the usual things (Wayne, Army, BK).
- [My physical health is] not as good as it should be for my age. I'm obese. Probably they'd call me morbidly obese because I'm way overweight. I have a lot of trouble with my leg and you know, there's other ways I could get exercise without my leg but it just got away from

me...[The new leg is] working real good... I never used a wheelchair. I would still walk and use a cane or just not walk at all and then I did, I put on close to 200 pounds [after I retired] just because I became more sedentary (Nathan, Army, BK).

- Over the last couple of years because I just haven't been able to be as active as what I used to be, I've gained 10 or 15 pounds. I'm not obese but I'm heavier than I want to be (Marvin, Army, BK).
- I would [describe my general physical health to be] in fair to good range. I'm carrying more weight than I care to. I'm up at 285...the injuries I've suffered haven't helped it because you're somewhat limited in mobility and how much exercise I can do. The other part of it is just plain laziness and over eating. [I have] a desk job. Not getting out to the gym or doing anything else. Up until '81 I was quite active then. So it's been more that last 30 years of working. You get into that work environment and then kind of crept up on the weight...I did notice here oh about a year back my blood pressure was really high so I got myself into an exercise program (Jess, Marine, AKF).
- [In general my physical health is] good. I have some problems that are normally associated with aging. I take medication for high blood pressure and for cholesterol. I would say yes, the blood pressure [is related to my injury]. When I first went to Walter Reed they were very concerned with the fact that I had tachycardia. I had an extremely fast heart beat that never slowed up. Even when I was at rest I would have 120 beats a minute and that's extremely fast. But they never seemed to want to do anything about it because they weren't sure why but I never had that prior to the amputations. That went on until when I hit 50 my doctor had sent me to a cardiologist who wasn't happy with the fact that my heart rate was so quick [and] I was on a blood pressure medicine anyway so he changed it to a blood pressure medicine that would control the pressure but it would also slow the heart. And it was a medication called atenelol and it basically did that. It slowed my heart from 120 beats. Now it averages about 65 to 70 beats per minute. I smoked when I was in the military and after I got out and I started back to school I started to realize that I didn't want my children to see me smoke because of the probability of them smoking was much greater if I did. So I quit smoking and when I quit smoking I gained about 50 pounds and eventually I lost some of the weight. I never went back to my original weight, you know, but I dropped about 25 or 30 pounds afterwards very slowly. But, you know, like they say it took awhile for me to drop that. I'm heavier now than I really should be. I'm about 190 pounds. I really should drop about 20 pounds but I do go to the gym and work out usually two or three times a week but and I'm not a real big eater but for some reason, my metabolism or whatever, I just can't seem to drop that 20 pounds (Jeff, Army, BBK).
- [Trying to keep my weight down is something that I have struggled with]. Yes, it is very much so. And it's basically due to, you know, I can't get around and I'm not as active as I used to [be] and it seems to be difficult to not snack on things when you're sitting around...I have hypertension. I am taking high blood pressure medicine and that's one thing I have always had a problem with, high blood pressure, and it's not been due to high cholesterol, or [being] overweight or anything like that. I just have always had a problem with hypertension and I read an article—I don't know who, some medical magazine or something probably four or five years ago—that a survey was done that the findings were that most people that have

lost a limb were very susceptible to having high blood pressure, hypertension (Ken, Army, AK).

- Well, a lot of Vietnam vets have Type II Diabetes so I do have that. I've got high blood pressure but that's about it. Well, it's just, I don't really know [how the doctors connected my serving in Vietnam with diabetes] because that is one of the things for Agent Orange that they come back and say that Type II Diabetes comes from Agent Orange. So that is kind of like one of the things that they list under the Agent Orange stuff. I didn't really realize I was Type II Diabetes till probably seven, eight, nine years ago (Colin, Army, BBK).
- Well, the last four years it's really went downhill. I've got 25% lung function. I've got Type II diabetes from Agent Orange. I just don't function very well. I'm not able to do very many things (Steve, Army, BK).
- I've got high blood pressure which I keep under control. Other than that I feel like I'm pretty much in good health. More recently, I'm having some problems now related to the medication I'm taking with constipation and things like that. But primarily it's just basically the blood pressure (Harry, Army, AK).
- [Weight gain is something that I've been facing but I don't think it contributes to my general state of health] because I probably weigh about 295 but I've noticed the last time I went and had my checkup in July, I noticed my blood sugar had gotten a little high so I've got to the point to where the last couple of weeks I've tried to cut down and I'm trying to eat a little healthier and try to get rid of some of it. I think due to the limb loss it's more with not really eating a lot, I think it's just less exercise (Colin, Army, BBK).
- I would say [my general physical health is] good. I do have high cholesterol and I'm on cholesterol medication for that. Of course obviously I'm overweight. Should be less weight than I am. One time I had a heart murmur but they really haven't said too much about that. I don't think [my weight is related to the loss of my arm]. I think I've just got too big of an appetite and don't get the exercise I need (Hill, Army, AE).

Cancer

- And with respect to other health problems, I've been good up until a few years [ago] I was diagnosed with prostate cancer and last year had that removed. Matter of fact, yesterday I think it was a year since my operation and my health is very good as I sit here and talk with you today (Josh, Marines, AK).
- Initially [my health] was pretty good. Other than the amputation, prosthetic devices didn't really fit well and a lot of sores related to that. But in recent years my health has declined. I have high blood pressure. I have high cholesterol. I have had numerous surgeries. I've had two back surgeries relative to the amputation. I have had surgery for bladder cancer which the VA denies as being Agent Orange related but I disagree. I have had pneumonia recently. No heart problems as of yet, thank goodness. That's about the extent (Lewis, Navy, BK).

Heart Problems

- I had rheumatic fever when I was a kid. I had an episode back in about 2000, 2002, somewhere in there, where I went to the hospital for a problem with chest pains. They said that I did have a heart attack at one time [because] there was a bruise on the heart or whatever they call it, but they didn't think that it was that time and I think I remember exactly when it was. It was several years ago (Marvin, Army, BK).
- I have this different flutter and sometimes it's like a pain with a flutter and so they started out, you know, my blood pressure wasn't high and they started out putting me on a beta blocker because of that flutter and I told them it was like a skip or something. They've run tests and they say they can see it on whatever machine it was at the VA but they never really described or told me what it is. They just said it's nothing that will harm you and nothing to worry about. So I've always been on this Metoprolol beta blocker which also controls blood pressure so throughout the years they've taken it and it's kind of like border line high blood pressure but when the VA records it they—that's one thing I don't like about the VA, they recorded things however they want. I've gotten copies of my records where, you know, they've totally twisted things around that I've said or in recording (Nathan, Army, BK).

Emphysema

- I would say that I'm not in the best health. I have emphysema and that's, you know, I've smoked most of my life. I don't right now but I did a lot of smoking but I did a lot of quitting too. I would say my health is fair to not so fair (Marvin, Army, BK).

Acoustical Problems

- [I have] Multiple acoustical problems [due to concussions] (Richard, Army, Knee Disarticulation).

Arthritis

- [My physical health right now is] deteriorating rapidly. I have a lot of problems now with arthritis in my back, in my right knee. Basically, and this has been diagnosed from having to wear a prosthetic device for 42 years and it's just the added pressure on my lower back and the extra work on my walking with my right knee and those are basically the biggest difficulties I have physically. Other than that I'm getting some arthritis in other joints and stuff like that. But, other than that I'm fairly good, fairly healthy (Ken, Army, AK).

Hepatitis C

- I had Hep C. There's only one way I could have gotten it and that was through blood transfusion. When I was first diagnosed that I had chronic Hep C I was mad. I said them little sons of guns couldn't kill me outright now they're going to give me this. Well, of course I talked to a couple docs about what I should do or shouldn't do or how long I should wait if I decided to do something. Well, immediately I knew I was going to do something. Of course that's when still the treatment was somewhat, they were only giving a 50% chance of killing the virus. And I thought, hey, 50 is better than none. And so I knew what I was going to do. I had the rest, again, whatever life I had because that was in either 2001, yeah, yeah, it was in 2001. I knew what I was going to do, I was going to take the treatment. So that was 48 weeks of chemotherapy in essence. It worked wonderfully well. And I was mad at first. You know, I said those little sons of guns tried to kill me outright and they couldn't

do it and now this all these years later. But I decided, hey I've licked the amputation I'm going to lick this too (Richard, Army, Knee Disarticulation).

Stump/ Skin Problems

- Sometimes I'll, they'll [my stumps] get pretty red and stuff (Colin, Army, BBK).
- [I have had problems with the skin on my stump over the years]. Well that's one of the main problems that I'm having now. Again, it was a traumatic amputation and they did a skin graft and traction to try to pull the skin down over the wound and there's a fairly large scar on the side of my leg and then on the bottom of my leg like it was really never like they do today where you have an amputation there's a smooth limb stump with stitches that you don't even know they're there. Mine is just a, it's a continuously open thing and then the side of my leg where the tibia is has an area where it just won't heal right... Because I can't wear it right now—and like I said the last year has been pretty bad. There's been times that I've had to keep my leg off for four or five days, seven days, and that ran pretty much for about six months before I could get my leg healed up to be able to walk on it again (Marvin, Army, BK).
- [I still have trouble with the skin on my stump]. I'm still having trouble. Throughout the day as my stump sweats, you know, the only thing that I know that I can do is to take my leg off and take the liner and everything off probably several times a day. I put it back on [and] next thing you know it's sliding and slipping down due to the shape of my leg and it sucks all the fluid and everything down to the end of my stump and makes it real hard. And I have some numb areas. I don't know that it's happening until it's too late and it's real sore. So I have sores down there. [I'm having trouble with my leg]. Well, one thing is I guess I'd like to point out is because of the nature of it being a traumatic amputation and I had about five inches of stump below my knee, but when I was in the Army hospital—that was in 1970-'71. The Army had a certain method, a certain way that they would shape your stump which at that time, when I was getting out of the hospital you'd have to go before a board physician to be released from the Army and when he saw my stump he said, I'll never forget, he told me, he said oh, you have the old model and I asked him what that was and he said well we used to shape them in a cone shape narrowing it towards the end of your stump like an upside [down] waffle cone and he said now they make it straight and blunt on the end then try to save all the tissue and muscle and stuff that they can. Well, back when they did mine I didn't have a lot of muscle and tissue for protective covering. Because of the shape I've had problems my whole life getting a good leg to fit between. They came up with a system quite a number of years back called a locking pin system and it's still real popular today where you roll on, you don a sock and it has a pin with grooves in it and it locks into the prosthetic leg and I was using that and at that time that was one of the best legs I'd had because the leg stays with you when you pick it up. You know, gravity pull on it doesn't bother you as much but because of the shape of my stump and the gravity, the suction on the end of my stump totally changed the shape of my stump and made it worse and I'd get so sore I couldn't wear it. That time I moved to Florida after I retired I couldn't hardly walk (Nathan, Army, BK).
- [Sometimes I don't wear my prosthetic because] Ah, that's more of a case where I've overdone for several days running and I'll develop a little bit of a tender spot on my upper thigh where it rubs against the prosthesis in the back and posterior area and so then I'll take

the leg off and just take a down day for, you know, and give it a chance to heal [but I haven't really had any skin problems on my stump]. No. Not really. The left side though does get dry. The part that's the, my whole calf is in the socket. So that occasionally will get dry and what I'll do is I'll just get some good lotion. I've got some lotion that I put on that and put the moisture back into it, you know, the oils back into it. [I] don't have any serious skin problems with it. It would bruise. You know, if I overdid then it had the tendency to eventually develop a bruise on the back side of the stump and that would take care of it before, you know, because you get up and it's sore. You put the weight on it and you feel the soreness and that's your warning sign to, you need to back off (Jess, Marine, AKF).

- [I have had skin problems with the stumps of my legs]. Over the years because I was active in many instances I would find that I would get abrasions that were actually very similar to what we call a rug burn on the stump and there was a number of things that I had used because of my position at work and at the VA I became familiar with a lot of that stuff. Years ago there was a balm that we used called Ampu-Balm and that was the first one that I used and then years later a company that makes Spenco insoles made a thing called second skin and basically it's a thin layer of gel that is between almost like two pieces of Saran Wrap and what you would do is you could cut it to the size that you needed and then put that, you'd take the Saran part on the one side and put that towards your skin and that would help the abrasion so that it wouldn't get worse. [And that helped]. Oh yes, absolutely. And as a matter of fact now over the last two years or so, I started using them just because once in awhile I would overdo it and get an abrasion on the stump and then it got to the point where I pretty much wear them most of the time now. I use a gel impregnated stump sock and I do wear the woolen stump socks with the prosthesis but I just found that by wearing the gel impregnated, it's a cotton and it's like two layers of cotton and then there's a gel layer in-between it and it's thicker and it really prevents me from getting abrasions and sore spots. So I pretty much wear them most of the time now (Jeff, Army, BK).
- [I have had skin problems on the stump of my leg]. I have had a lot of rashing and that was back when I was pretty active and especially in the summertime in the heat. I had to be real careful. I had one time that put me in the hospital. I got a sore on the bottom of my stump and the sweat inside my socket caused me to get an infection which eventually caused me to go into the hospital for about four or five days...[I still have skin problems], I do but not as much because I'm not as active as I used to be. I'm not walking around and doing things like that. I used to have a lot of problems with that. It's just a matter of a lot of it was hygiene, just taking care of, you know, making sure everything was clean and stuff like that and then putting moisturizer. I have found lately that I use, once I've taken my leg off in the evenings I wash it and then I put a moisturizing cream, medicated moisturizing cream and that seems to help a lot (Ken, Army, AK).

F2. Emotional Health

All of the veterans were asked to describe their emotional health and specifically were asked to talk about their experiences, if any with PTSD. Only four veterans did not have any notable experiences with PTSD or other mental health issues. Most (n=12), however, described experiencing symptoms of PTSD ranging from mild to severe when they were asked about their emotional health. There were several symptoms that the veterans noted. These included having nightmares, intrusive thoughts, feeling angry, experiencing flashbacks, using drugs/alcohol to either fall asleep or stay awake (in order to avoid having nightmares) and paranoia. Two veterans also described activities such as “checking the perimeter”, one of whom eventually began carrying a gun. Three veterans who experienced more severe forms of PTSD mentioned having suicidal thoughts, one of them also noted having homicidal thoughts. One of these veterans did acknowledge that he had once attempted suicide, but has since been helped by mental health professionals.

Four veterans explicitly stated that they were taking medications (anti-anxiety/anti-depressants) to cope with PTSD or some type of depression or anxiety. Many of the veterans did not receive treatment for PTSD until several years after their combat experiences. Lewis, for instance, who suffers from severe PTSD and has had suicidal/homicidal thoughts, stated that he did not receive the help he needed until he entered “intensive psychiatric care” at the VA in 2001.

It is also unclear as to whether or not all of the veterans have been diagnosed. Colin, for instance, claims he never suffered from PTSD, yet he stated that he was hooked on speed because he never wanted to sleep due to nightmares. Greg noted experiencing mild depression, but contributed that to his work. Other veterans described situations in which the affect that PTSD was having on them was apparent, as Aaron noted seeing a psychiatrist three times a week for nearly 10 years. Seeking support from mental health professionals (psychiatrists, therapists, etc) and helping other combat veterans appears to be something that helped these veterans cope with their experiences and limb loss. Harry, for instance, stated that he benefited by writing and getting involved with a veterans group online. Tim also noted that he focused on helping others as to avoid his own problems and that he continues to do this today.

The veterans’ responses concerning mental health issues are presented below in three sections: 1) Good Emotional Health (where the respondents appear to be in healthy emotional states and do not make comments that concern PTSD or other emotional problems), 2) PTSD Experiences (where it is clear that the individual is currently suffering from post traumatic stress or has suffered from this disorder in the past), and 3) Unclear Emotional Health Issues (where it is unclear as to whether or not they suffer from PTSD or have ever suffered from the disorder in the past).

Good Emotional Health (No Experiences with PTSD)

- [My emotional health is] real good. No problems. Happy as a clam (Derek, Air Force, BK).
- [Serving in Vietnam] probably [changed] my temperament maybe. Again I was fortunate I wasn’t out in the jungles like a lot of the guys so I didn’t have to deal with those issues or I never had to shoot at anybody. The worst thing we had probably would have been border attacks and nothing really ever real close to us that caused a problem. But yeah, you know, a lot of people said, even she has said I changed after I came back. So [I] probably [have] more

[of a] short temperament and of course you know I had to learn to control my language because swearing and cussing was natural over there and you had to learn to get those words out of your vocabulary...[I have never had any issues related to PTSD]. I think I've been very fortunate on that. I don't recall ever [feeling any symptoms and] my wife's never mentioned anything like that [either] (Brad, Army, AE).

- I tend to be optimistic. I'm sure there's been times when I was working because of all the stress I had depression. Bound to have it with all the unrealistic goals that were put on and plus all the responsibility for not only personnel but people, that sort of thing. But it's the type thing where I have generally done pretty well in that regard (Greg, Navy, BE).
- I'm a happy-go-lucky, you know, I'm happy and glad to be here and I really enjoy life. So I would say my outlook on life is about the best you can get. I'm very outgoing and I like people and I stay busy and I read and I still occasionally go to school and take some classes. I just stay very busy...When I first got hurt basically I didn't believe that I was going to make it back because of where I was injured and I didn't think they were going to be able to get a chopper in so when I made it [I felt] relief, I was very happy, I was very positive. I felt that I was going to make it and then once I believed that I had a positive outlook. I actually spent some time when I was in the military hospital in Okinawa trying to help some other people that were in the hospital with me that had real bad mental issues and try and cheer them up. I was very positive and like I say I was married at the time and actually when I lost my legs my wife was pregnant at the time so I knew that I had a child on the way and I was looking forward to coming home and being with my wife and—I didn't know it was going to be a son at the time—but [I] was positive...Like I say, I always felt good about it and I just, I had no ill will towards either the military or the VA or my government (Jeff, Army, BBK).

PTSD Experiences

- [My divorce] had a lot to do with [my experiences in Vietnam] and I had a lot of what we now know as symptoms of Post Traumatic Stress Disorder but then were being called Post-Vietnam Syndrome in the 1970s. Had a lot of anger problems and drinking problems and a variety of symptoms of Post Traumatic Stress Disorder and nightmares and so on and I actually was one of the lucky ones that got into counseling in the 1970s and put my life back together...I would say the incidence of being wounded and being in combat are still very vivid in my mind and I mean I could talk, or if I was to tell you the story, it would be like yesterday but it almost seems like another person went through it. That's the kind of distance I have from it now but I know it was me. I had a lot of problems coming to terms with what happened to my body. I'd been an athlete and a surfer and I had multiple losses and I was injured emotionally by the experience and had a lot of anger about it which eventually through counseling I was able to understand that I was being angry with the wrong people and [I was able] to come to terms with what was underneath the anger which was a lot of sadness about all my losses and over the years I would say I've had incidences—during the period of 20 years when I was working as a PTSD therapist and administrator. I was busy, I was concerned with other people, I was raising a family, I was in decent health...decent health enough to work fulltime and raise a family and during that period of time I would say I had periods where I would get depressed—usually anniversary periods, the anniversary of my wounding and that battle and since retiring [and] only working part time, and having more health problems, I've had periods where I have more symptoms of PTSD, more

nightmares, more intrusive thoughts, and sadness about the experience and I actually went into therapy again and that's helped a lot...The first 12 months I felt blessed. I felt that I had survived the unsurvivable and I was deeply in a deep spiritual space and it seemed like as I started healing I started getting angry about getting drafted and the injustice of the war and I had a lot of problems in that area and counseling really helped me pull that together. But I said the first 12 months was largely gratefulness at surviving and thankful to my family that came to my side both in Japan and at Letterman Hospital...All through my life I've had people ask me questions and some more sensitive or less sensitive than others and being in the position I was in which is a leadership position in PTSD care, I did a lot of interviews and a lot of advocacy for vets. So I felt really useful and I was featured on some national television shows like PBS and ABC and I traveled. Went to Russia and helped their Afghanistan vets, oddly enough, in late 1989. Helped them set up a PTSD program. So I was busy and I was feeling useful and I really didn't get lost in my own self as much as I did when I was not as active. I was focused on others and there would be times where, again, it would usually be an anniversary period where I would get real low and have to fight my way through some depression and some sadness about what had happened to me and my wife helped me a lot through that and occasionally I would go get counseling. So those 20 years were the best years...Now about three years ago I was having some trouble with circulation and the doctor made an error and I almost lost my right leg and I was in the hospital for three weeks in 2000, I think six or seven. And it was a very painful surgery to save my leg and my wife said my life was in jeopardy but they didn't tell me that at the time. But it triggered a lot of memories of what had happened over 30 years earlier, and triggered some fears about my health. So it was a profound experience and again I went back into counseling and worked on those fears about my health. But what I discovered [that] I thought I had everything pretty much into perspective but the suddenness and again what I felt like unfairness in the incident caused me to have to go back inside and what's really helpful with that has been meditation and prayer and counseling and support from my family. So the last few years have been a bit of a challenge again...I'm doing much better but I feel like I'm still on a process... But I would say I'm definitely doing better than I was three years ago, absolutely much better. And again I went to work helping others. When I'm doing that I don't even think about my own issues. Who I'm working for and helping others, the family or other veterans or doing something active, takes me out of thinking about my own issues and thinking about a more global, broader issues and it's good for me (Tim, Army, AE).

- [I have pain] all the time. [I] still have the flashbacks and still have the night sweats...[My emotional health] is something I've lived with since all this happened. There was a good bit of depression. You just try each day as you go along. I was doing real good with no psychotropic drugs because I'd learned to deal with that and I'd learned to deal with the pain but I woke up one morning [and] I couldn't breathe and it went on and on and on. It just kept on going and now I'm on Lorazepam and Percocet. It just snapped something in my brain. I don't know what it was but without the Lorazepam I don't function at all now. [I have been diagnosed as suffering from PTSD]. [My symptoms include], the nightmares go along with the night sweats and I have flashbacks during the day. It doesn't matter, there's no rhyme nor reason to them. Just you flashback and you're there. Some of these one or two seconds. Some of them as much as 15 seconds (Steve, Army, BK).

- Generally [my emotional health is] pretty good. [I had trouble with PTSD]. I'd say that was more early on. For the first several years it was not anything that affected my work but I was in all the things. I would drink half a bottle to a bottle of wine to get to sleep at night and stuff and still be up at times wandering around. We'd call it checking the perimeter. Dreams, I had a lot of dreams for awhile. It took me several years to get over them. Somebody got me involved with writing about some of the stuff I've been through. After I started doing that and getting involved with the veterans' group online, most of that has kind of gone away. I haven't had a drink in, god, I don't even know how long it's been. But like I said, mainly it was early and I don't think it was of major significance. It was enough to bother me and officially the VA now lists me as 10% for PTSD (Harry, Army, AK).
- My emotional health [is] good. I keep very busy. I'm a very active person. I've got a home and I'm out there either cutting the lawn, or chopping wood, or climbing trees, or putting roofs on or remodeling the inside of the house. So, with that respect I keep very active mentally and physically and it does me very well. I have always had problems with [PTSD]. I've realized early on that that's something that's not going to go away and that you just need to process it mentally in a different way. There's tons of times you'd wake up at night with the sweats or with problems and you tend to go over things 500 times in your mind about some little thing that you should have done or shouldn't have done that would have saved someone's life or could have changed your life, or witnessed things that you wish you could have not seen. It's there and I just tend to deal with it privately. There [was] one time at work [when we were] sitting in a group meeting going over what [we were] going to do [that day]. Everybody in a round table goes over their part of the project and we had done a lot of, we'd been working late hours and doing a lot of work and this one particular morning were in there and it came to my turn to tell where I was on the project I was working on and I couldn't say a word. I just sat there looking at the manager and he kept on asking me the same question. I could not answer him. Wanted to answer him but could not answer him. I made an appointment with the VA after that and talked to a person there and they said it was probably stressed-induced and they put me on a medication to take care of that, an anxiety medication. Last year I had an episode for a couple of weeks so I talked to a doctor at an outpatient clinic who was a psychiatrist or psychologist—I'm not sure which she was—but anyhow I talk[ed] for about a half hour, [and she] gave me a bunch of paper to go home and do some homework with, with respect to every day occurrences. I met with her three times and then we ended those sessions because for me I felt that it wasn't helping me any, had nothing to do with my problems, and it seemed like that she felt that I didn't have a problem. So I just let it go at that (Josh, Marines, AK).
- [My emotional health is] not good. I'm being treated for Post Traumatic Stress Disorder. I take a quite large amount of medication to keep my mental status in check. [I have] occasional nightmares. Mostly it's more related to my functioning as a human being. I've had suicidal thoughts. I've gone through numerous different programs that the VA has offered, one of which made me worse. I have homicidal thoughts. I think I'm being checked by the FBI but [I am] not real sure (Lewis, Navy, BK).
- I have a hard time relating to [veterans from current wars]. I have seen a number of them. I have seen their traumatic brain injuries. I have seen those men and women and it's really hard for me emotionally. I have broken down and cried many times when I see them. I was

a Navy combat corpsman so I naturally took on the role as a caregiver and I find it very difficult to reach out to them and I think the biggest thing is they find it difficult to reach back to those who have experienced similar situations. It's almost as if they're shutting it in as well like I did. I stuffed everything for many, many years until 2001 [when I received] intensive psychiatric care at the veterans' hospital. I needed some meds renewed from my private psychiatrist that I had been seeing for a number of years and they basically diagnosed me on the spot with Post Traumatic Stress Disorder and they put me into programs and started to do some medication adjustment and changes. Some for the good, some not so good so I had some rough years (Lewis, Navy, BK).

- My first experience with leaving the military hospital and going into the civilian world. I got on a plane out of Augusta, Georgia and flew to Atlanta, Georgia to switch on a plane to go back to Miami. When I was in Atlanta, Jane Fonda was having a peace rally at the Atlanta Airport and I had about 20 of her followers, long-haired hippies, whatever, come at me calling me murderer, baby-killer, government-hired assassin. I put 18 of those in the hospital and at that time I didn't have the leg. After that little experience I kind of stayed away from the public as much as possible. I only tried to deal with other military personnel that knew not to push. I can handle up to about four or five people at one time for a short period [of time]. We went to town today to do grocery shopping. By the time we got to the second store I told my wife I'd stay in the car and she could go in and finish doing the shopping because I'd gotten agitated enough that I couldn't handle any more people being around me and it'll be 40 years this New Year's that I've been home...[I have PTSD and problems with depression]. Oh, first time in '82 they started treating me for it. I was seeing a psychiatrist three times a week for close to 10 years. And then they finally diagnosed [me] and added [PTSD] to my disabilities in 1996. They diagnosed me at 50% disabled because of Post Traumatic Stress Disorder (Aaron, Army, BK).
- Some days [my emotional health is] good and other days [it is] not and I think I really didn't realize, I think that's one of the reasons why I've been married so many times is I just had a chip on my shoulder or something and [it] was hard to live with. And there were times I still had nightmares of what happened and some of the things that I saw in Vietnam. I didn't realize what was wrong with me. I just thought [it] was normal. I didn't know it had anything to do with Vietnam or anything that happened over there. But I about 10 or 12 years ago, I come to realize after [I] talked with some other friends—they said, you know, you sound like you have PTSD. So I did go in to get evaluated at the VA and I do have some forms of PTSD. I do occasionally go to classes at the VA for PTSD... I didn't even know what PTSD was. I think now that I have classes that I go to and everything and [I] talk to other people [about it], I think I've gotten to the point where I know how to deal with it a lot better, you know, just knowing why I was always irritated and why I was short-tempered and everything like that. I didn't really know what was going on so I thought that was my nature but now that I realize what the mental problems were and stuff now I can face it and deal with it and my life is a lot better (Ken, Army, AK).
- [My emotional health is] good. [I would say it is] excellent. [It is] good to excellent. I think in those first couple of years [I suffered from PTSD]. [There was] a lot of alcohol use and [I was] edgy. You know, short-tempered at times and the first few years the closer I got to the anniversary of the injury date I would get moody. [But I] never felt angry. I don't think I

ever felt angry about it. I questioned it but then I resolved that through my own faith and belief system. [I] realized these were things that happen[ed] and you always going to have that why me. You know, that was the biggest thing. Why me. Why this. Why now. But once I resolved all those things then I got beyond that. These things sort of happen. It could be worse and that's I guess one thing about in the Naval hospital all the amputees being together there was always somebody worse. There's always somebody that's a little bit better. So a lot of that resolved real quick...The combat experience is really minor although something would set off a dream and I'm back in the unit or I'm back here and I know it's a dream. I have two sons in the Marine Corps and one of them is a combat Marine. I've dreamt that he and I were pulled in to the same unit and things set them off and I know they're dreams and it doesn't bother me but I guess that's all working out into my brain somehow (Jess, Marine, AKF).

- They diagnosed [me with PTSD] when I lived in Baton Rouge. That's when I come out of the hospital and I say something's wrong with me. I don't know what it is. I started carrying a gun. I couldn't sleep. I couldn't do anything and [I was] paranoid and stuff. So I went to a private psychologist and he says Victor, there's something more wrong with you than I can take care of. You need to go to the VA. So I started going to the VA clinic and they eventually sent me to New Orleans where they finally diagnosed me with PTSD. [That was] about 14 years ago...[I had symptoms before I was diagnosed], but I didn't know what it was, you know. To be very honest with you, I thought PTSD was a joke. I thought it was a joke. But I sat back and after they diagnosed me I said my god, this is what's wrong with me. I had a very, very bad temper. I [will] just put it bluntly to you, I was meaner than a rat's ass and I have these real high points where I'm really feeling good and then I have these low, low points. Certain days bother me. Seeing my old friends bothers me, friends from Vietnam. Days of things that happened, like here just recently...my best friend in Vietnam on my team, right before Veterans' Day he drowned when he and I were jumping and I remember that and Veterans' Day doesn't help and it's just certain anniversaries...[But] I didn't know what it was at that time. I had no idea why I was the way I was. I'd heard about PTSD [but I just thought] that's a farce. That's an easy way out to get compensation. But when I was in Baton Rouge and after I got real, real sick they sent me through that battery of tests for PTSD and everything [and] they says what rock did you crawl out from under. Why haven't you seen us before? And I said I never bothered you people because you didn't bother me and I says, the DAV handled my claim because I had had my power of attorney handled by Veterans Affairs and they put in an increase for my compensation and three weeks later [I was] 100% and I then I filed for social security disability again because I drew social security when I first got out, disability, and I filed again and they give me that back. So I guess something was wrong. But so be it. But the PTSD, I had no idea what the hell was wrong with me. I had no idea. I'd wake up many nights laying on the floor, sitting in the corner with a gun. No idea. And bad dreams. Of course I figured that was normal. But, oh well...I don't take all the medicine I'm supposed to for my PTSD. I only take a third a day of what I'm supposed to but when I see it's coming, I can usually tell, I start increasing my dosages. I start back up, I'll take two a few days and then I'll take three a few days and stuff like that but she looked at me and she says Victor, you need to start taking more, more medication and stuff and my doctor prescribes me diazepam. And she says you need to start taking that until your Wellbutrin kicks in more because it takes a little while for that to get in your system...My first wife, you know, she couldn't understand the sleeping on the floor,

sleeping in the corner, or being paranoid as hell and she couldn't understand [why I would act the way I did] any time somebody would slam a door or come up behind me and touch me. She couldn't comprehend some of that. You know, [she'd ask] why are you that way? It was 40 years ago, Victor, or 30 years ago or whatever it was at the time, you know, 20 years ago. You need to forget [it]. Well, that's the worst damn thing you can tell a Vietnam vet is to forget [it]. You can't. You just have to live with it. That's the worst thing you can do. And she said, you have to get over it. I said, I can't get over it... You know, [I spent] almost a year in Valley Forge Hospital [and] I never once seen a damn shrink. You know, you're getting shot at one minute [and] the next minute you're laying on the ground almost dead and a week later you're in Valley Forge Hospital expecting to be normal? They didn't give us any help there. When I come out, no help. I hate to admit this, I attempted suicide once and the doctor that took care of me, she was a captain in the Air Force and she really, really, helped me to accept what happened. Even my psychiatrist now that I have at the VA, I really like him but he's, [but] my other psychiatrist [that I saw at the VA before him], hell, he didn't know what the hell he was talking about. He didn't know anything about PTSD which upset me very much so I asked for another doctor and I got this new one and I really like him and we can talk and everything but no, nobody other than Vicky, or the doctor at Wright Patterson really helped me a lot. It was something I just struggled with on my own, you know. Suck it up and go on (Victor, Army, AK).

- I retired in 2002. It had a lot do so with Post Traumatic Stress Disorder. Well, actually I've done better than a lot of guys with Post Traumatic Stress Disorder only because I think being in the hospital allowed me to see other wounded people and to hang around with other guys but we didn't talk about our wounds much and that's something I think that the military or somebody should have done was really get us to talk to each other. We mostly just drank our pain away... I didn't realize [that I had PTSD]. I mean, I knew that I was always having these problems, you know, memories and just sounds and smells and things like that but I didn't know there was a name for it or anything until I read about it in a Disabled American Veteran magazine. I started reading, they called it delayed stress at that time in the article and [they] had a check list of symptoms, you know, it's like I fit every one of those and same way with like Agent Orange issue. You know, I believe I'm affected by that as well. And that would have been like 1979...[I had anxiety dreams], absolutely. Yeah, I had dreams. I still have all of that. One thing that really made me retire early in 2002 was the first Gulf War, when that started under, and oh into Kuwait. That really started a lot of stuff happening with, and then that kind of settled down but then when we went to Iraq and when the towers were blown up, then it's just like everything just turned upside down for me as far as my motivation [and] depression, anxiety. It just like kicked everything into high gear and it was all I could do to make myself get up to go to work and up to that point I was, even though I had troubles I still was able to mask it and hide it and push myself to go to work, but then when that happened it's like I couldn't pull myself away from the news, the TV, the war. I just had all kinds of problems so I retired early from the FAA...[I] did [get treatment eventually]. I worked for the vet center as a layman counselor because I didn't have my degree in counseling but at that time they were letting combat vets help combat vets. And that worked real good. In fact, I think that helped me a lot just to be with them. Well, then when I went to the FAA and I was totally away from veterans on a daily contact basis I think that actually helped me a lot. Just by being around them and hearing them it helped me with my own issues going on but then when we invaded in Iraq, at that point I wasn't on

medication but I got so bad that I had to go back to the VA and when I worked for the FAA and they put me on antidepressants and I've been on them every since. I've tried to get off of the antidepressants and the anti-anxiety and stuff like that and I just haven't been able to....I had thoughts of suicide. I had thoughts of going crazy and not understanding what it is. [At] times I thought of running into a bridge abutment and stuff like that just because it was so painful and society, I mean I've had people say things to me even as late as 2001, you know, say well if you volunteered to go in the service you got what you deserved. You know, this was from a co-worker that was a war protester. [But] my wife was always there. She's always there for me no matter what and that's how our relationship [is] and I'm always there for her and my children. I'm thankful to the Lord for having my children and my wife because so many veterans have been through so many broken relationships and alcohol and drugs and that's why when they rate my PTSD because I'm not a drinker or a druggie or been through a lot of wives, you know, they think well you're doing really good. Even though I tell them I said well I'm doing good and I'm doing what society expects and I love my wife but that doesn't negate the fact that from the moment I wake up and put my leg on until I lay down at night and take my leg off, Vietnam is there from every waking moment and then when you live with the pain, physical pain, and the dreams and stuff, they never go away. So really it's been my immediate family, my older brother, you know, they've been my support and they've been my constant stabilizing factor with Christ (Nathan, Army, BK).

Unclear Emotional Health Issues

- I do take antidepressant. I have for several months now. [It's] more for anxiety. [I have never had trouble with PTSD], not that I know of. I'm not exactly sure what you would call trouble with it. I've never had trouble in that I've been treated for it. Let's put it that way (Wayne, Army, BK).
- You survive. You don't really live. You don't trust nobody. I never made any friends so other than family, I have no contact with people. I don't like people (Steve, Army, BK).
- Emotionally I think [my health is] fairly good. I think that there's time, and especially the last five years or so that I do get down...One of my buddies from my company says that I have [PTSD]. I never wanted to admit that I do if I do. I really don't know too much about it because I never got involved with it. Just his observation of me and he is treated at the VA for Post Traumatic Stress and he thinks that all veterans that did what we did have some percentage of that. [Did you ever to your knowledge experience any of the what we might call the symptoms of PTSD like insomnia, temper, agitation, inability to concentrate, anything like that?]. Well, I guess I do have it then. (laughter) If those are some of the symptoms, yeah because I've had all that...[and as far as living with limb loss and the combat experience,] well the combat experience, I would probably say that I've had more thoughts about it in the last few years than ever have. I just think of some of the things that went on and how easy it would have been to die and some of the people that did die, some of my friends, and I just start thinking about things like that and I try to get it out of my mind. I go to my company reunion when I can get a chance to go. That's when we talk and it's not a lot of battle related things. It's what we're doing in our lives now and trying to help some people out that are having some real struggles. There are people there that even today, [can't] get a hold on this (Marvin, Army, BK).

- [I would describe my emotional health as] great. Have I ever had some depression that could be possibly related to my amputation and service? Yes. [But I haven't had any experiences with PTSD]. Not really. Have there been times? Probably. But any prolonged? No (Richard, Army, Knee Disarticulation).
- I think my emotional health is fine. I mean I've got a good attitude and stuff and, you know, I don't let stuff get me down. I've got to the point where I've realized that [you should] not worry about stuff you cannot change and the thing about it is I'm always going to be a double amputee. I cannot do anything about it. There's nothing that I can change about it. So I've accepted and gone on with my life. [It took me a while to do that though,] because, when I first got like this, when I was in the hospital I could [not] care [less] whether I lived or died. It didn't bother me. Because when you lose your legs, you know, you think to yourself, you know, what good are you anymore. You know, you've lost your legs. You're not good for anything. But then while I was in the hospital in Fort Gordon, Georgia I saw people come in there that [were] worse off than I was and I thought to myself, I'm in good shape compared to some of these guys and from then on I realized that, no, I'm not going to let this get me down...[But at one time] I got hooked on Speed so bad I was having to take anywhere to 20 to 30 hits at a time to be able to get off on them. I just got to hanging around with the wrong crowd and I was getting disability money and I was just hanging around with the wrong people [and I] was doing drugs and stuff. I think I took it because I never wanted to go to sleep. I wanted to stay up all the time because I would have nightmares and stuff and I didn't want to go to sleep. I wanted to stay up all the time. It wasn't PTSD, but I was having a few nightmares and stuff (Colin, Army, DBK).

F3. Drug and Alcohol Abuse Experiences

During the course of the interviews, six of the veterans mentioned some type of alcohol and/or drug abuse during their recoveries. Two veterans mentioned drugs, but they deviated from the typical use by veterans who were self-medicating as one became addicted to morphine while he was in treatment and another noted occasionally smoking marijuana in Vietnam. The remaining six veterans spoke of using and/or abusing alcohol and other drugs such as speed and pills after they returned from Vietnam. For two of these veterans (Nathan and Jess), the drinking actually began while in the care of the hospitals. Nathan described getting passes to go out to bars and Jess spoke of people sneaking in alcohol. Some of the stories told by the veterans illustrated the relationship between PTSD and alcohol/drug abuse. Harry, for instance, contributed his drinking to PTSD and said that he would drink “half a bottle to a bottle of wine to get to sleep at night.” Colin believes that his use of speed was not related to PTSD and had more to do with hanging out with the wrong crowd. Yet he stated that he was using speed to stay up at night because he never wanted to sleep since he would have nightmares. Overall five veterans talked about alcohol use. Out of those, three also mentioned the use of pills or other illegal drugs.

Alcohol and Drug Use

- [I met my wife when]her brother was my boss and he introduced us. He warned her I was trouble. I drank a lot and raised hell and, you know... when I come home I was wild and crazy. I drank a lot, I chased women a lot and he warned her. But that didn't stop me. So it didn't stop her either. But I straightened up after I got married. Had to. Had two kids (Victor, Army AK).
- I don't drink a lot anymore but I used to and I think that was one of the ways that I dealt with it. When I first got out of the Army and got divorced I went to the VA and I was pretty well drugged up with prescriptions. I had a lot of stuff that was going on then. [I was using] a lot of pain killers, a lot of stuff to make me sleep, all that stuff and one day we were on a vacation with my brothers and my wife threw everything in the lake and I quit taking it. And I didn't take it until about five years ago when my back got so bad I had to take something. [So] I did drink a bit back then. I mean not all the time but I did drink. So they had to deal with that and I know now in my life that that's not a very pleasant thing to have to deal with at times with other people (Marvin, Army, BK).
- I'd say [my issues of PTSD] was more early on. For the first several years it was not anything that affected my work but I would drink like a half a bottle to a bottle of wine to get to sleep at night and stuff and still be up at times wandering around. We'd call it checking the perimeter. Dreams, I had a lot of dreams for awhile. It took me several years to get over them. Somebody got me involved with writing about some of the stuff I've been through. After I started doing that and getting involved with the veterans' group online, most of that has kind of gone away. I haven't had a drink in, God, I don't even know how long it's been (Harry, Army, AK).

Alcohol and Pill Abuse while in Hospital

- We went through a lot of alcohol, I'll tell you that. We'd come back from liberty and if you're in a wheelchair it's easy to bring back a pint because it goes right up the pant leg [and] sits against your leg, you know, the rest of the pant leg hides it, you get into a room, you divvy it up real quick and empty the Coke machine and fill them with Cokes. And you

have whiskey and Coke, rum and Coke, whatever you're drinking and that was in the main hospital. We had nurses all 24 hours. Well when we got on the outer ward the nurses were only there from eight to four, well after four o'clock guess what, we'd order pizza and a six pack of beer. So was there alcohol abuse? Definitely. [And] I think it was more than young men high jinks. I think we were more susceptible to it because of the injuries. [But] I didn't know anybody there that was a nasty drunk. Most of us were pretty happy. [And was there] there drug abuse? Yeah, there was some of that too. We would get pain medication a lot and we would save a couple of those up and you've got a couple of pills and, you know, we're playing cards. You have a couple pills and a bottle running around the card table and you'd take your pills and your shot of whiskey and then sometimes a corpsman had to wheel us to bed. The one good thing is we had some very good corpsmen... Let them have a lot of rope and [they] gave us a lot of slack and sometimes we would bait people just to see if we could get a fight going. I don't think [that environment] helped a bit to adjust. I think all it did was prolong the adjustment. It was a crutch. Yeah, it's something we all had to overcome. I started doing other things. You know, you've got to get out of the atmosphere. Okay, now we're going to have a drink or we're going to go for some beer some Friday. We'll do that. But essentially it was the environment. It was more environment driven than personal driven. You know, you didn't crawl into the bottle. Well, one or two did but eventually it was just something [that] was a past time. Yeah, you got away from the group. You know, it's a past time and it's like now. If you go to shoot pool, what do you do when you shoot pool? Well, you have a beer. When you're having a beer [you're] going to have a smoke. You know, it's what you did when you were there but I don't think it helped, I don't think it helped a bit in rehabilitation. It made you forget but hell, you sober up and you're still there. Right? So I don't think it helped a bit (Jess, Marine, AKF).

- I've done better than a lot of guys with Post Traumatic Stress Disorder only because I think being in the hospital allowed me to see other wounded people and to hang around with other guys. But, you know, we didn't talk about our wounds much and that's something I think that [what] the military or somebody should have done was really get us to talk to each other. We mostly just drank our pain away. We'd go out every night and because we got passes. We'd just go to the bars and drink until they closed and then go back to the barracks. We didn't ever really talk much about Vietnam. We didn't talk about that stuff. It was more about here and now. The only time we talked about anything to do with our injuries was maybe one guy would talk about the guy that was making his leg or something, which I think was healthy mentally for us, we would tease each other about our injuries, you know. [Drinking didn't continue after I left the hospital]. I totally quit drugs and alcohol. In fact, my, when I met my wife, she led me to the Lord as a Christian and I quit everything at that time. [But before that] I would take illegal drugs. I'd [use], illegal drugs, alcohol, anything. [And] she never did say [if you don't stop drinking and using drugs I will leave] but I just knew that. I knew that if she was going to be in my life there were things that her and God expected me to give up in order to follow that pathway. I'm not saying that it's been like, you know, wonderful and glorious but...I experimented with every kind of drug and I did everything you could imagine. So being able to walk away from all that it's pretty nice (Nathan, Army, BK).

Speed

- I got hooked on Speed so bad I was having to take anywhere to 20 to 30 hits at a time to be able to get off on them. I just got to hanging around with the wrong crowd and I was getting disability money and I was just hanging around with the wrong people and doing drugs and stuff. You know, you think to yourself you have to, I guess to get along you got to do what they got to do but it turned out that no, that wasn't the thing. I think I took it because I never wanted to go to sleep. I wanted to stay up all the time because I would have nightmares and stuff and I didn't want to go to sleep. I wanted to stay up all the time. It wasn't PTSD but I was having a few nightmares and stuff. [But] I never turned into an alcoholic (Colin, Army, DBK).

Morphine (Medical Use Led to Addiction)

- When I finally got back I was at Walter Reed for more than nine months and I had to have a revision. The closure that they did on my stumps was just to stop the bleeding but what had happened was because it was traumatic amputations I had very, very pointed bone ends that were not good to fit a prosthesis to. So they informed me that I needed to have a revision and have that fixed which I did and that was a bad time because as soon as they put me back on the drugs I became addicted again. When I was in Okinawa I guess I had become addicted to the morphine and the stuff that they were giving me but they broke me from that before they shipped me back and then when I got back here as soon as they did the operation I became re-addicted and it was not a fun time for me but eventually with the help of the physicians and the nurses and my wife I was able to get beyond that. Like I say, I always felt good about it and I just, I had no ill will towards either the military or the VA or my government (Jeff, Army, DBK).

Marijuana

- Maybe if I would [have used drugs and alcohol] I would have felt better. I've always told people I was a poor excuse for a German. I drank beer but I never really liked it that much. And I never really did drugs. I did a little pot, you know, one or two times in Vietnam and a few times after I got back out of the service. But it was never anything that I was dependent on or anything like that. So acid and any of those other things, no, I never did anything like that. [No] cocaine or nothing. Just a little bit of pot once in awhile (Ken, Army, AK).

F4. Experiencing Pain

Several veterans described pain as something that they still experience today. The pain experiences include phantom pain, pain associated with prosthetic use and overcompensation, and cramps and muscle spasms. The negative consequences of the veterans' experiences of pain include increased disability and limited mobility, having to take an early retirement and experiencing difficulty functioning and sleeping too much because of pain. The majority of the negative consequences experienced by the veterans, however, revolved around having difficulty sleeping because of pain. The veterans also employed different methods of pain management that varied from taking prescription medicines and pain killers to using hypnosis and acupuncture. The wide range of pain management also included using an ace wrap and trying to keep warm, using a TNS (Magnet therapy) and heating pads and cold compresses. The medicine that the veterans mentioned using for pain included Fentanyl patches, Percocet and Oxycontin.

General Pain

- Well like you go to the VA and the triage nurse looks at you and says well, what's your pain level from one to 10? You know, and I laugh at her. I says, you know, ma'am if I can get up in the morning and I don't hurt there's something definitely wrong with me. But I'm serious, if I don't hurt, something's wrong. I'm dead. And I hate to put it that way but it's the truth. If I don't get up and don't hurt, it's a joke, you know (Victor, Army, AK).

Limb loss Pain Descriptions

- Well, yeah I have pain with my prosthesis [and some] in the knee a little bit from all the extra effort that goes on it I guess but nothing major on that, [as well as] phantom pains. They're not regular at all really. Just at certain times (Wayne, Army, BK).
- I have severe phantom pain all the time. Usually the worst time is when—I should say the severe time—is when the weather is changing. That's when I really feel it and I can't even hardly sleep at night. And it just feels like someone's cutting my toes off, you know, just like with a knife or putting it in a vice and clamping my foot down in a vice...I'm [also] service connected for my back. I've been service connected for that for years just because of the overcompensation and I have as I've gotten older, I'm 60 now, so as I've gotten older I have, you know, I'll have knee pain, my hip, that's why that's limited me with my walking and also before when I went in the Army I had flat feet. So that's created a problem being a single amputee just over the years. You know, it's my prosthetist that I have now in Orlando, he said basically he said, the best way to explain it to someone is to say, you know, is in the condition that I'm in, you're allowed so many steps a day before you have to take an extended rest to recover from it. So I have trouble with my foot. Pain and swelling from being a flat foot and I have pain in my knee (Nathan, Army, BK).

Limb loss Related Pain Descriptions

- There's times where you'd be sitting at the table or standing around and all of a sudden your toes cross and for a normal person you just uncross your toes but as an amputee you have to think very hard on how to cross your toes and it takes a long time before get your toes uncrossed. I don't know if you can imagine that but it's a real fun puzzle, mind puzzle, to work on. I do have problems today with muscle spasms. Just yesterday I was laid up all day with a heating pad and cold compresses and Advil because I'd get these tremendous sensations would run down the stump and at the end it would be like somebody taking a

hammer and hitting you at the end of your stump or if you had, you know, it would really, really send you, you know, tears in your eyes. But that's something I've had ever since the removal of the leg. It comes and goes during the seasons. Sometimes I think it's more in the fall and winter that I have them than in the summer. So I think it might be a seasonal thing. You know, cold weather or what have you, tends to bring it on more than nice, hot weather. So, I don't know why I stay up north (Josh, Marine, AK).

- I have some [phantom pains] on occasion. Most of them have subsided. Occasionally I'll get some sharp pain that's relative to phantom pain. It's like nails being stuck under your toenails (Lewis, Navy, BK).
- Oh, yes [I have phantom pains]. They come real, I have a bad spell sometimes at night when I'm trying to sleep that it occurs. It doesn't occur a lot but it's, usually probably maybe a couple of times a month, give or take a few...[Also], sometimes when I walk a long time and stay on my legs a lot the end of my stumps will hurt pretty bad but other than that that's about [the only pain] (Colin, Army, BBK).
- The [phantom pain] stopped—for many years I did and I used to get, I used to get muscle spasms where my stump would actually jump. Even when wearing the prosthesis I'd be sitting at the kitchen table and all of a sudden my leg would jump up and hit the underside of the table. I had really bad phantom pains for many years but basically what I found was it gradually diminished to the point where the only time that I really get the phantom pains now is if for some reason I'm startled in such a way that I maybe contract the muscle in the stump and it must activate the endings, the nerve endings, in the stump and I may get them. But as a general rule I don't get them very much now. [Also], sometimes, depending on how active I am or what I'm doing, you know, I may develop some pain in my knees or in my thigh or in my hip. I used to get a lot of pain in my back and you know, basically it was from the gait. I had actually talked to one of the orthopedic doctors that I worked with and he said even though I have a fairly normal gait and I'm a really good walker it's still not absolutely normal and because of the, the way that I do walk that it puts more strain on my lower back and it would cause me to get muscle spasms in my back (Jeff, Army, BBK).
- Yes, I do [have phantom pains] and not as often as I did at first. The phantom pains for the first several years were, I would have them three or four times a day, daily, and a lot of times at night. I did have a lot difficulty sleeping at night because I would have the phantom pains. At that time I didn't, I wasn't one for taking a lot of pain pills and stuff and, but a lot of that had to do with how much I was using my leg, how much I was up, and how much I was walking (Ken, Army, AK).
- I continue to have phantom pains. That's a most interesting thing too that I can still feel my toes most of the time on, well let's see, I'm doing it right now, you know, it's always tingling. There's always a tingle there. But with phantom pains I feel the toes on the left side, most of the toes. And on the right side over the years those phantom, you know, because there's a distance associated with it and you always felt the foot out where it belonged and then over the years that distance of feeling sensation has gone away. But I, there are times on the right side. You know, like you get a cramp in the middle of your sole of your foot. That's occasionally what I get on those phantom pains. And then I do have

some nerve act up. It took me a long time to figure out what was causing that but it seems that my, the nerves on my right side will have flare ups and it's kind of associated with being dehydrated...[I also] have lower back pain (Jess, Marines, AKBK).

- Yeah, I have a lot of that. Phantom pains in my legs. Sometimes I can't sleep at night. It just starts hurting bad. I've got arthritic pains in, like I said, my left hand and in my foot and I've got pains in my left, or my right leg where it just feels like I have to stretch it all the time. I don't know what that is and like I said, I just had back surgery in February and they took three discs out and put two rods in and screws...I [attribute this] right to my leg because I really believe that over the years I've always tried to correct my walk where I don't limp, I haven't limped, and people really, you know, unless they see me in shorts they don't even know that I have an artificial leg...My doctor, an orthopedic surgeon, told me that my good leg is worse than my bad leg now because I've favored it so much over the last 40-some years. I wouldn't have had that if I didn't have the artificial leg (Marvin, Army, BK).
- [Phantom pain] has been rare. I've had it over the years. It's extremely, extremely rare from the standpoint of phantom pain for, and I define that as knowing or the feeling that you still have a remaining limb that is missing. That was, has been rare and in the past and I have no sensations of that now. Now at the same time I can tell you though, do I hurt 24 hours a day? Yep. Do I know that I've got a prosthesis on? Yep, I sure do [in my stump]. [I also get some pain in other parts because of overcompensation]. A good example is going upstairs or inclines, going up inclines, fatigue in the sound leg, and sometimes some pain in the knee of my sound leg. Occasionally and it's rare even though it's happened in the past, I have had pain in my lower back just because of the hips being out of alignment (Richard, Army, AK).
- All the time, yes [I have pain associated with using my prostheses]. Phantom pains are [also] still prevalent. Every once in awhile, not like it used to be, but every once in a while a leg will start drumming. You know it's there (Steve, Army, BK).
- Yeah, from time to time I do [have pain in my residual limb]. It's the type of thing that I think it was about six or eight years before the phantom limb kind of settled down but if I hit a, if it's cold and damp and there's like a storm system coming in and I'm kind of feeling a little bit run down, kind of flu like symptoms, then it kind of bothers me (Greg, Navy, BE).
- In the first few years the pain was very, very high and I, I took a lot of naps. I was tired a lot. I was in the hospital for about a year straight and then in and out for a year and then periodically you had some hospitalizations. But I was weak and I built my body back up though. I got wounded in 1969, by 1976-77 I was actually playing sports again and even though it caused me pain, I had been an athlete when I was young, so I was back playing softball and basketball and doing better and that's when I finished graduate school and went to work fulltime. So, I was doing better then and through the seventies and eighties [I had] pain problems but I pushed myself through them and I was able to get through them. In my late forties and early, late forties, I'd say mid to late forties I begin to have again the same kind of pain I had in the early years and which eventually led me to take a 20 year retirement from the VA...[Its both physical pain and phantom/stump pain. Again,] when my body was more youthful and I was able to exercise quite a bit, I would, there would be a certain point where I would go to far and I would be in a lot of pain but I kind of pushed myself and I got

myself up to a fairly good level of operating between oh, I would say about ages 23 and 45. So there was about a 20-year period in there when I did pretty well. But I always had problems with phantom pain and stump sensations and pain in the area and it's significant now (Tim, Army, AE).

Negative Consequences Related to Limb loss Pain

1. Increased disability

- I've been service connected for that for years just because of the overcompensation and I have as I've gotten older, I'm 60 now, so as I've gotten older I have, you know, I'll have knee pain, my hip, that's why that's limited me with my walking and also before when I went in the Army I had flat feet. So that's created a problem being a single amputee just over the years (Nathan, Army, BK).

2. Knocks me down

- I do have some pain problems with my stump which is not very frequent but when it does happen it knocks me down for a little while anyway. I also have pain issues with the shoulders and knee and the knee right now is giving me hassles. I try to, today I'm having trouble getting from my bed to the wheelchair so much. Those are mostly intermittent (Harry, Army, AK).

3. Early retirement, difficulty functioning

- In my late forties and early, late forties, I'd say mid to late forties I begin to have again the same kind of pain I had in the early years and which eventually led me to take a 20 year retirement from the VA...now I have to take pain medication which I avoided for many years and I'm not happy about it but it's where things are. Without it, I'm not able to function (Tim, Army, AE).

4. Limited mobility when experiencing pain

- I do have problems today with muscle spasms. Just yesterday I was laid up all day with a heating pad and cold compresses and Advil because I'd get these tremendous sensations would run down the stump and at the end it would be like somebody taking a hammer and hitting you at the end of your stump or if you had, you know, it would really, really send you, you know, tears in your eyes. But that's something I've had ever since the removal of the leg (Josh, Marine, AK).

4. Increased sleeping due to pain

- In the first few years the pain was very, very high and I, I took a lot of naps. I was tired a lot (Tim, Army, AE).

5. Problems sleeping due to pain

- I have severe phantom pain all the time. Usually the worst time is when—I should say the severe time—is when the weather is changing. That's when I really feel it and I can't even hardly sleep at night. And it just feels like someone's cutting my toes off, you know, just like with a knife or putting it in a vice and clamping my foot down in a vice (Nathan, Army, BK).

- Yes, I do [have phantom pains] and not as often as I did at first. The phantom pains for the first several years were, I would have them three or four times a day, daily, and a lot of times at night. I did have a lot difficulty sleeping at night because I would have the phantom pains (Ken, Army, AK).
- Yeah, I have a lot of that. Phantom pains in my legs. Sometimes I can't sleep at night. It just starts hurting bad (Marvin, Army, BK).
- Oh, yes [I have phantom pains]. They come real, I have a bad spell sometimes at night when I'm trying to sleep that it occurs (Colin, Army, BBK).

Pain Management

- When my body was more youthful and I was able to exercise quite a bit, I would, there would be a certain point where I would go too far and I would be in a lot of pain but I kind of pushed myself through them and I got myself up to a fairly good level of operating between oh, I would say about ages 23 and 45. So there was about a 20-year period in there when I did pretty well. But I always had problems with phantom pain and stump sensations and pain in the area and it's significant now. Now I have to take pain medication which I avoided for many years and I'm not happy about it but it's where things are. Without it, I'm not able to function (Tim, Army, AE).
- And I just usually use an ace wrap, put an ace wrap on [when I get the pain in my residual limb] and drink something that's warm, you know, like Ovaltine or eat something that's kind of warm, something that will warm me up. Put on some additional clothing, that type of thing. Turn the heat up a little bit. Usually in that situation well I can, you know, it maybe bothers me maybe overnight....I've used a TNS unit, [which is] magnet therapy [for phantom pain]. There was a Japanese company that made a magnet system that was called Nikken and I had a chance to work with a Nikken system one time and that relieved the really painful phantom limb. It pretty well cured me for like a year and a half. Used it like two nights or three and that was the end of it. I mean that was, I've never experienced anything that was quite that successful in relieving phantom limb. Of course I talked to the rehab doctors about it and there was no real research at the time and magnetic therapy or electronic therapy of various types was something that came along in the latter 1800s and then it came back in the fifties and most of the people that were in the medical field had been told apparently that these electronic devices didn't work and the charlatans usually peddled this stuff. So the average physician that you run into doesn't have much experience with it. Newer devices and research, there are devices that are being used currently. I see them advertised in the professional journals that I get that are, oh, for people that have a drop foot condition and I'm not sure what the system is but you have a cuff that you wear around the calf of your leg and you have a little some kind of a stimulator that picks your foot up when you're walking...there is some success with those (Greg, Navy, BE).
- I'm also taking on a Fentanyl patch and I take Percocets on a regular basis. So that keeps it under pretty much control (Harry, Army, AK).
- I take a medication for phantom pain. It's basically a drug that epileptics take and they found it does very well in squashing that part of the, I guess the brain that has or takes commands

from your body and like...I do have problems today with muscle spasms. Just yesterday I was laid up all day with a heating pad and cold compresses and Advil because I'd get these tremendous sensations would run down the stump and at the end it would be like somebody taking a hammer and hitting you at the end of your stump (Josh, Marine, AK).

- Yeah. It's still there [the phantom pain]. I just ignore it. You know, it doesn't bother me (Brad, Army, AE).
- My pain level is relatively high. It's being controlled by Oxycontin (Lewis, Navy, BK).
- I had actually worked with one of the physicians down at Wilmington using biofeedback and hypnosis to help teach some of our patients to deal and to get rid of the phantom pains [and it worked]. [Yeah] he used hypnosis as well and it really helped a lot of the guys with the phantom pains (Jeff, Army, BBK).
- [I take pain pills for my back and knee pain] I've been doing that for probably about a good five or six years anyway (Ken, Army, AK).
- I [took pain killers] before years ago but now all I do, as soon as I [get nerve pain], I try to keep hydrated while, and then but if I don't do that and they're flaring up then I start drinking a lot of water to get rehydrated so that the flare ups will subside (Jess, Marines, AKBK).
- No [I don't take anything for pain]. They've tried all kinds of pain medicine. Most of them when I take enough of it to get rid of the pain then I start, it does something and I start itching all over. So, I mean they've tried everything from Darvon and that one's worked pretty good but if I take enough then that starts to itching and the same way with hydrocodone and right now they give me morphine which they gave to me just before I went on vacation. I didn't even bring it with me because I didn't want to be trying the new medication. I'm real opposite of what the sixties were, you know. In the sixties it was like drugs and alcohol. Now I want to take the least amount of drugs I can (Nathan, Army, BK).
- But when I was in China—I have really, really bad shoulders, arthritis in them I guess because from using my upper body so strong—I did acupuncture and got hooked on it in China. And I come back here and I asked them about it and all they want to do is send you to pain clinic and give you Percocet or morphine or crap like that and I told them to take it and stick it. So I went and paid for my own private acupuncturist (Victor, Army, AK).

