



Veterans need more than applause

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[ 作者 ] American Counseling Association  
[ 单位 ] American Counseling Association  
[ 摘要 ] 17 NOV 2006.This article, which appeared in at least 27 publications recently covers the issue of mental health problems in returning war veterans, the insufficient number of counseling professionals available, and the lack of adequate government funding. ACA member and licensed professional counselor Cynde Collins-Clark of Oklahoma is quoted  
[ 关键词 ] Veteransmental health problemsgovernment funding

The next time you pass a homeless man on the street, you might ask in which war he served. In the next several years, chances are good that he (and increasingly she) will say Iraq or Afghanistan. That grim prediction is based on several facts:  
One in three adult homeless males is a veteran and 45 percent of those suffer from mental illness, according to the National Coalition for Homeless Veterans.  
A recent report in the New England Journal of Medicine, meanwhile, found that one in four veterans of Iraq and Afghanistan were diagnosed with some kind of mental health problem. And those are just the ones who found their way to a VA hospital. Many don't. Returning veterans are either embarrassed, untrusting of government, frustrated by bureaucratic gridlock, or simply incapable of navigating the system.  
With large numbers of troops likely headed home in the next year, the U.S. faces a tsunami of psychologically and emotionally damaged veterans who have no place to go. Those who don't find the support they need may end up on the streets.  
Or in prison. In 1998, an estimated 56,500 Vietnam War-era veterans and 18,500 Persian Gulf War vets were held in state and federal prisons, according to the 2000 Bureau of Justice Statistics report, Veterans in Prison or Jail. Obviously, not all were model citizens who turned to crime because of their war experiences. One in six of incarcerated veterans was not honorably discharged from the military. But the report says veterans are more likely than others to be in prison for a violent offense. Families of veterans aren't surprised. Men and women trained to survive in a war zone bring those same skills home and find themselves unable to function in an alien environment.  
Readjustment symptoms include hyper-vigilance, insomnia, irritability, exaggerated startle response, withdrawal, isolation, depression and anger. An act-first-think-later approach to problem solving may keep one alive in combat, but it's not helpful to family harmony. Cynde Collins-Clark -- none other than Oklahoma's 2006 Mother of the Year -- has experienced these problems firsthand. Her son, Joe, left for Iraq at 19 with the Army Reserve and returned a year later 100 percent mentally disabled by post-traumatic stress disorder (PTSD) and depression. Unable to work, Joe lives at home with his mother, a licensed professional counselor, and his stepfather.  
Collins-Clark has her son's permission to tell their story in hopes of helping others. She's especially concerned about those who will be overwhelmed by a system that even she finds challenging and maddening. She wonders how a young wife with small children copes with a sick soldier without any help.  
The biggest problem is simply not enough qualified counselors -- and not enough government funding to meet current needs. Those needs have grown exponentially, as the number of vets seeking treatment for PTSD and other mental health issues doubled from 4,467 to 9,103 between October 2005 and June 2006, according to a report last month by a House subcommittee.  
The Senate last year passed a bill to increase funding for veterans mental health programs. Specifically, it would have increased the number of clinical teams dedicated to the treatment of PTSD and allowed licensed mental health counselors, as well as marriage and family therapists, to work at the VA. The H Even without additional funding, the Department of Defense could help by increasing access to mental health care for military personnel and their families. Currently, individuals on TRICARE, the military's health insurance program, can seek counseling from licensed practitioners only after referral from a primary care physician.  
-combat symptoms frequently misdiagnose and fail to send patients to counseling.  
A veterans wife testified before a VA committee last year that her husband, Capt. Michael Jon Pelkey, was treated for everything from back pain to erectile dysfunction rather than PTSD. Pelkey finally was diagnosed properly by a civilian therapist -- one week before he killed himself.  
There can be no more shameful legacy of any war than ignoring veterans needs. As Republicans and Democrats vow bipartisan cooperation, they have no greater priority than to simplify veterans access to mental health services. Meanwhile, citizens can help. Russ Clark, a Vietnam Marine vet and minister who counsels veterans through Point Man International Ministries of Central Ohio, says he'd like to see community-based Welcome Home programs in every village, town and city in America.  
Veterans don't necessarily need a parade, he says, but they do need acknowledgement, affirmation, counseling, jobs and housing.

