## Suicides rise as U.S. troops suffer from mental health issues



U.S. troops from several units at Bagram Air Field, Afghanistan, pay their respects during a fallen soldier ceremony held in honor of six Airmen, on Dec. 23, 2015. (Photo by the US military)

Washington, October 12 (RHC)-- After finishing a tour in Afghanistan in 2013, Dionne Williamson felt emotionally numb. More warning signs appeared during several years of subsequent overseas postings. "It's like I lost me somewhere," said Williamson, a Navy lieutenant commander who experienced disorientation, depression, memory loss and chronic exhaustion. "I went to my captain and said: 'Sir, I need help. Something's wrong.'"

As the Pentagon seeks to confront spiraling suicide rates in the military ranks, Williamson's experiences shine a light on the realities for service members seeking mental health help. For most, simply acknowledging their difficulties can be intimidating. And what comes next can be frustrating and dispiriting.

Williamson, 46, eventually found stability through a monthlong hospitalization and a therapeutic program that incorporates horseback riding. But she had to fight for years to get the help she needed. "It's a wonder how I made it through," she said.

In March, Defense Secretary Lloyd Austin announced the creation of an independent committee to review the military's mental health and suicide prevention programs. According to Defense Department data, suicides among active-duty service members increased by more than 40% between 2015 and 2020. The numbers jumped by 15% in 2020 alone. In longtime suicide hotspot postings such as Alaska – service members and their families contend with extreme isolation and a harsh climate – the rate has doubled.

A 2021 study by the Cost of War Project concluded that since 9/11, four times as many service members and veterans have died by suicide as have perished in combat. The study detailed stress factors particular to military life: "high exposure to trauma — mental, physical, moral, and sexual — stress and burnout, the influence of the military's hegemonic masculine culture, continued access to guns, and the difficulty of reintegrating into civilian life."

The Pentagon did not respond to repeated requests for comment. But Austin has publicly acknowledged that the Pentagon's current mental health offerings — including a Defense Suicide Prevention Office established in 2011 — have proven insufficient.

"It is imperative that we take care of all our teammates and continue to reinforce that mental health and suicide prevention remain a key priority," Austin wrote in March. "Clearly we have more work to do."

Last year the Army issued fresh guidelines to its commanders on how to handle mental health issues in the ranks, complete with briefing slides and a script. But daunting long-term challenges remain. Many soldiers fear the stigma of admitting to mental health issues within the internal military culture of self-sufficiency. And those who seek help often find that stigma is not only real, but compounded by bureaucratic obstacles.

Much like the issue of food insecurity in military families, a network of military-adjacent charitable organizations has tried to fill the gaps with a variety of programs and outreach efforts. Some are purely recreational, such as an annual fishing tournament in Alaska designed to provide fresh air and socialization for service members. Others are more focused on self-care, like an Armed Services YMCA program that offers free childcare so that military parents can attend therapy sessions.

The situation in Alaska is particularly dire. In January, after a string of suicides, Command Sgt. Maj. Phil Blaisdell addressed his soldiers in an emotional Instagram post. "When did suicide become the answer," he asked. "Please send me a DM if you need something. Please ..."

U.S. Sen. Lisa Murkowski, R-Alaska, said that while posting to Alaska can be a dream for some service members, it's a solitary nightmare for others that needs to be addressed. "You've got to be paying attention to this when you see the statistics jump as they are," Murkowski said. "Right now, you've got everybody. You've got the Joint Chiefs looking at Alaska and saying: 'Holy smokes, what's going on up there?'"

The stresses of an Alaska posting are compounded by a shortage of on-the-ground therapists. During a visit to Joint Base Elmendorf-Richardson in Alaska earlier this year, Army Secretary Christine Wormuth heard from base healthcare workers who say they are understaffed, burned out and can't see patients on a timely basis. If a soldier seeks help, they often have to wait weeks for an appointment.

"We have people who need our services and we can't get to them," one longtime counselor told Wormuth during a meeting. "We need staff and until we get them, we will continue to have soldiers die." The annual Combat Fishing Tournament in Seward, Alaska, was formed to "get the kids out of the barracks, get them off the base for the day and get them out of their heads," said co-founder Keith Manternach.

The tournament, which was begun in 2007 and now involves more than 300 service members, includes a day of deep-water fishing followed by a celebratory banquet with prizes for the largest catch, smallest catch and the person who gets the sickest.

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