

New Nonfiction from Bettina Rolyn: “Adjustment Disorder”

For thirteen years, I stored my boxes of army documents and medical records in various basements, closets, and attics, mostly not my own as I had fled the land for foreign adventures, eventually settling in Berlin. I couldn't get far enough away from those boxes and what they reminded me of. But there, in those dark and musty corners, they waited patiently. Too hot in the summer and cold in the winter were my excuses for not sorting through them. Some just-right day, I intended to look more closely at the documentation of my suffering, but there they stayed: neatly arranged from the outside, chaos and pain detailed within. I always had another excuse—if you're looking for one, any one will do, they say. Then came the novel coronavirus. Life halted. Riots erupted in the streets as America's own darker corners came to light, regardless of the pandemic. With the distractions of overextended social calendars and freedom of movement gone, out of that pause arose the cry for justice in America, for the truth to be known and the past unearthed.

When the plague hit, I was back in the States, my homeland, and got stuck for four months at my mother's while visiting her in rural Pennsylvania—living for free—but in close proximity to elderly and at-risk individuals. I couldn't join the protests against police brutality for fear of bringing the pandemic back to our small community. My hands were bound already without zip-ties or handcuffs. What could I do with all my pent-up frustration and time to spare? The attic beckoned. I braved the muggy heat and dragged down the box of medical records. Inside I found five large, white envelopes from the Department of Veteran's Affairs—a helpful guideline printed in all caps added clarity: DO NOT OVERFILL. Now you tell me.

My 3.5-year enlistment was one of the most intense periods of my life. It consisted mostly of a very long string of training events, bad romances, affairs, drunken flings, and physical and psychic pain. In retrospect, this might be the same for many civilian women in their late twenties, but my drama involved more early formations, uniforms, and abuses of power.

I enlisted after graduating liberal arts college at the age of 25 and went to basic training alongside 18-year-olds who had just finished years of high school football. They were used to being under intense physical strain and getting yelled at by coaches; I had been studying languages and philosophy! It was a hard landing in basic training, which never wore off. From basic on, my muscles, tendons, and ligaments, and then gradually, my spine bulged and rebelled. Things continued to deteriorate in Advanced Individual Training (AIT), where I learned to be a prisoner of war interrogator. Another year of learning Persian-Farsi at the Defense Language Institute (DLI) only exacerbated my condition.

Glancing through the timeline of my military service as revealed in my medical records, I was struck by the evolution detailed in the list of medical treatments. It's a wonder I wasn't inspired to seek a career in medicine as I cycled through the specialties gaining valuable experience as a patient in each. It began in general and sports medicine, then neurology, dermatology, optometry, orthopedics, and internal medicine. There was even a short spell in obstetrics, which lead to emergency medicine and mental health; at some point, I graduated to the experimental pain clinics and more mental health centers. I spent a long time at pharmacy school. I had signed up to do my part in the war on terror but found myself seeing more of the benefits of socialized medicine than the frontlines of combat.

I always loved the idea of the army and yet when people learn about my military service, they are often surprised, and I find myself laughing too. Did I really do that? I tried not to

think about it for years, but the reality of it—the context and timing of my enlistment at the height of the surge in Iraq, even many of the people I worked with—I hated. Of course, not all of the time, but I was often bored by much of what my job entailed. I was outraged that, with all my education and training as an interrogator and linguist—us linguists were often reminded of how many hundreds of thousands of dollars the Department of Defense had spent on our training—I was often relegated to sorting papers or white-washing rocks or taking orders from semi-literate superiors.

I tried to hide this snobbery of mine, but sometimes failed. I would get yelled at for an arched eyebrow, that danged “attitude” of mine always found a way to creep onto my face, try as I might to suppress it. It was a love-hate relationship because despite my feelings of superiority in certain matters, I can see now how I desperately wanted the army to love me. This mattered so much because if the army loved me, then I could love me, too. But I would never rappel down a rope from a helicopter to storm a building or save a fallen comrade with a fireman’s carry. Not with this twisted spine. Try as I might to become a good soldier, I would never belong in the military, not really. And I would not be happy there either. There were some moments of glorious fun: That part of basic training when you get to throw a grenade or climb an obstacle course high above the trees come to mind.

