Suicide Epidemic Among Veterans

A CBS News Investigation Uncovers A Suicide Rate For Veterans Twice That Of Other Americans

By Armen Keteyian

(CBS) They are the casualties of wars you don’t often hear about - soldiers who die of self-inflicted wounds. Little is known about the true scope of suicides among those who have served in the military.

But a five-month CBS News investigation discovered data that shows a startling rate of suicide, what some call a hidden epidemic, Chief Investigative Reporter Armen Keteyian reports exclusively.

“I just felt like this silent scream inside of me,” said Jessica Harrell, the sister of a soldier who took his own life.

"I opened up the door and there he was," recalled Mike Bowman, the father of an Army reservist.

"I saw the hose double looped around his neck,” said Kevin Lucey, another military father.

"He was gone,” said Mia Sagahon, whose soldier boyfriend committed suicide.

Keteyian spoke with the families of five former soldiers who each served in Iraq - only to die battling an enemy they could not conquer. Their loved ones are now speaking out in their names.

They survived the hell that's Iraq and then they come home only to lose their life.

Twenty-three-year-old Marine Reservist Jeff Lucey hanged himself with a garden hose in the cellar of this parents’ home - where his father, Kevin, found him.

"There's a crisis going on and people are just turning the other way,” Kevin Lucey said.

Kim and Mike Bowman’s son Tim was an Army reservist who patrolled one of the most dangerous places in Baghdad, known as Airport Road.
"His eyes when he came back were just dead. The light wasn't there anymore," Kim Bowman said.

Eight months later, on Thanksgiving Day, Tim shot himself. He was 23.

Diana Henderson’s son, Derek, served three tours of duty in Iraq. He died jumping off a bridge at 27.

"Going to that morgue and seeing my baby ... my life will never be the same," she said.

Beyond the individual loss, it turns out little information exists about how widespread suicides are among those who have served in the military. There have been some studies, but no one has ever counted the numbers nationwide.

"Nobody wants to tally it up in the form of a government total," Bowman said.

Why do the families think that is?

"Because they don't want the true numbers of casualties to really be known," Lucey said.

Sen. Patty Murray, D-Wash., is a member of the Veterans Affairs Committee.

"If you're just looking at the overall number of veterans themselves who've committed suicide, we have not been able to get the numbers," Murray said.

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Watch the complete investigation.
Watch more of Keteyian’s conversations with the families.
FYG: Suicide Warning Signs and Getting Help.

CBS News’ investigative unit wanted the numbers, so it submitted a Freedom of Information Act request to the Department of Defense asking for the numbers of suicides among all service members for the past 12 years.

Four months later, they sent CBS News a document, showing that between 1995 and 2007, there were almost 2,200 suicides. That’s 188 last year alone. But these numbers included only “active duty” soldiers.

CBS News went to the Department of Veterans Affairs, where Dr. Ira Katz is head of mental health.

"There is no epidemic in suicide in the VA, but suicide is a major problem," he said.

Why hasn't the VA done a national study seeking national data on how many veterans have committed suicide in this country?
"That research is ongoing," he said.

So CBS News did an investigation - asking all 50 states for their suicide data, based on death records, for veterans and non-veterans, dating back to 1995. Forty-five states sent what turned out to be a mountain of information.

And what it revealed was stunning.

In 2005, for example, in just those 45 states, there were at least 6,256 suicides among those who served in the armed forces. That’s 120 each and every week, in just one year.

Dr. Steve Rathbun is the acting head of the Epidemiology and Biostatistics Department at the University of Georgia. CBS News asked him to run a detailed analysis of the raw numbers that we obtained from state authorities for 2004 and 2005.

It found that veterans were more than twice as likely to commit suicide in 2005 than non-vets. (Veterans committed suicide at the rate of between 18.7 to 20.8 per 100,000, compared to other Americans, who did so at the rate of 8.9 per 100,000.)

One age group stood out. Veterans aged 20 through 24, those who have served during the war on terror. They had the highest suicide rate among all veterans, estimated between two and four times higher than civilians the same age. (The suicide rate for non-veterans is 8.3 per 100,000, while the rate for veterans was found to be between 22.9 and 31.9 per 100,000.)

"Wow! Those are devastating," said Paul Sullivan, a former VA analyst who is now an advocate for veterans rights from the group Veterans For Common Sense.

