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## Review of "Among the Walking Wounded: Soldiers, Survival and PTSD" by Colonel John Conrad

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Colonel John Conrad. *Among the Walking Wounded: Soldiers, Survival and PTSD*. Toronto: Dundurn, 2017. Pp. 232.

A common image associated with military post-traumatic stress disorder (PTSD) is that of the after-battle photo portraying a dusty, exhausted, weapon-clad soldier crouched on the ground head-in-hand. However, as much as this might or might not represent the issue of service-related PTSD, the reality of the condition and how it gnaws at the veteran's mental fabric over time is usually much more layered and nuanced. A veteran of numerous overseas tours, Colonel John Conrad's *Among the Walking Wounded: Soldiers, Survival and PTSD* is an account of his own and some of his subordinates' struggles with PTSD. It serves as a much-needed insight into the "walking wounded" who everyday are dealing with the effects of service-related trauma.

This book illustrates at a personal and professional level how unprepared Canada and the Canadian Armed Forces were in dealing effectively with the mental health impact of the War in Afghanistan. *Among the Walking Wounded* is a personal testimonial of this situation written by a senior Logistics Officer who was not only involved directly in the conflict, but was also high enough in the rank hierarchy to personally and professionally witness the policy motivations, applications and shortcomings playing out at the military's senior management level. By his own account, our army lacked sufficient ammunition on the ground in Afghanistan as much as it lacked empathy for and a coherent policy to treat those with PTSD. This perspective is from a leadership-proven, professional officer whose post-deployment world "in the span of a few weeks, had turned into an ugly battlefield" (p. 101).

Conrad's work also serves as an indictment of sorts on Canada's careerist-obsessed Regular Force. "Most of my colleagues were threats, enemies," Conrad states of his post-Afghanistan deployment world. "Kind words were spoken with ulterior motive and manipulation in mind. My own branch of the army had had turned its back on me and offered me no assistance" (p. 101). The Canadian Armed Forces could claim to acknowledge the reality of PTSD among its serving members, but Conrad argues that its collective corporate mindset automatically assumed a level of professional normalcy post-deployment, which some combat-zone veterans cannot reconcile so easily with. "I was being culled from this herd and their rituals by an unseen force," Conrad acknowledges of waking up to his mental health after returning to

routine military life in Canada. “I was terrified at my loss of control and the strangeness of the experience” (p. 48).

As a direct witness to Canada’s participation in Afghanistan and its aftermath, Conrad avoids the carefully pedantic contextualisation, requirement to cite academic sources and career consciousness that may drive internal service papers and reports on the impact of PTSD. It is, in other words, a non-medical book on a military medical topic that can inform today’s military community (not to mention families, civilian associates and co-workers) in straight-shooting, layman’s language about what is likely happening to the military’s PTSD “walking wounded.”

The book will thus serve as a valuable reference for any historian wishing to analyse the individual impact of PTSD, such as how it obstructed the lives and careers of Forces personnel and how prepared, or unprepared, the Forces were in response. In doing so, Conrad also portrays the personalities, images, emotions and frustrations involved when serving on the ground in Afghanistan. “Whatever glimpses of the war are offered by the history books,” he states, “it will be difficult to retrieve Kandahar’s perpetual assault on the mind” (p. 52).

Above all the book recounts and illustrates how PTSD festers and grows after one’s alleged return to the normal rituals of home life and career. For Conrad, such “memories need effort, not to conjure but to keep them packed up” (p. 52). It is here that Conrad, though his experience and rank, provides useful insight into how the executive career and decision-making function of the Canadian Armed Forces remained locked in a long-term peacetime career management frame of mind. One that by its very nature shuns accommodating for any struggles servicemembers might have in transitioning to peacetime service. Even worse, it is a system prone to mock the perceived weak and vulnerable. One can only feel sheer disgust at Conrad’s personal example of a callously immature, badly-timed, hurtful and senseless office gag which other high-ranking senior officers intentionally played on him when he was struggling to get by with his mental health challenges (pp. 140-41).

Chapters 5, 6 and 7 offer much-needed insight into the lingering second-class status of Canadian Armed Forces Reserves, especially in relation to post-deployment treatment for PTSD. These chapters should be compulsory reading to aspiring senior Regular Force leaders, most of whom, in the words of Conrad, “do not understand the Army Reserve—but think they do” (p. 174). Through his

subsequent service as a full time (Class B) reservist, Conrad recounts how he and other Afghan veterans in the Reserves faced their battles with PTSD while also confronting all the additional Reserve-specific suite of bureaucratic obstacles. Despite their experience and service, these Afghan veterans from the Reserves sought post-deployment access to PTSD services against an institutionally aloof, bottom-line obsessed Regular Force. The result, according to Conrad's account, was a two-tiered medical treatment system that effectively appeared to function on the belief that some seeking treatment were more equal than others. Conrad reveals through his own lived experience that Reservists are not necessarily entitled to the same level of medical treatment for injuries such as PTSD once their full-time deployment contracts are over.

Somewhat of a disappointment is the cursory account provided at the end of the book on the byzantine maze of red tape that Afghan veterans seeking treatment are required to face. As has been abundantly reported in the media for almost two decades, the bottom-line driven policy of Veterans Affairs challenges and downplays even well-documented claims of service-related disabilities. This reality will only further aggravate veteran's mental health issues down the road. Canada's "walking wounded" seeking medical help post-service, eventually fall under the "care," however bureaucratically defined or denied, of Veterans Affairs Canada.

Finally, despite *Among the Walking Wounded's* succinct personal illustration of how PTSD can develop, and indeed be aggravated post-deployment, the book fails to clearly address an essential missing link in our understanding and treatment of PTSD. That is, why are some veterans more impacted by the condition than others. As stated in the excerpt from Veterans Affairs, this diagnostic challenge "has no simple answer" (p. 156). Nevertheless, the whole story of PTSD—why it often happens and why it sometimes does not—needs to be researched further. Specifically, what could account for why some Afghan War veterans were seemingly less mentally impacted by the same traumatic experiences? Of course, such insight should never have the unintended consequence of dismissing Conrad's genuine and very truthful historical reality. This is especially the case because there are thousands of other "walking wounded" among us whose need for assistance remains unanswered and whose stories remain to be told.

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