

TAKE ME HOME HUEY

Honoring American Heroes Through Art

Dedicated to the 2,709,918 Americans
who served in Vietnam



TAKE ME HOME HUEY

Honoring American Heroes Through Art

BY STEVE MALONEY AND CLARE NOLAN

CHAPTER 6

COMING HOME: PTSD AND ART THERAPY

My plan was to take the *Take Me Home Huey* sculpture, documentary, and song out into the world to as many people as possible. But because the mission was so important — to commemorate the Vietnam War and thank veterans — I wanted to tread carefully and to seek feedback throughout the creative process.

The veterans' early reactions were overwhelmingly positive, but I began to see something that I had not expected. Some became visibly moved and talkative about their youth as they viewed the Huey. A few also bravely shared stories of their darker days. Whether the memories were happy or sad, the sculpture definitely ignited conversation. I began to feel that it was important for me to understand better what I was witnessing — to be fully prepared for the reactions I would get once the sculpture was on public display. I wanted to know more about the emotional and psychological journey that Vietnam veterans had experienced and how the Huey could be a force for good. Could this work of art even be a help to those who still struggled with troubling memories?

A COLD WELCOME HOME

As I talked with veterans who served in Vietnam, I learned that the long struggle for acceptance [fig. 2] and appreciation at home had left many scars. For almost all of them, the whirlwind transition to civilian life began with a long flight from Asia to a U.S. airport. Some would later describe arriving on American soil and being spat on by protesters, stories that were picked up by television reporters and watched by millions, including me.

Army infantryman Jerry McNelly [fig.4], who I met as Huey #174 was being restored and who I interview in the documentary, told of a heartbreaking encounter just after he returned: "I was waiting for my connecting flight, proudly wearing my uniform. A woman walked by with two little children. And she said so that people could hear, 'See that uniform and that guy? He kills children.'" Only a small minority of Americans participated in these protests, but the veterans who I spoke to — even those who'd escaped these ugly encounters — felt that the anger and hatred had been directed at them personally.

From the airport, most stopped briefly at their Army bases to be officially discharged and then, often within 24 hours, they returned to their families. For many, the reception was not much better at home. Few were celebrated. Hardly anyone rode in a parade. Instead, families,

fig. 1
A bed of sand and a mold of a warrior's face awaited a glass-blower's wand, at the Morean Arts Center in St. Petersburg, Florida.



fig. 2
In one of the first national anti-war protests of the Vietnam era, more than 30,000 stormed the Pentagon in Arlington, Virginia, October 21, 1967.

friends, and neighbors wanted to move on. "A typical experience for a Vietnam vet was: 'After I got past the protesters at the airport, I put my uniform in a box and made up a lie about what I was doing for the past year,'" said Dr. Matthew Friedman, an adviser at the Department of Veterans Affairs' National Center for PTSD, which he helped to found in 1989. Veteran Karl Renz [fig. 3] told me, "I couldn't relate to the people I grew up with. We didn't fit in with our friends. They were not like us. So I went back." After his first tour ended in 1968, Karl enlisted twice more.

Many who stayed home found their attempts to adjust disrupted by a host of symptoms: hypervigilance, nightmares, irritability, anger, and flashbacks, among others. In some cases, they'd adopted these same emotional and physical reactions in the combat zone and benefited from them. When the enemy is shooting at you, hypervigilance, for example, can be the difference between life and death. But at home, the behavior can be unwelcome and unsettling.

It was only after leaving the Army in 1972 that Karl began to notice symptoms of what we now call post-traumatic stress disorder. Back home in Arizona, he felt a need to remain vigilant and slept with a loaded gun nearby. "I almost killed my own daughter," he told me. "She opened my bedroom door and I almost shot her. She said, 'That's it. We're going to the VA.'" Another veteran I interview in the *Take Me Home Huey* documentary, Paul Battaglia, described suffering from insomnia for decades. "Everybody had the same question: 'When were you there?' The truth was, I was there last night and so was everybody, in their dreams and in their nightmares," he said.