G. SOCIAL SUPPORT DESCRIPTIONS

It is well documented that having strong networks of social support can help combat exposed veterans adjust to their injuries and experience and improve their long-term prospects and quality of life⁴. Social support refers to those aspects of social relationships that provide a sense of self-worth and offer resources in tackling life's troubles⁵. As such the primary purpose of these interviews was to better understand the nature of social support. All of the veterans were asked to describe who they perceived as supportive and then were probed about the variety of ways they were supportive. By far the most mentioned support providers in the lives of the veterans were their wives or girlfriends and fellow veteran peers. This was followed by family members and children. Other sources of support mentioned were care friends, therapists, dogs, and broad social networks. Several veterans also discussed times in which they perceived a lack or loss of social support.

In terms of the kinds of support received, the men identified supportive behaviors and appearances that were consistent with how the literature categorizes social support.⁶

In addition, we also asked the veterans to describe who in their network took on the role of caregiver at any point during their life-course. By caregiving, we meant intensive unpaid assistance and support that involves extensive levels of a variety of types of support provided to the individual over a specific period of time. Although many of the veterans did not perceive anyone in their social networks as caregivers, those who did identified their wives in nearly all the cases as taking on a caregiver role. One veteran mentioned his son and another mentioned his brother. Care giving activities involved....

This section on social support is divided into seven sections – Family Support, Wives/Girlfriend Support, Children Support, Veteran/Peer Support, Other Sources of Support, Caregiver Support and Lacking Support.

⁴ Solomon, Z., Mikulincer, M. and Avitzur, E. 1988. Coping, locus of control, social support, and combat-related posttraumatic stress disorder: a prospective study. *Journal of Personality and Social Psychology*, 55 (2): 279-85.

⁵ Berkman, L.F., Glass, T., Brissette, I and Seeman, T.E. (2000) 'From social interaction to health: Durkheim in the new millennium. *Social Science and Medicine*, 51, 843-57.

⁶ House, J.S. *Work, Stress and Social Support*, Reading MA: Addison Wesley 1981

G1. Family Support

All of the veterans were asked to describe their current

G2. Wives/Girlfriends Support

Nearly all of the veterans were asked to identify who or what has been the most helpful to them in terms of living with combat-related limb loss. Ten of the 15 veterans who were asked this question identified their wives or girlfriends. When describing this type of support, the veterans mentioned all types of support discussed in the literature, general support, esteem support, emotional support, and instrumental support. However, by far the most common type of support mentioned was esteem and emotional support.

The category of general support included veterans' descriptions of support that was more broad and unspecified compared to the other categories. Wayne, for instance noted, "I think it's the supportive thing and she just kind of moved on with her life...she went through the really hard part of the physical healing. So she was very supportive there for several years and everything went along fine."

Esteem support included the veterans' experiences in which their wives support helped the veterans cope with their injuries through various ways including accepting and adjusting to their amputee status and being supportive in standing behind the veteran in terms of what he wants to do. Accepting and adjusting to the amputee status was something that helped the veterans cope because it meant their wives still held the men in high esteem regardless of their injuries. This appears to be important as Josh stated, "She's never looked at me as an amputee. She's always looked at me as just another person which is, in itself, a lot of support." Another veteran, Lewis, also spoke of the importance of esteem support when he stated, "She accepted me for who I was. She didn't look at me as a person who really had lost a limb. She looked at me as a person on the inside. She's been my rock. I don't know what I'd do without her." It therefore appears that for several of the veterans' their wives' ability to adjust to their initial injuries was an important form of support. Being supportive in standing behind the veteran in terms of what he wants to do was also mentioned by three interviewees and falls in line closely with esteem support as it parallels not treating the veterans differently because of their limb loss.

Emotional support included aspects such as the veterans' wives being there for them. Lewis, for instance, stated that his wife is his "best friend...and she has been my rock. She was the best thing that happened to me." Having someone who cares for the veteran and is a companion clearly helped improve the long-term outcomes for the veterans in this category. Two veterans also mentioned emotional support that came in the form of their wives not prying or asking questions about their experiences in Vietnam. Lastly, one veteran spoke of desiring more emotional support in wishing that his wife had "been a little bit more supportive on listening to me and my anguishes."

In the remaining categories, two veterans noted instrumental support and one noted informational support as being helpful. Instrumental support came in the form of being someone who the veteran could count on to take care of things (practical everyday problems) while informational support pertained to advice and information giving.

The last categories include multiple types of support in which veterans described experiences of forms of support that overlapped. Esteem, emotional and informational support overlapped in the case of Victor, for instance, whose girlfriend is a psychologist and is able to help him know when to take his medicines and also accepts what happened to Victor. Emotional and

instrumental support also overlaps in the case of Lewis, whose wife he notes as “very understanding” and someone who “has been strong and very supportive when I have emotional problems as well as physical problems.”

Finally, descriptions of support that do not fit in any of the above categories are coded as other. This includes descriptions of veterans who do not perceive their wives as being over-supportive (or doing things that were well-meaning but not supportive) in addition to two veterans who do describe times of over-support.

Ultimately receiving support from their wives—regardless of what form of support it may be—is clearly an important part of the veterans’ ability to cope with limb-loss in both the short and long-term. The descriptions provided by the veterans illustrate the importance of having a companion in life who accepts one regardless of limb loss and is there to support them.

Wife Most Helpful Support

- It would be my wife [who has been most helpful], my current wife (Aaron, Army, AK).
- Most helpful? That would be my wife. Most consistent, yeah (Jess, Marines, AKF).
- I’d say yes. [my wife’s] probably been the most supportive (Richard, Army, AK),
- The person most helpful has been my wife (Tim, Army, AE).
- Well I think having a good wife and kids has been a large part of it (Greg, Navy, BE).
- I’d have to say my wife [has been most helpful] (Lewis, Navy, BK).
- Well I think that’s my wife first (Marvin, Army, BK)
- It would come down to my wife. She is very helpful with my problem (Josh, Marine, AK).
- Uh huh. Yeah [my wife has been the most helpful]. Yeah, she’s been my shoulder to cry on and everything else. She’s been real good, you know. She’s the best, I’ll tell you (Colin, Army, BBK).
- Absolutely. 100%. No doubt. No doubt about it [my wife has been the most helpful] (Jeff, Army, BBK)
- I would say [my wife has been the most supportive], yeah. Yeah, because you spend all your time together (Brad, Army, AE).

Support -- General

- [My first wife helped me in the process of adjusting]. For several years she certainly did. Well, sympathetic isn’t exactly the word. I think it’s the supportive thing and she just kind of moved on with her life and that’s just the way it was...[My wife] had to live with me and she went through the really hard part of the physical healing. So she was very supportive there

for several years and everything went along fine. She was very supportive (Wayne, Army, BK).

- [The support my wife has given to me over the years has been] phenomenal. We just supported one another. But it's been wonderful.... I know in my personal situation I came back into a very supportive situation. I had a spouse who was very supportive. Matter of fact, I'd just gotten in the hospital in Japan and there was an overseas telephone on one of those crank up bedside tables. I looked around, there was no corpsman and I picked it up and it was my wife on the other end of that telephone. So I came back into a very supportive situation (Richard, Army, KD).
- I got married before I went over on the first tour. It was right as I was headed over. [And my wife], well, she'll help me any way she can. She don't really understand—well, no civilian could—what it was like over there. She knows I had nightmares continually and I couldn't be touched to wake up or anything like that. She learned real quick and we've never really had a problem in that way at all. She's always been there for me when I need her...She was always very defensive of me like I was for her and we've been pretty much loners. She has six of her family left and I have just my brothers left. We don't associate, you know, we don't visit, nothing like that. [But] she's a real decent person. I'll just put it that way and she'll help me any way that she can but I am independent. If I can do it myself I'm damn well going to do it myself. We fuss with each other every once in awhile because I try to do too much and then I end up paying for it and she's like I told you so once in awhile. (laughter) (Steve, Army, BK).
- [My family was] really supportive [when I came back married]. I'm sure that probably inside [they felt] whoa this is a step for this guy suddenly to try but they knew [my wife] and liked her and knew that she had the same kind of caretaker part to her that she could be married to [me]. A lot of the family and friends were really worried and [warned her what] she was getting into with this seriously wounded person who could die young but she wanted to do it anyway. So there was a lot of concern on both ends when we first got together but when we did so well out of the gate that when we broke up most everybody that we knew tried to help us get back together (Tim, Army, AE).
- [My current wife is somebody who supports me]. Oh, yeah. I have an excellent wife now. I mean we actually knew each other before I went to Vietnam and dated a couple times and she lost her husband, oh, 15, 20 years ago to cancer and had never remarried. And we kind of got back together and I've always said if I'd married her the first time I probably wouldn't have went through all those marriages...I think they were probably supportive but it got to the point where I was hard to live with my attitude. I don't know how to really explain [it]. I think I was maybe self-centered and [it] was all about me because [of] the way I was. And I think it just went back to the fact that I was bitter. I had a chip on my shoulder although I still hid a lot of things. I still went on to try and better myself but I think deep down and stuff I was still bitter about what had happened to me (Ken, Army, AK).

Esteem Support

Accepting and Adjusting to Amputee Status

- Let's see, other than he, my wife of course. She's always been one that has always been supportive. She's never looked at me as an amputee. She's always looked at me as just another person which is, in itself, is a lot of support. (Josh, Marine, AK).
- [I do think the fact that my wife was able to adjust to the new reality helped my own recovery]. Oh, absolutely. 100%. She's a very strong-willed individual and that definitely played a big part. You know, I think if she would have been otherwise, it would have drug me down but she was very supportive and very positive....she was the one that initially pushed me to go back to school. So, you know, it was definitely her that made a big difference in my attitude (Jeff, Army, BBK).
- Just my wife [has been supportive]...You've got to remember I was only 20 years old when I got injured. I went in the service when I was 17. I didn't have really a chance to live and understand the relationship with people I guess except for school and I hated school. So it's just been downhill since then as far as interpersonal relationships... The only one I could say was truly helpful was my wife and she accepted it right away (Steve, Army, BK).
- [My wife has] been outstanding. She accepted me for who I was. She didn't look at me as a person who really had lost a limb. She looked at me as a person on the inside. She's been my rock. I don't know what I'd do without her. I really don't. [I met her on a] blind date. I had been married once before and during that period of time it was rough. I drank a lot. [But] I basically met [my current wife] through a conversation with my mother who said there was a gal that she thought maybe I could get to know. And [she] gave me her name and I called her up and arranged a date and from there it was a rather rapid romance. We saw each other for who we were internally and not externally. She had had a daughter out of wedlock who I adopted. So our daughter is an adopted daughter for me but realistically she will call me her father no matter what. She views me as her biological father. I'm her father, period. She got rather upset when her grandmother said something about writing something about her stepfather and she said no, he's not my stepfather, he's my father. So she was a pleasure to have in our life. She still is. She's my little girl (Lewis, Navy, BK).
- [Before I came home I worried about what she was going to think of me]. Oh, yeah. Before I came back to this country the Red Cross had come to me and they said look, you know, a lot of girls can't— she was only 18 when we got married so she was 19 at the time and they said she may not be able to handle this. She may leave you. And then on her end they told her that a lot of guys come back and they don't want to deal with their wives and they just tell you to get out. So the first thing I did when I got back was I uncovered my legs and I said this is what happened. Do you still want to be with me? And she said yeah, I didn't marry you for your legs. She said, I married you because I love you and whatever we have to do we'll go through it. And she stayed with me at Walter Reed the whole time I was there. She was pregnant at the time and she was as big as a house and she used to push me around in a wheelchair because at the time my left hand was not usable so I couldn't really push a wheelchair myself. So she used to stay at the guest house on the grounds and push me around. And then eventually I was transferred to the VA hospital. I was in a room with a young guy. He was a Marine who had lost both legs pretty high up above the knee and he was bitter. I used to talk to him and he used to always tell me, you know, don't you think she's just staying with you because she feels sorry for you and I said no, I don't. I know how

she feels. But he had a hard time accepting it and it was weird because after we left I didn't see him for awhile. But then when I started working in prosthetics he became one of my patients and I actually got to see him eventually overcome his problems and have a normal life (Jeff, Army, BBK).

- [Do you think it was important to you that she was able to make the adjustment to your new circumstances?] I think [her] initial yes, I know [about your injuries] and that's okay [was something that] relieved a lot of anxiety. So I didn't have to deal with that part of it. And when [I was in] the back of that ambulance, when we pulled into [the] Army Hospital and I was on a stretcher on the floor of the ambulance I was looking, trying to raise [my head] up and look out the front window to see what was happening. And the next thing I see is two little heads bobbing around this door. It was my wife and my mother. So they were at the hospital (Richard, Army, Knee Disarticulation).
- That part of my wounding never got in the way of what I needed and as far as being a soldier, she was a hippy girl but she could tell the difference between the war and the warrior. She knew that most of us—especially us draftees just got caught in a bad deal (Tim, Army, AE).
- My wife is] very supportive. She worried about me when I was scuba diving but she tended to be very supportive about what I do and she knows when it's time for me to have a day down. That's what I do. But everything else, it's no different than if I had both the legs. [And I think] that is important. That is very important (Jess, Marine, AKF).
- [If my wife had not been able to adjust it would have impacted my own ability to do so]. Absolutely, yeah. [So the fact that she was able to adjust to the new reality really did have an impact on my long term quality of life] (Brad, AE, Army).

Supportive in Standing Behind the Veteran in Terms of What He Wants to Do

- My wife who was a friend at the time came to see me the first day I was back in the United States. Over the last 40 years [she] has been extremely attentive to what's going on with me and other than the period of time where I pushed her away [she] has been incredibly supportive and helpful and supportive of and standing behind me and helped me do the kinds of things I wanted to do [that] were difficult to do (Tim, Army, AE).
- She's very supporting in the fact that anything I tend to do she never says don't do. I have climbed large trees, topped them and eventually cut them down and I've been on roofs and I just finished painting the roof on a ladder and now that I'm 66 she's kind of leery about me hanging around ladders because of my age but she just says be careful because you've only got one leg. She'll get out there and hold the ladder for me at times when there's a need for it. But if I plan on doing something she'll never say no. It's my choice. I think that's support in itself. [She doesn't] voice any bad vibes (Josh, Marines, AK).
- As far as I know, [my wife responded to my injury] fine. I mean of course everybody was shocked because they were expecting me to be home when they got the telegram that I had been injured because they're getting ready for my return. But no, she's been very supportive. She kind of learned, you know, with my attitude, you know, that I was going to try things she'd say kinda okay go ahead, do it yourself. Backed off on it (Brad, AE, Army).

Emotional Support

Always There, Cares for Me, My Best Friend and “Rock”

- [I think it's important to have someone in one's life to help them through the rough spots]. I really do. And I think a lot of vets don't have somebody like that in their life and that might be why a lot of them are having problems. They don't have nobody that cares about them or cares for them and I think that's the best thing that you could have is have somebody [to] care about you and really it's just like we're best friends as well as husband and wife. I mean we do everything together. We've got us a place in Florida that we go down to and she just loves to go down there (Colin, Army, BBK).
- [My wife] takes care of the fact that I need to get to the VA for health care treatments. She [provides] great mental support. She doesn't totally understand everything because she was busy during the war so she really didn't understand what was going on over there. I still have a hard time discussing it with her. She knows basically what happened but the other things that transpired over there are really hard to share with her. But, I guess the best way I can explain [it] is [that] she's my best friend and my wife and she has been my rock. She was the best thing that happened to me (Lewis, Navy, BK).
- I don't know what I'd do without [my wife]. She's been just as great as she can be. I mean she's really supportive and pretty [much] in anything I want to do. I mean she's the greatest there is...she's just like, I don't know, she's just like my rock of Gibraltar I guess. I mean she looks after me and takes good care of me and that's what's good. Sometimes if I [am] feeling bad or something, she's always good about really looking after me and saying it'll be alright. Don't worry about it. So she's good like that (Colin, Army, BBK).
- Without [my wife] and without my faith in Christ I'd hate to think where I'd be. She has been my stabilizing factor in my life. But now as I've been a Christian longer, you know, I don't want to get behind the pulpit but I have to say that Christ has taken over that. I let Him lead my life...So it's like my wife was always there. She's always there for me no matter what and that's how our relationship [is]. And I'm always there for her and then my children, I'm thankful to the Lord for having my children and my wife because so many veterans have been through so many broken relationships and alcohol and drugs. And that's why when they rate my PTSD, because I'm not a drinker or a druggie [and I haven't] been through a lot of wives, you know, they think well you're doing really good. Even though I tell them well I'm doing good and I'm doing what society expects and I love my wife but that doesn't negate the fact that from the moment I wake up and put my leg on until I lay down at night and take my leg off, Vietnam is there from every waking moment. And then when you live with the pain, [the] physical pain and the dreams and stuff, they never go away. So really it's been my immediate family, my older brother, you know, they've been my support and they've been my constant stabilizing factor with Christ (Nathan, Army, BK).

Not Prying and Not Asking Questions about Vietnam Experiences

- [My wife] recognizes and understands what my combat experience was in Vietnam. She's not one to sit down and ask a lot of questions. She doesn't pry. If I talk about it she's not one that asks a lot of questions in regard to what had happened or why it happened or that

sort. We tend to have just a regular everyday man and wife relationship. What was in the past, to her, is just that, in the past. And like myself, I dwell in the past occasionally. I could say it might happen seriously, you know, maybe every couple of months. You never at any one time during the day [do] not think about your experiences there but she never does a lot of commenting about it (Josh, Marines, AK).

- [My girlfriend] has never asked me about [my combat experiences] much at all since we've been going together. Of course this is quite a while after [my] initial[ly] being wounded. And as we were dating those activities came out and I can't remember exactly how long it was when we started dating that I told her about my experiences, just lightly touched on them. Just so, you know, [I don't want] you [to] find out things that you don't know about from other people [because it] possibly might scare [you] a little bit. I don't know. Some people react differently but she took it right in stride. Been no problem since then. But there again, she had never really asked me about a lot of stuff and I don't volunteer it so just some of the things [I] lightly touched on [like my] experiences over there, and actually more of my experiences in peace time rather than during the war time. Just the things that happened to you in base and just the adventures type of things (Derek, Air Force, BK).

Desiring more Emotional Support

- There have been a few times during the 40 years we've been married that I wished she'd been a little bit more supportive on listening to me and my anguishes but, I was dwelling over in my head because sometimes you can't think things out all by yourself and you like to talk it out. But looking back over these years it wouldn't have really made too much of a difference I guess even talking them out. It's something that was probably good not happening (Josh, Marines, AK).

Instrumental Support

Someone to Count On and Take Care of Things

- Well I think having a good wife and kids has been a large part of it. I could count on my wife, you know, if she said she was going to do something, something would be pretty well taken care of unless she run into a calamity, you know, of some sort like the car broke down or something (Greg, Navy, BE).
- My current wife has been very supportive. She's helped me deal with things that I haven't been able to deal with or that I can't deal with. She realizes when I reach a point that I can't deal with it anymore and she'll tell me let it go and she'll take care of it. She's always taken care of it since we've been together (Aaron, Army, AK).

Informational Support

Giving Advice

- When I got my prosthesis she said to me, what are you going to do with your life? Because at that time I was on disability social security. I didn't have to go to work. And she said, what are you going to do and I said I don't know. And she said, well why don't you go back to school? And she was the one that initially pushed me to go back to school. So, you know, it was definitely her that made a big difference in my attitude (Jeff, Army, BBK).

Multiple Types of Support

Esteem and Instrumental Support

- She was just glad that I wasn't dead and if the only thing wrong with me is I had my arm missing that wasn't going to be a problem. She knew that somehow we could work it out. I mean that pretty much has been her attitude all the way along. [She's supportive in treating me the same]. Oh, telling me to take the trash out whether I wanted to do it or not. Didn't make any difference, I had one good hand left and I could take the trash out. You know, stuff like that. Or when it was periods of time when there was something that I needed to do or if [I] wasn't feeling well or something she'd jump in and try to fill that gap. You know, make sure that the kids were looked after and that things were organized and try to keep the schedule on the home front because between working fulltime at the VA and then doing the DOT programs, you know, there was a time that I would be gone for two weeks and I could always count on her. I could call home and talk about how things were going and it wasn't the type of thing where she was a helpless type individual that needed my constant support just to get through the day. We didn't live a soap opera kind of a life (Greg, Navy, BE).
- My wife [is supportive]. I mean she's been tremendous over the 37 years we've been married...anything that happens, you know, if I get down [my wife will] start coming back on me and just helping me out getting a better frame of mind. If I can't wear my prosthesis she helps me out a lot there. I mean she's there when I need her and [she] helps me in everything I do (Marvin, Army, BK).

Emotional and Instrumental

- I'd have to say my wife [has been most helpful]. She's very understanding and she gets concerned when mentally things aren't going right with me and she'll intervene. I have permitted her to have open contact with my psychiatric care team so that she is able to call them at any given time if something isn't going right. She will voice her opinion to them as well if things aren't going right, if the meds aren't working. She's done that in the past and she would do it now or in the future. She just basically, emotionally, she has been strong and very supportive when I have emotional problems as well as physical problems. She worries about me. Let's put it that way. Sometimes I think it's hard on her. She doesn't really. I just feel it. I feel that it's hard on her to see me going through what I'm going through and then have gone through over the years. She's one who holds a lot of it inside to herself (Lewis, Navy, BK).

Esteem, Emotional, and Informational

- [My current girlfriend is supportive]. Oh, very much [so]. She's great. She's fantastic. She's, you know, when I first met her she didn't even know I had a leg off. I walk pretty good. I've got the best legs they can buy me and everything. I've known her for quite awhile. I knew her. Oh god I hate to say this, [but] she is a psychologist at the VA hospital and I met her there in a group session. We'd just speak, we was friends. In passing we'd say hello and stuff and I had known her for awhile and one day out of the clear I says, you're not married, right? She says no. [So I asked,] why don't we go have dinner? And when we had dinner she [said], I shouldn't really be seeing you. I said you're not my case manager. You're not my psychologist. You're not my psychiatrist. And she says, well it's unethical if I looked at your medical records. I said I know that. So we talked about it and we get along

great. She accepts what happened to me. She understands and she knows how to deal with the PTSD and everything. She really, really helped me here last month or so—really helped me—and we don't live together or anything like that but she's gone a lot with this new job she's got. She travels around to different VAs. But she's home on the weekend sometimes. She's gone this weekend but she's very, very, very, very supportive of me. She understands...[The support I get from her] is a combination of both [what she says and what she does]. You know, she sensed that I was going into one of my low periods and she says Victor you need to start taking more of your medicine. I don't take all the medicine I'm supposed to for my PTSD. I only take a third a day of what I'm supposed to but when I see it's coming, I start increasing my dosages. I start back up, I'll take two a few days and then I'll take three a few days and stuff like that. But she tells me, she looked at me and she says Victor, you need to start taking more medication. And my doctor prescribes me diazepam, Valium I guess, but diazepam. And she says you need to start taking that until your Wellbutrin kicks in more because it takes a little while for that to get in your system. So she does it that way and she just, ah, (emotional) I'm not a huggy feely person but she's changed that a bit and she knows when I'm hurting. She's not like a mother but she really is concerned. It shows in different ways but, you know, she knows [that] I need to do things and I know I need to do things and if I don't react quick enough she's there, she hugs me, she holds me and she's there for me. I'm there for her. She's very, very, very, very supportive (Victor, Army, AK).

Esteem, Instrumental and Informational Support

- [It was very important that my wife was able to adjust]. [It was] tremendous. For quite a few years while I was in school she was supportive of my going to school. When I decided that it was time to get a job and I went to work at the VA she supported that. She's always been there for me when I had physical problems, you know, even physical problems that were maybe not necessarily associated with the amputation. She's always been supportive and made a big difference in my life and my children as well. My children all went into medical fields because they saw what I did and where I did it and I talked that up to them because I had always hoped that they would go into the medical field. And again they were always supportive and actually when I retired I was given a chance for early retirement and I was debating on whether I should do that or not and my wife and my three children all came to me and said look, you know, you've given 20-some years of your life to help the military people and the veterans and it's about time that you start thinking about yourself a little bit. And they're offering you a once in a lifetime chance and we'd like to see you do it. And I said well I think I'm too young to stop working but they all said we're not telling you to stop working. They said if you want to work you could work but you don't have to necessarily work as high a stress job and you've given enough back. So like I say, all of my children and my wife all were involved in my decision to do that (Jeff, Army, BBK).

Other

Not Perceiving Over-support

- [Have there ever been times that she's just been so stressed out that she hasn't been there for you?] No. Never. [Has she ever been well-meaning but the help she was offering not what you needed at the time?] Never. We haven't had a fight in 32 years (Lewis, Navy, BK).

- [I don't know if there ever was a time that she was well-meaning but not supportive and not what I needed?]. No, nothing comes to mind on that (Wayne, Army, BK).
- [Were there times that she was well-meaning but that wasn't what you needed at the time?] I don't know. Well-meaning but not what I needed. I don't know. I'm not sure I could come up with anything. I don't think I ever remember anything like that. Certainly nothing that comes to mind (Greg, Navy, BE).

Perceiving Over-Support (well-meaning but not perceived as supportive by the veteran)

- There's been times [when she was well-meaning but it wasn't supportive]. [At one time I was] trying to get her to understand some of the combat experience but it was a futile effort. Civilians' mind[s] don't wrap around what happens when you're in combat, what condition you get down to. [And there have been times that she was trying to be supportive but didn't know the right thing to do or say]. Oh, yeah. There's been times like that. There's been times when you have to have a certain sense of humor about yourself to be able to laugh at yourself because otherwise you're done. If it weren't for her I'd be gone a long time ago (Steve, Army, BK).
- [Have there been times that she's been well-meaning but it hasn't been what you needed at the time?] Yes, but very few. [Could you describe one of those to me?] Not right now (Aaron, Army, AK).

G3. Children Support

Overall the support the veterans received from their children frequently came not in the form of direct care giving, but through the children accepting their fathers and not treating or viewing them as different because of their limb-loss. Esteem and/or emotional support therefore played a major role in many of the veteran's lives concerning the support they received from their children. Only in a couple of cases did the men describe instances of social support that were more instrumental in nature.

Six veterans talked about the support that they received from their children. Four of these veterans described what it was like having children grow up in light of their limb-loss. The support that these veterans received from their children is divided in this memo into the two categories of esteem and emotional support and instrumental support. Esteem and emotional support involves veterans' descriptions of their children including how their children grew up with their limb-loss and did not treat them differently because of it. Tim, for instance, stated, "If I had to open the bottle they would grab the bottle and I would twist the top. It was just sort of like they just grew up learning what they needed to do." One of the four veterans who mentioned his child(ren) growing up with limb-loss did not mention his own child but instead spoke of caring for his grandson, which he noted as "one of the best things that happened to me." It is obvious that to these veterans having children and grandchildren who love them is support in its own right. Instrumental support was also seen when Harry spoke of his adoptive son being there for him, "If I needed something he was there for it," and Jeff, who spoke of finding meaningful employment in working for his son who owns his own garden business. These themes are further illustrated below.

Esteem and Emotional Support

Growing up with limb-loss (protective of me, just knowing what to do, not anything special)

- Well, [my kids] grew up with a father with disabilities and so they've not, the way they put it is they've not known otherwise but when they were children it was in my healthiest period and even though I was one-armed, I coached their teams and I played sports and so on because I was blessed with a lot of athletic ability. And again, I would say that had a lot to do with me recovering well because I was pretty much ambidextrous even though I lost my dominant arm I was able to do a lot with my left arm and so the kids just saw me as different and I can remember an incident with my oldest son. When I went to pick him up from school, he was about six years old, and he was arguing with two other boys and they were making fun of me for having one arm and I, ah, it could have broke my heart a little bit but his reaction was to stand up to them and said he got hurt in the war, don't you know anything. So he kind of turned it around on them and made it look like they were the ones that had the problem not him. And he was about six years old. That kind of gave me an idea of, that's the best illustration I can come up with of my oldest son. He's always, when I've had problems or physically or anything I know once he was in Germany when I was having a lot of physical problems and he was calling almost daily long distance to check on me. About 10 years ago the Nightline program did a profile on [us] for their show and interviewed our sons and I did a program on kind of the kind of questions you're asking and showed it nationally for a couple of years. In fact, it's still available on their ABC news whatever store. The reason why I bring that up is because I got to actually see what they thought because they were getting interviewed by somebody separate from me and not with

me there. The producer gave me all the outtakes of their interviews so I can answer your question real clearly. My middle son is really a sensitive young man and again always, they always just, you know, if I had to open the bottle they would grab the bottle and I would twist the top. It was just sort of like they just grew up learning what they needed to do. So I'd say that they all were extremely supportive and very concerned. My oldest son saw me have a grand mal seizure when he was a little boy, he's always been really protective. Guess I think that scarred him a little bit (Tim, Army, AE).

- Well I think they grew up with it. We didn't have any children when I was hurt but, I mean, they just grew up with it and really, even to this day they don't, it's not, I won't say not a big deal but it just, it's not anything special to them. Like you might have somebody that's not used to seeing something like that or being around a person. Now along that line, I'll throw something else in. One of the things I pride myself in is that people don't know that I'm an amputee because I try to, I get along so well on my prosthesis. I do pride myself in that. Unless somebody does find out and they tell somebody else. But at work, for years at work nobody knew it (Wayne, Army, BK).
- They grew up with me working with them, from when they came home from the hospital feeding them, changing their diapers and playing with them. So they just grew up around all this menagerie of stuff that I was doing and they saw me working with hooks and doing stuff and showing them how to do things and it's been one of those things where they were exposed to me and some of my friends who had various levels of disability so it was the type thing where they just kind of grew up with it. So my son that teaches industrial technology is always on the alert for some kind of gadgetry (Greg, Navy, BE)
- We have a 15 year old grandson who I view as one of the best things that happened to me as well. He's grown up with me. We were primary caregivers basically for him after school and before school from his kindergarten years and, you know, still, he doesn't talk about the war. He's never really asked me a lot about it. He just views me as a grandpa and I prefer him to view me as such. I think in his own time he may ask questions about the war but as a 15 year old they haven't studied the war in Vietnam and at some point I hope they do but I find the schools aren't teaching Vietnam too much [Lewis, Navy, BK].
- Probably who has been most helpful has been the son I semi-adopted. He's very good at not letting me feel sorry for myself. He had a phrase he used to use a long time ago. I was handi-abled not handicapped. Doing what I actually needed to have done but being, treating me as if I was normal otherwise. You know, as much as possible he treated me as the leg wasn't a problem....[So my adoptive son's] probably been the closest and done more for me than almost anybody else. He's living with me, he started living with me, he moved in with his son 10, 12 years ago, something like that. Because I was, he was trying to raise a kid on his own and I was babysitting and helping a lot. We just figured it would more simpler if they lived here and I became Papaw to his son who died last year which I'm still trying to get over. He's been there and he still is...He pushes me to get out and do stuff and be involved in things. Which is good because a lot of times I'll get lazy and not want to bother. [My] other children [also] do anything I need for them to do. My other son still was, has moved back in with his kids after he, his wife got into drugs, etc. and he ended up with custody and he'll do anything I need for him to do and it probably, my daughter lives close by and if I

actually need something they're there to do it. Probably the best thing that they do is not treat me any different. I mean they obviously worry about me if I have to get to the, go to the hospital for something. Want to know if, make sure what the doctor's saying, if there's something we need to do, if I'm getting my medicine and all that kind of stuff. But it's more like treating me no different than if I wasn't an amputee. I think that's probably the best thing they've done....[so] he's the one, I guess when he was around 20 or something started me riding. He just harassed me until I did it basically and we used to sit and talk a lot about things. He asked a lot of questions and he went to the, something else that was very big to me. When the Moving Wall came to Cincinnati the first time, my wife couldn't find time to go with me. I was afraid to go by myself and he was the only one that would go with me. And he's probably been the closest one other than the guys from the Vietnam group (Harry, Army, AK).

- Both [of my] boys see me as Dad. They're very proud of me being in the Marine Corps. We haven't really talked much about my combat experience in Vietnam (Josh, Marines, AE).
- I can describe it as understanding. She accepted it immediately as a child of nine years old. She understood that I couldn't do a lot of things that most fathers could do but she still cares a lot about me and she worries when things happen and, you know, healthcare wise. She was pretty understanding for a young girl at the time. She didn't view it as anything different, you know, other than her dad had an artificial leg and that was about it. She just accepted me for who I was internally (Lewis, Navy, BK).

Instrumental Support

There for me if I Needed Something

- You know, as much as possible he [my adoptive son] treated me as the leg wasn't a problem, etc. but if I needed something he was there for it (Harry, Army, AK).

Provide meaningful opportunities [work after retirement]

- When I retired they gave me early retirement—I worked other jobs afterwards. And I actually only stopped working those other jobs when—my son has a business and he had asked me to come and help him and that's basically what I do now. He has a garden center and a lot of times I come over and I'll drive the backhoe or I'll drive his dump truck and do some deliveries for him or work the store or whatever. Whatever he needs me to do to help and I'm here, I mean right now it's the slow time of the year because people don't plant in this kind of heat. But he does Christmas trees, they do the fall stuff, the mums, the pumpkins, all that kind of stuff so, you know, I get a few, there's a few months a year that I'm not busy here but the rest of the time I'm very active here. Sometimes I'm here, you know, 9, 10, 12 hours in a day (Jeff, Army, BBK).

G4. Veteran/Peer Support

The veterans discussed numerous forms of support that they received from other veterans after being injured and continue to receive today. Several veterans noted that they belonged to organizations and groups affiliated with the military and veterans. Such groups included the Vietnam Veterans of America, the Disabled American Veterans, the Veterans of Foreign Wars, and other unit associations. Several of these veterans noted that they are not “active” members of these groups but they appear to benefit from their affiliations nonetheless. Four veterans mentioned more general forms of support without including specific details of how support was provided/received. The general support included things such as being in the hospital with other amputees and forming friendships with veterans while attending school.

This memo also describes three specific forms of support that the veterans discussed during the interviews. The forms of support include providing emotional support, providing esteem support, and providing instrumental support. 10 of the veterans spoke in terms that implied support is given and received by sharing their thoughts and feelings and being able to understand what other veterans are going through because they too have been there. Harry, for instance, stated that, “people just talk about their problems, their history, what went on in ‘Nam, what they remember, what’s going on now and what kind of problems they’re having, all sorts of stuff. And the people involved, they’re very supportive, I understand that, I did this, you know, that happened to me too, you’re not the only one.” The forms of communication that the veterans used varied, ranging from email to talking on the phone periodically to having “get togethers” every couple of years. Regardless of how the veterans maintained contact, through their comments it is apparent that having other veterans who they can talk to and count on to listen is important. Some veterans also benefit from being the ones who provide support. Being around other veterans also seemed to be a form of support in its own right, as one veteran, Ken stated, “Another thing that helped me was just being around other veterans, you know, because we seemed to have a bond and they seemed to understand more.” Other forms of emotional support included talking to veterans of the current wars in Iraq and Afghanistan, being able to find out what happened to the other soldiers in Vietnam, and becoming friends later in life rather than immediately after Vietnam.

The second support category was that of esteem support. This included several different instances of various forms of support. When discussing initial forms of support, including field care and overseas care, Tim who stated that the combat medics and friends in the field gave him hope that he could make it, and Josh, who said that veterans from the VFW called him when he was recovering in Japan to offer their support. Esteem support was also discussed by Nathan, who noted that being with other wounded veterans in the hospital was helpful because “guys started getting onto your case and you weren’t allowed to be feeling sorry for yourself.” Being

around other amputee veterans was also helpful to three other veterans who noted that seeing what other veterans were going through and being exposed to people who were more seriously injured than themselves helped them put things into perspective and feel better about their situation because they realized that it could be worse. Two veterans also spoke of having fun while on the wards with the other veterans as they engaged in activities such as wheelchair races and spitball fights. Two veterans also spoke in terms that implied that they benefit from providing support for other veterans by perceiving ability and instilling confidence in others. This included Jeff, who helped a veteran gain the confidence necessary to learn to walk on a prosthetic device and Nathan, who said he is “very comfortable” when he is at the limb shop and that he enjoys being around other amputee veterans and he gives them advice on how to remain active. Finally, two other forms of esteem support were mentioned by Ken, who noted that being involved in the Wounded Warrior Project has made his “life as a veteran feel more honorable” and that it is his “mission to not let this happen to those kids anymore” (when referring to the stigma that Vietnam veterans faced).

The final subcategory of veteran support is that of instrumental support. Such support includes active assistance with some type of problem. Three veterans, for instance, noted that they provide or received support from other veterans concerning legal/benefit issues.

Remaining categories also include veterans’ descriptions of using the internet to find their friends from Vietnam and to also provide peer support. Harry, for instance, is one veteran who is involved with an online group of veterans. He stated, “it’s not very official, but we’ve done a lot for each other.” Ken and Victor were two other veterans who noted that the internet has helped them find and reconnect with the veterans they served with.

This memo clearly illustrates the benefits of forming supportive relationships with other veterans who have experienced traumatic limb loss. While types of support varied in their intensity and form, the vast majority of the veterans gained something positive while interacting with other veterans not only after their initial injuries but also today. Whether it be through providing emotional support, esteem support or instrumental support, the majority of veterans appear to be content in the relationships that they have formed with other veterans and the general forms of support that they benefit from in these relationships.

VA Organization or Other Veteran Group Memberships

- I belong to the 101st Airborne Division Association and Vietnam Veterans of America and Disabled American Veterans (Tim, Army, AE).
- I’m a member of the VFW but I never went to the meetings or went to the hall that they have here (Wayne, Army, BK).
- I belong to a military Order of the Purple Heart. I’m also involved with a online group of vets. It’s not very official but we’ve done a lot for each other (Harry, Army, AK).
- I’m a life member of the Chatham Veterans of Foreign Wars in Ohio and I also am a life member of the Disabled American Veterans, the chapters out of Columbus. [I am not active] now. [At one time] I was Quartermaster for the post for almost 20 years (Brad, Army, AE).

- Like I say, I always belonged to the DAV and the VFW but I never really went to any of the meetings or anything like that. More of my contact with the veterans was either through knowing them at school when I was going back for my education or people that I met at the VA hospital or when I was working as a benefits counselor (Jeff, Army, BBK).
- I belong to the Disabled American Veterans. I'm kind of an at large member (Jess, Marines, AKBK).
- I belong to the 1st Cavalry Division Association. The Military Order of the Purple Heart—life member. Life member of the DAV and I have been in the American Legion for 40-some years but not a life member (Victor, Army, AK).
- I belong to the 11th Armored Cavalry Veterans of Cambodia and Vietnam. I'm [also] a life member of Disabled American Veterans and there's another one, Blackhorse Association that I'm a member of. About the only one that I really did anything was going to the Blackhorse, I mean 11th Armored Cavalry reunions. There is a motorcycle group of Blackhorse Veterans and I belong to that and they just started really forming a few years ago and that's for all Blackhorse troopers from all wars (Nathan, Army, BK).
- I belong to the DAV, the VFW, American Legion, to the Purple Heart, and to the Charlie Company 3rd, the 60th Infantry 9th Infantry Division. I'm a life member of the DAV and the Purple Heart and VFW but it was just something that happened back when I first got out of the Army and just never really got involved (Marvin, BK, Army).

General Support

- The other veterans that I was with [were supportive]. I'd have to say that we supported each other. We were all a ward of amputees (Lewis, Navy, BK).
- We all (my chapter of the Vietnam Veterans of America) just really kind of have get togethers. We have meetings every month and we do bingo at the VA hospital every other month and we're all really supportive of each other and we just kind of sit around and shoot the breeze and usually after the meetings a bunch of us will just sit around and talk. So yeah, we all get along pretty good (Colin, Army, BBK).
- When I went back to school and I went to Penn Center Academy, probably half the students in that school were veterans and I made a lot of friends and got a lot of support from them. Like I say, I never really, I always belonged to the DAV and the VFW but I never really went to any of the meetings or anything like that. More of my contact with the veterans was either through knowing them at school when I was going back for my education or people that I met at the VA hospital or when I was working as a benefits counselor (Jeff, Army, BBK).
- The veterans group I was involved with [has been real supportive]. Like I said there was a few people in there that I became extremely close to. People I've been closer to than anybody in my life so far (Harry, Army, AK).

Providing Emotional Support (Talking/Listening/Empathizing)

1. Sharing and Understanding Because They Have Been There

- The whole group is probably around a couple hundred people and it's an email type thing, we communicate...Lately it's been about three times a week...And people just talk about their problems, their history, what went on in 'Nam, what they remember, what's going on now and what kind of problems they're having, all sorts of stuff. And the people involved, they're very supportive, I understand that, I did this, you know, that happened to me too, you're not the only one. I think that's one of the biggest things, you've got somebody, some support from people who understand what you're going through and you can know that you're not the only one it's happened to. It's kind of like a family support group, best friends all rolled up into one. There's a small group I've grown a lot closer to. About, it was 2001, we started having get-togethers on pretty much an annual basis and we got, the ones who showed up for the get-togethers tend to get a lot closer after, on the emails and stuff afterwards. And about let's see it was six or seven of us became very close and we've had some small groups, it's just those getting together periodically too besides the big groups. And as I said, we're extremely close, supportive. One of these guys is probably the best friend I've ever had. He lives about a hundred miles from me and that's the kind of thing, when [my grandson] died last year he drove down here a hundred miles in a snowstorm and spent 15 minutes with me before he had to go back. I mean, it's that kind of stuff. We've had some similar problems with grandkids and things like that and like I said, he's probably one of the best things that's happened to me (Harry, Army, AK).
- You know what, I've been toying with the idea, I had belonged for some years to an amputee support group in this area and then gradually it kind of like faded away. Everybody just kind of went their own way. And I've actually been toying with the idea of re-starting an amputee support group just for that reason because it does make a difference and it does help and people are more likely to believe someone who's experienced it than even say a physical therapist. Like my one niece is a physical therapist and she herself has said, you know, sometimes she's come to me with a problem and actually talking to me knowing that I've experienced it, you know, is more helpful than what she could get from the books or even from other professionals (Jeff, Army, BBK).
- I had been living down in San Diego so the mid-seventies I went up to University of Utah and then from there I went down to Houston so we were apart for about five, six years and when I came back up, transferred back up here I had a business trip out to the San Jose area and one of the guys I had known lived there. So I just called him up. We had kept each other's phone numbers and I called him and say I'm going to be in town do you want to get together and he said sure and then we kind of, the association flared up again and so we keep in regular contact there's, and we were all over. One guy lived up in Washington and another down in Corpus Christi and third guy down in Broken Arrow, Oklahoma. So we were spread out and so we'd get together every couple of years and we'd talk to each other frequently and then we'd get together for about a week and... Two of the fellows have passed away now [I] keep in touch [with the others]... Yeah, [they really helped me adjust] and the interesting part is a number of years ago when we were all together we started talking about how we got wounded and what went on in our lives after being discharged out of the hospital and we found that all of us pretty much had similar life experiences. We all got wounded in pretty much similar ways and then after being discharged we all had gone through broken romances. Some girlfriends that had been girls that we were very serious

about just kind of split up and then we'd meet somebody else. So we really had gone through and all that gone and got educated in various fields and were successful in our, in the careers that we had chosen... Yeah, they're, well there again they're supportive because they know what, they've been there and they've done that (Jess, Marines, AKBK).

- Later on, yeah, as the guys started coming back. I knew guys in town. See, I was kind of in the early part of the war. And as more guys went and more guys came back, I did have a cross-section of some friends that were willing to share some of the experiences over there but not to a point where they're intruding on stuff because they pretty much went through a lot of the same things. So it wasn't a sit around telling war stories type thing all the time. It was just a common interest type of thing as you would have in some other type of activity and all pretty good. Nobody seemed too upset about things and what happened to me. Just kind of took that sort of thing in stride. And all activities that we did together just kind of continued on from our high school days (Derek, Air Force, BK).
- I go to my company reunion every time when I can get a chance to go. There's another one in September. I'm going to try to go to that. That's when we talk and it's not a lot of battle related things. It's what we're doing in our lives now and trying to help some people out that are having some real struggles. There are people there that just can't, even today, get a hold on this (Marvin, Army, BK).
- From the military I'm still friends with a man that I was in battle with—two men that I was in battle with—and we don't see each other a lot but we stay in touch by phone periodically and just knowing that they're there always makes me feel better. The one guy I actually bandaged when he was wounded and took care of him so he's always been appreciative of that and medevaced him. So those guys are important to me although I don't see them very often, every 10 years or so, and talk on the phone, particularly the one fellow in California, means a lot to me and I think it's because we survived together and survived some very, very bad combat and where a lot of people were killed and he and I survived together and actually got, saved a couple of people ourselves together (Tim, Army, AE).
- I had a few friends during that time that we'd get together and talk a little bit... But also, again, something that you mentioned earlier about the other veterans, other guys, whether they were wounded or not, that's a good mode of support right there. Where you can get together and talk. That's a good process (Wayne, Army, BK).
- Well, actually I've done probably better than a lot of guys with Post Traumatic Stress Disorder only because I think being in the hospital allowed me to see other wounded people and to hang around with other guys but, you know, we didn't talk about our wounds much and that's something I think that the military or somebody should have done was really get us to talk to each other. We mostly just drank our pain away. I wished I would have, you know, we would have stayed in touch over the years but it's like everybody wants to get out and go home. You know, that was really the mission and I was there a year and you couldn't wait to get out of there. [Later in life] I worked at the vet center as a layman counselor because I didn't have my degree in counseling but I had, at that time they were letting veterans help, you know, get combat vets help combat vets. And that worked real good. In fact, I think that helped me a lot just to be with them (Nathan, Army, BK).

- My buddies from Vietnam [were particularly supportive]. One of the other guys in my home town who lost his leg. He and I were in the hospital together. We knew each other from home but not that well and he was always there and another guy from my home town had served in Vietnam. He and I were always real, real close... We talk on the phone periodically and everything. Yeah, we're close. Not like we were with me living there... [also,] and then I come to find out my old team sergeant was here, lived here, and he put me in touch with the guy I was with the night I got blown away and after 30-some years he and I made contact and oh my god. Amazing some of the crap I did the night I got shot (Victor, Army, AK).
- Another thing that helped me was just being around other veterans, you know, because we seemed to have a bond and they seemed to understand more (Ken, Army, AK).

2. Sharing And Understanding With Current Veterans

- Yeah, I love to [talk with the current veterans] because I think I have something to share with them that they don't maybe realize right now but will down the road and I try to tell them some of the experiences that I've had and some things to look forward to. I think, you know, right at first when you were wounded and you're in a hospital and all your family and friends were around to support you and everything and it was good and it made life easier. But the time's going to come a few years down the road when those people are going to be gone, the stands and stuff and then that's when you're going to be out on your own and you're going to have to deal with it yourself and that's one thing, you know, I think some of the guys get into suicidal situations and stuff because they've lost that support. That's why I try to tell them that it's important to be, to stay in contact with your buddies and your veterans' organizations because they are truly there to support you because they know what you're going through because through the fact that they've went through it too (Ken, Army, AK).

3. Reducing Uncertainty of What Happened To Peers

- Oh, absolutely, absolutely and I think that's one of the things that I did not do a lot of at first [wounded vets talking to other wounded vets] because, you know, the story of the Vietnam veteran. We pretty much came home and wanted to forget about what had happened because it was an unpopular war and we just wanted to go on with our civilian lives and so we didn't really do as much as we should and I think one of the most important things now and that I tell these young veterans is stay in touch with your buddies. That's one thing we didn't do in Vietnam. You know everybody has a Joe or something like that name and we never wrote down addresses and stuff like that so we could get in touch with each other when we got back and I tell these young guys now that they're being deployed that's very important today. It may not seem like it now but later in life you're going to want to, you're going to want to know a little about those guys and how they're doing and everything. And in the last 10 to 12 years I've really gotten involved with a lot of my group, a lot of my veteran friends that I had in Vietnam (Ken, Army, AK).

4. Gaining Friendship in Older Age

- Now as I have gotten older I like to go to the reunions but it's just like we've all gotten older and have our own families and lives and I think had we maybe stayed in touch throughout the years we'd be a lot closer. But, you know, in fact one of the guys that pulled me out of the jungle and he was a good friend of mine in Vietnam but we hadn't seen each other until—

this was in 1970 was the last time I saw him, March 5th—and then I saw him in I think it was 2007 at my first reunion and it was his first reunion and we maintain phone contact (Nathan, Army, BK).

Providing Esteem Support (Confidence/Encouragement/Could be Worse/Reduce Stigma)

1. Initial Support in the Field/Oversees Care - Hope and Encouragement

- Well, I can start-off with the initial support came in combat from medics and my friends who worked to keep me alive and gave me hope that I could make it even though I was hurt badly (Tim, Army, AE).
- The other contact I made was through the VFW who called from the states to where I was stationed in our recovery period in an Army hospital in Japan to introduce themselves and welcome me as a member of the VFW which was, I thought, very encouraging at the time and that someone so distant would offer their support (Josh, Marine, AK).

2. Don't Let you Feel Sorry For Yourself

- I was in an Army hospital for 11 months. I can say that I feel that the people that I was with there, the other veterans that had lost—I was on a pretty bad ward with arms and legs and eyes and everything else missing—and because of those people I've been able to deal with this as well as I have. If I wouldn't have been with them, I would have been a wreck because when I came off the plane into Walter Reed I was one irritated person. Just because of losing a leg, not knowing what was going to be going on, and then going over into Valley Forge Medical Hospital, you know, as soon as you get out and into the ward these guys started getting onto your case and you weren't allowed to be feeling sorry for yourself. It was just a great place to be (Nathan, Army, BK).

3. Putting things in perspective – (being around other amputees/injured - it could be worse)

- [My injuries] could be worse and that's I guess one thing about in the Naval hospital all the amputees being together there was always somebody worse. There's always somebody that's a little bit better. So, a lot of that resolved real quick (Jess, Marines, AKBK).
- Yeah. That's what helped me put my things in perspective. You go into a hospital like that and as badly as I was wounded—I mean I was hit pretty bad—and to see somebody that was worse and they had a better attitude than you and you got to say I can't let this happen. You know, so I think that all helps (Marvin, Army, BK).
- I think it [was helpful to be in the hospital with other vets], yeah. Because you see what other people are going through as well as what you're going through (Colin, Army, DBK).

4. Having Fun

- Probably [the best thing I did at Valley Forge were the] wheelchair races or shooting spitballs at a lieutenant walking through the hall. Yeah, I mean a guy had a full cast on and his arm was up in the air with the bar supporting his arm in the air and he come crawling through the barracks or whatever they call it, the ward, and the Red Cross nurse got us pea shooters and

we would make spit wads and shoot them every night coming through there (Marvin, Army, BK).

- I was not on the amputee ward...But there were four of us. We all had infections so they kind of isolated us from the rest and there was one in each of the beds in all four of the corners of this big ward. We'd have spit ball fights at night after lights out (Richard, Army, AK).

5. Perceiving Ability/Instilling Confidence/Staying Positive

- When I started in prosthetics, one of the requirements, you had to have some type of a prosthetic appliance and many times things would come up where, and I'll just give you one example. One of the men came in and he was not a Vietnam veteran. He was a little older and probably a World War II veteran and had lost his leg above the knee through diabetes and he came in and we ordered him a leg and I had a limb made for him and he was going to physical therapy and he was in the early stages of it and a young resident at the hospital was doing his stint at the VA and told the man, you know, look, you're not going to be able to use that leg and go up and down steps. You live in a row home. You should think about selling the house and this and that and the other thing and the man came to me and he was pretty upset and he said I don't want to sell my house and I don't want to move...And I talked to him for quite some time and I counseled him and I said well look, you can do anything that you believe in. If you believe you can do something you can. And I told him, I said you will learn to walk up the steps. You won't have to have an elevator or move or do anything like that and he said, you know, you don't know that. You're just trying to make me feel good and I shut my office door and I, I was in a suit but I pulled my pant legs up and I unstrapped my leg and threw them up on the desk and he started to cry and he said, you know, I guess you do know. And there were many instances like that where I was able to make a difference in people's lives and the fact that I was a veteran, that I'd been in combat, that I had prosthesis myself, made such a big difference to them (Jeff, Army, BBK).
- I love to see those guys [from Iraq and Afghanistan]. In fact, when the 11th Armored Cavalry went into Iraq I wanted to be with them. I couldn't believe it. I wanted to go and be there with them but when these guys come back we get along great. When I'm over at the limb shop that's where I'm really very comfortable and very enjoyable is being around those guys and being at the limb shop because that's a positive experience for me as well as those guys. They're getting out of the hospital so fast that they're, you know, they'll be in just the hospital maybe a very few months and they're out and they're walking...the only thing that I tell them is always stay on top of your leg getting it worked on and getting things taken care of because otherwise it gets away from you and looking back I should have stayed into sports, into skiing and tried to really stay active in that (Nathan, Army, BK).
- I think it's [getting in touch with veterans] been one of the main sources of recovery for me and feeling better about myself and being able to get back in contact with these guys (Ken, Army, AK).

5. Reversing Vietnam Veteran Stigma By Giving Back To Current Vets.

- Well, I'll tell you what, [being active in the Wounded Warrior Project and helping the current veterans] has made my life as a veteran feel more honorable (Ken, Army, AK).

6. Protecting Current Veterans From Stigma

- Well, what fuels me to be that way I think is the fact that as a Vietnam veteran I didn't experience those things when I was, early in my life, young, when I was a young person. We were kind of looked down upon and we had that stigma that, you know, we were, we fought in the war but the only war we ever lost, you know. Of course I tell them, you know, I says we lost close to 60,000 people and the enemy lost over 600,000. You tell me who won and who lost. But, no. I think that the fact the way we were treated as Vietnam veterans I just, and a lot of my friends that are Vietnam veterans have kind of gotten the fire lit and we're not going to let what happened to us happen to them because it hurt. It hurt a lot and knowing that you're putting your life out on the line every day and knowing that nobody gives a shit anyway, nobody cares and supports you is a very difficult thing to deal with and we don't want those boys to feel that way...my opinion once a soldier, always a soldier and we're going to be here to help you. I'm not going to be there, I'm not going to be like the World War II veterans. They really did not do that much for us. They never, when the protests and the people when we were coming back, convalescence, and the people at the gate at, as I landed in the United States had signs and yelling slurs and stuff at us, where were they? Why weren't they there to protect us and to support us? They weren't there and that's why I, it is my mission to not let this happen to those kids anymore (Ken, Army, AK).

Providing Instrumental Support (Active Assistance With Problem)

1. Providing Support With Legal/Benefit Issues

- I got a lot of help from the DAV and the VFW as far as legal help in fighting the government. And they both did their legal filings and everything at no cost to me (Aron, Army, AK).
- I have some other Vietnam veterans that I talk to and I have some World War II veterans that I keep in contact with and talk to. They're supportive in the same way I've helped them fight the government and they've helped me fight the government to get the paperwork straightened out. A lot of times I knew ways to get in to do things and a lot of times they came up with new and different ideas to attack a problem that I'd been fighting for several years and couldn't get anywhere and they had another avenue to go at it. In other words, we're all a little hard-headed. We don't quit. Tend to be like a pit bull. Bite and don't let go (Lewis, Navy, BK).
- The guy that I was with the night I got shot, he spends his summers in Wyoming and there's hardly any phones and stuff but we've talked when we can talk and stuff and it's amazing. I just, you know, to finally be in touch with him and find out what he went through afterwards and everything and even my pilot buddy, he'd call me and he says, I need to ask you something. And he says, you know, you and I were really close in Vietnam. I said, oh no shit. And he says, I'm putting in a claim for PTSD and he says, you know, I've talked to my doctor and talked about you and it really bothers me that you got hurt that bad. He says, do you care if you use your name on my claim. I said, you do whatever you got to do. I guess it really, really bothered him to see me that screwed up and everything and then the guy I was with the night I got hurt, I guess it really, really bothered him too and they gave him 50% for PTSD as well...He couldn't handle it and I guess they sent him back to the States. But he and I were real, real close. Nobody on the team liked him but me. My lieutenant asked me

to take him under my wing so I did and I really liked the guy. [So] we still talk and, you know, and we just found each other maybe two years ago and it was through my old team sergeant who put us together. [He] needed verification that he had got wounded that night and they asked me to write a letter which I did. We talk every once in awhile. Not like I'd really like to but, or like he, but he's real, real busy and everything but we, you know, there's a bond there too that can't be broke (Victor, Army, AK).

Other

Desiring to Know Those Veterans From the Hospital

- I don't know where to look—I would love to find the people's names that I was in the hospital with in Valley Forge. I try to locate one guy because I remember him very well and he and I were the two culprits that did a lot of stuff together and I spent more time with them than I did with my Army Company in Vietnam and I would just love to try to get together with those guys (Marvin, Army, BK)

Using the Internet To Find VV Buddies and Peer Support

- About probably 10, 12 years ago I got on the Internet because I hadn't heard from any of the people that I served with in Vietnam. I left kind of quickly, naturally, and never saw them again. So I started hunting for people that served in the 9th Infantry Division in Charlie Company and after about a year or so I found a website that was the River Raiders which was what we were called. We were linked up with the Navy in the Mekong Delta and I went to one of the reunions that they had which was all of the 9th Division and I found a couple guys that were involved with the Charlie Company reunion and I started going to them and started seeing some of the guys that I served with (Nathan, Army, BK).
- I'm also involved with a online group of vets. It's not, not very official but we've done a lot for each other. We've mostly all Vietnam vets. It got started when the guy who's basically been running this, started looking for people who had been stationed with him. It's like who were known as the Pleiku Pals and basically all of us had some kind of relationship to being in and around Pleiku (Harry, Army, AK).
- I think it's [getting in touch with veterans] been one of the main sources of recovery for me and feeling better about myself and being able to get back in contact with these guys and I think a lot of that's due to the Internet. You know, we just, we didn't have that line of communications back in the late sixties and early seventies and stuff like that and with the Internet now you can, shoot you can browse somebody and search and go find people and that's how it's basically all coming down.. [So] through the Internet I was able to find the 210th Combat Aviation Battalion that had started doing [reunions] for a couple of years and their numbers were low and I kind of got to know some of those guys through a web page and told them who I was and thought that it'd be nice that maybe all of us that served on that airfield could get together. Since, you know, maybe we can get 10 or 15 from each unit to be there and make it a worthwhile reunion. So that's going to happen for the first time this year (Ken, Army, AK).

- I had no idea...But I went on these websites and stuff and found guys that I had been with and served with and I see them, I talk to them. [One of the guys had] been told I had died and we found each other about 16 years ago and are close as close can be. He and I are very, very, very close. Even though he lives far away we talk weekly...And there's another pilot that we found each other on the Internet, on the 1st Calvary Division Association website and he was a real, real good friend of mine and he lives out in Kansas and we talk back and forth and instant message and stuff. ... haven't seen him but he come to Valley Forge to see me after I got hurt and so did [my other friend] I was with the night I got hurt and everything. No, those guys, no. They're true friends. Well, they're buddies. That's better than a friend (Victor, Army, AK)

G5. Other Sources of Support

Several of the veterans mentioned sources of support that fall in the category of “other” rather than immediate family, wives, children or veteran peers. The most commonly mentioned other source of support were non-veteran friends. Four of the veterans spoke of how friends can often provide forms of support. Such support appears to be similar to that which most people gain out of friendships in general (i.e. emotional and esteem), though there were some variations for these veterans. Tim, for instance, spoke of instrumental support when he noted that his friend who lives two to three hours away will drive to his place and stay with him and help take care of him if his wife is away on business. Colin is another veteran who emphasized the emotional and esteem aspects of support when he noted the importance of having work-friends who treat him as normal, when he stated, “They don’t treat me like I’m a handicapped person, they treat me as a person and that’s what I like about that place.” The themes that arose within the friends category also included that friends are there when you need them, good to be around, that they are on call and that they look after the veteran and treat him as normal. One veteran also noted how his friends coming out to visit him when he was in Fitzsimons and taking him out to party was a turning point in his life noting that prior to this he was starting to have “second thoughts” about things. Ultimately the veterans appear to positively benefit from their friendships with others. Two veterans also mentioned receiving esteem support from a physical and mental health therapist. Richard noted the help he received from his physical therapist in gaining back physical strength and preparing to learn how to walk again. Tim spoke of his mental health therapist who helped him “move away from anger and feeling sorry for myself.” Another form of emotional support can also be seen in the experiences of two veterans who have dogs. The companionship these veterans received from these dogs was apparent as they noted that the dogs are always there for them.

Other types of support were also mentioned by veterans ranging from one who noted the initial support from combat medics to yet others who speak of general social network support such as having supportive neighbors or employers. One veterans mentioned religious networks, specifically his church bishop as providing support.

Ultimately, although the comments in this memo reflect diverse sources and issues regarding support, they nonetheless shed light on the different ways veterans received/perceived support as amputee veterans. Esteem and emotional support as well as general social networking can clearly have a positive impact on the veterans’ general well being.

