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# Suicide Has Been Deadlier Than Combat for the Military

The Pentagon has made strides in helping those in need, but the rate of deaths is rising.



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Struggling with mental demons, Kayla Williams went to her bathroom and held a gun in her hand, contemplating suicide. It was 2004, and she'd been home for only a few months after serving as an Army sergeant and Arab linguist in the Iraq war.

But hers is one story that doesn't end in tragedy: Ms. Williams held those demons at bay long enough to get help and learn to manage the challenges of marriage to a combat-wounded veteran while writing two books about her experiences. "I'm doing well," she told me. She is now the director of the Military, Veterans and Society program at the Center for a New American Security.

Her journey, like that of so many others, has not been smooth. Recovery sometimes requires working with several therapists, changing providers when one isn't working and undergoing repeated treatment. The government has begun to acknowledge the danger that suicide poses for an all-volunteer fighting force and has invested \$1 billion in seeking solutions.

But that hasn't proved to be enough. Suicide rates for active-duty service members and veterans are rising, in part, experts say, because a culture of toughness and self-sufficiency may discourage service members in distress from getting the assistance they need. In some cases, the military services discharge those who seek help, an even worse outcome.

More than 45,000 veterans and active-duty service members have killed themselves in the past six years. That is more than 20 deaths a day — in other words, more suicides each year than the total American military deaths in Afghanistan and Iraq.

The latest Pentagon figures show the suicide rate for active-duty troops across all service branches rose by over a third in five years, to 24.8 per 100,000 active-duty members in 2018. Those most at risk have been enlisted men under 30.

The data for veterans is also alarming. In 2016, veterans were one and a half times more likely to kill themselves than people who hadn't served in the military, according to the House Committee on Oversight and Reform. Among those ages 18 to 34, the rate went up nearly 80 percent from 2005 to 2016. The risk nearly doubles in the first year after a veteran leaves active duty, experts say.

The Pentagon this year also reported on military families, estimating that in 2017 there were 186 suicide deaths among military spouses and dependents.

Military officials note that the suicide rates for service members and veterans are comparable to the general population after adjusting for the military's demographics — predominantly young and male. But given the military's size and influence, it is an institution that is well placed to lead the nation in suicide prevention.

Other than pointing to national trends, officials have offered few explanations for why military suicides are rising. Studies seeking more answers are underway.

Experts say suicides are complex, resulting from many factors, notably impulsive decisions with little warning. Pentagon officials say a majority of service members who die by suicide do not have mental illness. While combat is undoubtedly high stress, there are conflicting views on whether deployments increase risk.

Where there seems to be consensus is that high-quality health care and keeping weapons out of the hands of people in distress can make a positive difference.

Studies show that the Department of Veterans Affairs provides high-quality care, and its Veterans Crisis Line “surpasses most crisis lines” operating today, according to Terri Tanielian, a researcher with the RAND Corporation. (The Veterans Crisis Line is staffed 24/7 at 800-273-8255, press 1. Services also are available online or by texting 838255.)

But Veterans Affairs often can't accommodate all those needing help, resulting in patients being sent to community-based mental health professionals who lack the training to deal with service members.

Kim Ruocco's husband, John, a decorated Cobra gunship pilot who flew 75 combat missions as a Marine, also returned home tormented. But he did not seek help to deal with depression and combat trauma. He killed himself in 2005 as he prepared for a second deployment to Iraq. As an executive at the nonprofit

Tragedy Assistance Program for Survivors, Ms. Ruocco now helps grieving families and friends and raises awareness about the risk of suicide. She says even when service members in distress know about available resources, they often resist.

“One of the biggest battles is the military culture,” Ms. Ruocco said. “Seeking mental health treatment goes against everything they are taught in boot camp,” where service members are told “to push through pain, to think of everybody else before self, to solve problems with lethal force if necessary.”

Marines wouldn't think of not working out physically, she said, but “there is no space and time for self-care until it interferes with their ability to do their jobs.” She is confident that if Marines had been drilled on the importance of mental and emotional health, her husband would have found a safe way to cope.

Not only do these deaths devastate families; suicides can also undermine morale and cohesion within units that lose a member this way and can discourage potential recruits, threatening the viability of the all-volunteer force.

The other obvious imperative is doing more to reduce easy access to firearms — the most widely used method of suicide — by distributing gun locks, training individuals in safe storage methods and enabling military commanders to remove a service member's firearm if warranted. Health care professionals who treat service members and veterans should discuss this issue with their patients, just as they encourage people to wear seatbelts and bike helmets.

In the end, everyone has a role in helping those we love who are experiencing tough times to discuss their struggles, reduce alcohol and drug use and seek professional help.

To quote the Marine commandant, Gen. David Berger, “We must create a community where seeking help and assistance are simply normal, important decisions Marines and sailors make.”

*As mentioned above, the crisis line for veterans is 1-800-273-8255 (press 1). Another resource for those having thoughts of suicide is the National Suicide Prevention Lifeline at 1-800-273-8255 (TALK). You can find a list of additional resources at [SpeakingOfSuicide.com/resources](https://www.speakingofsuicide.com/resources).*

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