

Veteran Statistics

- Nearly ten percent of the 1.7 million service members and veterans to deploy in support of the OIF/OEF, or 156,390 veterans (10%) call Florida home.ⁱ
- Florida has the 2nd largest per capita veteran population in the nation
- A recent RAND Corporation study titled “Invisible Wounds: Mental Health and Cognitive Care Needs of America’s Returning Veterans” found that an estimated 1 out of 5 of all service members and veterans returning from OIF/OEF, or 18.5%, suffer from PTSD or some form of major depression.ⁱⁱ
- Approximately 29,000 returning veterans in Florida may suffer from these conditions.
- The study also found that “53 percent of returning troops who met criteria for PTSD or major depression sought help from a provider for these conditions in the past year,” which calculates to 14,000 of Florida’s returning veterans from OIF/OEF, who may not have sought proper care.ⁱⁱⁱ
- As of December 2008, more than 4,000 troops have been killed and over 30,000 have returned from a combat zone with visible wounds and a range of permanent disabilities. \
- In addition, an estimated 25-40 percent have less visible wounds—psychological and neurological injuries associated with post traumatic stress disorder (PTSD) or traumatic brain injury (TBI), which have been dubbed “signature injuries” of the Iraq War.
- SAMHSA and the National Institute for Drug Abuse have repeatedly concluded that PTSD and depression are both risk factors for substance abuse, and in some cases, suicide. The VA recently testified before Congress that the suicide rate among OIF/OEF veterans under VA care from 2002 to 2005 was 17.0 per 100,000 compared to 24.0 per 100,000 for such veterans who were not enrolled with the VA.^{iv}
- Returning veterans with mental health and substance abuse problems may run into problems in other areas of their lives such as homelessness and unemployment, or worse, crime or suicide. One-third of the nation’s homeless individuals are veterans.^v Left untreated, individuals with substance abuse and/or mental health disorders, pose significant financial risks to communities that are already in the midst of budget reductions.
- A Veteran dying by suicide is the worst possible outcome of their mental health and substance abuse problems. Currently, veterans have a higher rate of suicide ranging from 17.5 to 22 per 100,000 as compared to the general population of 11 per 100,000 nationally.^{vi}
- A study in the 2007 Journal of Epidemiology and Community Health ^{vii} reported that male veterans are twice as likely to die by suicide as non-military men.
- There is nearly a 20% increase in confirmed active-duty suicides since 2006, according to an internal US Army report.^{viii}
- In 2006, the suicide rate in the US Army reached its highest level in 26 years.^{ix} While Florida’s suicide rate among veterans has not reached these levels, the team in Florida working this issue emphasized that it is the time to get ahead of this issue in our state.

- Studies have concluded that homeless veterans are at a higher risk than the general population for mental illness, substance abuse, and suicide.^x
- Of the 1.7 million troops that have served in Iraq and Afghanistan since the beginning of the conflicts:
 - 799,800 have been discharged and eligible for VA care; and
 - 299,600 have gone to the VA for care.
- Of those 299,600:
 - Suffering from PTSD: 59,800; and
 - All mental disorders: 120,000.^{xi}
- The second most common health concern, second only to musculoskeletal ailments (joint and back disorders) is mental disorders.^{xii}
- From 15%-20% of all soldiers fighting in Iraq and Afghanistan show signs of depression or post-traumatic stress disorder, based on study of almost 2,300 soldiers finished last fall. That rate jumps to about 30% for soldiers who have been on three or four combat deployments.^{xiii}
- More than one quarter of US soldiers on their third or fourth tours in Iraq suffer mental health problems partly because troops are not getting enough time at home between deployments, the US Army said.^{xiv}
- Recent data from the Defense Medical Surveillance System reflecting self-assessments since June 2005 of service members, who had served in Iraq, show that 50% of US Army National Guardsmen and some 45% of US Army and Marine reservists have reported mental health concerns.^{xv}
- Of those using VA health care, 30% suffer from depressive symptoms, 2-3x the rate of the general population.^{xvi}
- According to the National Survey on Drug Use and Health Report, one quarter of veterans age 25 and under suffered from substance abuse disorders in the preceding year, with those from low-income families being extremely vulnerable.^{xvii}
- Substance abuse disorders remain one of the three top diagnoses in the VA system (Dr. Richard T. Suchinsky, DVA, Chief for Addictive Disorders).^{xviii}
- VA has a total mental health workforce of almost 17,000 employees. Total mental health spending for Fiscal 2008 is roughly \$3.6 billion. The VA has hired 3,800 mental health workers since 2005, and is funded to hire an additional 500 mental health workers.^{xix}
- In 2007, there was one practitioner for every 734 soldiers compared with one per 658 soldiers in 2006.^{xx}
- Although the Department of Defense (DoD) and the Veterans Administration (VA) have dedicated unprecedented attention and resources to address PTSD and TBI in recent years, and evidence suggests that these policies and strategies have had a positive impact, work still needs to be done.
- In 2007, the Department of Defense Task Force on Mental Health concluded that, "Despite the progressive recognition of the burden of mental illnesses and substance abuse and the development of many new and promising programs for their prevention and treatment, current efforts are inadequate to ensure the psychological health of our fighting forces. Repeated deployments of mental health providers to support operations have revealed and exacerbated pre-existing staffing inadequacies for providing services to military members and their families. New strategies to effectively provide services to members of the Reserve Components are required. Insufficient attention has been paid to the vital task of prevention."

ⁱ Florida Application to the Policy Academy, p.1.

ⁱⁱ RAND, p.2.

ⁱⁱⁱ RAND Study, p. 3.

^{iv} FDVA Veteran's Statistics.

^v FDVA Veteran's Statistics.

^{vi} Jessica Zigmond, "Brain Drain," *Modern Health, Special Report*, February 18, 2008, p. 1.

^{vii} "Florida Department of Veteran's Administration Veteran's Statistics," Florida Department of Veteran's Affairs, Tallahassee, May 2008.

^{viii} Zigmond, *Brain Drain*, p. 1.

^{ix} FDVA Veteran's Statistics.

^x Florida Application to the Policy Academy, p.1.

^{xi} Zigmond, *Brain Drain*, p. 3.

^{xii} *Ibid.*, p. 1.

^{xiii} "A Fifth of Soldiers at PTSD Risk," *USA Today*, March 7, 2008, p. 1.

^{xiv} "Soldiers Show Mental Strain From Combat Tours," *Reuters*, March 6, 2008, p.1.

^{xv} Defense Medical Surveillance System, Post Deployment Health Self-Assessment Since June 2005 of Service Members Who Had Served in Iraq, as quoted in Leonardo, Doug, "Behavioral Health Veteran's Information," *Behavioral Health Services for Veterans and their Families*, February, 2008, p.1.

^{xvi} Leonard, Doug, Power Point Presentation, "Welcome to the Veteran Services Town Hall Meeting."

^{xvii} Benderley, Beryl Lief, "Veterans and Their Families, A SAMHSA Priority," *Substance Abuse and Mental Health Services Administration News*, January/February 2008, Volume 16, Number 1.

^{xviii} FDVA Veteran's Statistics.

^{xix} *Ibid.*

^{xx} *Ibid.*