Combat Stress Reaction and the General Adaptation Syndrome

Entry - Geoffrey Brooks Essay Competition

Gunshow
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Note:

Everyone in the Canadian Forces is considered a soldier first, including artillery members. This essay is regarding the psychological reactions to strenuous combat situations. Artillery members sometimes find themselves in serious fighting contact in the same manner that the infantry does. It is in this way that gunners and the infantry can share the same psychological consequences of war. For the purposes of this essay, the term ‘soldier’ includes artillery members.
Stress is a complex term, which can be described and theorized in many different perspectives. For the purpose of this essay, stress refers to the reaction between a person and the environment they’re in. The environment is considered stressful if it is taxing for the person or exceeds the person’s resources. The way that the person transacts with the challenging situation determines the kind of stress reaction they will experience. (Lazarus. 1990. Pg 3) Stress theories and models, such as the General Adaptation Syndrome, help to understand the certain reactions to stress that humans experience in order to maintain internal balance.

Serious stress environments, such as military combat experienced by soldiers, can cause not only serious physiological repercussions but also psychological illnesses. A common psychological illness that many soldiers experience after intense stress is combat stress reaction. Combat stress reaction, sometimes referred to as shell shock or battle fatigue, is a term used to describe the various physical and psychological effects that overwhelm a soldier and reduce combat efficiency after an intense period of stress often experienced in military theatre.

Combat stress reaction is a relatively new name for an old mental illness that was noticed in WWI, known then as shell shock. During that era, little was understood of mental illnesses and little to no care was given to soldiers experiencing shell shock. The lack of understanding was evident in that the British Army during 1915 ignored other combat stress factors and would not give a ‘shell-shocked’ patient a wound stripe or a pension unless a shell explosion was the direct cause. (Shephard. 2000.) The British Army was so extreme in their misunderstandings that during the war 306 British soldiers
were executed for cowardice, of whom many were combat stress reaction suffers. (Taylor-Whiffen. 2002)

Combat stress reaction symptoms can be anything from fatigue, slow reaction times, indecision and a feeling of disconnection from one’s surrounding environment. It can also refer to the various physical effects such as loss of muscle control, inhibited motor skills, and loss of bowel control. An example of these intense fear reactions are stated by a modern survey done by The American Soldier which reports that a quarter of all U.S. soldiers admitted that they had lost control of their bladders during combat. An eighth of the soldiers also admitted to defecating in their pants. (Blatchford. 2008).

Combat stress reaction is generally the term used to describe the short-term effects of combat stress. In many cases, soldiers experiencing combat stress reaction during war will often develop a further disorder upon returning home known as posttraumatic stress disorder. It is important to differentiate between combat stress reaction and posttraumatic stress disorder because they are different disorders in the sense that combat stress reaction is experienced during the stressful situation which can stem into the next level with time as posttraumatic stress disorder. (Solomon, Waysman, Belkin, Levy, Mikulincer and Enoch. 1992. Pg 316.)

Hans Selye’s General Adaptation Syndrome is one of the most prevalent biological theories of stress. The General Adaptation Syndrome model defines stress as any non-specific demand on a person’s body that disturbs the body’s homeostatic state or equilibrium. The source of the stress comes from the various environmental pressures and, when the stressors are chronic enough, depletes the body’s energy reserves, which
results in the various health repercussions. This model is so dominant in the psychology world because it is empirically derived and has been extensively and successfully tested. (Rice. 1999)

However, the model is not entirely flawless, the General Adaptation Syndrome tends to strongly focus only on the biological aspects of stress. Another weak aspect of the model is that it treats eustress and distress in the same way. Eustress being positive forms of stress which can give a person feelings of fulfillment and other positive aspects such as participating in a close friends wedding ceremony. Distress is the negative forms of stress such as feelings of anxiety, fear, worry or agitation. (Rice. 1999) As with all theories, the General Adaptation Syndrome has its weaknesses, but these minor discrepancies do not prevent Selye’s theory from being one of the most respectable theories.

