

AFTER WAR

THE WEIGHT OF LIFE AT WALTER REED

ZOË H. WOOL



AFTER WAR

Critical Global Health Evidence, Efficacy, Ethnography

A series edited by Vincanne Adams and João Biehl

AFTER WAR

THE WEIGHT OF LIFE AT WALTER REED

ZOË H. WOOL

Duke University Press Durham and London 2015

© 2015 Duke University Press

All rights reserved

Printed in the United States of America on acid-free paper ∞

Text designed by Courtney Leigh Baker

Typeset in Futura and Whitman by Westchester Publishing Services

Library of Congress Cataloging-in-Publication Data

Wool, Zoë Hamilton, author.

After war : the weight of life at Walter Reed / Zoë H. Wool.

pages cm — (Critical global health)

Includes bibliographical references and index.

ISBN 978-0-8223-5971-5 (hardcover : alk. paper)

ISBN 978-0-8223-6003-2 (pbk. : alk. paper)

ISBN 978-0-8223-7509-8 (e-book)

1. Walter Reed Army Medical Center. 2. Soldiers—Wounds and injuries—United States. 3. Disabled veterans—Medical care—United States. I. Title. II. Series: Critical global health.

UH463.W84 2015

362.1086'970973—dc23 2015023349

Cover art: Platon, *Sergeant Tim Johannsen and his wife, Jacquelyne Kay, in a rehabilitation unit at Walter Reed Army Medical Center in Washington D.C., 2008.* Photograph © Platon / Trunk Archive.

CONTENTS

List of Abbreviations vii Preface xiii Acknowledgments xvii

Introduction 1

1 The Extra/ordinary Atmosphere of Walter Reed 25

2 A Present History of Fragments 63

3 The Economy of Patriotism 97

4 On Movement 131

5 Intimate Attachments and the Securing of Life 157

Conclusion 189

Notes 195 References 217 Index 233

ABBREVIATIONS

ACU

Army combat uniform: The camouflage-printed uniform worn during combat since 2005, when it replaced the battle dress uniform (BDU) and desert combat uniform (DCU) of earlier eras.

BT

Basic training.

C-LEG

A state-of-the-art prosthetic leg with a computerized knee joint made by the Otto Bock Company, whose marketing emphasizes the technophilic details of the device and a sporty, physically active, and normative body and lifestyle for its wearer. At the time of my fieldwork, the C-Leg was considered the cutting edge in prosthetics.

CO

Commanding officer: CO is not a rank but a relation. Though any commissioned officer in charge of a particular unit of any size could be called its commanding officer, *your* CO is usually the officer with whom you have the most direct contact. In practice CO was generally used to refer to the person in a soldier's chain of command who is most likely to be the one to discipline or care if he did something wrong.

DEP

Delayed Entry Program or Delayed Enlistment Program: An army program that allows enlistees to delay the start of their contract for 365 days. Its

main use is to contract people who are seventeen years old and cannot actually begin service until they turn eighteen.

DOD

Department of Defense.

EFP

Explosively formed projectile or explosively formed penetrator: A self-forging shaped charge that, when exploded, propels a superheated piece of metal that forms aerodynamically into a projectile. As they were found in Iraq, EFPS were usually composed of a canister full of explosives with a convex copper disk for a lid, which was formed into a projectile that was dense, hot, and fast and could penetrate the hardened steel of armored vehicles. They were usually considered a subspecies of IED.

EXFIX

External fixator or external fixation device: Sometimes also called a halo, an ExFix is a steel and titanium scaffolding that surrounds and stabilizes a shattered limb and is anchored into the bone with a series of protruding screws.

GI BILL

The original GI Bill was the Servicemen's Readjustment Act passed in 1944 as a way of providing financial support for returning soldiers (or GIs, which stands for "government issue" and is said to be derived from "galvanized iron"), including loans, medical expenses, employment insurance, and tuition funds (its most well-known benefit), to help them establish civilian lives. In 1984 an updated version called the Montgomery GI Bill was passed, and in 2008 a new post-9/11 GI Bill was passed with an even more explicit emphasis on training, education, and benefits for family members.

IED

Improvised explosive device: The particular species of homemade bomb that became characteristic of insurgency warfare in Iraq and Afghanistan. In Iraq they were often hidden on the side of or beneath roads traveled by U.S. military vehicles and were sometimes detonated by pressure switches and sometimes by remote.

IVAW

Iraq Veterans Against the War: Modeled on Vietnam Veterans Against the War, IVAW is an organization of American service members and veterans

who have served since 9/11 and who are organized in opposition to the war in Iraq but who also organize around other issues, like PTSD awareness and sexual violence in the military.

MATC

Military Advanced Training Center: The \$11 million state-of-the-art rehabilitation facility that was opened at Walter Reed in 2007.

MOS

Military occupational specialty: The particular job of an enlisted soldier for which he or she receives training. An MOS could be infantryman, radio operator, paralegal specialist, or plumber.

MP

Military Police.

MRE

Meal ready to eat: The nutritionally engineered, dehydrated, and vacuum-sealed food for soldiers in the field. MREs are the high-tech replacement of the C-Ration of earlier military eras.

NCO

Noncommissioned officer: A service member still in the E (Enlisted) pay grades of rank E4 or corporal or above who is in a supervisory role.

NMA

Nonmedical attendant: The person living with and helping an injured service member while he or she requires treatment at a military medical facility that is at least one hundred miles from the service member's home. NMAs are (usually) entitled to a per diem and travel expenses from and to their own home and are expected to assist the service member with non-medical activities of daily living. At Walter Reed, NMAs were usually wives, girlfriends, or parents, though occasionally brothers and friends would fill the role. They were entitled to a \$60 per diem, for which they had to file paperwork and receive orders (i.e., official authorization).

OEF

Operation Enduring Freedom: The name for the U.S.-led mission in Afghanistan that began on October 7, 2001, as a response to 9/11. It also includes operations in Guantánamo Bay, Djibouti, Eritrea, Ethiopia, Jordan,

Kenya, Kyrgyzstan, Pakistan, Philippines, Seychelles, Sudan, Tajikistan, Turkey, Uzbekistan, and Yemen. On December 28, 2014, the Obama administration declared an end to the operation.

OIF

Operation Iraqi Freedom: The name for the U.S.-led mission in Iraq that began on March 19, 2003. On February 17, 2010, the Obama administration changed the name to Operation New Dawn (OND) to reflect the changing nature of the U.S. role there.

PICC LINE

Peripherally inserted central catheter line: A tube that runs from the heart to the outside of the body (usually the bicep) through the most direct intravenous route. There is a port on the outside of the body to which intravenous medicine can be attached. At Walter Reed PICC lines are most commonly used for administering aggressive antibiotics.

PT

Physical training or physical therapy: Usually in the military, PT means physical *training* (i.e., exercise). At Walter Reed this meaning slides into physical *therapy* in a subtle way.

PTSD

Posttraumatic stress disorder: The psychiatric diagnosis developed to recognize the particular psychic trauma of U.S. soldiers returning from the Vietnam War. Though the criteria are shifting, generally PTSD can be applied when a person's response to (experiencing or witnessing) a traumatic event includes a specified combination of pathological remembering or forgetting of the event, avoidance of things associated with it, emotional and affective numbing, heightened arousal, sleep disturbances, and other symptoms that begin after the event. The diagnosis was first recognized in the 1980 edition of the *Diagnostic and Statistical Manual of Mental Disorders* and has undergone significant revision in subsequent editions.

PX

Post Exchange: The PX is a subsidized store on an army base where only people with military ID (including dependents) can shop. They are often huge, sprawling, Walmart-like places selling everything from food to furniture and clothing.

SFAC

Soldier and Family Assistance Center: A central location where soldiers and their family members can access services, get information, or ask for help about everything from child care to leave forms and substance abuse counseling. The SFAC at Walter Reed also featured a huge storage room from which staff could retrieve DVDs, sweatshirts, and other items if soldiers or family members needed or wanted them.

TBI

Traumatic brain injury: A brain injury acquired by sudden impact to the head, including concussive force, physical impact to the head, or penetrating wound to the brain itself. Of the three types of TBI clinically differentiated—mild, moderate, and severe—mild TBI (or mTBI) is the most common in the current U.S. military context and, along with PTSD, is often identified as one of the signature injuries of the wars in Iraq and Afghanistan.

TRICARE

A comprehensive suite of managed care health insurance products that is heavily subsidized and available to all members (civilian and military) of the Department of Defense and their dependents.

TSGLI

Traumatic Servicemembers' Group Life Insurance: An extension of the low-cost SGLI provided to service members by the VA. TSGLI entitles soldiers to \$20,000 to \$100,000 per limb lost. The payments for soldiers I knew were \$50,000 per limb. TSGLI was created in 2005 under Section 1032 of the Emergency Supplemental Appropriations Act for Defense, the Global War on Terror, and Tsunami Relief.

