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Army suicides reach 21; rate questioned

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WASHINGTON, Feb. 13 (UPI) -- A week before it expects to release a report on mental health issues affecting troops in Operation Iraqi Freedom, the Army has determined that at least 21 soldiers have committed suicide in Iraq or Kuwait.

Army spokeswoman Martha Rudd said the suicides do not include an undisclosed number of soldiers who killed themselves after leaving Iraq or Kuwait. And several "non-hostile" deaths there are still being investigated.

The new figure suggests the suicide rate has risen substantially since mid-January, when 18 Army suicides had been confirmed. At that point, a Pentagon official put the Army suicide rate at 13.5 per 100,000 -- calling that "a very small increase" over a past average of 10 to 11 suicides per 100,000 soldiers.

Asked how the three additional confirmed suicides affect the rate, Rudd said the Army wouldn't comment before the mental health report is released. But assuming a comparable pool of soldiers, United Press International calculated the new rate as 15.8 suicides per 100,000 soldiers serving in Operation Iraqi Freedom.

Some veterans groups said they are worried.

"I fear that the military is in denial and that they are rationalizing this. As far as we're concerned, we can't even trust the numbers," said Wayne Smith, an adviser to the Vietnam Veterans of America Foundation.

"Why is the Army equivocating and why is it delaying? It echoes some of the problems we saw in Vietnam and hopefully learned lessons from."

Rudd said there was no deliberate delay in presenting the report, citing scheduling conflicts among the 12 members of the team that wrote it, and the need to prepare documents for release.

She also said there was no effort to manipulate suicide statistics.

But Smith pointed to the Army's statement that it isn't including suicides that occurred outside of Iraq or Kuwait as a reason for concern. UPI reported last month that at least two soldiers who served in Iraq had subsequently killed themselves at Walter Reed Army Medical Center in Washington.

Smith called the suicides "the tip of an iceberg," noting reports of hundreds of medical evacuations from Iraq for mental problems.

The Army first voice concern about soldier suicides in Operation Iraqi Freedom last July, when it saw a spike in suicides that month. The Army surgeon general's office dispatched a team to Iraq in September and completed the report that is expected to be discussed next week.

On Jan. 14, William Winkenwerder Jr., undersecretary of defense for health affairs, told reporters that the number of confirmed Army suicides for Operation Iraqi Freedom was 18 -- a number he called "a very slight increase" above expected suicides, "on the high end of what they've seen in the past." Two Marines and one Navy member also committed suicide, a number he said was consistent with past rates for those services.

He said the numbers could rise as investigations are completed but did not say how many deaths remain unresolved. He added, "I don't see a trend there in looking at these cases that tells us there is something more there."

Announcement of some deaths has lagged by several months. Last Friday, the Pentagon announced the

names of seven additional service members who died from non-hostile causes "while in support of Operation Enduring Freedom or Operation Iraqi Freedom."

UPI reporters determined that at least two of those deaths, which occurred last March, were suicides. Last week's announcement lists both of those casualties as part of Operation Enduring Freedom, though one was a Marine deployed near the Iraq border who shot himself March 13, seven days before the war began. A Marine spokeswoman said that classification reflects the fact that Operation Iraqi Freedom had not begun.

In other cases, months have passed between the announcement of a non-hostile death and determination of a cause. As of early December, one soldier who died from a "non-hostile" cause in June was listed as "determination pending," though his family said the Army told them he had killed himself.

The Pentagon did not say how it is determining suicides, but in general, there must be evidence the death was intentional, based on both the physical circumstances and a "psychological autopsy" that includes interviews with fellow soldiers.

How thoroughly the military is reviewing deployment issues that might trigger mental problems or suicide is unclear. Rudd told UPI that the team did not look at whether any soldiers who committed suicide had taken the anti-malaria drug Lariam, which has been associated with depression, suicidal thinking and rare reports of suicide. She said the military believes that drug cannot cause suicide and therefore cannot be a factor.

The drug, which is being prescribed to some soldiers in Iraq, was invented by the Army, which licensed it to a Swiss drug company.

One Pentagon official recently has suggested military suicide rates are not alarming. "Are soldiers killing themselves in increased numbers due to deployment? No," said Army Col. Thomas J. Burke, Pentagon program director for mental health policy, in a January speech reported by the Armed Services Press Service. Burke said media reports about a high rate of suicides were "false."

"This is where I so totally disagree with the military," said Smith of Vietnam Veterans. "It is absolutely a problem. These suicides are the tip of an iceberg and I am not willing to wait till the Army decides the numbers are alarming to intervene. Something is going wrong."

Separately, Stars and Stripes reported Feb. 9 that at least 16 Pacific Fleet suicides have been confirmed for 2003, double the number for 2002. Stars and Stripes said it obtained a memo by Pacific Fleet Commander Adm. Walter F. Doran that called the statistics "significant" and said they warranted "immediate attention and action."

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