



## Helping our vets here at home

By Thomas Bornemann

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On Memorial Day, families across Georgia recognize the bravery and sacrifices of men and women in the armed forces. Yet, as we remember the fallen, a disturbing trend has become apparent — more and more of our military heroes are losing their lives not in combat, but from the often hidden, emotional wounds of war. During the past decade, returning veterans' suicide rates have risen to unprecedented heights.

The wars in Iraq and Afghanistan have posed a unique set of psychological challenges to troops due to multiple tours of duty and a significantly greater prevalence of brain injury, among other factors.

As a result, members of the military deployed in these wars have the highest rates of posttraumatic stress disorder, or PTSD, on record — affecting one in seven of the nearly 2 million deployed. An additional 14 percent of veterans from Iraq and Afghanistan suffer from major depression, a known health risk from combat.

In fact, in 2009, mental illnesses were responsible for more hospitalizations among service members than any other illness, costing the Pentagon 488 years in lost duty.

Without treatment, mental illnesses such as major depression and PTSD can increase the risk of suicide.

According to national reports, 18 veterans complete suicide every day, and they comprise 20 percent of all suicides in the U.S. We know there are many more soldiers in crisis that could use our help. The Veterans Affairs' suicide hot line receives about 10,000 calls per month from current or former service members, and there are untold numbers of veterans suffering too much to reach out.

A disproportionate number of veterans lost to suicide — more than half — are members of the National Guard and reserves, though they represent only one-third of all U.S. military forces deployed to Iraq or Afghanistan. More likely to experience the added stress of multiple tours, guard and reserve members face a unique set of difficulties returning to the civilian lives they left behind.

This year, we welcomed home the Georgia Army National Guard's 48th Brigade Combat Team from their yearlong mission in Afghanistan. As their proud supporters, we must commit ourselves to ensuring that these individuals get the resources they deserve.

Local groups such as Veteran's Heart Georgia, which helps veterans heal from PTSD, successfully provide education and are improving community supports that foster resilience and recovery from mental illnesses. Such groups highlight the potential our state has to become a model provider for the resources and support all returned veterans need.

The Georgia Department of Veterans Services is a great resource. We encourage the department to include information on mental health services, mental illness or traumatic brain injury on its Web site.

Families and loved ones of troops can contribute by learning about and discussing the mental health risks facing soldiers to reduce stigma and help ensure veterans seek professional treatment if they need it.

This issue is of such great importance to the Carter Center that this year's annual Rosalynn Carter Symposium on Mental Health Policy is devoted to the mental health needs of reserve and guard service members. It's also personally meaningful to me as I started my career counseling veterans at Fort McPherson while in the Army during the Vietnam War.

Together, we can ensure that next Memorial Day, in addition to honoring their ultimate sacrifice, we also can celebrate the heroes who, with our support, have overcome the extraordinary challenges they face at home.

Dr. Thomas Bornemann directs the Carter Center's Mental Health Program.

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