

7-2006

Posttraumatic Stress Disorder And Civil War Reenactors

Kimberlee Bruce

Follow this and additional works at: <https://knowledge.e.southern.edu/gradnursing>



Part of the [Nursing Commons](#)

Recommended Citation

Bruce, Kimberlee, "Posttraumatic Stress Disorder And Civil War Reenactors" (2006). *Graduate Research Projects*. 58.
<https://knowledge.e.southern.edu/gradnursing/58>

This Thesis is brought to you for free and open access by the School of Nursing at KnowledgeExchange@Southern. It has been accepted for inclusion in Graduate Research Projects by an authorized administrator of KnowledgeExchange@Southern. For more information, please contact jspears@southern.edu.

POSTTRAUMATIC STRESS DISORDER AND
CIVIL WAR REENACTORS

KIMBERLEE BRUCE

Posttraumatic Stress Disorder

And Civil War Reenactors

Kimberlee Bruce

SOUTHERN ADVENTIST UNIVERSITY
SCHOOL OF NURSING

Document Acceptance Form

NAME OF STUDENT(S): Kimberlye Bruce

NATURE OF DOCUMENT (circle one): Project Supervised Research Thesis

TITLE OF DOCUMENT: _____

DATE OF COMPLETION: 7/11/06

I attest that I have read this document and find that the document fully meets the standards set for ethics, content, organization, form, and style as set by Southern Adventist University and by the School of Nursing for this type of document.

Chairperson Desire R. Barton Date 7/11/06

Committee member Bonnie Luederud Date 7/11/06

Committee member Holly Ford Date 7/11/06

Approved by Dean of the School of Nursing:

Barbara James Date 7/11/06

Abstract

The purpose of this phenomenological study was to explore the meaning of Civil War reenactments in military men with symptoms of posttraumatic stress disorder (PTSD). Six Caucasian males who have PTSD symptoms were interviewed in depth by responding to two questions. 1. Why do you reenact? And 2. What sticks out in your mind about Civil War reenacting after having served in the military? Five themes emerged; escaping reality, structure and discipline, honor and duty, friendship and companionship, and love of history. The findings of this study will add to the body of nursing knowledge about PTSD by exploring a form of behavior modification and redirection therapy that is socially acceptable.

Acknowledgments

There are many people that have helped me on my journey to complete this thesis. My father, James Bruce, JR, is the person responsible for giving me the idea to research military veterans with PTSD. My mother, Susan Bruce, spent countless hours editing my writing. Terre Lawson helped me find people to volunteer for this study. To all of my volunteers and the soldiers that have served our nation in all wars, thank-you for your service.

Table of Contents

Abstract	ii
Acknowledgments	iii
CHAPTER 1 INTERODUCTION	
Background and Significance of the Problem	6
Purpose Statement	7
Research Framework	7
Delimitations and Limitations	8
Significance of the Study	8
CHAPTER 2 REVIEW OF LITERATURE	
Introduction	10
Description of PTSD	10
History of PTSD	11
PTSD in the Media	13
Female Soldiers and PTSD	13
Treatment of PTSD	14
Changes in "World Views"	16
Getting Benefits	17
Summary	18
CHAPTER 3 METHODOLOGY	
Introduction	20
Population and Samples	20

Setting	20
Protection of Human Subjects	21
Instrumentation	22
Data Collection	22
Data Analysis	23
Summary	23
CHAPTER 4 RESULTS	
Introduction	24
Sample Demographics	24
Setting	24
Participants Vignettes	26
Themes	28
Summary of Findings	34
CHAPTER 5 DISCUSSION	
Introduction	35
Discussion	35
Recommendations	36
Significances of Findings	36
Summary	36
REFFERNCES	38

APPENDIX A: CONSENT FORM

41

APPENDIX B: IRB FORM/FACILTY LETTER

42

CHAPTER ONE

INTRODUCTION

Soldier after soldier, war after war men and women have fought for freedom, religion, power, money, and honor. In return, many have come home with a mixture of mental and physical scars. Many of my friends and family have returned from war scarred both inside and outside, suffering from symptoms of posttraumatic stress disorder (PTSD). Some of these men and women have turned to many things to try to fix the PTSD. Civil War reenacting is one.

Posttraumatic Stress Disorder is multi-symptom psychiatric disorder. According to the National Center for PTSD(2000) people with PTSD respond to trauma with increased fear and anxiety that may last longer than a person without PTSD. These reactions are heightened and last longer in persons who have PTSD. The person may also relive the experience through nightmares, flashbacks and unwanted thoughts, while remaining in an increased state of arousal or “flight or fight mode” at all times. Many also use avoidance of any person or place that reminds them of the trauma. The person with PTSD many have increased feelings of anger and irritability along with guilt and shame for being alive. Grief and depression, if present, may lead to suicide. The traumatized person may develop a negative self image and view of the world and experience difficulties with sexual relationships. Many turn to alcohol and other substances to try to erase the traumatizing experiences, but the reality is that they do not go away.

In my experience many people suffer in silence or are misdiagnosed as depressed, suicidal, alcoholic, drug addicted, or just plain crazy. It was not until the 1970's that

psychiatrists even labeled these symptoms as posttraumatic stress disorder (Dean, 1997). During the American Civil War soldiers were punished for these reactions seen in those with PTSD. Only the very sick were sent to mental institutions. For the most part, they were denied pensions and the blame for their problems was placed on something else like alcohol, laudanum, or other social evils. During WWI, soldiers were sent to convalescent hospitals away from the front lines but by the end of the war soldiers, were being treated at the front lines and sent back into battle.(Dean, 1997)

Once home, soldiers turn to many things to dull the pain they are experiencing. Some turn to alcohol and drugs, or violence, while others turn to hobbies and friendships to dull the pain. Civil War reenacting is just one of the many hobbies that men and women suffering from PTSD may turn to to dull the pain. Reenacting gives the PTSD sufferer a chance to escape reality, while in a safe environment where no one dies, to face some of their fears and nightmares. Even changing their identity, being a person who is whole and unchanged by the world around them.