The General Adaptation Syndrome is composed of four main pillars that define and summarize the model. The first being that all biological organisms have an innate drive to maintain an internal balanced state. The process in which the body maintains this equilibrium is known as homeostasis. The second aspect of the General Adaptation Syndrome is that environmental stressors disturb internal equilibrium. Whether the stressors are eustress, such as the pressure of a first date, or distress, such as germs or harsh work demands, the body will react with various physiological effects. These responses are defense and self-protective for the body. The next piece of the model is the concept that adjustment to stress occurs in stages. The success of the resistance in comparison to the intensity and duration of the stressor, will determine the time and progression through the stages of stress coping. The fourth concept of the model is that
an organism does not have unlimited adaptive energy in order to maintain homeostasis. If the organism runs out of energy, it will lose the ability to cope with continued stress and, in extreme cases, death will follow. (Rice. 1999)

The General Adaptation Syndrome model proposes that there are three stages in the reaction to stress. The first stage is an alarm reaction that occurs at the first encounter with a stressor. For a brief period, the body has a lower than normal level of resistance. Short term increases in gastrointestinal disturbances, such as loss of bowel control, which is seen in Combat Stress Reaction, and elevated blood pressures may result. Following this the body builds up defensive resources and makes self-protective adjustments. If the defensive reactions are successful the body will return to a homeostatic state. It is during the alarm stage that most acute stressors are resolved. (Rice. 1999)

If the stressor is not taken care of in the acute alarm stage, then, according to the General Adaptation Syndrome, the body goes into the resistance stage. The stressors that persist and cause the body to enter this stage are called chronic stressors and cause the body to enter full-scale mobilization. In order to win the war for internal equilibrium, the body must use a lot of resources, which is a problem because this will result in a decreased resistance over time. As a result of this, serious physical symptoms, such as ulcers or atherosclerosis, may develop. These physical problems will cause the body’s resistance to decrease even more, bringing it to the last stage of the General Adaptation Syndrome. (Rice. 1999)

With severe stressors, the body will keep pushing its resistance stage until it drains its energy reserves. Depleted energy resources bring an inability to fight for
homeostasis and the body functions lower than normal. Once this happens, resistance to
the stressor ceases and in extreme cases death will follow. (Rice 1999)

Using the General Adaptation Syndrome is useful when analyzing a combat stress
reaction. For instance, a Canadian soldier is on a route patrol through an Afghanistan
city where there is a known Taliban stronghold. While walking past a particularly shady
looking block of buildings, an RPG goes off 50 feet in front of him and small arms fire
opens up from the rooftops of all the surrounding buildings. The first reaction would be
the alarm stage of the General Adaptation Syndrome, and for a brief moment the soldier
is disorientated and confused. This is because his body is reacting to an extreme distress
and preparing his homeostatic defenses. The soldier gets to cover behind a low wall and
more RPG fire comes raining down. The stressor is not over and the soldier’s body goes
into resistance mode and he becomes pumped with adrenaline, his body shuts down
unnecessary functions, and prepares to fight the stressor until it is defeated.

This situation, however, is not letting up and two hours later the firefight is still
raging on. By now the soldier is entering the exhaustion stage due to the persistent,
intense distress and is becoming extremely fatigued. It is at this stage that the soldier
needs to either get away from the situation or could face serious physical and mental
problems. Immediately after a firefight like this one, a soldier will experience combat
stress reaction and will be experiencing psychological effects such as slow reaction times,
and disconnection from the surroundings because his body depleted all of his energy
reserves trying to maintain a homeostatic balance in the environment of extreme
stressors.
Combat Stress Reaction is a serious psychological situation, which needs to be addressed right when observed in order to prevent it, as much as possible, into developing into more serious and long-term mental illness. Using the General Adaptation Syndrome and understanding the four aspects of its model and the three stages of reactions to stress helps to further understand human reactions to stress including combat stress reaction. A better understanding of combat stress reaction will allow psychologists and military leaders to protect the mental stability of combat soldiers.
References


Taylor-Whiffen, Peter (2002-03-01). "Shot at Dawn: Cowards, Traitors or Victims?"