While both Paul and Karl received help, it took years. In the 1960s and '70s, no one mentioned post-traumatic stress disorder, or PTSD, because, at the time, the diagnosis did not exist and there was no treatment for symptoms.



fig.3
Karl Renz manned a machine gun on an assault mission. From 1968 to 1972, Karl served as a crew chief with the 134th, 170th, and 129th Assault Helicopter companies, often in support of special operations forces.

A LONG PATH TO TREATMENT

Today, we can look back as far as the literature of ancient Greece and find descriptions of combat veterans suffering from what we now call PTSD. It was not until the U.S. Civil War, however, that doctors began to recognize and document lasting effects from combat exposure. They defined a physical condition they called "soldier's heart" and ascribed it to an overstimulation of the nervous system. Symptoms included changes in pulse, blood pressure, and difficulty breathing.

In World War I, sufferers of what was called "shell shock" were described as jumpy and easily startled and believed to have a "nervous condition." Similar reactions in World War II and Korea were labeled "battle fatigue" and believed to be primarily psychological in nature.



fig.4
Spec. 4 Jerry McNelly served with the 1st Cavalry's light infantry from 1967 to 1969.

As reports accumulated, attitudes slowly began to change. After World War II, battle commanders began to receive training to recognize stress in their men and could send soldiers to the rear for rest and relaxation. But, generally, once peace arrived, the evidence was filed away.

The full picture remained out of reach even after Vietnam ended and veterans began going to the VA with a raft of symptoms. "What they were experiencing for the most part did not conform to the psychiatric disorders we looked for," Friedman remembered. Some were suicidal but did not meet the psychiatric definition of major depression. Some reported flashbacks — waking dreams where they felt they were back on the battlefield — but were not psychotic. VA doctors named the condition "post-Vietnam syndrome" but could offer little assistance. "Not only were their symptoms unrecognized for a long



time, but we didn't have treatments available for a long time," Friedman said. With little help available, some veterans resorted to self-medication through alcohol and drugs.

"We had no one to talk to," Paul Battaglia remembered. But, he added, "If you could talk to anybody, you could talk to a veteran." Veterans found support in one another, falling back on the intense bonds of brotherhood forged in combat [fig. 5]. They first banded together in group therapy sessions, then began to speak out publicly [fig. 6] — and finally to lobby the government and medical professionals for recognition and better care. Their numbers were too large to be ignored.

On a parallel track, researchers and women's advocates were documenting symptoms similar to those experienced by combat veterans among survivors of genocide, natural disasters, child abuse, rape, and domestic battery. As increased funding became available, the medical community developed a more complete understanding of the link between trauma and illness. In 1980, the American Psychiatric Association's Diagnostic and Statistical Manual, the DSM-III, described post-traumatic stress disorder for the first time.

fig. 5
Above: Wounded veterans met at a San Francisco hospital, April 1967. Later, many vets spoke out about substandard care and a lack of treatment for combat trauma at VA hospitals.

fig. 6
Opposite: Some veterans joined protests, such as this one in New York in March 1973, against the less-than-honorable discharges given to at least 125,000 who served in Vietnam.


DEMANDS:
R ALL
AM ERA
NOW
VETS DEMAND!
"ABOLISH BAD
DISCHARGES"
—ASU—
PARKI
CROSS
POLICE





fig. 8
Flight medic Perry Hopman in 2014, with the 22 medications he took to relieve PTSD and pain from blast force injuries suffered during his 2006–08 combat tour.

WHAT IS PTSD?

To understand PTSD, it helps to think of an analogy. One of the best I've found comes from retired Army colonel and psychiatrist Dr. Charles Hoge, who wrote that "under prolonged stress, the stress 'thermostat' is reset to a different level." Hoge led the Army's research into the mental and neurological health of soldiers who served in Iraq and Afghanistan. His book, *Once a Warrior, Always a Warrior*, is a great guide for veterans transitioning from combat to civilian life. "Virtually every reaction that mental health professionals label a 'symptom' — and which indeed can cause havoc in your life after returning home from combat — is an essential survival skill in the war zone," Hoge writes.