Purpose Statement

The purpose of this phenomenological study is to explore the meaning of Civil War reenactments in military men with PTSD symptoms and their reduction of stress. Do Civil War Reenactors with PTSD use reenacting as an acceptable and effective form of stress release?

Research Framework

Qualitative research uses concepts, classifications, and attempts to interpret human behavior that reflects not only the analyst's view of the people whose behavior is being

described; the emphasis is on verbal descriptions as opposed to numerical ones (Gillis & Jackson, 2002,). Phenomenology is a form of qualitative research that allows the research subject to tell their story in their own words. A German philosopher, Edmund Husserl first began using the term phenomenology in 1900 (Thomas & Pollio, 2004) Husserl used phenomenology as a framework to study every day life. The domain of his new science was consciousness and its method was the careful description of human phenomena. (Thomas & Pollio, 2004) Phenomenology was first seen in nursing literature in the 1970's. Phenomenology helped nurses understand the health and wholeness of their patients in the patients' own environment. While exploring a pattern of behavior for the patient in both normal and crisis situations, phenomenology also allowed a glimpse of how a person interacts within the context of their culture.

Delimitation and Limitations

This study describes the lived experience of Military men with symptoms of PTSD. This study confined itself to interviews with a sample of men who agreed to discuss their experiences with the researcher. The interview results are only specific to this sample. The phenomenological approach does not seek to establish relationships. Studies of similar samples could potentially have different results.

Significance of the study

The significance of this study is important for several reasons. First, this study expands our understanding of reenacting and stress reduction. Second, this study shows

that reenacting is a sociability acceptable form of behavior modification and redirection therapy. It is important to discover workable, acceptable therapies to both society and patient clientele.

CHAPTER TWO

REVIEW OF LITERATURE

The purpose of this chapter is describe and to review theoretical and research literature related to Posttraumatic Stress Disorder (PTSD) and American Civil War Reenactors who have served in the military and to make recommendations about future research studies in this area. Studies about PTSD will be reviews. No studies were found about people suffering from PTSD after having served in the military and now do Civil War reenacting.

This is important in nursing as nurses need to understand the motivation for recreating the past and how it helps people overcome their fears and relieve stress. This is especially important for psychiatric nurses and emergency room nurses who may be dealing directly with those suffering from PTSD flashbacks and psychosis.

CINAHL was used to search the literature regarding PTSD using the years 1997-2006. Key terms used for the review of literature were PTSD, post traumatic stress disorder, American Civil War, and soldier's heart.

Description of PTSD

The Diagnostic and Statistical Manual of Mental Disorders IV (DSM-IV,1994) gives the criteria for diagnosing PTSD. "The person has been exposed to a traumatic event in which both of the following were present: (1) the person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others, (2) the person's response involved intense fear, helplessness, or horror" (p. 209). According to the DSM-

IV (1994) after the person has experienced this traumatic event, they can reexperience the event in one or more of the following ways: flash backs, dreams, intrusive thoughts, and feelings. The traumatized person then tries to avoid the things, people, or places that cause these feelings to resurface. The person may become emotionally distant from family and friends. The person may also experience persistent symptoms of increased arousal, which make it difficult for the person to go to sleep or stay asleep. This may cause increased irritability and anger, with difficulty concentrating, hypervigilance, and an exaggerated startle response. These symptoms last for more than one month and can cause significant distress or impairment in social, occupational, and other important areas of living for the person with PTSD.

History of PTSD

PTSD has been called many things over the years such as: soldier's heart in the Civil War, shell shock in World War I, combat fatigue in World War II and post-traumatic stress disorder in Vietnam, Desert Storm, and Iraq. PTSD was not very common in World War I and World War II because the soldiers were sent back to the United States on ships and had a "de-briefing" time. This was not true with soldiers who fought in the American Civil War and Vietnam. These soldiers were sent home without a time to "de-brief" (Dean,1997). Many reenactors who have fought in Vietnam or in the gulf wars say that they feel a kinship with the soldiers that fought in the American Civil War. Many of these soldiers suffer from PTSD just like their counter parts in the Civil War did.

Dean (1997) compares and contrasts the stories of Vietnam and Civil War veterans. In his book *Shook Over Hell* using a sample group of 291 Civil War veterans from an Indiana units that experienced psychological problems in the years during or after the end of the Civil War and Vietnam veterans (Dean 1997). Dean explores the lives of these men through pension records with an explanation as to why the person received or was denied the pension and antidotal stories from friends and family.

Over the history of PTSD many health problems have been linked to the traumatic experiences seen in war. Increases were seen in cardiovascular diseases, hypertension, gastrointestinal disorders and mental health problems. It has been theorized that an increase in the level of trauma seen by soldiers in the Civil War caused veterans to have an increase in the number of health problems. (Pizarro, Silver, & Prause, 2006) Pizarro, Silver & Prause (2006) explore the physical and mental health costs of traumatic war experiences among civil war veterans. Using data from enlistment forms and US Pension Board medical examinations the researchers discover an increase in medical problems among Civil War veterans. The researchers went on to explain that the Civil War was one of the bloodiest wars fought on American soil. The soldiers experienced the death friends, relatives, and neighbors, while being exposed to the sight of mutilated corpses and experiencing the enemy up close. The researchers discovered that soldiers who were exposed to this trauma were more likely to engage in other harmful activities like overeating, smoking, drug abuse and alcohol abuse.

