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Texas Veterans Await New PTSD Rules

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The [U.S. Department of Veterans Affairs](#) has relaxed a long-standing rule to extend benefits to veterans with post-traumatic stress disorder, even though they may not have directly witnessed or experienced violence or death. Texas will be disproportionately impacted by the change: Seven PTSD treatment programs are located in the state, and an estimated 13 percent of the 2 million troops who have served in Afghanistan and Iraq since 9/11 are from here.

Veterans groups have long complained that PTSD regulations created needless hurdles for thousands of returning soldiers legitimately in need of treatment. The policy shift aims to ensure they get fair compensation for mental disorders associated with their service.

The revised rule will require only that veterans show proof of time in a war zone and at least some evidence they took part in a traumatizing event. For the first time, the federal government will extend benefits to veterans who simply worked in jobs where they had reason to fear such an event.

VA Secretary Eric K. Shinseki requested an additional \$5.2 million in next year's budget proposal — a \$410 million increase from current spending — to expand the department's mental health programs, including PTSD treatment programs. Texas' programs, stretching from El Paso to Waco, offer veterans mental health testing, family therapy and service-connected compensation ranging from \$123 to \$2,673 a month, depending on the degree of the veteran's disability.

Under the previous rule, veterans had to document a particular moment of trauma, such as witnessing the death of a friend or coming under enemy fire. Veterans groups have maintained that the rule unfairly barred deserving soldiers from comprehensive mental health care — especially female veterans, who did not meet the strict combat-related requirement.

While the [Texas Veterans Commission](#) does not keep a record of the number of PTSD-diagnosed soldiers, the agency hopes that the new regulation will open the benefits process to a growing group, agency spokeswoman Lisa Waddell says.

"Sometimes, [veterans are] five years out before [they] start getting nightmares and anxiety," she says. "There are people who fought after 9/11 who are just now realizing they have PTSD. The numbers will only snowball from here."

Private doctors still can't diagnose

The expansion of benefits aside, the rule change has caused some veterans groups — including the [American Legion](#) and the [Veterans of Foreign Wars](#) — to question why the government did not also loosen rules governing the use of private doctors' analyses when applying for PTSD relief. "The ideal situation would be to have the private sector be



able to make those decisions," says Jerry Newberry, a VFW spokesman, who is quick to acknowledge that the revised rule is "a big step forward."

As it stands, a veteran who applies for PTSD benefits may submit a private doctor's analysis as supporting material that is factored in when considering benefit eligibility. But while private doctors are concerned mostly with treatment, the VA's strict five-page medical report requires intensive injury-specific information that focuses on the origin of the trauma, Waddell says.

Still, private doctors may have sway in the benefits process. After a veteran has his PTSD case certified by the VA, for example, he can choose to go to a personal physician for treatment. If the doctor decides that the VA has understated the veteran's trauma claim or requires more medication — in essence, requests a spike in benefits — his diagnosis then becomes pivotal to the veteran's appeal to the VA for an increase, says Jim Richmond, the director of claims for the Texas Veterans Commission.

Pushing for increased PTSD treatment and benefits has been a long, slow battle for soldiers and advocates of trauma treatment. The medical community started evaluations and treatment processes in earnest during the Vietnam era, a response to returning soldiers showing symptoms of what we now know as PTSD but was dubbed "[shell shock](#)" during World War I. As recently as late 2007, researchers could not agree on the number of veterans who have suffered or continue to suffer from PTSD.

In 2008, the Pentagon commissioned its most expensive study of the affliction to date, funneling an estimated \$300 million to researchers for a full-scale assessment of PTSD. In a sign of the times, the military has since embraced a slew of alternative treatment options, including pet therapy, acupuncture and yoga.

Women at war

The new treatment options for PTSD-plagued veterans come at a watershed moment for female veterans, who have been pushed to the frontlines in the conflicts in Iraq and Afghanistan. They many times lacked the strict documentation required for PTSD treatment due to the military's long-standing combat rules. While not traditionally permitted to serve on the frontlines of combat zones, women nonetheless experience events and require treatment upon reentering civilian life, veterans groups say.

"The reality is that women are in combat all the time," Waddell says. "They serve in the military police with insurgencies, and the traditional barriers, unfortunately, are still there."

Deployed at their highest rate in military history, women today make up more than 11 percent of veterans of the Afghanistan and Iraq conflicts. Not surprisingly, Texas is home to the second-highest female veterans population in the nation, just behind California. More than 152,000 Texas veterans are women, according to a February estimate by the [Women in Military Service Foundation](#).

Particularly in Afghanistan, female Marines — 6 percent of the force — often are tasked with forging a fragile yet important bond with Afghani women. As part of so-called "female engagement teams," the women do what, culturally, male Marines cannot, which usually includes helping local women start businesses and receive medical attention.

"They're not necessarily shooting a rifle, but they are absolutely necessary in gathering information," Waddell says.

But the shifting roles of today's female soldiers raises new questions about PTSD's effects on family life, says Lou Manning, the director of [Women in the Military Project](#).

"[Women veterans] are facing now what men have always faced, and the same outcomes," she says, adding one caveat: "The one thing I hear women say is that when men who are fathers come back to family life, the family gives them some time to get back into it. When the women come back, the kids want them to be mom right when

they walk through the door."

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