Friends

General Support (mostly emotional and esteem)

- As far as in my personal life, I have a friend for about 30 years and he is like 2-3 hours away...If I’m, like when I came out of the hospital or if [my wife] had to be away on a business trip he’ll come up and stay with me and take care of me if I need support. I mean I think that says a lot and locally I have a friend from childhood who lives nearby who is always there if I need him and he was in Vietnam as well but we’ve been friends since childhood. In our early marriage he and his wife and [my wife] and I were friends. We’ve seemed to manage to land in the same area our whole lives—in childhood, in adulthood, and in our later years. So I have several friends that are extremely supportive...I think family members are just there more and friends are called upon. Family members are nearby and

know the story right as it unfolds if I need help whereas I usually will call a friend and say can you help me with this or they might call and say everything's, you know, okay. Are you alright? So they're, I would say a little more distant geographically (Tim, Army, AE).

- Probably, well the one friends we do have, I fact he worked for the phone company at the same time and we ended up being godparents to one of their, their youngest son. So we were probably close from that standpoint and of course they, his wife was a nurse and so I think she dealt with stuff like that so they always were good to be around (Brad, Army, AE).
- I've got friends at work that really look after me. We wear BDU pants and at the bottom they've got a string, a drawstring, you know, and I've got two or three of the girls that work with me, they're so concerned that them strings are going to make me fall that they just go crazy every time I don't tie them. They just, you know, you're going to fall. I said no I'm not. I'm going to be alright. So they'll be over there tying them and so they all just, two or three of them and all the guys are real supportive and we pretty well get along. And so is my boss. I mean she's really good to me and really supportive and so are the troopers and stuff. I mean they don't treat me like I'm a handicapped person, they treat me as a person and that's what I like about that place and all of them do that...I don't think the [vets] want you to feel sorry for them. I think they want you to treat them as a person and not, you know, and look beyond their disability and stuff and say, you know, I can do this just as well as you can. I might have a few things wrong with me but, you know, I can still do the job as well (Colin, Army, BBKA).
- Yeah, I had some close friends. I remember one time when I was in Fitzsimons, I'd been there maybe a couple of weeks and I was really starting to have some second thoughts about things and I had two of my best buddies that were not military drove out and spent a long weekend with me and we went out and partied and stuff like that and I think that was the big turning point in my life (Ken, Army, AK).

Physical and/or Mental Health Therapist

Esteem Support - Perceive Ability and Helping to Reintegrate into Society

- The next [most supportive] would have been my physical therapist, I mean he got me ready from a physical therapy standpoint. I knew enough of what to expect when I got the limb and well, one of the other things I'll never forget. When he was working with me to begin with it was, one of these days I'd be able to lay on your, you could, lay on your stump and you'd be able to throw me off. And I thought to myself when he said that way back when, yeah, right. Well, one day I knew I could do it and I looked at him and I threw my stump back. Basically, I could touch my chest then, back then with it. And I looked up at him and I said Marty how about laying on my stump? And I lifted him off and I knew that hey, everything else was a piece of cake from then on out (Richard, Army, AK).
- The person that helped me turn around my life was a therapist in 1977. [My therapist] helped me move away from anger and feeling sorry for myself and which really wasn't who I was. I was very independent and athletic and outgoing before and he helped me recapture that part of myself and also helped me regain personal responsibility and understanding that because this happened to me I wasn't owed anything by the people in my life. He helped me regain

my sense of balance in life and I feel very appreciative of this therapist. I think he really changed around my life and helped me in ways that I grew as a person and put my family back together. He actually was the one that got me to think about helping others who had the same kinds of problems. So I think this therapist, who's a VA social worker, really [was the] key person, and my wife and parents and siblings and children and that. But I would say the two people that changed things for me the most once I was past the initial wounding and getting back into life would be my wife and this therapist (Tim, Army, AE).

Dogs

Emotional Support - Always there for me, my buddy, helps me

- We've had dogs. It was just the typical, you know, I should add that the dogs have been very supportive too. They're always there for me...I think I would like to make another comment about the dogs. I've had dogs all my life. And they have always been there very supportive of me. I mean I think it's anybody else, you know, they've done research that dogs can lower your blood pressure and all this good stuff and I think that's probably true but even the one here that's lost use of his back legs, from the time that I got him he was always there next to me. If I was feeling bad he was up laying next to me. He was always right there. When I was on crutches he would be walking where my leg should be. He really would not ever leave my side. If I sat down, was reading or just whatever, he was always there. Most of the dogs, well I'll say all of them over time have been like that and they've been a really big help for me personally. So, I guess that's it (Harry, Army, AK).
- Ah, my dog. Yeah, well, [my wife's] gone a lot but she's going to be back here more after here about another month or so. She's going to be back here probably three or four days a week and the weekends so she'll be only gone like maybe one day, two days a week and everything. But my dog, she's oh, this may sound stupid to you but I don't know what I'd do without her. But she, the VA trained her for me. My brother and sister raised a litter of puppies and they give me her. She's a Boxer and they give me her and I had to put my other dog down that they had given me at the VA because she got cancer and I didn't want another dog. But the VA said, you know, you want another dog, we'll get you another dog. I said I have a dog. I said why don't you train mine? And they thought about it and thought about it and they finally did train her for me and then I taught her a few little tricks too. But she's, she's fantastic dog, fantastic. She senses things. You know, how your mood is and, you know, well just like a few weeks back she stuck to me like glue. Every place, I mean even in—she sleeps with me—and before she just sleeps at the foot of the bed but I don't know, during those couple of weeks she slept right next to me and, you know, she's just a great dog. She knows and like when I was laid up with my surgeries and stuff she, you know, she was there for me to get me things and I have to go someplace she'd pull my wheelchair for me, you know, that's just one of the things she does. And she can open and close the doors for me and, you know, and she's just, I don't know she's, you can say anything to her in the world and she don't talk back or give you any crap. She's, I don't know, I don't go anywhere without her. This is what pisses me off when you go someplace. What do you need a dog for? Why is that dog in here? You just, you know, and I got into it here just a couple weeks back at CiCi's pizza her and I went in there and these old couple said that she was allergic to dogs and asked me to leave. And I said I don't have to leave here. She said, why do you have a service dog? And I said, I'm disabled. She said no, you don't look

disabled. I says well I just don't show it. I said mine is very well hidden and she got real snotty and nasty and I told Patchy, I said Patchy, well Patchy's commands are all in Chinese and I told Patchy to snarl and I thought that lady was going to piss her pants. But Patchy, she's intimidating. She almost weighs a hundred pounds but she's a huge Boxer. She's tall and big, big-boned Boxer and she, if I fall down she's right there to help me up and protects my back and don't let people—she's trained if I stop, you know, unless I tell her she turns around backwards so nobody comes up behind me. That scares me I'm going to grab somebody and hurt them. That's what she's trained to do and unless I tell her to turn around the other way and everything. She's, I don't know, she's my buddy. Just like last night, there's a hundred pound dog sitting on your lap in a chair and going to sleep. That's the way she is. I don't go anyplace without her, no place. Stupid, huh? (Victor, Army, AK).

Other

Medics and veterans in field – Esteem Support Keep spirits high, cared for me

- Well, I can start off with the initial support came in combat from medics and my friends who worked to keep me alive and gave me hope that I could make it even though I was hurt badly and then the medical people that took care of me, especially initially that kept my spirits up when I was so down (Tim, Army, AE).

Care Providers – Instrumental Support, Legal Help

- But, now I should say as far as helping me with things, since I've moved to Montana I've had several primary care physicians and orthopedic surgeons that have done 10 or 15 more surgeries on me and every time they see me in the hallway they know me by my first name, they talk to me, and I feel very comfortable around them and I feel I can trust them. They're the only people in the government system that I do feel I can trust and I have also had them write letters to help me fight the federal government which is fun when you get an employee of the federal government writing letters against the federal government (Aaron, Army, AK).

General Social Network Support (Unspecified)

- I came from a very old traditional neighborhood so there's lots of support from neighbors and friends, family, I never had any real problems with that other than my father (Harry, Army, AK).
- Oh, boy, I really don't know if I'm different or not but I didn't have much of an adjustment to make. It's hard to pinpoint any one person or even a group [that was most helpful]. I would just say my whole circle of friends and family just were all there and it just kind of fit back into place. I've often wondered myself at times why I was able to leave that and come back here and fit right back in because I know other people didn't or had problems and weren't able to fit back in but overall like it's just, all my acquaintances. We just seemed to pick up where we left off (Derek, Air Force, BK).
- The other supporters in my life has been the company owner that first hired me and an engineer that worked for him. They looked at you and how you performed and they mentored you. They knew I was from the service and I was from Vietnam. At that particular time in the seventies you weren't looked on too well as a Vietnam veteran. So to have these individuals actually sit and talk with you and support you in your job and help you move

along in actually a different career path than what I was doing for them...[I one point] I decided that, you know, going to school I had planned on going in a different direction and they all got together and said okay, we'll support you and they brought me out of that area and upstairs and into an office and as I went to school I did drafting work for them in the career path I was seeking and I felt because of them I've come a long way over the years...They never really focused on my combat experience and they never brought up the issue of my limb loss. As long as I could perform my duties with them and I showed the initiative and drive they supported me in my endeavors...During the time that I was working on the glass, turning the glass, at that time your days were 10 hour days, six days a week because of the need for that product. They in turn never put the demand on me to work the overtime when I had school to attend even though it wasn't schooling that was in their industry...They were well-meaning. Being that they gave me a position in a drafting role within their company and the engineer at the time, even though I was going for architectural engineering he chose to mentor me in mechanical engineering and electrical engineering. Always dropping something in front of me and saying solve that and then when I go back and say to the engineer, I'm stuck, he'd go well I suggest you pick up a book. And they never one time said do it on your own time. If I had went down to the library, for instance, and picked up a book and brought it back to work and during working hours went through the book and found the information I needed and was able to continue, that was fine. They'd pay me for it. They had no qualms about that and I thought that was just the most any individuals would ever do for anyone (Josh, Marine, AK).

Religious Network - General

- My church bishop has been very supportive, the bishop I had as a young man (Jes, Marines, AK/Foot)

G6. Caregiver Support

G7. Lack of Support

Some of the interviewees detailed instances in which their wives were not supportive. This included instances such as a wife leaving the veteran because she could not deal with his injuries (Victor), and one wife trying to have the veteran committed to a sanitarium (Aaron).

One veteran did mention a non-supportive behavior of his father, who held a negative attitude towards the Vietnam war pertaining to the belief that World War II veterans accomplished something, but then the US lost the war in Vietnam. This veteran, however, still noted that in general his father was supportive.

Some veterans did describe a lack of family support which appeared throughout their lives in various ways. When asked if he had extended relatives who were helpful, Aaron, for instance, replied, “No. Most of them didn’t want me around because I flared up too easy.” Aaron’s lack of family support also included his parents and first wife wanting to pretend that he had not served in Vietnam. According to him, this is what they told his two daughters who did not learn the truth until roughly ten years ago. Aaron also talked about living in the Western Plains Region because it was the “only state in the union I have absolutely no relatives.” Victor was the other soldier who discussed in length lack of family support, as he described his father as being abusive when he was a child and not liking him or supporting him until he saw the medals/ribbons he received for serving in Vietnam.

A few veterans also mentioned lacking or losing peer support. Five veterans provided descriptions that fall into this category for various reasons including death of veterans and simply not being around veterans. One veteran, Steve, stated that “I went over with 175 men and only two of us come back and I’m the only one left out of that. So you lose a lot. You lose your feelings and it’s very hard to get anything back except anger...You try to remember them but they’re not there anymore.” Three of the veterans noted either losing touch with other amputees veterans after leaving the hospital or not forming relationships with them because they were simply not in the hospital long enough to do so.

Two veterans also described the lack of support for the war as something they experienced. One of these veterans, Nathan, was clearly deeply hurt by such lack of support for the war, associating it with not supporting veterans.

Lack of Supportive Relations

- No [one has been real helpful], not really, to be honest with you. You know, a year in Valley Forge Hospital I never once seen a damn shrink. You know, you’re getting your ass, excuse me, you’re getting shot at one minute. The next minute you’re laying on the ground almost dead and a week later you’re in Valley Forge Hospital expecting to be normal? You know, they didn’t give us any help there. When I come out, no help. I hate to admit this, I attempted suicide once and the doctor that took care of me, she was a captain in the Air Force and she really, really, helped me to accept what happened and really nobody, you know, other than myself to be very honest with you. You know, nothing, nobody. Even, you know, my psychiatrist now that I have at the VA I really like him, but he’s, my other psychiatrist, hell, he didn’t know what the hell he was talking about. He didn’t know anything about PTSD which pissed me, excuse me, upset me very much so I asked for another doctor and I got this new one and I really like him and we can talk and everything but no, nobody, no one

person other than [my wife], or the doctor at Wright Patterson really helped me a lot. It was something I just struggled with on my own, you know. Suck it up and go on (Victor, Army, AK).

Lacking Spousal Support

- [My ex-wife's general response to my limb loss], like I said, at first she was extremely supportive, was doing a lot for me. She was wanting to help almost too much at times, helping me adjust my prosthesis or whatever. That's the thing that comes to my mind right offhand is trying to help me get that off and on, put the shoe on which could be hard at times, and always talking about wanting me to talk about things and explain to her what was going on but it got to the point where I don't think she ever actually meant it. Her attitude seem[ed] to change over time. I don't know. I would give her stuff to read and ask her to read that so it would give her, give us a common starting point to talk about things and she would never bother to read what I've given her despite the fact that she was a very big reader. And at one point later on, I hadn't told her the stuff I had been writing because her attitude was negative by that time. [But] she found a copy of it and she flat out told me I was a liar. I didn't write it. I copied it out of the books and magazines and I didn't do it. And that was one of the big, final things that [prompted our divorce]. The divorce came a long time after that but that was one of the biggies that did it for me. [She wasn't supportive]. Not after the first couple of years anyway (Harry, Army, AK).
- I come home on convalescent leave and seen her and she came out to Valley Forge to see me and to be very honest, she couldn't handle it. [She couldn't handle] me being hurt this bad and she left, which was fine. She stuck with me until I got out of the hospital but I knew it wasn't right. You know, I could tell. And I come home, I'd been home maybe two or three months and we talked. She says it's time and I say yeah, it is time. So nope, she wasn't supportive. She hated the Army. Me, I just loved it (Victor, Army, AK).
- [My first wife was] not really [supportive]. She really wanted me to be who I wasn't. She was the one that caused me to drink the most. No, she wasn't supportive (Lewis, Navy, BK).
- This is my third marriage. The wife I'm married to now, we've been married 26 years. The first one was married to me about six years and the second one was married to me about six weeks. She was trying to have me committed to a sanitarium so she could get my home and stuff, the second one. The only reason I found out what was going on was [because] she tried to get my parents to sign in on the papers to have me committed and I may be crazy but that doesn't make me stupid. I'll admit to being crazy. Anybody who went to Vietnam [and] fought [and] spent four years there had to be crazy to survive. That's the only way you survived. If you weren't scared to death all the time and crazy, you were dead..... My oldest daughter has come around in the last four or five years and finally understood that her mother and my mother all lied to her for about 30 years and that I did go to Vietnam and things did happen. When she was about 13 or 14 we got in an argument over Vietnam. I was trying to explain what it was and where I had gone into it and she started coming up with well Granny and Mother both said you were never there. So you have to be lying to me. So I told both of my girls at that time, the other one was 10, that as far as I was concerned the subject of Vietnam would not be discussed between me and them until they got old enough to

understand how the world really worked. And it took them until, the oldest one's 37 now and she's come around about the last five years. That she understands why I am the way I am and that nothing's going to change it and we get along very well. Now my younger daughter, she still lives in her mother's world. She still lives in her mother's world. She still does not believe I was ever in Vietnam. And like I say, I've got all the legal papers or all the papers to prove it. Their mother's and my mother's words 20 years ago went a lot further when they were younger than mine did because I wasn't probably the gentlest, kindest daddy. My rules were ironclad. There were no holes in them. If I told you you had to be home at a certain time, you had to be home at that time (Aaron, Army, AK).

- I think [divorce from my first wife was] a casualty of war, yeah...I don't think [she] was [able to adjust to the new situation]. I think she was probably one of the least supportive people that I had around me and I should have known at the time [because] when I was blown up and they got the telegram, my ex-mother-in-law stayed home from work and my ex-wife didn't. So I should have said what's with this (Marvin, Army, BK).

Unsupportive Family Behaviors, Lacking Family Support, And Distancing From Family

- I came from a very old traditional neighborhood so there's lots of support from neighbors and friends, family, I never had any real problems with that other than my father. He was very supportive with me but he had an attitude I think like a lot of World War II veterans that we lost Vietnam and there was something less about what the Vietnam veterans did as compared to the World War II veterans and whenever he started talking about it I just would leave the room. We never did talk about it (Harry, Army, AK).
- I've got two brothers I don't associate with. I don't have nothing to do with them. My mother and father has passed away. My wife's mother and father has passed away. So technically it's just really me and her and our friends (Colin, Army, DBK).
- [My mom was never supportive]. No. It depends on what you call supportive. She came to the hospital where I was stationed and my father rented them an apartment and she came and saw me every day. But from day one both of my parents and my first wife that was a girlfriend at that time, all [of them] felt it would be much better if I just didn't let 'Nam exist in my world... [Further, I didn't have extended relatives that were helpful at all]. No. Most of them didn't want me around because I flared up too easy (Aaron, Army, AK).
- My father [was] absolutely not [supportive]. The only thing he liked was the little ribbons I wore. I was nothing to him before then. [So] no, [I] had no family support, not really. I couldn't stand [my father] because he used to beat the living crap out of me all the time... [My brother] got drafted and he took a volunteer draft to the Marine Corps. And my father, I never seen my father, never got a letter from my father until maybe three weeks before I got shot and he says in this letter, I hope you've learned something, [I hope] you've grown up. Maybe you'll amount to something some day. But once my dad found out and my brother started looking to see what my ribbons and medals were, then my dad really liked me. And my brother wanted me to go to South Carolina to see him one time and I didn't want to go but I said [if] we're staying in a hotel I'll go. So we met the next morning for breakfast and we walk in [to] this restaurant, my brother and I, and oh, which one is your hero son, you know. And I looked at my brother and I just looked at my dad and I turned around and

walked out and I told my brother outside later, I said I'm going home. You can stay here and find a way home or something. I'm not staying here. This is not what I come here for. You know, and then I was something to my father but it didn't matter to me. I told him, I said, all you really care about is what I have on my chest. I says you can have the sons of bitches and the day he died and was buried, I put them all in his casket. You know, that's life... But my brother asked me at the funeral, he said why don't you show any emotion? I said, I learned a long time ago you don't show emotion. You know, I see my best friends get killed. Can't show any emotion (Victor, Army, AK).

- Just my wife [has been supportive]... You've got to remember I was only 20 years old when I got injured. I went in the service when I was 17. I didn't have really a chance to live and understand the relationship with people I guess except for school and I hated school. So it's just been downhill since then as far as interpersonal relationships. [In the first few years], my older brother, a Navy Seal, he turned his back and run off from me because I wanted to show him the new leg I got (Steve, Army, BK).
- [I have problems interacting with people. And that includes my family.] Especially my family. Like I say, they were here visiting for 10 days. I had to double most of my medications to tolerate my family. When I first came home from Vietnam I'd gotten married and had two little girls. My family decided that it would have been better if I had not been in Vietnam than to deal with the problems of Vietnam. So they started telling my children and stuff that I was never in Vietnam and they kept telling me [to] just, you know, forget it. It didn't happen. Don't worry about it. And the more they did that the more I got separated from my family. Just in the last 10 years they finally understood that I was in Vietnam but after 30 years of them telling my children that I wasn't because they didn't like the way the war turned out [because] we lost or the government gave up, however they want to call it. I used to kind of tell people or to explain Vietnam I would say it would be like putting me in a boxing ring with Cassius Clay and telling me to kick the shit out of him and tying both hands behind my back. I didn't stand a chance to start with but they're going to tie both hands behind my back to make it worse. That's one reason I'm living in [in the West Plains region]. [Because it] is the only state in the union I have absolutely no relatives [in]. This is the first time my family's come out to visit me in 17 years. Both of my sisters, my brother and my mother and my youngest sister's husband [were here]. If you like small wars and long arguments [I would call it a good visit]. My brother and one of my sisters are debaters. If I say it's black they'll swear it's white. Whether they know anything about it or not, whatever side of the conversation you take, they take the other side and they won't quit until you submit. And I don't play very well. Yeah, they left Monday, and today both me and my wife said finally part of the brain drain is starting to calm down. I only have two moods. I'm either in a good mood or I'm at war. I can't get angry. If I get angry somebody dies. I can't fight because I only have two means of expression. Get along or kill. It's terrible to be that way. I don't like to be in that way but the Army programmed me that way and they did a good job at it. They've never been able to un-program me (Aaron, Army, AK).
- [My brothers are not as supportive as I would like] now. He's very distant. We don't communicate that much although he did come see me when I was hospitalized with pneumonia, [but] only because his wife had an appointment at the veterans' hospital. Otherwise I don't think I would have seen him and it's been a number of years since I did see

him to begin with. It's been about four years. My father and mother both died. After my father died the middle brother got married and began to distance himself from the rest of us and us two brothers. I don't know the reason for that. I somewhat think it may be a little bit of jealousy on the fact that—and I feel this is true for my littlest brother too—that they're jealous of the fact that I'm being taken care of by the government financially as well as medically. I haven't seen [my younger brother] since my father died and that's been about seven years. I talk to him oh, maybe once a week. [He has never been supportive]. Not really. He did his own thing. Let's put it that way (Lewis, Navy, BK).

- No [one in my family was supportive before I went into the service]. No, I was not close to my family at all (Marvin, Army, BK).

Lacking or Losing Peer Support – Death/Not Being Around Veterans/Not Remembering

- I went over with 175 men and only two of us come back and I'm the only one left out of that. So you lose a lot. You lose your feelings and it's very hard to get anything back except anger. The softer feelings I don't think they ever really come back. You try to remember them but they're not there anymore (Steve, Army, BK).
- [Early on] Not too much [able to make veteran bonds] because I really wasn't there [at Valley Forge] that long (Brad, Army, AE).
- You know, I never remember any of them [the veterans at the hospital] because technically they was hurting as bad as I was so we really never actually talked to each other much. I mean we used to race wheelchairs up and down hallways at Fort Gordon because it used to be just a like a straight way and we used to take and sit in the back and play Spades, a bunch of us and stuff. But over the years we, you know, after a few years after we left we just kind of lost touch with each other and I don't even remember some of them, you know, I don't even remember them now (Colin, Army, BBKA).
- Valley Forge hospital was just a great place to be... Yeah [but then you lose that Peer support], I mean one day you had it all, the next day it was done (Nathan, Army, BK).
- I've lost a few friends again that were Vietnam vet friends that have died of cancer in the last 10 years but I still have an incredibly good support system with my, my wife (Tim, Army, AE).

Lack of Public Support for Vietnam Veterans and The War

- The people in Denver actually were pretty receptive of us, a lot of them were, and on the ski team. So I would say in the hospital itself they did quite a bit if you got involved in it at all. You know, they would take you to different events like the Ice Capades and stuff like that or up in the mountains to go fishing. They would take us on a bus or something. But a lot of times a lot of us didn't go because it just seemed like, you know, we were, you'd go and like for the Ice Capades I recall in particular. Here we are all of us sitting in this one section and guys in wheelchairs, and on crutches, and missing about every body part you can imagine. It was more like they didn't spotlight us and point us out but you just felt out of place because you didn't fit in so you felt like you were more on display when people walked by and looking and staring then. It was, when we would take our civilian clothes to a Laundromat

everybody knew who we were because of our short hair and all of us being, you know, amputees and what not they knew that we were guys that had returned. So people either didn't talk to us or didn't have nothing to do with us at all. Or once in awhile you'd run into somebody that was real friendly. But generally overall it's like we were just us guys to ourselves...People did not support [the war]. One guy said to me one day and if I could say it like he did it makes sense. It's like if our whole country was on a big drunk and got into this horrible mess called Vietnam and then one day they woke up from that drunk and they said oh my gosh what did we do. Well, we don't want to look at that because it's kind of like that drunk saying oh I never want to see that. I never want to do that again. And that's what all our politicians and everybody [does], you know. So they don't want to even see or hear from us because it reminds them of this horrible drunken mess they got into. We really did that. Those things happened (Nathan, Army, BK).

- [When I came back to a country that was divided by the war I thought] ah, just, hey, you weren't there. We were there to do our job, you know. Our higher-ups, this is what they told us to do and that's what we did. And again, it might make a difference the fact that I never really was out shooting the enemy or getting involved in some of situations that occurred over there (Brad, AE, Army).
- You know, the Vietnam we were pretty much on our own. We just, you know, it was like okay, especially the wounded ones. You were put in the hospital and they hurried up, tried to get you well enough but there wasn't a lot of civil support or government support to help you out in those situations and I see there are now, you know, there's, I'm involved with the things I'm involved in with the veterans' associations. We do the, we help the Wounded Warriors Battalion, Wounded Warrior Project (Ken, Army, AK).

Lack of Support for the Current War – Means you don't support veterans

- The acceptance of the guys today. It's great and I've seen Vietnam veterans accept them and people in general and they'll meet them at the airports or wherever when they come back and I think that really does a lot but the main thing is it's, I guess this is something that I would like to say. It's got to be more than just a yellow ribbon on a trunk of a car or a flag on the trunk of the car and we support troops sticker. It's the people need to really understand what freedom is about and what it takes to maintain the freedom whether it's fighting in another country or not our country is doing it and we need to support that, right or wrong, until all those troops are back and it's done and over. You know, people will say support the troops, don't support the war. Well, that doesn't work. That doesn't work for me in my mind especially because you can't, they'll come back and it's a phony welcome home to me. If they're not supporting the war they aren't supporting me and I had a guy say that just before I came on vacation. He said he would never fight for this—he's from Cuba. Came over on a Red Cross boat and got naturalized and all that and he told me and I said why do you have a tattoo that says Cuba rules? And he said because it's number one country in my life and America is number two. I would never fight for this country like all these stupid wars they get in and he knew that I was missing my leg from Vietnam so that, those feelings and those thoughts and philosophies are still there and I told him our conversation's done because you say that stupid war and in a sense that's saying that I'm a stupid person for going to fight a stupid war but I did what my country wanted me to do and that's what people in this country forget of what it is for the cost of freedom and to maintain that and so when it comes, the

thing is is they always want to say support the troops but then they forget. They end it there. Once they're home, once they're home, they're not troops, most of them. Back when I was in you get out and you become a veteran. They don't support the veterans and the politicians, they like to play like they're supporting the veterans with, but they don't. They have all these budgets and they play politics with the budgets and as far as I'm concerned and I get real heated and angry about it is that our government should just have—and they do this in Australia (Nathan, Army, BK).

H. ADVICE FROM THE VETERANS

The final set of questions asked the veterans to reflect on their life-long experience living with combat-related limb loss. They were asked to describe the kinds of advice they would give to veterans from current wars who sustain limb loss in regards to the importance of social support and how best to utilize such support. They were also asked to identify the most important message they would give regarding social support. Finally, they were asked if they had any final comments for the interviews. As many of the final comments were in the form of advice, those answers have been included in the a section of general advice to current veterans. The second category in this section describes the findings regarding the most important message about social support.

H1. General Advice

H2. Most Important Advice Regarding Social Support

All of the veterans were asked to describe the single most important message that they would give to current veterans regarding social support. In response, the veterans by far made statements regarding the need to accept social support and the importance of social support of all kinds, as well as from a variety of sources. For example, three veterans made statements that reflect the importance of accepting social support during the recovery process. Others noted various importance aspects of social support, ranging from participating in social activities to emphasizing the importance of rehabilitation and therapy. Two of the veterans that noted the importance of accepting some type of support also noted that 1) individuals should not be pushed into accepting social support and 2) veterans shouldn't accept any pity and should, "Know the difference between the support and pity" (Wayne, Army, BK). Although the veterans noted several different important points of social support, the importance of developing social relationships with individuals ranging from family and friends to other amputee veterans was made clear throughout their statements. Josh, for instance, stated that "Social activities around a combat amputee or any veteran is a support that is like a crutch. When things in one's life gets to a point where they just need to lean on someone they're there to give that support." For some it was clear that having the social support of other amputee veterans during their initial recovery was important. Having family networks that provide support was also noted by several veterans as important in coping with and living with limb-loss. Aaron, for example, stated that "it's important to have relatives and friends to lean on that will accept you as you are." Ultimately social support appears to be a factor in the veterans' recoveries and living with limb-loss that cannot be understated. Although the veterans gave various answers as to what they consider to be the most important message for other amputee veterans concerning social support, it is clear that having social support, whether it be in the form of other veterans or family, friends and spouses, is an important part of being able to live with limb-loss.

Accept Social Support

- [The most important message I would give regarding] social support [is to] allow it to happen, accept it, and allow people to be of help. I think there's a tendency—and there certainly was with me—to want to do it all myself. Right to the hospital when I'm wounded and I can barely sit up I was trying to get up out of bed and stand up and without help and that kind of attitude, I think [it] helped me survive but I needed to be able to let other people help me take those first steps. And so I would say be open to the support and the emotional as well as physical support. That was the hardest for me. I think the stigmas—and I think some of that has changed now but it's still there—stigmas about getting help from mental health professional and so on. I was avoiding that and once I got it it really helped me....[So I would say] don't be afraid to go back and get help later if you have a down period. There's going to be ups and downs. My experience has been that when there are life issues that are difficult, some of my own old business gets stirred up and I need to get help getting it clarified and also I'm seeing a therapist that helps me with physical pain and does a variety of things like hypnosis and different relaxation stuff and so on around physical pain. So [I would tell veterans] to be open to the possibilities. My wife does Reiki on me. I mean just being open to alternative methods of both social support and physical support [is important] (Tim, Army, AE).

- [Concerning social support I would say] let them do it and just let your mind go and let the people help you. You know, they want to help you and that's the thing because without support...you're not going to be able to achieve what you want to achieve if you don't have some type of support...I think by being with a certain group you know, like I belong to what we call a MAT team for the North Carolina Highway Patrol. What the MAT team does is we go to agencies that have had a critical incident occur in their life, like a deputy shot, somebody like EMS working wrecks that have children killed in it and stuff and that's why we do that because we are support for those people to be able to let them vent and talk to us and we go and do debriefings for these people that have a critical incident that have occurred in their life and I think there should be things set up and these veterans coming back should be able to either sign up or be able to have that that they put them into and if they don't want to do it don't make them do it. They'll do it eventually but don't push them. Give them a little space and give them enough time to be able to do [it] if they want to join the group or if they want, you know, but don't just shove them into it because that's not good for them. They need to be able on their own time and their own ground to be able to know when they are ready for that, to be able to do that (Colin, Army, DBK).
- I guess if people offer it [social support], accept it whether it's your family or your friends or just other veterans that's been where you have been but don't turn it away. And be able to know the difference between the support and pity. Don't accept any pity at all (Wayne, Army, BK).

Importance of Having Social Support

General Importance of Social Support

- Well, there's certainly going to be the time that you'll benefit from [social support] and there are a lot of systems out there that are designed to help people with disabilities and I think there's the time when people, maybe they get kind of frustrated because of the bureaucracy but it's a type [of] thing where you just keep working it. You just don't give up and lay down (Greg, Navy, BE).
- I think that I would tell them that I would hope that they have good family ties and good family support to help them but if they don't that they should look to other areas, to other people, to organizations, to amputee support groups, or to the VA and to the service organizations like the American Legion and the VFW. If they don't have the family support that they need, that they need it from somewhere because I believe that sooner or later you need help. You need somebody to support you and you need to find it somewhere whether it's from a local amputee support group or one of the service organizations. Like I say, I never really got into the DAV or VFW because I got all the support I needed from my family (Jeff, Army, DBK).
- Well, I think you've got to have [social support] and I still go back to, you know, you've got to get the right mental attitude. How you do that is up to each individual whether it's through your faith or, I think it's a combination of your faith and the people that, social, like you said, that they're around you and even searching out groups that you're going to be comfortable with and they can help you. I think that's definitely necessary. Fortunately for them I think they've got a lot of really neat programs, especially with some of the more serious injuries that they have now, you know, back then probably some of those the people wouldn't have

survived in 'Nam but I've seen some of the programs where, you know, amputees, some of the therapy that they go through and I think it's just wonderful (Brad, AE, Army).

Having a Key Support Person In their Life (Emotional and Instrumental support)

- It's really hard. I just hope that they would find somebody who would be able to take care of their needs physically and emotionally and be a rock like I've got my wife and I don't know how some of the wives are going to be able to handle what's happened to their spouses or the men for that matter in this war. I think that they're going to find out that they'll probably experience a high divorce rate. Socially it's going to be very difficult. They've been isolated as patients by the veterans' hospital so that we have very little contact with them. I don't know what their reasoning is. I don't know what the Veterans Administration's reasoning of isolating them but they have and I find that not helpful (Lewis, Navy, BK).

Importance of Being Open and Talking to Others (Emotional Support and Esteem Support)

- I don't think I can really answer that one. I don't think I'm a good person to answer that because I never really depended on anybody for support. Not really. I never seek support. You know, like I just said if you need somebody find them. Talk more. Me, like I said, I've hid it and hid it and hid it and that was the worst thing I could have done and, you know, if you're having problems find somebody to help you and confide in people and trust them. Me, I should have done a lot things different. I know that (Victor, Army, AK).
- I guess be open about everything. You have a problem, be open about it. Don't keep it inside. I think more people are willing to help than you may think. They may not be professionals. They may be your family or friends but there's always support that you can get from them. Just don't try and hide everything. You know, it's nothing to be ashamed of. I guess I learned that a long time ago when I was first wounded. People are curious and I use it as a way to educate them. So I try not to hide it. I don't flaunt it but I don't hide it (Derek, Air Force, BK).

Importance of Esteem Support (Can get from a variety of sources)

- I have no real experience with social support but to me I think it was important for somebody to recognize their service like they do now instead of treating like a piranha. When we come back we was shipped in. There was no one to greet us or anything there except family. Of course after that they started really celebrating and everything when the soldiers come home but that just, when you was a wounded warrior in 1970 you was nothing. They need a social group. It's very important I think then they won't turn out like me (Steve, Army, BK).
- It's very important to have relatives and friends to lean on that will accept you as you are. Everybody that came home from Vietnam, wounded or unwounded, came home damaged. A lot of times I tell a lot of people what the military did in my head is a lot worse than the physical damage they did to my body. That I can see and I can deal with. It gets real difficult to deal with what's going on in your head. I get single-sighted, I don't want to say everybody does. I only see things in an OD green point of view (Aaron, Army, AK).
- I don't know whether they would have a counselor that could sit down with you, because one of the things that you go through is you've got to get used to, people are going to stare because you look different than most people. Little kids, like I said earlier, are going to be

the most honest and they may call you Captain Hook or whatever, so that you, you know, initially that hurts or at least it did me but eventually I think you get over that and so if there were some type of program that they could sit down in a circle or whatever or group and say okay, these are the type of things that you're going to run into and here's how you've got to cope with some of that stuff. I don't know if it make sense but (Hill, Army, AE)

- I think today they've got to be reinforced that they can do it. That they can go on with the rest of their lives and that they can do it. They can make a positive difference with others around them. They can go on and have a work a day career and do it. Are there going to be challenges? Yep. There sure are. But they should be given the skills to deal with that and that's both from an educational standpoint to help them get back, rejoin a workforce, and obviously from the rehab standpoint. And then as you've alluded to, the VA has got to step up and say okay, now that you are our responsibility—you're out of the military—now it's you are our responsibility that we're going to do everything we can for you from both your prosthetic needs and/or if you need the emotional needs we've got to do something there and if you need the occupational therapy needs, we've got to do something there. And give them those skills to help them with coping. They just continually need to know that just because you're an amputee doesn't mean—are you different from other folks? Yeah, physically but are you different otherwise? Nope. You're not different otherwise (Richard, Army, KD).

Get with the Right People...People Who Won't Hold you Back

- I would say don't let anything hold you back from something that you think that you can't do. Do it. Get with the right people. Don't hang around with the wrong people when you're in the hospital because, I don't know how long these guys serve in a hospital now but if it's anywhere near the length that we did just make sure you're in the right group and you'll know who that group is...Because those are going to be the guys that are carrying on. They're going to be the guys that are having fun (Marvin, Army, BK).
- Well, I think you've got to have [social support] and I still go back to, you know, you've got to get the right mental attitude. How you do that is up to each individual whether it's through your faith or, I think it's a combination of your faith and the people that, social, like you said, that they're around you and even searching out groups that you're going to be comfortable with and they can help you. I think that's definitely necessary. Fortunately for them I think they've got a lot of really neat programs, especially with some of the more serious injuries that they have now, you know, back then probably some of those the people wouldn't have survived in 'Nam but I've seen some of the programs where, you know, amputees, some of the therapy that they go through and I think it's just wonderful (Brad, AE, Army).

Other

Reciprocal Nature of Support – Be Supportive of Others

- I think you have to be supportive of the other people too. I mean I don't know that I did anything any different. That's really the only thing I can think of. If you want to get [social support] you have to give it and I always had very good relationships with everybody I've worked with. That's the main thing I would say is you have to share yourself before anybody comes back with you (Harry, Army, AK).

Importance of Staying Active and Social Activities (Can Form a Network of Support)

- Social activities around a combat amputee or any veteran is a support that is like a crutch. When things in one's life gets to a point where they just need to lean on someone they're there to give that support (Josh, Marines, AK).
- Personally I've never been one for encounter groups and sit around the campfire and talk type of thing but I do think it's important that you get involved in doing things. Find what you can do, figure out what you want to do, and how you can do it. I re-taught myself how to drive using my left foot without any vehicle modifications. I learned how to use hand controls but I didn't like using the hand controls. And then I taught myself how to drive using my left foot and hand and of course it limits which vehicles I can drive...So there's things you can still do. There's activities you still can do. All you got to do is figure out is how to do them...I think it's important that they get active. Be active in sports. There are sports that you can do that are physical sports, you know, you can do and that's important—to be physically active (Jess, Marine, AK/Foot).

I. VETERAN PROFILES

Photo Courtesy of the Disabled American Veterans

Profile of Mr. Nathan Stevenson (Below the Knee)
(Original Transcript 23 Pages)

Mr. Nathan Stevenson lives in the Southern region of the US. Mr. Stevenson entered the Army in 1969 and was wounded in Vietnam in 1970. He reports his current health as poor and also reports being overweight/obese, experiencing stump pain, phantom pain and phantom sensation and other bodily pain. He also reports suffering from depression and PTSD. Mr. Stevenson is married and has two adult children. The interview was completed on August 2nd, 2010.
This is Nathan's story.

I have a bachelor's degree from College, and I have a graduate paralegal certification from University. [I didn't graduate from the college] until 1987.

I'm retired on disability. I retired in 2002. It had a lot do so with Post Traumatic Stress Disorder. I retired from the federal government and also my military disability. [Prior to retiring] I was a paralegal for the Federal Aviation Administration.

I'm married. I've been married for 38 years which is out of the norm for half of Vietnam veterans, but it's been a great marriage and relationship. We're both from the same town, but we didn't know each other until I got back from the service. I was 19, and I was just a year out of high school when I went in the service.

I have two [children]. I have a son that's 33 and a daughter that's 30. [I have] four grandkids, and they are five and under. I have two boys and two girls.

I belong to the 11th Armored Calvary. It's called 11th Armored Calvary Veterans of Cambodia and Vietnam. I'm a life member of Disabled American Veterans, and I'm also a life member of the 11th Armored Calvary. Then there's Blackhorse Association, [and] I'm a member of [that].

About the only one that I really did anything with was going to the 11th Armored Calvary reunions. There is a motorcycle group of Blackhorse Veterans, and I belong to that, and they just started forming a few years ago, and that's for all Blackhorse troopers from all wars.

[I have] the VA health insurance. [So if I need medical care, I usually] go to the VA Hospital, and they have a clinic. It's like an outpatient clinic. [And] because I was wounded and medically retired from the Army, I also have TRICARE—civilian medical care, but I've never really used it. [So I go to the VA for all of my medical care]. That's where I get all my medication.

Generally, I'd say yes, [I am satisfied with the care I receive at the VA], but I have to be quite honest—I'm scared to go to the VA. I'd really hesitate [to go there] if there were any actual procedure that I had to go through. I've been there for just some cardiac testing and things like that, but let's say surgery or something, I'm real hesitant just because of so many things I've heard, and things I've experienced. It's just kind of scary, and maybe it's that way with civilian care too, but I'm not sure. [For example,] they were doing a lot of colonoscopies with equipment that wasn't properly sterilized, and so now, they are testing [patients] for AIDS and Hepatitis [because] they know that some of the patients did have AIDS. You just hear things like that, and [one time I went in because] I kept having trouble with my stump breaking open and bleeding. They wanted to do exploratory surgery, and I told them no, I think I'll just wait and treat it myself and see if it heals. It

did, and I've never had any trouble with it. That was in the early seventies, not long after I'd been out of the Army hospital.

[I entered the service in] April of 1969. I would have been drafted, but I went ahead and volunteered for the draft. I just [wanted to] go ahead and go instead of waiting for a letter to come for my physical. Most people don't know but you could volunteer for two year draft, and that's what I did. [So I was 19 at the time, and I went into the Army].

[I completed my basic training] . [I completed my AIT,] [and] it was funny because when I was in basic training they told us where our next station was and what our training would be. They said that myself and a couple of other guys I was in basic, were going to be sent for advanced training, and we would be in the armored intelligence reconnaissance, so when we heard intelligence, we thought this was really going to be a great deal. [But we] end up being machine gunners.

[After that training], I went to Vietnam with the 1st Squadron, the 11th Armored Cavalry also know as Blackhorse. [And in Vietnam, I was stationed just] north of Saigon, and we pretty much just were on search and destroy missions.

[At the time I went into the service, my immediate family would have been] my mom and dad, and I had an older brother and a younger brother, and my older brother was also in the Army at that time. [But] he didn't [go to Vietnam]. He was in Germany. I did [have a girlfriend at the time], and we were real serious. [But that's not the woman that I ultimately married]. When I got back from Vietnam, I broke up with that girl.

[I was in Vietnam for] four months [before I was wounded]. Our basic philosophy and mission was just to track down [the] enemy coming across the border of Cambodia into Vietnam, so we did a lot of traveling up and down the Ho Chi Minh Trail. So we were doing all these search and destroy missions around the area...[and] I got shot March 5th of 1970. We used to find all these bunker complexes in the jungle. I mean they were amazing craftsmen. So we found all kinds of bunker complexes. And this particular day we found one, and we still found a lot of supplies and stuff where they had just apparently left when they heard us coming. Our commander, I hate to say it, but it's true; everybody was unhappy with him, and he was pretty green, and we did a lot of risk taking, and we were getting a lot of guys wounded and killed, and he took us back in there the next day just to see if we could catch them. Well, they were waiting for us because the jungle is so thick we went in on the same trail that we had busted the day before, and I was in the lead armored personnel carrier, and we took like four RPGs, and one of them came through the side of the armored personnel carrier and took off my right leg. So then I crawled off the top of the armored personnel carrier and started crawling through the jungle for help, but it took my leg completely off. I was just trying to crawl for help. And we were pinned down. We couldn't go anywhere because the driver was hit. [So I lost my leg] below the knee. I was on the right machine gun, and my sergeant got blown off, and I jumped off to pick him up off the ground. He motioned and shoved me to go get back on the other armored personnel carrier behind us, and I took off running. I looked over my shoulder, and nobody was following me, so I stopped and looked. This other sergeant was waving me to come back, so I ran back and got back in the APC. He wanted me to take over his machine gun which I did. He was out of ammo, so I went back down and flagged a APC to get some ammunition, and as soon as I stood up with more ammunition and started reloading, that's when the LPG came through and hit me. I [also] had shrapnel in my left foot. It was my right leg that was taken off, and I got shrapnel in my left foot and my left hip. Also, this is the strangest thing. When they were carrying me out of the jungle on the back of an APC, I was laying there, and I got hit in my right arm as we were leaving. I

think it was a piece of shrapnel that hit me. You know, because we had quite a battle trying to get out of there.

[I suffered hearing loss because of the concussion of the explosions]. Yes, absolutely. It was just like muffled and ringing in my ears, just so severe, for I don't recall how long. I know I complained about it a lot when I was in the Army hospital, and they did testing and said the ringing was tinnitus.

I did [have an infection]. Actually, the infection was from surgery at the Army hospital. I ended up with staph infection, and [I] got real sick from that.

I ended up at General Hospital. From the day I was wounded until I got out and went home, it was like 13 months. [And that's where I picked up the staph infection].

[Today I use a] prosthetic leg. [My car and motorcycle] aren't [modified]. At one time years ago, I had a left foot gas pedal but throughout my life I've learned to drive a car with either foot.

Right now, I would say [my physical health is] not as good as it should be for my age. I'm obese. Probably they'd call me morbidly obese because I'm way overweight. I have a lot of trouble with my leg, and I'm sure there's other ways I could get exercise without my leg. It just got away from me.

[I have problems with my leg]. One thing, I'd like to point out, is because of the nature of it being a traumatic amputation I had about five inches of stump below my knee, but when I was in the Army hospital—I hope you don't mind me going clear back to that time—that was in 1970-'71 [and] the Army had a certain way that they would shape your stump. When I was getting out of the hospital the doctor, you'd have to go before a board physician to be released from the Army.

When he saw my stump, he said, I'll never forget, he told me, "Oh, you have the old model." I asked him what that was, and he said, "Well, we used to shape them in a cone shape narrowing it towards the end of your stump like a waffle cone. Now, they make it straight and blunt on the end [to] try to save all the tissue and muscle and stuff that they can. [So] back when they did mine, I didn't have a lot of muscle and tissue for protective covering. Because of the shape, I've had problems my whole life getting a good leg to fit because I don't have enough protection, enough padding, and just the nature of the shape everything wants to fall off all the time. So I've had a lot of trouble with that. They came up with a system quite a number of years back called a locking pin system, and it's still real popular today. [It is] where you roll on, you don a sock, and it has a pin with grooves in it, and it locks into the prosthetic leg. I was using that, and at that time, that was one of the best legs I'd had because the leg stays with you when you pick it up. You know, gravity, pull on it, doesn't bother you as much, but because of the shape of my stump and gravity would, the suction on the end of my stump, totally changed the shape of my stump and made it worse, and I'd get so sore I couldn't wear it. That time I moved after I retired, I couldn't hardly walk. In fact, there was a shop down there that I was going to, and they just pretty much gave up trying to fit me and sent me to a doctor to see about a revision. [I didn't have a revision, but] I almost did because there's a doctor in California that has a special technique, and I read all about it. I don't recall his name, but I really thought about it because I thought that would be the way to go. I ran into a company in Orlando that invented a new technique for a vacuum system, and it's a total contact vacuum leg, and he suggested do not have any surgery. He said all the years he's worked with vets or anyone, he said the more surgery you have you develop other problems. And he said, let's try and work around it.

And [the new leg is] working real good. [But] I still have trouble because [of] the shape of my leg, and by this time, they had been around three years that I pretty much kind of hobbled around, and I guess [that was] because of my own pride and not wanting to be disabled. I never used a wheelchair. I would still walk and use a cane or just not walk at all, and then I put on close to 200 pounds [after I retired] because I became more sedentary. [At that point, I was using a cane] off and on. I tried not to use a cane, and I would just not even walk except from the house to the car or something.

[I had trouble with the skin on my stump, and by the time I moved that had gotten pretty serious]. It had become totally discolored, and...I do [still have problems with the skin]. I'm still having trouble. We need to come up with something that will help me to not have it because throughout the day as my stump sweats the only thing that I know that I can do is to take my leg off and take the liner and everything off several times a day. I have to admit I like to put my leg on and leave it on and not mess with it. [The] next thing you know, it's sliding and slipping down due to the shape of my leg, and it starts that suction. It sucks all the fluid and everything down to the end of my stump and makes it real hard. And I have some numb areas, [so] I don't know that it's happening until it's too late, and it's real sore. So I have sores down there.

[I have medical problems too]. They don't really say heart problems, but it's like I have this different flutter, and sometimes it's like a pain with a flutter. My blood pressure wasn't high, and they started out putting me on a beta blocker because of that flutter, and I told them it was like a skip or something. They've run tests, and they say they can see it on whatever machine it was at the VA, but they never really described or told me what it is. They just said it's nothing that will harm you or and nothing to worry about. So I've always been on this Metoprolol beta blocker which also controls blood pressure, and it's kind of like border line high blood pressure, but when the VA records it, they—that's one thing I don't like about the VA, they recorded things however they want. I've gotten copies of my records where they've totally twisted things around that I've said or in recording.

[I don't have any problems with diabetes]. I'm very thankful I don't have that.

[I have phantom pain] all the time. I have severe phantom pain all the time. Usually, the worst time is when—I should say the severe time—is when the weather is changing. Then that's when I really feel it, and I can't sleep at night. And it just feels like someone's cutting my toes off with a knife or putting it in a vice and clamping my foot down in a vice.

[I have pain from overcompensating too]. I'm service connected for my back. I've been service connected for that for years just because of the overcompensation, and as I've gotten older—I'm 60 now—I have knee pain, my hip, that's why that's limited me with my walking and also before when I went in the Army I had flat feet. So that's created a problem being a single amputee. My prosthetist that I have now said basically said the best way to explain it to someone is to say you're allowed so many steps a day before you have to take an extended rest to recover from it. So I have trouble with my foot. Pain and swelling from being a flat foot, and I have pain in my knee, and I showed the VA, it's like sounds like gravel and stuff in the knee. Got crepitus or something, they called it.

[I don't take anything for the pain though because] they've tried all kinds of pain medicine. [With] most of [the medicines] when I take enough of to get rid of the pain, it does something, and I start itching all over. So they've tried everything from Darvon, and that one's worked pretty good, but if I take enough, then that starts to itching, the same way with hydrocodon. And right now they give me morphine which they gave to me just before I went on vacation. I didn't even bring it with me

because I didn't want to be trying the new medication. I'm opposite of what the sixties were, you know. In the sixties, it was like drugs and alcohol. Now, I want to take the least amount of drugs I can. [So] I just left all the morphine at home, and figured I don't want to be trying to get into our VA here or something to see them about any medicine.

I've probably done better than a lot of guys with Post Traumatic Stress Disorder only because, I think, being in the hospital allowed me to see other wounded people and to hang around with other guys. We didn't talk about our wounds much, and that's something I think that the military or somebody should have done, was really get us to talk to each other. We mostly just drank our pain away. We'd go out every night because we got passes. When we were ambulatory, we'd go out every night, and we'd just go to the bars and drink until they closed, and then go back to the barracks. We didn't ever really talk much about Vietnam. We didn't talk about that stuff. It was more about here and now. And we would, which I think was healthy mentally for us, we would tease each other about our injuries.

[So I think it was beneficial to be there with the other wounded vets]. I think it helped a lot. I wished we would have stayed in touch over the years, but it's like everybody wants to get out and go home. That was really the mission, and I was there a year, and you couldn't wait to get out of there.

I didn't realize [I had PTSD]. I mean, I knew that I was always having these problems [and] memories and just sounds and smells and things like that, but I didn't know there was a name for it or anything until I read about it in a Disabled American Veteran magazine. I started reading about [it]. They called it delayed stress at that time, and [there was] a check list of symptoms. It [was] like I fit every one of those, [and it was the] same way with Agent Orange issue. You know, I believe I'm affected by that as well. And that would have been like 1979. [Because] I was in almost the most heavily sprayed area in Vietnam.

[And] I had dreams. I still have all of that. One thing that really made me retire early in 2002 was the first Gulf War. That really started a lot of stuff happening, [but] then that kind of settled down, but then when we went to Iraq, and then when the towers were blown up, then it's just like everything just turned upside down for me as far as depression [and] anxiety. It just kicked everything into high gear, and it was all I could do to make myself get up to go to work. Up to that point even though I had troubles, I still was able to mask it and hide it and push myself to go to work. But then when that happened, it's like I couldn't pull myself away from the news, the TV, the war. I just had all kinds of problems, so I retired early from the FAA. I did [get treatment]. I worked for the vet center as a like a layman counselor because I didn't have my degree in counseling, but at that time they were letting veterans help. Combat vets help combat vets. And that worked real good. In fact, I think that helped me a lot just to be with them. Well, then when I went to the FAA and then I was totally away from veterans on a daily contact basis, I think that actually helped me a lot. Just by being around them and hearing them, it helped me with my own issues going on, but then when I got, when we invaded in Iraq then I, at that point I wasn't on medication, but I got so bad that I had to go back to the VA. When I worked for the FAA, they put me on antidepressants, and I've been on them every since. I've tried to get off of the antidepressants and the anti-anxiety and stuff like that, and I just haven't been able to.

[My drinking] didn't [continue after I got out of the library]. I totally quit drugs and alcohol like that. In fact, when I met my wife, well my girlfriend when I came back home, she's a Christian, and she led me to the Lord as a Christian, and I quit everything at that time. I would take illegal drugs. I'd [did] illegal drugs, alcohol, anything.

[My wife] gets embarrassed [when I tell stories about how I met her], but she was, I'll tell you what, I bought, in Rapid City at that time that's when the Datsun 240Z car came out, and I just, it was like the first year, and I just went wow, I've got to have one of those, and that car was like a chick magnet they say, you know. I bought one of those, and she was a carhop. Back then, they still had carhops, and she was a carhop at a taco place, and I was driving down the street and just saw her waiting on cars, and I thought oh, I'd better check this out.

[When I was first wounded], I thought about [whether or not girls would be interested in me or if I'd ever have a normal sex life], but I didn't ever focus on it. And "word inaudible" I would date, I had a lot of, before I met [my wife], I had a lot of girls that I dated, and I mean it was like, I was dating girls in about every town I could think of. We'd chase them. We, this is interesting. We used to go snow skiing. They taught us to snow ski as amputees. And I was highly involved in that. I was a, I skied for competition. We had an Army ski team. And the Army would fly us around to these ski events, and we would do slalom and giant slalom races against other people that were not even military. They were just amputee kids and stuff and so as part of our physical therapy because, well myself, I said I'm not going to go to physical therapy down there and physical PT room where all these military nurses. . . Actually, they were like old women to us, and we refused to go down there and work out.

So the colonel said, "If you guys will continue skiing and be on the ski team, then I'll give you a pass every day to go skiing." So, I had my 240Z, and I had the ski rack on my car, and life couldn't be better at that time because we got to go out every day and ski, snow ski, [They] actually treated the veterans good because we're amputees because we got a free ski pass at all the ski resorts. And the Lange was the company that made skis and boots, and they gave us our equipment because they would like have imperfections, and so you know if they had a left boot that was messed up, well they had a right boot with no match. So then we got the right boot.

[My family's response to my injury was] really interesting because when I got to the hospital, my brother and my mom were there when I arrived which was surprising, but I was so heavily medicated it's just kind of a fog even to this day. They were there, but I do recall them when they brought me in the, we landed at an air base, and they bussed us over, and when they brought me in on the stretcher, I remember seeing them right inside the back door, and that just totally shocked me that they were there before me waiting. You know, that was pretty neat. When I was in the hospital, every time I needed surgery and stuff like that, my mom drove [400 miles] down every time, she was there every time I had surgery. So she was real supportive and when it was time I could ambulate around, she sent me and went out and bought me civilian clothes. So, you know, she and then my older brother, he was still in the Army, and he was, because we were both in at the same time he was actually stationed [near], so then he would drive up to the hospital on weekends and pick me up and take me to his house to stay for the weekend. So, that was pretty good. My younger brother and my dad, they didn't really come to the hospital. I don't recall, because my dad, he just was kind of a, you know, he stayed for work all the time.

[But at the hospital], it's like everybody's just, [worked] to get well enough to get out of there and go home, get out of the Army. So, and the way they did it, was kind of, even though we were around each other if you had any setbacks other guys would be, move forward in the chain of events like you'd be on orthopedic ward until you're well enough to be ambulatory, and then they moved you to an outlying barracks, and so it depended on if you caught infection, stuff like that. Some of your buddies might move ahead of you in the chain. But you still stayed pretty close to each other, but

they might get out and go home, and so then you tried to develop different friendships with the guys that were still around. So that was still kind of strange. The [local] people actually were pretty receptive of us, a lot of them were, and on the ski team. So I would say in the hospital itself, they did quite a bit if you got involved in it at all. They would take you to different events like the Ice Capades and stuff like that or up in the mountains to go fishing. They would take us on a bus or something. But a lot of times a lot of us didn't go because it just seemed like, we were, you'd go and like for the Ice Capades I recall in particular. Here we are all of us sitting in this one section, guys in wheelchairs, and on crutches, and missing about every body part you can imagine. It was more like they didn't spotlight us and point us out, but you just felt out of place because you didn't fit in, so you felt like you were more on display when people walked by and looking and staring then. It was, when we would take our civilian clothes to a Laundromat, everybody knew who we were because of our short hair and all of us being, you know, amputees and what not. They knew that we were guys that had returned. So people either didn't talk to us, or didn't have nothing to do with us at all. Or once in awhile, you'd run into somebody that was real friendly. But generally overall it's like we were just us guys to ourselves.

[And the veteran associations that I've been a part of have been important to me], but now as I have gotten older, I like to go to the reunions, but it's just like we've all gotten older and have our own families and lives. I think had we maybe stayed in touch throughout the years, we'd be a lot closer. But, you know, in fact, one of the guys that pulled me out of the jungle, and he was a good friend of mine in Vietnam, but we hadn't seen each other until—this was in 1970 was the last time I saw him, March 5th, and then I saw him in, I think it was, 2007 at my first reunion, and it was his first reunion, and we maintain phone contact. He lives up [on the east coast] but, you know, so many years have gone by and we have our own lives. Although our lifestyles are pretty much the same, we just don't spend time on the phone or visiting each other.

Without [my wife] and without my faith in Christ, I'd hate to think where I'd be. She has, I guess that for me, has been my stabilizing factor in my life. But now as I've been a Christian longer, you know, I don't want to get behind the pulpit, but I have to say that Christ has taken over that I let Him lead my life, so now my wife relies on me where throughout most of our life she really was there all the time no matter how I felt. There were, I mean I could tell you stories on and on about how I had thoughts of suicide. I had thoughts of going crazy and not understanding what it is. You know, I thought times of running into a bridge abutment and stuff like that, because it just was so painful and society, even though, I mean I've had people say things to me even as late as 2001, say well, if you volunteered to go in the service, you got what you deserved. This was from a co-worker that was a war protester. So it's like my wife has, was always there. She's always there for me no matter what, and that's how our relationship [is], and I'm always there for her and then my children. So I'm thankful to the Lord for having my children and my wife because so many veterans have been through so many broken relationships and alcohol and drugs. That's why when they rate my PTSD because I'm not a drinker or a druggie or been through a lot of wives, you know, they think well you're doing really good. You're, even though I tell them I said well I'm doing good, and I'm doing what society expects, and I love my wife but that doesn't negate the fact that from the moment I wake up and put my leg on until I lay down at night and take my leg off, Vietnam is there from every waking moment, and then when you live with the pain, physical pain, and the dreams and stuff, they never go away. So really, it's been my immediate family, my older brother, they've been my support, and they've been my constant stabilizing factor with Christ.

[And when I met the woman who became my wife, I understood that I had to give up drugs and alcohol if I wanted to be with her]. She never did say that, but I just knew that. I knew that if she

was going to be in my life that there were things that her and God expected me to give up in order to follow that pathway, and I decided that that was something that I had never had, that I wanted, and that's been a perfect combination for me. I'm not saying that it's been everything wonderful and glorious, but I think without that I'm, you know, I did, I experimented with every kind of drug and I did everything you could imagine. So being able to walk away from all that it's pretty nice.

