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Why disabled IDF veterans with PTSD prefer cannabis over pills

The answer lies not only in physiological effects, but also in the wider cultural context of mental health and psychiatric medication.

When I began the 18 months of fieldwork for my doctorate studies in social anthropology which focused on the how Israelis experience military-related Post-Traumatic Stress Disorder (PTSD), I did not anticipate the centrality of medical cannabis in the many engagements that I've had with veterans. I had known about the widespread use of cannabis for alleviating symptoms of many mental health issues, including post-traumatic stress, but what I eventually discovered was that cannabis was not only a medicinal substance, but also a symbolic one. In other words, I learnt that its healing effects are not only physiological but are also tied to the symbolic and social meanings that cannabis holds for Israelis suffering from combat trauma.

Indeed, many veterans suffering from combat trauma told me that using cannabis significantly eased their mental health struggles as well as chronic pain from physical injuries related to the emotional trauma. Above that, however, they spoke of cannabis as a medical substance that embodies the pains and hopes of Israeli veterans with PTSD: the importance of leaving no man behind and caring for other veterans, the state's negligent attitudes towards veterans with mental health issues, and their struggles with alienation from family, friends, and society.

The medicinal use of cannabis to alleviate symptoms of mental health disorders - such as PTSD, depression, and anxiety - has been rapidly growing in countries that regulate medical cannabis. In Israel, PTSD is the only mental disorder for which medical professionals are allowed to prescribe medical cannabis. This authorisation is a reminder of how the Ministry of Defense's Rehabilitation Unit pioneered the use of medical cannabis in Israel, providing veterans directly with cannabis prescribed by its psychiatrists. The Ministry of Defense no longer oversees cannabis, which is now under the jurisdiction of the Ministry of Health's Medical Cannabis Unit (MCU) - the sole body in control of the regulation, prescription, supply of medical cannabis in Israel. It is important to note that many combat veterans I spoke with reported that cannabis does not better their condition, or even worsens some symptoms. It is also important to recognise that there are not many clinical trials on the treatment of psychiatric disorders using cannabis, and that the little research that has been conducted hints that the use of cannabis has the potential to worsen some symptoms (1).

Psychiatric medication and the social isolation of combat veterans

In my fieldwork veterans usually described the benefits of cannabis by stating what it is not: a standardised psychiatric medication. To understand that statement we have to go beyond the scientific-medical definitions of PTSD or drug use to explore how PTSD, pills and cannabis are experienced by veterans suffering from combat trauma.

Sociologist Angus Bancroft (2) points to the importance of understanding the wider social context of the different aspects of drug consumption. In that sense, Bancroft argues that the cultural and social meanings attributed to drugs are inseparable from their physiological and psychological effects. Drug experiences are shaped not just by chemistry, but by how a drug is purchased or acquired, the methods by which it is consumed, the people with whom it is consumed, and the places where it is consumed. These facets are as valid in regards to psychiatric medications - themselves consciousness-altering substances that could be experienced in different ways, depending on the answers to the where's, why's, how's, and with-whom's.

The psychiatric definition of PTSD, which is laconic and broad by its scientific nature, does not account for any social or cultural factors that might affect how it is experienced. Its psychiatric treatment often follows a similar pattern, and as such it does not deal with the particular interpersonal alienation of combat veterans. Israeli veterans speak of how the beginning of their PTSD symptoms (the intrusion of the traumatic event in different ways, avoidance of places, people, actions or other triggers which might "take them back" to the trauma, and a sensation of being under constant threat) is also the start of a painful erosion of their social ties as well as their individual identity as a soldier: a sudden discharge from military service or reserves, difficulties in maintaining gainful employment, detachment from close friends, and, finally, alienation from family ties to their partner and children. As such, veterans with PTSD often speak of feeling like strangers within the places that used to be their homes, sometimes even feeling like they are enemies to their families. Psychiatric medications play a major part in this process of alienation. Veterans describe psychiatric medication as a necessary evil at best: a tool that alleviates some of their suffering but brings a trauma of its own. Side effects such as chronic fatigue, emotional numbness, and sexual dysfunction all exacerbate veterans' alienation in their own way.