USO

United Service Organization: A nonprofit, congressionally chartered, private organization founded in 1941 as an umbrella to unite other existing charitable groups wanting to support members of the U.S. military. They are perhaps best known for their tours, during which they bring entertainers (usually comedians and musicians) to perform for service members stationed around the world, especially downrange.

VA

Department of Veterans Affairs (formerly the Veterans Administration): The branch of the U.S. government that oversees veterans' issues, including administering the GI Bill and running a sprawling medical treatment and research network comprising over seven hundred facilities.

PREFACE

Fieldwork

This book is based on ethnographic fieldwork work carried out from September 2007 to August 2008, primarily with severely injured soldiers and their family members (including spouses, parents, siblings, children, or some shifting combination thereof) rehabilitating at Walter Reed Army Medical Center in Washington, D.C., and living for some time at the communal Fisher House there. My ethnographic work at Walter Reed was spread throughout the year but concentrated in September–November 2007 and May–August 2008. From March to June 2008 I did a good deal of work with Iraq Veterans Against the War (IVAW), both at their Winter Soldier testimonial event and with members of their D.C. chapter. From December 2007 to February 2008 I was primarily focused on Ft. Dix, a large mobilization base in New Jersey, where I learned about mental and behavioral health programs and the role of the chaplaincy and sat in on suicide-prevention training and other briefings for deploying soldiers. Throughout the year I attended congressional hearings related to the “war on terror,” talked to think-tank affiliates who worked on relevant topics, and interviewed a small number of 9/11 survivors and first responders in New York and D.C. This multisited work yielded rich insights, many of which are embedded in this book, but I have found myself continually drawn back to the lives of those I’d met at Walter Reed. Those lives are the substance of this book.

Women

That this book addresses masculinity is not only a function of the fact that the soldiers I worked with were men. It is also a function of the essential masculinity of the generic figure of the soldier in the United States. Of course, those facts are related. Because of this, when I write of soldiers in this book—both the ones I worked with and the ones iconically conjured in the American imaginary—I write in a specific, rather than “generic” masculine (see also MacLeish 2010: 27–31). But I also acknowledge that this has the effect of obscuring the experiences and even the existence of soldiers who are not men. In ways that do not entirely overlap with their unmarked male-gendered counterparts, being a “female soldier” is a profoundly complex subject position, as is being an *injured* female soldier.¹ Former major Tammy Duckworth and former lieutenant Dawn Halfaker have both spoken publicly about their experiences as woman amputees,² and there is an increasing attention to women in the military in general, for example the widely screened documentary *Lioness* (McLagan and Sommers 2008), and nonfiction books like *Soldier Girls* (Thorpe 2014) and *Undaunted: The Real Story of America’s Servicewomen in Today’s Military* (Biank 2014). Some of these complexities are being made more apparent through the public problematization of sexualized violence against women in the military and the rise of a special category of military sexual trauma, an intensely gendered category of victimhood.³ The specific masculine in which I write here, and the explanation of it under the heading “Women,” also performs a double erasure of transgendered members of the military, of whom there were an estimated 15,450 in active service in 2014 (Elders and Steinman 2014), even though they are effectively banned from the military. As of this writing, the army is revising that ban. Rather than give these issues only the incidental attention I could offer them here, I have left them aside for others more well equipped than I to address.

Almost all of the women who do appear in this book are the wives, girlfriends, and mothers of soldiers. As I have revised chapters, their own lives have receded into the background, and they appear here through their connections to injured soldier husbands or sons. In order to make space for the experiences of soldiers at the center of this book, I have pushed their wives and mothers to the margins, and occasionally off the page altogether. But, as I hope will be clear, their lives are no less complex and no less marked

by the violence of war than the lives of their soldier sons and husbands and boyfriends and are certainly worthy of a book all their own.

The Unsaid

Throughout the book, as I write of the violence of war, I am also keenly aware of the violence I do not note. I think in particular of the civilians whose worlds and lives these soldiers have invaded in the course of their work and whose deaths have made up an estimated 90 percent of war casualties since the 1990s.⁴ This is a direct consequence of the array of technologies of modern warfare, from Predator drones to car bombs, and of the rationales and logistics of modern war that have not admitted the contained space of the battlefield since at least the total war of World War II. I hope this silence will not be read to suggest that these unwritten lives and deaths and sufferings are, in Judith Butler's (2009) sense, ungrieveable, or somehow less human or less worthy than those I do describe, though it is important to acknowledge that my silence is itself structurally enabled by such ideas and that the attention given those lives in most of the United States remains grossly impoverished. Accounts of Iraqi civilian experiences contemporary with those of the U.S. soldiers I describe here can be found in *Voices from Iraq* (Kukis 2011), *Baghdad Burning* (Riverbend 2005), and *Collateral Damage* (Hedges and Al-Arian 2009).

ACKNOWLEDGMENTS

First and foremost, I thank the soldiers and families with whom I worked at Walter Reed. Not only did they allow—even encourage—me to be with them in a profoundly precarious moment, but they insisted on, and persisted in, the ordinariness of their lives. In doing this, often with a clarity and poetry that took me by surprise, they showed me how to pull at the thread of the extra/ordinary. I have done my best to work that thread with care and can only hope they recognize their extra/ordinary selves in this work.

Many thanks to the others at Walter Reed who eased my entry there and to everyone at LPMC who welcomed me to my first taste of the field and were so instrumental in getting me to my next one. I'm very grateful to Scott Ewing, Geoff Millard, Jose Vasquez, and other members of IVAW for their assistance and friendship during my time in D.C. Though the obstacles proved insurmountable, I do not take lightly the efforts of those who helped me at Ft. Dix, including Francis Booth, Chaplain Heisterman, and especially Denise Horton. And though they do not appear here, I thank the 9/11 first responders and survivors who shared their often painful stories with me.

My fieldwork was generously supported by a Dissertation Research Grant from the Wenner-Gren Foundation for Anthropological Research, and I have also received support from the Vonda McCrae Clarke Memorial/Ontario Graduate Scholarship in Anthropology, pilot research and numerous travel awards from the Department of Anthropology at the University of Toronto, and the Ethnographic Writing Fellowship at the Centre for Ethnography,

University of Toronto Scarborough. The Department of Anthropology and broader community at the University of Toronto, where I completed my PhD, was an ever increasing font of intellectual energy. For their shared thoughts, unflagging support, and friendship over the years, I thank Joshua Barker, Naisargi Dave, Andrew Gilbert, the late Jennifer Jackson, Tania Li, Andrea Muehlebach, Gavin Smith, and the late Krys Sieciechowicz, as well as all the regular participants in the SCL workshops with whom I have been lucky to participate in many ongoing conversations. I am especially grateful to Todd Sanders for his invaluable diligence and support, especially in the most uncertain moments, and to Michael Lambek for his insightful and incisive comments, terrific support and confidence, and ongoing council. Kori Allen, Lindsay Bell, Lauren Classen, Mieke deGelder, Sheri Gibbings, Sharon Kelly, Ashley Lebner, Natasha Pravaz, Alyson Stone, and Jessica Taylor have all been wonderful readers, advisors, and friends for the past decade or so. Loving thanks to my dear reader, friend, confidant, and companion in all things, Shaylih Muehlmann; to Janet McLaughlin, who makes me feel at home and think about the place of justice in it; and to the brilliant and unflappable Judy Taylor, who continually offers me wise counsel, good food, a warm bed, and reality checks.

In 2010 I was given the great gift of two months as the Ethel-Jane Westfeldt Bunting Summer Scholar fellowship at SAR in Santa Fe. That time was invaluable, as was the strange magic of El Delerio, and the company, council, and (usually needed!) distraction of my friends there, especially James Brooks, Erin Debenport, Jason Pribilsky, Celia Balli, Duane Slick, Nima Paidipady, and Siva Arumugam.

The completion of this manuscript would still be under way were it not for a NIMH-funded postdoctoral fellowship at the Institute of Health, Health Care Policy, and Aging Research at Rutgers University, which I held from 2011 to 2013. For that time I am indebted to the founding director, David Mechanic, and to Debby Carr, Peter Guarnacia, Beth Angel, and especially my supervisor, Allan Horwitz, for his faith and support. I also thank Peg Polansky for keeping the place running. I learned a great deal from the interdisciplinary conversations fostered at the Institute's weekly brown-bag talks, as well as from many conversations (and glasses of mes-cal) with all my fellow fellows, especially Eugenia Conde, Ken MacLeish, Shellae Versey, and Owen Whooley. At Rutgers I was lucky to participate in the Economies of Affect working group, which offered great conversations as well as invaluable comments on early portions of this manuscript, and

to audit Ed Cohen's core theory class. I do not remember how I thought before it, but I am certain it was not as well.