[My advice to current veterans regarding social support would be,] it's hard, I have advice that first off, it's hard for me to give like a concrete plan because of the way veterans were treated from Vietnam, and I'm not trying to say woe is me, but it's just a matter of fact. [It was a different time then and a different war,] people did not support it. It's like, one guy said to me one day, and if I could say it like he did it, makes sense. It's like if our whole country was on a big drunk and got into this horrible mess called Vietnam, then one day they woke up from that drunk, and they said oh my gosh what did we do. Well, we don't want to look at that because, you know, it's kind of like that drunk saying, oh I never want to see that. I never want to do that again. And that's what all our politicians and everybody, you know [did]. Oh, we don't, so they don't want to even see or hear from us because it reminds them of this horrible drunken mess they got into and we're "words inaudible," but it's really us. We really did that. Those things happened. Now in this new, in the current with the veterans I've been around a lot of those because the guy that makes my leg, this vacuum system, I can't tout him highly enough for his inventions and development because Walter Reed sends a lot of the amputees, the guys from Iraq and Afghanistan that get hit with RPGs, and so they're familiar, we get along great. I love to see those guys. In fact, when the 11th Armored Calvary went into Iraq, I wanted to be with them. I couldn't believe it. I wanted to go and be there with them, but when these guys come back, we get along great. When I'm over at the limb shop, that's where I'm really very comfortable and very enjoyable being around those guys, and being at the limb shop because that's a positive experience for me as well as those guys. They're getting out of the hospital so fast that they're, you know, they'll be in just the hospital maybe a very few months, and they're out, and they're walking. They do it so totally different, and they send them to this place in Orlando from Walter Reed to have their legs made, and anything I tell any of the guys I see, the only thing that I tell them is always stay on top of your leg, getting it worked on and getting things taken care of because otherwise it gets away from you, and looking back, I should have stayed into sports, into skiing and tried to really stay active in that. A lot of times when my legs wouldn't fit, I would get maybe a leg every other year. These guys will get a leg and wear it for several years because of the shape of the stump. But I tell them, or I tell guys I've been to the Army hospitals, and this unknown person came to me when I was in traction in the hospital, and he had real long hair because 1970, and he walked up to me and was talking to me about being an amputee and all that. I was kind of puzzled, and he said to me, he said when you get out of this bed, he said, get out of your wheelchair, and don't use a cane, and so he kind of danced around on, and then he was walking around. I'm puzzled. And he says I used to be right here on this ward, and he pulled up his pant leg. Showed me his leg, and...he was an amputee from Vietnam, and it just, it stuck and burned it into my mind that. So I relied on that talk. Try to never use my wheelchair. Well, they just, they didn't give me a wheelchair until just a few years ago. In fact, that's one thing I could go on about the VA about the terrible health care because it's like money out of their pocket, and they don't want to help do things. But that's another story I guess. But they, yeah, so I've always maintained, don't use the cane or anything because once you start relying on that then the next thing you're in a three-wheel scooter with batteries and, you know, then you're 500 pounds, and you're just sitting there waiting to die. Stay active. Got to, and they're doing it more and more with the technology in the legs and everything. It's just incredible. You'd have to get half drunk to run around in a leg that they made us back then, and you'd wake up and pay for it the next day.

I can't think of anything [else to say] to be honest. I've just said so much, and I'm trying to recall things I said and maybe forgot. You figure how many years I've lived with this, and I guess that's, one thing I guess I did, you know, maybe we didn't talk about it but just the acceptance of the guys today. It's great, and I've seen Vietnam veterans accept them and people in general, and they'll meet them at the airports or wherever when they come back, and I think that really does a lot, but the main thing is it's, I guess this is something that I would like to say. It's got to be more than just a yellow ribbon on a trunk of a car or a flag on the trunk of the car, and we support [our] troops sticker. It's the people need to really understand what freedom is about, and what it takes to maintain the freedom whether it's fighting in another country or not our country is doing it, and we need to support that, right or wrong, until all those troops are back, and it's done and over. You know, people will say support the troops, don't support the war. Well, that doesn't work. That doesn't work for me in my mind especially because you can't, they'll come back, and it's a phony welcome home to me. If they're not supporting the war, they aren't supporting me, and I had a guy say that just before I came on vacation. He said he would never fight for this—he's from Cuba. Came over on a Red Cross boat and got naturalized and all that, and he told me, and I said why do you have a tattoo that says Cuba rules? And he said because it's number one country in my life, and America is number two. I would never fight for this country like all these stupid wars they get in, and he knew that I was missing my leg from Vietnam, so that, those feelings and those thoughts and philosophies are still there, and I told him our conversation's done because you say that stupid war, and in a sense, that's saying that I'm a stupid person for going to fight a stupid war, but I did what my country wanted me to do. That's what people in this country forget; what it is for the cost of freedom and to maintain that. So when it comes, the thing is they always want to say support the troops, but then they forget. They end it there. Once they're home, once they're home, they're not troops, most of them. Back when I was in, you get out, and you become a veteran. They don't support the veterans and the politicians, they like to play like they're supporting the veterans, but they don't. They have all these budgets, and they play politics with the budgets.

As far as I'm concerned, and I get real heated and angry about it, is that our government should just have—and they do this in Australia. I have a very, very close friend of mine. We've been together several times since Vietnam. He's an Australian soldier. They have basically a card. They can go to any doctor anywhere in Australia, and it doesn't cost them anything. That's the health care they get. And in this country they set up the VA hospitals. Yes, you'll find guys that say that they are wonderful, they're great, they're the best care they've ever had. Well, in my experience that's because they have like acute problems. You can go in as veterans with an acute problem whether that means you need heart surgery, or you need knee replacement or whatever. They get it. They fix you up, and you go home, and that might be all you have, but when you get down to the guys that have all the war injuries, they have chronic problems. They don't want to pay for any of the chronic problems and the ongoing. They want to piecemeal it out. You can't have a wheelchair because you're not missing enough of this or that, or you can't have a wheelchair adapt at home because you don't have enough injuries which that's one of the things I've tried to fight for, and I think that our country should be more thankful and grateful to the veterans, and that's kind of, you know, I'm kind of singing a song of blues about that because I'm getting older, and I'd like to be able to have more mobility and adaptive things within my home. They give you a one-time opportunity to remodel a bathroom. It's a once in a lifetime thing. So, you know, that means you better find the house you want and stay there for the rest of your life because they'll modify a bathroom one time to the tune of, I think it's like \$7,000. Well, in today's world of money and the cost of things, you can't do that. So, if I need adaptations and stuff like that, I have to come up with it myself, and that's where, people don't hear about veterans. They hear about troops, and the veterans are just kind of shoved in the back room, and it's still that way today, and a lot of, see when these guys first started coming home from Iraq, I noticed it then for the first time in my life, I was able to get more than one artificial

leg. All my life, they've said, no, we only pay for one at a time, and when you get a new one, we don't pay to help take care of the old one because you're not supposed to wear the old one anymore. You have to wear that new leg. I go well what about a spare? Well you just go get it fixed. When the guys from Iraq came home, these guys are young, or some of them, I'm sorry, some of them are a lot older than we were, and so they're more demanding. They've been in the reserves or the guard or in the military for awhile. They're more demanding. They're coming home, and they're saying, look, I want a leg that I can do exercising in. I want a leg that I can take in the water. You know, and so they're demanding it and because people are saying well, we'll support the troops. The government says well we better do this. Just like Walter Reed, they saw the paint chipping and whatnot. They started fixing it up. Well, now it's starting to fade away again. At that time, I complained to the VA because of a problem I had with a guy in prosthetics. Then they said okay, anything you want just don't go the press or nothing. So I got, and I learned this from the Iraq vets. Get your main; have them make you two legs. One's a backup; in case one breaks. And I went, this is great. The first time since 1970, and now I'm 60 years old, I have two legs, one's for backup. And then I told them, I want a shower leg. I've never been able to stand in the shower unless I lean against the wall on one leg and about die, and you know but usually [I] get a chair or something and sit in it. So now I have a shower or a water, I tell them a shower leg, but I used it in, I've got a swimming pool because they're real cheap. So now I've got one. I can go in the swimming pool with my grandkids, you know, It's great.

[So for awhile at least the vets coming home kind of improved the situation a little bit]. Yeah, absolutely. We've, me and a couple other guys, would joke about how you better get your duffle back full of goodies, arms and legs and eyes, whatever you need now before they cut off the gravy train.

Profile of Mr. Derek Rome (Below the Knee)
(Original Transcript 9 Pages)

Mr. Derek Rome lives in the Mid-west region of the US. He enlisted in the Air Force in 1965 and was injured in Vietnam in 1966. Mr. Rome reports his current health to be excellent. He also reports experiencing phantom limb sensation. He is not married and does not have any children. The interview was completed on August 6th, 2010. This is Derek's story.

[I] just retired about a year and a half ago. [I am] single, [and I have never been married, but I've been seeing someone for about] 10 years. [I belong to] DAV, Disabled American Veterans. [I] enlisted [in the military in] July [of] 1965. [I was injured in the spring of] 1966. [At the time of my injury, my immediate family included my] mother, father, three brothers, several aunts and uncles. [I was] not [dating anyone] at the time.

I was an infantryman, and that morning, we were put aboard trucks for the first time which we thought was pretty cool because we always had to walk everywhere. I happened to be first truck in line, and I can't remember exactly how long we were moving, and there was a command detonated road mine set up right underneath me. I was in the back of the truck standing up behind the driver, and our whole squad was in the truck. Everybody was injured. I guess mine was the most severe because it was right straight underneath me, and it crushed all the bones between the knee and the ankle, [and] they weren't able to be repaired. I had various shrapnel wounds, and then I was airlifted out shortly after that to the hospital.

Both eardrums were blown right out, and I still have hearing loss today for this time. I have a disability rating for that. [It was my] left leg [that was injured].

[I've used various assistive devices]. Very briefly at the hospital, when I first came back, [I] was [in] a wheelchair. I had a couple of revisions on my stump. I ended up going to crutches, and then within a year to a prosthetic leg, and since then nothing else just the leg.

[I don't have health insurance]. [I use the] VA.

Overall [my health over the years has been] excellent. I also tended even as a youngster to watch what I ate. I'm trim [and] very active. [I do] different sports [and] different activities. Just pretty much try to take care of myself.

[My emotional health is] real good. No problems. Happy as a clam.

Combat is such a personal thing, but as far as living, since I had the wound, I would say it's pretty much normal compared to all my peers here that weren't injured. Nobody else was in the same situation I was in or had had things happen to them like that, so to do the activities that I want to do, I pretty much had to find ways to do it to fit in with their way of doing things, [but] it wasn't a big change at all. [I] just kind of fit right in. If I wanted to do something with them [like] motorcycle riding, anything like that, I just had to find a way to do it and make it work, and [I] just went ahead and did it. I guess I was pretty much accepted just as that. They treated me just like anybody else. Combat part, well that, I guess everybody has a different view of the war they were in. So mine mostly contained of skirmish type battles, light fire fights, that sort of thing. Nothing real big. [I] had friends [that were] injured and killed, but it's just something you live with.

I'd say I've always pretty much done everything I wanted to do, [but I faced] challenges I [like just] overcome[ing] the limitations of the limb [loss] itself. The ability to run or [do] physical activities [was a challenge]. My skill level would be lower than other able-bodied people. I guess that's just pretty much the biggest challenge. I've been pretty much pain free. The equipment that I've had, since day one, has been pretty good. Very few problems like that.

Family was all pretty much supportive. [My] friends just brought me right back into fold just like it was before I left. So there really wasn't any real down parts in my recovery or even my life afterwards. I've never made [it] a secret [that I have] an artificial leg. I wear shorts all the time. Sometimes I have to educate some little kids which are kind of neat. They don't know what it is, and I, kind of, explain it to them. But most of the people have just been as nice as could be. I haven't had any really problems. [People have been] very understanding. They don't pry. They can ask questions. I don't mind that. I've let them know that. I'll talk to anybody about it any time if it can be of any help to some people. So [I am] pretty much open about [my limb loss].

[My mother's] general attitude [and response to my limb loss was] pretty supportive. She wanted to do things for me when I first got home, when I was on crutches, but I just automatically did things on my own anyway, so she just let it go at that, and let me do my own thing, but overall [her response was] just fine. [She was] unhappy of course when I got wounded, but after that wears off, it's just a matter of getting back on with living. [I did find that there were times when she thought she was being supportive, but it just wasn't what I needed at the time]. [But] mothers are mothers. She wanted to do some of the things for me [like] physical things, or [she wanted] to get things for me, that sort of thing, and I said no, no, I can do it type of deal. And then she quickly caught on that I could do it and wanted to do it, and she didn't push it anymore. [But overall she provided support]. [She was] always there.

[My father] was probably more hurt when I first was wounded than my mom [was], at least outwardly and emotionally, but pretty much [he supported me] the same way [that she did]. He was more apt to jump up to do something for me when I was home that I could do myself, and I knew I could do myself, and I went ahead and did it. He pretty much fell in the same category as Mom did there. They found out that I could do things, [and that] I didn't want to be babied, and [I had] no problems after that. [And] that [happened in] a very short time span.

[My brothers] never questioned me on stuff. You know how people sometimes will take you aside—well, did you kill people, did you do this, did you see that. [But my brothers] never questioned [me] much at all, [and] if I wanted to talk about any little thing, they'd listen. [But] one was in the service, and one was away working, so they weren't there initially when I came back. So it was kind of a gradual process, on the other three brothers' parts, as far as my recovery and stuff, and it just went just as natural as could be. There was no hitches or glitches.

Later on, [I had close friends that were helpful, like when] the guys started coming back. I knew guys in town. [And] I was kind of in the early part of the war, [so] as more guys went, and more guys came back, I [had] a cross-section of some friends that were willing to share some of the experiences over there, but not to a point where they're intruding on stuff because they pretty much went through a lot of the same things. So it wasn't a sit around telling war stories type thing all the time. It was just a common interest type of thing as you would have in some other type of activity, and [it was] pretty good. Nobody seemed too upset about things, and [I wasn't too upset about] what happened to me. [I] just kind of took that sort of thing in stride. And all activities that we did

together, just kind of continued on from our high school days.

[And my current girlfriend has] never asked me about it much at all since we've been going together. Of course, this is quite a while after the initial years [of my being wounded], and I'd done all kinds of things before that, and as we were dating those activities came out. I can't remember exactly how long it [had been since we] started dating that I told her about my experiences. [I] just lightly touched on them just [because sometimes] you find out things [about the person you're with] from other people, [and I thought if that happened it might] possibly scare [her] a little bit. I don't know. Some people react differently, but she took it right in stride. She had never really asked me about a lot of stuff, and I don't volunteer [information, but I did tell her about] some of the experiences over there. [But I] actually [told her about] more of my experiences in peace time Army rather than during the war time. Just the things that happened to you in base and just the adventures type of things.

[I wouldn't consider any of the people I've mentioned to have taken on a care giving role when I first returned because] I was so doggone independent. I've always been that way. [If something] needed to be done, I would do it. So it wasn't needed on their part because they knew me, and [they knew] that I was more independent than a lot of people. I would just go ahead, and do things. [If] they had to be done, I'd do them. I didn't have to depend on other people. [And I] went back to work. You name it. [I] just kind of [got] right back in the groove. I started out working at a gas station, doing repairs, and then I went to college. I got my degree, but I didn't go to work with my degree. I ended up working in construction. I would put telephone cable in for the phone companies, and I did that for quite a few years. Then I ended up working as a commercial diver. I did that for quite a few years. I got out of that because it was pretty rough on the body. It's hard on you working on barges and things. Then I got out of that, and I got a job at the sheriff's department as a deputy, and that's what I retired out of.

I don't know if I'm different or not, but I didn't have much of an adjustment to make. [So] it's hard to pinpoint any one person or even a group [that was most helpful to me in adjusting to my injuries]. I would just say my whole circle of friends and family were all there, and [I] just kind of fit back into place. I've often wondered myself at times why I was able to fit right back in because I know other people had problems, and [they] weren't able to fit back in. But overall...[I] just seemed to pick up where [I] left off [with my family and friends prior to going to war].

[I would tell current veterans, who sustained limb loss in Iraq or Afghanistan, that they should give] anything you want to do a whirl. There's always ways to find out how to do it. Don't sit back and think you can't do something. There's been nothing I wanted to do that I haven't been able to do. I may have to adapt a little bit. I may have to have a special thing done or whatever, but I've been able to do it. Never give up on something like that because you can always do it. [And that] surprises a lot of people that don't know me. [They are surprised by] the type of work I've been doing my whole life, and [they] didn't realize that I even had an artificial leg. So if you think you can do something, you can do it. There's always ways.

[When it comes to social support], I guess [I would tell veterans to] be open about everything. [If] you have a problem, be open about it. Don't keep it inside. More people are willing to help [you] than you may think. They may not be professionals. They may be your family or friends, but there's always support that you can get from them. Just don't try and hide everything. [Your injuries] are nothing to be ashamed of. I guess I learned that a long time ago when I was first wounded. People are curious, and I use it as a way to educate them. So I try not to hide it. I don't flaunt it, but I don't hide it.

I guess the biggest lesson is just go ahead and do what you want to do. I mean the sky's the limit just like anything else, education-wise, work-wise, you name it. You're able to do it. [There are] very few limitations out there that'll totally stop you. You may be not as good [at something] as somebody else [is, but you should still get out and do things]. Like right now I still play hockey. I'm 63, and I never, ever in my wildest dreams would ever [have] thought I'd be doing this. [So your injury] doesn't have to stop you—your age, your physical part of it. I'm not as good as most of the guys out there, but I'm still out doing it and that's the biggest part. [So] just don't think you can't do something.

Profile of Mr. Lewis Hoffman (Below the Knee)
(Original Interview Transcript 12 Pages)

Mr. Lewis Hoffman lives in the Mid-west region of the US. He enlisted in the Navy in 1967 and was wounded in Vietnam in 1969. In addition to his amputations, he also suffered other broken bones. He reports his current health to be fair. Mr. Hoffman also reports having cancer, diabetes, being overweight/obese, experiencing back pain, residual limb pain, phantom limb pain, phantom sensations, other bodily pain, depression and PTSD. Mr. Hoffman is married and has one adult child. The interview was completed on July 15th, 2010. This is Lewis' story.

I'm [currently] disabled and retired, [when I was working, I was a] budget reimbursement specialist at [a local hospital]. [I've been married for] 32 plus years. [I have one daughter who] is 41.

I'm a life member of the Disabled American Veterans. [But] I don't attend any meetings of any veterans' organizations at all. I joined...[the military in] May of 1967. [But] had I not joined, I would have been [drafted]. [I was injured] November 7th of 1969. [At that specific time, my immediate family consisted of] my mother and father and [my] two brothers. I had a relationship with a young lady at the time of the injury, [but she is not my current wife].

I'm a left, below the knee amputee with a very short residual stump, and that's the extent of the amputations. [Other parts of my body were injured]. [Most] of the back muscle of [my left] thigh was destroyed in the bomb blast or the land mine explosion. [I also suffered] injuries to [my] groin, [my] right leg, [my] right ankle, [and my] right eye.

[Throughout my life, I have used] crutches, [a] wheelchair, and [a] prosthetic device. [As far as insurance and health care], I'm 100% service connected from the Veterans Administration and taken care of 100% by them.

Initially, [my health] was pretty good. Other than the amputation, [the only real problem was that] prosthetic devices didn't really fit well, and [I had] a lot of sores related to that. But in recent years, my [over all] health has declined. I have high blood pressure. I have high cholesterol. I have had numerous surgeries. I've had two back surgeries related to the amputation. I have had surgery for bladder cancer which the VA denies as being Agent Orange related, but I disagree. I have had pneumonia recently. No heart problems as of yet, thank goodness. [So] that's about the extent [of my health problems]. [But] my pain level is relatively high. It's being controlled by Oxycontin. I have some [phantom pains and sensations on] occasion. Most of them have subsided. Occasionally, I'll get some sharp pain that's relative to phantom pain. It's like nails being stuck under your toenails.

[My emotional health is] not good. I'm being treated for Post Traumatic Stress Disorder. I take a large amount of medication to keep my mental status in check. [I have] occasional nightmares. [And the PTSD affects] my functioning as a human being. I've had suicidal thoughts. I've gone through numerous programs that the VA has offered, one of which made me worse. I have homicidal thoughts. I think I'm being checked [out] by the FBI, but [I'm] not real sure.

I think the biggest thing, [concerning living with limb loss over the years,] is the fact that I can't do what I used to do. I was an avid runner. [I] loved to run. Based on the injury and the fact that I have such a small residual stump, it precludes me from even attempting to run. [My injury has] prevented

me from doing a lot of things that I used to do and enjoyed. It's hard to really explain everything. It's just that normal functionality has been limited [over the years because of my limb loss].

[It's a lot different now than it was the first 12 months after I was injured]. I can't walk as far as I used to. I'm not as strong as I used to be. My upper body strength is diminished. I do not use crutches now because of [my upper body being weak]. I do use a wheelchair when the prosthesis is off and sometimes when it's on. I cannot walk great distances, and that limits my mobility, and I think it's had an effect on the fact that my health has declined. [I use a wheelchair that is] manually powered. [And] I have two. I have one that I constantly carry in our van, and the other one is used primarily in the house. One of which [I] bought myself, and the other one was bought by the Veterans Administration after a little protracted fight to get them to do it.

[The most challenging thing associated with my combat-related limb loss over the years is] just the fact that I can't do what I used to do prior to the limb loss. I think that's been the most challenging part. Another issue is I still feel that people stare at me when I wear shorts, especially young children.

[The first couple of years after my injury,] I had to rely on my middle brother a lot. My mother couldn't bear to see the injuries that I had incurred, and I needed some assistance because I had wounds still draining on the backside of my left thigh, and my middle brother was the one that did it. He was the squeamish one in the family, but he actually took over and did that for me. [But now the person, who is my primary caregiver, is] my wife. She's my chauffeur. Because of the meds I take, I don't drive a lot. She has supported me all through our 32 years of marriage and has been there for me when times got rough.

[My mom] was appalled by [my limb loss]. She couldn't understand how I could function after the limb loss. I didn't permit my parents to come visit me while I was recuperating in the military hospitals. When she first saw the extent of my injuries.... it affected her a lot. Although she had had an uncle that had suffered limb loss due to World War I injuries, and she was exposed to that and that somewhat helped her, but I still think it was really, really tough on her. Really tough. She was [supportive though]. She worried a lot, let's put it that way. I was probably the strongest one in the family, the one that could endure the trauma that had happened. I suppressed a lot of things for many, many years. [I] suppressed a lot of feelings [and] a lot of emotional things. My mother was supportive, but there were certain things she just couldn't do. [And throughout the years] she still remained relatively a worrisome person. She worried about me. She didn't know what to expect.

[I would also say that my dad was supportive, although] he was not an emotional person. He didn't let his inward [feelings show]. [But] I found him to be supportive in his own way. He was a typical man and father. He was a World War II veteran who had suppressed all [of] his experiences as well. [And] I guess [that] carried over to me.

[My] middle brother [and I] were close. The injury made us a lot closer than we had been growing up. [And my] youngest brother, he was more footloose and fancy free and never really paid much attention to [my limb loss]. [But my middle brother supported me by] doing my dressing changes that were necessary during the first two years [after my injury], and he was basically there if I needed any assistance or help doing things that I couldn't do. I wasn't real good with my hands, and he was very supportive when I needed any assistance around the house and things like that.

[But he's not as supportive, as I would like for him to be,] now. Now he's very distant. We don't

communicate that much although he did come see me when I was hospitalized with pneumonia only because his wife had an appointment at the veterans' hospital. Otherwise, I don't think I would have seen him, and it's been a number of years since I [have seen] him to begin with. It's been about four years [since I have last seen him]. [I'm not sure why we are so distant now, but] my father and mother both died. [And] after my father died [my] middle brother got married and began to distance himself from the rest of us. I don't know the reason for that. I somewhat think it may be a little bit of jealousy on the [part of my two brothers that] that I'm being taken care of by the government financially as well as medically. [But] I haven't seen [my youngest brother] since my father died, and [that was] about seven years [ago]. [But] I talk to him [about] once a week. [He was] not really [ever supportive]. He did his own thing. Let's put it that way.

[My wife has] been outstanding [though]. She accepted me for who I was. She didn't look at me as a person who really had lost a limb. She looked at me as a person on the inside. She's been my rock. I don't know what I'd do without her. I really don't...She had had a daughter out of wedlock, who I adopted. So our daughter is an adopted daughter for me, but realistically, she will call me her father no matter what. She views me as her biological father. I'm her father, period. She got rather upset when her grandmother said something about writing something about her stepfather, and she said no, he's not my stepfather, he's my father. She was a pleasure to have in our life. She still is. She's my little girl.

[And my wife provides] great mental support. She doesn't totally understand everything because she was busy during the war, so she really didn't understand what was going on over there. I still have a hard time discussing it with her. She knows basically what happened, but the other things that transpired over there are really hard to share with her. But she's my best friend, and she has been my rock. She was the best thing that happened to me.

I describe [my daughter's reaction to my injury as] understanding. She accepted it immediately as a child of nine years old. She understood that I couldn't do a lot of things that most fathers could do, but she still care[d] a lot about me, and [today] she worries when things happen healthcare wise. She was pretty understanding for a young girl at the time. She didn't view it as anything different other than her dad had an artificial leg, and that was about it. She just accepted me for who I was internally...[And today] we have a 15 year old grandson [through her] who I view as one of the best things that [has] happened to me as well. He's grown up with me. We were primary caregivers for him after school and before school from his kindergarten years, and he doesn't talk about the war. He's never really asked me a lot about it. He just views me as a grandpa, and I prefer him to view me as such.

My wife has [definitely taken on a care giving role]. She's had to dress my wounds when I've had surgery. I had some extensive surgery on my right buttocks where some shrapnel had caused a lot of residual damage, and they had to open it up and let it heal from inside out. She had to dress those wounds a couple of times a day. I could have never done it without her. They would have had to supply [a] home health [aide for me] due to the dressing changes that were required [if my wife didn't do it]. I'd have to say my wife [has been the most helpful to me regarding how I have been able to live with my limb loss]. She's very understanding, and she gets concerned when things aren't going right with me, and she'll intervene. I have permitted her to have open contact with my psychiatric care team, so that she is able to call them at any given time if something isn't going right. [So] she will voice her opinion to them if things aren't going right [or] if the meds aren't working. She's done that in the past. She has been strong and very supportive when I have emotional problems as well as physical problems. She worries about me. Let's put it that way. Sometimes I

think it's hard on her. I [just] feel that it's hard on her to see me going through what I'm going through and [what I have] gone through over the years. She's one who holds a lot of it inside to herself.

[I had a previous wife that I was married to for] about three years. [She was] not really [supportive]. She really wanted me to be who I wasn't. She was the one that caused me to drink the most. She wasn't supportive. I'd have to say that.

[If you were to ask me what advice I would give to the veterans of the current wars, I'd say that's a] hard question [to answer]. I have seen a number of them. I have seen their traumatic brain injuries. I have seen those men and women, and it's really hard for me emotionally. I have broken down and cried many times, when I see them. I was a Navy combat corpsman, so I naturally took on the role as a caregiver, and I find it very difficult to reach out to them, and I think they find it difficult to reach back to those who have experienced similar situations. It's almost as if they're shutting it in as well, like I did. I [held] everything [inside] for many years until 2001 [when I received] intensive psychiatric care at the veterans' hospital. I needed some meds renewed from my private psychiatrist that I had been seeing for a number of years, and they basically diagnosed me on the spot with Post Traumatic Stress Disorder, and they put me into programs and started to do some medication adjustment. So I had some rough years.

I just hope that [current veterans will] find somebody, who would be able to take care of their needs physically and emotionally and be a rock like my wife [is for me]. And I don't know how some of the wives are going to be able to handle what's happened to their spouses, or [how the wounded veterans will handle it] for that matter. I think they'll probably experience a high divorce rate. Socially, it's going to be very difficult. They've been isolated as patients by the veterans' hospital, so that [people] have very little contact with them. I don't know what the Veterans Administration's reasoning of isolating them [is], but they [isolate them], and I find that [that is] not helpful.

[I was hospitalized for five months after I was injured]. [I found] the other veterans that I was with [to be helpful]. I'd have to say that we supported each other. We were all a ward of amputees. But later in my life, I found out that I wasn't allowed time to grieve or to go through the process of being angry, all the steps that I'd say an amputee [would] have to go through, like a cancer patient. There's a certain process that a cancer patient goes through when they find out they have cancer. The same should hold true for an amputee, and I was not permitted to do that. I was put to work immediately once I hit the naval hospital. The nurses put me to work, and essentially, I carried out my function as a corpsman. I took care of my Marines on the ward. So I wasn't allowed the time to grieve, [or] get angry, [or] to even accept it. They viewed me as one who had accepted the loss of a limb, but I guess I wasn't really allowed to do that, and I didn't allow myself to do that either. I don't know how to answer [what can be done to help the returning veterans] socially. Honestly, I don't know what to say to them that would help.

Profile of Mr. Ken Lasit (Above the Knee)
(Original Interview 23 Pages)

Mr. Ken Lasit lives in the Mid-west region of the US. He was drafted into the Army in 1967 and wounded in Vietnam in 1968. He reports his current health to be poor. Mr. Lasit also reports smoking, being overweight, experiencing back pain, arthritis, stump and phantom pain, other bodily pain, depression and PTSD. Mr. Lasit is currently married and has one child. The interview was completed on July 29th, 2010. This is Ken's story.

I live in [state name], [and] I was born in 1947. I've been retired now for about a year and a half. I finally succumbed to back pains and knee pains which was caused from wearing my prosthesis for 42 years. And I'm taking some high pain pills, so now my status is unemployable, 100% disability with the VA. I've been [taking pain pills for my back] for probably about a good five or six years.

I worked as a design engineer with the Department of Transportation. I worked with them about 14 [years], and then I went to work for a consulting/engineering firm doing basically the same work. [I] worked for them for about 14, 15 years [before I] went to work for a construction company [where] I was the chief estimator/project manager.

I'm married. [I've] been married about six years. This is my fifth [marriage]. I have one daughter, and she will turn 41 [this fall]. I have one grandson. He will be 22 in August.

I am a life member of the Veterans of Foreign Wars [and] a life member of the Disabled American Veterans. I'm a life member of the American Legion, and I'm also active in the American Legion Riders. I'm also a member of the Vietnam Helicopter Crewmen's Association [and] the DUSTOFF Association which is a medical helicopter group. [I am] very active [in these organizations]. Within the American Legion here and other states, [we have] the American Legion Riders. We are a motorcycle group. We do welcome homes, sendoffs, and funerals for veterans. I ride a trike, three wheeler. I've been post commander several years for the VFW. I also was the 5th District Commander of the VFW, and I'm a past commander of the American Legion. I'm also now the Director of our post, American Legion Riders, and I'm also the area Director for the American Legion Riders, 5th District. When we do welcome homes or sendoffs, we flag our bikes up with American flags and service flags, and we ride through town or something on our way to a soldier's home and to present him with a welcome home flag. And we are very active in the communities, and a lot of that stuff is in the news. I'm also a member of the Patriot Guard [that] protect[s] the families of recent KIAs from the war on terror. We escort the bodies from the airport to the funeral homes when they come home, and then we stand guard during the funeral services. This started when a Baptist Church started protesting [at] soldiers' funeral[s]. We didn't think that was right, so we line and surround the church or the mortuary and the cemeteries while the services are going on, so the family cannot see the demonstrations and the protest from the church.

I'm using the VA, and I also have TRICARE Prime. [The care, I receive at the VA, has] gotten a lot better. I wouldn't [have said] that 10 to seven years ago [because] it was pretty pathetic. But things have changed a lot, and I really can't complain too much. There are a few things that need some more [work] as far as scheduling and that kind of stuff. But basically, I don't have any complaints about the care [or] my primary care doctor there at the VA. I think the biggest thing [that has improved the quality of the care] is getting appointments. That was always a big fiasco. You could call for an appointment or something and be put on hold for two hours, and that has improved

significantly.

I was drafted September the 25th of 1967. I was a crew chief on a UH1 helicopter. [When I entered the service, my immediate family was] my father and my mother and four sisters and one brother. I was [also] divorced [at the time]. [Receiving the draft notice] was a little scary, but I didn't have any problems with it. I wasn't really doing a lot with my life then anyway, and I kind of welcomed the experience. I wasn't bitter about it or anything.

I was sent to Vietnam [in] the [spring] of 1968. [I was there for] three months and nine days [before I was wounded]. [And] we were on a troop deployment. We did a lot of things. We did recovery of aircraft. We would go get them, and bring them back, and fix them, and then give them back to the units. We also supported the 9th Infantry at Bearcat which was about two miles north of us. We'd do a little bit of everything. Sometimes, we flew some supplies out. Sometimes, we did troop deployment and stuff. What led to my injury was; we were coming out of a cold LZ, we were empty, and we took some machinegun fire and a bullet round hit the transmission behind me and caused the airplane to become erratic, and we were going down, and there wasn't really any place to land. As the pilots tried to put it into a little opening in the jungle, I saw that we were going to hit pretty hard, and about six feet off the ground, I jumped and landed on the ground fine. The helicopter nosed into the trees, and it flipped over, and the tail rotor caught me in the left leg and severed my leg right at the knee. [The pilots] were both killed. The door gunner on the right side jumped about the same time I did, and he survived. He crawled over to me and took my belt off [and] put a tourniquet on my leg, which basically saved my life. And [then he] drug me behind some cover because we were still getting fired upon.

I wear a prosthetic leg right now, and I have worn [one] for 42 years. When I take my leg off in the evenings, I use crutches. [I] sometimes [use a wheelchair]. If we're going to go someplace that's going to require a lot of walking or standing or something like that, I will take my wheelchair.

I don't [have my car modified]. I don't need it. [I didn't have trouble learning to drive again because] it was my left leg, [so] as long as I drove an automatic transmission, I didn't have any problem.

[My physical health right now is] deteriorating rapidly. I have a lot of problems with arthritis in my back [and] in my right knee. This has been diagnosed [as stemming] from having to wear a prosthetic device for 42 years, and it's just the added pressure on my lower back and the extra work on walking with my right knee, and those are basically the biggest difficulties I have physically. Other than that, I'm getting some arthritis in other joints and stuff like that, but other than that I'm fairly good, [and I'm] fairly healthy.

I do [have phantom pains, but] not as often as I did at first. I would have the phantom pains for the first several years, three or four times a day and a lot of times at night. I did have a lot [of] difficulty sleeping at night because I would have the phantom pains. At that time, I wasn't one for taking a lot of pain pills and stuff, but a lot of [the pain and discomfort] had to do with how much I was using my leg, and how much I was walking.

I was very active [as a young man]. I rode motorcycles [and] dirt bikes. I tournament bass fished for almost 20 years. It was a lot of fun, [but] I don't do that anymore. [I] did a lot of hunting, and then I kind of quit hunting, [but] I took up trap shooting and skeet shooting. I used to deer hunt and pheasant and quail [hunt] and stuff like that, [but] for some reason, I couldn't understand it. I really

didn't enjoy it as much as I used to, and I think the reason why is I just didn't feel good about killing things anymore. So I just kind of gave that up.

[I have had skin problems on the stump of my leg]. I have had a lot of rashes, and that was back when I was pretty active, especially in the summertime in the heat. I had to be real careful. I had [a rash] one time that put me in the hospital. I got a sore on the bottom of my stump, and the sweat inside my socket caused me to get an infection which eventually caused me to go into the hospital for about four or five days. That was probably about 25 years ago. I [still have skin problems], but not as much because I'm not as active as I used to be. I'm not walking around and doing things. I used to have a lot of problems with that. A lot of it was hygiene, just taking care of [the stump, and] making sure everything was clean and stuff like that, and then putting moisturizer [on it]. I have found lately that [if] I take my leg off in the evenings [and] wash it and put a medicated moisturizing cream [on it], that help[s].

[Trying to keep my weight down is a problem] very much so. And it's basically due to [the fact that] I just can't get around, and I'm not as active as I used to [be], and it seems to be difficult to not snack on things when you're sitting around.

I have hypertension. I am taking high blood pressure medicine, and I have always had a problem with high blood pressure, and it's not been due to high cholesterol, or weight or anything like that. I just have always had a problem with hypertension, and I read an article—some medical magazine or something probably four or five years ago—[talked about] a survey [that] was done, [and] the findings were that most people that have lost a limb were very susceptible to having high blood pressure, hypertension. [I didn't have high blood pressure before I was wounded]. I was very athletic and played football in high school, basketball, baseball, and track. I was a jock.

I haven't [had any problems with Hepatitis C]. I guess I've been lucky in that sense because the doctors said I had lost over five pints of blood, and the ER doctor, after I talked to him, he'd said that he couldn't understand why—I didn't lose consciousness or anything—and he just said somebody was looking after you, or you had a hell of a will to live because he said a few more ounces of blood, and I'd have been a statistic.

Some days [my emotional health is] good, and other days [it's] not, and I think that's one of the reasons why I've been married so many times is maybe I had a chip on my shoulder or something, and [that] was hard to live with. And there were times I still had nightmares of what happened and [about] some of the things that I saw in Vietnam. I didn't realize what was wrong with me. I just thought [what I was experiencing] was just normal. I didn't know it had anything to do with Vietnam or anything that happened over there. But I think about 10 or 12 years ago, I talked with some friends that said you sound like you have PTSD. So I did go in to get evaluated at the VA, and I do have some forms of PTSD, and I do occasionally go to classes at the VA for PTSD. [But it was really a number of years before I got that diagnosis]. [I had] issues with temper and irritability, and nightmares, [but] I didn't even know what PTSD was. [But] now that I know what has been a problem in my life and hav[ing] classes that I go to and everything and talk to other people, I think I've gotten to the point where I know how to deal with it a lot better. [It helps me to] just know why I was always irritated and why I was short-tempered and everything like that. I didn't really know what was going on, so I thought that just was my nature, but now I realize what the mental problems were and stuff. Now I can face it and deal with it, and my life is a lot better.

[I never used drugs or alcohol to self medicate]. Maybe if I would, I would have felt better. I've

always told people I was a poor excuse for a German. I drank beer, but I never really liked it that much. I never really did drugs much. I did a little pot one or two times in Vietnam and a few times after I got back out of the service, but it was never anything that I was dependent on or anything like that.

Living with the loss of my limb has been a challenge, but I think I pretty much accepted the fact that I was going to go on with my life from the very beginning, but that doesn't make the challenges that I went through any easier. I think I tried to do more with my life because of the fact that I was disabled to prove to people that I wasn't disabled, that I could still keep up and do things. [But] I think it was kind of hard to bear sometimes. I know a lot of times I'd get pissed off because [I'd have to] get up in the morning and hobble around and take your shower, and you'd have to put yourself together before you can get clothes on and things like that. I think I got to the point sometimes when I said, "Why should I have to go through all this shit, you know, nobody ever cares." So, I had an attitude about it, but then [there was] nothing you can do about it. You just have to accept it, and go on. [And] I think what allowed me more than anything [to accept my limb loss and move on] was [that] I wanted to do things. I didn't want to sit around. I wanted to be active. I wanted to be with my friends and do things. So in order to do that, I had to find a way to do it, and I think I just tried to keep myself active and in as much stuff as I could do physically just to prove to them that I was still as normal a person as the next guy.

[The biggest challenge I faced the first year I came back was] being accepted, being accepted by my friends and family. Being accepted, but at the same time not wanting pity. People would try to help me and do things [for me], and that's the worst thing you can do for a disabled person is to try and baby them. It makes them feel [like] a lower form of person, and I didn't want to feel that way. I wanted to feel as normal as the next person, and I think those challenges were some of the hardest to overcome. And also accepting the fact that I just couldn't do everything that I wanted to do [was a challenge]. Being an athlete before I was injured [it] was pretty depressing that I couldn't go out and play basketball. [After I was injured], I could to a certain extent, but not like I used to. And having to accept that I wasn't the person I used to be [was hard]. That was a challenge basically. [But] I think it all had to do with attitude. I know a lot of guys that I feel that they just couldn't accept it, and they felt sorry for themselves all the time and wanted somebody to take care of them. I didn't want to be that way.

I think [whether or not wounded vets are able to make the adjustments to their injuries] has a lot to do with the life they lived before. I was raised on a farm, and I was used to hard work and discipline. I think the person that can't adjust is the person that has kind of had an easy life before, and can't accept the fact that he is disabled and just wants to lay around. It's all a matter of your mental state. I had a lot of help from family that pushed me. And another thing that helped me was just being around other veterans because we seemed to have a bond, and they seemed to understand more. [So I think it's important for wounded veterans to be able to talk to other veterans]. Absolutely! I think that's one of the things that I did not do a lot of at first because, you know, the story of the Vietnam veteran. We pretty much came home and wanted to forget about what had happened because it was an unpopular war, and we just wanted to go on with our civilian lives, so we didn't really do as much as we should, and I think one of the most important things now that I tell these young veterans is stay in touch with your buddies. That's one thing we didn't do in Vietnam. We never wrote down addresses and stuff like that so we could get in touch with each other when we got back. I tell these young guys now that they're being deployed that's very important today. It may not seem like it now, but later in life you're going to want to know a little about those guys, and how they're doing and everything. And in the last 10 to 12 years, I've really gotten involved with a lot of my veteran

friends that I had in Vietnam. [That has been an important source of support for me]. Oh, absolutely. I think it's been one of the main sources of recovery for me, and [my] feeling better about myself, and being able to get back in contact with these guys. I think a lot of that's due to the Internet. We didn't have that line of communications back in the late sixties and early seventies and stuff like that and with the Internet now, shoot you can browse [for] somebody and search, and go find people. [So I've been able to find and get in contact with guys that I served with in Vietnam]. Matter of fact, I've got a reunion in [the Mid-west] coming up in [the fall] of all of the units that served at the Long Thanh North Army airfield. I'm part of [the organization for that reunion]. Through the Internet, I was able to find the 210th Combat Aviation Battalion that had started doing that for a couple of years, and their numbers were low, and I kind of got to know some of those guys through a web page, and told them who I was, and thought that it'd be nice that maybe all of us that served on that airfield could get together. Maybe we can get 10 or 15 from each unit to be there, and make it a worthwhile reunion. So that's going to happen for the first time this year.

I think [my family was] very supportive and helpful [when I came back wounded]. I think it was as big a challenge for them as it was for me to go on with our lives. They were very supportive. I spent almost seven months in rehabilitation at the Army Hospital. My folks didn't have a lot of money, and it was difficult for them to come and visit me while I was out there, and that's one thing that I see different, with the wounded soldiers and stuff today, is programs that help bring the families out there [and] help them with expenses and stuff. [With] Vietnam, we were pretty much on our own, especially the wounded ones. You were put in the hospital, and they hurried up, tried to get you well enough [to leave], but there wasn't a lot of civil support or government support to help you out in those situations. [But] I see there are now, [and] I'm involved with the veterans' associations. We help the Wounded Warrior Project.

I love to [talk to veterans who are returning from Iraq and Afghanistan] because I think I have something to share with them that they don't maybe realize right now but will down the road. I try to tell them some of the experiences that I've had and some things to look forward to. I think at first, when you were wounded and you're in a hospital, and all your family and friends were around to support you, it was good, and it made life easier. But the time's going to come a few years down the road when those people are going to be gone, and that's when you're going to be out on your own, and you're going to have to deal with it yourself, and I think some of the guys get into suicidal situations and stuff because they've lost that support. That's why I try to tell them that it's important to stay in contact with your buddies and your veterans' organizations because they are truly there to support you because they know what you're going through because they've went through it too. I had some close friends [that also provided me with support]. I remember one time when I was in [the hospital], I was really starting to have some second thoughts about things like that and two of my best buddies that were not [in the] military drove out and spent a long weekend with me. We went out and partied and stuff like that, and I think that was the big turning point in my life.

[After I was wounded, I did wonder if I would ever date again. I didn't know if girls would be interested in me]. That was definitely on my mind. Was I going to find somebody that just didn't feel sorry for me because of the way I was and really appreciated me for who I was? [But] actually, for me, it worked out pretty good. I really never had a lot of problems in that area. I know some guys [for whom that's not the case], and here I think it depends on the severity of your disability. I think that was another thing that motivated me to do the best that I can to recover from my wounds and to recover to be as whole as I once was, and I think that was a factor. I think [my first three wives] were probably supportive, but it got to the point where I was hard to live with [because of] my attitude. I don't know. I don't know how to really explain [it]. I think I was maybe self-centered,

and [it] was all about me because I think it just went back to the fact that I was bitter. I had a chip on my shoulder although I still hid a lot of things. I still went on to try and better myself, but I think deep down, I was still bitter about what had happened to me. [And it was] probably closer to 25 years [before I received counseling]. [But my current wife is supportive]. I have an excellent wife now. I mean we actually knew each other before I went to Vietnam, and [we] had dated a couple times. She had lost her husband several years ago to cancer and had never remarried, and we kind of got back together, and I've always said if I'd have married her the first time, I probably wouldn't have went through all those marriages. [I would say that in addition to providing support, my wife is also sometimes a caregiver]. She waits on me probably more than she should. But I'm not going to tell her that. She's understanding, and when I get moody, she just leaves me alone, and I come out of it. She understands with that respect, and I think she really loves me.

To a certain point it, always irritated me when somebody would try to do something for me because they thought that I was physically impaired. I don't know if I was bitter towards them or anything, but I think after a few moments or something they understood, or I'd make a some sly remark like "I'm really not that handicapped" or I'd say something like, you know, "All you ten-toed freaks are like that".

[I think my relationship with veterans are an important part of my support mechanism]. Absolutely 100%. What fuels me to be that way, I think, is the fact that as a Vietnam veteran, I didn't experience those things early in my life when I was a young person. We were kind of looked down upon, and we had that stigma [because] we fought in the war, [and it was] the only war we ever lost. Of course, I says we lost close to 60,000 people, and the enemy lost over 600,000. You tell me who won and who lost. I think the way we were treated as Vietnam veterans [hurt us], and a lot of my friends that are Vietnam veterans have kind of gotten the fire lit, and we're not going to let what happened to us happen to [the current veterans] because it hurt. It hurt a lot, and knowing that you're putting your life out on the limb every day and knowing that nobody gives a shit anyway, nobody cares [or] supports you, is a very difficult thing to deal with. And we don't want those boys to feel that way. [So doing things like riding with the Legion, and guarding funerals of fallen service people] has made my life as a veteran feel more honorable. [And I'm active with Wounded Warriors. So I talk with wounded vets]. Basically, I just tell them that we're here, we've got your back, and we're here to support you, and [I] try and relate to them the way the things that they're going to experience that we have already experienced and trying to map out a way for them to get through life. I just hate seeing guys give up and kill themselves, and there's been a lot of that happening. They say almost as many people on the Vietnam Veterans' Memorial Wall [have committed suicide and that] there could be another wall from as many that committed suicide because they couldn't deal with things. I want to let them know that my experience, I hope my experiences can help them because truly the World War II veterans, I appreciate what they did, and they may be our finest generation, but they sure didn't show that appreciation to us. Many times I'd go into a VFW and they'd say yeah, you can sit down and have a beer, but we really don't want you to join because you're really not a veteran of a foreign war and that kind of stuff. Not all of them did, but I got that feeling from a lot of the World War II veterans that they were the boys with the big chests, and what we did wasn't as admirable as what they did, and we were below them. And I don't want these young kids that are coming back now to feel that way. [In] my opinion, once a soldier, always a soldier and we're going to be here to help you. I'm not going to be like the World War II veterans. They really did not do that much for us. The people at the gate as I landed in the United States had signs and [were] yelling slurs and stuff at us, [and] where were they [the WWII veterans]? Why weren't they there to protect us and to support us? They weren't there, and that's why it is my mission to not let this happen to those kids anymore.

Profile of Mr. Josh Greene (Above the Knee)
(Original Interview 17 Pages)

Mr. Greene lives in the Eastern region of the US. He enlisted in the US Marine Corps in 1964 and was injured in Vietnam in 1968. He reports his general health to be very good. He also reports having cancer, back pain, arthritis and suffering from PTSD in addition to experiencing phantom pain and sensation. Mr. Greene is currently married and has two children. The interview was completed on October 4th, 2010. This is Josh's story.

I was born in 1944. [My highest level of education is] two years [of] college. [I am currently] retired. I worked as [a] senior mechanical design engineer, designing a lot of equipment. It was a lot of fun. [I] spent 32 years doing it with the company then finally retired.

I was injured in February, 1968. I married August 12th of 1970 to a very lovely Italian woman from [the east coast], and then just shortly after that we had [our] first son, and then three years after that we had our second son. My first son is 39 years old, and [my] second son's 37.

I belong to the VFW Organization, the Catholic War Veterans Organization, the Disabled War Veterans Organization, and the Purple Heart Organization.

I joined the military in June of 1964. [I wasn't drafted,] I joined. It's something that had actually been, I would say, bred into me. I realized in [the] second grade, that's where I wanted to go. So my long dream throughout school was to be part of the Marine Corps, and I joined 180 days prior to graduating [from] high school which was an inactive reserve as you would call it, and it was basically allowing the Marine Corps to create an all-Connecticut platoon. By the time June came around and they finally put us all together, there was a hundred of us that were heading for Carolina. [And we stayed together as a unit]. All through boot camp and advanced training, we stayed together as a unit. After that, we all received our individual orders to [different] places.

[When I was in the first grade,] I was standing in front of the TV show, and it was talking about World War II, and they had the Marine Corps Hymn on, and I got chills down my back listening to the Marine Corps Hymn. I just recognized the fact that this was something I really want to do when I grow up, and it stuck with me all those years. I learned later on more towards middle school that I had an uncle that was in the Marine Corps. So that was interesting. He served during World War II. [Our father] abandoned us, and my mother passed away early when I was [in the] fourth grade. She had passed away, [but] they weren't supportive of the idea. I know my mother wasn't because of her brother who was wounded during World War II, but after [she died], I basically lived with her relatives [and] sisters. Towards the end in my high school years [I lived on my own though]. So, there was very little support on behalf of me going into the Marine Corps.

Before you go over, you have to list one relative that the Marine Corps can contact, and I had a younger sister, [and] I gave the Marine Corps her name as a contact. When I was injured, the Marine Corps contacted her about my injury in the field, and they kept her apprised of how I was doing throughout [that] traumatic period that I spent getting well. The other contact I made was through the VFW who called from the states to where I was stationed in an Army hospital in Japan to introduce themselves. And [they] welcome[d] me as a member of the VFW which I thought was very encouraging at the time that someone so [far away] would offer their support.

When I joined the marine Corps, I promised myself I would not get involved with a girl [because] I had planned to make 30 years or plus if I could in the Marine Corps, and I felt that no service was a place for a spouse in that, especially in the Marine Corps [because] at that time you were hardly in one place long enough [to have a relationship]. You know, two years was amazing to be in one place. So I hadn't really had anyone that I was dating that I would say goodbye to.

I'm a right AK, my leg has been removed four inches above the knee at the present. I had a wound in the shoulder that came out the back, and I had another wound in the right arm that went in above the elbow and came out below the elbow. I had shrapnel in my legs, but that was at a different time. Another time I was shot in the left arm, but [it was] a graze wound that needed no care. The shrapnel in the legs needed no care. I took care of that myself in the field. But the last time...took me out of the field. We were engaged with the North Vietnamese regulars. We were trying to push them out of a large village that they had taken over, and my company got caught in a cross fire in a rice paddy between the North Vietnamese shooting at us, and the Navy supply ships coming up the river shooting at them. So in a very short period of time, our company pretty much had been shot up. Mine was definitely not [a friendly fire accident]. It was North Vietnamese weaponry that put me where I am today.

I have an artificial leg which I wear every day. I use crutches to get around in the evening and at night. There's times where I have a cane when I need it. Other than that I do pretty good.

I have TRICARE insurance. I receive my health care at the VA. My health has been good over the years. I've had five artificial legs since '68. Actually, [I've had] six [since then]. The first one I only had for three [or] four days when I was at the Philadelphia Naval Hospital, and I couldn't wear that any longer because of the fact that they had to go back in and do surgery to fix my leg because of the improper surgery that was done initially. So [I have had] six legs. I was right at the knee at that time, and what happened was when they cut the bone, they left a jagged edge, so walking on the leg put pressure on the end of the bone which protruded through to the skin. [And they said to] me we can go in, and open you up, and file down the bone, and refit you with a similar type of leg, but we think you'd do much better if we cut you four inches above the leg from where they amputated [it originally]. And [we can] give you a different artificial limb which is a suction type device rather than a harness device. The first leg, I had, [required] putting on a shoe and lacing it up. And the portion that was on the leg [would be laced] up, and then I'd have a harness that [I] would wrap around [my] waist, and another belt that would go over your shoulder, and lace into the belt, [and then] you laced around you leg, and that would keep the leg on. Whereas the second option, they described, would be held on by suction, and [I could] put [my] leg into the prosthetic and screw in a valve and let the air out. The leg would remain on by like a suction cup. So I chose the second choice, and that's what I've had over the years. And with respect to other health problems, I've been good up until a few years before I was diagnosed with prostate cancer, and last year [I] had that removed. Matter of fact, yesterday I think it was a year since my operation, and my health is very good as I sit here and talk with you today.

I do [have phantom pain or sensation in my limb]. I take a medication for phantom pain. It's basically a drug that epileptics take, and they found it does very well in squashing that part of the brain that has or takes commands from your body. I was trying to think of the word, and I just can't imagine [it]. But there's times where you'd be sitting at the table or standing around and all of a sudden your toes cross and for a normal person you just uncross your toes, but as an amputee you have to think very hard on how to cross your toes, and it takes a long time before [you] get your toes uncrossed. I don't know if you can imagine that, but it's a real mind puzzle, to work on, but I do

have problems today with muscle spasms. Just yesterday I was laid up all day with a heating pad and cold compresses and Advil because I'd get these tremendous sensations [that] would run down the stump. It would be like somebody taking a hammer and hitting you at the end of your stump. It would really [bring] tears [to] your eyes. But that's something I've had ever since the removal of the leg. It comes and goes during the seasons. Sometimes I think it's more in the fall and winter that I have them than in the summer. So I think it might be a seasonal thing. Cold weather, or what have you, tends to bring it on more than hot weather.

My emotional health [is] good. I keep very busy. I'm a very active person. I've got a home, and I'm out there either cutting the lawn, or chopping wood, or climbing trees, or putting roofs on or remodeling the inside of the house. So with that respect, I keep very active mentally and physically, and it does me very well. I have always had problems with [PTSD though]. I realized early on that that's something that's not going to go away, and that you just need to process it mentally in a different way. There's tons of times you'd wake up at night with the sweats or with problems, and you tend to go over things 500 times in your mind about some little thing that you should have done or shouldn't have done that would have saved someone's life, or could have changed your life, or witnessed things that you wish you could have not seen. It's there, and I just tend to deal with it privately.

There [was] one time at work that [I was] sitting in a group meeting, [and] it's everybody in a round table [going] over their part of the project, and we had done a lot of, we'd been working late hours and doing a lot of work. This one particular morning, we're in there, and it came to my turn to tell where I was on the project I was working on, and I couldn't say a word. I just sat there looking at the manager, and he kept on asking me the same question. I could not answer him. [I] wanted to answer him, but [I just] could not answer him. [So] I made an appointment with the VA after that, and [I] talked to a person there. They said it was probably stressed-induced, and they put me on a medication to take care of that. Last year, I had an episode for a couple of weeks, so I talked to a doctor at an outpatient clinic who was a psychiatrist or psychologist—I'm not sure which she was—but anyhow I was talking [with her] for about a half hour, [and she] gave me a bunch of paper to go home and do [as] homework with respect to everyday occurrences. I guess I met with her three times, and then we ended those sessions because for me I felt that it wasn't helping me any, and it seemed like she felt that I didn't have a problem. So I just let it go at that.

[After sustaining my injuries, I was in the] Philadelphia Naval Hospital where I was in a ward [of] all amputees. Some triple amputees, double amputees, myself, a single amputee. [There was] comradeship; we all held there together during the long period that I had stayed there. It was when the medical team felt that I was really [ready] to go move on in my life [that] I was given retirement orders to end my stay in the military. [And] I talked to, a Navy lawyer, about me staying in the Marine Corps and giving them the benefits of what I learned and be able to teach others. Of course the lieutenant told me well, that's all fine and good. You could sign up for six years which was the maximum you could sign up at any one time, but if you couldn't hold your end up physically or mentally during that period of time, the Marine Corps can let you go, and you would lose whatever benefits you would get if you leave now. So his advice was to take the retirement and find another career. So I did exactly that. I signed the papers, and they gave me a bus ticket, and [I] took the bus to my cousin and her husband picked me up and brought me to their home. I [was] trying to get my mind in a place where I could actually fend for myself. I wasn't getting paid by the Marine Corps anymore, and I needed to get some kind of job, or go to the VA and sign up for whatever the VA could give me. So that was a good four [or] five months before I was able to work [it] out, [but] I'd sign up with the VA for benefits because their benefits were, monetarily more than what the Marine

Corps would give me if I stayed as a retired Marine. That was a very hard decision [for me to make]. It was like leaving home for the first time. [Because I had] something that was very familiar, something [that I had] want[ed] to do all [my] life, something [I] didn't want to be taken away, and it was gone in a stroke of a pen. There's not too much you can say about it, and you're out, and it was like closing your door to your home, and you couldn't come back. So it hurt. [There were] some strong feelings there in that I was being abandoned after working very hard over the four years I spent in the Marine Corps.

[I met my wife] when I was in the Naval Hospital. My younger sister gave me a call there, and she put on a bunch of the secretaries within her area that she felt I'd like to talk to. Each one of them would say hello, how are you, I hope you're feeling good, I hope you get better, and I hope you come home soon. Well, one of them was my wife, and just listening to her voice I knew that I had to meet this girl. So when I did come home, and once I did get my feet back on the ground, I said well let me call her up, and I'll take her out for dinner and thank her for talking to me on the phone and the nice card she sent to me. And we did meet, and [I took] her out to dinner, and in 1970 I married her.

[Being married and raising sons] was hard on me [because] mentally you needed to meet a requirement [in] support[ing] a wife, and then my first son came along, and that was a panic situation in that now you have to support another. Then of course a second son came, and I had to support three. And during that time [I was] just getting out of the Marine Corps, really just getting married, and trying to find yourself, and what you plan on doing the rest of your life, and I worked at different jobs during that time and eventually started school. [I] had very little money, so that was another thing that scared you. My wife made more money than I did at the time, and [we bought] our first home just a couple of months before we got married. So it was like an onrush of all these responsibilities, and not knowing if you're going to be able to take charge, and handle them as you think you would if you had a permanent job for a long time with all your arms and legs and what have you. Got worse when my third son was coming because then I lost my job at just the same time I had bought a new house, and we had just moved in, and the anxiety and panic and what have you set in. [There were] long hours at work, long hours at school, very little time with the wife and the kids. There were times I spent down at the VFW drinking, and talking to others to make me feel that I'm moving in the right direction, or I was doing something right.

I would say the most challenging aspect of my limb loss was the ability to manage each and every new prosthetic that I moved into over the years. Each one of them was totally different in character than the old one which brought in new problems that I had to resolve during those periods of time and not stop doing my every day duties.

I did not [have people in my life whom I looked to for help prior to my being injured]. Well, I should take that back. There was one cousin that I knew very well. We didn't grow up together, [but] I knew her through one or two visits when my aunt came to see my mother. So we had socialized for an hour or so, and just before I went into the Marine Corps we struck up a relationship right after she got married, and they had their first child. So, that became a strong relationship. [After the first few years of my injury] again, that particular cousin was a big contributor. I had another cousin, who was married, and her husband was a big help in that he was able to get me into working at his company, and [he] gave me a lot of support during the time that I was learning that particular career. [And] my wife of course. She's always been one that has always been supportive. She's never looked at me as an amputee. She's always looked at me as just another person which is, in itself, a lot of support. The other supporters in my life [have] been the company owner that first hired me and an engineer that worked for him. They looked at you, and how you performed, and

they mentored you. They knew I was from the service. At that particular time in the seventies, you weren't looked on too well as a Vietnam veteran. So to have these individuals actually sit and talk with you and support you in your job and help you move along [was nice]. [The company I worked at was] well-meaning [too]. Being that they gave me a position in a drafting role within their company, and the engineer at the time, even though I was going for architectural engineering [in school] he chose to mentor me in mechanical engineering and electrical engineering. Always dropping something in front of me and saying solve that, and then when I go back and say to the engineer, I'm stuck, he'd go well I suggest you pick up a book. And they never [once] said do it on your own time. If I had went down to the library, for instance, and picked up a book and brought it back to work during working hours that was fine. They'd pay me for it. They had no qualms about that, and I thought that was just the most any individuals would ever do for anyone.

[My current wife] recognizes and understands what my combat experience was in Vietnam. She's not one to sit down and ask a lot of questions. She doesn't pry. If I talk about it, she's not one that asks a lot of questions in regard to what had happened or why it happened or that sort [of thing]. We tend to have just a regular everyday man and wife relationship. What was in the past, to her, is just that, in the past. And like myself, I dwell in the past occasionally. I could say it might happen seriously, you know, maybe every couple of months. You never at any one time during the day not think about your experiences there, but she never does a lot of commenting about it. She's very supporting in the fact that anything I tend to do, she never says don't do. I have climbed large trees, and topped them, and eventually cut them down, and cut them up. I've been on roofs, and I just finished painting the roof on a ladder, and now that I'm 66, she's kind of leery about me hanging around ladders because of my age, but she just says be careful because you've only got one leg. She'll get out there and hold the ladder for me at times when there's a need for it. But if I plan on doing something, she'll never say no. It's my choice. So I think that's support in itself. Just not [vocalizing] any bad vibes on something you tend to do unless it's yelling at the grandchildren. You know you'll hear something about that... There have been a few times during the 40 years we've been married that I wished she'd been a little bit more supportive on listening to me and my anguishes, but I was dwelling over in my head because sometimes you can't think things out all by yourself, and you like to talk it out, but looking back over these many years, it's not really, it wouldn't have really made too much of a difference, I guess even talking them out.

[And my cousin] was very upset initially when all of that had happened. Her and her husband came down to New York City. They picked me up. They brought me home. They put me in their living room on a couch. They only had one bedroom flat at the time. They fed me. They basically had taken care of me as if I was one of their immediate family. They moved, and they chose to have me come along with them [because at] the time, I needed to get on my feet, and they never complained during that whole time. So I would say that's a lot of support, and I think that both, he and she, felt very proud at what I had accomplished over there [in Vietnam].

