

A Military Health Care System Over-Stretched by Two Ongoing Wars

US: Soldiers Forced to Go AWOL for PTSD Care

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MARFA, Texas, Dec 11 (IPS) – With a military health care system over-stretched by two ongoing wars in Afghanistan and Iraq, more soldiers are deciding to go absent without leave (AWOL) in order to find treatment for post-traumatic stress disorder (PTSD).

Eric Jasinski enlisted in the military in 2005, and deployed to Iraq in October 2006 as an intelligence analyst with the U.S. Army. He collected intelligence in order to put together strike packets – where air strikes would take place.

Upon his return to the U.S. after his tour, Jasinski was suffering from severe PTSD from what he did and saw in Iraq, remorse and guilt for the work he did that he knows contributed to the loss of life in Iraq.

“What I saw and what I did in Iraq caused my PTSD,” Jasinski, 23-years-old, told IPS during a phone interview, “Also, I went through a divorce – she left right before I deployed – and my grandmother passed away when I was over there, so it was all super rough on me.”

In addition, he lost a friend in Iraq, and another of his friends lost his leg due to a roadside bomb attack.

Upon returning home in December 2007, Jasinski tried to get treatment via the military. He was self-medicating by drinking heavily, and an over- burdened military mental health counsellor sent him to see a civilian doctor, who diagnosed him with severe PTSD.

“I went to get help, but I had an 8 hour wait to see one of five doctors. But after several attempts, finally I got a periodic check up and I told that counsellor what was happening, and he said they’d help me... but I ended up getting a letter that instructed me to go see a civilian doctor, and she diagnosed me with PTSD,” Jasinski explained, “Then, I was taking the medications and they were helping, because I thought I was to get out of the Army in February 2009 when my contract expired.”

As the date approached, a problem arose.

“In late 2008 they stop-lossed me, and that pushed me over the edge,” Jasinski told IPS, “They were going to send me back to Iraq the next month.”

During his pre-deployment processsing “they gave me a 90-day supply of meds to get me over to Iraq, and I saw a counsellor during that period, and I told him “I don’t know what I’m

going to do if I go back to Iraq.”

“He asked if I was suicidal,” Jasinski explained, “and I said not right now, I’m not planning on going home and blowing my brains out. He said, ‘well, you’re good to go then.’ And he sent me on my way. I knew at that moment, when they finalised my paperwork for Iraq, that there was no way I could go back with my untreated PTSD. I needed more help.”

When Jasinski went on his short pre-deployment leave break, he went AWOL, where he remained out of service until Dec. 11, when he returned to turn himself in to authorities at Fort Hood, in Killeen, Texas.

“He has heavy duty PTSD and never would have gone AWOL if he’d gotten the help he needed from the military,” James Branum, Jasinski’s civilian lawyer who accompanied him to Fort Hood told IPS. “This case highlights the need of the military to provide better mental health care for its soldiers.”

Branum, who is also co-chair of the Military Law Task Force, added, “Our hope is that his unit won’t court-martial him, but puts him in a warrior transition unit where they will evaluate him to either treat him or give him a medical discharge. He’d be safe there, and eventually, they’d give him a medical discharge because his PTSD symptoms are so severe.”

He’s turning himself in “because he is not a flight risk and wants to take responsibility for what he’s done,” Branum stressed.

“It’s been a year, I want to get on with my life and go to college and become a social worker to help people,” Jasinski said of why he is turning himself in to the military at this time. “I want to get on with life, and I don’t want to hide.”

Kernan Manion is a board-certified psychiatrist, who treated Marines returning from war who suffer from PTSD and other acute mental problems born from their deployments, at Camp Lejeune – the largest Marine base on the East Coast.

While he was engaged in this work, Manion warned his superiors of the extent and complexity of the systemic problems, and he was deeply worried about the possibility of these leading to violence on the base and within surrounding communities.

“If not more Fort Hoods, Camp Liberties, soldier fratricide, spousal homicide, we’ll see it individually in suicides, alcohol abuse, domestic violence, family dysfunction, in formerly fine young men coming back and saying, as I’ve heard so many times, ‘I’m not cut out for society. I can’t stand people. I can’t tolerate commotion. I need to live in the woods,’” Manion explained to IPS. “That’s what we’re going to have. Broken, not contributing, not functional members of society. It infuriates me – what they are doing to these guys, because it’s so ineptly run by a system that values rank and power more than anything else – so we’re stuck throwing money into a fragmented system of inept clinics and the crisis goes on.”

“It’s not just that we’re going to have an immensity of people coming back, but the system itself is thwarting their effective treatment,” Manion explained.

According to the Army, every year from 2006 onwards there has been a record number of

reported and confirmed suicides, including in 2009.

There has also been an escalation of soldier-on-soldier violence, as the Nov. 5 shooting spree at Fort Hood by Major Nidal Hassan indicates. In 2008 there was also a record number of suicides for the Marine Corps.

Jasinski's case is representative of a growing number of soldiers returning from the occupations of Iraq and Afghanistan who are going AWOL when they are unable to get proper mental health care treatment from the military for their PTSD.

A 2008 Rand Corporation report revealed that at least 300,000 veterans returning from both wars had been diagnosed with severe depression or PTSD.

Jaskinski's experience with the military has inspired him to offer advice for other soldiers who need PTSD treatment but are not receiving it.

"Do not, do not let a 5-10 minute review by a military doctor determine if you go to Iraq," he told IPS. "Even if you have to pay out of pocket, go civilian to a doctor... the military mental health sector is so overwhelmed, they won't take care of you. Go see a civilian, and hopefully that therapist will help you... even then I'm not sure that will help... but you have to take that chance."

When asked what he feels the military needs to do in order to rectify this problem, he said: "A total overhaul of the mental health sector in the military is needed... we had nine psychiatrists at our centre, and that's simply not enough staff, they are going to get burned out, after seeing 50 soldiers each in one day. We need an overhaul of the entire system, and more, good psychiatrists, not those just coming for a job, but good, experienced mental health professionals need to be involved."

Dahr Jamail's new book, *The Will to Resist: Soldiers Who Refuse to Fight in Iraq and Afghanistan*, is now available. Order the book here <http://tinyurl.com/cnlgyu>. Visit Dahr Jamail's website <http://dahrjamailiraq.com> **

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