PTSD in the Media

Stories and articles about American soldiers suffering from PTSD are becoming common place in the media today. Cain (2004), a soldier with PTSD who was not treated by the military, writes about soldiers suffering from PTSD coming home from Iraq and killing other people. In July 2003 at Fort Benning GA, a soldier was stabbed to death and his body set on fire by four of his "buddies" from Iraq. One of the men charged with this murder was known to have suicidal and homicidal thoughts but was released from the military into the civilian population without treatment. Cain concluded that the military is not screening soldiers very well for PTSD and if soldiers with symptoms of PTSD are not getting the help they need. Many soldiers are not receiving psychiatric care because they do not consider it manly or honorable to admit to a problem.

Female Soldiers and PTSD

Male soldiers are not the only one that suffer from PTSD. Female soldiers may suffer in silence, also. According to Dr. Jessica Wolfe, PhD, few studies have explored PTSD in women (Wolfe, 1990). Some of the first studies involved female nurses who served in Vietnam. These studies were not done until the mid-1980. Dr. Wolfe stated that more studies need to be done on the trauma that women may have suffered after being in combat zones.

Stanton-Bandiero (1998) explored the shared feelings and experience of nurses from WWII, Korea, Vietnam and Operation Desert Storm. Nurses suffer from PTSD just as much as the men that fought on the front lines. Only two nurses in the study of twelve stated that they had been diagnosed with and treated for PTSD. The other ten denied

symptoms of PTSD even though all twelve had the same war nursing experiences.

Jessica Wolfe, PhD. clarifies this by say that women seem to have a lower rate of PTSD from serving in the military because there are fewer women in the military (Wolfe, 1990).

Treatment of PTSD

Otis, Keane, & Kerns (2003) in a study for the Department of Veterans Affairs explored the relationship between increased chronic pain in veterans and PTSD. Clinical practice and research suggests that these two conditions co-occur at a high rate and may interact in such a way as to negatively impact the course of either disorder (Otis, Keane, & Kerns, 2003). The researcher found that there was a need for higher doses of pain medication to control pain. The researcher also suggests that chronic pain and PTSD frequently co-occur and that similar mechanisms, such as fear and avoidance, anxiety sensitivity, and catastrophizing, may exist for maintaining both conditions (Otis, Keane, & Kern, 2003).

The diagnosis and management of PTSD follows set criteria (Grinage, 2003). An article in *The American Family Physician* (December 15,2003), Medication is often combined with psychotherapy for treatment of PTSD and other co-morbidities included alcohol and/or substance abuse. To be diagnosed with PTSD “symptoms must last for at least one month and must significantly disrupt normal activities”(Grinage,2003). More males are affected in the military population than in the civilian population. Symptoms may emerge at any time, immediately or delayed. Symptoms are treated by psychotherapy and medications.

Pharmacotherapy is one of the treatments for PTSD. This therapy includes selecting the right combination of medication including, but not limited to selective serotonin reuptake inhibitors (SSRI's), antiadernergic agents, monoamine oxidase inhibitors (MAOI's), tricyclic antidepressants (TCAs), benzodiazepines, anticonvulsants, and antipsychotics. Randomized clinical trials included three studies one with MAOIs and two with SSRIs showed that SSRIs had the least amount of side effects and according to the patients, worked the best. One group was Vietnam veterans and the other group was non-military personnel that suffered from PTSD. The authors (Foa, Keane, & Friedman, 2004) explained each type of medication and its use in treating patients with PTSD. The conclusion was SSRI's work better on civilian population but medication efficacy was more difficult to interpret in the veterans because of the severity and chronicity of the PTSD (Foa, Keane, Friedman, 2004).

Using the Stages of Change Model of Readiness helps motivate veterans to change PTSD symptoms and related behaviors in a 60 day inpatient program primarily serving Vietnam War combat veterans.(Murphy, Cameron, Sharp, & Ramirez, 1999) "Treatment programs usually focus on teaching veterans new coping behaviors and self talk with the aim of suppressing or replacing maladaptive behaviors, cognitions and emotions" (Murphy, Cameron, Sharp, & Ramirez, 1999 p 32) . The veterans were placed into groups based on the change model. After each session behaviors were rated in categories like "might be a problem and is a problem." Most veterans do not want to admit that a behavior like alcohol abuse or drug uses is a problem because that behavior is part of

a comfort zone for them. This program helps them understand the symptoms of PTSD and learn new healthy coping skills through behavior modification and redirection therapy.

The study on the disorders of extreme stress following warzone military trauma: associated feature of post-traumatic stress disorder or comorbid but distinct syndromes, was a longitudinal study (Ford, 1997). There were 85 participants of which 84 had consecutive admissions to a rehabilitation program. The statistics included place of military service, marital status, and war time trauma. Conclusions were that the study was too limited and relied heavily on Department of Veterans Affairs Records for inpatient admissions to psychiatric care.

Constance Dalenberg, PhD., (1999) conducted a study on how to manage patients with dissociative symptoms of PTSD. She said that dissociative clients are poor predictors of danger, they either underpredict or overpredict. This can lead to many dangers for the patient. Dr. Dalenberg studied how to redirect the patient away from this type of behavior and to confront them on this avoidance.

Changes in "World Views"

PTSD not only happens in the United States but also in other countries, as shown by a study done in Israel on soldiers that fought in the Yom Kippur War (Dekel, Solomon, Ginzburg, & Neria 2003). The study consisted of 396 male soldiers, who were divided into three groups: combat stress reaction veterans, decorated veterans and a control group. The men were then classified into four subcategories: chronic, delayed, recovered,

and unaffected. The study compared negative and positive “world views” and self esteem in the 3 groups. The researchers found that patients with PTSD see the world in a more negative way and have lower feelings of self worth.

