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## Suicide toll reveals how system failed Canada's soldiers and veterans

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*This article is part of The Unremembered, a Globe and Mail investigation into soldiers and veterans who died by suicide after deployment during the Afghanistan mission*

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They were sons of bankers, miners and infanteers. They were strongmen and endurance runners. They were husbands and fathers who took their children camping and taught them how to play shinny on backyard rinks.

All 31 were dedicated Canadian soldiers and airmen who served on the perilous Afghanistan mission. They all came home. All ended their lives.

Most were haunted by the things they saw and did in Afghanistan, their families told The Globe and Mail. Many asked the military for help, but in several cases, their medical assessments and treatment were delayed, even as their post-traumatic stress, depression and sleeplessness worsened.

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**Read more: The Unremembered: Where to get mental-health help in Canada<sup>3</sup>**

**Read more: The Unremembered: Behind the story: How The Globe set out to commemorate Afghanistan war veterans lost to suicide<sup>4</sup>**

The families of the 31 fallen spoke to The Globe as part of a collaborative effort to commemorate military members and veterans lost to suicide after serving on the Afghanistan mission, Canada's longest military operation. Many are speaking publicly about their loss for the first time. And for many of the military members, this is the first public recognition of their sacrifice.

Together, their stories paint a disturbing picture of delayed care, ineffective medical treatment and insufficient mental-health support. The 31 accounts are the most comprehensive public record of Canada's Afghanistan war veterans lost to suicide – unwitting monuments to a system that is failing too many vulnerable soldiers and veterans.

The 31 fallen are part of a larger troubling statistic. A continuing Globe and Mail investigation has uncovered that at least 70 soldiers and veterans died by suicide after returning from the Afghanistan operation – nearly one-third higher than the 54 revealed by the newspaper one year ago.

Many of their deaths are linked to the Afghanistan mission but they are not counted in Canada's official toll of 158, which includes six soldiers who killed themselves in theatre. In many ways, they are forgotten casualties of the Afghanistan war, and too often they suffered in silence.

"You don't want to know what I did there or what it was like there," Captain Linden Mason told his sister, Jade, after he returned from Kandahar in December, 2010. Her brother had always been her protector, but now he seemed angry and

disconnected, and was plagued by nightmares. "You hear about the deaths," he told his sister, "but you don't hear how many people are getting hurt or what it's like, what we see." He ended his life 13 months after returning from Afghanistan.

Corporal Tony Reed didn't want to talk either, until one day in frustration, he told his mother: "I cannot go to sleep, Mom, because as soon as I close my eyes that's what I see, okay? People being blown up. Little kids with grenades. The blood. You can't imagine the blood that I've seen over there." Cpl. Reed, who was diagnosed with PTSD, died by suicide on Dec. 7, 2012.

The two soldiers are part of a mounting count that includes five members and veterans who took their lives this year and several former soldiers not previously identified by The Globe's investigation.

The Globe asked families a series of questions for profiles and data analysis. Among these 31 military members and veterans, there are many haunting similarities. In all but six cases, families saw indelible scars left by the Afghanistan battle. In the other instances, there was uncertainty about the health status or other factors that contributed to the mental crisis.

Among the key findings:

- Fourteen of the 31 were diagnosed with post-traumatic stress disorder, according to their families and documents obtained by The Globe, while a coroner's inquiry identified the mental illness in one other case. In another 10, families saw signs of PTSD, but the illness wasn't diagnosed. Corporal Scott Smith, a father of two, was experiencing flashbacks and hallucinations after Afghanistan, but the ambitious soldier told his mother he feared seeking help would harm his career. "He felt that he would lose face with the military, that he wouldn't be seen as being strong and what the military wanted as a leader," said his mother, Connie Smith.
- Twenty-two of the fallen received mental-health treatment after their deployment, suggesting the military's campaign to raise awareness about PTSD and other mental illnesses is working. Many families, however, are critical of the quality of care their loved ones received. One Edmonton infantry soldier, Corporal Shaun Collins, asked for mental-health services before returning home from his second Afghanistan tour, but there was no follow-up until he called a crisis line three months later. When help finally came, his family said, he was bounced around among therapists before he turned to a trauma specialist outside the military. The specialist said he was the most severe case of PTSD she had ever seen.
- Twelve of the 31 took their lives within two years of returning from their last Afghanistan tour, raising questions about the medical evaluations done after their deployments and the mental-health support provided. Over all, the median time between the last overseas tour and death was two years and five months. Private Thomas Welch's suicide occurred a mere three months after he returned from Kabul in 2004. The young infantry soldier was the first Canadian Forces member to die by suicide after serving in Afghanistan, The Globe's investigation uncovered. "He was broken. His soul was broken," his mother, Anita Cenerini, said. She doesn't believe he received any substantial mental-health support after his tour.
- Once home, many drank to dull their nightmares and help them sleep. Twenty-two struggled with excessive alcohol use.
- Seventeen served on multiple overseas missions, many deploying to the former Yugoslavia or Haiti before Afghanistan. Eight completed more than one Afghanistan tour. One soldier, Master Corporal Charles Matiru, went to the battlefield four times, first as an infantry soldier and then with a secretive intelligence unit. His mother, Barbara Matiru, said his mental health worsened with each mission, yet he faced medical-assessment delays that postponed his PTSD diagnosis. "He kept asking for help but he wasn't getting it. He was desperate," she said.
- Two-thirds of the 31 were in the infantry or armoured corps, which took on much of the combat operations in Afghanistan. More than half had less than 10 years of military service, and the median age at death was 37.
- Participation in the Task Force 1-10 deployment emerged most often among the 31 suicides, although it's not clear why. Nine took part in the 2010 Kandahar rotation, which ran from February to October of that year. The main battle group on that deployment was the 1st Battalion of the Royal Canadian Regiment, based at CFB Petawawa. For Corporal Justin Stark, the tour was his first. The Hamilton reservist kept a war journal. In his first entry, he wrote that he didn't know if he would make it to his leave, because "you just never know when one step could be your last." He was 22 years old when he took his life.
- Of the 22 soldiers and veterans who were in a relationship, 68 per cent experienced a breakdown in the partnership not long before their suicide. Seventeen were fathers, leaving 40 children behind.
- Most of the 31 were still in the Forces when they died. Five, though, had been discharged from the military, and another three were scheduled for release. Three of the five discharged soldiers died within a year of leaving the Forces, while veterans Sergeant Raynald Côté and Corporal Sean McClintock died by suicide several years after their release. Sgt. Côté, a former Quebec infanteer, often referred to his PTSD as a form of brain cancer. He built

