

Losing our brethren: Military suicides a tragedy that must be addressed

Part One of a Two Part Series

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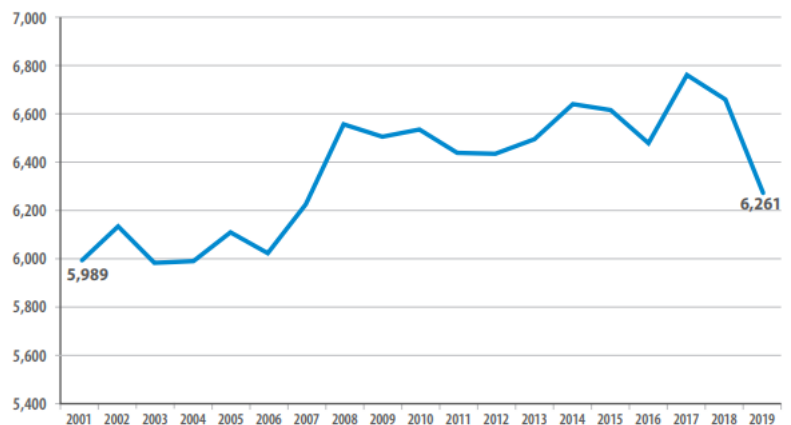
Since September 9th, 2011, military suicide numbers dwarf the number of soldiers killed in combat. In fact, four times as many U.S. service members and veterans have died by suicide than have been killed in combat. In this initial article I want to give you facts about this terrible scenario and with a later second Chronicle article provide you information on why this tragedy is occurring, how we can help our veterans and the methods our government and communities are trying to implement to alleviate the problem. And, just as important in the second article, I want to inform our veterans needing help how and where they can get it. So, with that, let's take a look at what is occurring in our country regarding veteran suicides.

On June 21st of 2021, Brown University developed a project under their Costs of War Research Series that included a report entitled, *"High Suicide Rates among United States Service Members and Veterans of the Post9/11 Wars"*, and I am going to frequently refer to contents of that report which provides some profound statistics. Not only profound, but their determination of causes is very informative and their summary of programs in America clearly outlines good and bad attempts to reduce the number of veteran suicides.

In the Brown University's report it was estimated that 30,177 active-duty personnel and veterans who served in the military since September 9, 2011 have committed suicide. An unbelievable huge number when compared to another sad figure of 7,057 military personnel who actually died in combat since that date. And, when you look at the number of veterans that have died by suicide since 2010, it is beyond belief because 65,000 have taken their own lives. A number exceeding those lost in combat in the Vietnam War, Operation Iraqi Freedom and Operation Enduring Freedom combined. Even more frightening is the fact there were 89,100 confirmed U.S. veteran suicides between 2005 and 2018.

There is one number that seems to provide some slight relief from the above sadness. The Veterans Administration (VA) conducts the largest national analysis of annual veteran suicide rates and in their 2021 National Veteran Suicide Prevention Annual Report it did find a decrease in 2019 veterans suicides. Unfortunately, their report does not have data after 2019 despite being a 2021 report. Also, their report of a decrease seems to be somewhat invalid. The Brown University report states the VA only counts veterans who were federally activated, leaving out Reservists and National Guardsmen who were not federally activated. We all know the wars of the past 20 years found hundreds of thousands of them being deployed and the number of deaths by suicide among military service members increased alarmingly in the fourth quarter of 2020 by 25% over that which occurred in the last quarter of calendar year 2019. The bulk of the increase came among Guard and Reserve, who saw suicides increase from 14 in the fourth quarter of 2019 to 39 in 2020. Deaths by suicide among reservists increased by seven, from 11 to 18, over the year. One consequence is VA's choice to only count federally activated troops and their failure to count Reservists and National Guardsmen who were not federally activated results in the oft-cited 21 veteran suicides per day figure to now be reported as 17 per day. That number is surely much higher. Figures for the National Guard and Reserves are not available for from 2001-2010, but from 2011 to 2020 an estimated 1,193 National Guard and 1,607 Reservists have died by suicide. Additionally, in veterans ages 18 to 34, the rate has increased by 76 percent since 2005.

Veteran Suicide Deaths, 2001–2019



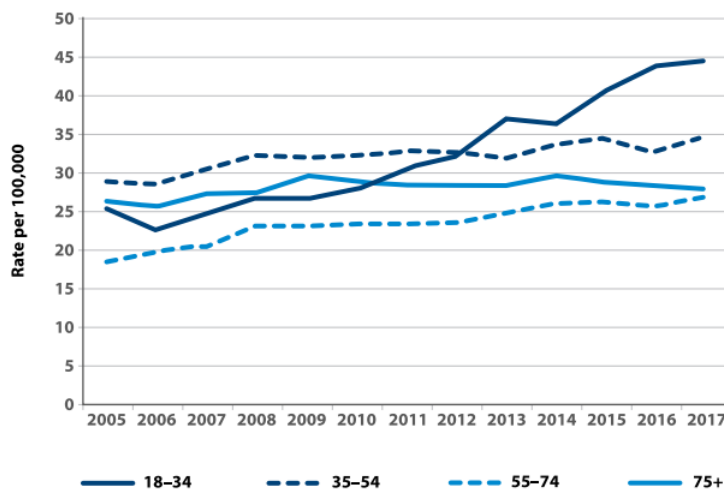
An excerpt from the Department of Veterans Affairs annual report on veterans suicide.