In another study from Israel (Dekel, Solomon, Elkilt, & Ginzbrug, 2004), combat exposure, wartime performance, and long-term adjustment among combatants was studied in soldiers that fought in The Yom Kippur War. The researchers examined the “contribution of exposure to specific battle field stressors to combatants; battlefield functioning and long-term psychological adjustment” (Dekel, Solomon, Elkilt, & Ginzburg, 2004, p 117). The subjects were placed in three groups; decorated heroes, combat stress reaction casualties, and a control group. The researchers discovered four categories of battlefield stressors. “Factor 1 consisted of seven items relating to encounters with injuries and death, factor 2 consisted of two items describing active fighting, factor 3 consisted of six items describing own army fallibilities, factor 4 consisted of three items describing life-threatening situations” (Dekel, Solomon, Elkilt, & Ginzburg, 2004 p 123). Within the three study groups the researcher found that decorated heroes reported the highest levels of battlefield stress and those that suffered from PTSD had a harder time adjusting to life after the war than decorated heroes that did not suffer PTSD. After conducting the study, the research questioned whether battlefield stressors caused PTSD or if it the personality defects that contributed to PTSD were already in place and the battlefield stress exacerbated the problem.

One of the symptoms thought to be associated with PTSD is emotional numbing. Litz & Gray, (2002) conducted a study with Vietnam veterans were shown “a set of

photographic images that varied in hedonic valence. Emotional responses were evaluated across a number of dimensions, including peripheral autonomic activity, somatic nervous system activity, specifically indexed by facial expressive-motor response, measured electromyographically over the zygomatic major and corrugator facial muscles and self-reported evaluations of valence and arousal reaction” (Litz & Gray, 2002, p. 200). Those with PTSD scored higher in all the categories. The researcher concluded that suffers of PTSD are not emotionally numb but hyperresponsive. The researcher believed that people who suffer from PTSD are hypersensitive to emotions due to the trauma that they have been exposed to and that people suffering from PTSD are not emotionally numb but have overwhelming fear, horror, and anxiety that can last a lifetime. (Litz & Gray, 2002).

Getting Benefits

Murdoch (2003) explored benefits claims by men and women after being diagnosed with PTSD. Using a historical cohort study of all 180,039 veterans who filed claims for VA disability benefits for PTSD between 1980-1998, Murdoch found that more women filed claims after Vietnam and the Gulf War than men. A question was raised as to if this increase was due to sexual assault trauma, while serving in that war, but this assumption was countered with the statement that the incidence of sexual assault was not higher than in Vietnam. The researcher also found that men were more likely to get approved for benefits than women. This approval rate seemed to be related to the fact that most of the women who applied did not have any actual combat exposure. A limitation to this study was that the researchers were not able to give age, race, socio-economic class, or

education level, nor did they account for the ratio of men and women in the wars. The authors concluded that the system is biased to the male gender with combat-related injuries.

Summary

The review of literature shows that PTSD can be a problem in the active and retired military population. In conclusion, no studies were found on PTSD and Civil War reenacting. One study examined the use of behavior modification to treat symptoms of PTSD.

CHAPTER THREE

METHODOLOGY

Qualitative research is the study of the human experience through interviews, case studies and field work. The purpose of this study was to explore the meaning of Civil War reenactments in Military men with symptoms of PTSD. A phenomenological design was used to show the lived experiences of these men. The present chapter reviews the settings of Civil War reenactments, how the human rights of the subjects were protected, explain the instrument that was used, show how the data was collected and analyzed. The strengths of this type of design are that they focus on a deeper understanding of the human experience, while allowing for different feelings and experiences to be studied. The life experiences of the participants are valued.

Population and Samples

The sample studied was Civil War reenactors with symptoms of PTSD who have served in the military. Most of the sample lived in the United States but some are currently serving in Iraq. The sample criteria were males that have served in the military and now have symptoms of PTSD and are Civil War reenactors. The sample size was six people. The strengths of the sample are the diversity from which they are drawn. The weakness is the size of the sample.

Setting

In phenomenology the person is observed and interviewed in their own world. The setting for this study was Civil War reenactments, allowing me to observe the interactions of the subjects as they interacted with each other and in some case the public.

Also, there was a one on one interview with each person. The interview allowed me to get the feelings and views of the person after they had been observed. The strength of this setting is that it let me observe the interactions of the persons with other reenactors. The world of the Civil War reenactor has a language of its own. The reactor must first choose a persona. This is a type of person the reenactor is going to portray. Persona's should be well researched and based on age, ethnicity, gender, area of the country, socio-economical class and education level. The reenactors assume the identity of that person for the weekend. At the event the reenactor should always use first person to interact with another reenactor.

Reenactments can be based on actual battles that happened between 1861 and 1865 or they can do a tactical. In actual battles, there are written accounts of the battle. This includes what units won, which side won, the number of soldiers killed, wounded or missing, and what happened after the battle. In a tactical, the reenactors use the battle tactics of the 1800's (weapons, formation and commands) but there is not a documented battle that they are fighting. The commanders use their knowledge of the Civil War and tactics to speculate what might have happened.

Protection of Human Subjects

Prior to initiation of data collection an Institutional Review Broad (IRB) approval was obtained from Southern Adventist University Board of Ethics. The participants signed a consent form and were interviewed in a more private setting. . Each person was given the name of a Civil War general as a pseudonym. The interview tapes were

shredded and the transcriptions of the interviews locked in cabinet at Southern Adventist University's School of Nursing office. Risk to the participants was minimal. If a health concern had occurred they would have been referred to their family physician.

Instrumentation

In phenomenology the researcher is the instrument that is used to collect the data. I interviewed my participants and took field notes which included observations about clothing and body language. In order have a better understanding of my participants; I had to bracket my preconceived ideas about this study. "Bracketing is a cognitive process used by researchers to set aside ones biases and personal perspectives about the research topic" (Gillis & Jackson, 2002, p183).