a dream home after being forced into retirement from military service in 2009, but he faced mounting debt. "He wanted so badly to accomplish something," said his partner, Marie-Claude Deschênes. "Instead, we were exhausted."

Suicide is complicated and rarely caused by one factor. But PTSD and depression are treatable, which means it can be prevented.

Although several stresses contributed to the deaths of the 31 fallen, it is clear many were struggling with the after-effects of the Afghanistan war. The Forces only last year acknowledged that deployment may be emerging as a risk factor for suicide, noting there has been a "significant increase in suicides" among those in combat roles and under army command. However, a military spokesperson added that: "We have not been able to identify any specific deployment, including Afghanistan, to be the sole cause of a suicide."

Neither the Canadian Forces nor the federal government regularly monitor suicides of former military members, but Veterans Affairs last year publicly committed to annually tracking vet suicides for the first time. The inaugural report is expected in December, 2017.

Veterans Affairs and National Defence are working together on a suicide-prevention strategy, mandated by Prime Minister Justin Trudeau last year after The Globe's initial investigation of military suicides. A draft plan won't be ready until next fall. An expert panel is currently reviewing mental-health programs and suicide-prevention activities to determine whether improvements are needed.

"It is difficult for all Canadians to hear that our military men and women and our veterans are taking their own lives," said Veterans Affairs spokesman Zoltan Csepregi. "One suicide is one too many, and we have to do better."

After last fall's suicide-prevention directive from the Prime Minister, an external review of the Forces' health services has finally started in earnest. An expert panel has been asked to evaluate the military's mental-health programs and suicide-prevention activities and to determine whether they are sufficient.

The panel, whose membership wasn't released, met for the first time in late October. It's unclear when the panel will deliver its recommendations, but according to its contract with the Forces, the panel will only examine programs under the military's health-services branch.

The last review of the military's suicide-prevention programs was in 2009. That evaluation led to 59 recommendations. Veterans Affairs is participating in the review and in the development of a suicide-prevention strategy.

Retired Lieutenant-Colonel Stéphane Grenier, who created a mental-health education program for the military in 2007, contends the Forces have been too slow to acknowledge the suicide problem. He believes more resources should be invested in social support and expanding mental-health treatment beyond doctors and pills.

"We keep spinning our wheels with suicide and we're really failing to go the distance," said Mr. Grenier, who deployed on numerous missions, including to Rwanda and Afghanistan, during his 29-year military career. He is now a consultant on mental health.

"The suicide issue, as serious as it is, is the tip of the iceberg," he said. "How many other veterans never kill themselves, but literally fall through the cracks, end up homeless and ill to the point where they're never productive ever again?"

Antoon Leenaars, a psychologist and consultant on suicide prevention in Windsor, Ont., said it's important to make military suicides visible, so that care can improve for soldiers and their families. He encouraged members dealing with mental illness to seek help.

"There is hope. They don't need to suffer in silence," he said.

Author of *Suicide Among the Armed Forces*, Dr. Leenaars suspects the suicide count among soldiers who served in Afghanistan is higher than 70. He urged the military and Veterans Affairs to take a holistic approach to treating mental illness and include families when caring for traumatized soldiers.

"You have to include the family and the children because there is secondary trauma," he said. "It's like walking on eggshells."

*With data analysis by Jeremy Agius*

*If you would like your relative included in the commemoration project of Afghanistan war veterans lost to suicide, please e-mail [remember@globeandmail.com](mailto:remember@globeandmail.com)<sup>5</sup>*

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