I open another big white envelope and start reading about the stage when I finally was given a permanent profile restricting my physical activities. No more running, but I was permitted to walk the physical fitness test. Oh, the shame! Once I finally finished the endless AIT and language school phase, I got my orders to Ft. Hood, Texas, and was assigned to a Military Intelligence unit at West Fort Hood. Within a day, I was trotting around the Texas plains playing OPFOR—the bad guys—against our own troops who were training for deployment—and winning, a not so subtle sign of what awaited

America in Iraq and Afghanistan. That was actually a lot of fun, getting to play a role that was not military, but the guerillas and terrorists who would reveal the allegedly invincible US military's weakness. I would be rewarded in that role for my unique "solutions" and clever outside-the-box thinking.

I had wanted to be part of something bigger than myself; to pursue justice and be amongst the righteous. I wanted to be told I was good and doing the right thing. I performed well on standardized tests, and I loved being told "you done good." I was an excellent linguist—top of my class even, earning an achievement medal for my language test scores and good grades. I lived for praise and was crushed by criticism. "You're a piece of shit soldier," I heard from a few NCOs over the course of my training, for various reasons: Not being able to perform a buddy-carry because of an injured shoulder, or for crying during basic training. And gradually, I believed them. They were the experts after all, they ought to know who was a POS and who wasn't.

The military had seemed like a good place to get this sense of higher purpose I craved, of being in the right place, and "doing good." I didn't approve of invading Iraq, but genuinely wanted to minimize potential collateral damage with my language skills. But tolerating the inanities that the military is known for—mindlessly, obediently following orders—for example, was not my forte. My individuality strained against the inevitable petty exercises of military authority that abound where power is distributed to immature people. I had a knack for picking up on large and small injustices taking place around me. One roommate I had at Ft. Huachuca during AIT was a "holdover." She had accused a fellow student of rape and was forced to stay in the same unit as her rapist until an investigation was completed. Out of frustration and despair, she tried to make it all go away by rescinding her accusation and was then prosecuted under the

UCMJ—for making a false accusation! I watched helplessly, but learned the important lesson: Do not report, do not resist. It is futile and will result in further suffering. For a time, I doubled down on attempting to conform and “exceed the standards,” ignoring my increasing list of physical ailments.

I was reminded in my records, that already at DLI, I had gone to see the chaplain and confess my woes and frustrations. He informed me that women shouldn't be in the army anyway. He referred to a recent case of a female linguist who had killed herself in Iraq and said that the same fate awaited me if I didn't get out soon. Because he also claimed to have special knowledge of impending doom, “The world would soon go up in flames when the Antichrist, a new pope, would start World War III!” he had informed me—amongst other conspiracy theories—it was easier to discount his views overall. But the seed of doubt about my ability to handle things because of my gender had been sown.

One day in 2005, in the oppressive heat of Texas at Fort Hood, I found myself in tears after some classic Army-scenario of humiliation. This meltdown was related to another one of my “transgressions,” some injustice had been done to me—or another hapless private. I don't even remember whether it was me or someone else who was the target, but I couldn't keep my mouth shut and suffered in either case. As I attempted to maintain my military bearing and failed, a sweet sergeant from my squad, who had recently returned from Iraq, approached me afterward. While trying to calm me down, he said, “You know, you might have adjustment disorder. I'm taking Prozac for my PTSD; it seems to be the only way to make it through the day. They prescribed it to me after I bit a guy on the face. He came to my house, and I just bit him in the face. Yeah—adjustment disorder.” He was a smallish, pock-faced man also in his mid-twenties and had been a gunner on a Humvee. I didn't ask him for details but knew he meant well with his tip.

I thought about my “disorder.” I didn’t want to bite anyone, but I sure drank a lot... Would I need to take medication just to exist in the military? Must I pretend that I had adjusted to it, when clearly, I had not? What does it say about a person who thinks it’s normal to be yelled at? And did I want to become that person? I hadn’t even been to Iraq yet. I knew enough—and was counseled by a psychologist—to avoid prescriptions that indicated mental health issues because of my security clearance as a linguist. There was a magic, red line that ought not to be crossed when discussing one’s mental health. *No, I’m not hearing voices. No, I’m not going to kill myself or others.* There probably was a clear line in the way security clearances were adjudicated, but that line remains a secret to those applying or even already holding such clearances. Nevertheless, according to my medical files and that long list, the number of medications prescribed to me by so many doctors in all those specialties in the last two years of my enlistment alone, was 29. But none of them were antipsychotics, whew!

According to the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) which was released five years after my medical discharge, adjustment disorder and PTSD are classified as trauma and stress-related disorders. PTSD is triggered by an *overwhelmingly* traumatic event, whereas adjustment disorder is caused by “only” a stressful event or change in environment.