Over the years I have found myself participating in spaces, conversations, collaborations, and friendships of almost unimaginable intellectual richness and generosity. These have sustained and nourished me and sweetened my work and life in ways that continue to fend off the bitterness academic life so often brings. I will never know how to thank Ken MacLeish for being the very essence of all this in my life. I do know that my most well-crafted thoughts—especially any found in these pages—are honed in conversation with him. Other such intellectual treasures include the SCL workshop at the University of Toronto, SAR, and the Science Studies Ethnography workshop at New York University, a true treasure of a space run by the brilliant and gracious Rayna Rapp and Emily Martin. The workshop has been especially formative to my thinking about science, technology, and medicine over the past four years, and for that I am grateful to all the regular workshop participants. Julie Livingston, *mensch* among mortals, shows me how to navigate the world with serious humor, attention, and care and has helped me sort out many circular thoughts around conference tables and kitchen tables. And thanks to the companionship and occasional commiseration through the last years of this process from Alison Cool, Emily McDonald, Alison Howell, and Vanessa Agard-Jones, and also to Nick Dupree for helping me refuse the tyranny of independence.

I'm newly moved to think and write by many interlocutors in ongoing conversations about forms of life near death and besides hope, including Anne Allison, Angela Garcia, and Lisa Stevenson. I have tried to sow some seeds of our conversations into this book in the hope that they'll grow future projects. I thank the indomitable Beth Povinelli, force of supernature, both for her work, which got me thinking along such tangled tracks, and for her terrific support, which has helped keep me going. I am triply indebted to Veena Das for her writing, which first showed me a way to think about violence and the ordinary, for her comments and questions as the external examiner of my dissertation, which were the starting point for making that text into this book, and for her continued support.

I have been shown uncountable kindnesses by many scholars working on issues related to war and militaries who have helped to shape my work. In particular, for their generous counsel and support, I thank Erin Finley, Lesley Gill, Hugh Gusterson, Matt Gutmann, Alison Howell, Beth Linker, Joe Masco, Seth Messinger, David Serlin, and Jennifer Terry. Tremendous

thanks to Cathy Lutz for her support and her tireless work. Ken MacLeish and Erica Weiss both provided extremely astute comments on sections of this manuscript, which invigorated my thinking, as have the reflections of the members of the War and Global Health Working Group, organized by Omar al-Diwachi and the irrepressible Vinh-Kim Nguyen. My thinking about war and the lives and situations of those who wage it has further benefited from many encounters with others working on these same issues in the Costs of War Project at Brown University, the War and Intimacies Workshop at the University of Colorado, Boulder, and the Military Bodies workshop at the University of Michigan.

I am grateful to all my friends and colleagues at Columbia, who welcomed and supported me in many ways as I put the finishing touches on this manuscript. In particular, Nadia Abu al-Haj, Cassie Fennel, Steven Scott, and Brian Goldstone all offered invaluable comments on chapter drafts. Ellen Marakowitz and Beth Povinelli made it possible for me to take the necessary time to both live and work, which none of us can do without support. I am indebted to my editor at Duke University Press, Ken Wiskoker, for allowing this book to be what it is and for helping me to see it, and to both him and editorial associate Elizabeth Ault for their combined enthusiasm and patience, in perfect measure.

Heartfelt thanks to Viv Cornejo, Alec Milton, Rebecca Picherack, Alison Rapoport, and Elsa Silverman for their support, especially during my fieldwork. Deepest love and gratitude to my mother, Bridget Potter, for her beyond-the-beyondness; my father, Robert Wool; and my sister, Vanessa Potter Wool. Love and thanks also to Hyacinth Campbell, Barbara and Barry Siskind, Sy Silverberg and Cat Uhlin, Mark Silverberg and Lynda Ceresne, Emma Kleiman, Bob Silverberg and Carol Loffelmann, and Aidyn, Zoë, Daniel, and Colin.

Ultimately I am grateful to and for Cory Silverberg, who has been abidingly present—before, during, after, and aside from my fieldwork and writing—instigating all manner of queer comforts in our lives, filling our bookshelves with sexuality, disability, and children’s literature, and allowing us to be undone by each other. That we now get to fill all the little crannies of our souls and worlds with Sadie and share her with so many amazing people is an indescribable privilege and joy.

The best of this book came about only with this abundance of support. The errors and shortcomings remain mine alone.

INTRODUCTION

By late October 2007 Jake had been at Walter Reed Army Medical Center for about a year. He was among a slowly changing roster of two dozen severely injured U.S. soldiers and their family members all living at the non-profit Fisher House, a privately managed communal house for injured or ill soldiers and their families within the gates of Walter Reed.¹ Though the Fisher Houses were originally built with previous generations' slowly aging veterans in mind, they were now almost entirely devoted to young soldiers like Jake who had been suddenly, dramatically, and grievously wounded in Iraq and Afghanistan and to the family members tensely pulled to their sides. Jake was one of hundreds of other injured soldiers living at Walter Reed, most of them in the on-post Mologne House hotel, whose accommodations were much less well suited to the ongoing projects of remaking domestic life under way at Walter Reed. The small proportion of injured soldiers unattended by family members lived in the barracks of Abrams Hall. Their kin had remained in or returned to their various domestic elsewhere, and regardless of the attachments or fraternities in which these soldiers' lives might be enmeshed, at Walter Reed such soldiers were collectively referred to as "single."² But Jake's situation was by far the more common. Like Jake, most soldiers at Walter Reed were attended by a brother or a wife, a girlfriend or a parent, some intimate relation whose sustained presence enervated the institutional space of Walter Reed with the nervous conditions of domestic dramas. All of this marked a departure from earlier eras, when it was only the likelihood of an injured soldier's death that

might occasion the domesticating presence of family members at Walter Reed.

Jake, a twenty-four-year-old national guardsman deployed to Iraq with a light infantry unit based in the Northeast, was one of the first soldiers I came to know at Walter Reed. Day after day the contours of this strange new moment of his life emerged. He explained that the pressure from the tight, gray, knitted cap he often wore, even in D.C.'s summer heat, helped alleviate his incessant headaches, a result of his traumatic brain injury (TBI). Once he remarked on his excitement that in five weeks, he would finally have his foot amputated; it had been destroyed in a blast from an improvised explosive device (IED) and he'd been fighting for the amputation for months. He figured he'd finally be able to work out again afterward and wanted to lose some of the weight he'd gained that gave his face and body a soft and sometimes boyish appearance, despite his square jaw and aquiline nose and the tattoos that swept up his forearms toward the long sleeves of the cotton T-shirts and fleece pullovers he had a habit of shoving up above his elbows. He would trade in his cane for a prosthetic leg and the occasional use of a wheelchair. The number of pounds he shed through renewed physical therapy and exercise would quickly surpass those accounted for by the amputated portion of his leg.

During the three years he would eventually spend at Walter Reed, after being blown up and before being medically retired from the military, Jake spanned many seemingly discrete institutional, domestic, and spatial arrangements within which the everyday work of remaking life and living on unfolded. His mother had moved into the Fisher House and then relocated to nearby Virginia for what foreseeable future there was, settling into a new house and a new job to keep her both close by and otherwise occupied. Jake's fiancée, Tanielle, had been pregnant when he was injured. Once his mother moved out of the Fisher House, Tanielle moved in, and she and Jake took a trip back home to South Carolina to get married before she had the baby. But then Tanielle had to spend more and more time back home in South Carolina. First it was to manage her own health during the pregnancy and then birth of a son. Then, after she and Jake conceived a second child at Walter Reed, her doctor put her on bed rest, and she went back home and spent most of her time with her mother, who, it seemed, wanted to keep Tanielle and Jake apart. After the birth of their daughter and the long-awaited amputation of Jake's leg, the instability of their short

marriage went critical. Jake told Tanielle to pack her things and go. He moved himself into the Abrams Hall barracks; he was a still-married single soldier and a conditional father of two whose mother was building a life of her own nearby this place he was, thanks to his delayed amputation, finally getting noticeably closer to leaving. Tense and temporality are not easy to sort out here. The trajectories are never clear, nor are the ramifying effects of military, familial, and medical forces.