"Those numbers clearly show an epidemic of mental health problems," he said.

“We are determined to decrease veteran suicides," Dr. Katz said.

“One hundred and twenty a week. Is that a problem?” Keteyian asked.

“You bet it’s a problem,” he said.

Is it an epidemic?

“Suicide in America is an epidemic, and that includes veterans,” Katz said.
Sen. Murray said the numbers CBS News uncovered are significant: “These statistics tell me we've really failed people that served our country.”

Do these numbers serve as a wake-up call for this country?

“If these numbers don't wake up this country, nothing will,” she said. “We each have a responsibility to the men and women who serve us aren't lost when they come home.”


“The report that the rate of suicide among veterans is double that of the general population is deeply troubling and simply unacceptable. I am especially concerned that so many young veterans appear to be taking their own lives. For too many veterans, returning home from battle does not bring an end to conflict. There is no question that action is needed.”

Part II

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NEW YORK, Nov. 14, 2007

VA Struggles With Vets' Mental Health

CBS News Investigates: Mental Health Numbers Reveal An Agency Under Siege

By Armen Keteyian
"Only On The Web": Paul Sullivan of Veterans for Common Sense tells Armen Keteyian that the No. 1 problem facing vets of Afghanistan and Iraq will be mental health.

Soldiers returning from war are at risk of suicide linked to post-traumatic stress disorder. Some victims’ families talk about their loss.

A five-month investigation found vets were more than twice as likely to take their own lives than Americans who never served. Armen Keteyian reports.
There were calls in the Senate today for the Department of Veterans Affairs to take immediate action to deal with the hidden epidemic of suicides among veterans.

That's after our CBS News investigation revealed that, in 2005 alone, 120 of those who have served in the military took their own lives every week - more than double the suicide rate for those who haven't served.

Now the question is whether the VA is willing or able to deal with it, CBS News chief investigative correspondent Armen Keteyian reports.

The failure of the VA to track the alarming number of suicides nationwide among those who have served in the military appears to be part of a broader pattern - and a bigger problem.

Veterans' rights advocate Paul Sullivan was a data analyst for the VA from 2000 to 2006.

"I don't think they want to know. We call it the "don't look, don't find" policy," he said. "The VA doesn't collect data, then they don't have to do anything about it."

The mental health numbers the VA does report reveal an agency under siege: 100,000 vets now seeking help for mental health issues. That’s 52,000 for post-traumatic stress disorder alone.

And now, in addition to these reports criticizing the VA’s treatment and spending practices come two more blows: of nearly 90,000 Army vets who served in Iraq in 2005 and 2006, a study released yesterday found 28.3 percent experienced mental health problems, while the report - due out tomorrow - says while veterans are 11 percent of the general population, they now make up an estimated 25 percent of the homeless.
"When you raise your right hand and put on that uniform, you assume you're going to be taken care of," said Paul Rieckhoff, founder of the Iraq and Afghanistan Veterans of America.

Rieckhoff is an Iraq War veteran who says despite all of the good doctors and good intentions, "the VA system is not at all prepared. This country has not ramped up resources to meet this flood of people coming home."

Watch the first piece of the investigation.
FYI: Suicide Warning Signs and Getting Help.
The Data and Methodology behind this story.

The VA recently responded to such criticism by opening a suicide prevention hotline, hiring thousands of new workers, including suicide-prevention coordinators at all it's medical centers. But for those who have lost loved ones to suicide …

"We are deeply sorry to hear about any death," Katz said. "This is one of the most important things ever for us."

“I can tell you honestly, Dr. Katz, a lot of the parents I have talked to harbor enormous anger at the VA,” Keteyian said.

“One of the factors that led us to develop prevention programs that go beyond those available in any other health systems, is precisely those tragedies,” Katz said.

“We remake the Army after every war. We bring in new equipment. We bring in new weapons. We need to do the same thing at the VA,” Rieckhoff said. “It doesn't matter where you stand on the war - we've got to take care of the warriors.”
Methodology:
NEW YORK, Dec. 4, 2007

Veteran Suicides: How We Got The Numbers
How The CBS News Investigative Unit Got The Statistics And The Story

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By Pia Malbran

(CBS)

Armen Keteyian and his investigative team keep you informed daily on their blog.

