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## Vets face shortage of therapists

### New program training clinicians in psychology of combat is an attempt to help fill the gap

By Peter Cameron, Special to the Tribune

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When Daniel Brautigam tried to tell therapists how he felt having urine thrown in his face at Guantanamo Bay, he experienced the same frustration as thousands of other returning veterans who have sought counseling.

"They had no idea how to respond to that. It looked like to me that they were grossed out, and they're supposed to be helping me," said Brautigam, 31, who was diagnosed with post-traumatic stress disorder and depression following his return to Hoffman Estates from tours with the Navy in the Northern Arabian Gulf and Cuba.

The Department of Veterans Affairs estimates that 11 percent to 20 percent of veterans from the wars in Afghanistan and Iraq are suffering from PTSD. Others think the number is higher.

When vets seek therapy, they want a professional who can relate to soldiers in combat, and that usually means a therapist who has military experience. Without such empathy, therapy often is doomed, vets say.

Because most psychologists and mental health care professionals don't have a military background, there's a void in the safety net for vets. Some veterans' organizations have stepped up, training members to help their peers, and the Soldiers Project provides free counseling from licensed professionals and veterans by phone to newly returned vets.

A counselor to ex-soldiers for 35 years, Ray Parrish, 58, a self-described angry veteran, sees the problem on a daily basis. He is the benefits director for Vietnam Veterans Against the War in Chicago and helps those trying to navigate the bureaucracy of the Veterans Administration.

"There quite literally are not enough people that have knowledge of veterans' experiences and who have the professional expertise to provide them the health that they need," Parrish said. "That means that all of the veterans get inadequate care."

A new attempt to fill the gap is coming from the Adler School of Professional Psychology in Chicago, which this fall is launching a military specialization track for its doctorate of clinical psychology program. Joe Troiani, a faculty member and Navy veteran who created the track, said the school hopes to prepare students for the specific psychological problems that stem from military service. They will take such classes as the psychology of terrorism, and psychology of combat and conflict.

But some vets scoff at the idea of learning about the horrors of war in the classroom.

"You're dealing with a whole different mindset with a soldier," said Tim Miller, 30, of Chicago, a veteran of the Iraq war who is now studying to be a clinical psychologist at Argosy University. "You can't just wrap your head around that from reading a book."

Troiani called that criticism fair but said the school is training students how to treat the psychological effects of combat, rather than trying to re-create the experience of living in a war zone.

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Thomas Patterson, 25, completed his coursework for his doctorate in clinical psychology at Adler on a military scholarship, and he helped develop the new specialization. He started a yearlong internship with the Army in June.

"The way that I can best serve these individuals is to put on the uniform myself and get some firsthand experience," he said.

Dr. Eric Proescher is in demand because he served as a psychologist in the Navy and now is a clinical psychologist at Jesse Brown VA Medical Center in Chicago.

"On the front end, it's really important," Proescher said. "I have street credibility. People know that I understand where they're coming from and the challenges that they face."

His background helps him make an essential connection with patients and gets them to open up about their most dreaded memories from war, he said, paving the way to ease the symptoms of PTSD.

Veterans dealing with the VA complain about long waits and the quality of care. With the number of soldiers who have come home, and the thousands more who will soon, the VA has had to beef up its services.

Funding was increased to \$5.2 billion in 2011, and President Barack Obama's 2012 budget proposal allots \$6.2 billion. The number of mental health professionals the VA employs has gone up, from almost 14,000 in 2005 to well more than 21,000. The VA says there will be 300 Vet Centers offering counseling in rural and underserved areas by the end of this year, up from about 200 in 2007.

"We have greatly enhanced our ability to provide good-quality psychotherapy," said Dr. Sonja Batten, a clinical psychologist who directs national mental health policy for the VA.

Still, the number of suicides points to a persistent problem. The latest statistics available from the VA show that each year about 6,500 veterans commit suicide; slightly more than 6,000 troops have died in the Afghanistan and Iraq wars since 2001.

The VA also estimates that veterans, less than 8 percent of the total population, account for 16 percent of adults considered homeless.

In May, a federal appeals court in San Francisco ordered a major overhaul of the VA to improve veterans' mental health care.

"We have reached that unfortunate point with respect to veterans who are suffering from the hidden, or not hidden, wounds of war," Judge Stephen Reinhardt wrote in his opinion. "The VA's unchecked incompetence has gone on long enough; no more veterans should be compelled to agonize or perish while the government fails to perform its obligations."

Parrish said that even if more is done, he isn't confident the VA will ever be big enough.

"If the system were to grow enough in personnel numbers to actually handle the number of veterans who need the help and provide the appropriate services, it would have to be 10 times larger than it currently is," he said.

Meanwhile, efforts such as those of veterans groups and the training of new clinicians will be necessary to meet the U.S. military's goal of ensuring that nobody is left behind.

"The need is just so ongoing, so persistent and so severe," Parrish said.

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