This zone of life—the space of Walter Reed and the limbo of life blown apart and not yet pieced together, not yet sedimented into life stories of before and after—is full of visceral intensity and uncertainty.³ For soldiers it is a moment coaxed into an ever fragile and fragmentary banality, but it is always also notably situated within the spectacular national event of the “war on terror.” This book explores what it is like to live suspended in that tension—the sometimes uncanny ordinariness of such seemingly extraordinary circumstances—when the most intimate contours and forms of life are rendered into matters of grave consequence and concern to a national public formed around the management, display, and erasure of war violence. Set within a century-long history of this wartime publicity, this book considers the national significance of the soldier body as an icon of normative masculinity, the various scales of disturbance produced when that body is injured, and the awkwardness and discomfort that arise when soldiers’ quotidian efforts to live on in the afterwar collide with the myth-laden post-9/11 public imaginary of them. In this space and across these scales I trace the ways that the social and material configurations, the enfleshments, that constitute ideal forms of normative intimacy and unmarked ordinariness in the United States appear as the solution to the problem of injured soldier life, a solution that is impossible in the present at Walter Reed and is imperiled by a future through which the violence of war and the exceptional status of the soldier will continue to ramify.⁴

Writing ethnographically about the intimacies and lived intensities of a kind of life publicly renowned but practically unknown, I found it difficult to know at what scale to begin. But rather than beginning with the “war on terror,” or even with the machinations of state power and sovereign violence to which lives such as Jake’s have become forever bound, I ground this book and its arguments in the textures of ordinary life’s emergence within the roiling wake of war. I begin with the intimacies and “ordinary ethics” (Lambek 2010) that constitute the contours of banality, commonness,

and intimacy in which life may be endured or sustained. This strikes me as the necessary mode in which to begin the project of conveying the weight of soldierly life born in this precarious moment.

That I ground this project so closely in lived experience and everyday encounters is in part an artifact of the cultivation of ethnographic attention. Small acts of daily life are the anchor points to which I learned to tether my understanding of what the something was that was happening at Walter Reed.⁵ This, after all, is the thing anthropologists do. And this project's analytic and theoretical interventions are similarly anchored: tethered to the socially and morally invested sensibility and weight of forms of life in all their situated ordinariness and their situations of living. But this is not simply an outgrowth of the practical facts of ethnographic attention itself. These kinds of interventions are called forth by the qualities of and attempts to write about radical uncertainty, indeterminacy, bodily presence, instability, and pain wrought by violence that is not yet part of a past (e.g., Nordstrom 1997; Taussig 2003). In this case it is the manifold violence of war and of a particular kind of American war fought in a geographically distant war zone. While the violence continues, and is newly made, in those zones of killing, it also continues to ramify—and to viscerally extend—in the zone of life that is Walter Reed.

Because it is anchored in the embodied experiences of the ongoing and disorienting extensions of war violence, this approach departs from ethnographic work on modern militaries that focuses on soldiers as ideologically informed political actors (Gutmann and Lutz 2010; Weiss 2014), as working symbolically to make identity and meaning within the structures and cultures of military institutions (Higate 2003; Irwin 2008), or as actors positioned within a globalizing American process of militarization and imperialism (Gill 2004; Lutz 2001, 2006, 2009). In understanding the many extensions of war violence at Walter Reed primarily as they register in the flesh and the forms of life that sustain it, this approach also moves in a slightly different direction from the important ethnographic work on soldierly illness and injury that foregrounds the symbolic, social, and institutional politics of pathology (Finley 2011; Hautzinger and Scandlyn 2013; Kilshaw 2008; Young 1995a).

Here, as in other, often very different spaces, where violence or pain, debility or death destabilize categories of personhood, thinking about precarious life in “intensified zones of being and not being” (Povinelli 2011: 10) rewards close and often sensuous and affective attention to basic practices

and modes of being in the presence of others.⁶ This is a tighter scale of attention. As Veena Das (2007: 7) has noted, when violence tears at one's world "life [is] recovered not through some grand gestures in the realm of the transcendent, but through a descent into the ordinary."

Ordinariness, then, matters a great deal. And it is precisely under apparently extraordinary conditions that a feeling of ordinariness becomes, as it were, questionable, available for interrogative address. What is at stake in the work of that descent into a life that feels to oneself or registers to others as ordinary? And what of situations in which those two registers of the ordinary are not the same? How might we address ordinariness in a moment conventionally conceived as bereft of it, a moment characterized by transitions and impermanence so profound that they cut right to and through the body itself? What does ordinariness mean in a moment that is exhausting and protracted but whose endurance and end are secured by vast institutional apparatuses? What does ordinariness look like in a place and among a group of people such as American soldiers who are discursively and historically rendered, very specifically, extraordinary? When viewed from the perspective these questions suggest, we glimpse the vanishing point where the figure of a torn world and the ground of an ordinary one come so much together that they are not clearly distinguishable in the living of life but only by the artful and discretionary lines that are drawn to make them suitable for schematic representation, lines that our culturally educated eyes tend dutifully to follow. Part of the project of this book is to focus attention on that vanishing point, where the ordinary, an unmarked form of life, and the extraordinary, a vaunted and spectacularized one, flicker back and forth like some trick of the eye, while simultaneously attending to what is at stake in the various efforts to draw those lines, to distinguish the ordinary from the extraordinary in the context of the contemporary American afterwar.⁷ The effect is a multiplication of phantom ordinaries, unmarked and normative ones that linger in an impossible space beyond or before the reach of the afterwar, and precarious and contingent ones that embrace the facts and features of war-torn life but tremble at the inescapable touch of a social world that insists a war-torn ordinary is anything but.

The themes that organize the chapters of this book—the contradictions and uncertainties of life in the aftermath of injury (chapter 1); the iconic meaning of Walter Reed (chapter 2); the moral economies within which life and death are valued in America (chapter 3); the markedness of spaces, bodies, and ways of being bound to war violence (chapter 4);

the reconfiguring of heteronormative masculinities and domesticities (chapter 5)—developed out of thinking through the many particularities of Walter Reed and the social and biological lives of soldiers with whom I worked. They also demonstrate the continuity between the “extraordinary” problems and facts of life and death at Walter Reed and more “ordinary” problems and facts of life and death in late liberalism, with all the spaces and senses of precarity and temporalities of deferral that characterize it (Povinelli 2011). The fact that these are soldiers, and their injuries sustained during war, marks this situation in unique ways. National violence takes its shifty place within this process, and the national iconicity of the injured soldier renders it particularly public. But it also resembles less spectacularized situations of precarity—for example, those moments of cruelty (in Lauren Berlant’s [2011] sense), in which striving toward a normative form of the good life, what I would call an unmarked ordinary, carries threatening hazards, or the central friction of sexuality in crafting properly embodied personhood when the form of the body has been rendered improper through less nationalistically freighted causes, like illness, birth, or “personal” injury (Jain 2006a, 2013; McCruer and Mollow 2012; Menderson 2011). That is to say, afterwar life at Walter Reed is and is not like generic forms of normative American life, and the irresolvable tension between its historic, public, war-torn particularity and its contiguity with those normative forms of life is the binding thread of this book. The task at hand, the aspiration of this book, is to convey the particular intensity of a feeling of ordinariness that is emergent at Walter Reed but that is always marked as more, and a sense of the substance and weight life acquires there. It is also to make clear that while the exigencies of coming back to life at Walter Reed are indeed marked by the inescapable extraordinariness of American soldierly life, they are also experienced, and best understood, not primarily through their distance from what we tend to think of as ordinary American life but through their intimate correspondence with it.

So this is not an ethnography of Walter Reed in perhaps the most classic sense: it is not a description of the running or functioning of an institution, nor a rich exemplar of the culture of U.S. military rehabilitation, nor even a generalizable account of what life is like at a military hospital for groups of American soldiers during times of war. As I elaborate in chapter 1, soldiers at Walter Reed did not, in any durable way, constitute a group or a cohort, nor could those living within its gates be described as a community, often an appropriate descriptor of life within U.S. military bases (e.g., Hawkins

2005; MacLeish 2013; see also Lutz 2001). What's more, not only were the features of life and rehabilitation substantially different than in each of the preceding wartime eras Walter Reed had witnessed (of Vietnam, Korea, World War II, and World War I), but the institutional coordination of life there, and the kinetic and medical military technologies that arrange bodies there, shift so rapidly as to make the ethnographic details of daily life in this place remarkably evanescent, transforming it in significant ways from one year to the next.⁸

Rather, told from within the tension of ordinariness of American soldiers engaged in the intimate project of coming to live that unfolds within a stubbornly public space, saturated by a history of patriotism, iconic masculinity and fitness, national allegories of the value of war, and the particular iteration of these public meanings in an America six years after the event of 9/11, this book concerns the possibilities and valuations of life in the afterwar. It explores what it is like to be blown up as an American soldier and to then be pulled toward an ideal American ordinary of nonsoldiering life, while stuck in a place that, for all its proliferating claims about the injured soldier as a hero, a "tactical athlete," a family man who is "no less of a person" for his loss of limb, seems to protest so much that all possibilities of life are called frighteningly into question.⁹ This book explores how, in a context marked by national violence and the unmooring of self-founding attachments, ordinariness matters. It matters to injured soldiers who share a feeling of ordinariness in their common lot, a lot that others anxiously render extraordinary. It matters to these same soldiers as they move toward an aspirationally normative civilian future and are animated by an ambivalent desire for a life that others recognize as ordinary.