Data Collection

Participants in the study were a purposive sample of six men who met the criteria of being male, over the age of eighteen, have been in or be currently serving in the military, and have symptoms of PTSD. Six men were interviewed before I reached the point of saturation. The point of saturation is determined when "a situation in data collection in which the participants description becomes repetitive and confirms previously collected data" (Gillis & Jackson, 1997, p 185). At this point I chose to end the study. All the participants were asked two questions; 1. Why do you reenact? and 2. What sticks out in your mind about reenacting after having been in the military? During the interview I took field notes which included demographics of the participants and body language

Data Analysis

Analysis of data adhered to the format described by Thomas & Polio (2002). After the interviews were transcribed by the researcher they were taken to my thesis committee chair for approval. The committee chair and I went over the interviews looking for common themes. After this was done one of the study participants also viewed the interview to see if he concurred with the theme that the thesis chair and I had picked out.

Summary

Phenomenology looks at a person in their own world. I observed and interviewed six members of the Civil War reenacting community. They were interviewed in their own world to see why they reenact the Civil War. They were asked two questions and then the interviews were transcribed and analyzed for common themes.

CHAPTER FOUR

RESULTS

Civil War reenactor's reenact for many reasons. The first reason is a love of history and wanting to educate the public about our nation's history. The second is a friendship that they have formed with other members of the reenacting group. Some reenactors use reenacting as an escape from reality by creating a new persona. The participants in this study reenacted for those reasons plus honor, duty and the structure of military life. One man stated that it was "like a band of brothers."

Sample Demographics

The sample size was six male participants who were Civil War reenactors with PTSD symptoms. The participants ranged in age from mid twenty to sixty. They came from all socio-economic backgrounds. Three branches of the military were represented; the Army, Air Force, and Marines. All the participants had some signs of PTSD most having flash backs and intrusive thoughts. Three of the participants did mainstream reenacting and three did authentic reenacting.

Setting

The culture of Civil War reenacting is unique. The culture has its own language, well defined social class, clothing standards, and leaders. Within this group are different sub-groups called farbs, mainstreamers, progressives and authentic. Farbs are considered to be the outcast of this sub-culture. They do not dress like the others in the group and do not appear to want to do anything that is historically accurate. The next group called mainstreamers are the middle of the road and the largest of the sub-culture. They do just

what they have to do to get by and for the most part they dress like the rest of the group and have some of the power. The group that is called progressive is the largest growing group. They are starting to study history more and want to become more like what a true Civil War soldier would have been like in both dress and manners. The last group, the authentic, is the smallest group. They have been researching and studying the way that the Civil War soldiers lived, thought, and acted. This group tries to emulate the actions and life of the Civil War soldier.

There are many types of reenactments for reenactors to go to. There are garrison events with tents, buildings, houses, and possibly forts. At these events soldiers sleep in the tents. There are set times for the battles which usually are about two hours long. The public is welcome to come and interact with the soldiers. The next type of event is a campaign style event. The soldiers carry every thing with them that they would need for that time frame. This includes food, water, clothing and shelter. The soldiers travel from camp site to camp site covering many miles in the process. They sleep out in the open and could go into battle at any time day or night. The public is usually not welcome at these events. The third type of event is a living history. Living History is done at the site of a fort or a town. There are no battles but military life is shown through drilling, fatigue duties like cooking, play time and social interaction with civilians. The public is welcome to come and interact with the soldiers. The last type of event is an immersion event. Immersion is where the soldier takes on the persona of a real or made up Civil

War soldier and pretends to be that person for the length of the event. The soldiers interact only with other member of the group that are in first person. The public is usually not welcome at these events.

I have been interacting with Civil War reenactors for eighteen years in all parts of the United States from the west coast to the east coast. In the past four years I have been interacting with many of the subjects in different types of social settings. Some have been on the battlefield, at conferences about the Civil War, and in personal settings like restaurants and social gatherings. In the past ten years I have worked in mental health and grown up with a father who has PTSD. Many nights have been spent sitting around a campfire listening to and talking with these reenactors who have PTSD from serving in the military.

For the historical background to this study I used letters, diaries, biographies and life histories to establish a pattern from the men during the Civil War with PTSD and the men reenacting the war with PTSD. Many of the stories and experiences of the soldiers that reenact the Civil War and those who fought in the Civil War are the same. These stories and experiences were tape recorded. The physical information of body language and clothing was recorded with each interview by the researcher.

Participants Vignettes

Gabriel

Gabriel is a 50+ year old white male who served in the Vietnam War. I interviewed Gabriel at a Civil War reenactment in Alabama. Gabriel was sitting in a wooden rocking chair under a canvas tent fly. Soft music was playing in the back ground and children

were playing in the creek. Gabriel smoked on a pipe during the whole interview. I have known Gabriel for many years. I first met him through my father, who is also a Vietnam veteran. Since that time Gabriel and I have spend many nights talking around the campfire or in camp.

Joseph

Joseph is a 50+ year old white male who served in Iraq. Joseph was interviewed in Alabama at the same place as Gabriel. Joseph is a very quiet unassuming man who is very eager to share his love of Christ with any one who would listen. It was early in the morning when I interviewed Joseph. We were sitting at picnic tables with a breeze blowing and leaves rustling over out heads. I have known Joseph for about four years. Joseph does only mainstream reenacting.

Patrick

Patrick is a 20 something year old white male who served in Iraq and was sent home after being wounded. I interviewed Patrick over a web camera. Patrick was sitting in his study with the door closed. His wife was out in the living room watching TV. At first Patrick seemed very nervous and stated many times that he was not sure if he would say the right things to me when I was ready to interview him. Patrick does authentic reenacting and has been the coordinator of some of the events that I have reenacted at.

Robert

Robert is a 50+ year old white male who served in the Vietnam War. I interviewed Robert in the living room of his house. His wife was in and out of the room during the

interview but did not speak. Robert and I have reenacting together for ten years. He does other time periods besides Civil War. The other time periods are French and Indian War, Revolutionary War, and the War of 1812.

