

Post Deployment Health Assessments – be on time, be honest

By Brandy Gill, CRDAMC Public Affairs

FORT HOOD, Texas – As approximately 24,000 Soldiers return to Fort Hood from overseas operations most are thinking about reuniting with family and friends, or enjoying creature comforts like a good meal, a hot shower and a comfortable bed.

What they are probably not thinking about is completing their Post Deployment Health Assessment (PDHA) or Post Deployment Health Re-Assessment (PDHRA), but the providers at Carl R. Darnall Army Medical Center's Soldier Readiness Processing Center (SRP) are keeping track of these requirements for them.

"We have been preparing for this surge of returning Soldiers for several months," Col. Patrick Sargent, CRDAMC commander, said. "We are working closely with III Corps, Southern Regional Medical Command (SRMC), Army Medical Command and our local network providers to ensure we are prepared to meet the medical and behavioral health needs of these Soldiers as they return from combat operations in Iraq and Afghanistan."

In order to meet the increased demand, Sargent said that SRMC has tasked behavioral health providers from across the Army to assist with the PDHA and PDHRA process. Some providers will actually travel to Fort Hood while others will provide care virtually at the SRP Center's new 15-booth Virtual Behavioral Health Suite.

These extra resources and capabilities are a result of the U. S. Army Medical Command's Comprehensive Behavioral Health System of Care campaign.

Completing the PDHA and PDHRA is mandatory for all personnel returning from deployment, Col. Thomas Brooks, Officer in Charge of the SRP Center said.

"All Soldiers, whether they are Active Duty, Reserve or National Guard will receive a PDHA within 5 – 30 days of returning, and they must also complete the PDHRA within 90-180 days after returning," he said. "Contractors and civilians are required to complete them too."

Even though it's required, Soldiers shouldn't think of completing these assessments as just 'checking the block' because they are designed to help identify concerns like traumatic brain injuries, post traumatic stress or other behavioral health issues.

It's not uncommon for Soldiers who have just returned from deployment to find they are struggling with symptoms of stress Brooks said. That's why timing is key when completing the PDHA and the PDHRA.

"It's a critical process, and even more critical that they get it done on time, because the longer they go with sustained symptoms the more likely they are to have a bad outcome which may include a marriage that might have been saved, becoming an alcoholic, driving drunk or the unnecessary loss of a career."

Some Soldiers may feel they don't have much to report initially because they are still just happy to be home, but it can be an entirely different picture by the time they come back for their PDHRA three to six months later Brooks said.

"The first 30 days is usually the honeymoon period, but sometimes Soldiers start to wear down sooner than that," he said. "However between 90-180 days, that's when some of them really start to decompensate, and they may actually be ready at that point to say, 'Hey, I've got a problem.'"

According to Brooks, Soldiers are more likely to admit they are struggling now than they were in the past. This reduction in stigma has led to a higher number of referrals and more Soldiers independently seeking help.

"When I got here in 2007 people would not admit to having any type of psychiatric issues. Depression, anxiety, fears, nightmares, they wouldn't talk about that, but the whole process is different now," he said. "We are referring a minimum of 20 percent of our PDHRA Soldiers every single day to our on-site behavioral health providers, and that's a lot. There are many days where literally every other Soldier I've seen I've had to send for further evaluation."

Soldiers need to take the assessments seriously and be truthful Brooks said.

"I try to make it very clear to them that their meeting is completely confidential so they need to be honest about whatever they're feeling," he said. "It is OK to have some pressures, stressors, or behavioral health issues. You are not less macho. You are not less

of a Soldier. We're not throwing you out of the Army. We want to help you, and we're here to help you and to work with you. You are not alone."

Brooks said he frequently sees Soldiers who tell him they have been dealing with something they thought was normal for years.

"When it escalates to a point then they suddenly say, 'I am tired of this. I realize this isn't going away even though I've waited for years. It's not going away, and I guess I better see if I can do something now.' The sooner the better of course, but that doesn't mean these Soldiers who have carried these stressors for a long time can't be helped in a positive and successful manner," he said.

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2011-11-18 Fort Hood Soldiers receive PDHA and PDHRA screenings

Fort Hood Soldiers receive their Post Deployment Health Assessment and their Post Deployment Health Re-Assessment at the Fort Hood Soldier Readiness Processing Center. Every Soldier who returns from deployment is required to complete these assessments. Approximately 24,000 Soldiers are expected to return over the next several months. (Photo by Brandy Gill, CRDAMC Public Affairs)



2011-11-28 Sgt. Christopher Sims gives PDHRA brief

Sgt. Christopher Sims, a Carl R. Darnall Army Medical Center Mental Health Specialist, briefs Soldiers on the Human Response to Trauma during a Post Deployment Health Re-Assessment (PDHRA) at the Soldier Readiness Processing Center. Approximately 24,000 troops are expected to return to Fort Hood over the next several months. All are required to complete a PDHRA. (Photo by Brandy Gill, CRDAMC Public Affairs)

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