

STATE OF WISCONSIN
Department of Health Services
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Division of Mental Health and Substance Abuse Services

DMHSAS Info Memo Series 2009-

Date: February 20, 2009

Index Title: Wisconsin National
Guard Prevention, Treatment and
Outreach (NG-PTO) program.

To: Listserv

For: Area Administrators/Human Service Area Coordinators
Bureau Directors
Program Office Directors/Section Chiefs
County Departments of Community Programs Directors
County Departments of Developmental Disabilities Services Directors
County Departments of Human Services Directors
County Departments of Social Services Directors
County Mental Health Coordinators
County Substance Abuse Coordinators
CSP Directors
Tribal Chairpersons/Human Services Facilitators
Aging and Disability Resource Center Directors

From: John Easterday
Administrator

Subject: The Division of Mental Health and Substance Abuse Services (DMHSAS) is partnering with the Wisconsin National Guard Prevention, Treatment and Outreach (NG-PTO) program.

Recently, Wisconsin participated in a conference regarding the behavioral health needs of returning veterans from the Wisconsin Army and Air National Guard, and their families, that are participating in combat operations overseas. The Wisconsin National Guard is made up of nearly 10,000 men and women who serve in more than 100 guard units located in 67 communities across the state. Since Sept 11, 2001, more than 80 percent of Wisconsin's Guard members have mobilized — mostly overseas to fight the Global War on Terror. For example, 3,500 Wisconsin Army National Guard soldiers from the 32nd Infantry Brigade have been mobilized for a one-year deployment to Iraq earlier this year.

The current conflicts lack clear front lines and rear guards, exposing more soldiers and airmen to the trauma of combat. Furthermore, longer and multiple deployments, uncertainty of the length of deployments, and the relentless tension of counterinsurgency warfare, as well as a tightening economy with limited job opportunities due to the recession, compound the stress Wisconsin citizens in the National Guard face upon return from their tour of duty overseas.

The rigors of combat in a new era raise new challenges in terms of managing the prevalence of post-traumatic stress disorder (PTSD) and related problems, often associated with substance use disorders. A higher percentage of service members returning from Iraq will show signs of

PTSD than in any other previous military conflict. Substance use disorders remain one of the most common groups of health disorders among veterans presenting for treatment.

Additionally, a matter of crucial importance to all who are involved in the treatment of returning combat veterans is the availability of and willingness to provide appropriate interventions to the families of returning veterans who suffer from PTSD and/or substance use disorders. The returning veterans are changed by their combat experiences. Their families are similarly changed by the prolonged absences of spouses/parents and the personality alterations they observe among returning family members.

The Veterans Administration (VA) provides medical and behavioral health care for veterans of the reserve components and those individuals honorably discharged from active duty. There are three VA Medical Centers located in the State of Wisconsin in Milwaukee, Madison, and Tomah. Additionally, each of these VAs has several community based outpatient clinics dispersed geographically throughout the state. Due to the geographical uniqueness of the National Guard, the likelihood of a VA facility in a service member's community may be limited.

VA enrollment benefits for National Guard members are determined by a member's military experience (combat involvement, time in service, etc.). The VA provides combat veterans with free health care for conditions potentially related to their service for up to five years following their separation from active duty. At the end of the five-year period, veterans remain enrolled in VA healthcare and are eligible for ongoing care. Symptoms of PTSD and substance abuse may not be exhibited until after timeframes established by the VA have expired. The reality of National Guard members comprising such large numbers of combat forces foreshadows the increasing utilization of community treatment resources rather than the VA, particularly since the National Guard does not have the ability or expertise to provide behavioral health treatment.

Consequently, the Division of Mental Health and Substance Abuse Services (DMHSAS) is partnering with the Wisconsin National Guard Prevention, Treatment and Outreach (NG-PTO) program to develop a comprehensive resource manual for behavioral health services. Since National Guard members may be residents of any of Wisconsin's 72 counties, this effort requires state-wide collaboration. DMHSAS has provided the NG-PTO with the contact information for each county's mental health and substance abuse coordinator, in order for the National Guard to develop a referral base for uninsured National Guard members requiring county-based behavioral health treatment. All referrals for active National Guard members and their families will originate from the NG-PTO office. The NG-PTO will be contacting you to learn more about services in your respective county, and how to make a referral for returning veterans and their families. The Wisconsin NG-PTO Coordinator is:

SGT Glen Mercier II
PTO Coordinator
Wisconsin National Guard
2400 Wright Street Madison, WI 53704
Office: (608) 242-3417
glen.mercier@us.army.mil

Not all combat scars can be seen with the naked eye. We need to put psychological injuries on par with physical injuries. On behalf of the Wisconsin National Guard and DMHSAS, we appreciate your willingness to ensure that Wisconsin citizens and family members who have made such a tremendous sacrifice for their country receive prompt and adequate mental health and substance abuse treatment.

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