Already during my enlistment, I could see acutely how the very thing that made the military strong as a whole required the suppression of individuality and individual freedom. How could this be reconciled? I never figured it out. I couldn’t turn off my sense of self and couldn’t repair it either. So, I obliterated it in ways known to all soldiers: drugs and alcohol.

The truth is that I was high a lot in the army. When I got to my first real duty station at Fort Hood, my brigade’s motto

was “Always Ready.” They didn’t specify what for. Most often, always ready to either drop everything to fulfill the whims of a superior—the so-called “Needs of the Army”—or to party, which meant binge drinking. On top of the doctors prescribed medications, a lot of us seemed to be self-medicating with alcohol.

Even with my favorite medication condoned and readily available, this constant state of readiness and being on alert—lest a male superior use the excuse of my rank insignia or beret being slightly crooked to talk to me and ask for my number—drove me crazy. I was like a rat in a glass case. Always being observed and with nowhere to hide. When I got out for a minute, it was to be petted and stroked by my owners. Being female presented a constant set of challenges that I hadn’t quite anticipated. The need to be extra “high-speed” all the time—lest I make all women look bad—made every occasion, even just walking down the street, a test. It was exhausting.

Already in the 1960s, psychologists developed a test for a person’s “tolerance of ambiguity,” which I took a few years after my time in the army. My score was not as high as I’d always assumed or hoped it to be. But it was finally official: I don’t like not knowing what is happening next. I don’t like “embracing the suck,” or living, “always ready” for the unknown next catastrophe. I mistook my desire to serve my country for the ability to submit to the powerlessness of the enlisted world. But I didn’t need Prozac to ease my mind. I could take an army doctor’s prescribed muscle relaxant (for my back pain) and sleep for sixteen hours. I could take a Tramadol, down a few beers and go *chill out*. I often would check out of my pained body and tortured soul with pharmacological assistance; I could immobilize myself with permission for a few precious hours. And I would, except that there were consequences.

The higher I got, though, the further down I pushed my real

emotions. There, under layers of uppers and downers, they festered, the fumes of my rage and pain oozing out as from a forgotten trash can. Maybe I really did want to bite someone? Instead, I self-sabotaged. When the high wore off, I cried. Eventually, I couldn't see the reason for staying in such a messed-up system with its outdated hierarchy and inefficiency in all things except matters of destruction. This was a system that took perfectly well-meaning people and turned them into the kind who would bite someone on the face because they don't know how to deal with the horrors they've witnessed.

I was also part of a rotten scheme: The military I was a member of was being used to implement an illegal war by a president who hadn't won the popular vote, and to oppress the powerless in multiple countries. I was both oppressor and oppressed—part of this system and equally suffering from it. I'm certainly not the first to observe this tragic conundrum.

I was a linguist, qualified in German, Spanish, Italian and newly trained in Persian-Farsi. I was getting paid extra to maintain four languages, but not doing anything with them. I had signed up to be an interrogator yet because of my physical issues could not deploy with my unit to Iraq. Nobody likes to feel incompetent and unqualified, and I felt like I was both. I was not going to save anybody with my precious language skills. But as every soldier knows, the only things worse than being a *Fobbit* (a soldier how doesn't leave base while deployed) is not having deployed at all.

Finally, in 2007, I was ready to acknowledge that the army wouldn't love me and to cut my losses. I accepted a medical discharge for back and shoulder injuries. But like some sort of institutional form of Stockholm Syndrome, it took me a long time to deprogram. Even after my discharge, I tried several times to deploy as a civilian. I turned down an assignment in Afghanistan because I was going through a divorce, but I still wanted to be a part of it all and prove that I wasn't just a POS soldier. I wanted that pat on the back, and to be part of

that coveted club of (mostly male) war veterans. I was so caught up in my desire to be part of it all, that I only gradually realized that if things sucked stateside, they would only be worse downrange, as a civilian or a soldier.

But now, thirteen years later I saw what was recorded in my medical file and reminded that it was not just that kind sergeant who saw the obvious: My record of diagnoses did indeed include, "ADJUSTMENT DISORDER WITH DISTURBANCE OF EMOTIONS"—all caps. I hadn't realized it at the time, I was so eager to close that box of pains.

From what I can tell, things have improved for women in the military since my stint. I know that women, in general, are capable of all the things men are, but I still wonder how much I would have been capable of if the men around me believed I was or how much of my failings were due to my gender. The slow unpacking of pains on paper and through my writing has helped heal some of the issues on my long list, but practicing self-acceptance and love and rebuilding a sense of self is not a task to check off the To-Do list in just a weekend.