

Pentagon's Efforts to Curb Mental-Health Woes Apparently Falling Short



Mie Ahmt / Getty Images

The [Pentagon](#) didn't actually win the wars in [Afghanistan](#) and [Iraq](#). Now a prestigious federal panel has concluded it's also not winning its decade-long battle to shield troops' brains and minds from mental-health woes stemming from those conflicts.

There is little evidence that the military's so-called "resilience, prevention, and reintegration" programs, designed to beef up soldiers' defenses against the mind-ravages of war, have had any beneficial effect, concluded the 291-page report released Thursday by an Institute of Medicine panel. Its members, a variety of mental-health experts with diverse backgrounds, said:

...A majority of Department of Defense resilience, prevention, and reintegration programs are not consistently based on evidence and that programs are evaluated infrequently or inadequately. For example, on the basis of internal research data that show only very small effect sizes, Department of Defense concluded that Comprehensive Soldier Fitness, a broadly implemented program intended to foster resilience, is effective—despite external evaluations that dispute that conclusion. Among the small number of Department of Defense -sponsored reintegration programs that exist, none appears to be based on scientific evidence.

The committee was unable to identify any Department of Defense evidence-based programs addressing the prevention of domestic abuse. More recently, the services have implemented a number of prevention interventions to address military sexual assault, yet a Department of Defense review found that critical evaluation components needed to measure their effectiveness are missing.

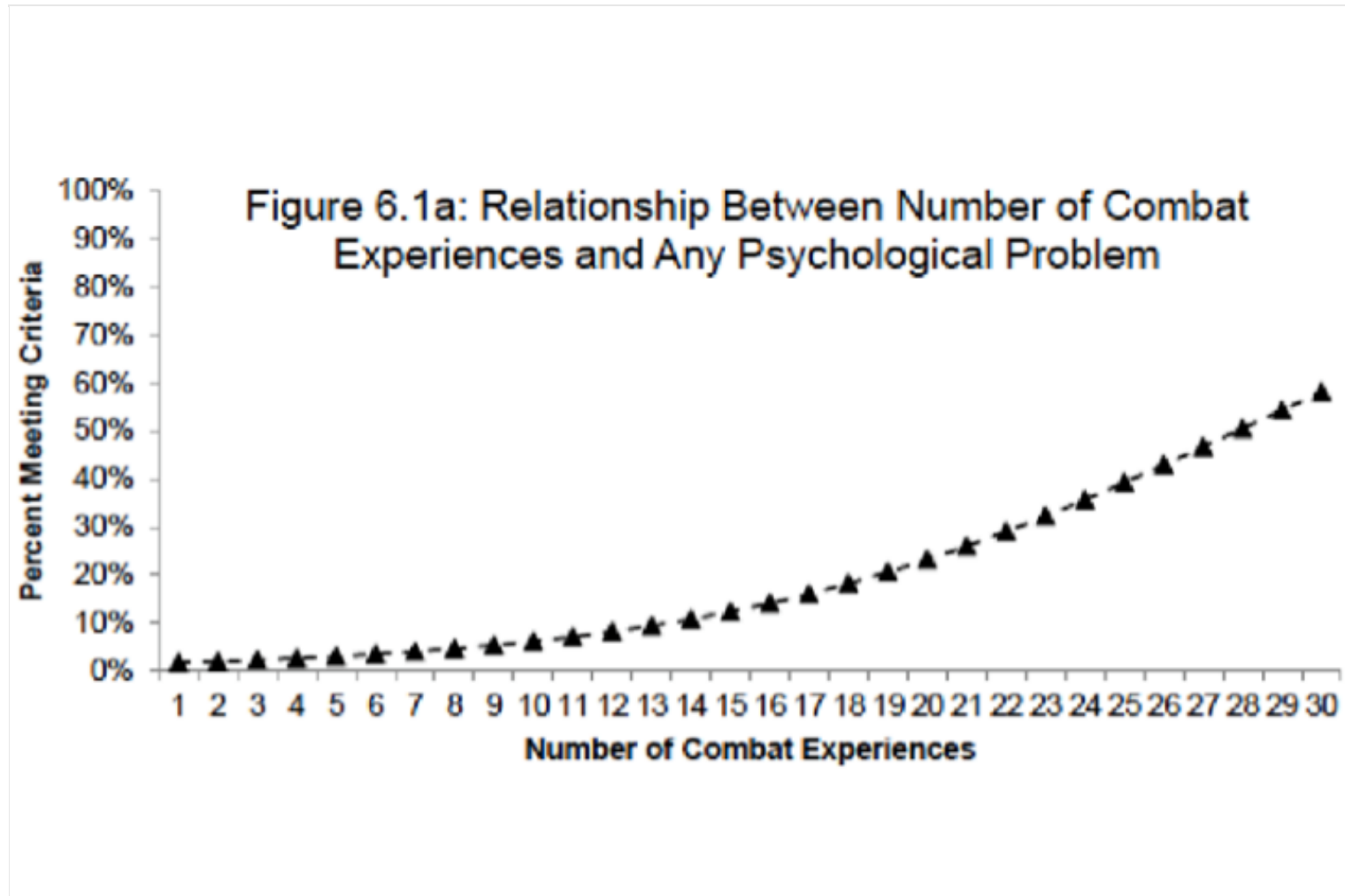
The meager results don't come as a shock to Elspeth Ritchie, who retired as a colonel from the Army in 2010 after serving as the service's top psychiatrist. "The military took the approach of 'let's throw everything at it and let's see what works,'" she says, recalling the thinking of some of her Army colleagues: "You put enough steel on target, the target is going to go down."