Hoge's stress "thermostat" primarily responds to activity in two of the body's systems, the nervous system (including the brain) and the endocrine system, which controls hormones like adrenaline. For most who have had the misfortune to experience or witness a traumatic event [fig. 7], the stress thermostat will return to normal levels within weeks. In fact, only a fraction of trauma survivors will go on to develop PTSD. For those who do, the return to normalcy takes longer, and their thermostats may never reach previous levels. The result is a change in how the brain processes information, particularly stimuli that are reminiscent of the original trauma.

In the case of a warrior who goes on to develop PTSD, the initial trigger might be exposure to battle or a bombing, sustaining an injury in an attack, or watching helplessly as a close buddy or a child is killed, and then responding with feelings of intense horror, fear, or helplessness. After the event, the survivor experiences prolonged symptoms and behavioral changes that include replaying the event endlessly in memories and dreams; reliving the emotional and physiological reactions to the trauma in the form of flashbacks; having trouble sleeping, often because of nightmares; anger or irritability; aggression; jumpiness; hypervigilance; and deep feelings of guilt, shame, or a changed perception about the world.

fig. 7
A weary soldier rested following combat operations along the Vietnamese border with Cambodia, northwest of Saigon, in January 1966.



To cope, PTSD sufferers often deploy avoidance strategies and behaviors. Combat veterans may choose to suppress their emotions, just as they did during the war, leading to a shutdown of their capacity to love and enjoy life. Avoidance strategies are especially hard on spouses and partners and, as a result, marriages and other close relationships often become casualties of PTSD as well.

It's not just warriors, of course, who develop the condition. Almost 8 percent of Americans — around 25 million people — will be diagnosed with PTSD at some point in their lives. Women, who are more likely to be victims of sexual assault, suffer more than men. While about 3.6 percent of all U.S. men will be diagnosed with PTSD, the rate among women is two-and-a-half times as high.

Combat veterans, of course, are highly susceptible and can suffer from PTSD at higher rates than other trauma survivors, including 12 percent of combatants in the first Gulf War, and 11 to 20 percent of those who served in Iraq and Afghanistan [fig. 8]. Estimates are harder to determine for Vietnam veterans because the illness was not well-understood until well after the conflict, but researchers believe that as many as 30 percent of Vietnam vets had PTSD at some point. Some 700,000 of those who served in Vietnam have received psychological assistance, which includes treatment for anxiety, depression, and substance abuse, as well as PTSD. Other psychological ailments often go hand in hand with the condition. There's an 80 percent chance that a veteran with PTSD also has depression, panic attacks, substance abuse issues, or intense anxiety.

Of course it would help to know who is most susceptible, and some factors have emerged through research. The intensity of exposure is important. The more traumas a combatant confronts during a tour, the more likely he or she will be to develop PTSD.



fig. 9
Above: The welcome home for many Vietnam veterans contrasted with those of other eras. The 1991 celebration in New York for veterans of the first Gulf War was called the Mother of all Parades.

fig. 10
Left: New York City's 1946 parade for World War II veterans was 4 miles long.



fig. 11
Paul Battaglia, who in 1969 served in Vietnam as a private first class with the 7th Battalion, 15th Field Artillery Regiment, talks with Steve at his pop-up studio in Palm Springs.

Poor unit cohesiveness and weak leadership also lead to higher rates of the disorder. The most important factor, however, is the social support combatants receive at the time of exposure and once they come home [figs. 9–10]. "The recovery environment — the amount of social support — really indicates if your traumatic experience is going to do lasting damage," said Matthew Friedman. "You could not dream up a worse scenario in terms of social support for men and women who risked their lives in Vietnam."

"I was home 25 years before someone said thank you," Paul Battaglia told me [fig. 11]. "Vietnam was a war that asked everything from a few and not very much from anyone else."

We continue to ask a lot from our servicemen and women, and there are increasing signs that many are breaking under the strain. As I was designing *Take Me Home Huey*, I was shocked by the frequent news reports I heard of high suicide rates among American veterans. In 2015, more than 20 died every day from suicide. There are more World War II, Korea, and Vietnam vets than there are from any recent war, so it makes sense that they would account for more of the suicides overall. But younger vets, ages 18 to 34, are the most susceptible — and, in an alarming trend that emerged in 2018, the suicide rate among them is rising. We don't yet know if PTSD is a factor, but researchers have found that the greater the intensity of exposure to traumatic events, the higher the suicide risk.

