

saying, 'Shut up, toughen up,'" he said. "About half the units actively send their guys to mental health."

But it's more than going to see the doc, Hoffman said. Often, leaders don't know what their soldiers or Marines face because they remain at big bases in air-conditioned offices, rather than at the tiny outposts where troops often live in austere conditions: portable toilets, 20 men per room, several patrols a day and meals brought in by truck rather than made on-site.

"The lower ranks are suffering the brunt of it," Hoffman said. "A lot of leaders don't go out."

And, as Iraq becomes more garrisonlike, with more support troops than infantry, Hoffman said the gap between conditions on the forward operating bases and outside the wire has grown.

Hoffman works seven days a week and said he doesn't have the time he needs to talk to all the guys who need it.

Defense officials always issue suicide numbers with this caveat: "It's much lower than the civilian population."

The latest report came with the same comparison: The Army suicide rate per 100,000 soldiers stands at 17, while the U.S. adjusted rate for age and gender to match military demographics stands at 19. The Army's suicide rate usually stands at 11 per 100,000.

The soldiers don't buy it.

"We're screened before we join," said Sgt. 1st Class Chad Smith, an aid-station medic with 1st Battalion, 26th Infantry. "That sorts out a lot of the mentally ill to begin with. So to say that we're at 17 out of 100,000 for a suicide rate and then to say, 'That's still below the civilian rate,' you have to put it into context."

To Smith, the reasons behind the suicides seem clear.

"It's a direct reflection of how we're dealing with stress," he said. "When you stop trying to defend everything and just look at it for what it is, it becomes obvious. We need to have that hope — that they're working on it, that they do understand what's going on. Otherwise, it looks like excuses and lies."

That stress presents itself in many ways, but each therapist cited how the breakup of a relationship can lead to a life-ending decision, rather than a week of heartbreak, if a service member gets a Dear John or Dear Jane letter in theater.

"That's the primary reason we see people," said Maj. John Gourley, chief of the 85th Combat Stress Control unit in Mosul, Iraq. "They're saying they're going to hurt themselves because of what's going on back home."

He also has sent a few service members home, but he said the best thing therapists can do is try to get them back to their units, because often all people

need is some time off and some sleep.

But more enlisted mental health technicians also may help, he said. "They may not believe I understand how they're feeling and that their hearts are broken," Gourley said. "But they may believe somebody their own age."

Cmdr. Beverly Dexter, Combat Stress and Readiness Clinic psy-

chologist at Asad, said she, too, focused on relationships after working with troops, but also after standing in line with them at the call center, waiting to use a phone.

"You'll hear them screaming and cussing on the phones," she said. "Tiny problems at home just explode when combined with stress here."

She created a program, "Call Home With Love," that includes posters above the phones at the call center with friendly messages to repeat to loved ones. She also hands out laminated tip sheets to help people remember faulty plumbing isn't a reason for divorce and that spouses at home are stressed, too.

And, if a service member tells

her he's getting a divorce, she calls the spouse back home and asks that person to wait until the end of the deployment.

"Then I can get real busy working with the person out here getting what he needs," she said. "We do things out here to improve their relationships."

That, she said, creates hope, which can end suicidal thoughts. □



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