William

William is currently serving his second tour Iraq. I interviewed him over a web camera. He could only talk for a very short period of time. I could not see where he was only that it was him and it was very hard to hear him speak. William and I have reenacted together for over ten years. He was a young teenager when I first met him. Since that time he has gone from mainstream reenacting to more authentic reenacting.

Jonathan

I interviewed Jonathan over a web camera while he was serving in Iraq. I had not met him before. He is a quiet unassuming family man who is a career military man. Jonathan is in his mid forties.

Themes

From within the context of reenactors with symptoms of PTSD five themes emerged. The first themes "Out of Reality" a descriptor of their escape from reality. The second was "Structure and Discipline" a descriptor of the structure and discipline of the military life as reflected in reenacting. The third was "Honor and Duty" a descriptor of military honor and duty. The fourth was "Friendship and Companionship" a descriptor of the friendship with other like minded people. The last was "Love of History" a descriptor of a love of history.

Out of reality

Civil War reenactments encourage the participants to create a character or persona of who they want to be for the event. This creation may be an actual historical person or a compilation of different people that lived during the Civil War. Gabriel is one such reenactor who takes this creation seriously as shown by his statement:

By doing or portraying general officers, colonels and upper level of the officer core I also have to maintain that. That means when it is hot and everybody else can dress down to their shirt and suspender General Raines can not. He wears a frock coat. He wears the uniform and that could be detrimental physically but I am steadfast in wanting to see that their image is not tarnished by my action.

By doing this the reenactor can become another person with a different set of problems which may or may not mirror their modern day problems. Jonathan states:

It is also a form of escape from reality from the pressures and problems that we have. ... To experience war and what the men had to go through helps me understand some of the things that I had to go through in Iraq. In leaving home, their loved ones, their wives, their children to go to war to defend their country or their state just like I had to do. ... It is like I can walk in their shoes for a couple of days.

Not only do the reenactors pick personas, but they also research and use the social mores of time period when interacting with others. Joseph further states that he liked it when women were ladies and follows the guidelines set down in the Bible.

But I like the fact that back then men where men. They had a code of honor that they lived by. A man gave his word on something, he kept it.

By listening to and observing Joseph it seemed that he liked the predictability of this and it gives him a sense of security. People that suffer from PTSD lack a sense of security in the world around them. Reenacting appears to give them a sense of security. This sense of security carries though to the characters they play. The men usually portray soldiers from the same type of service that they did in the military. Patrick was in the infantry

and portrays an infantry private. This helped him understand what the average soldier went through in the Civil War which was similar to what he went through in Iraq. Patrick states:

I was in the infantry in the Marines and I portray an infantry soldier in the civil war. An infantry soldier of any time period is going to have some of the same traits if that makes sense. They have all had to leave home and go fight for something that they may or may not believe in. People do not just enlist in the infantry because they think that it will be fun. ...after I was in the military I have a different perspective, uh, as far as the military bearing, duties and stuff like that and even when we go into a mock battle, it is different. .

Gabriel talks about the choices that are made in battle at reenactments do not have a life or death quality. In a reenactment, no one dies. After taps are played every one gets up and goes back to camp. He states:

There is little stress in reenacting. It is a hobby. Nothing that has the importance of life or death, nothing has the importance of world consequences, and if you make a mistake it does not cost anyone their lives.

Structure and discipline

In the reenactments that are more authentic and more military in bearing, military stature and discipline is enforced. The men salute the officers out of respect for their rank. The same respect for rank is shown to non-commissioned officers like sergeants. The soldiers are placed on guard mount, picket duty, and fatigue duty. Discipline includes following a lawful order out of a sense of duty. In the reenacting community discipline helps form unit coherence and teamwork. This is reflected by the following statement by Gabriel.

Well, I think that understanding of military discipline and an appreciation for the hardships that the men went through during the period. Related to the facts of the hardships that I went through personally, were not as severe as it was then. It would

have been standard hardships but I had more of the ability to survive, the air conditioning and properties of the current age that I could stand it easier than a person of the time period that I am representing.

Gabriel goes on to say that after being in a reenactor he has a better understanding of why military structure and discipline is important. Gabriel states:

Not a lot other than all parts of the military service had that part of discipline, following orders, the courtesies are very similar, and the stress factor, I suspect that they were similar and that they have a responsibility to the duty that you have to carry out, regardless of whether you are in the Navy, Marine Corp, Army, or the Air Force.

The structural and discipline of the reenactments gives the soldiers a sense of comfort and stability. Many of the military soldiers have had a hard time adjusting to civilian life or life after retiring from the military. Robert exemplified this idea when he stated:

It is a way of life; some of us find it a little hard to adjust to civilian life.

Honor and duty

The theme of honor and duty is one of the first ideas stressed in basic military training. In the Marines, one is to honor God, Country and Family which includes the Marine Corp. This idea is not unlike the one held by soldiers in the Civil War. All the men stated that one of the reasons that they reenacted was to honor their ancestors that had fought in Civil War battles. Family honor and duty to ones family and country was foremost in their lives. This thought is reflected in William's statement. He states:

We all form a bond that is best described by Stephen Ambrose taking the term a "Band of Brothers" from Shakespeare. It's all about the bonds formed by soldiers... whether real soldiers or reenacting soldiers.

Patrick agrees. He states:

I think that it is a sense of duty and wanting to do something with your life. That is one of the reasons that I reenact an infantry soldier.

A duty to honor your ancestors is one of the reasons that the Civil War was fought. Family honor was very important to the soldiers. All the participants in this study wanted to honor the men they fought in the war and to honor their ancestors.

Friendship and companionship

Friendship with other like minded people is one of the many reasons that most people reenact. Reenactors and soldiers in the military learn to rely on other people in their unit after they have spent many nights in the rain, snow, or heat of battle. William found this to be true shown by the following statement.