In contrast to psychiatric medications, cannabis is described as a medication that softens the symptoms of PTSD without hurting veterans' personal autonomy, thus allowing them to rehabilitate their self-identities and social ties. This is mainly because cannabis' side effects are not the same as psychiatric medications, particularly in regard to sexual dysfunction (3) and emotional numbness. However, the way cannabis is consumed is also particularly important: while psychiatric pills are consumed alone (as an individual treatment prescribed to treat a

collective disorder), cannabis is seen as a substance that's often consumed in friendly social settings. As such, cannabis' main symbolic and cultural meanings are unrelated to the stigmas of being a victim of combat trauma. Many times I saw veterans consuming cannabis together while still referring to it as a 'their medication'. As such, the medical and the recreational use became inseparable. Consuming Cannabis, which can be experienced as an enjoyable social activity, allows for the divorce between the medicating of suffering and the suffering itself. Such meetings were a clear antithesis to veterans' views of pills as partners to apathy, impotence and poverty.

In fact, veterans often 'discover' medical cannabis through conversations, encounters, and experimentations with other veterans - not through doctor-patient relationships. Thus, while medical prescriptions are mandated "top-down" by medical experts, the how's and why's of cannabis consumption are passed on from one veteran to another: which strains and dosages are more beneficial and to which symptoms, how to smoke, evaporate, prepare tinctures and bake edibles, and which suppliers are more reliable in terms of quality and consistency. Similarly to prescription drugs, the effects of cannabis change from one person to another, and as such combat veterans (and patients) must assume an active role in their healing process by taking initiatives and consulting their community in finding the optimal therapy.

Combat veterans and the politics of medical cannabis in Israel

Unfortunately, the difficulties that Israeli combat veterans face in actually acquiring medical cannabis could have provided enough material for an entire series of articles (see 4, for example). The Ministry of Health's Medical Cannabis Unit (MCU) limits access to cannabis with measures that are stricter and more draconian than those of any other health system where medical cannabis is prescribed. The MCU's limits are part of a process that they call the "medicalisation of cannabis", which is an effort to standardise cannabis in a way that would put its consumption and supply in line with those of other prescription medications. At a certain point these efforts even included the erasure of most strains from the medical cannabis market. To the best of my knowledge, none of the measures taken by the MCU are backed by any scientific and medical knowledge - in fact, it goes almost entirely against what researchers know about the medical use of cannabis, its social effects (both good and bad) and its chemistry. As such, the MCU's attitude is that cannabis is a luxury at best and a social and legal problem at worst - an antiquated paternalist and moralist position that has no place in today's medical profession (5,6,7). As Dr. Bareket Keren-Schiff, a pain specialist and medical cannabis advocate, stated in a radio interview (8), the attitude of the Israeli Ministry of Health shows a general disregard for the broad goal of well-being in the sense of raising patients' quality of life, instead taking a paternalist stance to the point that it violates doctor-patient relationships by the means of limiting prescriptions, strictly regulating supplies, banning strains, and adding countless bureaucratic barriers to the prescription process. The harmful and arbitrary regulatory interventions in the supply of cannabis left many patients, including veterans with PTSD, in a situation that veterans often term "medical deficiency", where the quality and quantity of

cannabis they can obtain are far lower than what they need to treat their symptoms continually and effectively.

Combat veterans are perhaps the demographic most hurt by these policies. In Israel, where participation in combat service is considered within the range of normal life experience, traumatised veterans are fighting for public and political recognition. In that sense, to label combat veterans as suspected criminals for their use of medical cannabis is, quite literally, to add insult to injury. Even worse is that this label of deviancy creates a self-fulfilling prophecy: the medical deficiency created by the MCU forces veterans with PTSD to illegally purchase cannabis. The medical deficiency is so severe that it can even require veterans to take out loans in order to buy cannabis that is not up to any medical standard. Already a vulnerable demographic, veterans have told me that their condition is often exploited by black market ‘drug dealers’ in different ways, and that taking part in illegal activities is an added source of stigma, stress, and grief. The risk of added stigma over ‘drug abuse’ is also at the heart of why the discourse around cannabis is absent from veterans’ struggles for public recognition. In the meantime, these veterans manage a network of loans of small amounts of medical cannabis: given the medical deficiency, these people struggle to finish each month without enduring more suffering at the hand of Israel’s medical system.

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