

Military suicide rate is alarming

From offering troops "emotional resiliency" training to hiring more mental health workers, the military and U.S. government have aggressively tackled a suicide epidemic among our troops. Nonetheless, the shocking suicide rate among members of the armed services continues to grow, especially in the Army. In 2009, 163 Army troops committed suicide, the highest rate in 30 years; by August this year, 125 active-duty Army deaths were blamed on suicide. A recent Houston Chronicle report warned that the numbers could be worse than we know: the military only recently began reporting Reserve and National Guard suicides, and statistics aren't kept for suicides among armed services veterans.

Seeking answers

Many military officials and veterans groups point to young recruits suffering under back-to-back multiple deployments. Yet, about 80 percent of the suicide victims have had only one deployment or none at all. Other studies, including one by the Army, say that after so many years of war, more waivers are being granted for recruits with behaviors that may put them at risk for suicide. "It's not just a black-and-white, 1-2-3 equation," Rockland Veterans Agency Director Jerry Donnellan told the Editorial Board, "it's an amalgamation." Anticipatory stress can be part of it, he said, preparing to head off to battle after they've heard returning soldiers' horror stories, "not the sanitized version."

And there's also the issue of the sour economy. Donnellan said it is pushing people toward the military, and then hampering a smooth transition back into civilian life. "A lot of these young people can't find any kind of work, and wouldn't have chosen military as a career, and it's left as their only option," Donnellan said. He said these young people can learn a trade and earn education benefits in the military, but they may not have the mind set needed for going to a war zone.

Offering support

Military leaders have been mindful of the challenges. The Army has 3,800 therapists and psychiatrists, two-thirds more than it did three years ago, though officials say many more are needed. The 2010 National Defense Authorization Act, which has yet to be implemented, requires a mandatory face-to-face screening by a mental health professional for every service member returning from Iraq or Afghanistan. The Pentagon requires one-on-one mental health assessments for all service members in combat zones. The pre-deployment and three post-deployment assessments can take place in person, by phone or via secure video-conferencing.

The Department of Veterans Affairs launched an ad campaign this week highlighting VA resources that can help returning vets transition to civilian life. That includes home loans, education assistance and medical treatment. "The sooner we meet their needs, the less likely they

are to encounter the repercussions commonly associated with the post-combat experience," VA spokeswoman Katie Roberts told the Army Times.

Covering all bases

Nonetheless, many returning troops still run into difficulty. Donnellan helped launch Rockland Veteran's Alternative to Incarceration to help vets having trouble coping. Under the program, veterans of the Iraq and Afghanistan wars who are charged with a nonviolent offense can be redirected to a special program that mandates counseling and substance-abuse treatment through the VA. Their criminal charges can be reduced or dismissed if they successfully complete the program. Donnellan said the year-old program has helped many veterans, but he said, "that doesn't cover all the bases we need to. We need lawyers, pro bono, for civil situations, foreclosures, divorces, stress-producing things."

Donnellan believes all the factors facing young veterans could make the suicide rate get worse before it gets better. "The economy, dealing with PTSD — or not dealing with it," make it that much harder for vets to reintegrate into society. This month, the United States entered the 10th year of war.

A Journal News editorial