

## **Predeployment mental health screening of soldiers reduces combat stress**

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A new study shows that psychiatric or behavioral problems among military personnel serving in Iraq were reduced 78 percent in Army brigades systematically screened for mental health conditions before deployment. Suicidal thoughts and behaviors were halved, and combat stress reactions were lowered by 29 percent. The study was published on the website of *AJP in Advance*, the online advance edition of *The American Journal of Psychiatry* (AJP), the official journal of the American Psychiatric Association.

More than 20,000 <u>soldiers</u> were studied by Major Christopher Warner and colleagues in the U.S. Army, who compared three infantry brigades screened with the new procedures and three brigades deployed before the <u>screening program</u> was implemented at their posts. All of the soldiers participated in the 2007-2008 surge of forces in Iraq, and outcomes were tracked for the first 6 months of deployment.

Screening begins with a behavioral health form completed during the medical evaluation. Soldiers with identified concerns receive a <u>mental</u> health evaluation. Whether these soldiers are considered fit for deployment depends on the severity and stability of symptoms and the type and duration of treatment. Soldiers with psychotic or bipolar disorders are not deployed. Others who are on stable medication regimens are considered fit, and their care is coordinated and tracked during deployment.

The screened brigades in the study also had large reductions in duty



restrictions and air evacuations for mental health reasons. Maj. Warner states, "It's vitally important to know whether mental health screening works, for both military functioning and the welfare of individual soldiers, and this is the first time the program's been assessed systematically."

The article will appear on January 18 at *AJP in Advance*. The study was conducted as part of the authors' employment with the federal government; the stated views are those of the authors and do not represent the views or the policy of the Department of Defense.

Provided by American Psychiatric Association

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