



IRAQ *and* AFGHANISTAN VETERANS *of* AMERICA

Invisible Wounds

Psychological and Neurological Injuries Confront a New Generation of Veterans *January 2009*

Among Iraq and Afghanistan veterans, rates of psychological and neurological injuries are high and rising. According to a landmark 2008 RAND study, about 1 in 5 new veterans are experiencing symptoms of Post Traumatic Stress Disorder (PTSD) or major depression.¹ 19 percent of Iraq and Afghanistan veterans have experienced a probable Traumatic Brain Injury, or TBI, during their deployment.² And tens of thousands of new veterans are coping with both psychological injuries and TBI, the effects of which can compound each other.³

But less than half of those suffering from psychological and neurological injuries are receiving sufficient treatment.⁴ Multiple tours and inadequate time at home between deployments are increasing rates of combat stress.⁵

- **Untreated mental health injuries can and do lead to family issues, substance abuse, homelessness and suicide.**
 - Troops in Iraq are expressing growing concern about infidelity, and many more are considering divorce.⁶ For female servicemembers in particular, divorce rates are very high; marriages of female troops are failing at almost three times the rate of male servicemembers.⁷
 - At least 7,400 Iraq and Afghanistan veterans have been treated at a VA hospital for drug addiction, 27,000 new veterans have been diagnosed with “nondependent use of drugs,” and 16,200 have been diagnosed with Alcohol Dependence Syndrome.⁸
 - Almost 2,000 Iraq and Afghanistan veterans have already been seen in the Department of Veterans Affairs’ (VA) homeless outreach program.⁹
 - During the Iraq War, the Army suicide rate has increased every year, and the rate for 2008 is likely to hit a 27-year high.¹⁰ As of December 2008, there have been a total of 196 military suicides in Iraq and Afghanistan.¹¹

- **The Department of Defense (DOD) and the VA have taken some steps to expand research into psychological and neurological injuries and improve access to treatment. But there are still significant barriers to receiving mental health care in the DOD and VA health care systems.**

- Access to mental health care for troops is in dangerously short supply. Only about 1 in 3 soldiers and Marines who screened positive for PTSD once they got home reported receiving mental health care in-theatre.¹²
- Mental health support for troops in Iraq is actually declining; the ratio of behavioral health workers deployed to troops deployed dropped from 1 in 387 in 2004 to 1 in 734 in 2007.¹³ In Afghanistan, access to treatment is also limited; it takes an average of 40 hours for a psychologist to visit a soldier who needs mental health care.¹⁴
- According to the GAO, the DOD cannot ensure that servicemembers are mentally fit to deploy, nor accurately assess troops' mental health conditions when they return.¹⁵ There are also significant gaps in troops' neurological evaluations. According to an Army assessment, "11.2 percent of Soldiers met the screening criteria for mild traumatic brain injuries. Less than half of these (45.9%) reported being evaluated for a concussion."¹⁶
- As a result, there are serious concerns about the psychological wellness of many deploying troops. In surveys of troops redeploying to Iraq, 20 to 40 percent still suffered from symptoms of past concussions,¹⁷ and among troops who experience high levels of combat, about 12 percent in Iraq and 17 percent in Afghanistan are taking prescription antidepressants or sleeping medications.¹⁸
- The VA has already given preliminary mental health diagnoses to over 178,000 Iraq and Afghanistan veterans, or almost 45 percent of new veterans who visited the VA for any reason.¹⁹
- **The stigma associated with psychological injuries is the most serious hurdle to getting Iraq and Afghanistan veterans the mental health care they need.**²⁰
 - Approximately half of soldiers and Marines in Iraq who test positive for a psychological injury are concerned that they will be seen as weak by their fellow servicemembers.²¹
 - Almost one in three worry about the effect of a mental health diagnosis on their career.²²
- **Improving mandatory mental health and TBI screening, increasing access to trained mental health professionals, and ensuring military families have access to mental health care would go a long way towards stemming the flood of veterans with untreated psychological and neurological injuries, lowering the economic cost of the new veterans' mental health crisis,²³ and saving countless lives.**

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¹ Terri Tanielian and Lisa H. Jaycox, Eds., "Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery," RAND, 2008, p. 96: <http://www.rand.org/pubs/monographs/MG720/>.

² Ibid.

³ Ibid., at p. 103.

⁴ Ibid., at p. xxi.

