

Troops: Ops tempo challenges mental care

By Brendan McGarry - Staff writer
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Service members and veterans praise legislation that would expand access to mental health care — but they question the military's ability to improve treatment given the challenges of today's high operations tempo.

One proposal in the House would require all returning combat veterans to undergo confidential, face-to-face mental health screening. Another would allow direct access to mental health counseling without a referral from a primary care physician.

The bills are designed to detect mental health problems and prevent suicides and attempts at a time of record suicide rates in the armed forces.

Troops receive pre- and post-deployment screenings, but they are not necessarily evaluated by licensed professionals in optimal settings.

Army Lt. Col. Jason Wieman, a physician at the Army War College in Carlisle, Pa., said the services simply don't have enough psychiatrists, physicians and nurses to adequately screen and provide follow-up care to the thousands of service members cycling in and out of the war zones on a regular basis.

"This is an issue of extreme importance for us as a nation," Rep. Michael McMahon, D-N.Y., told a crowded conference room during a discussion Thursday at the Center for Strategic and International Studies, a Washington, D.C., think tank.

At least 349 service members committed suicide last year, McMahon said, adding that just weeks ago, an Army Ranger from near his congressional district with two tours of duty killed himself in a shopping-mall parking lot.

McMahon and Rep. Thomas Rooney, R-Fla., worked together last spring to introduce HR1308, the Veterans Mental Health Screening and Assessment Act. Portions of the bill were included in the 2010 defense budget.

McMahon said he was glad to see \$500 million in additional funding for mental health care in the budget, but said language for mandatory screening was left out.

The two lawmakers paired up again last fall to introduce HR 3839, the Counselor Accessibility Reform and Expansion (CARE) for Soldiers Act. Both bills have been referred to subcommittee and have no companion legislation in the Senate.

Wieman said he welcomed the initiatives but noted the perennial shortage of licensed mental health care providers in the military.

"The medical system simply doesn't have that resourcing," he said.

RETURNING HOME

As the division surgeon for Multi-National Division-Baghdad during the troop surge from 2006 to 2007, Wieman helped oversee the redeployment of some 17,000 troops to Fort Hood, Texas. He said 30 percent of those returning troops — more than 5,000 soldiers — indicated in post-deployment screenings a need for follow-up mental health care, but relatively few received immediate treatment because of shortages of credentialed providers.

The screening "almost made the situation worse because help wasn't provided on an immediate basis," he said.

Timothy Muchmore, a former soldier and now deputy director in the Army's Office of the Deputy Chief of Staff, G-8, cited the Army's record suicide rate, which reached 23 per 100,000 soldiers in 2009.

Citing the different lengths of deployments among the branches of service, Muchmore questioned whether Army combat tours should be shortened from 12 months to nine months, and dwell time increased to as much as three years between deployments.

"Left to its own devices, the Army will continue to spin as fast as it can," he said. "Perhaps Congress has to step in and provide some minimums and maximums," he said.

William Collins, a former Judge Advocate General in the Marine Corps and now an advisor to House Speaker Nancy Pelosi, D-Calif., said removing the stigma of mental health disorders from military culture will be a long-term challenge.

Collins recounted a story about a service member seeking mental health counseling on post who was told by a commander that he could do so only after obtaining the "chit," a slip of paper authorizing permission — which was attached to a 3-foot-tall stuffed animal.

"If you wanted to go to mental health, you had to carry this giant teddy bear," he said.