Both [of my] boys see me as Dad. They've very proud of me of being in the Marine Corps. We haven't really talked too much about my combat experience over in Vietnam. The youngest one's married and had three little ones. My oldest one is married and doesn't plan to have children. I've been writing a history of myself on a computer and putting everything of my life together on there, so that I can give both boys and their families a CD in time with their dad's history, so maybe once I'm passed on, they can read [about me and learn about things like] what my life was growing up and in the Marine Corps and after being married and having two great kids. So, at some time in the future, I hope they enjoy what I'm hoping to provide them. I think not just veterans, but everyone should sort of do that for their family because when you start looking back in history and looking back at your

grandparents, there's very little there that you can really understand of their lives, and where they came from, and where your parents came from, and why you're here. So I figured I'll start something.

[Some people have taken on the care giving role during my life]. I still have support from my cousin. Her and her husband [have] taken care of me [in the past]. [And now] we meet maybe once a month, every couple of months for breakfast. We sit and talk. She's become very good friends with wife, and they converse over the telephone a lot. They're still very supportive. I was supposed to go on a trip with her husband in August, September, cross country. I always wanted to go see the rest of the United States. And he does it a lot on his own and with her, [but] this time he invited me to go, but I ended up having an attack with my leg, and I was set back for about a week, and he went anyhow. I basically told him, don't let me upset your trip. He was going out to see one of his brothers play in a fiddling contest, so I didn't want him to miss that. But when he got back, we got together, [and] he brought me back a Marine Corps flower, and it's a donation to the Marine Corps families that have monetary problems or a loss of a dad or mom in Iraq or Afghanistan, and the monies go towards the families. So I thought that was awful nice of him.

[Who has been the most helpful to me in terms of my living with combat-related limb loss] would [be] my wife. She is very helpful with my problem. She takes good care of me. She puts out my clothes in the morning, so I won't have to get up and go to the closet to pull them out because that requires my crutches. She does different things around the house during the day and make[s] sure that I don't run into any snags with tripping over the cat, or she makes sure that the furniture is in a good place that I'm not tripping over the furniture for any reason. She's just a tremendous caregiver for no other word. She's just there to help me 24/7, and she doesn't even think about it.

[Religion hasn't played a role in my life]... Well, let's say that during Vietnam, [when] I was medevaced out, I sort of lost religion. Let's say that there is the Lord up there, and then there is the supporters of the Lord, and I'm Roman Catholic, and their membership has broken down over the years, and it's like a big black hole that you look into when you say, well I was brought up Catholic, and I believed in the Catholic faith. And now with what happened to me in Vietnam, and then the relationship with me during that period of time, and then coming home and interfacing with the church afterwards, they weren't all positive. Then later on with what the church is going through today, I find that, it seems to me that it's a business rather than a religion, and even though I believe in God, I don't believe in religion.

I would say to all those veterans that [have sustained limb loss that] they need to have a very positive attitude. Always say 'I can' rather than 'I cannot'. Always attempt something that you don't think you can accomplish, and by accomplishing it, you're going to find it motivates you into doing even more in your life.

[And social support is important]. Social activities, around a combat amputee or any veteran, is a support that is like a crutch. When things in life get to a point where [someone] just need[s] to lean on someone, they're there to give that support.

For veterans, I think when [it] come[s] down to being amputees, it's very important that the veterans realize [when] there are changes in their bodies, and that would change their prosthetics, [and] will give them problems over the years. For instance, as you grow older and your body sort of changes in height, and your support structure, your muscles or what have you change, it can lead into back problems and other problems that you wouldn't think would be associated with your amputation.

But they should be aware of these kinds of things, so that they can sit down with their caregivers and better understand what's more appropriate for them in respect to care. It's like a job. You have to really work at [it]. You have to understand [yourself], and then you have to turn around, and let others know how to help you, or what they can do to help you.

Profile of Mr. Jeff Keller (Double Below the Knee)
(Original Interview 22 Pages)

Mr. Jeff Keller lives in the Eastern region of the US. He was drafted into the Army in 1968 and was injured in Vietnam in 1969. In addition to being a double amputee, Mr. Keller also suffered a head injury. He reports his current health to be good. He also reports experiencing phantom sensations and other bodily pain. He is married and has three adult children. The interview was completed on July 29th, 2010. This is Jeff's story.

I'm married, actually this year [will be our] 42nd year [together]. I have three grown children, and I have eight grandchildren. Our oldest is my son Mike, [who] is 40, and he's married, and [he] has three children. My next one was Cheryl, and her and her husband and [her] four children live with me. And then my youngest is Susan, and she's married, and she has one child, and we all live in the same area.

[I lost part of my left leg]. My left leg is actually shorter than the right. The right one is about 10 inches long below the knee. The left one is about two inches below the knee.

I belong to the Disabled American Veterans, and I also belong to the VFW although I'm not active in them. I took early retirement in 1995. I started with the VA around '79 or '80, and then I worked with them until I retired. I [worked] as a prosthetic representative.

The only health insurance that I currently have is through the military. I have TRICARE, and it's the only health insurance that I have at this time. I have a primary caregiver that I go to. He's a private doctor on the outside that is covered by my TRICARE insurance. I do have coverage through the VA, and I do go to the VA for certain things like when I need [a] new prosthesis. I [also] get my contact lenses and glasses and hearing aids through them. [So most of the care I need related to my combat injuries comes from the VA].

I was drafted into the military in December of 1968. [At that time, my immediate family consisted of] my mother, my older brother, and my younger sister. My father passed away when I was pretty young. I was about 14 [when he died].

I was a Merchant Marine prior to going in the military. I actually had a draft deferment, [but once] we decided that we were going to get married; I decided to stop shipping out and change careers. My uncle was a captain in the Merchant Marine, and he was going to help me get into the school, and I was going to try and work my way up to captain. But when I thought about the months and months that you spend at sea, I decided to drop out. When I did that, they took my deferment away, and I was drafted...[So] I got married in October and was drafted in January.

[Once I completed training], I was shipped over to Vietnam, [and at that time, I was] Private 1st class. [I] was infantry. When I got in country, I was fairly quickly shipped out to the field. I was only there for about a month, and we were out one day doing a reconnaissance in fours where we would get on a boat with the CBs and go down the Saigon River. We got off the boat where there was a heavy shelling of body movement at night through the infrared film, and then we would scour the area, and...the area was heavily booby trapped, and I was the point man out about 50 yards in front of the company, and I found a booby trap, [and] I saw it, but it was too late, so I dove, and it basically caught the bottom half of my body. It blew my right boot completely off, and my left leg

was mangled pretty bad from the explosion...When I actually gathered my wits and sat up, I [saw that] my legs came up, and I looked, and my right foot was still in the boot, but it was only hanging by the Achilles tendon at my ankle. It was just a string from the Achilles tendon,[and] the area we were in was really heavy with water and mud. There was no place that they could bring a chopper in, so they had said that they would have to put me on the river boat and take me upriver. When they got there, one of the CBs had said [they] saw a berm further upriver, about a mile or two, that they thought was large and firm enough to land a chopper on. So that's what they did. They took me upriver a mile or two, and sure enough, there was a berm...and...they carried me through the swamp to the hill and brought in a chopper, and I was medevaced out.

My left leg was mangled up pretty bad, and I had shrapnel throughout my body. [And after my injury], my left hand was clawed, and I was not able to move it for more than a year...[Today] it still doesn't have quite 100% of the feeling, but it's fairly normal. [So for the most part], it came back amazingly. [My hearing was also damaged because of the concussion]. I was actually unable to hear very much for the first couple days, and I had severe tinnitus ever since.

So I spent [about] two or three days in the air evac hospital in Vietnam, and then they flew me to Ryukyu Islands. I actually went to the Army hospital in Okinawa, and I spent a month there. [Then] [the] Medical Center was the closest medical center to my home, but at the time it was filled to capacity, so they could send me to the next closest place. So I spent about nine months at [the] Medical Center...I didn't have any diseases or any bugs or anything like that [from Vietnam that would have impeded my recovery], and they were amazed that I healed as quickly as I did because actually they said that I wouldn't have survived the trip back to the United States. [I did have blood transfusions when I was injured], but I never developed anything from the blood that they gave me. I didn't get any diseases, and I was tested for all of it. So I didn't get Hepatitis or any problems or anything like that from it.

[I] very rarely [use assistive devices other than my prosthetics]. I have a cane, and I have some crutches, but I was never really good with the crutches, and [I] haven't really used them much. I have a number of prosthetic legs. I use a spare set because I'm so active that I have a tendency to break them and mash them up. So I always have a spare set, and in addition to that, I also have a set of legs that were made many years ago that are actually made to be worn in the water...[because I swim] just for recreation [and] exercise. But actually the legs that I have now are actually more to stand [on], you know, so that I can go into the ocean or into a lake [that has] sand. [And] I'm bilateral BK, so it really makes it a lot easier on me even in a pool. If a pool is concrete, it's kind of hard on the kneecaps.

I hunt, I fish [and] I've actually climbed up mountains with the prosthesis when I went hunting. I've gone kayaking and canoeing and bike riding and running. Because of my work at the VA, whenever they came out with a new type of prosthesis that they wanted to test and they needed to try it on a bilateral [amputee], meaning a double amputee, I was usually the one that they asked to try it first. [So] when they came out with the running legs, I was one of the first to get them. [And] when they came out with the Seattle foot, which was an energy storing foot, I was one of the first double amputees to get that. [So] a lot of times Washington would ask me to be a guinea pig because I was familiar with it and with how it should feel. [So the technology has really evolved since I was first wounded]. When I first started out, they were plastic and wood, and there was nothing except the rubber foot, [but] now the [it] is very, very evolved.

I do have an electric wheelchair. [It's] one of those little three wheel carts that I got from the VA. Basically only because sometimes I go places where we're going to be walking all day, and it would just be physically impossible for me. I'd wind up with sores on my legs from the prosthetics rubbing or whatever. So I had asked the VA to provide that with me for that reason, and they did.

[My car isn't modified]. I do have hand controls, but I do not use them. When I got out of the military, [and] I first came home, I wrote a letter to the State, and I told them that I thought that I would be able to drive a vehicle [with my prosthetics]. So I wrote to the state, and I explained my situation, and I asked whether that were possible or not, or if I had to use hand controls. [And] they [gave] me a special test. They put me on a machine and tested my reflexes and my abilities, and then after I did that, they had me go out with a trooper for a five-hour driving test. And I passed with no difficulties at all. And then actually about a year after that, I went back, and I took another test to drive a motorcycle, and I passed that. [And] I don't own one at this time, but I [still] do occasionally drive motorcycles.

[My physical health in general is] good. I [do] have some problems that are normally associated with aging. I take medication for high blood pressure and for cholesterol, and they're controlled with the medications.

I would say the blood pressure [is related to my injuries]. When I first went to [hospital], they were very concerned with the fact that I had tachycardia. I had an extremely fast heart beat that never slowed up. Even when I was at rest, I would have 120 beats a minute, and that's extremely fast. But they never seemed to want to do anything about it, [and] they weren't sure why, but I never had that prior to the amputations. And that went on until I hit 50, [and] my doctor had sent me to a cardiologist who wasn't happy with the fact that my heart rate was so quick, so he put me [on] a blood pressure medicine that would control the pressure [and] also slow the heart.

I smoked when I was in the military, and after I got out [but eventually], I started to realize that I didn't want my children to see me smoke because of the probability of them smoking was much greater if I did. So I quit smoking, and when I quit smoking, I gained about 50 pounds, [but then] eventually I lost some of the weight. I never went back to my original weight, but I dropped about 25 or 30 pounds afterwards very slowly. [But today] I'm heavier than I really should be. I'm about 190 pounds. I really should drop about 20 pounds, but I do go to the gym and work out usually two or three times a week, and I'm not a real big eater, but for some reason, I just can't seem to drop that 20 pounds.

[I do have skin problems associated with the skin on my stumps]. Over the years because I was active in many instances, I would find that I would get abrasions that were actually very similar to what we call a rug burn on the stump, and there was a number of things that I had used [to treat them]. Because of my position at work, I became familiar with a lot of that stuff. Years ago, there was a balm that we used called Ampu-Balm, and that was the first one that I used, and then years later, a company that makes Spenco insoles made a thing called second skin, and basically it's a thin layer of gel that is between almost like two pieces of Saran Wrap, and you take the Saran part on the one side and put that towards your skin and that would help the abrasion, so that it wouldn't get worse. [And that really helped me]. And as a matter of fact, now over the last two years or so, I started using them just because once in awhile I would overdo it and get an abrasion on the stump, and then it got to the point where I pretty much wear them most of the time now. I use a gel impregnated stump sock, and I do wear the woolen stump socks with the prosthesis, but I just found that by wearing the gel impregnated, it's a cotton, and it's like two layers of cotton, and then there's a

gel layer in-between it, and it's thicker, and it really prevents me from getting abrasions and sore spots. So I pretty much wear them most of the time now.

For many years, I used to get [phantom pain]. I used to get muscle spasms where my stump would actually jump. Even when wearing the prosthesis, I'd be sitting at the kitchen table, and all of a sudden, my leg would jump up and hit the underside of the table. I had really bad phantom pains for many years, but basically, what I found was it gradually diminished to the point where the only time that I really get the phantom pains now is if, for some reason, I'm startled in such a way that I maybe contract the muscle in the stump, and it must activate the nerve endings, and I get them. But as a general rule, I don't get them very much now, and I had actually worked with one of the physicians down at Wilmington using biofeedback and hypnosis to help teach some of our patients to deal [with] and to get rid of phantom pains. [And that worked]. We used biofeedback techniques with some of them, and the physician that I was working with...used hypnosis as well, and it really helped a lot of the guys with the phantom pains.

[I have other pain that I get from compensating or being active]. Depending on how active I am or what I'm doing, I may develop some pain in my knees or in my thigh or in my hip. I used to get a lot of pain in my back, and it was from the gait. I had actually talked to one of the orthopedic doctors that I worked with, and he said even though I have a fairly normal gait, and I'm a really good walker, it's still not absolutely normal. Because of the way that I do walk, it puts more strain on my lower back, and it would cause me to get muscle spasms in my back.

[Today my emotional health is good]. I'm a happy-go-lucky. I'm happy and glad to be here, and I really enjoy life. So I would say my outlook on life is about the best you can get. I'm very outgoing, and I like people, and I stay busy. I read, and I still occasionally go to school and take some classes. I just stay very busy, and even though I retired from the VA, I worked other jobs afterwards. When I first got hurt, I didn't believe that I was going to make it back because of where I was injured. I didn't think they were going to be able to get a chopper in, so when I made it, [I felt] relief. I was very happy. I was very positive [because then] I felt that I was going to make it, and once I believed that, I had a positive outlook. I actually spent some time when I was in the military hospital in Okinawa trying to help some other people that were in the hospital with me. [Some of them] had real bad mental issues, and [I] tr[ied to] cheer them up. I was very positive. I was married at the time, and actually, when I lost my legs, my wife was pregnant at the time. So I knew that I had a child on the way, and I was looking forward to coming home and being with my wife. [And then] I was at [the hospital] for more than nine months, and I had to have a revision. The closure that they did on my stumps was just to stop the bleeding, but what had happened was because it was traumatic amputations, I had very pointed bone ends that were not good to fit a prosthesis [in] to. So what they did, was they informed me that I needed to have a revision and have that fixed which I did, and that was a bad time because as soon as they put me back on the drugs I became addicted again. When I was in Okinawa, I [became] addicted to the morphine and the stuff that they were giving me, but they broke me from that before they shipped me back. [But] then when I got back here as soon as they did the operation I became re-addicted, and it was not a fun time for me. But eventually with the help of the physicians and the nurses and my wife, I was able to get beyond that. Like I say, I always felt good about [things], and I had no ill will towards either the military or the VA or my government.

I think thinking about my wife and my family really made a difference to me [as far as maintaining a positive outlook]. [I worried about what she would think of me when I came home injured]. Before I came back to this country, the Red Cross had come to me, and they said look, she may not be able

to handle this. She may leave you. And then on her end, they told her that a lot of guys come back, and they don't want to deal with their wives, and they just tell you to get out. So the first thing I did, when I got back, was I uncovered my legs, and I said, "This is what happened. Do you still want to be with me?"

She said, "Yeah, said I didn't marry you for your legs. I married you because I love you, and whatever we have to do, we'll go through it."

She stayed with me at [hospital] the whole time I was there. She was pregnant at the time, and she was as big as a house, and she used to push me around in a wheelchair because at the time my left hand was not usable, so I couldn't really push a wheelchair myself. So she used to stay at the guest house on the grounds and push me around.

And then eventually when I was transferred to the VA hospital, I was in a room with a young guy. He was a Marine who had lost both legs pretty high up above the knee, and he was bitter as all get out. I used to talk to him, and he used to always [ask] me, "Don't you think she's just staying with you because she feels sorry for you?"

I said, "No, I don't. I know how she feels." But he had a hard time accepting it, and it was weird because after we left I didn't see him for awhile, but then when I started working in prosthetics, he became one of my patients, and I actually got to see him eventually overcome his problems and have a normal life.

[I] absolutely [think that the fact that my wife was able to adjust to my new reality helped me]. 100%. She's a very strong-willed individual, and that definitely played a big part. You know, I think if she would have been otherwise, it would have drug me down, but she was very supportive and very positive. I mean it was even afterwards when I got my prosthesis, you know, she said to me what are you going to do with your life? Because I was on disability social security. I didn't have to go to work. And she said, what are you going to do and I said I don't know. And she said, well why don't you go back to school? And she was the one that initially pushed me to go back to school. So it was definitely her that made a big difference in my attitude. [My wife has absolutely been the most helpful in helping me readjust to life after my injury]. Absolutely. 100%. No doubt about it.

I think there's a lot of things that play into [why some wounded combat veterans are able to adjust to being injured, and others are not]. I was a counselor, and one of the things that I found was that sometimes it depended on how long they were in combat and what they saw and experienced, and sometimes it was a personality thing, you know, whether they had that sort of depressive kind of personality to begin with. So I think, some of it was just a continuation of their own attitudes, and in some instances, it was because of what they saw and what they experienced. Some, of the people, that I knew personally, saw some pretty harrowing things in battle, and it took a long time for them to get over that. [Fighting in war is] not an easy thing to do no matter what your own mental attitude is like, and we were [just] so young. I mean you're talking about guys that are 18, 19, 20, 21, and...some people just couldn't deal with what we had to do and what we saw. I think it was partly because of their own makeup that they brought with them before they went there, and in some instances it was not. [But] I never dwelled on my own time in Vietnam and what I saw. I mean I have memories of it, and I do think about it occasionally, but I never dwell on it. I guess the thing that over the years has affected me most is sometimes maybe a regret that I'm not able to do more of the things, physically, that I would have liked to be able to do. Just simple things like I would take my son out and teach him how to play catch, but I couldn't run to catch the ball, you know, things like that are what bothered me more. [And] when I went to work for the VA, I went to work because I thought I could make a difference and help some of the fellow veterans, [and I thought that I could

help] some of the people that needed help, [and] that I could make a difference. [And I think I did make a difference]. When I started in prosthetics, [someone came in], and [he was] probably a World War II veteran, and [he] had lost his leg above the knee through diabetes. [So] we ordered him a leg, and I had a limb made for him, and he was going to physical therapy, and he was in the early stages of it. One of the residents told the man, look, you're not going to be able to use that leg and go up and down steps. You live in a row home. You should think about selling the house, [so] the man came to me, and he was pretty upset. He said, "I don't want to sell my house, and I don't want to move. I love where I live. I'm never going to be able to walk up the steps, and they say I should make a bedroom on the first floor."

I talked to him for quite some time, and I counseled him. I said, "Look, you can do anything that you believe in. If you believe you can do something, you can. And I told him, you will learn to walk up the steps. You won't have to have an elevator or move or do anything like that."

He said, "You don't know that. You're just trying to make me feel good."

I shut my office door, and I was in a suit, but I pulled my pant legs up, and I unstrapped my leg and threw them up on the desk. He started to cry, and he said, "I guess you do know."

And I said, "I do. You will [be able to get up and down the stairs with the prosthetics]. I'll make a bet with you. We're going to bring that resident down in one month, and you're going to walk up the steps for him."

We did and a month later I called the ward, and I asked the secretary up there to send that resident down, and of course, because of my position, he couldn't say no, and he came down, and the gentleman did that. He walked up the steps, all the way up two flights and down two flights, and I talked to [the resident after that], and I said, "Look, you may be a physician, [and] you're very intelligent, but don't tell somebody that they can't do something. I know it's your inexperience, but that's not something that you tell somebody."

And there were many instances like that, where I was able to make a difference in people's lives, and the fact that I was a veteran, that I'd been in combat, that I had prosthesis myself, made such a big difference to them...[And I think it is important that wounded combat veterans be able to talk to people who've experienced similar things that they have]. I had belonged for some years to an amputee support group in this area, and then gradually, it kind of like faded away. Everybody just kind of went their own way. And I've actually been toying with the idea of re-starting an amputee support group just for that reason because it does make a difference, and it does help, and people are more likely to believe someone who's experienced it. Like my one niece is a physical therapist, and sometimes, she's come to me with a problem knowing that I've experienced it [because the things I tell her about it are] more helpful than what she could get from books or even from other professionals.

[My wife played a] tremendous [role in my ability to adapt to being injured]. For quite a few years while I was in school, she was supportive of my going to school. When I decided that it was time to get a job, and I went to work at the VA, she supported that. She's always been there for me when I had physical problems, even physical problems that were not necessarily associated with the amputation. She's always been supportive and made a big difference in my life and my children as well. My children all went into medical fields because they saw what I did and where I did it, and I talked that up to them because I had always hoped that they would go into the medical field, and again they were always supportive. Actually, when I retired, I was given a chance for early retirement, and I was debating on whether I should do that or not do that, and my wife and my three children all came to me and said look, you know, you've given 20-some years of your life to help the military people and the veterans. It's about time that you start thinking about yourself a little bit, and

they're offering you a once in a lifetime chance, and we'd like to see you do it. So all of my children and my wife all were involved in my decision to do that.

My mom was very supportive, but she she had a hard time accepting it. She didn't like to look at me without the prosthesis on when she would come over to visit. Sometimes it would be late at night or something like that, and I would pop my legs off and sit in a chair, and she never really liked looking at me that way. It always bothered her. I was still her little boy, [but] she accepted it, and she told me that it was God's will, but she didn't have to like it. So she accepted it, but she didn't do it willingly.

[I found support in other veterans too]. When I went back to school, probably half the students in that school were veterans ,and I made a lot of friends and got a lot of support from them.

[When it comes to the veterans who have combat related limb loss and are returning from Iraq and Afghanistan], I hope that they have good family ties and good family support to help them, but if they don't [have] that, they should look to other areas, to other people, to organizations, to amputee support groups, or to the VA and to the service organizations like the American Legion and the VFW. If they don't have the family support that they need, they need [to get support] from somewhere because I believe that sooner or later you need help. You need somebody to support you, and you need to find it somewhere whether it's from a local amputee support group or one of the service organizations. I never really got really big into the DAV or VFW because I got all the support I needed from my family...[And] I would like [the veterans] to be able to talk to somebody like myself because I always believed that there was nothing that I couldn't do if I set my mind to it. And they need to know that that's most of the battle. If they believe in themselves and in what they can do, they can do just about anything. There may be some limitations, but for the most part, you can pretty much do anything that you make up your mind to do.

[Concerning long term quality of life,] I think the most important thing is for them to have good health care, and to have access to medical care, [and] to take care of themselves. I think one of the reasons that I was able to do the things that I accomplish [what I did] was the fact that I did have good coverage [for] all [of] my prosthetics. And they never skimped on it. I always had the best of the best when it came to prosthesis or equipment or anything like that, and I would hope that they would have that, and that they would have good health care coverage and take care of themselves whether it's high blood pressure or cholesterol or diabetes or whatever. So the thing, that I would impress the most on them, is that they take care of themselves and make sure that they get good health care, and stay on top of that.

I think counseling is extremely important, and I think the spouses really have to be included because they are as much affected by it as the individual. I believe that my wife was just as affected by my injuries as I was, and she had as many questions and as many worries about it as I did. She was worried about how we were going to live, and who was going to take care of me, and what was going to happen with our child. So all the same kind of issues that were going through my mind were going through her mind. So I think the spouses and the families need the counseling as much as the veterans do.

I guess the only thing, that I would like to say, is that I've found over the years is that a lot of the amputees were not told or did not find out about the different things that were out there that could help them. And by things, I mean physical things: the types of prosthesis, components of prosthesis, the Spenco second skin, the gel stump socks. There are so many things out there, at this point in

time, that are helpful to an amputee, and what happens very often is they get a leg, and they go home. It winds up sitting in the closet because they got some sores that they don't know how to deal with, or they don't know how it's supposed to fit, [or] it doesn't fit right, and the prosthesis has done his job as far as fitting them, but they don't really know how it's supposed to feel. So they need help with that, and they need help with knowing the different things that are out there that could make life a little easier on them.

Profile of Mr. Steve Cohen (Below the Knee)
(Original Transcript 12 Pages)

Mr. Cohen was born May 15, 1950 and currently lives in the Midwest. He enlisted in the Army in 1967 and was injured over two years late in August 20, 1970. He has a left below the knee amputation. He reports his race as White and his overall health as poor. He also reports being overweight, back pain, stump and phantom pain, other bodily pain, depression, and PTSD. He is currently married but has never had children. The interview was completed on July 8th, 2010. This is Steve's story.

I have a small business I run. It's a sharpening business and cabinetry. [I was working at a recycling center, but] I had to resign. My injuries were just to the point where I could not continue working. [I am] married, [and I don't have any children]. [I belong to] the DAV.

I [joined the military in] September [of] 1967. [I wasn't drafted,] I joined. I wanted to join. I wanted to get away from people around this world here. I needed to be in a military [environment where there is] more structure. [I was injured in] 1970.

I've got three brothers [and at the time of my injury] my mother was still alive, and my grandparents were still alive, and [I knew] my wife, [but we weren't married at that time].

[My injury] was caused by what they call a toe popper, and it was a can of C-rations—peaches actually—it shattered the leg on up to where they had to amputate about four and a half inches below the knee [of my left leg]. And it happened when we was on patrol.

[Today] I use a cane quite a bit, and of course, [I use] the prosthesis, and it still causes a great deal of pain, messes up my back, but it's better than using crutches. I hate crutches.

[My health insurance is] just the Veterans Administration through the military because I'm retired due to disability.

The last four years [my health] really went downhill. I've got 25% lung function. I've got Type II diabetes from Agent Orange. I just don't function very well. I'm not able to do many things. [I have back pain] all the time. [I] still have the flashbacks and still have the night sweats. Phantom pains are still prevalent. Every once in awhile a leg will start drumming. [I have phantom sensation too].

There was a good bit of depression. You just try [to make it through] each day as you go along. I was doing real good with no psychotropic drugs because I'd learned to deal with [the depression], and I'd learned to deal with the pain, but when I woke up one morning, I couldn't breathe, and it went on and on and on. It just kept on going, and now I'm on Lorazepam and Percocet...I don't know what it was [that actually started it], but without the Lorazepam I don't function at all now.

[I have been diagnosed with PTSD]. [I have] nightmares [that] go along with the night sweats, and I have flashbacks during the day. There's no rhyme or reason to them. You flashback and you're there. Some last one or two seconds, [others] as much as 15 seconds. [And living with my injuries has been hard]. [You] just [try to] survive. You don't really live. You don't trust nobody. I never made any friends, so other than family I have no contact with people. I don't like people.

[After I was injured] I went through Okinawa for two weeks and then to [hospital in the US] where they did a bone block revision and then got gangrene in it, so they had to take the pylon off and clear that out and do another one. Then [they] made the prosthesis. [And] I never got any training [for how to use it]. All the training, I got, was on my own. The first 12 months you realized that you wasn't welcome back here in the United States. The anger started building higher, and it stayed with me all these years...I wouldn't want anybody to experience [what I did]. And I feel for these young men coming back. I mean they get a lot better treatment than Vietnam veterans did, but it's still second grade sometimes.

It's never been easy [for me to get around on my prosthesis] because of [my] short stump. I worked, but I've worked so many different jobs it's not even funny [because] I'd work at a job until I start abusing sick leave or whatever. Then I'd have to go to a different job because I'd come home at night, and I'd take the stump socks off, [and they were] just soaked with blood. [And] you doctor it up, and then you go back in the next day.

[I'm not much better now because] when you can't hardly breathe, you have a hard time doing much of any kind of activity. You don't have any enjoyment. There's no real joy.

The most challenging [thing associated with my limb loss over the years has been maintaining my] own personality and [trying to] not lose it and stay out of trouble by not killing somebody. That's a challenge.

[The limb loss and the PTSD are both troublesome]. I would say they're both equal[ly bothersome] because there's been times when I take the leg and throw it in the corner for a few days to let it heal up, and then work at it again. And it's not conducive to any work environment that I know of, and I don't get along well with people.

You've got to remember I was only 20 years old when I got injured. I went in the service when I was 17. I didn't have really a chance to live and understand the relationship with people except for school, and I hated school. So it's just been downhill since then as far as interpersonal relationships. I had superficial friends [in high school], but I'm an honest person, and I'm not afraid to tell you right up front in your face what I think, and they don't like that. I'm not a bashful person. I always tell you what I think.

[The first year or two after I was injured,] my older brother, a Navy Seal, he turned his back and run off from me because I wanted to show him the new leg I got. The only one I could say was truly helpful was my wife [because] she accepted it right away. [My wife has been supportive]. She'll help me any way she can. She don't really understand what it was like over there...no civilian could. She knows I had nightmares continually, and I couldn't be touched to wake up or anything like that. She's always been there for me when I need her.

[There have been times when I thought she was well-meaning but wasn't being supportive]. Well, you know, trying to get her to understand some of the combat experience was a futile effort. Civilian's mind don't wrap around what happens when you're in combat. [But] if it weren't for her, I'd be gone a long time ago. She was always very defensive of me like I was for her, and we've been pretty much loners. She has six [members] of her family left, and I have just my brothers left. We don't associate [with them though]. We don't visit [them or] nothing like that.

[My relationship with my mother after my injury was] complicated. I was what they call the black sheep of the family. I was always the wild child and always got the blame for everything my brothers did. I kind of resented that, but of course [I] loved my mother, but she was set in her ways, bless her soul. She tried to be supportive, but she just didn't know how to react to me because I've always been pretty resentful because of the way I was treated when I was younger. A lot of things [concerning my emotional health] stem from the military service as well as from childhood because we was physically abused when we was kids by our stepfather. He loved to beat on us. [And my mom] was sick all the time. Mom was a very bad asthmatic, but she kept all four boys together. I always had a lot of respect for [her because of] that...[and] I hated school, so I didn't go. The last time I went to school I missed a hundred days. So it was the service for me. [I] needed somebody I could trust. I never felt I had that anywhere at home. [So I found that in the service,] but then I lost it in Vietnam. I went over with 175 men, and only two of us come back, and I'm the only one left out of that. So you lose a lot. You lose your feelings, and it's very hard to get anything back except anger. The softer feelings I don't think they ever really come back. You try to remember them, but they're not there anymore.

[My wife was my primary care giver when I came back.] [And when] I first got home I was on crutches and everything. [And] she took care of me as far as emotionally, and she washed clothes and made food [and] asked me what I'd like to have, what I'd like to do. And that's been our relationship for a long time. I'd do the same thing for her though. She's stressed out all the time. She's agoraphobic now. The only entertainment we really have is, we'll get in the car and go for a ride around the lake. Other than that we really have no outlets. We're not social people. My Veterans Administration branded me with a bit wide A. Says I'm antisocial, and they're right of course. I like animals better than I do people [because with] an animal, you know what they're going to do. People, they turn around and stab you in the back all the time. It's normal human behavior. [So] I don't trust people. My experience with them is [that] they have more than one face. And I don't like fake. Never did. You can't be honest you might as well just leave. Actually that's what I told my brothers. I haven't had any dealings with any of them [in] probably 20 [years] now. [My wife] She's a real decent person. I'll just put it that way, and she'll help me any way that she can, but I'm very independent. If I can do it myself, I'm damn well going to do it myself. We fuss with each other every once in awhile because I try to do too much, and then I end up paying for it, and she's like, I told you so.

[I would advice veterans of the current wars] to get all the training that they can get with the prosthesis before they leave [the military care programs]. We wasn't offered that particular [care] ourselves. We was fitted, they watched us walk, and [then they] kicked us out. We was like an embarrassment. That's where all the anger started building up there. I'll tell you how they treated us. We come back from Vietnam, we hit Okinawa and you get a little bit of balance training there because you lose your balance completely once you lost a leg. [Then they] sent us on to [the states], but first they waited till after dark in Okinawa. [Then they] shipped us out. It was after dark there. They waited until the next night actually and shipped us out, so nobody could see us in the bus. So it was like [we were] being hidden...in shame, and that's our own country, our own government [doing that to us]. And the way we were treated after that by the civilians [was bad too]. I mean I've been called every name under the book—baby killer [and] all that stuff. So no I don't like people. That's the way it goes.

[I've updated my prosthesis] several times. I've had to. It's time to do it again. The prosthesis theirselves have gotten better. Some worse but mostly better. The things they're coming up with now are a little bit better as far as the stump socks and stuff like that. The limb [is] going to be

basically the same no matter what you do. [But they are making strides with the above knee prosthetics].

I have no real experience with social support, but to me I think it [is] important for somebody to recognize [the current veterans'] service like they do now instead of treating [them] like piranha[s] like they did to us]. When we come back, we was shipped in. There was no one to greet us or anything there except family. Of course [now they] really celebrate and everything when the soldiers come home, but when you was a wounded warrior in 1970, you was nothing. [So I think the current veterans] need a social group. It's very important [to have that, so] they won't turn out like me.

[I think social support could positively affect amputees' long term adjustment] because it would help them reintegrate into the civilian life again which [Vietnam veterans] never had. There was no help to really get back into it. You just had to deal with what you had to deal with, and you still had all these feelings. Both times I was over there I was heavy combat with jungle warriors, and it was in killing fields. There's no way around it, and you come back, and you still have those feelings, and it's very hard to suppress. [And you] realize that you just can't go out and take out the problem. You have to deal with it in a different way. Most people just don't realize how dangerous they are when they start ticking off a veteran from that era.

[An important thing that needs to be done is] to make sure that our government never treats another class of veterans like they did us. [I]ve had to fight ever since I got out for anything. I mean we made a lot of strides. We even got groups of our veterans that go out and greet the ones coming back now which is fantastic. [They are being welcomed back, and that] is the way it should have been [for the Vietnam veterans]. Don't make [the current veterans] an outcast like I am.

Profile of Mr. Wayne Barnet (Below the Knee)
(Original Transcript 11 Pages)

Mr. Barnet lives in the mid-Eastern region of the US. He was drafted into the Army in 1970 and injured in Vietnam in 1971. In addition to his amputation, he suffered a head injury and broken bones. He reports his current health to be very good but also reports being overweight/obese and having limb pain and limb sensations. Mr. Barnet is currently married and has three adult children. The interview was completed on September 21st, 2010. This is Wayne's story.

I was born in 1947. I have a Bachelor of Science degree [in] Business Management, [and] I [currently work].

[I am married, and] I have three [kids]. They're grown, [and they are] 36, 32, and 27.

I belong to the VFW and Disabled Veterans of America, and actually, my Army unit [has] a reunion every two years. That's the Combat Infantry Regiment.

[I entered the military in] August [of] 1970. I was drafted, [and I was injured] April 19th, 1971. [At that time] I was married, [and my immediate family consisted of] my mother, father and brother.

I've been married more than once. I was married 13 years [to my first wife]. [I was married to her before I went into the service]. [I] married [her] in April, and [I was] drafted in July. [I have been married to my current wife for] seven years.

I have a below the knee amputation on my right leg. [I also] lost sight in my right eye, and I've got various scars from the shrapnel. [I had some hearing loss]. Nothing major at that time, but it's starting to get a little bit worse. I used a wheelchair at first along with crutches, and then I went from crutches to a cane, and now, I haven't used anything for years. I've had [my current prosthesis] for about two years now. It's a newer one.

[I have health insurance through my work]. [I receive some health insurance through the VA, but] most of it, [about] 98% of it's through my work insurance.

I'm generally healthy I guess. I've had the usual diseases that people have, but other than being overweight [there's] nothing major that's wrong with me right now.

I have pain with my prosthesis. [I also have pain in] the other [leg] in the knee, [and I think that's due to all] the extra effort that goes on it. [And] I do have phantom pains. [But the pain is] not regular at all really. [I] just [get it] at certain times.

[My emotional health is okay, but] I do take antidepressant[s]. I have [been taking them] for several months now. [But it's] more for anxiety. [I've never had trouble with PTSD] that I know of. I'm not exactly sure what you would call trouble with [PTSD]. I've never had trouble in that I've [never] been treated for it. Let's put it that way.

As for experiencing limb loss, it's been a real learning experience where I've had to learn what my limitations are. Definitely do that. And many times, especially in my younger years, I overstepped

those limitations and paid the penalty for it. I've learned pretty much when it's time to say, I better stop here and not do anything else, not walk another mile or that type of thing.

Learning to adapt with a prosthesis [was] the main [challenge I faced]. [During the first twelve months of my injury], of course, I had to learn how to use crutches for one thing because of my leg, and then since I couldn't see out of one eye, the depth perception was gone. I had to adapt to that, and frankly, I had to settle down a little bit because I was one of those guys that was mad at the whole thing, and it took me awhile to just kind of accept the fact that, that's just the way it is. I think [that process] was just a time thing. My family had a lot to do with it, kind of hanging in there with me. But I think most of it is just, again, accepting what happened, and knowing there's not anything really you can do about it, just picking up and going on. I was definitely mad at the Army for putting me in that situation.

[When I was injured], I was recently married, [so I had] my wife, and my parents were very good. My dad was ex-military, so we had something in common. But they were very supportive of me, especially afterwards. Up until a point, my first wife was [supportive], and now my present wife, she's very good, and I've got a brother—both my parents are gone—but I've got a brother that's supportive [too]. And I guess my kids. They've always been real good about things and supported me a lot in my life.

[Concerning how my mother responded to my limb loss], I think she was the one that really kept me from feeling too sorry for myself. For instance, I can remember when I was in the hospital, and I was depressed about it, and upset about it, [and] mad about it. She pointed out the guy in bed next to me that lost two legs, and she said you don't have to look very far to see somebody that's worse off, and I always remember that. She was a little more of a tough nut along that line. [But she was supportive in] just the usual mother things I guess. [There were times that she wasn't as supportive as I would have liked]. Especially in the latter part of my first marriage, she wasn't very supportive. If anything, she took my side too much, and I know that doesn't sound like not being supportive—but she was not, she was, you talked about well-meaning, she was not...gosh I don't even know how to describe this to be honest with you. These are questions that nobody's ever asked me, and I don't know exactly how to answer them. I don't know. Let's pass on that one. I don't really have a good answer for that one.

[In general] my dad was very supportive. Like I said he was [a] World War II and Korea [veteran]. [He served in both,] and he had kind of been there and understood where I was coming from. So he'd listen, and we'd talk to some extent. But he was very supportive and helpful in a lot [of ways]. He was just kind of a mild-mannered guy. We got along real good.

[My brother and I] didn't live in the same city at the time I was wounded. So really [I] didn't have a whole lot of direct contact with him. But I mean, generally, he was very supportive, and none of my family were that, feel sorry for you, type thing. They were just there to give you support, and help you do what you felt like you wanted to do.

[My first wife] had to live with me, but I think that she went through the really hard part of the physical healing. So she was very supportive there for several years, and everything went along fine.

There were a few [veterans] around here [that I struck up friendships with]. I'm a member of the VFW, but I never went to the meetings or went to the hall that they have here, but I had a few friends during that time that we'd get together and talk a little bit.

[My kids] grew up with [my combat limb loss and experiences]. They just grew up with it, and even to this day, I won't say [it's] not a big deal, but it's not anything special to them. Like, you might have somebody that's not used to seeing something like [an amputation] or being around a person [who has lost a limb]. Now along that line, I'll throw something else in. One of the things I pride myself in, is that people don't know that I'm an amputee because I get along so well on my prosthesis. I do pride myself in that. Unless somebody does find out, and they tell somebody else [for the most part no one knows]. But for years at [my] work [place,] nobody knew it.

[I wouldn't say any of the people I mentioned above have taken on a care giving role]. [And] not one person come[s] to mind in particular [concerning, who has been the most helpful to me, in terms of living with combat related limb loss]. I guess it really does boil down to your family, especially through the early times. If you don't have that support from them, and not the pity, but the support, then it makes it even tougher [to adapt], very much so. But also, again, whether they were wounded or not, [it's] a good mode of support [to be able to talk with other veterans]. Where you can get together and talk. That's a good process.

[The advice I would give to current veterans, who have sustained limb loss,] I guess, [would be] one of the first things we talked about, knowing [and] accepting your limitations. Knowing when you've reached that point because it only gets worse from there. You only hurt yourself, literally hurt yourself [if you don't know your physical limitations]. And that's a younger guys' thing that it just takes them a long time to realize how important that is. I think that's the big thing, and another thing [is] not to let people do things for you that you don't necessarily need. [You] need to be on your own, and just be like a normal person as much as you can.

[The most important message, I would give regarding social support, is that] if people offer it, accept it whether it's your family or your friends or just other veterans that's been where you have been. Don't turn it away. And be able to know the difference between support and pity. Don't accept any pity at all.

[As far as advice for coping with limb loss], again, it comes back to the limitations thing. That's just always been a real big thing in my life. I guess the two major things that [have] been a big thing in my life [are] the limitations and not feeling sorry for [myself]. Now, that's a tough thing right there sometimes. We all [feel sorry for ourselves sometimes]. I do still to some extent, but you just can't let it rule your life.

[Living with a combat related limb loss is] a tough thing, but, again, you get around it a lot. We learn to get around it.

[It took me] probably at least 10 years [before I accepted my limb loss] and maybe more than that. And there was a lot of those years, I did the pity thing, you felt sorry for yourself, and then I think, it's just one of those things. All of a sudden you come to [a] realization [that it has happened, and there is nothing you can do about it], and [you just need to] get over it. [You just] learn to accept it, and go on.

Profile of Mr. Harry Farmer (Above the Knee)
(Original Transcript 13 Pages)

Mr. Harry Farmer was born May 11, 1943 and currently lives in the Midwestern part of the U.S. He was drafted into the army in 1966 and injured in January of 1968. He is a right above the knee amputee. He reports his race as White and his overall health as good. He also reports currently experiencing arthritis, stump pain, other bodily pain, and PTSD. He is currently divorced after being married for 25 years, and his ex-wife recently passed away. He has three adopted children (two from birth and one as a teenager). The interview was completed on July 11th, 2010.
This Harry's is story.

[I'm not currently employed. When I was working, I was in] social work. [I'm] divorced, [and] my ex-wife just died this past year. We were married close to 25 years. [We had kids, and] it's a little complicated. [I] have two that were adopted as babies, and then I have another boy who was on my caseload. I kind of unofficially adopted [him] when he was 16. [They are grown adults now. The youngest one is in his thirties].

I was drafted [into the military in] 1966, [and I was injured in] January of 1968. My immediate family at that time was just my father. [I didn't have any brothers or sisters].

[My amputation is a] right [leg] above [the] knee [amputation]. I've probably got about a seven or eight inch stump. Then there [are] a few other minor shrapnel wounds here and there.

I used a prosthesis for over 20 years then switched to crutches. The crutches I use on and off. But I used crutches primarily for 10 years or so. For the past five or six years, I've been doing the electric wheelchair most of the time.

I still have my general medical insurance. But generally, I just use the VA totally. I've got high blood pressure, which I keep under control. Other than that, I feel like I'm pretty much in good health.

I do have some pain problems with my stump, which is not very frequent. When it does happen, it knocks me down for a little while. I also have pain issues with the shoulders and the knee right now, [which] is giving me hassles. Today, I'm having trouble getting from my bed to the wheelchair. I'm also [use] Fentanyl patch [es], and I take Percocets on a regular basis. So that keeps it under control.

Generally, I'd say [my emotional health is] pretty good. [I suffered from PTSD, but] I'd say that was more early on. I would drink a half a bottle to a bottle of wine [just] to get to sleep at night and still be up at times wandering around. We'd call it checking the perimeter. I had a lot of dreams for a while. It took me several years to get over them. Somebody got me involved with writing about some of the stuff I've been through. After I started doing that and getting involved with the veterans' group online, most of [the PTSD symptoms] kind of [went] away. I haven't had a drink in-God-I don't even know how long it's been. [But] officially, the VA now lists me as 10% for PTSD.

I've come from a family where no matter what goes on you just get up and do what you have to do, and I think that's the kind of attitude I've had the whole time. There were some things I couldn't do, and I didn't worry about them. I did the things I could do. I did a lot of things that surprised a lot of people [when they saw] that I was actually doing them. I used to ride horseback when I was wearing

a prosthesis. [I would go] canoeing, [and I] raised two kids. I used to toss [a ball with my son] in the back yard. I had one of my dogs [that was a] heeler, [and] he would always get the ball and bring it back to me. There was a lot of adjustments to make, [but they] never really interfered with my work. In fact, most of the people I worked with didn't even know I was an amputee for many years. I never really talked about it for a long time. A lot of people never even knew I was in the military, or [that I was] wounded. But over the past five to ten years I've become a lot more open, and I'm usually wearing a tee shirt or a hat that [is a] pretty obvious marking for wounded [veteran]. I came from a very old traditional neighborhood, so there's lots of support from neighbors and friends [and] family. I never had any real problems with that other than my father. He was very supportive with me, but he had an attitude like a lot of World War II veterans that we lost Vietnam, and there was something less about what the Vietnam veterans did as compared to the World War II veterans. Whenever he started talking about it, I would leave the room. [So] we never did talk about it.

The first six months [after my injury] I was still in the hospital. It was a lot of fun [because I had] contact with [my] family, and that's actually [how] I met my wife. I had gotten a letter while I was still in 'Nam from my cousin who told me about this girl, and we started writing while I was in 'Nam. [And then] we actually met [when] I had a short leave from the hospital. When I got out of the hospital [and] finally got home, it was one of those unbelievable experiences. I can still remember driving down the hill from the airport. My dad came over to the airport to pick me up. A cousin [that] I was very close to and her in-laws got together in a big convertible, [and they came with him to pick] me up. Then that first several months it [was just about] recuperation [and] getting re-involved with family. [I] came from a large Catholic family, so I had cousins all over the place. [But] I didn't really start to do anything until maybe a year after I was home...I went back to school. I was going back to school full time and working part time.

[I have encountered some challenges associated with my limb loss over the years]. Psychologically, a lot of people ask you to explain it, and I don't think there's any way to explain it unless you've been through it. Physically, [the challenges] would be recent because [in] the house we live in it's very difficult for me to get in and out, and there's no way to build a wheelchair ramp. We went round and around with the VA about that. It's just not practical, and I can't afford to move. So I have an older model electric chair I keep in my van. I don't qualify for the amount of money that it would take [to make the house accessible]. I have my \$2000 electric wheelchair that allows me to do pretty much everything I need to do in here except to go up and down steps. So I can work in the kitchen. I do a lot of cooking, and I clean up the kitchen and dishes. I can do pretty much anything I need to with that chair.

My dad was there for anything as long as we didn't have to talk about...what actions went on in the war. The neighbors and friends from the neighborhood were all very supportive. I wasn't really close with any of them, but [I just thought of something]. One of our neighbors up the street said something once that kind of blew me away. I wish I'd have said something [back to her]. [But it was] one of those times when you wished you had said something, but you [are] just too far out of it at the point. I was walking up to go to church, and she was out doing something in her yard and [she] said "It's a good thing your mother's dead or this would have killed her." And I never could [understand why she said that]. Most of my cousins that I had grown up with were there, and [they were] supportive. [But we were] not really close. We tended to drift apart after that. I'm not totally sure why, other than the fact that my grandparents died, and they were the ones that kind of kept the family together. I've got close to 40 first cousins, and at this point, I don't see any of them except maybe at funerals.

[I also had] [my girlfriend], who ended up being my wife. She was very supportive initially, [but] that changed over time. I had one aunt and cousin. We didn't talk about it. We spent a lot of time together, and we didn't really talk about war or whatever, but we spent a lot of time together when I first got back. [But] they were killed in an automobile accident maybe a year and a half [or] two years after I got back. My wife's brother was 14 at the time, [and he] kind of grabbed onto me. We grew very close for a long period of time, and then eventually after the divorce he just cut me off cold. I'm still not understanding that at all because I still have a good relationship with my ex-mother-in-law and ex-sister-in-law.

[The last few years I had] the group I was involved with. There was a few people in there I've become extremely close to...people I've been closer to than anybody in my life so far. [I am also close to] the boy we semi-adopted. We used to sit and talk a lot about things. When the Moving Wall came to [our state] the first time, my wife couldn't find [the] time to go with me. I was afraid to go by myself, and he was the only one that would go with me. And he's probably been the closest one other than the guys from the Vietnam group. My other two kids are very supportive too, and they would do anything [to help me], but it's not something we actually ever talk about.

[My dad] was very supportive. [When it came to] the war in general [and] how things were going [in Vietnam], he was very negative. But [with] me personally, he was very positive and supportive. He kept his feelings very well hidden. I mean he lost a tremendous amount in his life. He lost three kids and his wife, but he never shows emotion. But he's always there if you need him. [What I appreciated most about his support was] just that he was always there, and he never really seemed to want anything [in return]. I guess that's the biggest thing.

At first, [my wife] was extremely supportive, [and she] was doing a lot for me. She was wanting to help almost too much at times. The thing that comes to my mind right offhand is [her] trying to help me get [the prosthesis off] and put the shoe on which could be hard at times. And [she was] always talking about wanting me to talk about things and explain to her what was going on, but I don't think she ever actually meant it. Her attitude seem[ed] to change over time. I would give her stuff to read and ask her to read [it because] it would give us a common starting point to talk about things. [But] she would never bother to read what I've given her despite the fact that she was a very big reader. And I hadn't told her the stuff I had been writing because her attitude was negative, [but] she found a copy of [my writings], and she flat out told me I was a liar. [She said] I didn't write it. I copied it out of the books and magazines, and I didn't do it. [So she was not very supportive]. Not after the first couple of years anyway.

[My cousin and I] were very close growing up. She almost lived at our house. She's the one who introduced me to my wife with the letters. She was very positive, but talking about the injuries and stuff just never happened. We just went on like normal. She was here a lot. She became my wife's best friend. [But] after the divorce, she kind of was there no longer [for me]. I haven't really talked to her or seen her other than a couple of funerals. I was helping out at a booth here in town a couple of weeks ago, and she walked by with her current husband. [She] said hello [and] kept right on walking. [She didn't] stop to say anything, [or] see how I was doing. I guess that's about it for her.

[My adopted son] probably [has] been the closest [to me]. [He has] done more for me than almost anybody else. He's living with me. He moved in with his son 10 [or] 12 years ago. He was trying to raise a kid on his own, and I was babysitting and helping a lot. We just figured it would be more simpler if they lived here, and I became Papaw to his son who died last year, which I'm still trying to get over. He's been there and he still is.

[My other children are also supportive of me.] They do anything I need them to do. Probably the best thing that they do is not treat me any different. I mean they obviously worry about me if I have to go to the hospital for something. But it's more like treating me no different than if I wasn't an amputee. I think that's probably the best thing they've done.

I belong to a military *Order of the Purple Heart*. I'm also involved with an online group of vets. It's not very official, but we've done a lot for each other. [We're] mostly all Vietnam vets. The whole group is probably around a couple hundred people, and it's an email type thing [that] we communicate [through]. And people just talk about their problems, their histor[ies] [and] what went on in 'Nam. [They talk about] what they remember, what's going on now, and what kind of problems they're having. And the people involved [are] very supportive. I understand that, I did this, you know, that happened to me too, you're not the only one. I think that's one of the biggest things. You've got people who understand what you're going through, and you can know that you're not the only one it's happened to. It's kind of like a family support group. [We're] best friends all rolled up into one. About 2001, we started having get-togethers on an annual basis, and the ones who showed up for the get-togethers tend to get a lot closer on the emails afterwards. And we're extremely close [and] supportive. One of these guys is probably the best friend I've ever had. He lives about a hundred miles from me, and when [my grand-son] died last year, he drove down here a hundred miles in a snowstorm and spent 15 minutes with me before he had to go back. I mean, it's that kind of stuff. We've had some similar problems with grandkids, and he's probably one of the best things that's happened to me.

Realistically [when it comes to] physical support and caretaking [no one really took care of me]. It would probably be the other way around. I've always tended to be the supportive one or the one who took care of people. My father ended up with Alzheimer's, and it was gradual, but it got really bad over time, and he was here until the day that he died. I mean he was afraid to go in a nursing home, or he didn't want to do that, etc., and that's one of those things that you just don't do. Nursing homes is not an option. And I know with [my adopted son, or] with any of my kids that wouldn't happen. [They wouldn't put me in a nursing home.] One of them would be taking care of me.

[The person who] probably has been most helpful has been [my] semi-adopted son. He's very good at not letting me feel sorry for myself. He had a phrase he used to use a long time ago. I was handicapped not handicapped. Treating me basically as if I was normal otherwise. He treated me as the leg wasn't a problem, etc., but if I needed something he was there for it.

[Advice, I would give to veterans who are in a similar situation to me, would be to] talk about it and write about it. It took me a long time to do that, but I have been talking [with soldiers who are serving in the current wars]. [One of them] definitely has PTSD and some other emotional problems related to [war], and he calls me periodically to talk about it. I've only met him once in my life in person, but I keep pushing him to talk and find people he can talk to close by and write about it, and I think he has been doing that.

One thing used to bother me, [but] it doesn't anymore. I've seen these guys who've lost limbs or had various handicaps, and they're going to go climb mountains. I remember this one guy in particular made special legs, so he could climb mountains, and they're writing books and doing TV shows and this and that. It was almost like they were making their handicap into a profession. I really could not figure out if you were leading a normal life how you could have time to do that. I mean I was trying to lead a normal life. I got married. I had kids. I had a job. I worked with kids in social work for 30

years. I did what I could [do] physically. If I couldn't do it, it wasn't a big deal. I used to ride horseback, canoe. We did a lot of camping with the kids. We've had dogs. I should add that the dogs have been very supportive too. They're always there for me. But I think you just have to go out and try to live your life as best you can, and let it limit you as little as possible [and] not make [your limb loss] the center of your life. I mean I can't see it that way.

And [the dogs] have always been very supportive of me. They've done research that dogs can lower your blood pressure and all this good stuff, and I think that's probably true. But even the one here that's lost [the] use of his back legs, [since] I got him he was always there next to me. If I was feeling bad, he was up laying next to me. He was always right there. When I was on crutches, he would be walking where my leg should be. He really would not ever leave my side. If I sat down, he was always there. All of [the dogs] over time have been a really big help for me personally.

Profile of Mr. Brad Hill (Above the Elbow)
(Original Transcript 24 Pages)

Mr. Brad Hill was born June 12, 1945 and currently lives in the Midwestern part of the U.S. He was commissioned into the army and injured on July 2, 1969. He is a right above the elbow amputee. He reports his race as White and his overall health as good. He also reports currently experiencing arthritis, obesity, and phantom limb sensations. He is currently married for 43 years and has no children. The interview was completed on July 29th, 2010. This is Brad's story.

[I was born in] in 1945. [I received] a bachelor's degree from State University. [I am currently retired, but when] I [was employed, I] worked for [the telephone company].

[I have been married for] 43 years today. [I don't have any children]. [And] I'm a life member of the Veterans of Foreign Wars, and I [am] also a life member of the Disabled American Veterans. [I'm not active in those organizations now, but] I was Quartermaster for the post for almost 20 years.

As of July [of this year,] I went on the golden age of Medicare, and I've got United Health Care, [which is] my supplemental now through the retirement through the telephone company. And of course [I use] the VA. I'd have to look at the paperwork, but I'm thinking [the VA awarded me at] 75 or 80% [disability].

I go to a civilian doctor through United Health Care. I have an artificial arm, and the VA changed how they do things. You usually have to see a primary care physician, who then refers you to an orthopedic person, who then sets up an appointment with a prosthetic place, so that you can have [what you need for the prosthetic]. Like in my case, I needed a strap replaced. And usually that's what I go to the VA for. [So] I met with the primary care doctor, [and] we talked about medication, and he says, "Well, you realize with your disability you can get your medication free through the VA."

I says, "Oh." [Then] he says, "Now you'll have to change a couple of different types of medication because they do things a little different."

I said, "That's not a problem. We'll try it." [And] I was taking Lipitor for cholesterol, and they switched me to Simvastatin, and I said, "Well, let's try it, and see if it works." I mean the price of medication has gone up. [And] a few years ago the telephone company decided to throw that into your family deductible. So [with United Health Care I] have to spend like \$2400 before [my] deductible before they start picking up quite a bit of the stuff. And in our case that was almost all medicine.

[So I use the VA for issues related to my limb loss and prescriptions, and I use a private physician if I get a cold or something]. [But when I lived [state name], I did not use the VA] very often. You could go to a prosthetics shop, and I think there was some [financial] abuse [at some of] the shops [because] they'd have you sign a form, and then who knows what they charged. But again, they changed [and] cracked down on that and said you had to go to a primary care physician. And [today] I still wear the original [arm that] I had in 1969, but they did make me a new arm.

One VA doctor told me, he says you know, if you've got other health insurance, you want to keep it because if you bust up your knee [for example] you could probably get in to see an orthopedic surgeon and have that taken care of through your regular doctor a lot quicker than we can at the VA.

So it may be two months at the VA before they could do something. [But] I've talked to veterans, and they seem to work pretty good out here [where I live now], so I don't know. But...basically anything [that had] to do with the prosthetic [I would go the VA for]. If I needed new straps or cables, that's what I'd use the VA for.

[I entered the military in the summer of] of 1967. I went through ROTC, so when I graduated from college I was commissioned as 2nd Lieutenant. [At that time] I had a set of parents, and I'm an only child, [but my wife] had her parents, and then she has two siblings.

I was five days short of returning [home when I was injured in Vietnam]. I made [a] mistake. We had a little Loach helicopter that [had] landed, and I had correspondence or mail that I was sending up in bags to our forward area, and there was two Red Cross ladies that were going up to entertain the troops [in the helicopter]. And I made [a] mistake. I walked to the rear of the helicopter because he had not shut [it] down [yet], and I either leaned into the rear blade or the wind caught it or whatever, but the next thing I knew, I was about 20 feet away from the chopper on the ground, and [the blade had] pretty much severed most of [my right] arm. [And] when they took me to the base hospital there, they had to take the rest of it off. They told me that at that time, it would have taken five or six specialty surgeons to try and save the arm, and even then there was no guarantee that it may have just laid at [my] right side the rest of my life.

[So I went to a field hospital, and then a hospital in Japan before I was sent to] General Hospital in [the USA].

[I didn't have any sense that I was going to make a career out of the military]. In fact, it was ironic because, well it's fortunate. I feel blessed. Of course, I made 1st Lieutenant while I was overseas during my year, and they offer you to extend if you want to make captain, [but] I declined because I [wanted to] get out and just go into the reserve. So I would have done that, but then when I got hurt and got back to the States, they allowed me to extend knowing that I was going to be retired on disability because it made a difference in the pension.

[I use a prosthetic arm and] that's basically it. [I still have the original one], and it still works. It's had quite a few straps and cables. When I went to work for the telephone company, I thought well I'm going to need a spare arm, and at the time I was having problems getting that through the VA which is...why I joined the DAV because my neighbor said join the DAV, you'll get your appointment. [So] I did, and they made me an arm, but it just never felt right. In fact, I [originally] only went to get the strap replaced, and that's when they talked me into getting the new arm. They says well it's been over 30 years. You're entitled to [a new] one. [And] I've worn it a few times. It's a lot lighter than the original arm, but the original arm just feels comfortable.

I would say [my general health is] good. I do have high cholesterol and I'm on cholesterol medication for that. I'm a little overweight. [I] should be less weight than I am. Other than that one time I had a heart murmur, but they really haven't said too much about that. [And] I don't think [my being overweight is related to the loss of my arm]. I think I've just got too big of an appetite, and [I] don't get the exercise I need.

[I've never had any skin problems with my arm]. Of course, my stump is really short. In fact, they didn't think I would be able to use an artificial arm. They thought they'd have to run a strap underneath me to support it, [but] they haven't [yet]. But it's really, really short.

[I have phantom pain]. It's still there. I just ignore it. It doesn't bother me. [I'm not taking any medicine for it], and fortunately once it healed up they've never had to do anything [like] skin grafting. [So I've] been very fortunate, and I suppose whatever bones [are] up in there I've never had a problem with, thank goodness.

