AN UPDATE ON WORKING TOWARD PEACE BY PROVIDING CIVILIAN HEALTH AND MENTAL HEALTH SERVICES TO ACTIVE DUTY MILITARY PERSONNEL.

PRESENTED AT THE PEACE CAUCUS OF THE
AMERICAN PUBLIC HEALTH ASSOCIATION ANNUAL CONFERENCE
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MARIO CRUZ, M.D., DEPARTMENT OF PSYCHIATRY
IT SHUEY, BA, UNIVERSITY OF NEW MEXICO SCHOOL OF MEDICINE

BRYANT SHUEY, BA, UNIVERSITY OF NEW MEXICO SCHOOL OF MEDICINE
HOWARD WAITZKIN, M.D., PH.D., DEPARTMENT OF SOCIOLOGY AND
ROBERT WOOD JOHNSON CENTER FOR HEALTH POLICY
UNIVERSITY OF NEW MEXICO

macruz@salud.unm.edu

PRESENTER DISCLOSURES

Mario Cruz, M.D.

(1) The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

"No relationships to disclose"

LEARNING OBJECTIVES

- Describe the characteristics of active duty GIs and veterans who seek civilian health and mental health services;
- Explore the relationships between their selected characteristics:
- Discuss if not peace, should we move to a draft to ensure equity in war?

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WAR ADVERSELY IMPACTS SOCIETY

For the individual:

- Health
- Employment
- · Quality of Life
- · Family burden
- · Linked to suicide rate of children

For society:

- Homelessness
- Public safety
- · Incurred health care costs
- · Loss of creative potential

macruz@salud.unm.edi



CIVILIAN MEDICAL RESOURCE NETWORK (CMRN)

Objectives of CMRN:

- 1. To provide civilian medical or mental health evaluations and treatment for people serving on active duty with the military.
 - Activities may include case coordination, counseling by phone, and referrals to professionals who work in the Gl's geographical area.
 - The professionals who conduct the evaluations do so at no or reduced charge if the GI does not have usable insurance coverage and cannot afford to pay customary fees.

macruz@salud.unm.ei

CIVILIAN MEDICAL RESOURCE NETWORK (CMRN) (CONT'D)

2. To collaborate with the GI Rights Hotline, the Military Law Task Force, and other organizations for outreach to improve medical and psychological services in the civilian sector for active-duty Gls.

nacruz@salud.unm.edu

METHODS

- > Sample:
- Quantitative data 207 CMRN complete client records 2009-6/30/2015.
- Exploratory, retrospective review of de-identified data.

macruz@salud.unm.edu

DEMOGRAPHIC CHARACTERISTICS

macruz@salud.unm.edu

Gender	n(%)	
Female	36 (17.2)	
Male	173 (82.8)	
Age (18-30 yrs)	156 (75.4)	
Race		
White	127 (60.8)	
Non-white	82 (39.2)	
Military Branch		
Army	134 (64.4)	
Marines	26 (12.5)	
Navy	29 (13.9)	
Air Force	16 (7.7)	
Other	2 (1.3)	
	macruz@salud.unm.edu	10

n(%) 37 (18.1) 111 (54.4)
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111 (54.4)
111 (37.7)
34 (16.7)
161 (77.8)
48 (19.3)

	n(%)
Pre-Military Mental Health Problem	49 (21.5)
Pre-Military Health Problem	51 (24.4)
Pre-Military Trauma	98 (46.9)
Military Trauma	153 (73.2)
Combat related	80 (38.3)
Non-combat related	89 (42.6)
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	n(%)
Military Treatment	145 (69.4)
Medical	43 (20.6)
Mental Health	101 (58.4)
Both	21 (10.5)
Civilian Treatment	74 (35.4)
Medical	36 (17.2)
Mental Health	35 (16.8)
Both	10 (4.8)

IMPORTANT PRESENTATION CHARACTERISTICS

DIAGNOSES/SYMPTOM	n(%)
Major Depressive Disorder	151(71.9)
Post Traumatic Stress Disorder	127(61.1)
Suicidal Ideation	99(48.3)
Alcohol Abuse	55(26.3)
Panic Disorder	52(25.0)
Generalized Anxiety Disorder	44(21.0)

QUANTITATIVE FINDINGS

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TRAUMA

Post Traumatic Stress Disorder

- AWOL (OR=2.6, 95%CI 1.06 6.23, p=.04)
- Noncombat trauma (OR=3.1, 95% 1.6 6.1, p=.00)
- Combat Trauma (OR=5.4, 95% CI 2.6 11.2, p=.00)

TRAUMA

Noncombat Trauma

- · Race (Latino and Asian) (OR=1.4, 95% CI 1.0 1.8, p=.04)
- Age (OR=1.3, 95% CI 1.1 1.6, p=.00)
- Panic Disorder (OR=2.2, 95% CI 1.1 4.3, p=.02)

TRAUMA (CONT'D)

Combat Trauma

- Rank (E2, E3, specialist and PV2) (OR=2.1, 95% CI 1.5 3.1, p=.00)
- Military Health Problems (OR=3.1, 95% CI 1.5 6.6, p=.00)
- Military Mental Health Problems (OR=5.4, 95% CI 1.6 18.3, p=.01)
- PTSD (OR=3.4, 95% CI 1.7 7.0, p=.00)

GENERALIZED ANXIETY DISORDER

College degree or more (OR=1.7, 95% CI 1.1 2.5, p=.02)

Lack of Insurance (OR=.27, 95% CI .13 .56, p=.04)

Premilitary Health Problem (OR=2.3, 95% CI 1.0 5.0, p=.00)

PANIC DISORDER

Combat Trauma

(OR=2.1, 95% CI 1.1 4.0, p=.02)

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SUICIDAL IDEATION

22 years of age or younger

(OR=.4, 95% CI .2 .8, p=.01)

Panic Disorder

(OR=2.6, 95% CI 1.3 5.2, p=.01)

Generalized Anxiety Disorder

(OR=4.9, 95% CI 2.2 10.8, p=.00)

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AWOL

Younger Age

(OR=.6, 95% CI .5 .9, p=.00)

Army

(OR=2.7, 95% CI 1.1 6.2, p=.02)

Post Traumatic Stress Disorder

(OR=3.9, 95% CI 1.6 9.3, p=.00)

macruz@salud.unm.edu

CONCLUSIONS

Peace

- Ease disease burden
- Reduce ethical dilemmas
- Improve public safety

Draft

- Ensure equity in war burden
- Pulls entire country into conversation
- Reduces families of warriors

macruz@salud.unm.edu

"I FEAR THEY DO NOT KNOW US. I FEAR THEY DO NOT COMPREHEND THE FULL WEIGHT OF THE BURDEN WE CARRY OR THE PRICE WE PAY WHEN WE RETURN FROM BATTLE."

ADM. MIKE MULLEN, CHAIRMAN OF THE JOINT CHIEFS OF STAFF. FROM ADDRESS TO WEST POINT GRADUATING CLASS IN THE SPRING OF 2011

macruz@salud.unm.edu

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