

MENTAL HEALTH RESPONSE

MEDCOM

MEDCOM in Fort Sam Houston, Texas immediately began preparing a mental health response to the attack. Senior officers happened to be in the area, and other personnel would be moved in quickly “and they would assist the North Atlantic Regional Medical Command in developing a coordinated behavioral health response beyond the initial response to the attack.”

The behavioral health response from the North Atlantic Regional Medical Command was coordinated between Walter Reed Army Medical Center and DeWitt Army Community Hospital at Fort Belvoir. “It was absolutely [an] impressive piece of work that those professionals brought to bear on this crisis. They intervened in an extremely appropriate rate, consistent with what the literature says you should do in terms of an immediate mental health/behavioral health response to a crisis like this. They were not intrusive. They were supportive.”

“The deployment of the SMART Teams occurred the way that they had been training for several years ...Walter Reed had the largest SMART Team...in the Army Medical Department, but there was a tremendous augmentation of those assets from the Departments of Psychiatry, Psychology and Social Work, to augment additional mental health services or behavioral services within the Pentagon proper.”

“They were particularly of value to the members of the Old Guard [the 3d Infantry, assigned to recover bodies] who were charged with ... dealing with the bodies immediately after they were removed from the wreckage. They were on site 24/7, with ... the SMART Team ... That SMART Team was deployed both inside and outside the Pentagon.”

“There were a lot of young kids in [the Old Guard], and they had a tough job. As far as mental health ... the seven days I was there they only had one or two kids that actually went to seek help. The mental health people that were floating, they were down there, and the chaplain. So there was a lot of interface to ... watch, and some of the docs that were around there were very attuned to the soldiers.”

“[I]t was a very good call to put somebody on the ground there and kind of got to know the key players.”

Rader Clinic

“Immediately, the first thing we did was start setting up triage points. As mental health specialists, we set up a picnic table. I ran over to the commissary and got food, drinks, whatever, because we were expecting people to start coming up from the Pentagon...Some people were just in shock, and they had left their cars down there and just started walking up through Henderson Hall and the Navy Annex. Some were coming

from the Child Development Center dragging their kids in their arms, just in shock. People just wanted to talk about what they had just seen.”

Some of the Rader Clinic mental health specialists moved their operations to the Pentagon that night. “I ended up at the Pentagon around 1800 that night, and the Old Guard was already standing by ... to start helping with the search and rescue. The building was still on fire ... When you first got down there, it was just airplane parts everywhere, EMT, firemen everywhere, smoke.”

“We weren’t doing debriefings...at all, probably for eight days. We knew a lot of the soldiers already, we just started kind of playing the Meet-Greet game. ‘Hey, how’s it going?’”

Some members of the Rader Clinic health team went into the Pentagon on September 11. They tagged along with some of the teams preparing to retrieve victims and bodies. “So we [came] up with a plan. What we’ll do is also suit up, if need be, and ... if anyone from the litter of four has a difficult time with what’s going on in there, then one of us will take their place on the litter. Our last person will do some mental health triage.”

“In the process, we were still talking to people about what they may see [and] feel, and going along those lines to prepare them for whatever was going on.”

“That first night, there was a group of Charlie Guard soldiers sitting outside, just sitting in front of the damaged Pentagon with the smoke billowing everywhere, and they’re waiting for what they were going to do next. And you could see the fear So that was our job, prep them. ‘What do you think you’re going to see in there? How bad do you think it’s going to be? Here’s what it is going to be like.’ You know, getting them to start talking about it, because when you’re just sitting there staring at the Pentagon and wondering what you’re going to see in there, you start to get a little freaked out.”

Of course, Rader Clinic continued to provide mental health services at its location, as well. “[W]e’ve done anything from individual patient walk-in care, acute crisis management, to group debriefings ... We mostly saw acute stress symptoms – inability to sleep; nightmares; reliving the events; hearing, smelling the events that had occurred; personalization. The soldiers that were really having trouble with things seemed to personalize what had happened ... A lot of people needed anger management services, which we do provide on an ongoing basis here at the clinic; an increased amount of spouse and child abuse, more spouse abuse than child abuse.”