There were 399 fewer veterans committing suicide in 2019 compared to 2018 but that figure provides little comfort to me when you consider that a total of 6,261 veterans did so in 2019 alone. Suicide is the second-leading cause of death for post-

9/11 veterans, accounting for 22.3% of all deaths. And one statistic is hard to understand. Among veterans who served during the wars in Iraq and Afghanistan, the suicide rate for those who were undeployed is 48% higher than for veterans who experienced deployment.

No matter the statistic or cause, a reduction of only 399 is unacceptable. Particularly when you look at the means used by the 6,261 to end their lives. As example, approximately 70.2% of the suicides being counted were done with firearms. But how many have taken their lives using methods of drug overdose, vehicle crashes, drownings, etc., that have not been reported as an actual suicide? Another disturbing statistic is that in 2015 (most recent year data is available), more than 70% of veteran suicides occurred outside of Veterans Health Administration care. I often wonder why there is no data for this area after 2015. Most veterans do not seek care at the VA, and those receiving care (or no care) outside of the VA have the highest rate of suicide. Most veterans receive care and support from private organizations in their communities, or from their families and friends.

Over the past decade or so I have addressed the subject of suicides and one fact has always bothered me was when I reported that veterans aged 55-74 were the largest percentage of suicide deaths. It was especially true for we who served during the Vietnam War. We are seeing significant changes in those statistics now that the Global War on Terrorism situation has supposedly ended. Active service member suicide rates grew during the Global War on Terror period and surpassed any service member suicide rate since before World War II. In the past, except for the Vietnam War, active service member suicide rates actually tended to decrease in wartime. What will be the future statistics for the Global War or Terrorism veterans? I fear it will be drastic.



Source: 2019 National Veteran Suicide Prevention Annual Report

So, as you can see, the numbers are terrifying. I hope you will read my next article about what must be done to reduce veterans suicides. And, in that article, I'll tell you about one local veteran who nearly committed suicide but was able to overcome his situation by community help and involvement. Plus, for you veterans needing help, I'll provide information for you where you can get help. Until then, may God watch over our troops in harm's way and those at home needing help.

Losing our brethren: Military suicides a tragedy that must be addressed

Part Two of a Two Part Series

In Part One of this series, I provided some alarming statistics from a Brown University's report regarding veterans suicides. It estimated 30,177 active-duty personnel and veterans have committed suicide since September 9, 2011. Even more frightening is the fact there were 89,100 confirmed U.S. veteran suicides between 2005 and 2018. Why is this happening and what is being done to improve this terrible situation?

There are a number of reasons why we have so many veterans taking their own lives. One being homelessness. Veterans account for more than 8% of all adults experiencing homelessness in the U.S., translating to more than 39,000 homeless veterans on any given day. The 2020 Annual Homelessness Assessment Report informed Congress that in December 2020 there were an estimated 37,252 homeless veterans with 59 percent of them staying in emergency shelters or transitional housing programs, while the remaining 41 percent were "found in places not suitable for



human habitation.” Finding yourself in such situations after serving this country in uniform is surely a step towards suicide.

The sheer number of combat tours experienced by veterans during the Global War On Terrorism (GWOT) since 9/11 is also a suicide factor for veterans. How long is the period of one tour? That will vary, sometimes dependent upon the type of military position or branch of service being served. Having personally served in Special Operations I can state these men and women are placed in some very difficult scenarios. As example, in Special Operations there are specialized troops serving in the Navy Seals, Army Green Berets, Marine Corps Recon, Air Force Special Ops, etc., and we find that early in the GWOT a tour would last as long as one year. Over the next two decades of combat, some of these combat tours were reduced to around 6-9 months in length. A review of most Special Operations personnel will find combat tours served to be as high or higher than ten in number. Let's say, even if their tours only averaged seven months, ten tours in combat nearly averages six years of worrying everyday whether you would be severely injured and maimed for life, or even killed. Seeing the constant horrific scenes of battle with friends or foe being killed. Six years of being away from spouse, children and a life of peace. Is this not a roadmap to mental health issues and possible suicide?