What can be done to help? Forced initially to find their own solutions, Vietnam veterans came up with an answer: Talk. As Vietnam veteran Jerry McNelly told me, "If I could give advice to any of our young warriors, I would tell them to find somebody that they trust, that loves them enough, that will allow them to just talk about it." Tom Nash, a veteran who served with the 101st Airborne, agreed: "A big portion of my healing is getting to talk. If you don't talk, you have it all in your head." I heard this over and over.

I was pleased to see signs that *Take Me Home Huey* might be a catalyst for these vital conversations. Always meant to be a gesture of thanks, the sculpture was also taking on additional meaning that I hadn't anticipated.

The artwork is "so different than [a Huey] that the civilians of America saw on [the] nightly news. It's being resurrected but with a different heart and soul. And with that came a stirring in my heart and soul," Paul told me. "I feel like a beaten-up warbird myself sometimes. This [Huey] says to me: 'You can change.'"

Art has unusual power. It asks us to look at the world in a new way, to put our assumptions aside. I believe that it also gives us hope and helps us navigate through life. I can't imagine living without it.



TURNING TO ART AS THERAPY

It turns out that what I was witnessing with *Take Me Home Huey* was not new. In fact, art may be the oldest form of therapy for veterans. As the psychiatrist and author Dr. Jonathan Shay has pointed out in his books, which include *Achilles in Vietnam*, many of the ancient Greek poems and plays were originally written to help veterans process their experiences. Homer may even have been a combat veteran himself. In fact, the very first chapter of his epic *The Iliad*, written in 762 BCE, is called "The Rage of Achilles." Homer describes the famous warrior as full of rage and his most true self when on the battlefield — symptoms we often relate today to PTSD.

I wanted to learn more about art as a mode of healing and sought out Melissa Walker [fig. 12], a leading practitioner of art therapy for military service members and veterans.

A registered art therapist, Walker designed and implemented the Healing Arts program for the National Intrepid Center of Excellence (NICoE) at the Walter Reed National Military Medical Center near Washington, D.C. The Healing Arts program offers art, music, and dance/movement therapy, as well as therapeutic and creative writing, to active-duty service members recovering from combat trauma and brain injury. Not everyone in the program has PTSD, but all do have the injury so prevalent among veterans of our recent wars: traumatic brain injury, or TBI.

Traumatic memories can involve all the senses — sight, sound, smell, taste, and touch. Walker has found that trauma survivors often struggle to put all those sensations into words. But creating art can help.

fig. 12
Above: Art therapist Melissa Walker, talking with Steve, created a therapeutic art program for soldiers with traumatic brain injuries.

fig. 13
Below: In Walker's class, soldiers transfer their thoughts and feelings about their injuries onto papier-mâché masks.



Walker begins each four-week session of her program by first guiding combat veterans in transforming their thoughts about their injuries into art. They begin with completely unadorned papier-mâché masks [fig. 13].

"They're coming to grips with a new identity as they move forward," she told me. "That's where the masks come in." With paint and other materials, they begin to transfer thoughts and feelings about the trauma onto the blank masks. In a common theme, many choose to gouge deep channels in the masks or to break pieces off and glue them back on — symbolizing their own senses of being scarred or broken [fig. 14].

"They can begin with metaphor and symbolism," she said. "Then they can actually start applying words to what that is. And then the next thing you know they're completely self-reflecting and they've become much more open about what they've been through."

"I think something similar happened when they were working on your Huey," she told me. "They had an object to point at and begin to discuss."

At NICoE, Walker uses her training as an art therapist to encourage conversation, to support service members, and to guide them through appropriate psychotherapeutic art therapy treatment. To what extent the therapy can help sufferers of PTSD recover is not yet clear. "Even if art therapy isn't a specific approach that will actually reduce symptoms, it may help a great deal. It may be a bridge," said the VA's Matthew Friedman.