The chapters in this book take up the contradictions of this historical and intimate situation as they characterize both the public aspects of injured soldier life at Walter Reed and the textures of daily life that constitute it in the living. This introduction elaborates the backdrop against which both the figural and the finely textured dimensions of injured soldier life take their shape. It sketches modern national imaginaries of soldier bodies, biopolitical questions about the valuing and worthiness of human life, and the specificity of this moment of American war within the U.S. Army, all of which all come to bear on injured American soldiers in particular ways.

Chapter 1, "The Extra/ordinary Atmosphere of Walter Reed," ethnographically introduces the themes that unfold throughout the book and eases us in to the contradictory rhythms of daily life: the boredom and intensity, the

intractable instability of bodily forms, the fragmentary and visceral presence of war, the deep but fleeting forms of sociality that abide between injured soldiers, and the thread of sexuality that binds up personhood in sometimes awkward ways. Chapter 2, “A Present History of Fragments,” offers a thematic public history of Walter Reed, tacking back and forth between the past and the present to convey the way Walter Reed is rendered as an iconic site of military medical excellence and is simultaneously haunted by the violence of American war and the dilemmas of disabled masculinity, transience, technology, patriotism, and the moral economy of sacrifice that are tied to it.

The following three chapters proceed from the most publicly mediated dimensions of daily life at Walter Reed to the most intimate, moving deeper into the intractable task of remaking life in the afterwar, a task burdened by all the historical and ethical weight that is foisted on injured soldiers and their families at Walter Reed. Chapter 3, “The Economy of Patriotism,” focuses on encounters between injured soldiers and the grateful strangers who surround them, exploring what it is like to be placed at the center of an incoherent and simultaneously affective, moral, and material economy of patriotism, which simultaneously obscures some violences of war and recognizes others while giving no part to much of the experience that surrounds them. Chapter 4, “On Movement,” is about the contingencies of space and soldiers’ bodies in it. It explores a range of experiences of inhabiting a body and world transformed by the material and visceral knowledge of combat, experiences that become apparent when soldiers move and are seen to move through spaces beyond the gates of Walter Reed. These transformations are generally made legible through frames of pathologization—most notably the frame of posttraumatic stress disorder (PTSD)—that seek to reorder behaviors that seem to have become disordered in the aftermath of war. By focusing ethnographically on these experiences of transformation, however, I seek to put such pathology in abeyance and attempt to grapple with the veracity of these transformations in their own right. Chapter 5, “Intimate Attachments and the Securing of Life,” turns toward questions of life after Walter Reed, focusing on the dilemmas of sexuality, dependence and independence, couplehood, domesticity, and the socially weighted contours of what is supposed to be the good life after war.

Across all these chapters I follow the thread of ordinariness, that emergent sense of being in common with others, and extraordinariness—the insistence or creeping awareness that one’s life is marked by violence or exception or things that ought not to be embraced within the fold of the

ordinary. I explore the ways ordinariness and the extraordinary become uncomfortably tangled as injured soldiers and their families live from one day to the next, oriented toward a future that seems to promise nothing but an unmarked, American ordinary, while stuck in a present that will not abide it. And I develop a sense of what is at stake in this tangle of the extra/ordinary, set as it is within a broader context in which the body of the injured American soldier tests the very limits of worthy life and embodied liberal personhood while simultaneously calling forth anxious public valorization, investment, and insistence on the worth of soldierly life and limb.

Men and the Body of the Nation

In the United States, where there is no compulsory military service and, since 1973, no draft, soldiers inhabit a public imaginary that—especially in times of national anxiety—binds them to an exceptional form of personhood inflected with heroism and patriotic commitment (Allen 1999). This heroism and patriotism have also always been linked to the violence of war, that foundational violence of the state that, through the ironic logic of the sovereign exception, is both the guarantor of democracy and the threat of its hiatus (Agamben 2005; Johnston 2007; Schmitt 1934). The American soldier is thus a deeply ambivalent figure: his attributed valor is rooted in the insidious threat of national violence.

This ambivalence permeates understandings of American soldierly life at various scales. For example, Catherine Lutz (2001) describes a Janus-faced soldier figure circulating in the community around Fort Brag in Fayetteville, North Carolina. During World War II civilians there

feared that returning soldiers would create a havoc of crime and unrest. . . . Fear about the soldiers' antisocial tendencies was evident throughout WWII. [North Carolina's] main black newspaper published a poem, for example, written in defense of the soldier:

Everybody cheers a soldier,
On his fighting way.
And then they call him a "hero"
When in the grave he lay.

Well, a soldier's greatest battle,
Is in the time of peace

When every body scorn[s] him,
And treat[s] him like a “Beast”

And now with these few remarks, I must close
And I hope you won[']t offend.
But the next time you meet a soldier,
Just treat him as a friend.

At the same time, soldiers had been depicted in advertising and official rhetoric as “friendly, generous, easy-going, brave, the citizen soldier[s] of America,” and people knew that the ranks included people as loving, talented, young, good-humored, handsome, and healthy as their own sons, brothers, and husbands. (81–82)

And, Lutz (2001: 207) notes, during the “hot peace” of the 1990s citizens of Fayetteville came to know the soldiers in their midst as archetypes of masculine morality and discipline but also as debauched and transient inhabitants of their hometown, as men (usually) who heroically serve and sacrifice for the nation but also as parasitic and overentitled consumers who don’t pay their fair share and who, despite evidence to the contrary, bear responsibility for the drugs and violence that afflict their impoverished neighborhoods. As one Fayetteville resident said, “If my son was out there everyday being trained how to decapitate the Vietnamese and other bad guys and then he came home to his wife and crying baby son, who knows what could happen” (207).

Both the valorized and the vilified face of the soldier tie him to violence and to an embodied heteronormative masculinity central to the production of nationally valued and reproductive forms of personhood in the United States. This is not incidental, as processes of imaginatively and materially constituting the nation necessarily include the imaginative and material production and configuration of particular kinds of gendered bodies (Canaday 2009; Kimmel 2006; Mayer 1999; Mostov 1999).¹⁰ Sex and reproduction, and the maintenance and regulation of socially constituted and gendered bodies (including that of the soldier), are fundamental to the establishment and government of modern national populations (Foucault 1990; Mosse 1985). And sexuality—that normative, pathologizing, and often public social force that is exerted on and extrudes bodies and the relations between them—is central to how a nation, its citizenry, its territories, and their limits are imaginatively and juridically constituted.

Just as the delineation and management of marked, marginalized, queer, or denigrated bodies is essential to such efforts (Berlant 1997; Canaday 2009; Foucault 1995; McClintock 1995; Povinelli 2006, 2011), so is the production of normative figures of heteronormative masculinity, like the soldier.

Normative masculinity, inextricable from a tangle of morality, sexuality, aspirational idealism, and productive sociality, has also been a vital site of national reproduction in the unfolding of modern Western states (Mosse 1998). The historian George Mosse argues that from at least the end of the eighteenth century much of the burden of national self-making was given to the idealized bodies of men. Notions of virility and physical and moral fitness of men and their nation, a nation and its men, were projected onto idealized images of fit male bodies and also literally enacted in very material and sometimes deadly contact between them (16–24).¹¹

Perhaps not surprisingly, then, American soldier bodies are an anxiously cultivated epitome of national ideals. The health, wealth, and order of the state are read through and enacted by them. They are fetishized symbols of the violent acts such order entails. The image and physicality of the soldier body can thus be understood to belong to the nation in myriad ways: as shaped by national imaginings and disciplinary techniques; as a subject made, remade, and made visible by the moral logics of the nation; and as an object supposed to function as its proxy and in its interest. But the nature of this belonging, this relationship between the nation and the soldier it imagines, has always been fraught and characterized by contradictions that grow out of the shift and uncomfortable place of the violence of war in America (see Huebner 2008).¹² The fighting soldier body and its nationally configured masculinity has been disciplined and ennobled, decried and obscured, displayed and defaced. And the *injured* soldier body, which insinuates a threatening display of just one of the many deadly elements that undergird the existence of the modern state, has been subject to an array of additional treatments.