The [report](#) singled out the Army's Comprehensive Soldier and Family Fitness program, a \$125 million effort created in 2008 to fortify soldiers' mental health. While the Army concluded it was working in 2012, Thursday's report said its evidence was based on a too-small sample to reach such a conclusion. The panel said the Army efforts did little to reduce the chances of a soldier suffering from post-traumatic stress disorder or depression. It added that the current one-size-fits-all strategy for addressing mental-health issues may not work best and "can lead to the inefficient use or waste of scarce resources that could otherwise be used to address the enormous task of preventing psychological health problems."

The Army has said that these programs are not aimed at curbing depression or PRTD, but are focused on giving troops the tools they need to maintain a healthy mental outlook, which could reduce various mental-health ailments. The cost of such programs more than doubled between 2007 to 2012, to nearly \$1 billion annually.

Mental-health problems skyrocketed in the U.S. military following troops' [repeated](#) deployments to Afghanistan and Iraq. With a force too small to wage both conflicts, soldiers and Marines had to deploy repeatedly to the front lines. "As would be expected, there is a dose-dependent relationship between levels of combat experiences and well-being indices," the Army's recently-released ninth Mental Health Advisory

Team **report** says. “This relationship is clearly demonstrated for the percentage of Soldiers meeting screening criteria for any psychological problem.”



Army

The IOM report notes that mental illnesses among troops jumped by 62% between 2000 and 2011, with the suicide rate nearly doubling between 2005 and 2010. “In 2011 there was a total of 963,283 service members and former service members who had been diagnosed with at least 1 psychological disorder during their period of service,” the study found. “Nearly 49 percent of these service members had been diagnosed with multiple psychological disorders.” In recent years, mental-health diagnoses have **eclipsed** pregnancies as the source of most military hospitalizations.

Ritchie says the absence of proof that such programs aren't working doesn't mean they're

not; civilian efforts to achieve the same goals have similar “fuzzy” outcomes. “You try to add an hour or two of resilience training in basic training, but you really don’t know what [improvement] is related to that,” she says. “I remain skeptical, but at the same time I am sympathetic to the desire to do everything you can for the troops, even if the science isn’t there yet.”