The many times of being miserable, rained on, cold, etc, have made us close friends.

Joseph echoed the same thoughts in his statement.

In my circle of friends, I have more friends that are involved in reenacting that I consider my close friends.

Men with PTSD are better mentors to younger soldiers with PTSD from military service. All of the men that served in Iraq stated that they had a friend in reenacting that was a veteran and had some of the same problems that they had. My father, who is a Vietnam War veteran, believed that it was his duty to welcome the new soldiers back and to help them to readjust to the civilian world. Jonathan found this to be true of his friends also. Jonathan states:

Yes, he is a Vietnam War vet. He was one of the first people to welcome me back after my first tour in Iraq. He told me that he feels that it is part of his duty to those of us that have served in the war to be welcomed back. I was able to talk to him about some of the things that I was thinking; some of the things that I had seen or heard over in Iraq. He is old enough to be my father yet I feel that some times he and others that have fought in a war are the only one that can understand what I feel right now.

Patrick also found this to be true. He stated:

... one of my best friends in the hobby is a Vietnam Vet. He did two tours in Vietnam. He and I are very close, we do other stuff besides Civil War reenacting together and he is older than my parents. We camp together sometimes and fish together.

Many people with PTSD were not able to talk about what happened to them in the war or their feeling about having to go to war and to take other peoples lives. Sitting around a campfire talking with friends is a great way to debrief. Patrick states:

Sitting around with friends, messing around in a military like environment. We use to sit around the barracks and complain about the some things. It is hot, we marched 15 miles or what ever. You do that when you reenact. You march 5 or 6 miles and every body is gripping about it. It is a group of people with a bunch of common gripes and a lot of stuff in common. Just like it was back in the Civil War with mess mates.

Love of history

All the men interviewed stated that one of the first reasons they started reenacting was a love of history that started in childhood. Gabriel, Robert, and Joseph have told me in the past that they started reading the history of the area that they lived in and then went to a Civil War reenactment. Robert states:

.....Basically because I love and have always loved history. I think that is a prerequisite for being a reenactor is an innate love of history. ...to be able to portray and dress like they did for a little while, like my forefathers did, like some of the people that I have read about. A basic love of history, I have always been an avid reader and just reading about Andrew Jackson and Sam Huston being wounded at the Battle of Horseshoe Bends and Davy Crockett.

Patrick, William, Jonathan started reenacting as young adults. Patrick states:

I got started reenacting with my SCV group that I was in and it was something that I have always enjoyed.

Joseph adds: *I love American history.*

Gabriel not only reenacts out of a love for history, but out of a sense of duty. He states:

...if we do not know history then we are destined to repeat it.

Summary of Findings

Six, white, males between the ages of twenty and sixty were interviewed at Civil War reenactments, over web cameras, and in their homes. These men had all served in the military and suffered from symptoms of PTSD. During the interviews five themes emerged. The first theme was being able to escape reality. The second was the structure and discipline of the military as seen in reenactments. The third was honor and duty to your country and to your ancestors. The fourth was friendships that were made within the reenacting community. The last was a love of history and wanting to make other people aware of what happened in the Civil War. One of the men summed it up with the quote "We are a band of brothers."

CHAPTER FIVE

DISCUSSION

The purpose of this study was to explore the meaning of Civil War reenactments in military men with symptoms of PTSD. Interviews were completed with six volunteers who served in the military and had symptoms of PTSD and who reenact. The results of the analysis revealed five themes; out of reality, structure and disciplined, honor and dusty, friendship and companionship, and a love of history. This chapter will discuss recommendations for future studies of PTSD and how this study adds to the body of nursing knowledge.

Discussion

The ROL defined and discussed PTSD in both the Civil War soldier and in the modern day soldier, but the ROL did not make any connection between Civil War reenactors and PTSD. Since my frame work was phenomenology, I was able to study the life experiences of Civil War veterans and Vietnam and Gulf War soldiers and veterans through the ROL. The ROL added to the body of nursing knowledge as far as diagnosing and treating PTSD. The only study pertinent to the findings of my study was Murphy, Cameron, Sharp, & Ramirez (1999) study on behavior modification and redirection therapy with Vietnam veterans. This study showed how veterans used different behavior modification and redirection therapy to change their unacceptable behaviors due to PTSD. Civil War reenacting is an acceptable form of behavior modification. The lack of findings in the ROL shows that more studies need to be done and published.

Recommendations

I would recommend that more studies be done on a larger group of men including other ethnic groups. I did not include women in my study because I am not aware of any women in reenacting that have PTSD from serving in the military. If large enough population of women that reenact could be found, I would recommend that they be included in a separate study that is tailored to the unique problems of women. Reenactors from other time periods could also be included. Those who reenact civilian roles could also be included.

Significance of Finding

This study makes a contribution to the research literature because the experiences of people with PTSD who do Civil War reenacting has not been described else where. Behavior modification using redirection therapy has been used in the past with good results to treat veterans with PTSD. Civil War reenacting is a type of redirection therapy that can be used to treat the feelings associated with PTSD. Behavior modification is less costly and less mind altering than medication. Patients may also find behavior modification more acceptable than being placed on medication.

Conclusion

In my study I found five themes that emerged after I interviewed my participants. The themes: were escaping reality, structure and discipline, honor and duty, friendship and companionship, and loved of history. Based on this study of six Civil War reenactors with PTSD from serving in the military I think that it supports evidenced based practice

for using hobbies as an appropriate type behavior modification for relief of the stress of PTSD. I can further conclude that other types of reenacting could help in the same way that Civil War reenacting helps.