The bodies of injured soldiers during World War I were the focus and impetus for the foundation, in earnest, of a science of rehabilitation in the United States (Linker 2011), a science that had been lingering latent in the treatment of the less valued, less visible bodies of ill and disabled children (Allan 1958). From its start, this coordinated treatment of injured soldier bodies in the United States was inextricable from both the notions of normative masculinity in which the soldier body had long been rooted and

the ideal forms of productive and “independent” social and family life that were central to then current ideals of “Americanism.” As Dr. Charles Mayo (1918: 780), cofounder, with his brother William, of the Mayo Clinic, put it in his remarkable 1917 inaugural address as president of the American Medical Association:

Great industries have in the past unnecessarily destroyed thousands of human lives and turned on the public many more thousands of cripples dependant on public charity. . . .

The economic law of supply and demand has gradually been brought into force, and the waste of human life must cease. We hear on every hand of projects and efforts for the conservation of human life, a movement which is the outcome not of any philanthropy or sentiment but of necessity. Men can no longer be replaced with the old-time ease, and their individual value to the community has increased accordingly. . . .

Now that the war is producing injuries by the thousands, a new impetus is given this work, that by training in special employment and artificial aids such persons may be as happy as possible and self-supporting, and not mentally disabled and a drag on the community.

During World War II increased efforts at rehabilitation would be spurred by the moral desire and economic need to return men to work (Allan 1958: 161). Thus, like the image of the (fighting and normatively functional) soldier body, the treatment of the injured soldier body, especially the amputee, was addressed to national ideals grounded in normative notions of stable and productive male bodies arranged in familiar physical and social configurations. As Beth Linker (2011: 4) puts it in her history of rehabilitation in World War I America, “Rehabilitation was thus a way to restore social order after the chaos of war by (re)making men into producers of capital. Since wage earning often defined manhood, rehabilitation was, in essence, a process of making a man manly.” Reflecting on a century of war and rehabilitation at Walter Reed, she notes, “Then, as now, rehabilitation holds out the promise that the wounds of war can be healed (and thus forgotten) on the national as well as individual level” (7).

Work on the body of the injured soldier—rehabilitative and imaginative alike—is thus also work to smooth over public visions of war and post-war life in contemporary America, to obscure the violence and pain of

war in gestures of hope and gratitude that are nonetheless based on their presence. The public and intimate reconstitution of the injured soldier is addressed both to the public, generic figure of the soldier and to the intimate ordinary man he may become. This is a kind of doubled position, both staged and closed, both institutional and domestic, both overdetermined and self-founding, and never only one or the other.

In this context sexuality, masculinity, fitness, economic independence, and future life can become mutually indexical, a multilayered site of the rearticulation of personhood projected, in the context of rehabilitation, toward an unmarked future ordinary life. In this context soldiers at Walter Reed are collectively and often compliantly exploring possible futures, imagining normative futures in which they can, through the “bootstrap performatives” of autological self-making (“I discover myself”; “I am”; “I desire”; “I willfully give of myself”), inhabit the preferred mode of liberal self-sovereignty (Povinelli 2006: 183). It is within this nexus of America and its productive bodies, violence and its in/visibilities, masculinity and the stakes of its fleshy and flawed appearances in the body of the (injured) soldier, that this book’s questions about the value of forms of life arise.

Accounting for the Worth of American Soldiers

The soldier is one of those special categories of subjects that beg critical questions about the supposed sameness and equality within national populations, like the immigrant or the criminally irresponsible or the other queer kinds of person constituted through the elaborated provisioning of rights and obligations and their denuding limits (see Canaday 2009). As the anthropologist Kenneth MacLeish (2013: 13) notes, “The soldier challenges this fantasy [of liberalism’s universal, autonomous, self-sovereign individual] in especially acute fashion, as he is perpetually subject to the will of others and exposed to bodily harm in ways that are utterly transparent, rationalized, and legitimate. Probing this condition not only illuminates the lives of those who inhabit it but raises much broader questions about the limits of personhood.” In the special case of the soldier, these questions turn quickly to the ordering and valuing of violence, death, and embodied life itself that form a tinkerable deep structure of modern and late liberal regimes of sociality and governance. Bodying forth both heteronormative masculinity (Higate 2003; Jarvis 2004; Linker 2011; Mosse 1998) and

queer sociality (Serlin 2002, 2003, 2006), the soldier is addressed not only to the destruction of bodies but to gender, sexuality, and the *reproduction* of life in especially nationally relevant forms. Vacillating between the uniformity and rationalized efficiency of high modernism and the bootstrapping “army of one” of liberal self-making, the position of the soldier spans competing ideologies of individuated agency, capacity, and the diffusion of social obligation, dependence, and independence.¹³

The categorical pairing of *soldier* and *citizen* offers a particularly acute lens through which to trace the production of personhood in America and other modern liberal democracies (Canaday 2009; Cowen 2008; Mayer 1999; Mosse 1998). That soldier and citizen throw processes of personhood into stark relief in these contexts is not especially surprising: it makes sense to think about being a person in America through the lens of soldier and citizen to the same degree that it makes sense to think about America through its militarized history.

Histories of social policy and of the practices of state intervention into the fitness and worth of national populations show that “in the modern world, the welfare and the warfare state increasingly become indistinguishable from one another” (Cooter, Harrison, and Sturdy 1998: 4; see also Skocpol 1995). But ironically the shifting moral and cultural significance of these structures of civil (welfare) and military (warfare) entitlement point up the devastatingly uneven distribution of social value that flowed through or was diverted by these structures. For example, though war pensions for veterans of the Civil War were the very first public welfare entitlements in the United States (Skocpol 1995), the contrast between the contempt for and action against the so-called welfare queen of the post-Reagan era (Zucchino 1999) and the post-Vietnam, post-9/11 valorization, sacralization, and public and private support for soldiers and veterans—the collectivity proudly evoked in terms like *troops* and *wounded warriors*—could hardly be more stark. Such passionate distinctions obscure the functional confluence of welfare and warfare, as well as the fact that many of the troops may count welfare recipients among their closest family members (see also Cowen 2008). The zealous defense of military pay, entitlements, and spending in current U.S. politics also makes it easy to forget that the lives and bodies of American soldiers were not always considered so precious. This shifting evaluation of soldierly personhood—something beyond, for example, the cultural distinctions between Vietnam-era veteran homecom-

ings and those of soldiers returning from Iraq and Afghanistan—offers an important context within which to understand the complex economies of life's value within which injured soldiers at Walter Reed find themselves.

In the World War I era, entitlements for soldiers were viewed with skepticism and the fear that unless benefits were leveraged to transform soldiers, injured soldiers especially, into workers, entitlements would turn them into lazy and corrupted pensioners like the Civil War veterans before them were seen to be, little more than flab to be unfairly borne by the social body (Linker 2011). The reform and retraction of veterans' benefits at that time was crafted by the same Progressive principles of social work and justice ever vigilant against "dependency" that motivated the establishment of workmen's compensation and other social insurance schemes that many Progressives hoped would eventually extend equally to all Americans.

But in the early 1930s veterans began to emerge as *uniquely* compensable, as a social category of person whose life had an excessive moral value and whose worth required special financial compensation. The hotly contested proposition of soldiers' unique worth led to the spectacular Bonus March of 1932, when tens of thousands of World War I veterans descended on Washington to demand adjustments to compensation that they had been promised by Congress in 1924, on the grounds not that veterans were entitled to exceptional repayment for their warfront service but that soldiers deserved the *same* compensation as others who had been conscripted to home-front labor and who had earned far more in wages (Dickson and Allen 2006; Waters 1933: 19). Days after a proposed veterans' compensation bill was defeated in the Senate, tens of thousands of protesting soldiers were violently forced out of their encampment on the Anacostia River in a dramatic and fiery army assault. Though it was not immediately successful, the 1932 Bonus March highlights the contentiousness around the special status of soldiers and veterans within the calculations of social worth that would constitute the New Deal. In the historical moment that hovered between the depths of the Depression and the explosive heights of World War II, President Roosevelt addressed the American Legion. He explained the dramatic cuts to veterans' bonuses and disability compensation that followed the Bonus March, saying something almost unimaginable from the mouth of a president today: "No person, because he wore a uniform, must thereafter be placed in a special class of beneficiaries over and above all other citizens" (cited in Frydl 2009: 53). Indeed the volatilities of the

American moral economy proved Roosevelt wrong, and the special, transcendent value of soldierly life was consolidated in 1944 in the GI Bill. In the cautionary words of one senator who at the time still hoped for a more equal valuing of all American lives, “The soldiers will definitely become a privileged group” (cited in Frydl 2009: 4).