Another cause of suicides in our veterans is the sheer length of the 20-year GWOT which finds many modern advances in technology, military equipment and medicine. This has resulted in the redeployment of veterans after recovering from war wounds, some of which were not possible in previous wars. This is a major contribution to worsening suicide rates after having sustaining multiple severe injuries, going into battle once again multiple times and returning home to face physical and mental problems later in life. Posttraumatic stress disorder (PTSD) is a major problem from this situation leading to thousands of suicides. Either intentionally or unconsciously, a diagnosis of PTSD causes veterans to steer clear of stressors that might “trigger” the painful thoughts and feelings associated with their trauma. This might involve resisting discussion of their military service with loved ones, or withdrawing from friendships with fellow service members. Many of our veterans with PTSD will not seek help because doing so will likely involve direct discussion of their trauma despite the fact that up to 31% of service members develop PTSD after returning from combat.

Another factor in suicides is that, during early years of the GWOT, Improvised Explosive Devices (IEDs) accounted for over half of the casualties while causing unbelievable stress in every veteran during combat missions. Imagine, if you will, walking out into your yard at home and worrying about stepping on a bomb or possibly having someone nearby detonate one, causing you or those around you to be severely injured or killed. Experiencing that possibility day after day, month after month, year after year as you enter your yard. Sanity would be difficult to maintain.

Many veterans survived IED's or other blasts during combat but did experience a traumatic brain injury (TBI), some medically known at point of occurrence while many others were not diagnosed until later in life or not even at all. Unfortunately, many of our veterans experiencing a TBI returned for more tours of duty in combat and some experienced repeated TBI's. No matter the number, each one is serious. According to the Mayo Clinic, a mild traumatic brain injury may affect brain cells temporarily. A more serious TBI injury can result in bruising, torn tissues, bleeding and other physical damage to the brain. These injuries can result in long-term complications or death. Among the many TBI symptoms are memory or concentration problems, mood changes or mood swings, feeling depressed or anxious, difficulty sleeping, loss of consciousness from several minutes to hours, persistent headache or headache that worsens, repeated vomiting or nausea, convulsions or seizures, dilation of one or both pupils of the eyes, clear fluids draining from the nose or ears, weakness or numbness in fingers and toes, profound confusion, combativeness, and loss of coordination. The worst possible result from TBI symptoms and suffering is the veteran commits suicide.

If experiencing a TBI, veterans at imminent or high risk of suicide need access to high-quality crisis care and follow-on support. Unfortunately, most veterans do not seek care at the VA, but seek it from families and friends or civilian facilities. However, those receiving care (or no care) outside of the VA, have the highest rate of suicide (more than 70% according to latest data). For the past few decades, it was reported that the highest rate of suicide occurred in veterans 55-74 years old. This primarily being Korean War and Vietnam War era veterans. I believe a dramatic change is coming over the next two decades in younger

age groups after this recent 20-year war. In fact, the non-profit organization Stop Soldier Suicide predicts that by 2030 the total of veteran suicides will be 23 times higher than the number of post-9/11 combat deaths, accounting for more than \$221 billion in public costs, and since 2006 there has been an 86% increase in suicide rate among 18-to-34-year-old male veterans.

So, if you are a veteran needing help, please seek treatment and use the VA. Where can you find it in VA and what programs are ongoing to provide that help? Here are some suggestions.

The Veterans Administration (VA) is working hard to reduce the veterans suicide rate with many programs that include a Veterans Hotline where caring, qualified VA responders are standing by to help 24 hours a day, 7 days a week. The number to call is 1-800-273-8255, then press 1. A very extensive list of methods to get help and support can be found at <https://theactionalliance.org/veteran-and-military-suicide-prevention-resources>. Locally, there are numerous veterans facilities that can be contacted to get help. To find a VA PTSD program near you, go to <https://www.maketheconnection.net/resources>, or visit <http://www.va.gov/directory/guide/PTSD.asp>. VA has PTSD programs offering education, evaluation, and treatment that include one-to-one mental health assessment and testing, medications, one-to-one psychotherapy and family therapy, group therapy (covers topics such as anger and stress, combat support, partners, etc.) or the gathering of groups for veterans of specific conflicts or trauma. If you're looking for care outside the VA, ask your doctor for a referral to a mental health care provider who specializes in PTSD treatment. Also, visit <https://findtreatment.samhsa.gov/> to search for providers in your area.

Our government is attempting to improve the veterans suicide situation and Congress is providing \$20 million annually to Department of Defense suicide prevention programs and research, including tens of millions of dollars in research and resilience programs. The VA's fiscal year 2021 budget set aside \$10.2 billion for veteran suicide prevention, which is a 7 percent increase over 2020. The White House recently released a five-point strategy laying out a series of actions the federal government will take to address our country's veteran suicide epidemic and the Departments of Defense, Health and Human Services, Homeland Security, Justice, and VA, as well as the Office of Emergency Medical Services within the Department of Transportation, will engage in a coordinated federal response. You can read about this strategy at www.whitehouse.gov/briefing-room/statements-releases/2021/11/02/fact-sheet-new-strategy-outlines-five-priorities-for-reducing-military-and-veteran-suicide/.