⁵ Mental Health Advisory Team (MHAT) V, Report: Operation Iraqi Freedom 06-08, Operation Enduring Freedom 8, February 14, 2008, p. 4: http://www.armymedicine.army.mil/reports/mhat/mhat_v/Redacted1-MHATV-4-FEB-2008-Overview.pdf.

⁶ Mental Health Advisory Team (MHAT) IV, Final Report: Operation Iraqi Freedom 05-07, November 17, 2006, p. 30: http://www.armymedicine.army.mil/reports/mhat/mhat_iv/MHAT_IV_Report_17NOV06.pdf.

⁷ Pauline Jelinek, "Divorce rate increases In Marine Corps, Army," Associated Press, December 2, 2008: http://news.yahoo.com/s/ap/20081203/ap_on_go_ca_st_pe/military_divorces.

⁸ "Nondependent abuse of drugs" refers to excessive or improper drug use without a full diagnosis of drug dependence. Alcohol dependence syndrome is technically defined as "a maladaptive pattern of alcohol use, leading to clinically significant impairment or distress." (See: http://www.medicalcriteria.com/criteria/dsm_alcoholdep.htm) Data on usage from the VHA Office of Public Health and Environmental Hazards, "Analysis of VA Health Care Utilization Among US Global War on Terrorism (GWOT) Veterans Operation Enduring Freedom Operation Iraqi Freedom," January 2009.

⁹ Mary Rooney, Program Specialist, Homeless Veterans Programs, and Deborah Lee, VISN 6 Network Homeless Coordinator, U.S. Department of Veterans Affairs, presentation at the National Summit on Women Veterans Annual Conference, June 20-22, 2008: <http://www1.va.gov/womenvet/page.cfm?pg=70>.

¹⁰ Pauline Jelinek, "Army: soldier suicide rate may set record again," Associated Press, Sept. 4, 2008: http://www.cleveland.com/nation/index.ssf/2008/09/army_soldier_suicide_rate_may.html.

¹¹ Defense Manpower Data Center Statistical Information Division, "Global War on Terrorism—Operation Iraqi Freedom By Casualty Category Within Service, March 19, 2003 through December 6, 2008":

<http://siadapp.dmdc.osd.mil/personnel/CASUALTY/OIF-Total.pdf>. Defense Manpower Data Center Statistical Information Division, "Global War on Terrorism—Operation Enduring Freedom By Casualty Category Within Service, October 7, 2001 through December 6, 2008": <http://siadapp.dmdc.osd.mil/personnel/CASUALTY/WOTSUM.pdf>.

¹² Tanielian and Jaycox, p. 251

¹³ Lisa Chedekel, "Most Stress Cases Missed: Army Admits Disorder Is Under-Reported," *Hartford Courant*, August 6, 2007. MHAT V, p. 65.

¹⁴ Greg Zoroya, "Army counselors in short supply in war zones," *USA Today*, April 2, 2008.

¹⁵ GAO-07-831, "Comprehensive Oversight Framework Needed to Help Ensure Effective Implementation of a Deployment Health Quality Assurance Program," June 2007, p. 1: <http://www.gao.gov/highlights/d07831high.pdf>.

¹⁶ MHAT V, p. 4.

¹⁷ Emily Singer, "Brain Trauma in Iraq," *Technology Review*, May/June 2008.

¹⁸ Mark Thompson, "America's Medicated Army," *Time*, June 5, 2008:

<http://www.time.com/time/nation/article/0,8599,1811858,00.html>.

¹⁹ VHA Office of Public Health and Environmental Hazards, "Analysis of VA Health Care Utilization Among US Global War on Terrorism (GWOT) Veterans," January 2009.

²⁰ Mental Health Advisory Team (MHAT) IV, Final Report: Operation Iraqi Freedom 05-07, November 17, 2006:

http://www.armymedicine.army.mil/reports/mhat/mhat_iv/MHAT_IV_Report_17NOV06.pdf.

²¹ "Mental Health Advisory Team IV Final Report," November 17, 2006.

²² "Mental Health Advisory Team IV Final Report," November 17, 2006.

²³ The RAND Corporation estimates the costs of the psychological and neurological injuries suffered by Iraq and Afghanistan veterans at between \$4 and \$6.2 billion, *just in the first two years after combat*. Providing proper care for all of these veterans would lower that cost by about 27%. Tanielian and Jaycox, p. 171.