I'd say [my emotional health in general is] good. [I've never had any issues related to PTSD]. [But being in Vietnam] probably [changed] my temperament. I was fortunate [that] I wasn't out in the jungles like a lot of the guys, and so I didn't have to deal with those issues. I never had to shoot at anybody. The worst thing we had probably would have been border attacks and nothing really ever real close to us that caused a problem. But...a lot of people said, even [my wife] has said I changed after I came back. So [I] probably [have] more [of a] short temperament [because of being in Vietnam], and of course, I had to learn to control my language because [over] there swearing and cussing was natural, and you had to learn to get those words out of your vocabulary [when you came back to the states]. We don't go to church, but I believe in God, and I figured there was a reason this happened. [I felt like] I just need[ed] to move forward, and I think that helped me because I think a lot of [how one adapts to being an amputee is] 90% mental. [So I feel like] if you got the right mental attitude you can go forth, and again I was fortunate compared to the others because at least I had the college degree, and it just so happened that one of my dad's big bosses [worked at the telephone company, and he fought in World War II]. He was a prisoner of war, and he says well have your son come down [for an] interview. We want his brains. [We're] not necessarily worried about a loss of [a] limb, and that's how I really ended up at the telephone company. And I had a wonderful career there. But sometimes I say well boy that was kind of a stupid, you know, five days from being back [and I get injured], but if you get sucked up in a pity party like that you're you could go down the wrong path.

I don't have an answer [as to why some soldiers are able to reintegrate themselves back into society and others aren't]. Maybe it has something to do with your faith or whatever [or] whether you believe that something was done for a reason. Fortunately, you know, I was in a better situation than probably some of [the other wounded veterans from Vietnam]. Like some guys [may have been] mechanics or something and [they] lost their hand or hands or legs. And the people I had surrounding [me probably helped me to adapt]. My wife's support and the family[support and everything]. They were right there helping me.

Probably one of the hardest things [about my having to adjust back to the civilian world with my injury] is when you're around kids because kids are very honest [as compared to] adults [who] may look and stare [but] not say much. But a kid [would] come right out and say what happened to your arm or [they would ask] why's your arm broken. We used to have a neighbor kid when I was working for the phone company, and he'd ask me every day when are you going to get your arm fixed?

[When I came home to a country that was divided about our involvement in Vietnam] I just [thought] hey, you weren't there. We were there to do our job. Our higher-ups, this is what they told us to do and that's what we did.

[The most challenging thing associated with the loss of my arm over the years has been]the frustration [I feel when I want to do something and I can't]. I'm stubborn and my wife learned that pretty quick, and I would say, no, I don't need help. I'll do it myself. And so she just went with that, but [the biggest challenge is] probably the frustration of not being able to do the things that people with two arms can do as far as fixing things or whatever. Of course I've done some amazing things

with one arm, but that second arm [would have] helped if [I was] holding a wrench or trying to do two things. There was one time I think I replaced the faucet in the kitchen or in our bathroom, [and] neither my dad [nor] my father-in-law could believe that. And in all those years that I was quartermaster at the VFW we used to have fundraisers, and I'd work the cash register, and people were amazed at how I could handle money and with just one arm. But there's things [that] I'd never tried [like] attempting to change oil on a car. [And] even hanging pictures [is] just a little more difficult [to do]. Once in awhile that'll get frustrating, and my wife's been really good about that, and her dad was always good about [helping me out]. We'd save projects for him, and when he'd come up to visit, he would be my handyman. But [then there are some things I can't do], like electrical work. We had something [that] went wrong with the fan, [and I said] I can't attempt that, so you've got to hire somebody to do it. [And] that's probably where a lot of the frustration comes in.

My dad [responded to my injuries] better than my mom. I don't think my mom ever got over it, and where [as] my dad was very supportive. When I ended up hiring in at the phone company, it's like he was in what they called equipment engineering, and I was in traffic engineering, and we actually got to work together on some projects. So that was really good, and of course my father-in-law was real supportive. [And my dad] always encouraged me to try things on my own, and then if he needed to step in to help he would, but I think that was probably the biggest thing. He says well you can try this. See what you can do and then we'll go from there...[But my mom,] I don't think she ever till the day she died, I don't think, she ever got over it.

[And my father in law was supportive too]. Like I said he was my project man, and I was like his assistant. So I'd help him with a lot of work. [And there was] that camaraderie of working together, and he would never say get away, [or] you can't do this. So he would be the same way as [my dad as] far as encouraging [me].

[My mother-in law was supportive too although] we never really talk too much about it. There was one time I got into like a little pitying [and starting saying] well if I hadn't had this helicopter [accident], and she says hey, it happened, it's done, move on. But they all seemed to accept it, and [everyone] moved on. I've never heard any of them say anything negative about it.

[I didn't] really [have friends who supported me] because a lot of us went to different colleges. The one friend we do have we ended up being godparents to their youngest son. So we were probably close from that standpoint, and of course his wife was a nurse, so I think she dealt with stuff like [amputations], so they always were good to be around.

[But even at the hospital I didn't interact] too much [with the other veterans] because I really wasn't there that long. I think I was there like for the weekend, and I wasn't on a ward [for too long]. [But the ward was good because] they put all the amputees together, [and] everybody was kind of together [in] that [we all] had similar problems. But then they moved me over into a private room, and then my folks arrived and that weekend we found a house trailer, and my wife moved over. [So] I don't even think I was in [the US hospital] a week. And while I was getting the arm made, they had me working some type of clerical position where I recorded something. And it would be like I'd maybe work a couple hours there and then I could leave. There was no training as such. No physical therapy. Of course I was right-handed, and I had to learn to be a lefty, but there was no like well we're going to show you how to do that or anything at that time. You're pretty much on your own.

[But having to switch from being right-handed to left-handed wasn't really a problem]. I was very lucky. When we were kids growing up, we used to play baseball or basketball and horse around, you know, shooting left-handed or batting left-handed, so I won't say I was completely ambidextrous, but I think doing that helped me make the switch because it never [really] presented a challenge. [But if] I rushed and didn't take my time, I looked like a doctor or a college professor signing papers.

[My wife responded well to my injury]. I mean of course everybody was shocked because they were expecting me to be home when they got the telegram that I had been injured. But she's been very supportive. She kind of learned, you know, with my attitude, that I was going to try things she'd say okay go ahead, do it yourself. [But] she's always been there.

[It was] absolutely [helpful to have people who were supportive]. You could be bitter about the whole thing if you really stop and think about it. Geez, five days from coming back and this happens. You know, it's like good Lord. But everybody just seemed to be like okay this has happened, let's move on, let's make the best of life, and that just seemed the way that we all dealt with it. There would be times especially after it first happened [when I thought] what am I going to do now because I had planned on being in the banking industry, and we were going to raise kids, and I was going to hopefully have a son and be able to teach him how to play ball. But hey, life's what it is.

[My wife has been the most important caregiver] because [we] spend all [of our] time together.

[I would tell a current wounded veteran that when it comes to developing social support that] you've got to get the right mental attitude. How you do that is up to each individual whether it's through your faith or people [or] even searching out groups that you're going to be comfortable with, and they can help you. I think that's definitely necessary. Fortunately for them I think they've got a lot of really neat programs that [and I think] some of the therapy that they [currently have available for veterans to] go through is just wonderful. But to me it still starts with the individual, and you've got to have the right attitude.

[The military may be able to do things to help veterans adapt]. I don't know [if] they [could] have a counselor that could sit down with you [but that would be good]. Because one of the things that you go through is [that] people are going to stare [at you] because you look different than most people. Little kids are going to be the most honest, and they may call you Captain Hook or whatever, [and] initially that hurts, but eventually I think you get over that. [But] if there were some type of program that they could sit down in a circle or [a] group and say okay, these are the type of things that you're going to run into, and here's how you've got to cope with some of that stuff [I think it would help].

[So] I think it would be nice to have access to somebody that has dealt with [losing a limb, so they can] answer some of the questions [that other veterans might have concerning how to get] through this.

Profile of Mr. Colin Jones (Double Below the Knee)
(Original Transcript 25 Pages)

Mr. Colin Jones was born May 15, 1951 and currently lives in the Eastern part of the U.S. He was enlisted into the army in 1969 and was injured 1971. He is a double below the knee amputee. He reports his race as White and his overall health as very good. He also reports currently having diabetes, being overweight, and phantom limb pain. He has been married since 1977 and has no children. The interview was completed on July 27, 2010.

This is Colin's story.

I was born in 1951. I went to the 10th grade, and then when I got out of the military, I took a GED and got my high school diploma. [I am presently employed]. I work for the...Highway Patrol. I am a communications supervisor. I'm married. [I have been married since] 1977. [I don't have any children].

I belong to the VFW and also to the Vietnam Veterans of America chapter here in [my hometown]. I'm the treasurer for the Vietnam Veterans of America [here where I live. So I am active with the group]. I've been the treasurer for probably close to 20 years now.

I've got state health insurance, but most of the stuff I go to the VA [for] and I get most of my health [care] through them. [Over the years the care the VA provides has] gotten a whole lot better, but years ago they were pretty bad. I know at one time I wanted to get some artificial legs, and they told me if I'd go home and lose a hundred pounds and come back, they'd see what they could do. [I felt that wasn't a good way to handle a patient, so I wouldn't go there unless I was really sick]. I mean [I had to be] real sick for my wife to take me to the VA hospital [or else]. I wouldn't go. [But in recent years] it has [gotten] a whole lot better. They assign you a primary care doctor, and now when you go [you are able to] see the same doctor, so that way [the] doctor knows what's going on with you and what kind of problems you're having. Because years ago when you saw a different doctor every time [you went in] and it was just a problem because you had to go through the whole process again. [And I would say] a lot of [the problem I had with the VA was that process of having to see a new physician every time]. I hate to say it, but I don't think they really cared about veterans. It was like hey, I've got a job here, and it's a federal job, and I'm pretty well due, and [what the veterans] used to say is without us they wouldn't have a job at a VA hospital. [But] I think they've got better doctors, they [provide better] care, and I think they really care more about the veterans now than they did years ago. [So now] I've got a primary care doctor [at the VA] that I go see every six months.

I went into the military [in] 1969. I joined. I wasn't really doing well in school, so me and my cousin decided to quit school and join the military on the buddy plan. [At the time] my parents were divorced, and I didn't live with [them]. I lived with my grandmother, and [my parents] didn't really say yea or nay [about me wanting to join]. You know, they figured what I wanted to do is what I wanted to do.

[I was sent to Vietnam in the summer] of 1970. I was 19. I was in Vietnam for approximately 10 months [before I was injured]. [We were] mostly working out in the field, and I was what you call a point man. So I started walking point probably two or three months after I got to Vietnam, and [I] was in an infantry squad, and we really went out in the field a lot and did a lot of recon and different things like that.

[When I was injured] we were [in] a place that they called the Rice Bowl, and I was walking point, and [I] was teaching a new guy to walk point because it was kind of my time to come out of the bush, and... I remember I turned around to say something to him and took another step, and I didn't see the trip wire that was across the trail, and I hit a booby trap that was set up.... When the mine went off, I went straight up in the air [and] came down and landed on my back. [I] started screaming for a medic, and I remember that they called the medevac chopper. A medevac chopper could not get to me [but] there happened to be what they called a small Loach helicopter flying in the area, and he came and got me and took me to the aid station.

[At that time my immediate family was my] brother and my mother and father. That was about it. [I wasn't in a relationship with anyone and] I lost both my legs below the knee. I'm a [double] BK amputee.

I've got a bunch [of other injuries associated with the explosion]. I've got a lot of scar tissue on my left arm. There's a lot of other scars. I've got some scars on my buttocks and also on my left hand.

[Today] I use two artificial legs. I've got the type that you put the sheath over the stump, and it's got a screw at the end, and it goes down into a cylinder in the leg, and then it goes down in and locks. But I don't use any crutches or a cane or anything, and I've also got some hand controls on my vehicle that I have. [I did use a wheelchair] for a good while, but most of the time [I was able to get around by walking] on my knees. That's how I got around [for several years]. [And] it wasn't too bad because I used these pads that football players use and stuff like that. I would put them over my knees, and that's what would kind of give me padding.

[Today] a lot of Vietnam vets have Type II Diabetes, [and] I do have that. I've [also] got high blood pressure but that's about it. And I didn't really realize I was Type II Diabetes till probably [about] eight [or] nine years ago.

[I have phantom pain]. I have a bad spell sometimes at night when I'm trying to sleep. [But] it doesn't occur a lot. [It's] usually maybe a couple of times a month, give or take a few. [I'm not surprised that the pain persists after all these years] because I've read up about [phantom pain], and they said that you'll probably have [the phantom pain] for the rest of your life. So I don't know if there's any way to ever stop from having them.

[And] sometimes when I walk a long time and stay on my legs a lot the end of my stumps will hurt pretty bad, but other than that that's about it. Sometimes [the skin on my stump will] get pretty red and stuff, but [in general I don't have too many problems with that].

The old type [of] legs that I had before was the type that you wore the belt around your waist and had a strap that connected to them and held the legs on. You wore stump socks and underneath the stump sock you had like a little sheath that you would put over the stump. That would take and absorb the moisture but years and years ago when I first got my artificial legs, they didn't have those sheaths. So what would happen was you would wear the legs and the moisture and the condensation and the rubbing would cause blisters, but nowadays that never happens anymore because [the technology has gotten better].

[I have put on weight over the years]. I probably weigh about 295, but I've noticed the last time I went and had my checkup [that] my blood sugar had gotten a little high, so I'm trying to eat a little healthier, and [I am] try[ing] to get rid of some of [my weight]. [I try] to walk as much as I can, and

[I do] different things [for exercise]. But the problem with me is [that] my job, eight hours out of the day, is sitting and talking on a radio, so you don't get much exercise doing that.

I think my emotional health is fine. I mean I've got a good attitude, and I don't let stuff get me down. I've got to the point to where [I] do not worry about stuff [I] cannot change, and the thing about it is I'm always going to be a double amputee. I cannot do anything about it. There's nothing that I can change about it. So I've accepted [it], and [I have] gone on with my life. [And it took me a while to accept it]. When I first got like this, when I was in the hospital, I could [not have] care[d] [less as to] whether I lived or died. Because when you lose your legs, you think to yourself, what good are you anymore. You've lost your legs. You're not good for anything. But then while I was in the hospital in Fort , I saw people come in there that were worse off than I was, and I thought to myself, I'm in good shape compared to some of these guys. And from then on I realized that [I was] not going to let [my limb loss] get me down. [And it helped to be in the hospital with other vets] because you see what other people are going through as well as what you're going through.

[I have never suffered from PTSD] and...[I feel that] a lot of times people blame the Vietnam War because they can't keep a job, they can't stay married, and stuff like that. But something tells me maybe they couldn't have done that before they went to the military. But they've got to blame it on something, so let's blame it on [PTSD].

I guess [whether or not you're able to adapt to traumatic limb loss is] all in how you look at things. It has to do with how you want to live your life, and if you want to be—I hate to use the word—but if you want to be a cripple and depend on people to take care of you the rest of your life then you can do that. But if you want to make something out of yourself and show [people] that you still can be a man, you can still strive, and I believe it all has to do with your mind [set].

I've been through some times that where [I didn't] care if [I] lived [or] died. I came back from Vietnam. I got hooked on [speed] and different things, but then I met my wife, and she brought me back to reality. [I] realized that there's other things out here besides stuff like [drugs]. It just made me really decide that I'm going to make something of myself, and I'm going to do what I can do, and [that I wanted to] live my life to the fullest and that's just the way it is.

I think I [did Speed] because I never wanted to go to sleep. I wanted to stay up all the time because I would have nightmares, [so] I didn't want to go to sleep. I wanted to stay up all the time. It wasn't PTSD, but I was having a few nightmares.

I guess the most challenging thing [I've had to deal with because of my limb loss is that] before I lost my legs, I loved sports, but now I can't really do sports. But I [still] do a lot of things. Like we went to Disneyworld one time. I told my wife, I said, "If I can get on the ride, I'll ride it." You know, and everything that I could get on I [rode].

I was living with my grandmother before I went to the service, and then I came back, and she was around. My mom was around, and they looked after me and stuff. I had some aunts that kind of looked after me. [But I eventually met my wife, and] I don't know what I'd do without her. She's just as great as she can be. I mean she's really supportive, and she's just the greatest there is.

[And I after I was injured I did wonder if girls would ever be interested in me]. You know, you think about stuff like that when you're lying in the hospital, and [you have] tubes running through you. All kinds of things go through your mind like that....[But] I guess you just have to kind of swallow your

pride and [hope people] will love you for what you are instead of what you used to be. And that's one thing about not having any legs [is that it] never bothered [my wife]. That was one good thing [because it's] something [that] has never bothered her at all.

[Initially it helped to be with the other wounded soldiers]. At Fort Gordon we used to race wheelchairs up and down hallways. When I was in there, we used to sit in the back and play Spades. But over the years, we just kind of lost touch with each other, and I don't even remember some of them now.

[And the veterans in my local chapter of Vietnam Veterans of America provide me with support]. We have meetings every month, and we do bingo at the VA hospital every other month, and we're all really supportive of each other. We just kind of sit around and shoot the breeze, and usually after the meetings, a bunch of us will just sit around and talk. So we all get along pretty good.

[I've got other friends that provide me with support too]. I've got friends at work that really look after me...and so [does] my boss. I mean she's really good to me and really supportive and so are the troopers. I mean they don't treat me like I'm a handicapped person; they treat me as a person, and that's what I like about that place. [And I think that is important for wounded veterans]. I don't think they want you to feel sorry for them. I think they want you to treat them as a person and look beyond their disability. I might have a few things wrong with me, but I can still do the job as well.

I've got two brothers, [but] I don't associate with [them that much]. I don't have nothing to do with them. My mother and father passed away. My wife's mother and father passed away. So technically it's just really me and [my wife] and our friends. [And my wife is] just like my rock of Gibraltar, I guess. I mean she looks after me and takes good care of me and that's good. I mean when I'm feeling bad or something, she's always good about looking after me and saying it'll be alright. Don't worry about it. So she's good like that.

[And I think that's important that you have someone in your life like that]. [But] I think a lot of vets don't have somebody like that in their life, and that might be why a lot of them are having problems. They don't have nobody that cares about them or cares for them, and I think that's the best thing you could have is somebody [that] care[s] about you. It's like we're best friends as well as husband and wife. I mean we do everything together. [And] I don't think I've ever had [the] problem [of someone trying to be too helpful] that I can remember.

[I had some problems returning to America at a time before the Americans with Disabilities Act]. I remember I applied for a job one time for the Police Department, and they wouldn't hire me because I was in a wheelchair. [And] when me and [my wife] first got married, I really didn't get out much. I kind of stayed in the car when we rode around, [so] I didn't get out too much and mingle with the people. I was just kind of standoffish then, and I just didn't feel like I was ready to face people. [That eventually changed though.] I guess I just figured out there's a whole world out there, and when I finally got a job, I started having to associate more with people, [and] that's why I started getting out more. Then when I worked for the County Sheriff's Department, I was in a car wreck, and [I] broke my hip in three places, and the doctor told me I had two choices. And I said what's that, and he said either get back on your legs or be in a wheelchair the rest of your life. I said well I'm not going to be in a wheelchair, and he said well then you've only got one choice. So they sent me to a rehab center to teach me how to walk again, and I was able to get back on the legs. I think getting back on the legs and [eventually] getting sworn in as a deputy was just one of the proudest days [of my life]. It just made me feel real good that the sheriff thought enough of me to do this for me, and I

guess from then on it just got to the point to where I really just started clicking, and [I] got better. [And I think it had something to do with the fact that I was] associating [with other people] more, and [I was] getting out. I was walking like normal people. I didn't have a cane or a crutch, so people didn't really know that I was a double amputee.

[My wife has been the one that has helped me deal with my limb loss the most]. She's been my shoulder to cry on and everything. She's been real good. She's the best, I'll tell you. [The only reason I quit using Speed was because my wife] told me that she would [only] marry me on one condition. I said, "What's that?" and [she said that it was that I quit using Speed]. So I got off of it, and I've never had any desire to ever do it anymore.

At that time [I came home from Vietnam, it] wasn't good to be a Vietnam veteran due to the way the country was [divided], and it's really great that the country is supporting the soldiers now that are coming back from Iraq and Afghanistan because you're over there fighting a war for these people. If you don't have the support at home, then it really makes you feel bad that you're over there putting your life on the line.

[I feel that my life has quality because I am able to work]. [I] have a job, and [I am] in [a] society where it's just good to be alive and have a job and really have the support of people around you.

[I'd tell returning veterans from Iraq and Afghanistan who have lost limbs that] you have to just get your mind set. If you've lost limbs, you just have to get your mind set and realize that it's not the end of the world. You can still be supportive, and you can still be in society, and you can still work, and people will support you. Don't feel sorry for yourself, and don't get down because there's always a new horizon. I know sometimes you don't want to let people do things for you, but sometimes it's good because they're not doing it because they feel sorry for you, they're doing it because they want to do it.

[I think it's important for veterans to have social support too]. I think it would be good [for] veterans that are coming back that have a limb loss to have a support group of other veterans maybe in other wars that have lost [limbs] and see how they're able to get along and realize that it's not the end of the world.

[Concerning accepting social support I would tell current veterans to] just let your mind go, and let people help you. They want to help you, and without support you're not going to be able to achieve what you want to achieve if you don't have some type of support.

Profile of Mr. Victor Mann (Above the Knee)
(Original Transcript 21 Pages)

Mr. Victor Mann was born October 16, 1950 and currently lives in the Eastern part of the U.S. He enlisted into the army in 1967 and was injured in 1970. He is a left above the knee amputee. He reports his race as White and his overall health as good. He also reports currently experiencing arthritis, being overweight, back pain, phantom limb pain, other bodily pain, depression, and PTSD. He has been married twice and is currently divorced but has a girlfriend. He has two children. The interview was conducted on July 10, 2010.
This is Victor's story.

I retired from the military back in 1970, and then I worked for a company for 23 years. [But] some of the stuff I picked up from Vietnam got [me] real, real sick, and I said life's too short. So I quit working about 14 [or] 15 years ago. [I] went on 100% disability and social security, and I retired.

[I am divorced, but I currently have a girlfriend]. I was married to my first wife for eight years. [After my first divorce, I remarried.] I was married for four years and just recently divorced about 18 months ago. [So I've been divorced twice]. [And] I don't get to see [my current girlfriend] as much as I'd like. I have two children. My daughter's 32, and my son is 34.

I belong to the 1st Calvary Division Association. The Military Order of the Purple Heart—life member. Life member of the DAV, and I have been in the American Legion for 40-some years.

I joined [the military when] I was 17. I wanted to join. [At the time of my injury] I had a brother, I had a sperm donor [my father, who wasn't much of a dad], and [I had] my grandmother who raised me. I was dating a girl before I left to go to Vietnam, and her and I met up in Hawaii right before I got hit in. We spent a week in Hawaii together.

I've got a right AK, [or an] above the knee [amputation].

[I don't use a cane or assistive devices other than the prosthesis] unless I absolutely have to. [But] in the evenings when I take my prosthetic leg off, I do use my wheelchair.

I have VA insurance. [The] VA takes care of everything for me.

[My health over the years has] been pretty good. When I first got out, I didn't have a whole lot of problems. But through the years, I picked up falciparum Malaria which is reoccurring, and I've had bouts of that six times. I fell and fractured my right hip...they had to put pins and plates in it. I still have a lot of shrapnel in me, and some shrapnel moved and infected one of my testicles, and they had to remove it. Just a little over a year ago fell, and I got a very bad staph infection. They thought they were going to have to amputate my left leg, but they saved it, thank God. [Then] I fell [and] I ran my hand through a glass and had to have two operations on my hand to fix it. And I broke an arm because I fell. But when I got real sick before I quit work, I got pneumonia, and I said that's it. How much longer have I got? And I want to enjoy it. How much longer can I walk good and everything, So I said heck with it, I'm going to retire early. So I did...[But other than that my physical health is] pretty good. I can't complain...Mental health? Now that's a different story. [I suffer from] PTSD. [At the time I said], something's wrong with me. I don't know what it is. [And] I started carrying a gun. I couldn't sleep. I couldn't do anything, and [I was] paranoid. So I went to a private

psychologist, and he says, “Victor, there’s something more wrong with you than I can take care of. You need to go to the VA.” So I started going to the VA clinic, and they eventually...diagnosed me with PTSD. [That was] fourteen years ago. [I did have symptoms of PTSD before I was diagnosed],but I didn’t know what it was. To be very honest with you, I thought PTSD was a joke. But I sat back, and after they diagnosed me, I said, “My god, this is what’s wrong with me.” I had a bad temper. I was meaner than a rat’s ass, and I have these real high points where I’m really feeling good, and then I have these low points. Certain days bother me. Seeing my old friends from Vietnam [can be hard]...My best friend in Vietnam drowned, and I remember that. Veterans’ Day doesn’t help, and it’s just certain anniversaries [that remind me of things that I have a hard time with].

I have really bad shoulders. [I have] arthritis in them from using my upper body so strong [long]—I did acupuncture and got hooked on it in China. And I come back here, and I asked them about it, and all they want to do is send you to pain clinic and give you Percocet or morphine or crap like that. So I went and paid for my own private acupuncturist.

[I have phantom sensation in my stump]. It’s more like a muscle spasm to me now. I get them every once in awhile. I take medicine for muscle spasms, and it helps which is real stupid, but when they hurt, they hurt.

[After I was injured I spent] six months in bed, [and I] couldn’t do nothing. [But] I loved the guys I was with in the hospital. I tried not to let it bother me or slow me down because I was very young when I lost my leg. I’ve parachuted with my son. I’ve done everything I can possibly do except run. I try not to let it slow me down at all. The first year home was really bad [because I was learning to] adapt [and] losing my girlfriend. [But they] paid for my education, [and] I chose a very small private college. [And] I wanted to blend in [because] Vietnam veterans back then weren’t liked, and I hid the fact that I’d been in Vietnam. I told them I lost my leg in a motorcycle accident. But later on in life I’ve done what I wanted to do. I’ve traveled all over the world. I’ve not let it slow me down. Even today I still mow my own yard. I still do as much as I can possibly do. The stigma attached to being a Vietnam veteran [has been the most challenging thing associated with my combat related limb loss over the years]. That has really bothered me more than anything. But physically, nothing really [bothers me]. [When it comes to] pain, you just suck that up and go on. [And I have to explain things to people because they say] you don’t look like you’re disabled. [But] I even have a service dog. [And they ask] what do you need a service dog for? Why do you have a service dog? You don’t look like you need a service dog. I said, “Well, you have no damn idea. She’s more than just a service dog, she’s a companion.” I don’t trust people. I have very few people I let get close to me.

My buddies from Vietnam [were very supportive]. One of the other guys in my home town lost his leg, [and] he and I were in the hospital together. We knew each other from home, but not that well, and he was always there, and another guy from my home town had served in Vietnam. He and I were always real close. [And] my first wife was kind of supportive. That’s my own fault we got divorced. My second wife, that’s a different story. I married a Chinese girl and brought her [to the States], and after she got her green card, she left.

[My grandmother] blamed herself for what happened to me. My mother died when I was three weeks old, and my grandmother raised me. I hated my father, and I ran away from home. I was going to be put in foster care, and I begged them let me go to the military. They granted my grandmother custody of me, so she could sign for me to enlist. [So] she blamed herself for what happened to me. But [I didn’t receive support from] my brother. [The situation with him is] another

story. My father [provided me with] absolutely [no support]. The only thing he liked was the little ribbons I wore. I was nothing to him before [I received the medals and ribbons for serving]. [So I] had no family support.

[And my girlfriend] couldn't handle me being hurt this bad, [so] she left [me], which was fine. She stuck with me until I got out of the hospital, but I knew it wasn't right. I could tell [something was wrong], and I'd been home maybe two or three months, and we talked. She says, "It's time." And I say, "Yeah, it is time." So nope, she wasn't supportive. She hated the Army, [and] I loved it.

[It was] very [difficult for me when I had to retire from the Army]. The Army's where I grew up, and I had 21 days left when I got hit. [But] I would have made the military a career [if I could have]. The first thing I remember when I was in the evac hospital [is that] I didn't really know how bad I was hurt, and I asked the doctor. I said, "Am I going to be able to jump again?" He looked at me and said, "Are you kidding me?" I says, "No, I want to know, can I jump again?" And, [he said], "No." I said, "Well if you can't jump there ain't no sense in being in the Army." So I took it very hard because I loved the Army. [I] loved what I did.

I lived with my brother for awhile, and I hated my father. I couldn't stand him because he used to beat the living crap out of me all the time. That's one of the reasons why I went in the Army. [So] I was living with my brother and...My brother said, "You need to come home. Dad's here." I said, "I don't have no dad. I don't want to see him. I'll just get the shit beat out of me again." So, he said, "Well if you don't come home, you just come get your shit, and get out." I said, "Okay, fine." So I went out to get my stuff, and my dad jumped on me, and my brother jumped on me. I just looked at them, and I said, "I'm not going to take this shit no more." And my father was surprised when I knocked him on his ass, and my brother jumped in on me. I just ripped him a new one because even though he's older, I'm a lot bigger. And I never had any contact with my brother the whole time I was in the military until after I got shot. He got drafted, and he took a volunteer draft to the Marine Corps. And I never got a letter from my father until maybe three weeks before I got shot. And he says in this letter, I hope you've learned something. Maybe you'll amount to something some day. My dad was a cook in the Coast Guard for four months. He couldn't hack it. He got out on a hardship, and my family did not know what I did in Vietnam. They thought I was a mechanic. That what I was trained for, but that's not what I ended up doing, and I never told them any different. But when I come home, my uncle [who] was a World War II pilot [had] seen the Pathfinder torch I wore on my sleeve. He looked at me, and he says you got to be kidding me and I says no, and I guess he ended up telling my dad. Then my dad liked me. He liked all those little fancy little colored ribbons and stuff, and he had no idea what they meant. [So my immediate family members weren't supportive of me when I returned from Vietnam]. [And I] told [my father], I said, "All you really care about is what I have on my chest. You can have the sons of bitches." The day he died and was buried, I put them all in his casket...And [once] I asked him, "Dad, why did you hate me so much? Why did you beat me so much? You never took it out on my brother." And he says, "Well, I knew you were the strong one. You could take care of yourself. Your little brother couldn't." Now does that make sense? It didn't to me. But my brother asked me at the funeral, he said, "Why don't you show any emotion?" I said, "I learned a long time ago you don't show emotion. You know, I [saw] my best friends get killed [in Vietnam]. [And I] can't show any emotion."

[My first wife's] brother was my boss, and he introduced us. He warned her I was trouble, but I

drank a lot and raised hell... When I come home, I was wild and crazy, and I drank a lot. I chased women a lot, and he warned her stay away from him. But that didn't stop me. So it didn't stop her either. But I straightened up after I got married. [I] had to [because we] had two kids.

[She was supportive, but] she tried to mother me. Like, oh, I'll do that for you. I'll do that. I said, no, you don't do that crap for me. I can do it. But...she was always there, and she did take care of me and everything, but I got real mean. Not physically mean, but [I had a] bad temper. I pushed her away. But she was pretty much supportive of me. She really was. [She would ask,] do you want something to drink? Or, [she'd say,] I'm up, do you want something? Or, I'd go out and try and do something in the yard, [and] she'd come out, [and say] I can rake the yard, or I can do this. I said, "My god o' mighty...Leave me alone." And she's always worry [that] I was going to fall because the ice and stuff up there and everything. I said, "Jesus if I fall, I fall. If I break something, I break something. It's no big deal. Just leave me alone. I mean, let me just take care of myself the best I can." But when I had surgeries or something, she was always there. She took real good care of me and everything. She really did. I ruined that one. [And I would say PTSD contributed to the divorce], but I didn't know what it was at that time. I had no idea why I was the way I was. I'd heard about PTSD, [but I thought it was] a farce. [I thought it was just] an easy way to get compensation. But I had no idea what the hell was wrong with me. I had no idea. I'd wake up many nights laying on the floor, sitting in the corner with a gun. And [I had] bad dreams.

[But my current girlfriend is supportive] very much [so]. She's great. She's fantastic. I've known her for quite awhile. I hate to say this, [but] she is [an employee] at the VA hospital. I met her there in a group session. We was friends. In passing, we'd say hello, and I had known her for awhile and stuff, and just one day, you know, out of the clear I says, you're not married, right? She says no. [And I asked] why don't we go have dinner? And when we had dinner, she [said] I shouldn't really be seeing you. I said, you're not my case manager. You're not my psychologist. You're not my psychiatrist. So we talked about it, and we get along great. She accepts what happened to me. She understands, and she knows how to deal with the PTSD...she's there for me. I'm there for her. She's very, very supportive.

[I'm still in contact with some of those who I served with]. Well, I haven't been home for awhile, but we talk on the phone periodically and everything. [So] we're close. Not like we were with me living there, but this is amazing. When I moved here, I opened the phone book. I needed a vet for my dog [and] I saw John . I knew a John . So I called him, and he's my old commanding officer in Vietnam. [I] could not believe it. We looked at each other, and he says, you look familiar, and I says so do you doc. I had a fatigue jacket on—and he says, "You in the Army?" I says, "Yeah." "You in Vietnam?" I says, "Yeah." He says, "Were you a black hat?" And I looked at him and then it hit me. I says, "My god, you're black hat six..." And then [I] come to find out my old team sergeant lived here, and he put me in touch with the guy I was with the night I got blown away. And after 30-some years, he and I made contact, and oh my god, [it was] amazing [to hear about] some of the crap I did the night I got shot. But I went on these websites and stuff and found guys that I had been with and served with, and I see them. I talk to them.

My daughter is very protective of me, especially after the divorce. She blames her mother, but I tell her it was not her mother. It was me. My son's in the military right now. He left yesterday to go back to Iraq. It's his fifth tour. [And if] something happens to me [my daughter says,] "I'll come up. I'll take care of you." I'm supposed to be having surgery here pretty soon, and I told her, I says, "No, [you don't have to come visit me, my girlfriend is] going to take care of me." [But] she's going to come anyway. I know her. She's a daddy's girl. And my son [is a] spitting image of me. I

mean we talk alike [and] act alike, [and] he's always been very supportive [of me].

I will admit my first wife took good care of me. [But] like I said, I screwed that up. [And] I met [my second wife] in China. I spent about a total of four years in China. I'd go over there as a volunteer English teacher, and that's how I met her...She [still] calls me [today], and her daughter calls me. [So my second wife was] very supportive, [but] things just didn't work out.

[But] my first wife couldn't understand [my] sleeping on the floor [or] in the corner or [my] being paranoid as hell. [She'd ask] why are you that way? [The war] was 30 years ago...you need to forget [it]. [And] that's the worst damn thing you [can] tell a Vietnam vet is to forget [it]. That's the worst thing you can do. And she said, "You have to get over it." I said, "I can't get over it." But then there were times she took good care of me.

[I also have] my dog. The VA trained her for me...she's [a] fantastic dog. She senses things. [She senses] how [my] mood is, and just a few weeks back, she stuck to me like glue. When I was laid up with my surgeries, she was there for me to get me things, and I have to go someplace she'd pull my wheelchair for me. That's just one of the things she does. And she can open and close the doors for me. I don't go anywhere without her, [and it] pisses me off when you go someplace, [and people ask,] "What do you need a dog for? Why is that dog in here?" Just a couple weeks back at CiCi's pizza, her and I went in, and [there was an] old couple [there, and one of them] said that she was allergic to dogs and asked me to leave. And I said, "I don't have to leave here." She said, "Why do you have a service dog?" And I said, "I'm disabled." She said, "You don't look disabled." I says, "Well I just don't show it. Mine is very well hidden." And she got real snotty and nasty, and I told [my dog] to snarl, and I thought [the] lady was going to piss her pants [because] she's intimidating. She almost weighs a hundred pounds, [and] she's a huge Boxer. She's tall and big-boned, [and] if I fall down, she's right there to help me up. She protects my back.

[There has] not really [been a single person or group of people that have been the most helpful to me since I was injured]. [I spent] almost a year in hospital, [and] I never once [saw] a damn shrink. You know, you're getting your ass...shot at one minute. The next minute you're laying on the ground almost dead, and a week later, you're in hospital expecting to be normal? [So] they didn't give us any help there. I hate to admit this, [but] I attempted suicide once, and the doctor that took care of me really helped me to accept what happened.

[When it comes to advice for veterans of the current wars,] it's just like I tell my son, "Okay," I said, "if anything happens to you son, the Army will take care of you. Okay. Don't let them mess over you." You know, the VA is one of these people that if you don't ask, you don't get. You know, it's just like when I first found out about these new, what they call sea legs, I was sitting outside of the prosthetics place trying to get a new leg, and I seen this guy, and I asked him what the hell kind of leg is that, and he told me what it was, a computerized leg. So I walk in to the amputee clinic to see about getting a new leg. Even my prosthetic guy that builds my legs was in there, and they said well what kind of leg do you want, and I says, I don't know, I just seen a sea leg. I never heard anything about, but that's what I want, and my prosthetics guy just got the biggest grin on his face. The lady looked at me, and she says, "How did you find out about this?"

I says, "I just talked to the guy in the hallway. "He's got one." I said I've never seen it, and he told me how good it was, and I says, "That's what I want."

Well, later on my prosthetic guy told me, he says, "We can't tell you about the new stuff. You have to find it out on your own." And I told my son, ask all the damn questions you can ask. I says, you

know, anything happens, like my son, he was real close to an IED when it went off, and it flipped his Humvee over, and he said his ears still ring and bad headaches and stuff, and I said well get it on your medical record son. I said that's one of the big things right now is that, I don't know what they call, some kind of brain injury. I says, you know, and he was real, real close to it when it went off, and but you have to ask a lot of questions, and you have to do it yourself, but you need help. You know, it sucks doing it by yourself. You know, your wife, your friends, your whatever. I never confided in anybody because I come home and tried to make a big joke of it like it was no big deal, and to this day I still think that I hide it. But, you know, they're taking better care of the guys now I think than they were, and thank God for that, but they have to ask about all these new things they're coming out with and everything. If you need help, if you can't deal with it, ask for help. Go see a doctor. Don't be afraid. Back, when I come back home, it was a big, you know, you don't go see a doctor, you don't go see a shrink. If you got a problem, go see a shrink. That's the best I can say. You know, accept help and look for it if you need it. Ask a lot of questions.

[And when it comes to social support] if you need somebody find them. Talk more. Me, like I said, I've hid it and hid it and hid it, and that was the worst thing I could have done, and just, you know, if you're having problems, find somebody to help you and confide in people and trust them. I don't know. Me, I should have done a lot [of] things different. I know that.

Profile of Mr. Tim Allen (Above the Elbow)
(Original Transcript 22 Pages)

Mr. Tim Allen lives in the Southern region of the US. He was drafted into the army in 1968 and was injured in Vietnam in 1969. In addition to his amputation, he suffered a head injury and other broken bones. He reports his current health to be fair. Mr. Allen also reports back pain, arthritis, residual limb pain, phantom limb pain, phantom limb sensations, other bodily pain, depression and PTSD. Mr. Allen is married and has three adult children. The interview was completed on July 27th, 2010. This is Tim's story.

I was born September 17th, 1948. I have a master's degree in history. I retired from the VA because of health reasons in 1999, but I went back to work as a part-time therapist [working with individuals who have] PTSD. I just retired from that [position] two weeks ago, so I'm not working at all. [But] I still do presentations and so on with universities and other organizations. So the best way to put it [is that] I work periodically. I belong to the 101st Airborne Division Association, Vietnam Veterans of America and Disabled American Veterans.

I'm married. [This] is my first and my second [wife]. My wife and I divorced after seven years, [then we] remarried within a year, and [now we] have been married for [a total of] 40 years. [We have three kids]. I have a 38 year-old son, a 30 year-old son, and a 25 year-old son.

[My experiences in Vietnam] had a lot to do with [our relationship hardships]. I had a lot of what we now know as symptoms of Post Traumatic Stress Disorder, but [the symptoms] were being called Post-Vietnam Syndrome in the 1970s. [I] had a lot of anger problems, and drinking problems, and a variety of symptoms of Post Traumatic Stress Disorder [like] nightmares and so on. [But] I actually was one of the lucky ones that got into counseling in the 1970s, and [I was able to] put my life back together and [save] my marriage.

I was inducted [or drafted in] July of 1968. I was injured in the battle for Hamburger Hill [in] 1969, and it was my first day of my seventh month [in] Vietnam.

I was not married at that time, although my wife and I were friends, and she wrote to me [while I was] there. My immediate family was my brothers and sisters and parents. ???...had remarried, and my mother was not married at that time (I don't think). She later remarried, but my father had [already] remarried. So I had my mother living in [one] area [of the state] and my father and stepmother were living in [another area]. I had a number of half-brothers and half-sisters and step-sisters, but all equaling four brothers and three sisters. We all consider ourselves [to be] brothers and sisters even though our families were split up a bit.

I lost my hand traumatically on a blast from a rocket-propelled grenade. They tried to save my arm, but there was really bad wounds at the shoulders, so the second amputation was cleaning up the first one from the field, and then they amputated my arm and shoulder with [a] shoulder disarticulation. I lost a lot of hearing in my right ear, and now as I'm aging, I'm losing some in my left ear, so it's becoming a problem.

What happened was, I was hit directly by a rocket-propelled grenade which blew up the right side of my body, and I lost my lower orbital rim, and I got head injuries. [I] lost part of the right side of my face, and I had a sucking chest wound. I lost part of my right lung, and I had wounds to almost all the

vital organs on the right side—liver, kidney—the list is pretty long. I did not receive any wounds to the legs or my left side of my body. We were in a firefight, and I was leaning out from a tree laying on my stomach, firing a weapon. So the blast hit me on the upper right side of my body.

I have a prosthesis. It's very difficult to use because of the weight, and because what's left of the clavicle, [or] the area on my right side—I keep trying to say shoulder but I don't have a shoulder—that whole area was broken badly, and I don't have any movement. I have very little ability to move that side of my body, and the prosthesis requires some movement which I've never had. And the other thing is I have a lot of pain in that side, and wearing the prosthesis makes it worse. The third part of that answer is I had so many other wounds—I lost a lot of teeth and so on, [I had] a lot of shrapnel in the mouth, —so I was in the hospital a long time. During that time, I became adept at using one hand, so when I would wear the prosthesis, it was actually a hindrance to me rather than a help. So for all those reasons, I haven't used it much. There was a time when I was young, that I was concerned about my looks and about the vanity part of being a young person [with an amputation]. I would have liked to have filled out a shirt a little better or not been asked a lot of questions that I would have liked to have had something and tried to use it more, but it was just too painful. So in my youth, I did [even] want to use it. It was mainly a cosmetic thing, [but] it was [also] not useful to me functionally.

I have VA health insurance. I mean, I'm 100% service connected. I have access to health insurance, but I don't trust the VA, so I don't report it. I'm assuming this is all confidential, [so] I'll speak frankly. I don't trust the VA. I have trouble getting care, and I [worry] that if I have to have serious health care, they'll use up all my insurance, and I'll get dumped. So I don't report it to the VA. [But] there are certain services that the VA has that I've found to be very useful. And I think the doctors are actually better than the private sector, and I've had better luck with some services, and they seem to be available. Other services in the VA, I can't seem to even get an appointment, so I will use a private [provider]. So I use both, probably 50/50. I try to use the VA, but I have a lot of trouble getting appointments.

There's always been problems [with my health over the years]. The first few years, the pain was very, very high, and I took a lot of naps. I was tired a lot. I was in the hospital for about a year straight and then in and out for a year, and then periodically [I] had some hospitalizations. I was weak, [but] I built my body back up. I got wounded in 1969, [and] by 1976-77, I was actually playing sports again even though it caused me pain. I had been an athlete when I was young, so I was back playing softball and basketball and doing better, and that's when I finished graduate school. [I] went to work fulltime, so I was doing better then. And through the seventies and eighties, [I had] pain problems, but I pushed myself through them, and I was able to get through them. I'd say in my mid to late forties, I began to have the same kind of pain [that] I had in the early years which eventually led me to take a 20 year retirement from the VA. I've had a lot of trouble in recent years with circulation problems in my legs. I don't know if [that has] anything to do with [my family history, because] my father had them, and all through my family [members] have [had] circulation problems. It might be a hereditary thing. I don't think it has anything to do with my wounds. I have a lot of problems with my facial wounds. I lost my right sinus, and my nose was smashed, so they had to kind of put it all back together, and I have a lot of trouble with [that]. My face gets all red, and there's no sinus to drain and so on. It can be really uncomfortable. I know when I usually tell people that I have these bad wounds, [and] one of my big problems is [a] sinus problem, they think it's kind of strange. I [also] had a lot of trouble with my right eye. They were able to save my right eye, [but] the orbital rim again was gone, so they had to do surgery to build up that bottom of my eye to keep the eye structure around it. A lot of cornea abrasions.

As far as health problems go, I forgot to mention that after the wounding when I was in the hospital in Japan, I had a cardiac arrest and central nervous system seizure, and I went into a coma for about less than a day. It's hard to give a health history. It's been pretty dramatic. Let me put it that way.

[I have] a lot [of phantom pain and sensation].

When my body was more youthful and I was able to exercise quite a bit, there would be a certain point where I would go too far, and I would be in a lot of pain. But I kind of pushed myself, and I got myself up to a fairly good level of operating between [the] ages [of] 23 and 45. So there was about a 20-year period in there when I did pretty well. But I always had problems with phantom pain and stump sensations and pain. And [that pain] is significant now.

I've never forgotten the incidence of being wounded and being in combat. [They] are still very vivid in my mind. If I was to tell you the story, it would be like it was like yesterday, but it almost seems like another person went through it. That's the kind of distance I have from it now, but I know it was me. I had a lot of problems coming to terms with what happened to my body. I'd been an athlete and a surfer, and I [suffered] multiple losses. I was injured emotionally by the experience, and [I] had a lot of anger about. [But] eventually through counseling, I was able to understand that I was being angry with the wrong people, and [I came] to terms with what was underneath the anger—which was a lot of sadness about all my losses. And over the years, I've had incidences. During the period of 20 years when I was working as a PTSD therapist and administrator, I was busy. I was concerned with other people, I was raising a family, [and] I was in decent health. Let's just say, I was never in good health but decent health enough to work fulltime and raise a family. And during that period of time, I would say I had periods where I would get depressed—usually [around] the anniversary of my wounding and [the] battle [that I fought in]. [But] in the last 10 years [or so], I've [been] having more health problems. I've had periods where I have more symptoms of PTSD, more nightmares, more intrusive thoughts, and sadness about the experience. [So] I actually went into therapy again, and that's helped a lot.

The first 12 months [after I was injured] I felt blessed. I felt that I had survived the unsurvivable. I was in a deep spiritual space, [but] it seemed like as I started healing, I started getting angry and moving away from [the spiritual place], and [I became more] angry about getting drafted and the injustice of the war. I had a lot of problems in that area and counseling really helped me. But the first 12 months, [I was just] grateful [to have] surviv[ed], and [I was] thankful to my family that came to my side, both in Japan and at the Hospital. I don't ever recall waking up without a family member in the room with me. So that was the first 12 months.

All through my life, I've had people ask me questions and some more sensitive or less sensitive than others. And being in the position I was in which is a leadership position in PTSD care, I did a lot of interviews and a lot of advocacy [work] for vets. So I felt really useful, and I was interviewed [on] national television. [I was] featured on some national television shows like PBS and ABC, and I traveled [too]. [I] went to Russia and helped their Afghanistan vets, oddly enough, in the 1980s. [I] helped them set up a PTSD program. So I was busy, and I was feeling useful, and I didn't get lost in myself as much as I did when I was not as active. I was focused on others. [But] there would be times where—again, it would usually be an anniversary period where I would get real low. [I would] have to fight my way through depression and sadness about what had happened to me. And my wife helped me a lot through that, and occasionally I would go get counseling. So those 20 years were the best years. About three years ago, I was having some trouble with circulation, and the doctor made

an error, and I almost lost my right leg. I was in the hospital for three weeks, and it was a very painful surgery to save my leg. My wife said my life was in jeopardy, but they didn't tell me that at the time. But it triggered a lot of memories of what had happened over 30 years earlier, and triggered some fears about my health. So it was a profound experience, and again, I went back into counseling and worked on those fears about my health. I thought I had everything pretty much in perspective, but I felt [that there was] unfairness [surrounding] the incident, [and that] caused me to have to go back inside [of myself]. What's really helpful with that has been meditation and prayer and counseling and support from my family. So it's been the last few years [that] have been a bit of a challenge again. [Now] I'm doing much better, but I feel like I'm still on a process. I'm also at an age now where a number of my friends, who are Vietnam veterans, are dying of cancers related to Agent Orange, which has kind of raised that back up in my mind. And I think a lot of people start thinking more about mortality when they get into their sixties and seventies, especially those of us that have been real close to it. So it becomes a concern. But I would say I'm definitely doing better than I was three years ago. [I am] much better. And again I went to work helping others. When I'm doing that, I don't even think about my own issues. [When I'm] helping others, [whether it's] family or other veterans, [as long as I'm] doing something active, it takes me out of thinking about my own issues and thinking about a more broader issue, and it's good for me.

Pain [has been the most challenging thing associated with my limb loss over the years]. [The] physical pain [I feel] can get [really] bad. In fact, they're treating me with pain medicine now which I avoided for a long time, but [I] had to finally succumb to [it], and over the years the pain [has] just [been] so bad sometimes. About 10 years ago, I had to be hospitalized [because] it was so bad. [And] now I have to take pain medication which I avoided for many years. And I'm not happy about it, but it's where things are. Without it, I'm not able to function.

[There have been people in my life that I've found to be supportive]. I can start off with the initial support [that] came in combat from [the] medics and my friends who worked to keep me alive and gave me hope that I could make it even though I was hurt badly. And then the medical people that took care of me, especially initially that kept my spirits up when I was so down. I was in the hospital in Japan for six weeks. I had so many problems there including going into a coma that I was there six weeks. My mother came over [to visit me]. She got there about five days after I did, and [she] stayed with me the whole time. And my father came over for a couple of weeks as well, and they were extremely supportive, and [they] gave me the support I needed to get over the hump and survive. [Then] when I got to [the states], [my] sister [who is] closest to me in age, she moved into [the] nurse's quarters initially. One of the nurses lent her a room, and she was in the hospital every day. Then she got an apartment by the hospital and came there every day while I was in there. I'd say initially my father, my mother, a sister and my wife, (who was a friend at the time), [have] been extremely attentive to what's going on with me, and other than the period of time where I pushed [my wife] away, [she] has been incredibly supportive and helpful. [She is always] standing behind me, and [she] helped me do the kinds of things I wanted to do. I would say that my other brothers and sisters and aunts and uncles [also gave me] tremendous support. I had people often visiting me in the hospital, [and] I noticed [that] when I was hospitalized a number of the soldiers had no one so my family would visit them as well.

[So my family provided a big support network], and [that] still exists. Some of them have passed away from old age, and I've lost a few friends that were Vietnam vet friends. [They] died of cancer in the last 10 years, but I still have an incredibly good support system with my wife. [She] is a social worker, but she's got a degree in nursing. A lot of my wounds were still open when we were first together, and she took care of them [she ended up going to nursing school and becoming a nurse].

But she [later became] a social worker, and she works with military families. She has a job where she can be with me if need be, and she will take time off to take me into a hospital, or if I'm having any physical problems, she'll be here for me. And my three sons [are helpful too]. When I was in recovery from the leg surgery, I was in bed for about two months at home, and I always had somebody with me at all times. So I have been blessed, and I really think it's valuable, and I really think a lot of my survival and my ability to do the things I've done including getting through school [has to do with that family support]. My wife—I had to learn how to write left handed—my wife was the only one that could seem to decipher my handwriting. I couldn't even decipher it. She was able to, and she would type all my notes for me after I came back from school, so I always had typed notes to look at. She typed all my papers. I could type before, but it was a challenge to learn one handed and especially on old typewriters, you know, shifting and so on was always tough. I know I wouldn't have gone through school without her, and then once I was through school, she went to school. So, I had tremendous family support. I had a really good full life, and [I] intend to have more [life to live]. I had my first grandchild seven months ago, and it's given me a whole new lift. [And] I had tremendous family support.

I can remember when [my mother] first walked in the room when I was laying in bed, and I was all bandaged [up], and my arm [was] in a cast, and I was in traction. And I remember her gasping when she saw my feet because I had jungle rot on my feet from the jungle, and she seemed like a typical mom. I'm laying there, but I was still big. I hadn't lost the weight yet. So I was almost 200 pounds, and I was all tanned and did not look unhealthy other than obviously [the] bandages all over me, but I remember her reaction to my feet was oh, my god, you haven't taken care of your feet. My feet were all full of sores and so on, and I remember her being very comforting. I was in tremendous pain, and to distract [myself], I asked her to tell me stories about her youth, and she told me long stories about her childhood and so on to keep me distracted. We prayed a lot together, and she [was] just tremendously supportive and thoughtful, and [she was] there all the time. [And] I can't think of any time that [my mother was well meaning but provided support that just wasn't what I needed at the time]. She seemed to be able to pull back when she needed to. I can remember when I was first coming home on leave from the hospital, [and] I couldn't sleep, and she'd be real gentle and say things like as long as you're just resting you'll be alright. She'd be comforting, and there was a period when I started to break away and go off on my own that she worried a lot, and I could tell that she was worried. She didn't say don't do it, but she worried that I wouldn't be able to take care of myself, but she gave me that space. She was a remarkable woman. She's passed away now, but she was very helpful. It just seemed like she was always there when I needed to sort anything out. I really have no adult memories having to do with my wounds where I could pull up on even a memory of her not being what I needed. I just have no memory of that.

My father was a World War II hero and an officer in the military when I was a little boy. He was captured by the Japanese in World War II on the Bataan Death March in the Philippines and was a POW for three years. Despite that, he remained [a] very staunch patriot or maybe because of it. [He] was even a recruiter, [and he] recruited my older brother into the military. My brother went to Vietnam, and he came home alright. My wife really thinks and I have to agree because we've talked about this, that both my parents supported me going in [to] the military. After I quit school, I worked fulltime, but I was a little loosey-goosey or whatever. I grew my hair long—this is the sixties—and [I] played guitar, and [I] had periods where I didn't work, and [I was] just messing around. [So my dad] didn't think I was going anywhere, and he thought the military would be good for me and so did my mother. And they didn't push me to go in [to] the military, but they both [thought it would be good]. When I initially got drafted, I didn't appear, so I got some letters that [were] a little firmer from the military and the FBI because I wasn't showing up for a couple of the inductions, and [my

parents] were both unhappy at that, and [they] felt that I should go in the military. [So] we did not agree on the military. They thought the military would make a man out of me and all that kind of stuff. Well, it did. It made me a sad man. The fact that [my dad] survived [being a P.O.W.]—which is essentially the unsurvivable—the kinds of things he survived in the military [made me] always feel like even when I was in Vietnam, even though I didn't want to be there, [that] I would fight hard, and I was a good soldier. I always felt like in some ways I was living up to my father, but I saw him as an extremely strong person, and I felt like if my dad can do this I can do it, and it got me through a lot of tough situations in the war and afterwards. I just felt like, he could do this [so] I can do this. This is my blood. This is my heritage, and my brother made it through Vietnam. But I just happened to be unlucky enough to be in the worst battle of 1969 and get hurt. [But my dad was] a role model on my whole life of strength. He was not happy at all when my wife and I broke up, and he felt it was my responsibility to straighten that all out, and he and I didn't talk for a number of months because I was angry with him. [But] I later came to realize that he was right.

[My sister and I] were very close growing up. We were less than two years apart in age, and [she was] younger, so we had a tendency to date each other's friends, and we kind of laugh about it. So we were very close growing up, and when I was in Vietnam, she and my wife, who of course was just a friend at that time, kept [up a] correspondence with me. My father was a manager of a grocery store, [and he] sent me a lot of food, and my sister and my wife sent me a lot of cookies and a lot of things like that. So [they were] very supportive, and like I said, my mother was really frightened to come to Japan, and my sister pushed her and supported her and got her there. She was very concerned and really worried about making that kind of trip, and though she wanted to be by me, she was fearful that she couldn't hold up to it. And my sister gave her the kind of support that got her there. And when she was there, she did fine. When I was in the hospital, [my sister] was a confidant, and she advocated for me. She watched over me. Taking care of me gave her a focus too, and she used it to help me. She probably, even more so than my mother, had trouble when I decided that I was going to move away from where we lived and live on my own. She was very concerned that I would not be able to take care of myself. So it was hard for her. [And it got] to the point when I decided to marry [my wife,] I didn't even tell my mother or my sister because I didn't want them to talk me out of it. [Because] at that point, [they had] become so locked into taking care of me that it was hard for them to step back and just let me fail or struggle on my own. I really wanted to be independent, and it wasn't like we were fighting about it or anything. [So] I just stepped out and did it. [And when I came back married, they were] really supportive. I'm sure that probably inside [they thought], whoa, but they knew [my wife], and [they] liked her, and [they] knew that she had the same kind of caretaker part to her. [But] a lot of [her] family and friends were really worried and [asked her why] she was getting into [a relationship] with [a] seriously wounded person who could die young, but she wanted to do it anyway. So there was a lot of concern on both ends when we first got together, but when we did so well out of the gate that all kind of [went away]. In fact, when we broke up, most everybody that we knew tried to help us get back together.

[My wife's] always told me that she has a lot of pride in me, and she's not a supporter of war, and none of our boys ever went in the military. In fact, both my sister and my wife were war protesters. Yet they took care of soldiers in the hospital. They wouldn't just take care of me. They would go down the line, and stop in, and see all the other soldiers, and give them attention, and [the soldiers] liked it. Two good looking young ladies [were] coming by, and we're all in the hospital, we'd all been in war, we'd been away from women for a long time. [So] they were helpful, and they were bringing magazines, chatting with people, giving attention to soldiers that didn't have anybody that was there with them. So her attitude towards me has been to push me to get by my fears about I can't do this. If I have those kinds of fears, she tries to help me figure out a way to do it, and [if] there are

things that are just difficult for me to do, [she will help in a subtle way]. Like in a restaurant—I'm a vegetarian now, but I [used to eat] meat—she would cut the meat for me very quietly and not make a big deal out of it. Like sometimes, if I went into a restaurant and I asked the waitress to cut up the meat, they'd make a huge deal out of it and draw attention [to it]. [But] all I was trying to do was just be like everybody else, and [my wife] really helped me [to] just be like everyone else as well as I could be. She always told me that she thought I was handsome despite the injuries and the scars. She even told me that when she came in the room when she first saw me [in] 1969, when I had lost so much weight and I was just terrible that when she first saw me, it was just like oh, there's Tim. You know, I don't think she's ever really seen the wounds. I think she just sees past that. I think women have more of a quality than men to do that, and she certainly has that quality to see the whole person. She's extremely supportive. When we broke up, [it was because] she had just gotten to the point where my passive aggressive anger had just worn her down, and it was me really that asked for the breakup. [But] once I made a commitment to living healthier and treating her better, [we got back together, and] we've had a really solid relationship for the last 30 some odd years. [Since then, it has been] a steady, stable relationship. The first couple of years were that way then about year four through seven were really rocky, but even when things weren't good if I had a physical need or a problem or [I] needed to go to the hospital or something, she would always be there and take care of me. That part of my wounding never got in the way of what I needed and as far as being a soldier, she was a hippy girl, but she could tell the difference between the war and the warrior. She knew that most of us were just, especially us draftees, guys that got caught in a bad deal.

[I have had friends over the years who have been supportive]. From the military, I'm still friends with two men that I was in battle with. We don't see each other a lot, but we stay in touch by phone periodically, and just knowing that they're there always makes me feel better. The one guy I actually bandaged when he was wounded and took care of him, so he's always been appreciative of that. So those guys are important to me although I don't see them very often. [I see them] every 10 years or so, and [I] talk on the phone [with them]. Particularly, the one fellow means a lot to me, and I think it's because we survived together and survived some very, very bad combat where a lot of people were killed, and he and I survived together and actually saved a couple of people ourselves. As far as in my personal life, I have a friend for about 30 years who [lives] about two or three hours away. When I came out of the hospital or if [my wife] had to be away on a business trip, he'll come up and stay with me and take care of me if I need support. I mean I think that says a lot, and locally I have a friend from childhood who lives nearby who is always there if I need him, and he was in Vietnam as well, but we've been friends since childhood. In our early marriage, he and his wife and [my wife] and I were friends. We've seemed to manage to land in the same area our whole lives—in childhood, in adulthood, and in our later years. So I have several friends that are extremely supportive. [But] I think family members are just there more, and friends are called upon. So that would be the difference. Family members are nearby and know the story right as it unfolds if I need help. Whereas I usually will call a friend and say can you help me with this, or they might call and [ask] are you alright? So [my friends are] a little more distant geographically.