So, without a doubt, there is a veteran suicide problem in our country that is predicted to worsen, but there are ongoing projects to combat the problem and provide help. If you are a veteran needing help, I encourage you to reach out and get it. Use the information above to find it, or call the Citrus County Veterans Service Office at 352.527.5915. Help is available. Don't keep it to yourself.

I said in my first article on this subject I would tell you about a local veteran's experience with suicide. I'll do so later below but first a story about a very special veteran. I've mentioned the fact that our son suffers from TBI and PTSD issues after 56 months in combat in the GWOT as a Green Beret, fighting alongside many heroes who were severely wounded or killed. Each referring to one another as their brother. One of my son's GWOT brothers-in-arms, an Army Ranger Sniper Team Leader with 19 years military service, who lost both legs after being IED'd, is an icon of total heroism. Not only for his service to freedom, but for his fight to recover from severe trauma. His concern about Special Operations brothers, a group experiencing far too suicides, is truly inspiring as indicated by this portion of something he recently wrote to the world:

"I'm still confused, about Special Operations guys, choosing to end their time in this world by their own hands..."

It bewilders me, that we can watch videos of football games, and figure out a way to defeat another team, but the key to keeping guys from doing this, seems to be beyond us...

It used to anger me, but now it only sets me into a numb state. I hate feeling this way about my brothers. I hate that our lives have been filled with so



much death, that we grow callous towards, well, so many things.

I've been in low places, several times in my life. Nearly killed a few times, maimed, broken, financially ruined, cheated on, screwed over, etc., and, to say I've never entertained the thought of nibbling on a barrel, would be a lie... but I don't. Simply put, 'I will not lose' to anyone or anything, much less an intangible object... 'You will not defeat me'...

And yet, so many of my brothers have made that final decision, and that I could not see it nor help them, hurts me, to the point of tears and actual pain... the thought of my brothers suffering silently, with demons that pick away at their souls, so that they feel like there is only one way out, hurts me even more.

I want to break things. I want to punch a steel wall until my hands break. I want to dig them up and ask them 'WHY???' I want to punch them for leaving us in that way. I want to punch them more for not asking us to help them. I want to rewind time and hug their necks... I want to find the people that hurt my friends, and make those people suffer for what they've done...

But, none of that will change what happened... and, I'm angry all over again, because no matter how much pain that I inflict, or how much damage I can do, I cannot change what has happened... none of us can...

Keep these thoughts in your head, as you think about reaching for the gun, and instead, reach for a phone..."

Profound words from a hero who cares.

The second veteran, a local one, also survived combat but suffered from PTSD for years and never reached out for help. Later, after retiring from military service, he suffered very serious medical issues after exposure to Agent Orange during the Vietnam War. At one point nearly dying in surgeries, suffering extensive memory loss and other serious long-term medical issues. This resulted in losing his home, personal possessions, his job, while having a 6-figure medical bill to pay off from very limited income. Late one night a few months later he took a shotgun out to an old camper, sat there throughout the night with the intention to end the mental and physical suffering. The lone item preventing suicide as he sat there alone that long night was, after going over insurance papers laid out on a table for his family to later find, discovering that each paper contained a clause preventing payment to his family in the event of suicide. He knew he could not leave his family in more dire situations and help was needed.

Life for this veteran changed that night when he put the shotgun away. A few days later he went to get medical help in the VA and in local civilian facilities while improving personal affairs. However, the most important thing to come from that night of near hell was when, shortly thereafter, he went into the community and began volunteering to help others at the hospital, with veterans support organizations, at his church, etc., and over the next 26 years he has found countless people with so much worse problems than he faced and also needing help. Thanks to them, the VA and local physicians it was a successful healing process for a veteran who now lives in peace with his family. After that episode 26 years ago the shotgun now rests rusting, also in peace, somewhere never to be touched again. I am somewhat embarrassed to publicly relate this story, but am thankful I got through that terrible time in my life and hope the story will influence others to get help.

If you are a veteran, please do as I did. I know it will be difficult, but reach out and get help. Then, go into the community and help others. You served with honor. Continue that honorable service in the community with your brothers and I promise you with all my heart, you will heal as you heal others. As the hero said in his comments above, reach for a phone. God loves you and so does America for your service.

John Stewart is a retired Air Force Chief Master Sergeant, disabled Vietnam War veteran and has been a veterans advocate for nearly three decades. In 2016 he was inducted into the Florida Veterans Hall of Fame for his volunteer service and can be contacted at cornhusker69@yahoo.com.