

**A Second War** (Page 10)

While Army Specialist Jon Town was serving in Iraq, he received a \$15,000 bonus for signing up for a second tour of duty. Town says that his psychologist assured him that if he accepted a PD discharge, he would get to keep that money. But as he soon learned, accepting the PD dismissal meant that he would in fact have to give back the bulk of his signing bonus. Hours before he left Fort Carson, Town was informed that he now owed the Army more than \$3,000.

“[My wife and I] had this on our heads the whole way, driving home to Ohio,” says Town. “It was a total shock. I felt like I’d been betrayed by the Army.”

Russell Terry, the founder of the Iraq War Veterans Organization (IWVO), says he has seen many cases similar to Town’s. Military psychologists push the personality disorder diagnosis on soldiers, says Terry, straining to prove that their problems existed before their service in Iraq and refusing to acknowledge evidence of traumatic brain injury or post-traumatic stress disorder, which would allow the soldiers to collect disability and medical benefits.

Town’s psychologist at Fort Carson denies discussing benefits with Town. In a statement, the psychologist writes, “I have never discussed benefits with my patients as that is not my area of expertise. The only thing I said to Spc. Town was that the Chapter 5-13 [personality disorder discharge] is an honorable discharge ... I assure you, after over 15 years in my position, both as active duty and now

civilian, I don’t presume to know all the details about benefits and therefore do not discuss them with my patients.”

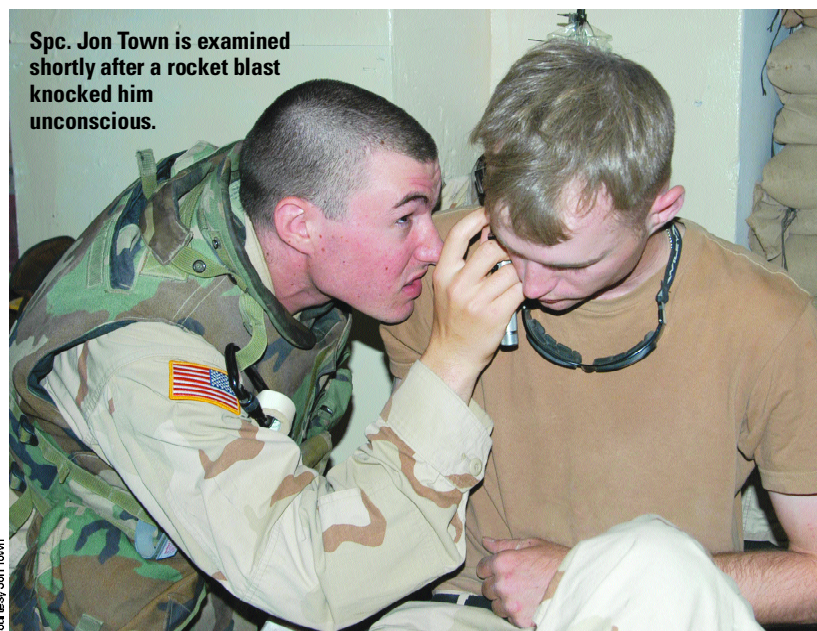
The doctor’s boss, Col. Steven Knorr, chief of the Department of Behavioral Health at Evans Army Hospital, declined to discuss Town’s case. But when asked if psychologists at Fort Carson were telling patients that a 5-13 discharge would allow them to receive disability benefits and keep their bonuses, Knorr said, “I don’t believe they’re doing that.”

To make a diagnosis of a preexisting condition, such as PD, many psychiatrists interview their patients’ friends and family, says Keith Armstrong, a clinical professor with the Department of Psychiatry at the University of California, San Francisco. He says interviewing family is a “crucial part” of the diagnosis process. No one besides Town was interviewed in his case. Knorr admitted that in most cases, before making a diagnosis of PD, his psychologists interview only the soldier.

Reporter Joshua Kors interviewed more than a dozen other veterans whose case histories were similar to Town’s. One veteran, William Wooldridge, drove a truck in Iraq and accidentally ran over a young girl after a man pushed her into the road. Traumatized by the incident, Wooldridge began to hear voices and see visions—hallucinations of a mangled girl. Wooldridge says that when he returned to the United States, his psychologist at Fort Polk, La., told him after a 30-minute interview that he had PD. He spent 18 months without disability benefits before the diagnosis was voided.

In June, 31 U.S. senators signed a letter to Secretary of Defense Robert Gates, asking him to investigate the military’s use of personality disorder discharges. And in July, Congressman Bob Filner (D-Calif.) held hearings to examine false PD diagnoses. Town flew to Washington, D.C., where he testified before Congress about the need to properly diagnose traumatic brain injuries and provide wounded soldiers with immediate medical care. His testimony was met with thunderous applause. Filner, chairman of the congressional committee, embraced Town’s message and praised him for sharing his story.

“You did not sign up to have to do this,” Filner said, “but by sharing your story, you are helping a lot of people. We thank you for your courage in coming forward.”



**Spc. Jon Town is examined shortly after a rocket blast knocked him unconscious.**

Courtesy: Jon Town

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