So far, scientific evidence supports several talk therapy techniques — particularly cognitive behavioral therapy, or CBT — that help PTSD patients heal by reducing the mental and emotional toll of traumatic experiences. In one form of CBT, called prolonged exposure, a survivor sits comfortably, feet on the floor, in a calm, safe environment such as a therapist's office and, with the therapist's help, recounts the traumatic experience as it happened.



fig. 14
Army Staff Sgt. Perry Hopman, in 2014, with the mask he created in Melissa Walker's program at the National Intrepid Center of Excellence.



fig. 15
During his 24-year career in the Marine Corps, Master Gunnery Sgt. Chris Stowe served six combat deployments in Iraq and Afghanistan on ordnance disposal teams.

Of course, traumatic memories cannot be erased. But the patient learns to recognize the thoughts, emotions, and physiological changes that arise, and, over time, those reactions become less toxic. Another form of CBT with proven positive results, cognitive processing therapy, or CPT, helps trauma survivors address and confront distorted, negative thoughts such as "It's my fault." A third approach, eye movement desensitization and reprocessing, achieves similar results as CPT, but the therapist will initially guide the patient in repetitive eye movements that facilitate the patient's ability to calm adverse reactions.

Many trauma survivors also benefit from medication — particularly a class of antidepressants known as SSRIs — which, while not a cure, have been proved to reduce some PTSD symptoms.

Dr. Friedman credits cognitive behavioral therapies and medication with easing symptoms for many. But only 50 percent of those with PTSD experience complete or nearly complete recovery. To help more people, practitioners are now increasingly experimenting with additional treatments such as mindfulness, journaling, acupuncture, and, of course, art therapy. "You can do many things to improve your quality of life. So we need to think in a more nuanced way about how something might make a positive impact on living with PTSD," Friedman said.

For one graduate of Melissa Walker's art therapy program, Chris Stowe [fig. 15], creating art turned out to be the key to coping with combat trauma he suffered as a Marine. A veteran of the Iraq and Afghanistan wars, Chris served six combat deployments on an explosive ordnance disposal team, rising to the rank of master gunnery sergeant.

"Deployments ended up being more normal, and being home ended up being the thing that was odd. So being with my young children and my wife at the store was a much more uncomfortable situation than being in Iraq with people shooting at me," Chris told me.

"I kind of self-medicated by going back out on deployments." Over the course of his combat tours, Chris was exposed to hundreds of bomb blasts, which led to a diagnosis of PTSD in 2007 and a brain injury suffered on a 2009 tour.

As a leader of other Marines, Chris felt a duty to set an example and seek treatment. Unfortunately, he is among the 50 percent for whom conventional psychotherapy did not work. "I'd gone to see a psychologist and psychiatrist. I'd never found something that resonated with me, that helped me get to the root of what was wrong." In 2014, two years after returning to the U.S., Chris decided to enroll in NICoE at Walter Reed and, as part of the center's intensive outpatient program, began art therapy.

Working with Walker on the mask project, Chris gave his mask two faces [fig. 16]. "I very much felt like I was two people. I felt like I was kind of a demon on the inside," he said. On one side of the mask, he painted an image of calm, but he portrayed the other as overflowing with bees. PTSD, he said, is "like having a beehive in your chest. So I put bees coming out of the mouth and coming out of the eyes and coming out of the inside of the mask."

Before enrolling in the NICoE program and engaging in art therapy, Chris said that he often had a difficult time describing what it was like to live with PTSD and TBI. Until he made his mask.



fig. 16
Chris Stowe used his mask to show the contrast between his outward calm and his internal struggle. PTSD, he said, is "like having a beehive in your chest."





"It was exactly what I needed at the time to start my path to heal. Today that beehive is definitely there in my chest. I still have days that I feel like I have a demon inside of me, and there are still days that I feel sad. But I'm nowhere near the same level that I was," he said.

Just before he retired from the Marine Corps in 2016, Chris tried a new art, glass-blowing. "From the first time that I put molten glass on the end of a rod, I knew that was absolutely what I was going to be doing," he said. "I felt that there probably wasn't a better medium to communicate the invisible wounds of war." Now living in Florida, Chris has partnered with the Morean Arts Center in St. Petersburg to create Operation: Art of Valor, which offers free glass-blowing workshops for fellow combat veterans with TBI and PTSD [fig. 18]. When I visited Chris in his studio, the veterans showed me how to turn a lump of glass into a graceful, curvilinear calla lily — a process I found completely absorbing and invigorating.