E-MAIL US CBS News Investigates

E-mail Armen Keteyian and the investigation team with your story ideas.
(CBS) Since CBS News first aired our veteran suicide report on November 13, we have received several questions from viewers wanting more information. In order to provide as much information as possible and to fully answer all questions, this is a summary of the methodology and results of the data we presented.

When CBS News began looking into veteran suicide, we found that no federal organization or agency tracks the number of veteran suicides nationally. To our knowledge, no one is keeping count. We wanted to know how many veterans are committing suicide nationwide and how the rate of suicide for veterans compares to non-veterans.

Looking for Data
CBS News first approached the Department of Defense (DoD), the Department of Veterans Affairs (VA), the National Center for Health Statistics (NCHS) and the Centers for Disease Control and Prevention (CDC) in June and July asking for suicide data for those who have served in the military.

We were told the DoD only tracks suicides committed by military personnel who are on active duty. The VA said they had no suicide data on file at the time. The NCHS (which is the federal organization responsible for maintaining most of the nation's health statistics and is a center within the CDC) does not monitor the military status of those who have committed suicide. Finally, the CDC’s Injury Center (also known as the National Center for Injury Prevention and Control) started a program in 2003 called the National Violent Death Reporting System which has collected some veteran suicide data from state death records but does not currently have nationwide counts. The CDC told CBS News that the information they have about veteran suicides “cannot be generalized to draw conclusions about the entire country.”

Finding the Numbers
CBS News learned that state vital statistics departments keep count of suicides based on information obtained from death records which can be separated by military status.

Therefore, over the course of five months, we contacted all 50 states asking them to provide us with their suicide data. Most of the states were able to tally the counts from their databases while some states had to go through death records counting suicides by hand.

Some states charged us a fee for the time and labor involved in gathering the data. In total, CBS News paid about $3,000 in processing fees to the states.

Privacy Issues
Obtaining suicide data from the states involved more than just a basic public records request.
Initially, several states refused to provide the data to CBS News for privacy concerns. Here’s why: the suicide numbers in some categories are small enough that individuals could be identified, violating state privacy policies. For example, one state could have two non-white females between the ages of 30-34 committing suicide in 2004 who had served in the armed forces. Because of the small number in that category, those individuals could be identified and the cause of their death would then be made public.

Therefore, in order to get the data, CBS News had to give assurance to the states that we would keep the raw data confidential. Some states insisted upon written agreements to this effect. The data, however, can be obtained upon request from the files of each individual state.

Gathering Data - Stage 1
CBS News collected the data in two stages over the course of several months.

First, we asked all 50 states to provide us with veteran and non-veteran suicide counts from 1995 to 2005 broken down by year, age, race, gender and manner of suicide. (Note: The most recent year most states have suicide data available is for the year 2005.)

Forty-five states responded to this initial request which resulted in a massive amount of varied raw information.

Five states did not provide us with raw data and total counts for suicides because they said it was not available. Those states were Georgia, Kentucky, Nebraska (only had 2004 data), Nevada and North Carolina.

In looking at the 2005 suicide counts, among 45 states that shared data, there were a total of 6256 suicides by those who served in the military for both men and women of all ages and races.

Consulting Experts
While gathering the data, CBS News consulted with several leading epidemiologists and biostatisticians from across the country including experts at the NCHS, CDC, Harvard, the University of Illinois and Columbia University to name a few.

We learned that in order to present suicide data accurately and appropriately it needs to be analyzed by adjusting the rates of suicide for age and gender as described below.

What are Adjusted Rates?
A “rate of suicide” is a type of analysis that shows how many suicides occurred per 100,000 people in a given population.

There are two basic types of suicide rates: "crude" and "adjusted." Crude is a basic calculation that does not take into consideration the make-up of the population. Adjusted rates are a more sophisticated statistical calculation (beyond simple mathematics) that take into consideration variables unique to a particular population like age and gender. The veteran population, for
example, is mostly made up of older males, so the data had to be statistically adjusted state by state in order to accurately compare with the non-veteran populations.

**Important Note:** All of the rates of suicide that CBS News presented are adjusted. The overall rates are adjusted for age and gender in both the veteran and non-veteran populations. The male and female rates are age adjusted. And, the age breakdowns are adjusted for gender.