[My sons] grew up with a father with disabilities, so the way they put it is they've not known otherwise, but when they were children, it was in my healthiest period, and even though I was one-armed, I coached their teams, and I played sports and so on because I was blessed with a lot of athletic ability. And again, I would say that had a lot to do with me recovering well because I was pretty much ambidextrous. [So] even though I lost my dominant arm, I was able to do a lot with my left arm, so the kids just saw me as different. I can remember an incident with my oldest son. When I went to pick him up from school, he was about six years old, and he was arguing with two other boys, and they were making fun of me for having one arm, and it broke my heart a little bit, but his

reaction was to stand up to them, and [he] said he got hurt in the war, don't you know anything. So he kind of turned it around on them and made it look like they were the ones that had the problem [and] not him. He was about six years old. That's the best illustration I can come up with of my oldest son. Once he was in Germany, when I was having a lot of physical problems, and he was calling almost daily long distance to check on me. About 10 years ago, Nightline program did a profile on [my wife] and I for their show, and [they] interviewed our sons. And I did a program kind of on the kind of questions you're asking, and [they] showed it nationally for a couple of years. In fact, it's still available on their ABC news store. The reason why I bring that up is because I got to actually see what they thought because they were getting interviewed by somebody separate from me and not with me there. My middle son is really a sensitive young man, and again they always just, you know, if I had to open the bottle they would grab the bottle, and I would twist the top. It was just sort of like they just grew up learning what they needed to do, and now my youngest son, who is almost 26, he has been around during the years where I had to retire, and the problems got worse. [With] the other boys I was real functional during their childhoods, and so my youngest son had to be a real caretaker—put on pain patches, change dressings. He's done a lot of that kind of stuff, and the older boys have done some of that, but he's done a lot of it because he was [still in high school when my physical condition began to deteriorate]. [But] I'm always there for them and supportive of them. After I retired, I was bored, and my youngest son didn't want to go to high school, so I taught his last two years of high school, and now he's got a master's degree, so that all worked out. So I'd say that all three [of them were] extremely supportive and very concerned. My oldest son saw me have a grand mal seizure, and that scarred him a little bit.

[The people that I've mentioned as being supportive take on a care giving role] only when needed. They've all gone into that role when I've had surgery or when I've needed [needed them to, but] I've been able to stay relatively independent. I can drive and walk. I can't lift anything heavy or deal with anything physically heavy. So they'll come in and help with that kind of stuff, but in the classic sense of a caretaker, [they only take on that role] when I've needed it, but they've always been there.

I think there may have been [some stresses on my caregivers]. [Especially for my sons in] the teenage years, oh, I've got to take care of Dad, and I can't go on this date, or I can't do something. We tried to make those kinds of situations not happen much so they weren't put in those kinds of positions, and it never really was an issue. With their grandfather having physical and emotional problems as well from the war, they kind of grew up with the issues that can come up for soldiers. And I'm not talking about the physical stuff. There have been times when I've been really pretty low or anxious, and they're very supportive. They're pretty mature young men.

I have [noticed stresses on my wife during intense care giving times]. We've called in the family to help when she's also had work. I've seen the most worry on her when I look like I'm giving up hope. I think she gets worried when I go through a period where I start questioning [things] and get real low, and other times I see her feeling stressed when her job calls her away from home, and she has [to] travel. She always makes sure that somebody's with me when she travels, and I can see her, and it appears that she's feeling some stress. But I don't think in a negative way. I think in a way that drives her to make sure things are covered before she takes off. We've been doing this for 40 years, so it's sort of hard for me to think back [upon times of stress for her because] things really pretty much move pretty smoothly.

[My wife has been] most helpful [to me in terms of living with combat related limb loss]. The person that helped me turn around my life was a therapist in 1977, who helped me move away from anger and feeling sorry for myself which really wasn't who I was. I was very independent and

athletic and outgoing before [being injured], and he helped me recapture that part of myself. [He] also helped me regain personal responsibility and understanding that because this happened to me, I wasn't owed anything. I wasn't owed by the people in my life. He helped me regain my sense of balance in life, and I feel very appreciative of this therapist, and I think [he helped me] really changed around my life. [I] grew as a person and put my family back together. [He was] actually the one that got me to think about helping others who had the same kinds of problems [that] I did. So I think this therapist, who's a VA social worker [in the late 70's], [was] really [a] key person [in helping me adapt to being injured as well as] my wife and parents and siblings and children. [So] I would say the two people that changed things for me the most once I was past the initial wounding and getting back into life would be my wife and this therapist.

The primary thing I would say [to veterans of current wars who have suffered limb loss] is to take care of what you've got left and to take care of your body as best you can. I was a bit self-destructive in the early years, [but] I would hope that people aren't that way, and that they take care of themselves. And I now take vitamins, I'm a vegetarian, and I exercise. My advice is to take care of yourself, and separate out [feeling] anger about being wounded from the people in your life, and don't mix them together and get angry at the wrong people. There's something called righteous anger. I think that goes [along] with, I got drafted and shot up in the war, [so I] have every right to be angry with the government and the president and the people for putting on a war like that. But on the other hand, there's a time when that needs to be let go of, and [you have] to get on with life. I think [I] stayed angry for 10 years, and that didn't do me any good. I think initial anger is fine, but you have to get on with life.

[The single most important message I would give regarding social support] is to allow it to happen, accept it, and allow people to be of help. I think there's a tendency—and there certainly was with me—to want to do it all myself. [At] the hospital when I [was] wounded, and I [could] barely sit up, I was trying to get up out of bed and stand up without getting help. That kind of attitude helped me survive, but I needed to be able to let other people help me take those first steps. So I would say be open to the support, the emotional as well as physical support. That was the hardest [part] for me. I think the stigmas—and I think some of that has changed now, but it's still there—stigmas about getting help from mental health professional[s] and so on [make it hard to seek help]. I was avoiding [getting psychological help, but] once I got it, it really helped me....[I would tell them] don't be afraid to go back and get help later if you have a down period. There's going to be ups and downs. My experience has been that when there are life issues that are difficult, some of my own old business gets stirred up, and I need to get some help getting it clarified. I see a therapist that helps me with physical pain and does a variety of things like hypnosis and different relaxation stuff and so on, around physical pain. So [I would advice veterans] to be open to the possibilities. My wife does Reiki on me. [So] just being open to alternative methods of both social support and physical support [are important].

And then the last thing and probably the most important thing is, I came to see this as a spiritual journey, and although I'm not a regular church-going person, I have been at times in my life. Sometimes I'm not [though because] church to me is not the total issue. It's prayer and meditation [that] have been really helpful to me. And a strong belief in a higher power helps me keep things in perspective. Having gone through such a brutal battle, and seeing so much death and destruction around me, and having my own body violated, I [just] had to find something. I think mental health [only] goes so far. I think [the] perspective that there's a god or a higher power, or whatever people want to call it or even a higher self, [is something] that helps me. Prayer and meditation really have helped me enormously, and I can't imagine living without [praying and meditating].

Profile of Mr. Aaron Howard (Above the Knee)
(Original Transcript 17 Pages)

Mr. Aaron Howard lives in the Western region of the US. He was drafted into the Army in 1966 and was injured in Vietnam in 1970. In addition to his amputations, he also suffered a head injury and other broken bones. He reports his current health to be poor. Mr. Howard also reports being overweight/obese, experiencing back pain, arthritis, residual limb pain, phantom limb pain, phantom limb sensations, other bodily pain, depression and PTSD. Mr. Howard is currently married and has two children. The interview was completed on August 4th, 2010.

This is Aaron's story.

[I was] born, November 9th, 1949 . [My highest level of education is] 12th grade. [I'm not employed, and I haven't worked in the past]. I haven't worked since I got blown up, New Year's Eve of '71. [I am currently married, and] I have two children but not by this marriage. [They are from] my first marriage. This is my third marriage. [I belong to] the DAV, the VFW, and Veterans of Foreign Wars. [I entered the military] June 6th, 1966. [I was] drafted, number one on the lottery. [And I was injured] December 31st, 1970. [At the time of my injury, my immediate family consisted of] my mother, my brother, my two sisters, and my father [and] I was dating a girl.

On New Year's Eve, we were out on a recon mission, and I had two men wounded from land mines, and I called in a helicopter to try to get [them] medevaced out. We were 26 miles on the wrong side of DMZ at that time, and when the chopper got there, I tried to take the two men to the helicopter. The helicopter was hit with an RPG, and it blew up. And I tripped a second land mine which blew my right leg off at the knee, blew the calf out of my left leg, blew the ankle out of my left leg, [and] put shrapnel through my knee and thigh of my left leg. Also had a hole blown through my groin of my right leg that was left [so] big I could lay my arm down in it. When the dust cleared, I had a boot in my face, and I pushed it away and found out it was connected to the other end of me by a hunk of meat about an inch wide, and I took a knife and cut it off the rest of the way because there was about a foot of bone gone. [I] took a belt, tied off the leg and the groin on that side as tight as I could tie it. Cut a shirt sleeve off, and tied off my left leg about a foot above the knee, and hollered at somebody to bring up my machine gun because I was going to kill the SOB that killed me. We were there for about four more hours. Out of a 20-man team, we had five triple amputees, four double amputees, and the rest of us were missing a leg, a hand, or an arm by the time the government got there to get us out [because] I was in a unit called the Phoenix Program. We were a ghost unit. We followed orders from the CIA. We were attached to the regular military, but the regular military said we didn't exist anymore. In other words, I've got three sets of social security numbers because they buried me twice. The government finally admitted that the Phoenix Program existed in a 1998 memo, but we're still classified. We can't get any copies of our orders because the unit, as far as the federal government was concerned, did not exist. [I didn't start in the Phoenix Program. I was placed there because I was court-martialed.] I was [originally] in a tank company, [and] I was leading patrol one day, and I had a sampan open fire on me with a 51 cal machine gun, and I started to return fire, and I got a call over the radio to cease fire. About 30 minutes later, after I tried to get permission to return fire, I was still given no permission to return fire, but I was also ordered to go ahead and cross the river, the Blue. And I told them if I go to cross the Blue and they shoot at me, I'm shooting back, and that's what happened. As soon as I stuck the nose of my tank over the edge of the brim, they started shooting at me again, and I put a heat round in the barrel and hand cranked it, so the rest of my crew couldn't be charged with anything, and [I] blew the ship out of the water. A heat round is a high explosive, armor-piercing round. With a teacup of a Sheridan tank, you can hand fire one round

without anybody else having a hand in it. [So then] I was court marshaled, put in jail for two weeks, and they came in and gave me a choice. I could join the Phoenix Program, or I could take 120 years in Leavenworth for killing the six men on [the ship]. Needless to say, I joined the Phoenix Program. And that was how most all of us ended up [there]. We were on charges of murder. They had me charged with six counts of premeditated murder [because] I blew the boat out of the water [with] six men on board against battalion orders. But a guy had a choice—shoot or be dead. I preferred to shoot.

I have a prosthetic leg that's an above the knee amputation on my right leg. I have an ankle brace inside my left boot to hold my ankle together, and I had a knee brace over the outside of my left leg to hold my knee together. I also use a cane or a wheelchair. I use a cane if I'm walking with my artificial leg and if I have the leg off, I use a wheelchair.

[I receive my healthcare at the VA]. When I was down in [state name], the health care was nil to none. I had lived in [city, state name] and went to the [three different] VA Hospitals. On an average day, they give 100,000 men an eight o'clock appointment. If you get seen by the end of the day, you get seen. If not, you go to the end of the line of the next 100,000 the next day. There's 26 million people in [this state] versus [new state] where I'm at now there's only 900,000 people in this state. Since I moved here 17 years ago, I've gotten 1000% better care than I ever got in [previous state] .

I have asthma. I've had lung damage from exposure to Agent Orange. I can't walk without assistance. I have a wheelchair in the house. They just put in a second chair lift for me to go up and down my stairs in my house because I can't walk the stairs anymore. [And because of] having both ear drums blown, my equilibrium is off. My eardrums were blown. I see a psychiatrist at least once or twice a month at [the VA], [and] since I started seeing them, it's helped a lot to get some of the pressure off. I still can't be around the public without getting angry. [I suffer from PTSD, and I have problems with depression].

[When I left the] military hospital, I got on a plane out of [state name] and flew to , to switch on a plane to go back [home]. When I was in Atlanta, Jane Fonda was having a peace rally at the Atlanta Airport, and I had about 20 of her followers or whatever you call them, long-haired hippies, whatever, come at me calling me murderer, baby-killer, government-hired assassin, and I put 18 of those in the hospital, and at that time, I didn't have the leg. I was on a pair of Canadian crutches and down to 105 pounds. And my normal weight was 210. After that experience, I kind of stayed away from the public as much as possible. I only tried to deal with other military personnel that knew not to push. [And] I can handle up to about four or five people at one time now for a short period, for an hour or two. We went to town today to do the grocery shopping. By the time we got to the second store, I told my wife I'd stay in the car, and she could go in and finish doing the shopping because I'd gotten agitated enough that I couldn't handle any more people being around me. [I] especially [have that problem with] my family. They were here visiting for 10 days. I had to double most of my medications to tolerate my family. When I first came home from Vietnam, I'd gotten married and had two little girls. My family decided that it would have been better if I had not been in Vietnam than to deal with the problems of Vietnam, so they started telling my children stuff that I was never in Vietnam, and they kept telling me [to] forget it. [So they told me] don't worry about it, and the more they did that, the more I got separated from my family. Probably in the last 10 years, they finally understood that I was in Vietnam, but [that was only] after 30 years of them telling my children that I wasn't because they didn't like the way the war turned out, where we lost or the government gave up. In other words, to explain Vietnam, I would say it would be like putting me in a boxing ring with Cassius Clay [Mohammad Ali], and telling me to kick the shit out of him, and

tying both hands behind my back. I didn't stand a chance to start with, but they're going to tie both hands behind my back to make it worse. That's one reason I'm living [here] . [It] is the only state in the union I have absolutely no relatives. This is the first time my family's come out to visit me in 17 years, both of my sisters, my brother, and my mother, and my youngest sister's husband. [It was a good visit] if you like small wars and long arguments. My brother and one of my sisters are debaters. If I say it's black, they'll swear it's white. Whether they know anything about it or not, whatever side of the conversation you take, they take the other side, and they won't quit until you submit. And I don't play very well. They left Monday, and today both me and my wife said, finally part of the brain drain is starting to calm down. I only have two modes. I'm either in a good mood, or I'm at war. I can't get angry. If I get angry, somebody dies. I can't fight because I only have two means of expression. Get along or kill. It's terrible to be that way. I don't like to be in that way, but the Army programmed me that way, and they did a good job at it. They've never been able to un-program me.

In '82, they started treating me for [PTSD]. I was seeing a psychiatrist three times a week for close to 10 years. And then they finally diagnosed [me] and added [PTSD] to my disabilities in 1996. They diagnosed me at 50% disabled because of Post Traumatic Stress Disorder, but I don't know if you know how the government keeps their math. When I was first going to get out, the government told me 100% paid \$1275 a month. This was 1971, and they were going to give me a 80% disability rating. Well, stupid me, I took it in my mind [to be] 80% [of] the \$1251. The \$1251 has nothing to do with the 80%. It only counts for the 100%. Within three months of signing out of the papers, I sued the federal government and spent five years in court filing, or to get 100% disability rating because 70% only paid \$350 a month. [And I won] after five years. It took me five years of being in court with them, and they've wrote me letters two different times after that, stating that my money-making capabilities superseded my physical disabilities; therefore due to government regulations, I was no longer disabled, and [they] terminated my pension. And I had to go back and refight them. The second time, it took about two and a half years. The third time, I got it down to about eight months. I'd had more practice.

[Concerning what has been the most challenging thing associated with my limb loss over the years, I'd say] dealing with the amputation itself I would probably put in third or fourth place. Dealing with the government was probably my most challenging [thing] or gave me the most stress and anger of anything that I ever had to do in my life. In '96, when they gave me the Post Traumatic Stress Disorder [and] added that disability, they had my leg grow back on their paperwork, and it took me two years to get that straighten[ed] out. In other words, you can't just go in, and pull your pants leg up, and show them that it ain't there. I had to go back and get the original papers and the original authorizations and everything. Then [get] the doctor's signature, who did the surgery, and prove it. And when the government has the papers, and they don't want to give you them, that gets real fun to do. Except I learned very early on, I keep the originals and give the government copies. I have the original of every order ever written from 1966 on. I've got a file that's 23,000 pages long. I have appealed my cases as much as 17 times. Every time you appeal your case the rules change. If you appeal it long enough or enough times, their own rules bite them in the ass. Does that make sense to you? In other words, every time they change the rules, [they] change till sooner or later they box themselves out. But it's very mind stressing, and every time you fight them you kind of go into war mode, or you go back to war. You've got to re-live everything again. I mean, I'm sure with college you could get plenty of books to read, but if you can imagine 23,000 pages of files which are all doctors and 95% of them handwritten, not typed, trying to translate that and get something that will stand up in court, and get somebody that will willingly come to court, and say that they signed it. It's loads of fun. You don't know who you want to go kill because it's like the letters I got telling me I was no longer disabled. Nobody or no organization or no anything signs it. It's just an order with no

signature except it says the Department of Army. So you kind of don't even know who to go to fight. So the only thing you can do is fight everybody.

I mentioned this is my third marriage. I mean the wife I'm married to now, we've been married 26 years. The first one was married to me about six years, and the second one was married to me about six weeks. She was trying to have me committed to a sanitarium, so she could get my home and stuff, the second one. The only reason I found out what was going on was, she tried to get my parents to sign in on the papers to have me committed, and I may be crazy, but that doesn't make me stupid. I'll admit to being crazy. Anybody, who went to Vietnam, fought [and] spent four years there, had to be crazy to survive. That's the only way you survived. If you weren't scared to death all the time and crazy, you were dead.

[Concerning people who were supportive and helped me when I needed it,] I got a lot of help from the DAV and the VFW as far as legal help in fighting the government. And they both did all their legal filings and everything at no cost to me. And the wife, I have now, is totally supportive of me. My oldest daughter has come around in the last four or five years and finally understood that her mother and my mother all lied to her for about 30 years, and that I did go to Vietnam, and things did happen. When she was about 13 or 14, we got in an argument over Vietnam. I was trying to explain what it was and where I had gone into it, and she started coming up with well Granny and Mother both said you were never there. So you have to be lying to me. So I told both of my girls at that time, the other one was 10, that as far as I was concerned the subject of Vietnam would not be discussed between me and them until they got old enough to understand how the world really worked. And the oldest one's 37 now and she's come around about the last five years. She understands why I am the way I am, and that nothing's going to change it, and we get along very well. Now, my younger daughter, she still lives in her mother's world. She still does not believe I was ever in Vietnam. And like I say, I've got all the legal papers or all the papers to prove it. [But] their mother's and my mother's words 20 years ago went a lot further when they were younger than mine did because I wasn't probably the gentlest, kindest daddy. My rules were ironclad. If I told you [that] you had to be home at a certain time, you had to be home at that time. If you were five minutes late, I docked you 30 minutes for the next month on every date. And then my other daughter decided to run away one night with some kids, and I ended up going out and catching them and bringing them in with a 9 millimeter Uzi which did not make them very happy. [I had] about five of them handcuffed to my couch at three o'clock in the morning trying to tell me that their parents all knew that they were out. So I told them fine. We'll call your parents, and if they tell me you have permission to go out, I'll let you go. [And this was with] my 13 year old daughter, [and] there's a 19 year old boy, an 18 year old boy, and a 17 year old boy, with a 12 and a 13 year old girl. Otherwise, I'm going to have you put in jail for statutory rape. We ended up calling their parents, and the first two sets of them hung up. They told me my kid's in bed, and I says, I'll call back in 10 minutes. Go see if they're in bed. When I called back, they wanted to talk to me because their little angel wasn't where you thought they was. I made them drive down to my house so that we could all sit there and discuss it, and I kept them all handcuffed to the couch together until their parents got there, and the only parents that didn't come was the other little 12 year old girl. Her parents said they didn't care. They were smoking dope. Her, I felt sorry for. But, now I should say as far as helping me with things, since I've moved [here] I've had several primary care physicians and orthopedic surgeons that have done 10 or 15 more surgeries on me, and every time they see me in the hallway, they know me by my first name, they talk to me, and I feel very comfortable around them, and I feel I can trust them. They're the only people in the government system that I do feel I can trust, and I have also had them write letters to help me fight the federal government which is fun when you get an employee of the federal government writing letters against the federal government. It can get twisted.

[My mom wasn't helpful or supportive]. It depends on what you call supportive. She came to the hospital where I was stationed, and my father rented them an apartment, and she came and saw me every day, but from day one, both of my parents and my first wife, that was a girlfriend at that time, all felt it would be much better if I just totally didn't let 'Nam exist in my world. [They did things that were probably well-meaning but not supportive]. Like I say they came and visited every day, [but] it was my father [who] would fly up on weekends or [he'd] drive up. It's probably 800 miles from where we lived to where the hospital was. There was 37 amputees on the ward I was on, and my parents, when they came up, they would not bring stuff just for me, they would bring stuff for everybody on the ward. In other words, if they brought apples or oranges they brought a field crate of them. And it's like my younger sister, she kept telling me I couldn't tell anybody she was under 16 because she was going from bed to bed trying to make the other guys happy by talking to them.

[I didn't have extended relatives that were helpful]. Most of them didn't want me around because I flared up too easy.

My current wife has been very supportive. She's helped me deal with things that I haven't been able to deal with or that I can't deal with. She realizes when I reach a point that I can't deal with it anymore, and she'll tell me let it go, and she'll take care of it. She's always taken care of it since we've been together.

I have some other Vietnam veterans that I talk to, and I have some World War II veterans that I keep in contact with and talk to. They're supportive in the same way, I've helped them fight the government, and they've helped me fight the government to get the paperwork straightened out. A lot of times, I knew ways to get in to do things, and a lot of times, they came up with new and different ideas to attack a problem that I'd been fighting for several years, and [I] couldn't get anywhere, and they had another avenue to go at it. In other words, we're all a little hard-headed. We don't quit. Tend to be like a pit bull. Bite and don't let go.

My wife, at the present, is a caregiver very much. [But no one was a caregiver during the first 12 months following my injury]. [My wife,] she understands some times that I can't take people, and she'll go and do things that I'll just say if I got to deal with them I don't need it. She'll go deal with it to take care of it. She'll defend me against my family when they tend to argue different points with me. She stands beside me and with me. She's never stood against me. [So] it would be my current wife [who has been the most helpful to me in terms of helping me adapt to my current limb loss].

It's very important to have relatives and friends to lean on that will accept you as you are. Everybody that came home from Vietnam, wounded or unwounded, came home damaged. A lot of times, I tell a lot of people what the military did in my head is a lot worse than the physical damage they did to my body. [Because the physical aspect] I can see and I can deal with. [But] it gets real difficult to deal with what's going on in your head. I get single-sighted. I only see things in an OD green point of view. [But I would tell veterans of the current wars] don't ever give up. No matter what the government tells you, don't ever give up. Fight them till you get what you deserve. Any of the Iraqi or Afghan soldiers that need help need to use the DAV and the VFW as much as possible. They're the only ones that actually know what the rules are, and what your rights are to fight the government. The government won't let you know, you're not allowed to talk to them. In other words, if I wanted to talk to them, they would not talk to me. I'd have to get a lawyer and have a lawyer talk to them. And the DAV and the VFW both fulfill that spot.

[Over the years,] there's been particular people [at the DAV and VFW that were helpful to] me, but

the whole organization is very helpful. If I wanted to have to say one or the other, I would say the DAV probably did a lot more for me, but...I have power of attorney with both of them. At times when I couldn't get through with the DAV, I went to the VFW, and they got through. They both have different avenues to go through. And sometimes you get good representatives, and then sometimes you just get ones that are there for their paycheck. I don't want to say that all of them will do everything for you, but I've had two or three in the past 40 years that have went way out of their own way to help me get files and file papers and file them six, eight, 10, 15 times and not give up as long as I was willing to fight. They were the ones originally that told me that the rules change every time you appeal it, and there is no limitations on how many times you can appeal it. In other words, until you win or until you get what you think is fair, you keep fighting.

My brother was also in the military at the time [of my injury]. He was an MP [military police] at an Arsenal in the United States. They could not send him into combat because according to the government's paperwork I had been buried twice. I was dead. So it made him a sole surviving son. They drafted him and took him two years after I had already been in. Even though he's older than me under the lottery, I got drafted first, and he was drafted two years after I was. But he came to help a lot, and the only thing I can say for the poor guy is they had a fire in the building. At that time, they had about 100 pounds of weight pulling the skin back down on the end of my stump trying to get enough skin to cover over the end of it, and when they had a fire warning, they had to clear the building. He was pushing me down the hallways, and there was ribs in the floor, and every time those weights would hit those ribs, it would jerk, and I'd scream, and he cried the whole time. My brother was very supportive. My brother still is very supportive. Like I say, why we don't discuss things or haven't discussed things as he's a debater. If I say it's white, he'll say it's black. He argues because he enjoys it, and I can't argue because I get angry, and I've never been able to make him, get him to understand the logic between that. He's done it so long that I expect it out of him, and it happens, and in the last few years we've gotten closer. Matter of fact, where he was the military MP and stuff, he tried to get into the VA, and they refused to even let him fill out the paperwork. The VA is [a] veterans' hospital. It's not disabled veterans hospital. But in [one VA hospital] there's so many people they wouldn't let him in, and I talked him into coming up here, and I got him into the VA hospital here in a matter of about two weeks, and he'd been trying to get in down there for five years. But he had a brain tumor, and it caused loss of a lot of his memory and a lot of short term memory loss when they finally got it removed. [So] in the last five years, he's seen what he's had to fight to get into the VA here. I tried to tell him when he started fighting down there to just come up here and live with me because I'd already talked to the doctors and the chief of the hospital, and they told me as long as he's got a DD214, we'll see him. In [his home state], they wouldn't even let me fill out the paperwork. I mean that's the difference between the two systems, and they're both VA hospitals. The doctors here try to do everything they can to help you, and the doctors down there, you're like cattle. You're just a number when you come through.

I really appreciate what you all are doing in this, trying to figure out how to help the veterans from Afghanistan and Iraq because there wasn't anybody there for us after Vietnam, and these guys really need it...and the biggest problem is the government. I help other veterans here fight [the] VA. I don't like to be in the public, but I get involved in some of this stuff and a lot of these guys that are coming home they find out that the government's only going to take care of them for two years, and then they don't have any more benefits. I've worked with the DAV and the VFW both trying to help force Congress into passing some new laws to make sure that these guys get help as long as they need it.

Profile of Mr. Jess Lee (Above the Knee and Foot)
(Original Transcript 24 Pages)

Mr. Jess Lee lives in the West-central region of the US. He enlisted in the US Marine Corps in 1968 and was injured in Vietnam in 1969. He currently reports his health to be good. He also reports being overweight/obese in addition to experiencing stump pain and phantom limb sensation. He is currently married and has eight children. The interview was completed on July 29th, 2010.
This is Jess's story.

I have a bachelor's degree [in] Computer Science, [but] I'm retired now. I was in the IT business, working telecommunication area. I retired last year in 2009. I'm [also] married. It'll be 40 years come November. I was married in 1970. We have eight children. I have four daughters and four sons. The oldest is 39. The youngest is 18.

I belong to the Disabled American Veterans, [but I'm not active with them]. I'm kind of an at large member.

I have TRICARE, [and] I [usually] go to the Air Force Academy [for my health care]. While I was working, I got it through private providers. [But] a couple of years ago, I went to TRICARE before retiring because I was laid off for awhile, and I went back to work as a contractor. The company that was doing my contracting did not provide health care, so I went to TRICARE. I used the VA [a few decades ago] while I was going to school.

I entered the military in [the summer] of 1968. I'd been thinking about it for about a year, and then because I was in and out of school, I lost my student deferment, and I had gotten a pre-draft physical notice. So when I got that, I decided I'm going to have a choice of where I'm going and what I'm going to do. And with that, I enlisted in the Marine Corps. I went to Vietnam in [the summer] of '69. [When I joined the Marines, I knew I would end up in Vietnam, and] I kind of saw that as something noble to do.

I was single then, so [my immediate family was my] two brothers. [My] older brother had been in the Marine Corps and had just discharged, [but my] younger brother was in high school. [I also had] my mother and my father...[I was in a relationship when I went to Vietnam, but my wife was not the woman I was with at the time].

[I was wounded when] we [came] up over a ridge and caught some hostiles down below us. I was moving in toward a firing position. I wasn't paying attention [to] where I was going, and I hit a land mine...From my right leg, it had taken meat all the way up from the boot top to above my knee off the inside of the leg, and [it] severed the femur. Then on the right side, I had significant shrapnel wounds from the foot up to about halfway up my calf all by my side. [So] I lost my right leg just above the knee, and then I have a Syme's amputation which is [a] partial amputation of the left foot. I had shrapnel wounds in the calf. [It] took a big hunk of meat out of my calf. [I got] shrapnel wounds at my knee. [It] took like a silver dollar size piece of meat off the interior part of my knee and on the back side of the thigh. [There was] a fair amount of shrapnel wounds there, too. [I] did have some hearing loss [related to the concussion I sustained, and that remained a problem my entire life]. I went in for a hearing test when I was working down [south] during the eighties because I noticed I wasn't hearing. Conversations in the room would [be a] muddle [of] things together. And [the doctor] said my hearing range loss wasn't overly bad, but he said [I was] just sensitive to it. [I

also had some infections associated with my wounds]. On the left end of the stump, I was infected, [and] where the foot loss was somewhat infected. [But] that stayed open until I got to the Naval Hospital.

I use a cane, and on occasions when I don't have my right prosthesis on, I will use crutches. I have a wheelchair, but I haven't used it for years. [And] I have prosthesis on both legs. [When I don't have it on, is] more of a case where I've overdone [it] for several days running, and I'll develop a little bit of a tender spot on my upper thigh where it rubs against the prosthesis in the back and posterior area. So I'll take the leg off, and just take a down day, and give it a chance to heal.

I would [say my physical health right now is] in [a] fair to good range. I'm carrying more weight than I care to. I'm up at 285.

The injuries, I've suffered, haven't helped [with my weight at all] because [I'm] somewhat limited in mobility and how much exercise I can do. The other part of it is just plain laziness and over eating. [And I have] a desk job, [and then on top of that I am] not getting out to the gym or doing anything else. [But] I was quite active...up until '81 [which is when I graduated from college]. So [I have] been more [idle in the] last 30 years of working [because] you get into that work environment [of sitting a lot], and then [the weight creeps up on you]. [But] I did construction work [in the 70's]. I went and worked with my brother-in-law one summer when there wasn't any classes being offered [that] I wanted [to enroll in]. [So I went and did] siding. I played baseball, [I] swam, [and I played] softball and [did] just about everything. [I even went] horseback riding [and] elk hunting. [So] I was fairly active [back then]. I played basketball one season with an intramural type group, and I figured out, well, I can't run up and down the court, but I can be under the basket at one end and at the top of the key at the other end. I could get down there on defense, but then I decided that [it was] too strenuous. [I mean when I was] playing softball, I went through a lot of artificial limbs because of collisions [because] I played catcher and first base. [So players would] run [into me].

[When I did sidings, I] went up and down ladders. [I] walked on scaffoldings. I worked on roofs. [But] as the years went on, I started saying well, you can't do this anymore. You can't get on the roofs anymore. You're getting too old for that. And then the next thing[was] don't climb on ladders. So a number of the activities [that I was doing] started trimming off. [But] it was [important for me to get up and go do things like play sports and hunt]. I felt it was important to do that. I didn't want to let my disability hold me back from doing things I wanted to do, so these outdoor things were important things to me.

I did notice here oh about a year back ago my blood pressure was really high, so I got myself into an exercise program. I go to [an] Air Force Base [that is] about two miles away from where we live, and [I] and work out there...in the gym...about three times a week. [I do] not really [have any current skin problems]. [But] the left side does get dry [around] my whole calf [that] is in the socket. So that occasionally will get dry, and what I'll do is, I'll just get some good lotion. I've got some lotion that [I use to] put the moisture [or] the oils back into it. [But I] don't have any serious skin problems with it. If I overdid, then it had the tendency to eventually develop a bruise on the back side of the stump. [So if] you put the weight on it and you feel the soreness, [then] that's your warning sign [that] you need to back off.

I continue to have phantom pains. I can still feel my toes most of the time, it's always tingling. There's always a tingle there. But with phantom pains, I feel the toes on the left side. [I] always felt the foot out where it belonged, and then over the years that distance of feeling sensation has gone

away. There are times, on the right side, [that I] get a cramp in the middle of [the] sole of [my] foot. You know what that feels like. That's occasionally, what I get on those phantom pains. And then I do have some nerve act up. It took me a long time to figure out what was causing that, but it seems that the nerves on my right side have flare ups, and it's kind of associated with being dehydrated.

I did [take medication for the pain] years ago, but now all I do [is] try to keep hydrated [because] if I do that, the flare ups will subside. [I have] back pain, lower back pain....[And I do use a cane]. When I over use it, I tend to get a cramping feeling in my left hand. That's the hand I carry the cane in. But it's only temporary, and it's due to times when I've overdone, and I'm just trying to get somewhere you know.

[Today, my general emotional health is] good. [It is] excellent. Good to excellent. I think in [the] first couple of years [I did suffer from PTSD though]. [There was] a lot of alcohol use [on my part], and [I was] edgy. [I was] short-tempered at times, and the first few years, the closer I got to the anniversary of the injury date I would get moody. [But I] never felt angry. I don't think I ever felt angry about it. I questioned it, but then I resolved that through my own faith and belief system. [But] you always going to have that why me [question]. You know, that was the biggest thing. Why me? Why this? Why now? But once I resolved all those things, I got beyond that. These things sort of happen. It could be worse, and that's one thing about in the Naval hospital [and] all the amputees being together. There was always somebody worse. There's always somebody that's a little bit better. So, a lot of that resolved real quick. That kind of helped with perspective.

[But] it did take a little while [for me to adjust]. My personal religion beliefs helped me adjust. Tolerance, by my spouse and my family, helped quite a bit. The fellows that I still stay in contact with [helped]. There's about five of us from the Naval Hospital [that stay in touch,] and that helps quite a bit.

I'd been discharged from the hospital in January of '70, and then I met my wife about May through a mutual friend. In fact, we were at a social event, and she was there with a fellow I knew, and I knew he had this girlfriend from a certain area, and she was from that area, and so I just said oh, this is his new girlfriend, and it really wasn't. She had kind of conned him into taking her to the event. So after I knew that, I called her up, and we started dating, and within about five [or] six months, we were married.

[Living my life with my injury and the memories of Vietnam has affected me in various ways.] I found I couldn't do everything, but I could do a lot of things I wanted to do. I went to a peg leg on the right side because I found I could ride horseback easier, and I had had one made for swimming, just for stabilization in the water, and then I found I could ride horses easier with this than with a footed leg. And then I started walking with one, and I discovered I was more mobile with it, and when I finally went to have one built for regular walking, I had to really fight the VA to get it because they were of the mindset that cosmetic is better, and I'm going no, mobility is better. And so I get a lot of looks from little kids, and they'll ask me how I lost my leg, [but] little kids don't need to know about war. They don't need to know about this kind of problem or what happened, so I'll make up some story... And people I work with, some of them realize I've been without two legs, and some of them just think it's one. So that has never been a problem for me in that regard.

[My] combat experience [was] really minor, [but sometimes something] would set off a dream, and I'm back in the unit. And I know it's a dream. And I have two sons in the Marine Corps, and one of them is a combat Marine. I've dreamt that he and I were pulled in to the same unit, and things set

them off, and I know they're dreams, and it doesn't bother me, but I guess that's all working out into my brain somehow.

[The most] challenging thing is not being able to do something I'm trying to do. I can't get into a position to work on something. You need to be down kneeling or under a sink or something. You've got to get curled up into a crouching or sit cross-legged or something. I can't do that. Or if I go to sit down on a seat, if I'm not careful, I can pinch my stump between the chair and the appliance, and boy that hurts. Slipping on stuff. If there's like a grape or some water or anything on where you're not expecting it to be, and I'm walking, and I lose the balance and the traction, and you just flip, and I'm going down. Ice presents me [with] problems. So anything like that that you're trying to get there, you could do it regularly, but it's frustrating that you can't do it now.

I'd put my wife on [the] list [of people in my life who have been very supportive and helpful]. My older brother, I'd put him on that list. Some of the fellows I've worked with, professionally, I would put on that list. I would put my church bishop on that list that I had when I was a young man. [I would put the five veterans from the hospital that I have stayed in touch with over the years on the list too.] They're supportive because they've been there, and they've done that. But they're on it by default [for that reason]. There were only a couple guys that never got with the program. We often shocked the civilians we were around. Some of it was on purpose. I recall we got in an elevator, we were looking for a place to go drink, and we're downtown San Francisco, and we ran into these two couples, and they said, "Well, we'll take you up to this place that we know of in Ghirardelli Square." So we all get on the elevator, and it's a crowded elevator, and of course the character of the group, he says, "Spread out, one grenade would get us all." That's something we say on patrol, and it would shock them. But we went to a party, a special pheasant hunt and dinner, and this one guy, he was moaning and groaning. He was carrying on about how hard it was and all this and that. So several of us escorted him out of the building, we just took him and his wheelchair outside, and we dumped him out of it, and we took his wheelchair back inside. Now, the point we were making with him—we didn't say anything to him—[but] the point was you're not going to do this, and if you insist and as long as you're going to do this, you can't be with us. When you decide that you're going to straighten up, then you can come back inside and get your wheelchair. We took the wheelchair back inside with us, and the host just thought we were the coldest bastards that had ever walked the earth, and in a couple of minutes, they went out, picked him up, put him in his wheelchair, brought him back in. Well, he didn't talk to us the rest of the night, but he got the point. And after that we didn't have any problem with that fellow doing that.

I think [my mother] responded like a lot of mothers would have responded. She was upset and teary-eyed. In fact, I had an aunt that passed away here lately, and her daughters were down visiting. Her daughters would come down and visit us during the summer. And the daughter reminded me that I told my mother on that first visit up there, and I don't remember saying it, but she said I told my mother that she was not going to sit at my beside and cry all the time. If she was going to cry, she could go back [home]. But I wasn't going to have her crying all the time. And while that stopped, she still had a penchant and wanted to dote over me quite a bit. [So] she was supportive, but she was also doting. [She] would dote over me, so [she] tended to not be [in the mindset that] we'll get past this. We'll get on with our lives. She didn't want to do that a whole lot.

[My older brother] was very supportive of me. He was really great. He had a motorcycle at the time when I got out. So we would go motorcycle riding, and with my right leg, we'd have to bungee strap my leg to the motorcycle. But he was very supportive of me in a lot of things. He just acted like, well, we're going to go do this, and this is what we do to do this.

[But my wife is] very supportive. She worried about me when I was scuba diving, but she tended to be very supportive about what I do, and she knows when it's time for me to have a day down. But [with] everything else, it's no different than if I had both the legs...[And] that is important. That is very important. [I see her as] no more [of a care giver] than [a wife would be] in a regular marriage where there's no amputation.

My wife's family is really good about it. She comes from a large family and like I say, it was one of her brothers that did siding, and I'd call him up and say, "Hey, I don't have any classes going on. How about, I come work with you?" He kind of hemmed and hawed a bit, [but he] said yeah, so he and I did siding for a week. I did learn off of that that after a week of up and down ladders and standing most of the day and doing that work, by Friday I was beat to my socks. It was all I could do to, you know, even if we worked half day Saturday, to drive myself home, and rest up the weekend to do the next week. That was strenuous, but he didn't give me any special treatment or anything. He treated me like anybody else who would be working for him. [And I think it is important for people to treat me that way]. I think it is. I've a number of people that, I don't mind making fun of my legs, and if somebody wants to make fun of how I walk or my legs. It was pretty cold one day, and somebody said well, we can always take Lee's legs, rub them together, and have ourselves [a] nice fire. So I don't mind them joking with me and kidding me and that and making fun of it, and often we would bait somebody who didn't know that the leg was off or even both. I was walking in the hallway with a gal I had worked with, and she looked down and says you don't have a foot, and I said yeah. And she said, "I've worked for you six months and never noticed you didn't have a foot." And she wanted to know how I'd lost it, and I pulled up the pant leg on my other side, and [I said] not only I don't have one, I don't have two, and this guy I've known for years said, "I didn't know you had both of them off" and I said yeah. She says, "Well how did you lose them," and I says, "Oh, it was over a property dispute." And she got ashen white, you know, she reacted so good to it. And of course, the other fellow says, "Yeah, Southeast Asia property." But it's important. It's important to be treated as normal as you can. I'm not to be doted on. I can get things for myself. I want a plate of food; I can get up and get it. I don't need to be waited on.

[A] sense of humor is very important. I'm sure in your job you need a sense of humor. Everybody needs a sense of humor in what they're going.

[The treatment that war veterans receive has gotten better because] they've got Wounded Warrior now, and I think that's really important to them to be involved with the Wounded Warrior Program. You may not think you need help, but you need help. We had each other, and we had some civilians here and there, but we never had a real program. The Wounded Warrior Program essentially is geared to them talking with each other and being associated with veterans and other, both past veterans and current veterans to overcome their disabilities. You know, [to] get through that mental [aspect of] overcoming what this disability really is. I think [the mental part of overcoming physical disabilities is] extremely important.

I really don't know [what could be done to improve veteran's quality of life]. Some of it is faith-based which is a big thing. Some of it is seeing that there's other people like you. [It helps to] be treated not as an oddity or something, some person to be pitied or doted over. Essentially get [on] that good mental health road and realize that this is just something that happens, and you go on. [Veterans should also use social support]. Personally, I've never been one for encounter groups and sit around the campfire and talk type of thing, but I do think it's important that you get involved in doing things. Find what you can do, figure out what you want to do, and how you can do it. I re-taught myself how to drive using my left foot without any vehicle modifications. (I learned how to

use hand controls, but I didn't like using the hand controls). And then I taught myself how to drive using my left foot and hand, and of course, it limits which vehicles I can drive. Well, I'm limited by which vehicle I can drive anyway because I can't drive a stick shift anymore. So how about figure out what you can do. I have a good friend that I worked with. He's got a similar amputation that I have only it's reverse of the limbs. So his left leg is off right above the knee, his right leg is off below the knee. He golfs. He's a good golfer. Now, I'm not interested in golfing, I'm not interested in skiing, but there's a lot of guys [that] are. So there's things you can do. There's activities you still can do. All you got to do is figure out how to do them. I think it's important that they get active. Be active in sports. There are sports that you can do, and that's important—to be physically active.

We went through alcohol. We went through a lot of alcohol; I'll tell you that both in the VA [and] in the Naval [Hospital]. The Navy wives were terrific. The Navy Wives' Association was really terrific. They'd come and spend time with us, and they brought us green ware for steins. We'd clean them up, and we'd put glazes on them, and they'd fire them and bring them back. Well, you give a Marine a stein, what's he going to do with it? So we'd come back from liberty, and if you're in a wheelchair, it's easy to bring back a pint because it goes right up the pant leg, [and] the rest of the pant leg hides it. You get into a room, you divvy it up real quick, and empty the Coke machine, and fill them with Cokes, and you have whiskey and Coke, rum and Coke, whatever you're drinking, and that was in the main hospital. We had nurses all 24 hours, [but] when we got on the outer ward the nurses were only there from eight to four. Well, after four o'clock, guess what, we'd order pizza and a six pack of beer. So was there alcohol abuse? Definitely...[And] I think it was more than young men high jinks. I think we were more susceptible to it because of the injuries, [but] I didn't know anybody there that was a nasty drunk. Most of us were pretty happy. We just got happy and [abused alcohol]. There was some [drug use,] too.

We would get pain medication a lot, and we would save a couple of those up, and you've got a couple of pills, and we're playing cards. So you have a couple pills, and a bottle running around the card table, and you'd take your pills, and your shot of whiskey, and then sometimes a corpsman had to wheel us to bed. The one good thing is we had some very good corpsmen. We had this kid [who] was a pretty good kid. He never chastised us. He knew exactly what we were at. In the military, you figure out what's the system, and how can I work it to my advantage because there's so many things going on. I want to go on liberty. They won't give me a liberty card. How can I get on liberty? What do I got to do to get on liberty? Well, he had figured out, we had figured out well they couldn't, the term was what are they going to do to me. Are you going to cut my hair and send me back to Vietnam? Can't do that. Can they take my rank? Well, I'm not long for it anyway. Doesn't mean anything now. Can they take my money? Yeah, they can take my money, but I'm not long for the service anyway. I'll be out in a little bit, you know. So we figured out they can't really do much to us, and he figured out these guys are short time, they are headed out the door. As long as they don't tear up the place and make too much, let them be. Let them have a lot of rope, and [he] gave us a lot of slack, and sometimes we would bait people just to see if we could get a fight going. [And] I don't think [that environment] helped a bit to adjust. I think all it did was prolong the adjustment...It was a crutch...[So] I started doing other things. You've got to get out of the atmosphere. [So] it was more environment driven than personal driven. You know, you didn't crawl into the bottle. Well, one or two did, but eventually it was just something [that] was a past time.

Profile of Mr. Richard Wade (Above the Knee)
(Original Transcript 27 Pages)

Mr. Richard Wade lives in the Southern region of the US. He was drafted into the Army in 1968 and was injured in Vietnam in 1970. He reports his current health to be excellent. He also reports experiencing residual limb (stump) pain. Mr. Wade is married and has two children. The interview was completed on July 27th, 2010. This is Richard's story.

I have an undergraduate degree. [My major was] political science with a concentration in public administration. I am retired. I was employed by the State. I am the former State Service Officer for the [State] Division of Veterans Affairs. We prosecuted disability claims against the Federal Department of Veterans Affairs. [So I was an advocate for veterans].

[I am] married. Got married in November, 1967. So that's 40 plus years. [I have] two [children]. [They are in their late 30's]. [I belong to the] American Legion, VFW, DAV, [and] AMVETS. I've been a member of the Triad Vietnam Veterans Association. [I] was a founding member there, and it's kind of a quasi [association]. I've been a member of the 82nd Airborne Association, and again, [it was more of] a quasi [association]. It's more just to keep folks informed. There's no membership. There's no joining fees or anything [like] that. One of the fellows developed a website some years ago, and he's kept it going, and it's really evolved into something very nice. [And that unit was] Charlie Company, Battalion, 1st Infantry of the Light Infantry Brigade, part of the American Division.

I have Medicare. I'm a retired state employee, [and] the state allows you to carry your health insurance with you, so that's Blue Cross Blue Shield. They contract with them. And I also have TRICARE from the Department of Defense. [I usually go to a local private physician]. But I use the VA for medications like calcium with D, low dose aspirin [and] fish oil. [So they are not related to my amputation].

[But I generally don't go to the VA for health care, and that's] more [of a] [convenience issue]. It's more convenient to see a local [doctor], and when we were living in [another city], I needed somebody that was going to potentially, admit me to the hospital... if I needed it, and the VA would not necessarily admit me to the hospital. Most VA clinics you can't get into, I can't call them up on the phone, and say oh, I've got weak[ness] and [the] dizzies, and I need to see somebody. They're going to say well, we can get you an appointment in two weeks or a week or what have you. With the clinic in [the last city I lived in,] there is no real good way to do a walk-in type thing.

In March of 1968, [I entered the military]. [I was drafted because] I had chicken pox on my 21st birthday when I was in senior status at a university, and as a result, [I] had to take a medical drop. [So] it was like I had not been there that term of school. So my local draft board was notified, and I then got my notice to come for a visit.

[So I was married, and I had to drop out of school because I had chicken pox. And I was drafted because of that, but] it's kind of one of these things [that happens]. I had no objections to it. I'm fairly patriotic. I was then. I am now. And it was [like], okay, this is what I've been dealt, [and] I'm going to make the very best of it that I can.

[When I entered the military, my] immediate family would have been my mother. I am an only child, so I had no siblings. My dad was already deceased, and of course immediate family by marriage, [I had] my spouse. My wife's parents were both living at the time. [And she had] seven brothers and sisters.

[I was sent to Vietnam in 1969]. [I was with the] III Corps. Basically the Airborne provided a defense for Saigon, and we'd do day missions, and then most every night we'd be out on an ambush someplace.

[I was injured in May] of 1970 when I was with the Light Infantry Brigade. [I had been there almost a year at that point, and] I had about 30 days left in country. One of the fellows who was a senior NCO, he physically detonated a land mine. A Bouncing Betty type which of course, is American made, and...it goes off twice. It goes off in the ground, and then it jumps up about knee-high, waist-high, [and] it goes off again. It throws shrapnel in basically 360 degrees. [So a fellow soldier set it off, and it hit me]. It got five of us, and we were well spread out. It wasn't like we were on top of one another. We were getting ready to set up a night defensive perimeter when it went off. [We were passing each other when it went off]. I spoke to him because he was an E7 Sergeant First Class, and I had made Staff Sergeant E6. He and I were the senior NCOs in the field, and he was coming up the rise. I was going down the rise, and we acknowledged each other, and I was going to probably come back and speak to him, but he detonated it. My legs were knocked half from under me, [but] I was not an amputee at that particular moment. [But] my left leg was so mangled behind the knee that when I got back into an evacuation hospital, they amputated [it]. [The amputation] was a knee disartic, [so it was right at the knee]. My right leg, both the upper leg and the lower leg [had] significant shrapnel wounds. And then I was peppered across the chest and my left arm and across my face.

I had experienced a fair amount of acoustical trauma prior to this incident. One significant event was when my medic [had] everything from his ribcage down blown away, and [another] medic was thrown about 100 feet away. At first we couldn't find him, and then we found him, and it didn't look like it was a scratch, but he was deceased. And that was a significant acoustical event at that time. [So] I have tinnitus that I'm sure is directly related to all the acoustical trauma. Plus just [being around all] the small arms fire [probably hurt my hearing too].

[I was about] 23 [years old when I was wounded]. [I went to a field hospital where they had to remove my leg, and then I went to Japan]. From Japan [I went] to Alaska to Andrews Air Force base, and then I gave them my old address from when I grew up thinking I would get into [a VA hospital near home], [but] I wasn't bad enough for [that hospital] [so they sent me] to [another VA hospital]. That was in probably May of 1970, [and] then I was medically retired in November 1970.

[I developed infections because of my wounds, but none of them had long lasting effects on my health]. I had Hep C. There's only one way I could have gotten it, and that was through blood transfusion. [And] when I was first diagnosed [with] that I was mad. I said them little sons of guns couldn't kill me outright, now they're going to give me this. Well, of course, I talked to a couple docs about what I should do, or shouldn't do, or how long I should wait if I decided to do something. Well, immediately I knew I was going to do something. Of course, that's when [even with] the treatment, they were only giving a 50% chance of killing the virus. And I thought, hey, 50 is better than none. So I knew what I was going to do. [That was in 2001, and I took] the treatment. So that was 48 weeks of chemotherapy in essence. But I decided, hey I've licked the amputation; I'm going to lick this, too.

[I do use assistive devices]. I use a C-Leg which is the best. There are two things I'd fight you over. That would be, you take my C-Leg away from me and take my computer away from me. [The C-Leg has really changed a lot]. I had an old friction knee on the first one, and it was a wooden shin, and it was a plastic socket but a wooden shin, and I mean it was well made. It really did what it was supposed to, and that was to get me up and walking, but you compare it with the C-Leg, and there is no comparison. It's like going like from a Model A to a high performance vehicle.

[I didn't have much difficulty learning to walk with the prosthetic]. My physical therapist at Army Hospital was outstanding. He got my strength up. He also really gave me an idea of what to expect, and lastly and probably more importantly, I was motivated [because when it came to assistive devices]... I had no desire to use...neither crutches nor [a] wheelchair, either one of those for the rest of my life. I use crutches now in the evening once I remove my prosthesis, and the only time I've used a wheelchair is when [I] get breakdown on my residual limb.

[Today, my general physical health is] excellent. It has been so long since I've had any skin breakdown, it's not even funny. Let me find some wood and knock on it real quick. That's just been great as far as I'm [concerned]...[I think my fortune with not having skin breakdown recently has to do with the new leg technology and the luck of the draw]. The sockets, I think, are somewhat better. Obviously, my residual limb has matured, so I think if anything that may have helped. Plus, I keep myself clean, so it's not a hygiene issue, and it never has been a hygiene issue, but hygiene issues for amputees can be an issue as far as if they don't keep residual limbs clean, and you wear a prosthesis you create a wonderful environment for all kinds of things to grow.

[I have phantom pain, but] that has been rare. I've had it over the years. [But] it's extremely, extremely rare. I define [phantom pain] as the feeling that you still have a remaining limb that is missing. [But] that was rare and in the past. I have no sensations of that now. Now at the same time, I can tell you though do I hurt 24 hours a day? Yep. Do I know that I've got a prosthesis on? Yep, I sure do.

[I sometimes experience pain because I overcompensate for my missing leg]. A good example is [that when I am] going upstairs or going up inclines, [I get] fatigue in the sound leg, and sometimes some pain in the knee of my sound leg. Occasionally, I have had pain in my lower back just because of the hips being out of alignment. [That's] rare, [but] it's happened in the past.

I have used my amputation as my weight monitor. I am heavier now than I was when I was wounded. When I gain weight, my residual limb swells, and when my residual limb swells, [it] feel[s] like you're putting five gallons into a four gallon bucket. So my limb loss has helped me maintain my weight. I don't have...Type II Diabetes...and that's not just [something that comes about] because [some veterans are] amputee[s]. If we served in country, it's because of the defoliant that was used...And when I was working, we might get some old boy that weighed 300 pounds and is now a Type II Diabetic and he served in country. Well, the law's the law but gee, you know, you think wait a minute. Does his weight and how he got to that weight, have anything to do with his Type II Diabetes? But again, the law was the law. So [I] would [still] argue in their behalf. [Because the way the law is written now is that if a veteran, who was in country, develops Type II Diabetes, the VA will assume it was a result of exposure to defoliants.] [So] it's presumptive that it's related to the Agent Orange, and all they have to do is show that they were in country for at least 24 hours.

[My emotional health is] great [today]. [But] in the past have I ever had some depression that could be possibly related to my amputation and service? Yes. Many years ago, I slipped and fell, and I did not have my prosthesis on. And rather than throwing my residual limb up in the air, I came down on the distal end of my stump and literally curled the bone back on the distal end. Did I hurt? Yep. Was I confined to a wheelchair? Yep. Did I have a pity party? Yep. And then all of a sudden I said, wait a minute. You're going to heal. You're going to get back on a leg. Get a grip, and get on with the rest of your life.

[I have] not really [had any issues with PTSD]. Have there been times [when I displayed symptoms]? Probably. But any prolonged? No.

[I am not sure why some wounded combat veterans are not able to adapt to their new situation and others are]. I don't believe there's any real one answer to that. I know in my personal situation I came back into a very supportive situation. I had a spouse who was very supportive. Matter of fact, while I was in the hospital—I'd just gotten in the hospital in Japan—and there was a telephone, [so] I looked around, there was no corpsman, and I picked it up, and it was my wife on the other end of that telephone. So I came back into a very supportive situation. I was a little bit older than a lot of the veterans. I had a potentially higher education than a lot of our veterans did at that time. I also knew after I got back to the United States that I didn't want to be confined to a wheelchair. I knew that I did not want to be confined to crutches the rest of my life. I also had two near-death experiences while I was in the hospital, and the last time I told my Lord and Savior that I was going to make Him a promise. I wasn't going to make one of these off the wall things that I couldn't keep, but I was going to be the very best person that I could possibly be if He would just allow me to survive, and I told Him, I said, there's things I want to do and places I want to go, and if You'll let me do that, then I'll be the very best person I can be.

[So I almost succumbed to my injuries twice]. I think [that] was [the result of] everything because after I got back to the United States, I had gotten extremely ill because of weight loss. When I was wounded, I weighed probably 175 pounds. [But after getting hurt,] I had dropped down to 113 pounds, and I was emaciated. I had malaria with the fevers. [So I was taking pills]. It was that big horse pill, the one that was the experimental drug. It could give you a good case of dysentery, and I had dysentery very bad, and it flushed everything out of my system.

Living with the combat experiences, well, like any other veteran, I've got some neat tales to tell. I'm blessed because I did survive, and I think that's the most important thing. I'm not the name on a wall in Washington DC. I came home, and then when I came home, I had an absolutely terrific life. I've never been an alcoholic. I'm not a drug addict. I've never succumbed to that. I don't run around, and [I] never [have] run around with women of loose morals. Again, I'm just absolutely blessed. I've had a great life. I've made a difference in a lot of folks' lives. That's through my employment, plus I was very active with the Boy Scouts of America and was youth members there and within my church community. I've been on a number of boards and committees within the church.

I think what [has] probably help[ed me to adapt is not only that] I was involved with different, various veterans' groups in different ways—but I think the key is you can't look over your shoulder. You can't look at what's behind you. That's history, and we learn from history, and we profit from history, but the future is ahead of us, and if we don't look forward, we're dead in the water.

[The most challenging things associated with my limb loss, over the years, have been] not being able to run and some of the dexterity things that you'd be able to do if you had [limbs, but I can't do them]. For a number of years, I coached youth soccer, and it's awful hard to teach a young person soccer maneuvers when you can't do them yourself.

[When I was wounded, I did worry about how my wife would respond]. And when that phone rang, when I was in Japan, it was kind of like, mm, how much does she know, I asked and hem and hawed and asked, and [she said] oh, yeah, I know. I know everything.

At the time, I probably didn't [think it was important that she be able to adjust to my new circumstances]. I think the initial yes, I know, and that's okay relieved a lot of that anxiety [I had concerning whether or not she would be able to deal with my injury]. And when the back of that ambulance pulled into [the] Army Hospital, and I was on a stretcher on the floor of the ambulance, and I was trying to raise up and look out the front window to see what was happening, and the next thing I see is two little heads bobbing around this door. It was my wife and my mother. So they were at the hospital. [And the support my wife has provided me over the years has been] phenomenal. We just supported one another [over the years], but it's just been wonderful. [And if there are] things that I've wanted to try, [like] snow skiing, [I try it].

[We went skiing] in the Poconos and had a blast and then one skiing trip in the North Carolina mountains. [But] I swung wide to hit a lift line, and I hit a rock, and it threw me face forward, and the first thing that started hurting was my sound hip, and I got up—because it was late in the day—and said well I'm going to make the run of the day, and after that I said, you know, maybe you need to re-think snow skiing, and I didn't ski again. [But I did do it, and] it was a blast. My children learned [to ski too, and] we'd go on ski trips.

I'd say [my wife was the most important person when it came to providing support over the years]. And the next would have been my physical therapist [who] got me ready [to use the leg, and function with it]. He got me ready from a physical therapy standpoint. I knew enough of what to expect when I got the limb, and one of the things I'll never forget [is] when he [first started] working with me. [He said] one of these days I [will] be able to lay on your stump, and you'd be able to throw me off. And I thought to myself when he said that way back when, yeah, right. [But] one day, I knew I could do it, and I looked at him, and I threw my stump back. And I looked up at him, and I said Marty how about laying on my stump? And I lifted him off, and everything else was a piece of cake from then on out.

[My mother responded well to my injury]. She did real good. [I] wasn't able to see her as much while I was in the hospital, but she did real well, and [there was] no handwringing or any of those kinds of things.

[And when I was in the hospital], I was not [on the amputee ward]. I was the amputee in the big booby prize. And then when I got so sick, they took me off the orthopedic wing and put me on the general medical wing, so I had no wounded vets over there. But there were four of us. We all had infections, so they kind of isolated us from the rest, and there was one in each one of the beds in all four of the corners of this big ward. We'd have spit ball fights at night after lights out.

[Concerning peer support] there was no, well, he's an amputee [we need to give him special help kind of attitude]. There was none of that. I was the Scout Master for a Boy Scout unit, and my

scouts knew I was an amputee, but that didn't stop me from doing whatever I wanted to, and I was just another adult.

My spouse [was the one who played the caregiver role]. I broke my left humerus, [and] I couldn't put my leg on by myself. I stumbled and fell into the corner of a refrigerator, and I heard it pop, and I thought, man. [So she stepped up and took care of me] because I literally couldn't put my leg on. I couldn't get myself ready to get in a bathtub, the whole nine yards.

[I have run into situations where people do things intending to be helpful, but they end up doing too much]. Most of the times, I tell them—unless I absolutely need something—I say, fine, thank you I can do it or what have you, or if I need something, I'll say yeah, you can help do that.

From what I gather, they're doing a lot better now [than they were in the past concerning taking care of wounded veterans]. A good example is I was scheduled to go to the hospital. They had a bed lined up for me, and all I could think of is man, we're going to have a great time. [I could be] riding horses, snow skiing, you name it, we're going to do it. And then the registrar at the hospital...said nope. We're going to do all of Wade's work right here, and I immediately found myself at the VA hospital in [my home state]. A key there is they've got to make sure that [veterans] get the assistance that they need. Both the physical therapy, to show them and help them [adjust physically], and the emotional therapy, to show them that they can do it and that there's a lot of help out there. But they've got to pull themselves up by their bootstraps. They've got to want to do it. [And there wasn't a lot of emotional therapy for me when I came back]. Not in my situation.

[I do think it would be helpful for the VA to include spouses and girlfriends in the emotional therapy.] I think both [to] help the spouses deal with their own emotions, [and] also [to] help train them, so they can deal with their spouse's emotions. That's the key I guess. Education! And I don't know what kind of medications these young folks are receiving for pain, but I'm sure it's some really high-powered stuff. [So] education [about being addicted to drugs could] help them deal with the potential addictions later on in life whether it's illegal substances or alcohol and what they can do about getting help for their spouses if they get into those situations.

[A lot of Vietnam veterans turned to drugs]. And they didn't have to be wounded. A lot of them self-medicated to avoid thinking about some of those situations, and then I saw some fellows through my employment that self-medicated, and they were the folks that believed they saw things or believed they were in situations, and I'm sure to them they were. But they weren't in the same situations as a true combat veteran, and yet some of them self-medicated with either illicit drugs or alcohol.

