

More Mental Health Care Called For in Wake of Ft. Hood Shootings

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Debra Kain

The recent shootings at the Ft. Hood, Texas army base, allegedly by an army psychiatrist, have placed much-needed focus on mental health care in the army. In an article published in the December issue of the journal *CNS Spectrum*, renowned psychopharmacology expert Stephen M. Stahl, MD, PhD, calls for increased mental health staffing at Fort Hood and other army bases.

Stahl, adjunct professor in the Department of Psychiatry at the University of California, San Diego School of Medicine, reports that findings from interviews, surveys and education programs at Ft. Hood - data collected from more than 100 mental-health workers and nearly 300 command soldiers just prior to the shooting - show a low level of confidence in army mental health care.

The data also showed strong perceptions of excessive prescribing of opiates and other psychotropic drugs, lack of adequate participation in mental health by primary care providers and significant understaffing of mental health services.

"Mental health care at Ft. Hood is understaffed, leading to a current crisis in the delivery of care," said Stahl. He proposes a key and immediate remedy to these problems - to redeploy primary-care providers and nurse case managers already in place at Ft. Hood into roles that make them central members of the mental health care delivery team.

According to Stahl, this change - which would require extensive mental health and psychopharmacology training for primary care, nursing and mental health professionals as well as army command soldiers - is necessary in order to fill more than 1,000 current vacancies and to elevate the standard of mental health care to an acceptable level. He adds that such steps could help prevent future dire consequences to U.S. soldiers as well as to the health professionals who deliver such services.

Stahl is director of the Neuroscience Education Institute, which was contracted to deliver four days of intensive psychopharmacology and mental health training for the warrior transition unit (WTU) at Ft. Hood just prior to last month's shootings. His article describes severe limitations to the access a soldier has to psychiatric medications and resultant long delays to get even brief appointments with psychiatrists at the base.

The study also discusses the continuing stigma of mental illness at Ft. Hood which, when combined with limited staff availability, can create formidable barriers to receiving appropriate psychiatric care for many soldiers.

Media Contact: Debra Kain, 619-543-6163, ddkain@ucsd.edu