"It's 2,100 degrees that's 2 feet away from your hands, so you're not thinking about what you did last night. You're not thinking about the nightmare that you had the night before. For me it's a very centering and very focusing process," Chris said of glass-blowing.



fig. 17
Top left: Brian Fernandez, a former sergeant with the Marines, guided Steve as he created a decorative lily from glass at the Morean Arts Center in Florida.

fig. 18
Below left: Chris Stowe and fellow veterans designed a vase from glass. The program Chris created, Operation: Art of Valor, is free for veterans.

fig. 19
Right: *Face Vase* (shown on its side), made from blown and sand cast glass, is a collaborative creation of Operation: Art of Valor.

As I moved my hand down the rod and toward the flame, Brian Fernandez [fig. 17], a retired Marine, stepped in to make sure I did not get burned. Safe and successful glass-blowing demands teamwork, which for the veterans is reminiscent of their time in the service. "There's the dependency upon the person that's working with you," Chris said. "It's trust that I haven't found anywhere else other than in this program with other veterans."

Melissa Walker agreed, "He's bringing veterans together in an environment with a little bit of danger and some fragility. And it really mimics that team aspect that they need."

I told her about what I had been witnessing with veterans who came to see *Take Me Home Huey* together. "They were able to find a sense of community around each other," she said. "Then, as they began to discuss the stories that came up naturally due to the symbolism in it and of itself as a symbol, they were able to then begin to talk."

A POET VISITS

Back in spring 2015, as I was completing the *Take Me Home Huey* sculpture in my pop-up studio in Palm Springs, I received a visit from another artist, a Vietnam veteran named Melquiades (Mike) Ortiz [fig. 20].

As many veterans have done, Mike walked to the Huey to touch it. "And then I had an overwhelming feeling of Vietnam," he told me. "It brings back all those memories. Everything is still in there."

Mike served in Vietnam with the Marines from 1965 to 1966. Not long after his discharge, plagued by nightmares, he took a job working nights as a deputy with the Los Angeles County Sheriff's Department, a job he kept for 28 years. He finally sought help at his local VA in 2001 and began to attend a writing therapy class. For the first time, he



fig. 20
Melquiades (Mike) Ortiz — a former sergeant with the 1st Battalion, 7th Marines — wrote the poem "174" after meeting Steve in his pop-up studio in 2015.

put his nightmares on paper. "I would hear someone crying. I would get up and patrol the house, to check everything. I never realized who was crying. And then one night I woke up and realized I was the one crying," he said.

Today, Mike teaches poetry writing to men and women with PTSD at the Veterans Affairs Medical Center in Loma Linda, California, about 60 miles outside Los Angeles. In his class, he encourages his students to express their emotions and memories in verse. "I'm working with my writers to not only see darkness. There's good and bad, and that's what I try to get them to write about," Mike said. Helping them, he's found, has been key to helping himself. "Just to see them smiling, that helps a lot. That helps me."

Soon after Mike's visit to the sculpture, I was touched to receive a poem written by him. It begins:

Today I saw "174"
Had never seen this "bird" before
I stood and gazed inside her door
Saw the broken parts laid on its floor...

Take Me Home Huey is "about darkness and light. It's about life and death," Mike said. "When those Hueys showed up, they were there for a reason. Those people inside were like angels. They were there to help."

The poem ends:

We lost friends

That were closer than family
We lost lives and gained memories
Dark powerful memories
With special effects

Of feelings and flashbacks
Of men that left us too soon
Today in the present I think of that war
Where men's Spirits are still riding on 174

Only half of the veterans affected by PTSD, depression, or anxiety come forward for treatment. There are many reasons that number is low, according to Matthew Friedman. Just talking about trauma can be traumatizing in itself. Those who come forward also must face the stigma of mental illness — as a failure and a weakness — that is pervasive in our society and, by extension, in the military. Men and women on active duty in particular feel it is incumbent on them to convey strength and reliability. They very often fear that seeking help will derail their careers.