References

- Cain, K. (2004). The war comes home. *GQ*, 242-247, 303-304.
- Dalenberg, C. (1999). The management of dissociative symptoms in PTSD patients, *NG-PTSD Clinical Quarterly*, 8(2), 27-29.
- Dean, E. (1997). *Shook Over Hell*, Post-Traumatic stress Vietnam, and the Civil War. Cambridge: Harvard University Press.
- Dekel, R., Solomon, Z., Ginzburg, K., & Neria, Y. (2003). Combat exposure, wartime performances, and the long-term adjustment among combatants, *Military Psychology*, 15(2), 117-131.
- Dekel, R., Solomon, Z., Elkit, A. & Ginzburg, K. (2004). World assumptions and combat-related posttraumatic stress disorder, *The Journal of Social Psychology*, 144(4), 407-420.
- Diagnostic Criteria from DSM-IV*. (1994). Washington DC: American Psychiatric Association.
- Foa, E., Keane, T., & Friedman, M. (2000). Effective treatments for PTSD: practice guidelines of the international society for traumatic stress studies. New York: Guilford Press.
- Ford, J. (1999). *Disorders of extreme stress following war zone military trauma: associated features of post-traumatic stress disorder or co morbid but distinct syndromes*. Retrieved November 14,2004 from <http://www.trauma-pages.com/ford99.htm>.

- Gillis, A., & Jackson, W. (2002) *Research for Nurses Methods and Interpretation*. Philadelphia: F.A. Davis Company.
- Grinage, B. (2003). Diagnosis and management of post- traumatic stress disorder, *American Family Physician*, Retrieved November 14, 2004
- Litz, B. & Gray, M. (2002). Emotional numbing in posttraumatic stress disorder: current and future research directions, *Australian and New Zealand Journal of Psychiatry*, 36, 198-204.
- Murphy, R. Cameron, P. Sharp, L. & Ramirez, G. (1999). Motivating veterans to change PSDT symptoms and related behaviors, *NC-PTSD Clinical Quarterly*, 8(2), 32-36.
- Murdoch, M. (2003). Time, gender, and regional trends in the application for service related post-traumatic stress disorder disability benefits, *Military Medicine*, 1980-1998. 168, 662-670.
- National Center for PTSD. (2000). Retrieved November 14, 2004, from www.wcptsd.va.gov
- Otis, J., Keane, T., & Kerns, R. (2003). An examination of the relationship between chronic pain and post-traumatic stress disorder, *Journal of Rehabilitation Research and Development*, 40(5), 397- 406.
- Pizarro, J., Silver, R., & Prause, J. (2006). Physical and mental health costs of traumatic war experiences among civil war veterans, *Arch Gen Psychiatry*. retrieved June 19, 2006 from www.archgenpsychiatry.com.

Stanton-Bandiero, MP. (1998). Shared meanings for military nurse veterans: follow up survey of nurse veterans from WWII, Korea, Vietnam, and Operation Desert Storm, *Journal of the New York State Nurses Association*, 29(3/4).

Thomas, S., & Pollio, H. (2002). *Listening to Patients a Phenomenological Approach to Nursing Research and Practice*. New York: Springer Publishing Company

Wolfe, J. (1990) NCP Clinical Quarterly. *Women veterans: updates and trends*.

Retrieved July 5, 2006 from

<http://cache.zoominfo.com/CachedPage/CachedPageMain.aspx>

**A RESEARCH STUDY OF THE EXPERIENCE
OF CIVIL WAR REENACTORS AND POSTTRAUMATIC STRESS DISORDER
CONSENT FORM**

You are invited to take part in a research project. I am doing this study to complete requirements for my master degree in nursing at Southern Adventist University. The purpose of this study is to explore the life experience of civil war reenacting as it relates to males who have symptoms of PTSD and have served in the military. The understanding of this experience will help nurses and other health care providers better serve this population.

The research study will be done through the use of an audiotaped interview that will last approximately one hour (maximum of two hours) in a place of your choice. You will be asked to share your lived experiences of having symptoms of PTSD and being a civil war reenactor. Further questions will be based on your comments and responses. This interview will be audiotaped so I can use your exact words to understand your experience. The results of the interview will be written out into a printed form for analysis. Your name will not appear on the tape or the written form of the interview and will be known only to me, the principal investigator. Tapes will be transcribed by me. After transcription, the tapes will be shredded. The written form of the interview will be kept in a locked file in a locked data storage room at Dr. Batson's office, at Southern Adventist University. Data without your name will be kept for future analysis. You may contact me, following the interview and during the analysis, to make clear the understanding of your experience. No incentives are offered to you for your time and effort in taking part in the study; however, you may personally benefit by talking about your experience.

Any and all information you provide will be kept in confidence. Neither your name nor any identifying information will be used in any reports although your words may be used to support the interpretation and analysis. At no time will your words be linked or traceable to you. You may at any time in the study withdraw by contacting me.

If you have questions at any time about the study or the procedures, you may contact me at 7710 E. Brainerd Rd. # 810 Chattanooga, TN. 37421 or phone me at (423) 802-7695.

I have read the above information and agree to participate in this study. I have received a copy of this form.

Participant's name (print) _____

Participant's signature _____

Date _____



P.O. Box 370
Collegedale
Tennessee 37315
423.238.2111
Fax 423.238.3001

E-mail: postmaster@southern.edu

May 15, 2006

Ms. Kimberlee Bruce
7710 East Brainerd Rd. #810
Chattanooga, TN 37421

Dear Ms. Bruce,

The Human Participants in Research Subcommittee has approved your research application entitled "*Posttraumatic Stress Disorder in Civil War Reenactors that have served in the Military*". It is the understanding of the committee that you will study adult male participants who are living in the United States and have served in the military in the Middle East.

It is our understanding that your dissertation research is being conducted through the School of Nursing. All data is to be kept in a secure location and the study is expected to be concluded by July, 2006.

Sincerely yours,

Linda Ann Foster, Ph.D., Chair, Human Participants in Research Subcommittee
Professor, Biology Department
Southern Adventist University

