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Honoring Veterans Means Funding Suicide Prevention

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Honoring Veterans Means Funding Suicide Prevention

Abstract

Many Americans may not know that it was Dwight D. Eisenhower who in 1954 issued the official proclamation celebrating the service of all veterans by designating Nov. 11, formerly known as Armistice Day, in honor of our vets. Eisenhower, of course, was supreme commander of Allied Forces in Europe during World War II and commander in chief as the 34th president of the United States.

In Ike’s words, “on that day let us solemnly remember the sacrifices of all those who fought so valiantly, on the seas, in the air, and on foreign shores, to preserve our heritage of freedom, and let us reconsecrate ourselves to the task of promoting an enduring peace so that their efforts shall not have been in vain.”

This Veterans Day, millions of Americans thank a veteran for serving our nation, but during the hour-long service at the local elementary school or church cemetery, a veteran or active-duty member of the armed forces will take his own life: The harsh reality is that the average suicide rate today among all those who are serving or have served is more than 20 per day — 17 are veterans. [excerpt]

Keywords

veterans, suicide prevention, Veteran’s Day, mental health

Disciplines

Economics | Mental and Social Health | Military and Veterans Studies

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For many Americans, there is no more melancholy sound than that of a solo bugle playing “Taps,” the signature melody for military funerals. Doubly painful are those notes heard at the funeral of a military veteran who died at her own hands.

It may be shocking to learn, but suicide rates for women veterans are rising relative to those of non-veteran women, as well as in relation to those of male veterans. Of the many things that we don’t know about suicide among the veteran population, one thing we do know is that involvement with the Department of Veterans Affairs (VA) and with veteran’s hospitals lowers the risk of suicide.

That’s right: The VA helps reduce the risk of suicide among veterans.

It has always been easy to complain about government services, and few U.S. agencies have come under more withering criticism than the VA in recent years. As always, some of that criticism is warranted. Navigating any bureaucracy is challenging, but navigating one while struggling with physical or mental health issues related to military service allows us patriotic Americans to point our fingers indignantly and say, “Veterans deserve better.”

Heaven knows, veterans absolutely do deserve better; however, we, the people, are going to have to make it happen, and we must be willing to bear these costs for the burden these veterans have borne on our behalf.
In 2009, roughly half the VA budget was spent on “mandatory” items like disability and survivors’ pensions think Social Security for vets. That number rose to over 60 percent in 2014, but it has settled around 56 percent today. Of the remaining funds, the so-called “discretionary” budget of the VA, 87 percent are spent on medical programs for veterans and their survivors.

It becomes harder and harder to make the case for greater funding for veterans’ programs, however, as fewer and fewer Americans know the human costs of war. Today, fewer than 10 percent of the population served in uniform, half the rate in 1980. Among adults over age 30, the majority of Americans have an immediate family member who served in the military, but among 18- to 29-year-olds, that number is just a third. Thus, the connection to the military and to the veteran population is weakening, even as we enter the 17th year of the current war(s).

The injuries our soldiers, sailors, airmen and Marines suffer are grievous. Many leave no physical scars. Men and women who answer the call to serve deserve our gratitude and our care when they return. The health and well-being of our veterans is not only a moral imperative, it serves the common good. As Ike himself made so clear in a speech at Public Square in Cleveland in 1956, “a sound nation is built of individuals sound in body and mind and spirit. Government dares not ignore the individual citizen.”

This is particularly true of our responsibility to some of our most vulnerable citizens who have served their country with courage and honor. There is abundant evidence that veterans who get care not only survive but thrive; therefore, “let us reconsecrate ourselves to the task” of serving and protecting those who have served and protected us all: Our job is to ensure that we provide the necessary care to all who have served.

Brendan Cushing-Daniels is an associate professor of economics and the Harold G. Evans chair of Eisenhower Leadership Studies at Gettysburg College’s Eisenhower Institute Campus Advisory Council. Christopher Fee is a professor of English at Gettysburg College’s Eisenhower Institute Campus Advisory Council.

Veterans, service members, or their families in need can reach the Veterans Crisis Line 1-800-273-8255 and press 1, or text 838255, or at visitveteranscrisisline.net.