174

BY MELQUIADES "MIKE" ORTIZ

Today I saw "174"
Had never seen this "bird" before
I stood and gazed inside her door
Saw the broken parts laid on its floor

Shot down in Vietnam February of "69"
My time in war it brings to mind
Still trying to put myself together
174 has helped to put me back on track

Brought war memories back
These babies were a God send
They saved our lives they saved our skins
This exhibit of 174

Brought back some memories
Like never before
This Wonderful bird
Still is broken and hurt

Looked inside of her doors
So gentle her aging strong floor
She carried our wounded
Carried our dead

I gently touched her sturdy green deck
Memories of men's faces
Came flooding to me
Brave men broken and hurt

Like this graceful old bird
Glad Steve Maloney
Has saved her for us
She was our comfort

Her crew was like Angels
They tended to us
I've added old 174
To my memories of war

No time to grieve
No time to be sorry
Chaotic times fighting to stay alive
Dark times hard men

Brave young men
Dying slowly each day
Praying, fighting, dying
We lost friends

That were closer than family
We lost lives and gained memories
Dark powerful memories
With special effects

Of feelings and flashbacks
Of men that left us too soon
Today in the present I think of that war
Where men's Spirits are still riding on 174

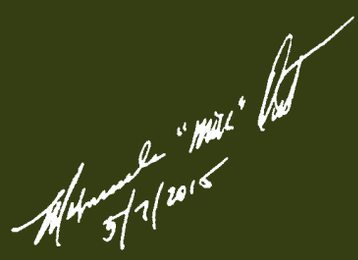



fig. 21
Some veterans said that touching the sculpture stirred feelings of brotherhood associated with their time in the service.

We're making progress in supporting our vets. After the hostility directed at those who were in Vietnam, we've learned to separate the politics of war from the warriors. "Kids coming home now know they're not alone," Paul Battaglia said. "The community is reaching out. And we can help them."

The rest of us, in or out of uniform, can help, too, by fighting the stigma of PTSD — and of mental illness in general. After all, many of us — or someone close to us — will seek therapy at some point. If we can change attitudes in society at large, we can change the military.

After talking with the experts and veterans, I was now convinced that *Take Me Home Huey* could be helpful [fig. 21]. Many of the veterans agreed. "I'm really drawn to this thing," Karl Renz said. "This is going to be a healing tool. It really is."

"Here's this bird that's being rebuilt, reborn, resurrected, and is now a different launching pad. It's a launching pad to rescue people and show them, 'We're going to take you home, man,'" Paul said.

The next step for me was to get the *Take Me Home Huey* sculpture, song, and film out there for more people to see and hear. I now understood that I would need to provide a welcoming environment for veterans to view it and to bring groups of vets together to talk to one another and share their experiences. I hoped the project would help some of those who were still on the long journey home.

Take Me Home Huey is the moving chronicle of visionary artist Steve Maloney's mission to honor Vietnam veterans 50 years after the war's end, by resurrecting a shattered medevac helicopter that was shot down on Valentine's Day 1969 and dramatically transforming it into a traveling memorial. The book documents how the sculpture evolved into a touchstone for solace and connection among veterans, including some with PTSD. Drawing on a lifetime of creativity, in-depth conversations with survivors of the doomed Huey, others who served in the helicopter war, therapists, and historians, Maloney has crafted a stirring tribute to the unsung heroes of one of the nation's most controversial conflicts. The book is the culmination of a multimedia project that also includes an Emmy-winning film and an original song.

"A wonderful happy and sad snapshot of the Huey helicopter, the workhorse of the Vietnam War, and an artist's determination to rebuild an old warbird in memory."

— JOSEPH L. GALLOWAY, UPI WAR CORRESPONDENT IN VIETNAM AND AWARD-WINNING AUTHOR

"A stunning account of how art can heal the wounds of war... It grabbed my heart and I will share it with many."

— RYRIE VALDEZ, BOARD MEMBER, NEVADA ARTS COUNCIL

"An outstanding story of... a fantastic art piece that overwhelmed me while viewing it, touching it, and feeling its mystical, healing presence."

— CHUCK SWEENEY, RETIRED U.S. NAVY COMMANDER AND PRESIDENT/CEO, THE DISTINGUISHED FLYING CROSS SOCIETY



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