The first thing, I'd tell [combat veterans of today's wars] is that there's been a whole lot of folks that have come before you that have dealt with it. That's the most important thing. You can deal with it. The key is the rest of your life's in front of you. Grab it. Take a hold of it. Go for it. Try things. If they don't succeed, try them again. Get out there, and get involved, and do things bigger than yourself because if you don't you're going to, you're just going to have a real tough time.

I can't think of a thing [that could have been done differently to improve my health and quality of life today]. If I wanted to try it, I tried it, you know, except maybe jumping out of an airplane as a one-legged guy, but if I had wanted to do that I'd have done that.

[It's] a good question [as to what the military could have done differently when they treated me]. I feel I've been blessed. First, I'm not the name on a wall. I've got a real long residual limb, so I'm able to deal with a prosthetic appliance a little bit differently than somebody who's got a real short residual limb. That's a good question, [and] I [really] don't know [what they could have done differently]. If I had been able to get to Fitzsimons Army Hospital, would I have been different today than I was back then? I don't know. That's a good question. I know that I knew for myself that I had the rest of my life in front of me, and if I kept looking back over my shoulder, guess what. That was not going to work.

[I don't think there is anything that my wife or family could have done differently either].

[In helping current veterans], I think today they've got to be reinforced that they can do it. That they can go on with the rest of their lives and that they can do it. They can make a positive difference with others around them. They can go on and have a work a day career, and do it. Are there going to be challenges? Yep. There sure are. But they should be given the skills to deal with that, and that's both from an educational standpoint to help them get back, rejoin a workforce, and obviously from the rehab standpoint. And then as you've alluded to, the VA has got to step up and say okay, now that you are our responsibility—you're out of the military—now it's your responsibility that we're going to do everything we can for you from both your prosthetic needs, and/or if you need the emotional needs, we've got to do something there, and if you need the occupational therapy needs, we've got to do something there. And give them those skills to, coping skills; help them with this coping skills. Let them know that, or they need, you know, they just continually need to know that just because you're an amputee doesn't mean—are you different from other folks? Yeah, physically, but are you different otherwise? Nope. You're not different otherwise.

Profile of Mr. Greg Dugan (Below the Elbow)
(Original Transcript 25 Pages)

Mr. Greg Dugan lives in the mid-Eastern region of the US. He enlisted in the Navy in 1959 and was injured in Vietnam in 1961. In addition to his amputation, he also suffered a head injury. He reports his current health to be very good. He also reports experiencing phantom limb sensations. Mr. Dugan is married and has three adult children. The interview was completed on August 4th, 2010. This is Greg's story.

[I was born in 1940] in a little community up in Western [state name] .

When I got out of the military, I availed myself of the GI Bill training, and it was the type of thing where I don't have any specific degrees, but I had an extreme amount of specialized training in the field of prosthetics and orthotics and rehabilitation.

[I am] married. It will be 50 years next year. Have three children—two sons and a daughter. My oldest son is about 44. My [other] son teaches industrial technology in the school system, and my daughter's a dental hygienist. They've all been married for a period of time. The oldest boy has two sons, and my [other] son has two sons [as well]. So I have four grandsons.

I'm a life member of the Disabled American Veterans Association. They helped me with a claim years ago where the VA got me a lot of back money that really helped me from financial collapse. I belong to the [ship organization]. That was the ship I was aboard, and I'm a member of that crew association.

[I entered the military in] December of '59. I joined. The community, I lived in, was a community that had a small population. There wasn't much business opportunities, and I grew up around World War I and World War II veterans. Several people were Korean veterans. It was clear to me that if I was going to get out and see the world or learn anything, [I should join the military]. I'd always been interested in the Navy, and [I] read a lot of books about naval history and that sort of thing, so I figured the Navy was the place for me to go. So that's what I did. I was riding down the street on my motorcycle, and a friend of mine happened to be standing on the corner in his uniform, and he said I've got somebody I want to introduce you to. So I parked and went in, and it was the Navy recruiter. So from there I went through the processing system. [And] I [opted to be a] torpedo man because it was a rate that would allow me to do all kinds of different type of work on the ship. So I spent sixteen weeks in [state name], and went to torpedo man school, and came out of with what they called the Stryker badge. And they taught us enough there in the school to pass the third class and the second class exam. So when I went aboard the ship, I was assigned to the torpedo gang as they referred it. And the first opportunity to take the test, I took it and passed it, so I was a third class torpedo man, and I was stationed aboard the USS [boat].

[I was injured] in [the fall] of '61. I think the date was October 29th. My wife remembers [the date], but I don't. [She remembers] because at the time I was injured, one of my good friends and the chaplain came over to the apartment where we lived, and she thought I'd been killed. We'd been married two months, and she'd only been in town two weeks, and it was the type of thing where she thought I was dead. And of course when they told her that I'd only lost my hand, she was greatly relieved. And at the time, I think she had 47 cents total, and it cost 40 cents to go through the tunnel to the Naval Hospital, [so] they got money out of the emergency fund on the ship, and two or three

other fellows that were friends of mine—who I still keep in contact with—made sure she had money and food and gas for the car. Whenever they were in, they would always touch base with her because in that day and time, the only thing you had was mail and maybe a rare phone call, but there wasn't anywhere near the level of communication that we have today.

[At the time of my injury, my immediate family was] my wife, three brothers, and one sister, and [when I was in the hospital], I was in [one state], and my sister was in [another]. My brothers were in [a third state] and my parents were still alive at that time and they were in [the same state as my brothers]. [But they didn't come down to visit me]. I think the only visitors that I had when I was in the hospital were my wife's parents and some of the people on the ship. Some of the crew members came over, and [I think] the people that lived next door [to me, and my wife visited me]. We were friends. I used to dive, and the guy next door to where we rented ran a diving shop, and him and his wife came over and visited me, I think.

I have a residual limb that is about six inches below the elbow. Essentially, I [was hit by] an explosion of an offensive grenade or it's a artillery simulator. It's a half pound shaped charge of TNT covered with waterproof paper. It had a defective fuse assembly in it, and when I threw it, it went off as soon as I released the safety lever, and it blew my hand off, fingers and thumb and there was fragments of bone up above my wrist. So they took it off above the wrist, so that there would be less likely problems as a result of infection or sensitive areas. I had the benefit of excellent surgical attention. But what happened to me was something like you would see on television in that you had the injured person, and there was two helicopters in the air, and one of them was getting in some flight time, but one of the members was a doctor, so they lowered the doctor down on the ship, and he took a look at me. [And] they were going to fly me to the Naval Hospital. So they put me in a Stokes litter, and you got to remember this is in November, and I had on socks, a light pair of jeans, and a tee shirt. They put me in a Stokes litter and put a thin, wool blanket over me, and I was hanging onto an IV, and they lifted me off the back of the ship. Once they got me up in the air, this Stokes litter wasn't balanced correctly, and I was several hundred feet in the air, and this stretcher was tipping kind of head down. I could feel I was sliding, and there was nothing that I could do about it. I couldn't hang onto anything, and of course, I was pretty well battered from the explosion at that point in time, and they pulled the litter up underneath the helicopter. The guy that was running the wench took a hold of the side of the helicopter and swung out and kicked the Stokes litter, so it would swing around and come out from underneath the helicopter, and then ran the wench up and got me in. So I flew from someplace out off the Bay to the Naval Hospital with the door open on the helicopter flying probably 70 or 80 miles an hour, and as we started to land at the Naval Hospital, the helicopter ran out of fuel. The engine quit just a few feet above the ground, and they got me out of the litter. Because they didn't know the extent of my injuries, they didn't want to give me any pain killer, but they put a piece of gauze in the corner of my mouth, and [I] would put a little bit of water on it because I was extremely dry. My mouth and my tongue were just absolutely parched. Well, somehow in the process [the gauze] got in my mouth, and when they went to do the surgery I aspirated on the operating table. That means the contents of my stomach was in my trachea and down into my lungs, and I don't know whether I was combative or what throughout this whole process, [but] when I woke up the next day I had, the inside of my mouth was just beat to pieces. I was having trouble breathing, I had trouble seeing. It was just like a freight train running through my head. I mean literally just like that much clatter in my head, and I think that for the first five days, I probably ate maybe the equivalent of one portion of food [and] maybe just a tiny bit of water.

I had a burn on the side of my face that ran from right below my ear kind of up towards my eye, and I had perforation injuries. But actually when you looked at, when I saw other patients in the hospital

that had been involved in lesser calamities there was a number of them that had a lot less injuries than I did because I have impaired hearing in that right ear, but I didn't have any injury to my eye and the pieces of that waterproof paper that were blown into my face finally came out, so there's no scarring or no burns or anything. But there was a young fellow that went to a training activity, and he got a hold of one of the fuse assemblies like I had [with] this particular grenade, and he didn't realize that it was live, and he pulled the pin out, and when it sparked, he said the safety lever flipped off, and he pushed it away from him, [but] it was too late. He had a burn on the palm of his hand which necessitated the amputation of his finger. He had a broken ear drum. Part of the detonator mechanism clipped off the bottom of his ear. He had brass fragments from about mid-chest to his forehead which meant that in later years, he'd probably have traumatic cataract in both eyes, and the bottom of his [was] ear clipped off. But that's the type of thing where he would have had what I considered more severe impairment than I did because I didn't have any problem with my eyes. You've got to remember that this whole environment was nothing like, there was no OSHA [Occupational Safety and Health Administration], [and] nobody understood ergonomics [or] that sort of thing. So you had some safety rules and instructions, but you lived in an environment and worked in an environment that was like World War II.

I wear an arm fulltime, and I've got different terminal devices, different hook type things. I've got hands. [Because I] work[ed] in a prosthetic shop, I had access to whatever technology. I have a set of tools where you can plug in ratchets with sockets and screwdrivers and hammers. So I can do mechanical type work, low profile hacksaw and various other things. A lot of stuff, I made myself. I have an adaptation of a hunting knife. I have a canoe paddle. I have a golf club. It's mostly for miniature golf when I was playing with the kids. I've got fire arms. I've got a number of different modifications depending upon the type of firearm and the type of shooting. I've collected upper extremity devices, so I probably have the largest collection of upper extremity terminal devices east of the Mississippi. I used to say that kind of facetiously, and then a couple of years ago, I got around to calling a lot of these museums and short of the Smithsonian, I think I do have more, and I have copies of about 100 patents as well that follow those because I'm going to put all [my home made devices] on a website. That's another project I'm working on. It's going to be called the Museum of Upper Extremity Prosthetics, but historically, there's always been little adaptations or gadgetry or techniques that I've used to do a variety of functions.

The one thing that I did do was that I got a low force steering system for my vehicle because my left thumb joint, and my left shoulder has been worn out due to overuse over the last number of years. I got the VA to install a low force system, and it allows me to drive without much strain. [For] example, before the vehicle had that modification put on it, if I drove, it was about a day and a half before my left arm had kind of straightened out to the point where I could begin to do anything and on longer trips. That's about a six hour run from here. I could feel the strain clear over in the middle of my chest, but since I've got that low force system put on there, it's been an absolute lifesaver.

I have Blue Cross Blue Shield, and I carried it over from the VA. I also can go to the VA as well as I'm eligible for TRICARE, and I have Medicare. I usually go to the VA hospital [for my healthcare]. So I have three, actually three insurance systems that I have used very successfully because my wife has [health problems]. She's a diabetic, [and] she's had a problem with neuropathy in her feet and a non-healing diabetic ulcer on one foot. So for the last five years, we've been working with that, and then in the last year and a half or, so she's been on a scooter to be non-weight bearing to get this one area on her foot to finally heal up, and it's doing very well, but she's had several hospitalizations, she's had two surgeries. I hooked her up on a PICC line at a minimum of 95 times. I do a dressing change every day as well as help her with other tasks around the house [that] she can't do from her

scooter. I learned a lot of valuable stuff when I worked in the hospital because I wasn't just your average paper pushing bureaucrat. I worked a lot with the professional staff, so I knew a lot of the stuff that went on, and of course, you work with podiatrists, and you deal with diabetics every day, and I did. [So] I could do casting for custom molded shoes, or I could do the casting and the measurements and everything for the custom orthopedic shoe as well. So [I had] all that [informal] training. I used to tell people if you could fit a below knee limb then you could do orthopedic shoes without any trouble at all.

My health has been generally good because I'd always been active. When I worked for the VA, the bulk of those people were World War II and Korean veterans. Most of them were smokers and drinkers. [And] I'll drink a bottle of beer with a plate of spaghetti or something, but I don't do any recreational drinking, [I] never have, and [I] don't smoke. But it's the type of a thing and those guys that held [a high stress and sedentary type of job] that position were smokers and drinkers and about in about a year and a half [around 1970] probably I'd say 10 or 12 of those people either died of heart attacks sitting at their desk, or they had to take disability retirement as a result of quadruple bypasses or something of that nature. I mean they were knocking them off one right after another. One guy was going to work on a Saturday morning, had a heart attack, and dropped dead in his driveway. Another guy, they came in Monday morning, and found him sitting at his desk. He had been in there working over the weekend, and had a heart attack, and died sitting right in the chair. So, it was clear to me that their old habits [were] taking a toll on them, and I had three small children, and we were always doing something—camping with the kids or whatever—and I took up caving. I did that off and on for a number of years, and then I also backpacked on the Appalachian Trail. So it was a type of thing, [and] they usually match me up with doctors, because I don't have any real specific needs, [so] they usually hooked me up with some greenhorn resident. And the last time [was] the first time I ever saw this guy [and] I went in, and he said when did you have your last heart attack, and I looked him right in the eye. I said, "I haven't had a heart attack. Don't plan to have any. Why do you ask?" He made some fumbling answer, and I said, "Look, I've been getting service out of this system for over 40 years, and I'm expecting something pretty good out of you." I thought the guy was going to fall out of his chair. But, anyway, that's typically how I deal with those greenhorns. I try not to be too hard on them, but it's clear that they're inexperienced, and I know the system, and sometimes I can kind of give them feedback that will guide them along a little bit. But I hadn't been hospitalized since 1961 [when] I had a prostate biopsy that got infected, and so I spent five days in the hospital with that, but everything's clear now, and I'm doing fine.

From time to time, I do [have pain in my residual limb]. I think it was about six or eight years before the phantom limb kind of settled down, but if it's cold and damp and there's a storm system coming in and I'm kind of feeling a little bit run down, kind of flu like symptoms, then it kind of bothers me. And I just usually use an ace wrap, put an ace wrap on it, and drink something that's warm, you know, like Ovaltine, or eat something that will warm me up. Put on some additional clothing, that type of thing. Turn the heat up a little bit. I've used a TNS unit. There was a Japanese company that made a magnet system that was called Nikken, and I had a chance to work with a Nikken system one time, and I used that, and that relieved the really painful phantom limb. It pretty well cured me for like a year and a half. Used it like two nights or three, and that was the end of it. I've never experienced anything that was that successful in relieving phantom limb. Of course, I talked to the rehab doctors about it, and there was no real research at the time, and magnetic therapy or electronic therapy of various types was something that came along in the latter 1800s, and then it came back in the fifties, and most of the people that were in the medical field had been told that these electronic devices didn't work, and the charlatans usually peddled this stuff. So the average physician that you run into doesn't have much experience with it.

I tend to be optimistic [when it comes to my emotional health]. I'm sure there's been the times when I was working because of all the stress, I had depression. Bound to have it with all the unrealistic goals that were put on and plus all the responsibility for not only personnel but people, that sort of thing. But it's the type thing where I have generally done pretty well in that regard. [And] right before I retired, I had five different things wrong with me at the time. I had a torn muscle under my shoulder blade. I'd have to go back and look and see what it was, but I had five little individual things that was wearing me out. I had sleep apnea plus stress plus the torn muscle under my shoulder blade. I think I had some problems as far as my stomach was concerned with gastric reflux, and when I came home one day and they'd offered me a buyout, that was a thing that was going on at the time back in '97, I told my wife, I said is there any way we can survive this retirement financially. I said I'm just beat down. I'm just crawling to work. And she said well I think we can figure it out somehow. So I took the retirement, and I spent about a year just specializing in all these various ailments. I had surgery on my nose, so I could breath better because I'd had my nose broken a time or two, and I figure out as far as my shoulder was concerned and all the rest of this stuff, and I had zero structure. If I could sleep, I'd sleep late. If not, I'd get up and do something early on. I had no structure whatsoever, and when I went to work, I actually went to work at a cemetery as a family memorial counselor, and that was part time. It was Monday through Thursday, and that allowed me to get structure, and kind of get on the ball and meet people and work within a kind of a corporate structure, if you will. And I remember one time I don't know what we had going. It was probably Memorial Day when we were out in the cemetery, talking to people and finding grave locations and just solving problems for them, and I worked 13 days straight. I told this guy, I said, I'm glad I've only got a part time job. I don't know what I'd do if I had a fulltime job. But the driving—and that was before I had any power assist—because I did a lot of driving in the community and around the cemetery talking to people. It just got to the point where I'd come home Thursday evening kind of worn out, and it took the weekend to recover to get back Monday. So I just went to the doctor and told them that I was just wearing out. So they wrote a statement, and I just retired from the cemetery. So I retired from the Navy, then from the VA, and then from the cemetery, and I've been mostly looking after my wife since then.

I don't know [what has been the most challenging thing associated with my limb loss over the years]. Most challenging? I think it was the attitudes of some of the people I worked with which really irritated me. They figured that I really didn't need a job because I was getting compensation, [and] I was taking a job away from somebody else that probably needed it worse, and the one guy told me if it wasn't for the goodness of the heart of the company I was working for, I'd be out on the street shining shoes. Of course, several years later, he came back and apologized profusely and begged my forgiveness and everything else because he finally saw what I was doing from another perspective. I was working for the Hanger Limb Company [at] the time. I'm sure that guy [is] probably dead and gone now, but it was attitudes of some of the other workers because as I recall in that particular group, I don't think any of them were veterans, and they didn't understand the big hoopla, if you will.

My wife [has been particularly supportive of me over the years]. There's been other people [that are supportive too]. There was a fellow when I lived in [state name][who] was very helpful. There's been others in that same category, and there were a few that knew I had an interest in doing something, and they would let me do it. You know, like I did some automotive repair and some motorcycle mechanics. I rode about 40,000 miles on a motorcycle after I lost my hand. And I dove. I used to be a scuba diver, that sort of thing, and that was all stuff that I wanted to take up. Now probably some of the most hardcore people, I ever encountered was the profession staff at [B] Naval

Hospital. I spend 30 days at h [A] Naval Hospital and then went to [B] Naval Hospital. My understanding [is] that that facility has since been torn down. But that was one of the worst places I'd ever been from the standpoint of a physical facility. [A] Naval Hospital was like the Holiday Inn by comparison. The only place that we saw any cockroaches or any mice or anything was in the mess hall area and the housing that we had was temporary structures that were set up for the World War II people. It looked like it hadn't been painted, and I think they were probably the same beds. I mean it was kind of a dilapidated facility, but I don't think physical surroundings make that much difference in that particular environment, but it would have been nicer if it had been a little bit more up to standards.

I've always been somebody that was interested and curious about stuff and wanting to do things. Do you have any idea what a bicep cytoplast is? Well, I have a surgical tunnel through that, and there's a pin that I put through there, and I can use it to operate an arm. Then I have a conventional arm. Are you familiar with conventional limbs at all? Well, that's what I'm wearing. I've got a figure-9 loop harness and a Muenster style socket with a Sierra two-load terminal device. That's what I wear. I don't use the cytoplast arm any more, but that was a whole surgical procedure and a whole different kind of an arm system that I wore for many years. And then of course, I had the myoelectric, you know, the powered ones. But when I was fitted with the arm, [I] had to do all this exercise and all the various things, and then they were going to teach you how to use it. Well, they had a printing press, but they didn't have any paper for it, and they had a band saw, and I was familiar with the operation of the band saw, but they didn't like to use that because it made too much sawdust. And there was two or three other things around there that was fine. It became clear to me if you wanted to play checkers and sit around and read the newspaper that was the level they wanted you to function at, and occasionally, this one therapist would get out this book of upper extremity prosthetics, and just say well if you have any questions, you can ask me, and I'll look it up. I said, I'd rather read the book. No, I couldn't do that. Well, when I had the opportunity, I got two of those manuals. I have two in my upper extremity collection. I have a lot of books and literature and stuff I've collected over the years. But it was the type of thing where not only did I have the 1954 manual for upper extremity prosthetics, I had the 1967 manual, and probably even newer than that because I read all that professional literature. But you had a person that was almost downright hateful on occasions when you wanted to do anything. And I talked about wanting to ride my motorcycle and dive and stuff like that, and they just told me I was crazy. Only somebody that was mentally ill would want to do anything like that. So as far as people that maybe were putting forth disincentives instead of encouragement were some of the people that were part of that professional staff of that organization. So at the time [it] was quite irritating when you had to put up with these people that had all these negative comments. But [then] you get a [person], like Willie Smith. He was the guy that ran the dive shop. He'd let me do anything I wanted to, but he'd say now you've got to be careful about this or that and the same way with this fellow, Ray White. And there was others. There was a number of other people that were willing to allow me to learn things, or they'd teach me how to do things, and that's what I was looking to do, was to learn more and get out and do things. I knew I was going to live another 60 or 70 years probably, and I didn't want to be just a total deadbeat.

[My wife] was glad that I wasn't dead, and if the only thing was wrong with me is, I had my arm missing that wasn't going to be a problem. She knew that somehow we could work it out. I mean that pretty much has been her attitude all the way along. [She would] tell me to take the trash out whether I wanted to do it or not [because] if I had one good hand left I could take the trash out. Or when [there were] periods of time when there was something that I needed to do or if [I] wasn't feeling well or something, she'd jump in and try to fill that gap. You know, make sure that the kids were looked after, and that things were organized, and try to keep the schedule on the home front

here because when I was working there was a time that I would be gone for two weeks, and I could always count on her. I could call home and talk about how things were going, and it wasn't the type of thing where she was a helpless type individual that needed my constant support just to get through the day. We didn't live a soap opera kind of a life.

I don't know [if she was ever well-meaning, but that wasn't what I needed at the time]. Well-meaning but not what I needed. I don't know. I'm not sure I could come up with anything. I don't think I ever remember anything like that. Certainly nothing that comes to mind....I think we've always been on good terms, and it's the type of thing where I think I've been more supportive to her as time has gone by. Like when the kids graduated from school and went off to live on their own, she kind of had the empty nest syndrome. So I would think up things to do or know that she was interested in a particular topic so we'd try to get focused on something that was a little bit more positive for her. When we had a chance, we'd go and visit with [the kids though] because she had a very strong mother kind of a circumstance. She's always concerned about her kids even though they're adults and had families of their own.

[My father] never said much. My mother, she never got over the fact that I had an amputation. She just thought that was the most terrible thing. Years later when I'd be around, sometimes she'd start crying. Of course, she was [very old]. She was born, I think, before 1900 as my father was, and she graduated from high school in '23 and got married in '25. She was born right around 1900, I think. I'd have to go back and look at my genealogy sheets to know. [But it was something that was] extremely [difficult for her to deal with]. The way it worked out the Navy personnel called the Navy recruiter, who lived in the area where my wife did, and it wound out the Navy recruiter lived next door to my wife's parents, and that's how they got the word that I was injured and in the hospital, and then they contacted my wife, and she called my parents. That's how they found out. But apparently [they] sent a Navy recruiter over to give my parents some kind of a letter or something, and she was verbally abusive to this guy and told him to get out of the house which but when I say she didn't take it well, she didn't take it well. [And] we used to talk to her on the phone and [through an] occasional letter, that sort of thing, but there wasn't a whole lot of communication because we lived a variety of places [and] moved around [a lot]. We had different apartments. We moved around [and] there was periods of time when we didn't even have a telephone.

[My children] grew up with me working with them from [the time] they came home from the hospital; feeding them, and changing their diapers, and playing with them, and all that kind of stuff, so they just grew up around all this menagerie of stuff that I was doing. And they saw me working with hooks, and doing stuff, and showing them how to do things, and it's been one of those things where they were exposed to me, and some of my friends who had various levels of disability. So it was the type thing where they just kind of grew up with it. My son that teaches industrial technology is always on the alert for some kind of gadgetry, and they had a school project, and there were some kids that had some kind of a tool adaptation for upper extremity amputees. Now, I haven't been able to get all the detail on that, but he was going to collect that information [and send it to me]. I've got people that mail me newspaper clippings or magazines that has stories about people and technology and gadgetry and all that sort of stuff in it, and I've got a big collection of that stuff too. I'm always looking for something new in the field of prosthetics that I'm not aware of, particularly upper extremity prosthetics.

I'd say [my siblings] were [supportive at the time of my injury]. My sister's an RN, and my three brothers could see me doing stuff and knew about what I was doing, and occasionally I'd get one of them—[who] was a pattern maker—[to] make stuff for me. He had the capability of being a

machinist, so sometime he'd make gadgetry for me, that sort of thing. So I'd say that they were supportive as well as some of my other friends that I had. If I needed a special adaptation to a tool, I'd explain it to them, and then sometimes they'd make another suggestion that would be better than what I was thinking, or they'd build a device, and I'd try it to kind of prove the feasibility of it. When I say I'm proving the feasibility of it, an example would be, I made a modification on a shovel. Now, you could use the shovel, and I can use the shovel. So it's not so highly specialized [that] I can only use it. And I dug dirt in the back yard, and filled it with sand, and then laid bricks in it [as] a place to park the car because we didn't have a place to park on the street in front of the house. I dug enough, so that I wore out a round point shovel that actually had a concave end on it when I got finished digging with it. So I got another shovel that's got the improved modification on it, and I've had it since at least 1980, and I'm still using it in the same configuration. [And I've got a] canoe paddle [that] is a similar thing. I'd tried one or two and finally got one and made the modification, so if you want to paddle a canoe, I can go get my paddle, and we can go today, you know, that sort of thing.

Other than my wife, I'd say no [one that I've mentioned as being supportive has taken on a caregiving role in my life]. I don't think [I ever noticed any stresses that affected her ability to care for me]. I mean, she was always energetic, and very busy, and intelligent, [and] involved with the kids when they were small and at school and church and all that sort of stuff. She says now, that she kind of feels like she's kind of a slacker because before she was involved in [a lot]. She sang in the choir, taught a children's choir, and had a Sunday School class or something back during the era when the kids were small. We get up Sunday mornings and get around to go[ing] to church, and she'll say well by this time I usually had a pie baked and something ready for dinner, you know, that sort of thing. [So] she notices it's different in her ability to do things and thinks she's kind of slacking off, but I tell her it's okay. It's alright to slow down a little bit because she made up for it years ago. When we lived in the [city name] area she would get up in the morning, and get breakfast, and get things going, and get the kids started, and then because of where we lived, she'd have to take them off and drop them off at three different schools, and then go back, and pick them up in the afternoon, and wind up doing the grocery shopping, and have supper ready, and all the rest of that stuff. I mean she had excellent organizational skills, but in later years, she's kind of slowed down a little bit. And we got food poisoning at Pizza Hut, and she had short term memory loss. So that's been over three years ago, and she's back probably 95% in that standpoint, but like I said, she's been on the scooter for a year and a half.

I think having a good wife and kids has been a large part of [helping me live with my combat related limb loss] and then worked in a system where I had guaranteed benefits, if you will. I knew I could get vacation. I knew what my pay was going to be. I knew I could get training. I became familiar with the people I was working with. You know, there was certainly a degree of stability. Even though there was times at work when there was a lot of stress, there was certain parameters that you could work within. That was something that was being pretty consistent over the years. I could count on my wife. If she said she was going to do something, something would be pretty well taken care of unless she run into a calamity, you know, of some sort like the car broke down or something.

I think I'd tell [veterans of current wars who have suffered limb loss] to learn as much as they could about their various health conditions. I think I would tell them to learn as much as they could about any prosthetic appliances they use. I think that they should learn about what's available as far as veterans' benefits, and what's available as far as support systems in the community. There's certainly that sort of stuff. Get your education. Go to school on job training. Get the best education you can. I mean those are the things that I think of right off the top of my head.

[Concerning social support], there's certainly going to be the time that you'll benefit from it, and there are a lot of systems out there that are designed to help people with disabilities, and I think there's the time when people get kind of frustrated because of the bureaucracy, but it's a type thing where you just keep working it. You just don't give up and lay down. I know some people do, but I think it has a lot to do with maybe personalities of the individual. We had a certain percentage of veterans that they were willing to work at a job, and they were willing to go to school, but it had to be right there in their own back yard, and if it wasn't right there immediately available, the only thing they were going to do is watch television and drink beer and sit around and do nothing. The ones that were up and doing things were doing them. I think there was very few of those that anybody ever got to them and ever got them motivated. It was rare that you'd ever find one of the sitters that ever got up and started doing things.

I've had a lot of really good people to deal with over the years. Some difficult people but it's the type of thing where I've had a natural interest and curiosity in things, so I've been willing to spend the time to learn about stuff that interested me. When I graduated from school, I had [an] art and science major, [and] in order to graduate you had to have a 70 average. I only had a 70.1 average, and I had a chance, we had a 50th anniversary high school reunion two years ago, and [our] advisor was still alive. I never thought he'd still be alive. [But] I called him, and got him on the phone, and I told him, I said Mr. Klus, I said I'm a much better student now than I ever was in high school. Certainly after I got out of the service, there was all kinds of areas of things that I was curious about, and had an opportunity to explore, and since I retired in '97, it's the type of thing where I've even had more time to look at more things and develop ideas about stuff. Take up new interests. That sort of thing. I don't do recreational reading. It's rare that I'd ever read a novel. There's too much stuff about real people and technical stuff that I'm interested in that I want to learn about, and of course, a lot of this stuff I pass on to my grandsons, or anybody that's willing to listen to me. That sort of thing. But it's always been an ongoing interest.

It's like this business with computers. I took a beginner's course as far as computers. I never picked up computers to amount to anything when I was working. I'm not very fast at that type stuff, but I want to do this upper extremity information. The title for the website will be the museum of upper extremity prosthetics, and I've got a camera, and I've got a light system, and I've got the software on the computer, and I'm going to not only put the terminal device on and explain what it is, [but] it'll have that link to the patent, so you can look at the patent because I've got a huge amount of upper extremity information that I've collected, and there's so few people that know anything about it. I've probably never met but maybe two or three people in the last 40 years or better that have anywhere near the insights into upper extremity prosthetics that I do, and I don't want that to be lost.

Profile of Mr. Marvin Tierney (Below the Knee)
(Original Transcript 26 Pages)

Mr. Marvin Tierney was born December 4, 1946 and currently lives in the North Eastern part of the U.S. He was drafted into the army and injured in January 1968. He is a left below the knee amputee. He reports his race as White and his overall health as good. He also reports currently experiencing arthritis, back pain, stump pain, and other bodily pain. He has been married twice and has four children. The interview was conducted on July 21, 2010.

This is Marvin's story.

I'm [currently] a manager of transportation and petroleum [at a local company]. [I am] married, [and I] have four kids. I have three girls and a boy. [They are] 39, 35, 33, and 23, [and] my oldest daughter [is] from a previous marriage. [The first time I was married was in] 1967. [I got married] three weeks before I went to Vietnam. [And the second time was in] 1972.

I belong to the DAV, the VFW, [the] American Legion, the Purple Heart, and [I also belong] to the Charlie Company, # Infantry Division. Ten [or] 12 years ago I got on the Internet because I hadn't heard from any of the people that I served with in Vietnam. I left [the system] kind of quickly, naturally, and never saw them again. So I started hunting for people that served in the Infantry Division in Charlie Company, and after about a year or so, I found a website that was the [our group]. We were linked up with the Navy in the Mekong Delta, and I went to one of the reunions that they had which was all of the Division, and I found a couple guys that were involved with the Charlie Company reunion, and I started going to them and seeing some of the guys that I served with.

[My current health insurance is] Blue Cross Blue Shield, and I also have it through the [VA, but]...I go to VA as little as I can...because I don't like their service. I just think it's substandard, and I just don't like the way that they treat veterans. There's some people there that do a good job, but there's other people there that [don't do a good job, and] I'd [just] rather not be there.

[So] most of the time [the health care I receive] is private. I just recently had back surgery, and I had a private doctor do it. [But] anything that has to do with my leg [or] my amputation I go to the VA, and I go to [a private prosthetic company to get the prosthetics for] my legs.

I was an acting sergeant when I was blown up. I didn't have enough time to be a hard sergeant. Spec 4 was the highest hard rank I got, but I did act as a sergeant for about the last month I was [in Vietnam]. I was blown up on New Year's Eve day around four o'clock in the afternoon. Our company was running the Mekong River, and our company was supposed to go into a village for New Year's Eve because there was supposed to be a truce fire. [But] our colonel decided he didn't want us to go into [the] village because we had a reputation of being kind of crazy. [So we] set up on a river bank in an old VC base camp...and they told us that our squad had to go out on a search and destroy mission to get a position set up for an ambush. And...[we] found a grenade round in the ground which was from an M79 grenade launcher, and took a fuse, and blew that one up, and the third one got me. They said that they think that it may have been command detonated. In other words, somebody in the tree was pulling the wires because I had my sergeant stripes on my collars—like we wore those black sergeant stripes, and the black had worn off, and they were bronze, and they think that they might have thought that I was a lieutenant, and they hit me because I was the ninth guy in the line on the same path. All I can remember is going up like 10, 15 feet in the air, and I just saw a bunch of black smoke, and I thought the guy behind me tripped it, and I landed on the ground,

and when I landed, I felt my leg go into the hole. And I knew it was me [that had been hurt], and I just laid there for a couple seconds [and] tr[ied] to figure out what was going on, and then all kind[s] of people were around me. I had two medics come across a minefield to get to me, and they did an exceptionally good job of getting me patched up. I'd have never made it [without the medics' initial help]. I had the leg blown off.

[At the time of my injury my immediate family consisted of my mother and siblings]. My father was killed when I was pretty young. I was 14 [when he died, but at the time of my injury] I [had] two brothers and a sister and my mother. My oldest brother was married at the time and had a couple [of] kids, and he was deferred because of that. My other brother, who's older than me, was in the Army. He was probably near the end of his tour, and then my sister [and] my other brother were living at home with my brother.

[So] my left [leg] below the knee [was blown off], and then my right leg was broken by shrapnel that went through right [leg] below my knee, and I almost lost my foot. And my left arm was all banged up. [But] my toes on my foot were broken, and I've never had the toes get to a point where they're any good. It hurts, and the bottom of my foot is real tender because there's still metal there.

[Ever since my injury] my right leg has always given me problems as far as soreness and aching and whatever else. And...in the last 20 years... my left hand has just continuously [gotten] worse. I think it's just because of all the nerve damage and whatever else happened. Now the VA says that's just growing old, but my right hand doesn't [give me problems like] my left hand does. [And] I have hearing aids now. I would [contribute that to the concussion of the explosion]. I mean I think that age has something to do with it, but I've always had a problem with my left ear and not being able to hear out of it very well.

I have [a] prosthetic leg [that] I use. I have never had a wheelchair. I've been in them when I was in a hospital and stuff, but I've never had one at home. I do have crutches and canes, but I don't use them often. But over the last year, I've had to use them more than I ever have in the last 42 [years]. [And] I don't know if [that's because of] age [or not or] if I don't have a good fit on the prosthetic leg that I have this time. The Hanger made me a new leg, and I've tried that, and so far that hasn't been any better than the one I have on. So I think that once you get a little older you just can't do the stuff you did when you were younger.

I've always been able to get around pretty well. I've played softball and jumped on a trampoline and did a lot of swimming. I scuba dived, I bungee jumped, I bowl. [But] over the last year, it's been a lot less. I don't play ball anymore.

I would say that I'm not in the best health [right now]. I have emphysema, and I've smoked most of my life. I don't right now, but I did a lot of smoking, [and] I did a lot of quitting too. [So] I would say my health is fair to not so fair.

[I have] phantom pains in my legs. Sometimes I can't sleep at night. It just starts hurting bad. I've got arthritic pains in my left hand and in my foot, and I've got pains in my right leg where it just feels like I have to stretch it all the time. I don't know [why] that is, and I just had back surgery in February, and they took three discs out and put two rods in and screws. I really believe that over the years I've always tried to correct my walk, [so] I don't limp, and people don't even know that I have an artificial leg...unless they see me in shorts. [I do contribute some of the other pain I experience to overcompensation]. I really believe my hand has a lot to do with the injury. I know that my right leg

does. My doctor, an orthopedic surgeon, told me that my good leg is worse than my bad leg now because I've favored it so much over the last 40-some years. I wouldn't have had that if I didn't have the artificial leg.

Over the last couple of years because I just haven't been able to be as active as what I used to be, [and] I've gained 10 or 15 pounds. I'm not obese, but I'm heavier than I want to be. I had rheumatic fever when I was a kid. I had an episode back in about 2000, 2002, [and] I went to the hospital for a problem with chest pains. They said that I [had] a heart attack at one time [after running tests]. [But] one of the main problems that I'm having now [is a skin issue]. It was a traumatic amputation, and they did a skin graft and traction to try to pull the skin down over the wound.

Emotionally, I think [my health is] fairly good, [but] I think that especially [in] the last five years or so that I do get down. It just seems to me that, I don't want to say [I] feel sorry for myself, but I realize [I have those feelings] more than I ever did [before], and it just sometimes irritates me...I do [think some of it has to do with getting older], but then again [I] went [south] last week [with my two brothers]...and everybody's able to walk around and do what they want, and I'm walking, sitting, walking, sitting, and everybody has to wait up for me, and that's irritating.

One of my buddies from my company [who is also a doctor] says that I have [PTSD]. I never wanted to admit that I do if I do. I really don't know too much about it, [but he told me that he thinks I suffer from PTSD]. He is treated at the VA for Post Traumatic Stress, and he thinks that all veterans that did what we did have some percentage of [PTSD]....[But I have experienced insomnia, temper, agitation, inability to concentrate, etc.]...I guess I do have it then. If those are some of the symptoms, yeah [then I have PTSD] because I've had all that.

I don't drink a lot anymore, but I used to, and I think that was one of the ways that I dealt with it. When I first got out of the Army and got divorced, I went to the VA, and I was pretty well drugged up with prescriptions. I had a lot of stuff that was going on then. A lot of pain killers, a lot of stuff to make me sleep...[but] I quit taking it, and I didn't take it [again] until about five years ago when my back got so bad I had to take something.

I think I did [have some difficulties readjusting when I came back from Vietnam] because number one, the worst thing that I could have ever done was get married three weeks before I went to Vietnam. Number two, I don't think that my ex-wife could deal with my amputation. I think that she felt that she was getting ripped off, and she started cheating on me. [We had] just built a house, [I] had a fairly decent job, [and I was] going to Community College, and [then I] find her in bed with my best friend. That was hard to deal with.

I would say [it] definitely [could make a difference if the military would provide counseling for both the veteran and their spouses and girlfriends]. I was in an Army hospital for 11 months, [and] I can say that...I was on a pretty bad ward with [veterans who had] arms and legs and eyes and everything else missing—and because of those people I've been able to deal with this as well as I have. If I wouldn't have been with them, I would have been a wreck because when I came off the plane to [the hospital] I was one irritated person. Just because of losing a leg, not knowing what was going to be going on, [but] as soon as you get out and into the ward, these guys started getting on your case, and you weren't allowed to be feeling sorry for yourself. It was just a great place to be. I was very happy that that happened. But when I went home that was a different story.

I would think about the injury every step I took, but I really wanted to make people think and know that I didn't have an injury, that I could do as much as anybody else could, and I pretty much did. It's not that I was ashamed of what I did because I was very proud of what I did and still am. It was just that I didn't want anybody to think that I was a lesser person than they were.

I think for the first month or so [my sense of who I was, as a person, did change after I was wounded]. It changed to the point where I didn't know where I was going or what I was going to be, but after I went to the hospital with the rest of the guys, I just thought [that] life was going to be okay... And a lot of people say to me that they just can't believe the attitude that I have... [Because] there's been times that I've had to keep my leg off for four or five days, and that ran pretty much for about six months before I could get my leg healed up to be able to walk on it again. And people until then didn't even know I had [a prosthetic]. And today people are saying well we never even really knew, or really never even tried to help you because you never wanted help, but the older I get the more help I want. I can remember [a staff member in the hospital] telling me when I first got there [that] amputees weren't supposed to live after they were 50 years old. Once they got into their fifties, [they] started dying off because of being overweight, and the heart couldn't take it. And I got [to] 50, and I said what's going to happen now. I'm 63 now, [and] I'm still going.

I would probably say that I've [thought]... more... [about] the combat experience in the last few years than [I] ever have [before]. I just think of some of the things that went on and how easy it would have been to die. [I think about] the people that did die, and I just start thinking about things like that, and I try to get it out of my mind. I go to my company reunion every time I get a chance to go. That's when we talk, and it's not a lot of battle related things. It's what we're doing in our lives now and trying to help some people out that are having some real struggles. [But] there are people there that just can't get a hold on [things].

[I] absolutely [think it's important for veterans to have reunions and talk to each other]. I would love to find the people's names that I was in the hospital with. I [tried] to locate one guy because I remember him very well, and he and I were the two culprits that did a lot of stuff together, and I spent more time with them than I did with my Army Company in Vietnam. [But] I would just love to try to get together with those guys.

I think the most challenging thing is every day getting up and putting your leg on and going at it. There's days that you just say to yourself why am I doing this. But you just drive yourself to keep going, and I think that is one of the most important things I've been able to do throughout my life. That's been the challenge of it all.

Before I went into the service, [I didn't have anyone who was particularly supportive, or that I could count on if I needed a friend]. I was not close to my family at all. The first year especially was the first time my oldest brother ever hugged me, and that was a lot, and we're best friends now.

[It also helped to be with the veterans in the ward at the hospital]. The guys that I hung around with were the guys that were going to make something of themselves. They weren't going to let this bother them. [And] like I said, the hardest thing is every morning getting up and putting your leg on. There was guys that wouldn't do that, and those were the guys that we'd stay away from. We tried to help them. [We] did everything that we could for months [to try and help them cope and move on, but] once we found that [they were not going to make any] adjustment, we just went [on] to somebody else [to see if we could help them].

All I can say is the attitude of the people that are around you [affects whether or not you will be able to adjust]. If you want to stay in a cubby hole and feel sorry for you the rest of your life and get into booze and drugs, and you're going to do that, I think you probably would have done that anyway. The guys that didn't do that were guys that were going to say we're going to beat this thing one way or another, and [we] did. That's the only thing. I don't know how else to look at it. I mean I saw some people that were pretty bad, I mean a lot worse than me, and they had a positive attitude. That's what helped me put my things in perspective. You go into a hospital like that and as badly as I was wounded—I mean I was hit pretty bad—and to see somebody that was worse, and they had a better attitude than you, and you got to say I can't let this happen. I think the people that are around you that you live with for close to a year [when you are on the ward] are the ones that are going to make up which way you go. If you're complaining about the facilities all the time and saying this place sucks and I can't wait to get out of here, [or] whatever, you're not going to have a very good go of it. I just think that you have to say to yourself that I'm going to play baseball, or I'm going to swim, I'm going to do whatever [I want to], and that's how you make it out.

My wife [is very supportive, and I turn to her when I need help]. I mean she's been tremendous over the 37 years we've been married. If I get down, she'll start coming back on me and just help me out [to] get a better frame of mind. If I can't wear my prosthesis, she helps me out a lot. [So] she's there when I need her, and [she] just helps me in everything I do. And my son helps me anytime, and my daughter's [partner is] just extremely good. [If] he sees [that I] need help, he comes and helps me. And they're supportive. They say come on let's go play golf, and I go with them. [And] my mother's always been a great person. She raised four kids after my dad died, and she was just a great person. And my ex-father-in-law was really one of the people that helped me through a lot too. I mean he was just a tremendous guy. He was just a great guy. Him and my ex-mother-in-law, both of them. They just really took care of me.

[I also had] my two brothers and my sister. They were just some people that really helped me along...and I did drink a bit back then. I mean not all the time, but I did drink, and when I drank, I did drink. So they had to deal with that, and I know now in my life that that's not a very pleasant thing to have to deal with at times with other people. [But] I don't think [that my ex-wife] was [able to adjust to the situation of my injury]. I think she was probably one of the least supportive people that I had around me, and I should have known at the time [because] when I was blown up, and they got the telegram, my ex-mother-in-law stayed home from work, and my ex-wife didn't.

[My family was] there [for me]. I could count on them. I could call them anytime I wanted to even when I got sloshed up, and they would listen to me, especially my brothers. I knew that they were there [for me]. I knew I could call. I think you have to [have someone you can talk to if you are in a situation like I was]. I don't think there's any doubt about that. I think any young veteran should think twice before they get married before they go overseas. Many that are married [should] just get the best counselors they can if something happens to them because it's a difficult thing.

I don't think [there was a primary person, who stepped forward to give me care, when I needed it the first couple of years after my injury.] I counted on myself more for that than anybody because [my brothers and I all lived in different states]. So it wasn't a thing that we could get together in a minute's notice. [And my ex-wife] went to live with her parents until we got a place, and I didn't have any friends. [But today the person who gives me care when I need it is] my wife. I think she does an extremely good job, and my kids [help me too]. I can count on them a lot, and then [I] go down to my brothers and my sister...My brothers and my wife and my kids are my friends. I don't have too many other friends outside of that.

I don't remember [seeing any stresses on the family and friends that cared for me the first couple of years after I was injured]. The only thing I can say is [that] my ex-wife [may have been stressed out]. I wasn't around too many other people except her mother and father simply because that's the only people I knew. But it would be her that would be stressed the most.

I think [the care I received after my injury starting with the medics on the field all the way to treatment at the US hospital was] extremely good all the way through. I think the two medics that worked on me saved my life. [And] all the care that I had all the way through [the process of coming back to the States,] I don't think that I could have been on the outside in private service and got any better care. I think they did an extremely good job, [even though] I'm not [happy with the quality of care I received from the VA]. I just think that there's not enough people that are veterans that are hired at the VA hospitals that can understand what people are going through, that even remotely know what you've been through. I just don't think they hire the right kind of people to take care of wounded veterans.

The only time that I can think of [when I felt that my care giving was too much was] back when I got divorced, and the VA gave me all the medication they did. I was going to a psychologist or psychiatrist [at the VA] after my divorce, [and] I think they gave me too much for what I should have had. [They were trying to treat] emotional distress more than anything. [So they gave me medication] just to have me mindless, I guess.

[I would tell current day veterans to not] let anything hold you back from something that you think that you can't do. Do it!...And to further that, get with the right people. Don't hang around with the wrong people when you're in the hospital...just make sure you're in the right group, and you'll know who that group is. Because those are going to be the guys that are carrying on. They're going to be the guys that are having fun. [I had fun when I was at the hospital. I had the most fun with] wheelchair races or shooting spitballs at a lieutenant walking through the hall.

[The veterans today could facilitate their transitions back to civilian life in many ways. I would tell them to] get busy. Do something. Don't be idle. Don't let the grass grow under your feet. Do something. Just get into employment, or get into some type of care giving. Just don't sit around. The worst thing you can possibly do is sit around.

[And] I think the VA [should] get these people linked up with other veterans of the same era, and let them talk it out with each other. They know more about what's going through their minds than the people that are supposedly educated in the psychology. I mean you can try to educate somebody, and tell them all you want, but unless those people have been through what these guys have been through, they're talking to a wall. I mean [it may help] if there's group sessions that these guys can have and just put their things out on a table [because] that's what I'd do and again just getting with those people and having conversation[s] with them and having fun with them [could help].

I'm proud of what I've done, and I think that people have to do that to succeed in what they do. I've been in the petroleum business for the last 35-40 years, and I was the president of the [local] Petroleum Association, and I currently serve as the chairman of the Fuels Committee on the [State] Petroleum Marketers and Convenience Store Association, and I'm also on the board of directors. [So] just things like that that keep you busy [are good]. And you shouldn't hold yourself back in anything that you might want to do.

APPENDIX 1: INTERVIEW GUIDE

PHASE III INTERVIEW SCRIPT – SOCIAL SUPPORT

Purpose

The main purpose of this set of interviews is to understand how veterans with combat related limb loss can be supported by family, peers (comrades) and other members of their social networks over the life course, especially in ways that lessen the burden in later life when vital support resources may be unavailable. So, we are here today to discuss the kinds of social support you have received and found helpful, especially from family and peers. But we are also interested in learning whether there are other folks whom you have found particular helpful over the years, and if so, how they have been helpful.

Research Question:

Our main research question is: How do veterans with combat related limb loss perceive, receive, and use social support over the life-course, especially from family and peers?

Introduction/Background

First, I have a series of questions that gathers basic background and demographic information that will be useful for understanding your experiences.

Current Demographics

1. In what city and state do you live?
2. When and where were you born?
3. What is the highest level of your education – high school? College?
4. Are you presently employed? Where? If not, what did you do when you were employed?
5. Are you married, widowed, divorced, cohabitating? (If ever married/divorced, probe for dates, especially – pre/post Vietnam; also probe for multiple marriages or relationships). If no to the above questions...ask if they have always been single or whether they have ever had a long-term relationship.
6. Do you have children? How many? Boys/Girls? How old are they?
7. Do you belong to any veterans' or unit associations? If yes, which ones?
8. What kind of health insurance do you have?
9. Where do you receive your health care?

Past Demographics

10. When did you enter the military?
11. Did you join or were you drafted?
12. When were you injured?
13. At the time of your injury, who was in your immediate family? If you had brothers/sisters, how old were they at that time?
14. Were you dating/seeing anyone? Engaged? Married?

Amputations and Assistive Devices information

15. Can you describe your amputations?
16. Can you describe any other limbs or parts of the body that are also still affected by the injury but were not amputations?
17. Can you describe the kinds of assistive devices, if any, that you have every used? That you use now?

Health Information

18. Can you tell me a little bit about your health over the years?
 1. Can you describe your general physical health? Probe for Pain if not mentioned.
 2. How about your emotional health? Probe for PTSD if not mentioned

PROMPT QUESTION	FOLLOW-UP/PROBE
<p>Tell me a little about what it has been like for you over the years, that is living with limb loss, and having experienced combat?</p>	<ol style="list-style-type: none"> a. During the first 12 months following your injury? b. Over the years? c. How about now? d. What has been the most challenging thing associated with your combat related limb loss over the years?
<p>Now, now I want you to think about those people in your life whom you have found particularly supportive ...that is people whom you could count on to be there for you or whom you could look to for help if you needed something.</p>	<ol style="list-style-type: none"> e. Have you had such people in your life? <ol style="list-style-type: none"> a. Prior to becoming injured? b. Within the first 1-2 years after your injury? c. How about now, later in life? Who might these people be?
<p>Now I am going to ask you some questions about these specific people you mentioned [go through each set of questions for the various actors mentioned...only ask about those folks that apply and then probe f-g for each]:</p> <p>Your immediate family at the time of your injury Mom/Dad - Siblings - Extended relatives</p> <p>Your long-term relationships</p>	<ol style="list-style-type: none"> f. How would you describe the general attitude and response of _____ towards your combat experience and/or limb loss? <ol style="list-style-type: none"> a. Can you describe their most valued support behaviors? b. How about those behaviors that they thought were well meaning but that you found not very supportive or least valued? c. Were their times when _____ was/were not

<p>- (e.g., wives, girlfriends)</p> <p>Children</p> <p>Other veterans, especially those with limb loss.</p> <p>Friends</p> <p>Anyone else or other groups of people such as VA organizations?</p>	<p>as supportive as you would have liked? If so, can you describe an example of such a time?</p> <p>g. Be sure to probe during the first 12 months of injury versus later in life and now.</p>
<p>Of the folks you mentioned above as being supportive, would you perceive any to take on a care-giving role at anytime in your life? By care-giving, I mean very intense and ongoing chronic support for long periods of time, such as that often given to someone living with a very serious illness or disability by a loved one.</p>	<p>j. If so, who was your primary caregiver (or caregivers if different people at different times)?</p> <ol style="list-style-type: none"> During the first 12 months following injury? Later on in life? Now? <p>k. Can you describe the relationship and quality of care.</p> <p>l. Did you notice any stresses on your caregiver and, if so, can you describe them. When was the quality of caregiving highest/lowest, and what explains the difference?</p> <p>m. Were there any negative experiences with your care-giver, that is times when you found the care-giving was a bit too much for you? Can you describe those experiences?</p>
<p>Finally, can you identify who has been most helpful to you in terms of living with combat related limb loss? If there is more than one person or a group of people, that is fine. Tell me about those folks who you consider to have been the most helpful.</p>	<p>i. How has he/she [they] been helpful? What specific things have they done?</p> <ol style="list-style-type: none"> In the past? Currently?
<p>Given your life-long experience living with combat related limb loss, what advice would you give to veterans from current wars who sustain limb loss in regards to the importance of social support and how best to utilize such support?</p>	<p>n. What is the single most important message you would give regarding social support?</p> <p>o. How do you think this might benefit current veteran amputees regarding their early years following their injuries and combat experience?</p>

- | | |
|--|--|
| | <p>p. How might it benefit current amputees regarding their long-term adjustment?</p> <p>q. What other issues that pertain to social support might be critical regarding their long-term adjustment?</p> |
|--|--|

Is there anything else you would like to share about your experiences living with combat related limb loss for several decades, especially as it relates to social support? Perhaps something I didn't ask but you feel is informative and something we should know? Even if you think it is minor, please share as any advice is helpful.

THANK YOU.

APPENDIX 2: INFORMED CONSENT FORM

IUPUI and CLARIAN INFORMED CONSENT STATEMENT FOR “Amputee Veteran Research Oral History Project”

You are invited to participate in a research study, “Amputee Veteran Research Oral History Project,” which will record and transcribe up to forty interviews (60 minutes each on average) with veterans of the Vietnam War who lost one or more limbs as a result of combat service. Up to twenty of these interviews will follow up with veterans we have already interviewed; up to twenty more will be new interviews. This study will run from July 2009 to November 2010. You were selected as a possible subject either because we have already interviewed you and seek to follow up or because you have registered with the data base maintained by the Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research. We will incorporate information from the interviews into a report for the Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research.

We request that you read this form and ask any questions you may have before agreeing to be interviewed for this study.

The study is being conducted by conducted by the Polis Center, on the IUPUI campus, on behalf of the Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research. Dr. David Bodenhamer, Director of Polis, will be the Principal Investigator, and Dr. Philip V. Scarpino, Professor of History, will be the project’s oral history director. Scarpino and a graduate student in the public history program at IUPUI, will interview up to forty veterans for 60 minutes each on average. Dr. Carrie E. Foote, Director of Graduate Studies, IUPUI, Department of Sociology, will be working with sociology student assistants to code the transcripts and analyze them to identify major topics and themes that stand out. The purpose of Dr. Foote’s analysis will be to identify key issues and data regarding the care and post-war quality of life of Vietnam veterans whose wounds resulted in the loss of a limb.

The “Amputee Veteran Research Oral History Project” is funded by the U.S. Department of Defense (DOD) Telemedicine and Advanced Technology Research Center (TATRC).

STUDY PURPOSE:

The purpose of this study is to test the following hypothesis: The quality and effectiveness of care provided during the years of treatment after the loss of a limb in combat is extremely important. This care has a significant influence on the quality of life experienced by amputee veterans.

For original interviews, part of the interview will focus on the twelve months following the infliction of your wounds. We will talk to you about how your injury happened, about post-evacuation care and recovery, and about factors that influenced your understanding of yourself and the direction and development of your life. The balance of the interview will cover the period between the end of year one and the present. We will ask you questions about the impact of your injury on the whole course of your life, including its influence on work, family (e.g., parents, spouses and significant others, children), identity, social and clinical relationships, religion/faith, and so on.

For follow-up interviews, the interview will focus on current health and health care experiences and quality of life (especially in the most recent 12 months). Of special interest is how you perceive living with combat-related limb loss affects your present health and quality of life and, especially, your views on whether anything could have been done differently over your life-course that may have helped minimize or avoid some of your current medical conditions or otherwise led to a better quality of life. Results should shed light on the lives of the veterans involved and provide useful information to the Department of Defense in undertaking the long-term care of veterans wounded in more recent conflicts.

NUMBER OF PEOPLE TAKING PART IN THE STUDY:

If you agree to participate, you will be one of up to forty subjects who will be participating in this research.

PROCEDURES FOR THE STUDY:

If you agree to be in the study, you will do the following things:

- (1) Either we have already interviewed you and we are following up or your name has been selected by Indiana-Ohio Center study personnel from the list of those who have registered for the data bank of the Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research. We will provide you with an informed consent document and if you have not already filled one out, a short questionnaire to list where you received treatment after injury and during rehabilitation. We will give you the project protocol, which briefly describes the project.
- (2) With your consent to participate we will schedule a 60-minute recording session and will talk to you about your military service in Vietnam and its aftermath as described above. Sessions will be recorded. The interview will be done on the telephone. Interviews will be scheduled at a mutually convenient time. We will ask you to sign all consent forms prior to beginning the first recording session.
- (3) We will transcribe the recordings. The transcripts will be analyzed for information that will allow us to draw conclusions about the significance of the first year of care, as well as treatment and your general quality of life following the first year. Neither your name nor any identifying information will be incorporated into the report we will produce from these transcripts.

RISKS OF TAKING PART IN THE STUDY:

While on the study, the risks are minimal. While there are no significant risks associated with your involvement in this project, there is a possibility that some questions may make you feel uncomfortable. You do not have to answer any question(s) that makes you feel uncomfortable or that you do not want to answer.

BENEFITS OF TAKING PART IN THE STUDY:

You will receive no direct benefits from participation except for the chance to tell your story. The recorded and transcribed interview(s) will provide important source materials that will permit researchers and the Department of Defense to better understand the long-term care and condition of wounded veterans.

ALTERNATIVES TO TAKING PART IN THE STUDY:

Instead of being in the study, you have these options: You can elect not to participate. If you elect not to be interviewed or if you decide to leave this study, your name and other information will remain in the data base maintained by the Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research.

CONFIDENTIALITY:

Efforts will be made to keep your personal information confidential. We cannot guarantee absolute confidentiality. Your personal information may be disclosed if required by law. Your identity will be held in confidence in reports in which the study may be published and databases in which results may be stored.

Organizations or individuals that may inspect and/or copy the recordings or transcripts for quality assurance and data analysis include, the Primary Investigator, Dr. David Bodenhamer, and his research associates; the IUPUI/Clarian Institutional Review Board or its designees; the study sponsor, Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research; and (as allowed by law) state or federal agencies such as the U.S. Army Medical Research and Materiel Command Office of Research Protections (ORP) Office for Human Research Protections (OHRP).

COSTS:

There should be no costs to you associated with participation in this study.

PAYMENT:

You will not receive payment for taking part in this study.

COMPENSATION FOR INJURY:

It is extraordinarily unlikely that you will be injured as a result of your participation in this study. The study has no provisions for compensating you or your insurance company in the event you are injured as a result of your participation in this study.

CONTACTS FOR QUESTIONS OR PROBLEMS:

If you have questions at any time about the project or its procedures, you may contact the project's oral history director, Dr. Philip V. Scarpino, at 425 University Blvd., Indianapolis, IN 46202. Phone: 317-274-5840/3811. Email: pscarpin@iupui.edu. If you cannot reach Dr. Scarpino during regular business hours (i.e. 8:00AM-5:00PM ET) and/or have questions about the Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research or its procedures, you may contact the principal investigator, David Bodenhamer, at 1200 Waterway Blvd., Indianapolis, IN 46202. Phone: 317-274-2455. Email: intu100@iupui.edu. If you cannot reach David Bodenhamer during regular business hours, please call the IUPUI/Clarian Research Compliance Administration office at 317/278-3458 or 800/696-2949.

For questions about your rights as a participant or to discuss problems, complaints or concerns, or to obtain information, or offer input, contact the IUPUI/Clarian Research Compliance Administration office at 317/278-3458 or 800/696-2949.

VOLUNTARY NATURE OF STUDY:

Your participation in this study is voluntary. You may choose not to take part; you may choose not to answer particular questions; or you may leave the study or the oral history interview at any time. Leaving the study will not result in any penalty. Your decision whether or not to participate in this study will not affect your current or future relations with any department or program at Indiana University/Purdue University at Indianapolis.

Your participation may be terminated by the investigator without regard to your consent in the following circumstances: If we cannot reach you after several tries at the contact information you provided (mailing address, phone, or email) or if we cannot establish a phone connection with you that will produce a recording of acceptable quality for transcription.

SUBJECT'S CONSENT:

I have read the above information. I have received a copy of this form for my records. I agree to participate in this study as follows:

** My interview may be recorded and transcribed.

** The recordings and transcriptions of my interview may be analyzed in order to identify important issues and data regarding the care and post-war "quality" of life of Vietnam veterans whose wounds resulted in loss of a limb.

** Results will be provided to the Indiana-Ohio Center for Traumatic Amputation Rehabilitation Research and the Department of Defense, and may be used for further research and publication.

** My name and other identifying information will not be associated with the final report.

** I may be asked to participate in a follow up interview about thirty minutes in length.

Narrator's Printed Name: _____
(Study Participant)

Narrator's Signature: _____
(Study Participant)

Date: _____
(Must be dated by the narrator/study participant)

Printed Name of Person Obtaining Consent: _____

Signature of Person Obtaining Consent: _____

Date: _____