DeWitt Army Community Hospital

The mental health team at the hospital was immediately included in the hospital’s response to the Pentagon attack. “Shortly after the Pentagon got hit, we had our first EOC meeting with the commander ... by the end of the day, we had all eight people, as well as another psychologist. So the eight of them were on site right away. They remained there on a 24/7 basis, going in 12-hour shifts ... We just jumped in right away

and supported folks outside the Pentagon. These were the rescue workers, the body handlers, and these type of things.”

This team also kept in touch with patients at civilian hospitals. “Initially ... we went around to the different hospitals. I went ... the night of the 11th and we hit a couple of the hospitals and actually looked in and met with some of the patients. We would also go and look at everybody who came into our emergency room. And we were getting walk-in cases for days later.”

They also worked with members of the Old Guard. “[T]he role of the 91 X-rays [mental health specialists] ... was very important. You have professionals going around and identifying and coordinating the things you need to do. The 91 X-rays were actually in there with the soldiers. They were helping them get dressed, they were taking their protective suits off when they go out ... they were identifying the people who were struggling, pulling them off to the side. If you’re an Old Guard infantryman, you’re not going to say, ‘Excuse me, I’m stressed.’ If we’re right in there with them ... and then pull them to the side, talk to them, help defuse them, right then and there, when they’re not being identified as a health patient. We found that to be very beneficial, making sure they were hydrated, making sure they were eating, and then processing what they needed to process.”

“The other thing we did here on post was we had a team that went around to [check on the body handlers at the airfield] ... as well as the MPs ... there were MPs who were having post-traumatic gate disorder – you know, six hour waits to get in. So we had this kind of contact team. And they were actually orchestrating food for the mission, you know, people who really weren’t getting food and relieved very much.”

Pentagon Family Assistance Center

Walter Reed Army Medical Center helped set up and run the Pentagon Family Assistance Center. “I basically welcomed the Red Cross Disaster Mental Health into my operation and thought that we could coordinate and have one team. We did not really experience any kind of conflict as far as leadership ... We knew we were all there for the same reason. I recognized that they brought some additional expertise to our group, which I thought would be beneficial for our folks to be exposed to as well.”

“We spent a fair amount of time revisiting the patients at the Washington Hospital Center and those families and providing information. Interestingly, they weren’t seeing Walter Reed as the Army, Walter Reed was Walter Reed. They were feeling that they wanted something from our service.”

Even after the center itself closed, the specialists stayed involved with the families. This included not only informational and direct mental health services. The team was also involved with the concert at RFK [Robert Fitzgerald Kennedy] Stadium in Washington, D.C. for the families, and a special screening at the Uptown Theater in D.C. of the new Harry Potter movie. “[I]nvolvement in those things turned out to be real helpful, and DoD was...keeping us in the loop. I think there was an expectation from the model that

had evolved at the Family Assistance Center that anytime they did something in a group, they felt mental health needed to be there.

Operation Solace

“Simultaneous with the operation of the Family Assistance Center, at the end of the first week, planning was initiated for a mental health sustainment operation that came to be called Operation Solace. This involved The Surgeon General’s consultants for social work, psychiatry, and psychology. The initial target for Operation Solace was Pentagon employees who were having a hard time coming back into the building, and those organizations that were displaced as a result of the crash. It was initially staff with military assets and then shifted to a contract asset operation in mid-December.”

“It’s important to note that the mental health operation doesn’t have a clear end.”

This summary brings together the oral histories of the following people:

COL Ed Crandall

Ms. Sharon Gray

Mr. Steven Hillyard

COL William Huleatt

SPC Suzanne Jenkins

LTC Michael Lynch

MAJ Samuel Mack, Jr.

Ms. Jenny McKinnie

COL Virgil Patterson

COL Rene Robichaux