In more recent eras, as the welfare of populations is increasingly disaggregated into the work and responsibility of individuals stripped of collectivizing social and cultural registers of worth, soldiers are newly recognized as a worthy and privileged social group. They are seen as having earned and being owed, sometimes through the bare facts of individual bodily exposures, sometimes through the multidimensional subjection to or production of a special disciplinary identity, with both its vilified and valorized aspects. In the contemporary era, worth emerges around and through soldiers in a way that seems to confound even the contradictions of late liberalism. For example, it is precisely *not* grounded in a claim “against exclusion from a discursive formation of universal justice,” as liberal forms of collective recognition ought to be (Brown 1995: 58). The value of the American soldier is today precisely *not* equal to others, an interesting contrast to a state like Israel, for example, whose compulsory military service is entangled (if increasingly controversially) with the status of citizenship itself and where it is *nonservice* that raises the specter of inequality (Lomsky-Feder and Ben-Ari 1999: 5, 9; Weiss 2011).¹⁴ If it had not become so untouchable, so sacred, this special value would threaten to make apparent that “transparent fiction of state universality” (Brown 1995: 58) that ironically enables the increasingly differential distribution of the value of life, making poverty and social, sexual, and bodily queerness in all its forms deadly in America. The figure of the soldier encompasses and embodies these contradictions of social value and the myths of the singular value of life in which late liberalism has so much invested.

So part of what is made stark in thinking about personhood through the soldier and citizen is the differential political valuing of varied kinds of human lives, the abiding incommensurabilities produced by such differential distributions of value within the United States, and the ways those differences are occluded or ignored and incommensurabilities maintained. These issues are also at the heart of the social problem of disability, most starkly and disturbingly reflected in legal and ethical debates around when and if a person is better off dead than disabled (see Johnson 2006: 201–28), as well as in philosophical reflections on how the value of a person

is related to one's "capability" to be participatory within the frame of a liberal social contract that neglects such a person by design (Nussbaum 2007; see also Davis 2002). Disability is seen to invalidate personhood in modern and postmodern liberal social and political imaginaries (Hughes 2000, 2012). And it poses an essential challenge to valued forms of productively embodied normative masculinities (Shakespeare 1999; Shuttleworth 2004), among which the soldier holds a special place. An amplification of the "dilemma of disabled masculinity" (Shuttleworth et al. 2012), the impaired body of the war-injured American soldier sits at "the juncture of the discourses of the warrior and of the disabled" (Gerber 2012: 5), marking a fleshy convergence of seemingly incommensurable forms of life that are valued as exceptional in very different ways. Around the edges of a soldierly life—in edgy zones of contact (bureaucratic, patriotic, historical, intimate, violent) where being edges toward not being, iconic fitness edges toward invalidity, and soldier edges into civilian—these values and their incommensurabilities are produced in anxious overabundance.

Who This Book Is About in General and in Particular

If the *who* of this book, the historically freighted figure of the injured American soldier, can be generally described in the ways I just have, how might I best introduce the particular soldiers who populate these pages? In what ways might I position them so as to give you a sense of who they are, or at least who they were as they figured in this general terrain, this ground of American soldierly injury and all its supervalant meaning? I can give you a general sense by offering you some of their common particulars: Nearly all of the soldiers I met at the Fisher House in 2007–8 were lower ranking enlisted members of various army branches. Most had enlisted in their state's National Guard or Army Reserve sometime since 2003—two years after 9/11, the year of the invasion of Iraq, four years or fewer before ending up at Walter Reed. Most were between the ages of nineteen and twenty-five and had been very seriously injured, many requiring one or more amputations, on their first deployment in Iraq, most by an IED or explosively formed projectile (EFP) or, occasionally, other large munitions like rocket-propelled grenades.

But there are many exceptions to this generalization, many excessive and shifting particulars. For example, when I first met him, Jake would have fit these contours quite well, though he was not among the many requiring

an amputation. By the time I left Walter Reed, Jake had had one amputation, fitting him all the more closely to these contours. But he'd also been promoted to sergeant, attaining the status of a noncommissioned officer (NCO). And besides, since he'd had to lobby so hard for his amputation, it would be unfitting to say he was among those who "required" amputation surgery without specifying by whom it was required and signaling the way the iconic contours of his body were infused with his willful negotiation of a particular array of possibilities that was significantly different for him than for other soldiers.¹⁵

There are other exceptions: soldiers who were shot, not blown up; soldiers who were older or more senior in rank; soldiers who had been medics. There was, very occasionally, a female soldier. But there is a coherence to these varied experiences with war. There are many broad generalizations that would suggest, more or less, the shape of the lives that populate this book. To suggest this shape, I could tell you a composite story, perhaps about a teenager who signs up at the age of seventeen because joining the army seems like the least worse option, and because the recruiter in his public school lunch room in, let's say, suburban Georgia seemed like a really good guy, and perhaps because his father and uncle and cousin were all in the army for a while, so enlisting was easily within the realm of possibility. And maybe he meets a girl whom he marries and impregnates in a fit of vigor and responsibility and panic just before he heads off to some desert city full of targets he is itching to shoot at. And maybe he is bored by all the nothing that seems to add up to war and he gets high as a fucking kite off combat, and then one day he's sitting in a tank with the com system hooked up to his iPod and then there is force and heat and fire and pain and his leg isn't his leg anymore because it's decomposed into its constituent parts that look like any other kind of meat and everything is different only in lots of ways it's all just the same because he's still bored and gets high as a fucking kite off combat. I could tell a story like that. But such generalizations are too clumsy. Like rag dolls, parodies of the human form cobbled together from bits that don't quite fit, each piece losing its color as it is cut from the life to which it belongs.

Instead of generalizations I could rely on statistics to count up all the particulars and position the lives I describe in this book as exemplary, as particulars more or less like all the rest. I could say that between 9/11 and June 2008, Walter Reed was home to 7,800 of the 33,572 service members

then officially wounded in action in Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF), the two main military fronts in the entity officially known as the global war on terror (GWOT).¹⁶

I could say that as of January 19, 2009, OEF and OIF had led to the amputations of 1,184 limbs, 55 percent of them due to IED blasts (Fischer 2009), and that such blasts are the most common cause of all GWOT casualties: 31,625 service members were blown up as of May 31, 2011, after the effective and official end of operations in Iraq, and 28,697 of them survived the blast.¹⁷

I could tell you that between 2003 and 2007, the Military Health System spent \$23.2 million on prescription drugs for TBI and PTSD, or that at least 20 percent of returning service members (now over 2 million individuals) are thought to suffer from PTSD (Chiarelli 2010; Tanielian and Jaycox 2008).

I could tell you that in 2010 military suicide rates surpassed civilian rates, and that rates for suicide and PTSD are highest in the army (Chiarelli 2010), which is also the deadliest branch of service, accounting for about 80 percent of medical evacuations.

I could tell you that only about 20 percent of OEF and OIF medical evacuations are occasioned by combat injuries, and a roughly equal percentage are due to “non-hostile injuries” and that, as has long been the case in U.S. wars overseas, the majority of evacuations are due to illness and disease (Fischer 2010).

I could tell you that of the twenty-four pay grades in the U.S. Army, 61 percent of army personnel are concentrated in the lowest five, or that people categorized as “Black” are significantly overrepresented in the middle ranks (pay grades E6–E9).¹⁸

I could tell you that people categorized as “White” are overrepresented in all officer ranks and that their disproportionate presence increases the higher you go. But then I’d want to mention that they’re also overrepresented at the bottom (pay grades E1–E4).

I could tell you that when you break death rates down by race, “Whites” are a bit more likely to die than “Blacks” or “Hispanics,” given their representation in the force.¹⁹ And I could tell you that despite all that, recruiters almost always fall short of meeting their targets for minority groups and exceed their targets for “Whites.”²⁰

I could tell you all of these very specific things. I could share these actuarial trivia that, despite or perhaps because of the military’s propensity to

count and keep records, are so hard to figure that the closer you look, the fuzzier they get.

But while these fuzzy numbers might manage to confirm or complicate your ideas about who is in the army and who dies and is hurt there these days, they don't tell you what it is like to be one of these particulars. And they don't tell you anything about the strange experience of being rigorously and publicly counted and accountable, counted on and accounted for. These numbers say nothing of the strange sort of exemplariness by which all these particular people are supposed to be characterized.²¹

And so this book is written in a different register, in an attempt to understand and convey how the general saturates the particular and how the particular complicates the general. These same themes are threaded through the book in tensions between expectations and exceptions, the generic example and the actual instance, and questions about how we tell one from the other and when it matters that we do.

I think here of one particular injured soldier I knew at Walter Reed, Javier. While working on a grant application based on this work, I meant to speak generically of some of the ways soldiers' bodies are marked by the violence of war. I meant to write "the blue-green bits of shrapnel beneath their skin." Instead I wrote, "the blue-green bits of shrapnel beneath *his* skin."

To write my generic description, I bring to my own mind the face of one particular soldier I knew. Not even his face, just his left cheek and jaw that were peppered by these bits of metal. I remember it shiny, slathered with ointment after a laser treatment to remove them. His face helps me see the color of shrapnel, almost like something organic, an ingrown hair, a five o'clock shadow hovering beneath the skin.

