factor that differentiates assisted outpatient treatment from truly involuntary treatment is that many individuals are retrospectively grateful that they received assisted outpatient treatment. In an assessment of Kendra's Law, for example, 81% of individuals surveyed said that assisted outpatient treatment had helped them get and stay well (2). Individuals subjected to truly involuntary treatment are rarely retrospectively grateful.

It is unfortunate that Roskes practices in Maryland, one of only five states without an assisted outpatient treatment law. He thus has not had an opportunity to observe its proven effectiveness in reducing rehospitalization, victimization, incarceration, homelessness, and violent behavior (3). In addition, two studies have now shown that the use of assisted outpatient treatment results in significant cost savings to states (4,5).

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War Is Not the Answer

To the Editor: After reading the three articles in the July issue on suicide among U.S. veterans and active-duty service members (1–3), with their emphasis on suicide risks, rising rates of suicide, and the need for an increase in outpatient mental health staff to lower suicide rates, all I could think of was this: People go into the military and are trained to kill, and then they go into action where they see and perhaps engage in unimaginable horrors—and even get honored for it. Then we are surprised and concerned about their high suicide rates!

I know, it is not simple; there are Hitlers in the world. But even World War II grew out of the horrors of World War I. Still, I wish that the emphasis in *Psychiatric Services* articles—and indeed the whole world—would be on preventing wars rather than on dealing with the understandable suicidal aftermath.

Yes, this is naïve and simplistic thinking on my part. But if social scientists, politicians, and all of us don't put our research efforts and thinking into how to prevent wars, there are apt to be a lot more suicides in our future.

I sincerely believe the sign that we have put up in our front yard: "War is not the answer."

Mona Wasow, M.S.W.

Ms. Wasow is clinical professor emerita, School of Social Work, University of Wisconsin, Madison.

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In Reply: I was moved to respond to the heartfelt letter from Mona Wasow, rather that follow the more traditional path of asking for a response from the authors of the studies cited in her comments. I have considerable sympathy with the sentiments of Professor Wasow that "war is not the answer." Except that sometimes war *has been* the response to some set of world events, and then we are faced with the behavioral consequences of the resulting conflict. I made a point similar to Professor Wasow's when I was asked to review the excellent RAND report, *Invisible Wounds of War* (1), on the recent Gulf Wars. Namely, I suggested that the best way to prevent these injuries and wounds is to avoid unnecessary wars.

As the son of a decorated battalion surgeon in a combat infantry unit in World War II, I learned much from him about the horrors of war, because he talked to me about them from the time I was quite young. Later I learned that combat veterans do not talk about wartime events, which did not comport with my own experience with my father. Only many years later, when I listened to the comments of Vietnam veterans, did I realize that combat soldiers avoid talking about their war experiences not because of the horror of war, per se, but because of a profound sense of guilt over having been a participant in the violence. My father had been there as a healer and had no sense of being a perpetrator of that horror, even if he was a cog in the war machine. He was able to talk and share the experience with me. As a result, I chose to serve as a Commissioned Officer in the U.S. Public Health Service—at a safe distance at the National Institute of Mental Health.

From my father and from my own service, I learned to respect veterans of all stripes and understood how important it would be to help them heal from the invisible wounds of war that drive many of them to suicide. I publish this letter from Mona Wasow to give voice to her sentiments for peace.

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Dr. Goldman, who is editor of Psychiatric Services, *is with the Department of Psychiatry, University of Maryland School of Medicine, Baltimore.*

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