

Chiarelli saluted for focus on soldiers' health

President's Award winner Gen. Peter Chiarelli highlights how technology helps treat brain injuries and PTSD

- By [Henry Kenyon](#)
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Every war leaves a legacy of wounds, both physical and mental. A decade of warfare in Southwest Asia has seen a major increase in traumatic brain injuries, often caused by improvised explosive devices, and post-traumatic stress disorder from multiple deployments. Although those afflictions have been around since the invention of gunpowder and warfare itself, they previously were overlooked or ignored. That must change, said Gen. Peter Chiarelli, Army vice chief of staff.

Speaking at this week's [Federal 100 awards](#) ceremony, Chiarelli said the legacy of such injuries on warfighters and their families "could be the Agent Orange of our time." At the event, Chiarelli received the President's Award for his efforts in championing treatments for traumatic brain injuries and PTSD.

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He has helped create or oversee various initiatives, such as virtual health screenings for troops preparing to return to combat zones and new treatment methods for soldiers who experience PTSD. Part of that new treatment approach is a more proactive stance on preventing suicides through efforts such as the Army's Health Promotion, Risk Reduction and Suicide Prevention Campaign. Created as part of the campaign, a task force has developed treatment centers that allow soldiers to check in online to receive help wherever they are. "I genuinely like seeing advances in technology," he said.

The emphasis on health care is vital because after a decade of warfare, the stress is showing on soldiers and their families. Chiarelli noted that some troops have deployed as many as five times for 12 to 15 months in Afghanistan or Iraq. "They're tired, and their families are tired," he said.

Chiarelli explained that when he took over as vice chief of staff in 2008, the rate of traumatic brain injuries and PTSD injuries was 38 percent. They now account for 63 percent of all combat-related injuries and affect about 19,000 soldiers. "These injuries represent the signature injuries of this war," he said.

One of the challenges in treating those injuries is overcoming the stigma associated with them. Chiarelli said changing attitudes will require a significant cultural shift for the military and society. Technology enables personnel to privately seek help and receive better treatment. However, there is a critical lack of qualified treatment personnel. "One of the biggest challenges we face as a nation and a service is the shortage of behavioral health professionals," he said.

Technology is also helping to eliminate those cultural obstacles. The Army is using videoconferencing to connect soldiers with doctors. Chiarelli added that most young personnel prefer counseling sessions via video because they are used to electronically communicating with one another.

The service is also using virtual-reality simulations to help treat soldiers with PTSD. Chiarelli said the Army is starting to use those therapeutic techniques, and they are invaluable in treating soldiers. However, he added, broader use of such technologies will need to wait until the results of clinical trials and additional research become available. "We owe it to our service members and their families," he said.

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