But in the act of writing I am betrayed. I don't remember this mnemonic image, this icon. I remember Javier. Like each piece of metal lodged beneath his flesh, his shining face has a history and a life that inhabits. I realize that there is no such thing as generic shrapnel.

I suggest that the qualities of living I convey throughout this book are essential to what it was to be an injured soldier at Walter Reed in 2007–8 and that being is inextricable from U.S. histories of war, ideologies of patriotism, and national economies of moral debt, as well as normative forms of life and social attachment that might seem to have nothing to do with them. These particularities are formed in relation to these generalities.

And so this book is about how ordinary life is only and always contingent and how, their lives freighted with sometimes overwhelming significance, the soldiers with whom I worked at Walter Reed are exemplary in their living of extra/ordinary lives.

The Question of Ordinariness

The lives of injured soldiers at Walter Reed are characterized by an unstable oscillation between the extreme and the unremarkable. They have lived in ways such that the decision to join an “overly kinetic” (Aylwin-Foster 2005) military at a time of war was not really so strange; in fact it seemed the option most likely to improve their lives at the time. They went to war, if one can call it that, where the sound of alarms warning of mortar attacks became so ordinary that they learned to sleep right through them, and where crowds of children so often portended a bomb that they grew to hate them.

These became the contours of their ordinary lives. They did their jobs, much of the time riding around in vehicles, some occasionally shooting at and killing people who were going about their own lives and jobs. Sometimes these lives and jobs were aimed like weapons fixed on killing these soldiers, and sometimes they weren't. And then, most often when doing that most ordinary task of riding in a vehicle, they blew up. The experience of work and life at war was exchanged for something else, a life saved and almost lost, a moment unlike any other and yet common to tens of thousands of soldiers, including those who shared the space of that same blown-up vehicle and who might be dead but might also be back riding in an identical vehicle waiting to be blown up again, for that singular moment to repeat itself, an anticipation that seemed impossible and felt inevitable.²²

At Walter Reed everyday life had a different rhythm. A feeling of ordinariness there came together out of boredom, pain, drug-induced fog-giness, impact-induced memory loss, unruly and leaky bodies, and new social attachments that seemed to matter so much and disappeared in the blink of an eye. Though others insisted on the extraordinariness of this space, to injured soldiers this all became ordinary, if only for now.

Through it all there was another aspirational ordinary life that seemed far away in place and time, one that seemed to run away from soldiers while still pulling them near. This was the normative ordinary life of an ideally

middle-class anonymity, an everyday good life with an easy and unbroken rhythm unmarred by pain and sickness, quickened by leisure, motivated by a simple counterpoint of work and rest (Lefebvre 1991: 29–42).

Each of these ordinaries—the ordinary of war, the ordinary of Walter Reed, the ordinary of life after—is threatened by the potential and limit imminent within it. War is not ordinary, and yet it was. The facts of life at Walter Reed are extraordinary, and yet it is the accrued feeling of their ordinariness that makes them barely bearable. The illusive and unremarkable ordinary of suburban middle-class life is almost exotic in its distance. Like the orthographic form of the extra/ordinary, something extra, excessive threatens the integrity of each of these ordinaries like a falling wall or timber. The slash cleaves the ordinary and its extra apart and together, linking them in a precarious and suffocating relation. In this way an ordinary is rather different from modernist notions of “the everyday,” theorizations of which form a small canon of their own.²³ I use the term *ordinary* here rather than *everyday* (terms often used interchangeably in anthropology) both to emphasize the felt sense of a life’s unmarkedness, its commonness, and to emphasize the instability of such a mode of life, the fact that such a mode of living is always unstable, always extra/ordinary. Thinking through this tension of the extra/ordinary calls attention to the ways that what feels and can be counted as ordinary is emergent and particular and evocative of the possibilities and limits of a located social world.

This structural property of the ordinary—the idea that it is culturally or situationally syntagmatic—is also at play in anthropologies of suffering that draw critical attention to the unspectacular violence that can adhere in day-to-day living (Bourgeois 1996; Das et al. 2000, 2001; Kleinman et al. 1997; Scheper-Hughes 1992). Part of the affective and descriptive power of some such work comes from the way it produces a certain kind of ethical disorientation (e.g., Farmer 1997; Scheper-Hughes 1992): the moment in which the everyday is marked by violence becomes the moment of a moral turn in which the anthropologist insists those daily experiences of suffering that have come to seem ordinary in a particular world *should not be accepted as ordinary*. The consequence is to vitiate more extreme versions of cultural and moral relativism and assert a universal moral imperative based on a human sameness that exists in a shared capacity for suffering beneath a veneer of cultural difference.²⁴ I do not take this moral turn. In my analysis the moments in which suffering and the legacies of violence seem ordinary are the moments in which I want to insist on the feeling

of ordinariness shared by soldiers at Walter Reed. I focus on the ways life is lived in this marginal ordinary, on what it is like to live a life so deeply, suffocatingly nestled in the extra/ordinary, and on the stakes and lived consequences of this configuration of the ordinary and its extra.²⁵

At Walter Reed the feeling of ordinariness emerges through generative tensions between marked and unmarked forms of American life. It is a zone of life marked by radical instability, fraught with legacies of war, the strictures of the U.S. military, a deep acquaintance with death, public performances of patriotism, and experiences of physical pain that not only set soldiers apart as a common lot but threaten to make life dangerously thin and even to set each injured soldier apart from his family and fellows through the transitional and transient nature of living at Walter Reed and the problem of pain that can make life and its sustaining attachments so heart-breakingly doubtful (Scarry 1987).

But the questionableness of the ordinary at Walter Reed, the thing that seems to set it apart from unmarked ordinary American life, leads me to propose a certain continuity (not to be confused with a straightforward sameness) between the marked lives of injured soldiers at Walter Reed and the unmarked lives of imagined ordinary others in America “out there.” To be clear, this is not an argument for the banality of suffering or vulnerability. My point is not that we all suffer to varying degrees and should therefore ground a progressive or moral or critical theoretical orientation to life in the empathetic recognition of an undifferentiated fact of vulnerability. My point is not, in other words, that ordinariness always emerges and therefore all forms and spacings of social life have the same measure, weight, and value; they do not.²⁶

I would like to move away from considering life and its basic value in terms of this lowest and most generalizable common denominator of life itself, that thing we would universally (and always only theoretically) share if stripped bare. Instead I want to consider forms of life and their always-anything-but-bare fleshiness in instances and instantiations that are socially specific and that also share the general predicament of sociality, of being with others in a place for a time. By thinking through the emergence of ordinariness in spaces of life more often positioned beyond it, we can more clearly see the ways life and its value are socially, politically, and morally differentiated. The point is that in attending closely to the intimate and ethical encounters in which ordinariness emerges and is iteratively composed in “intensified zones of being and not being” (Povinelli 2011: 10),

we apprehend the varying weights lives are made to bear and the work of bearing that weight.

Exploring ways of being and modes of being with others at Walter Reed is thus also an exploration of the forms of life these modes of sociality constitute. It makes sensible the friction and drag that accompany the honing of life into a life of a particular kind.²⁷ This honing happens in public or staged ways, as when a kind of life is written into being or seen and pointed to and made iconically meaningful (through diagnosis, through the discursive and performative sedimentation of social types, and in other ways). But the contours of injured soldiers' lives are also constituted through intimacies (both less and more publicly staged), through forms of closeness, attachments, and attentions that turn toward daily living and the labors of reproducing social and biological life and the thickness, thinness, and interdependencies of social relations that situate a person in a particular social world, itself made and remade through those relations and situations.

Approaching this zone of life through the poetics of the extra/ordinary allows me to do what I think the soldiers and family members who so graciously allowed me into their lives for a while hoped that I would do: convey something of the struggle and pain of their lives without marking them as exceptional and without slotting them into grand narratives of trauma, war, heroism, or national value or placing them in a space of the unimaginable. The people with whom I worked tended to position our conversations and time together against, on the one hand, the kind of talking and time they had to do with psychiatrists and social workers, and, on the other, the kind of performance required in their frequent encounters with journalists. This seemed to me an astute characterization of my fieldwork, and also of what they valued about my project as I had described it to them—it was (I hoped) neither pathologizing nor sensationalizing. When first getting to know soldiers and their families and first talking to them about my project, I often said, “I just want to see what life is like here for you guys.” My approach to both understanding and describing “what life is like” is forever tied to their valuation and appreciation of that task grounded in empathy and friendship and that seemed, amid the intensity of life and the abundance of other narratives, so necessary, so far from simple, and so often starkly unattempted.