

**Contact:** Miles Migliara  
National Communications Manager  
AMVETS (American Veterans)  
(301) 395-7486  
media@amvets.org

## **For Immediate Release**



### **VA Offers Unreliable Data and Unrealistic Solutions in first Congressional Testimony on Veteran Suicide**

WASHINGTON – The plan lawmakers outlined to address the veterans’ suicide crisis Monday was met with welcome and worry by leaders from one of the nation’s largest and oldest veterans’ service organizations.

AMVETS Executive Director Joe Chenelly said the decision to hold a series of hearings in the House Committee on Veterans Affairs could represent an important first step toward fixing a mental health care system that is broken and at the root of the crisis.

“Each and every single year, we lose more veterans to suicide than we have to fighting in Iraq and Afghanistan in the past 18 years combined. This is a full-scale national tragedy that Congress must take swift action to begin fixing,” Chenelly said.

AMVETS called for congressional hearings, a task force and roundtables in March 7 testimony in front a joint hearing of the House and Senate committees on veterans’ affairs.

After reviewing written testimony, the VA submitted prior to appearing at Monday night’s hearing, Chenelly said he fears the hearings will be reduced to a sounding board for VA officials to defend a dysfunctional system and demand more money from Congress.

“The VA’s testimony uses dubious data to claim progress is being made and solicit yet more money from Congress. This has been the same script we’ve heard over and over for much of the past decade” Chenelly said. “For these hearings to work, Congress must perform an honest accounting and demand transparency.”

The VA’s mental health budget more than doubled in the last decade, growing from \$3.9 billion in 2009 to \$8.9 billion during the current fiscal year. Despite the unprecedented spending

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increase, veterans' suicides continue to number more than 6,000 per year. In 2009, veterans who took their own lives numbered 6,175. Suicides reached a ten year high of 6,314 deaths in 2014, before decreasing to 6,079 in the most recent year on record, 2016.

In written testimony submitted for Monday's hearing, Veterans Health Administration Director Richard Stone cites an alleged decrease of 365 veteran suicides from 2015 to 2016, concluding:

"This means we are moving in the right direction," according to written testimony submitted by Stone for Monday's hearing.

But according to the VA's own data, Stone overstated the alleged drop by nearly half. In 2016, veterans' suicides numbered 202 fewer, according to the VA's National Suicide Report released Sept. 26, 2018.

Stone's testimony also highlights that only six of 20 veterans who take their own lives received VA healthcare in the two years prior to their death. It does not, however, mention that this minority of veterans who received VA care were far more likely to take their own lives, according to the VA's National Suicide Report. The VA's data shows the rate of suicide among veterans who recently received VA healthcare was 35.6 per 100,000 compared to the 27.6 rate of veterans who went without VA care.

"We really need to ask whether the VA and current treatment methods are causing more harm than good," Chenelly said.

Stone's written testimony goes on to propose unrealistic solutions, including:

"Universal strategies aim to reach all Veterans in the U.S. These include public awareness and education campaigns about the availability of mental health and suicide prevention resources for Veterans, promoting responsible coverage of suicide by the news media, **and creating barriers or limiting access to hotspots for suicide, such as bridges and train tracks.** "

Chenelly said the idea of policing bridges and train tracks for veterans only serves to further the stigma that deters veterans from obtaining treatment.

"I was dumbfounded when I read VA officials telling Congress their plan to prevent suicide is to stop veterans from going on bridges and rail crosses. Are they going to hang signs stating 'no veterans'?" Chenelly said. "While it's the first time I saw this specific suggestion from the VA, it's really just more of the same counter productive nonsense, not only because it wastes time and resources, but because it furthers the idea veterans are somehow broken and have to be kept away from places where they might commit suicide."

The VA and Congress, Chenelly said, need to consider alternatives and examine recent advancements in mental health treatments that are showing positive results.

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“We need to change the entire culture,” Chenelly said. “We need to stop saying ‘there’s something wrong with these veterans’ and start understanding something happened to them. Once we do that, we can begin to understand our responsibility and help veterans overcome trauma.”

AMVET’s has called for a full Committee Hearing to review the findings of the independent evaluation that was required by the Clay Hunt SAV Act.

“The report was sent to Congress the day after Christmas. We believe it highlights that what we are doing is fundamentally not working; there doesn’t seem to be much of a stomach for accepting reality on Capitol Hill, proven by the fact they are uninterested in exploring the best data we have on this issue. Unfortunately, this type of mentality is costing veterans lives.