



# News Release

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## ERMC officer named Army social worker of the year

By Ed Drohan  
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**HEIDELBERG, Germany** – She helped first responders overcome the trauma of the Fort Hood shootings, provided mental health treatment for Iraqi detainees and helped Croatia improve their treatment of Post Traumatic Stress Disorder. Not bad for somebody with just over five years in the Army.

Now Capt. Janet Payne can add another line to her resume -- Army Social Worker of the Year.

The announcement of her selection for the award came as a surprise to Payne, who said she was honored.

“It’s pretty humbling to be selected from among your peers for something like this,” she said. “There are a lot of extremely talented social workers out there.”

Payne has served as an Army social worker since 2007 but was a social worker in the civilian community for nine years before that. Her first Army assignment was at Fort Hood, Texas, where she was working at Marriage and Family Therapy Clinic on Nov. 5, 2009.

That was the day Army psychiatrist Maj. Nidal Hasan is accused of walking into the post’s Soldier Readiness Processing Center and opening fire with a handgun. Before he was shot and captured, 13 people had been killed and 32 others injured.

Payne’s clinic was put on lockdown as a precautionary measure since little accurate information was known about the incident at the time.

“We were on lockdown until 8 p.m. We didn’t have a lot of communications because the system was overwhelmed,” Payne said. “There was a lot of misinformation in the media that made people feel less safe than they really were. There were stories that there was more than one shooter, and that it was taking place on and off post. Everybody feared for their safety.”

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## **SOCIAL WORKER 2-2-2-2**

After the shooting, Fort Hood leadership ordered that everybody involved – those who were in the building, first responders and personnel involved in treating the injured – receive counseling because of the scope of the tragedy. Payne said that close to 500 people were directly impacted by the traumatic events that day.

Payne had participated in a traumatic event management course as part of her social work training and helped lead group sessions, along with small group and individual follow-ups, in what she termed “psychological first aid.”

“An event like that affects everyone,” Payne said. “It challenges ideas of what it means to be safe and who you can trust.”

While her work usually involves Soldiers and family members, her deployment to Camp Bucca, Iraq in 2008 and 2009 led to her working with an entirely different group of patients. The camp was home to a detention center that housed thousands of Iraqi detainees, along with more than 10,000 U.S. military members from all services.

The Geneva Convention states that detainees must be given the same treatment that U.S. Soldiers receive, which includes assistance for mental health issues, Payne explained. Her primary mission during the deployment was detainee operations.

“We were there to identify individuals who needed help and provide them with treatment,” Payne said. “This was especially important for people suffering from more chronic mental illnesses like schizophrenia and getting them the proper medications and care.”

While she was primarily deployed to deal with detainees, she and the team she worked with were “...the only mental health in town.” As such, she used her time to assist the U.S. military members as well.

“I’d go down to the wire (the fenced-in detainee compound) to see patients and along the way I’d talk to no less than five guards,” she explained. “I’d talk to them, see how they were doing and establish a rapport.”

It was an interesting assignment because she was able to take care of a perceived enemy and also take care of those detaining them along the way, she said.

The captain reported to ERM headquarter in January 2010 and now works closely with the Exceptional Family Member Program that helps ensure Soldiers who have family members with special needs are assigned to locations where those needs can be met. She was also asked to be part of a team that went to Croatia earlier this year to assess and evaluate how the country’s medical system provides Post Traumatic Stress Disorder treatment.

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### **SOCIAL WORKER 3-3-3-3**

While the Croatian military was a part of the NATO response in Afghanistan, the majority of PTSD problems stem from what Croatians call the “Homeland War” in the 1990s, Payne said. Many of those who fought were untrained, and the effects of that fighting are still being felt.

“We were there to conduct a review of their system and make recommendations for improvements,” Payne said. “The biggest problem is that their health care system is so different than ours, so the assessment went beyond what treatment methods they can use to the capability and capacity of how to provide health care.”

As an example, Payne said, the Croatian health care system doesn’t have the scope of nursing services that the U.S. system does. Nurses usually are either highly skilled intensive care nurses or nurse’s aids – there is no middle ground.

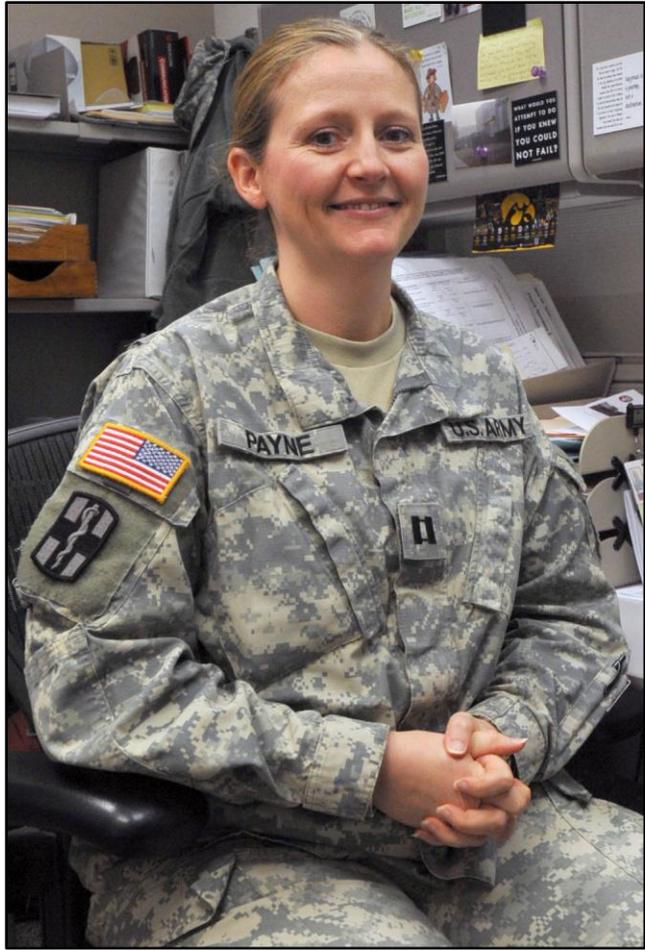
“We couldn’t say ‘do like us’ because we have a whole different support system,” Payne explained. “It came down to something bigger than just how to treat PTSD.”

According to Lt. Col. Graeme Bicknell, ERMC Behavioral Health Director and Payne’s supervisor, the Social Worker of the Year award was well deserved.

“No social work officers that I know of, at this early stage in their Army career could have performed as well as Captain Payne has in such an extensively staff focused environment,” Bicknell said. “Her accomplishments exceed those of more senior social work officers.”

While she’s excited about the award, Payne said she felt credit needed to go to those around her as well.

“I would not be where I am without the team of people around me,” she said. “The thing I love about the Army is we have great people. I get to work with great people.”



**Capt. Janet Payne**  
**Army Social Worker of the Year**