**Gathering Data - Stage 2**

CBS News decided to do a more in-depth analysis of the years 2004 and 2005 because those are the two most recent years most states had data available.

In order to do a rate of suicide analysis, we went back to the states and asked them to provide us with the ‘resident’ suicide counts for the years 2004 and 2005 in a uniform ‘cross classified’ format. (‘Cross classified’ means data is formatted in such a way that variables like age, gender can be matched by one another.)

**Important note:** A ‘resident’ suicide is one committed by a person who is a resident of the state as opposed to an ‘occurrence’ which is a suicide that occurs in the state by a non-resident.

Forty states provided us with ‘resident’ ‘cross classified’ data for the years 2004 and 2005, which was used to statistically calculate rates of suicide for the entire country. The states that did not provide us with cross classified data for the years 2004 and 2005 (because it was not available or they refused for privacy reasons) were: Colorado, Georgia, Kentucky, Louisiana, Mississippi, Nevada, North Carolina, North Dakota and Rhode Island. Nebraska could only provide 2004 data; and, the state of California only had 2005 data available.

**Finding an Expert**

In order to calculate rates of suicide, we needed to find a reputable independent biostatistician. We consulted with several experts from across the country and approached the University of Georgia’s Epidemiology and Biostatistics Department.

The acting head of the department, Prof. Steve Rathbun, agreed to do the analysis for CBS News. He did this as a public service entirely free of charge. We choose Prof. Rathbun because of his expertise in statistics and because he had no ties with any federal agency that could pose a conflict of interest in looking at military suicide data. For example, he had no paid relationship with the DoD or the VA.

CBS News did not pay Prof. Rathbun, the University of Georgia or any of its employees for the analysis.

To avoid bias, a protocol for statistical data analysis was specified to Prof. Rathbun prior to obtaining the data. This protocol included specific questions posed by CBS News like "what is the rate of suicide for veterans versus non-veterans," specification of the statistical model that was to be fit to the data, and the methods for computing age and gender adjusted suicide rates.
All subsequent analyses were conducted according to this pre-specified protocol.

**Population Sources**
The population data that was used to calculate rates of suicide came from the following sources:

Veteran population numbers were obtained by CBS News from the Department of Veterans Affairs. The non-veteran population numbers came from subtracting the veteran population from the general population numbers the U.S. Census Bureau provided to CBS News.

**Important Note:** Suicide death rates that are publically available (by going to the CDC’s Wisquar’s website) are for the general U.S. population. The general population includes both veterans and non-veterans together. The rates CBS News presented will look nothing like those for the general population because we compared “veterans” to “non-veterans.” Comparing veteran suicides to the general population is misleading and an inaccurate analysis because, the general population includes veterans. Furthermore, the CDC general population suicide rates are age-adjusted only. The CBS analysis is adjusted for both age and gender.

**Assuring Accuracy**
CBS News took extreme care in collecting the data and took all measures possible to make sure the results would be accurate.

We asked each state to provide us with veteran and non-veteran suicide data. The military status of an individual who dies is typically filled out on death certificates by coroners or funeral directors. While most states assured us that the veteran counts they provided us did not include suicides by active-duty service members, we were concerned that some states many have inadvertently included such suicides in the data they provided us. So, CBS News asked the Department of Defense to provide us with the total number of active duty suicides that took place in the United States in 2004 and 2005 (including those on reserve and in the National Guard) broken down by age and gender. In an effort to prevent any over count, we then analyzed the data both with and without subtracting the DoD active-duty suicides from the state veteran counts. The results are reflected as a range in the data we reported.

**Results 2004**

**Overall Rates**
Veterans: 17.5 to 21.8 per 100,000
Non-Veterans: 9.4 per 100,000

**Male Rates**
Veterans: 30.6 to 38.3 per 100,000
Non-Veterans: 18.3 per 100,000

**Female Rates**
Veterans: 10.0 to 12.5 per 100,000
Results 2005

Overall Rates
Veterans: 18.7 to 20.8 per 100,000
Non-Veterans: 8.9 per 100,000

Male Rates
Veterans: 31.5 to 35.3 per 100,000
Non-Veterans: 17.6 per 100,000

Female Rates
Veterans: 11.1 to 12.3 per 100,000
Non-Veterans: 4.5 per 100,000