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## **Veteran suicides: Families haunted Depression follows tragedy**

**By Karen Nugent TELEGRAM & GAZETTE STAFF**

**LEOMINSTER** — Kevin P. Lucey made no bones about telling a group of clergy about his loss of faith.

“God and I have not been on good terms for six years. He turned his back on my son, and I will never forgive him for that,” Mr. Lucey told the group gathered recently at the Leominster Veterans Center for a workshop on helping war veterans and their families re-adjust to daily life.

Mr. Lucey’s son, Jeff Lucey, a Marine reservist who served in the first Iraq invasion in 2003, hanged himself in the family’s basement a year after he returned to his Belchertown home. He was 23. The tragedy occurred after his family tried for months to get Jeff, a popular class clown in his high school days, treatment for what seemed an obvious case of post-traumatic stress disorder.



Jeff Lucey

“People other than us should have cared,” an angry Mr. Lucey told the group. “I’m faulting the VA (Northampton VA Medical Center), I’m faulting the church, and I’m faulting God.”

Another parent took a different route.

The Rev. Cynthia Crosson-Harrington of Petersham finished seminary school, became a minister, and is a founder of the NEADS Canines for Combat Veterans program, which provides assistance dogs to veterans.

But all that followed a long period of depression after her son, James Tower, who served in Bosnia and in Iraq, died in 2003 at age 22 in what she now accepts as a suicidal gesture attributed to post-traumatic stress disorder.

Rev. Crosson-Harrington, now minister of the First Congregational Church of Whately, said she was especially distressed, because she believes that as a future minister who worked in human services, she should have seen the warning signs in her son.

James, known by his nickname, Jamie, was the middle son of three boys. She calls him “the child of my heart” because he was the son most like her.

In fact, Jamie, whom she described as a lively affectionate child when he was younger, signed his letters to her from Bosnia: “from the child of your heart.”

But he sank into depression, she said, after unsuccessfully trying to find a job while grappling with a roller-coaster relationship with a girlfriend. That was coupled with having his deployment date, for his

second tour, as an Army reservist, changed four times.

Jamie finally did get a job working with troubled children, which he seemed to love, his mother said. Then came a frantic late night call from his by-then former girlfriend somehow lured him into a shooting at her new boyfriend's house.

Rev. Crosson-Harrington was told of her son's death by police as she returned from church the next morning.

"I have come to accept it as a suicidal gesture because of post-traumatic stress disorder," she told the group.

If anything positive came out of the tragedy, it was Dandi, Rev. Crosson-Harrington's NEADS dog, who accompanies her on talks, and practically everywhere. (Dandi, she said with a laugh, flunked the combat dog training, so could not be placed with a veteran.) Jamie was forever taking in stray animals throughout his life, and his mother called him a "dog whisperer" because of his winning ways with them.

"I felt like Jamie could have been propelling me to do this," she said of her work with NEADS. "Dogs have an incredible healing power, and they certainly did it for me."

Daniel V. Ryan, public affairs officer for the Canandaigua, N.Y.-based Department of Veterans Affairs, said while there are no official statistics on veteran suicides, there are on the number of telephone calls made to the VA's National Suicide Prevention Hotline.

Since the summer 2007, he said, 281,679 calls were received as of June 21. Of those callers, 9,192 were rescued.

"These were people with guns in their hand or ropes around their neck," Mr. Ryan said.

Mr. Lucey contends there are more veteran suicides than troops killed in action.

"Suicide is one of the major problems in the U.S, and the number of military suicides is increasing every year," Mr. Lucey said. "And for every suicide, there are at least five attempted suicides."

He said his son did not show overt signs of depression until Christmas Eve of 2003, when he did not want to join the annual family celebration at his nearby grandparent's house, something out of character for him. At one point, Jeff flung his dog tags at his younger sister, with whom he shared some of his dark war memories. But on Christmas Day, Jeff seemed back to normal. However, as his March 18 birthday approached — which coincided with the anniversary of the Iraq invasion — Jeff began spiraling down. His father said he was not sleeping or eating well, drinking heavily, and isolating himself.

The family tried to get him to go to the Northampton VA hospital, but Jeff refused, fearing a mental health record would end his dream of becoming a state police trooper.

Memorial Day rolled around and things were worse. Mr. Lucey got Jeff involuntarily committed to the hospital for three days, but said Jeff was not assessed for post-traumatic stress disorder during his stay,

even though he had threatened to kill himself three times. Mr. Lucey said the family was told Jeff needed to be sober for a certain period of time before he could be assessed.

“The system itself is broken,” he said.

A week after his release, Jeff crashed his car between two trees, but was not seriously injured. Two days after that, he was taken to the VA hospital by his grandfather, but was not admitted. On June 15, Jeff’s mother, Joyce Lucey, called the VA and told whoever would listen that they were “watching our son die.” Three days later, Jeff was assessed at the hospital but not admitted. The family then took him to Camp Sunshine, a camp for terminally-ill children and their families in Maine, because Jeff had volunteered there previously, and enjoyed it.

They returned on Fathers Day. That night, an exhausted and emotionally drained Mr. Lucey yelled at his son, telling him how angry he was. They later made up.

On the evening of June 21, Jeff suddenly asked if he could sit in his father’s lap.

“I felt really awkward about it, but I had never given up,” Mr. Lucey said. “He was trying to say goodbye, but I did not know that.”

He soon found out. At 6:45 p.m. the next day, Mr. Lucey walked by his son’s room and saw the dog tags on his bed. Then, he noticed the cellar door was ajar and the lights were on. He got a glimpse of some sort of shrine made out of family photographs.

“I walked down the stairs, and then I saw the blood. And that was the last time I held my son in my lap,” Mr. Lucey said.

A year later, a letter arrived for Jeff. It was from the state police, informing him of his acceptance into its academy.

According to Michael M. Lawson, medical director of the VA Boston Healthcare System, 45 percent of returning troops are receiving health care from the VA, and mental health care is the most sought-after form of treatment. Furthermore, Mr. Lawson said, mild concussions and more serious traumatic brain injuries, very common in the Iraq and Afghanistan conflicts, can produce the same symptoms as post-traumatic stress disorder. Also, repeated tours of duty in these conflicts increase the likelihood of post-traumatic stress, he said. Mr. Lawson, a Vietnam combat veteran, said while new medications and increased mental health services can lessen the effects of stress, veterans need jobs.

“Anyone out of the service needs the stability provided by continued employment, and simply providing medication does not convey the sort of stability and self-sustaining confidence that employment provides,” he said.

Andy Jean-Baptiste, a combat veteran who worked at a military trauma center in Anbar province, a large section of western Iraq, said there was just one psychiatrist for the entire area. Ms. Jean-Baptiste, 23, who spoke in May at Babson College in Wellesley to the Blue Cross Blue Shield Foundation’s Health Coverage Fellowship, said there were several suicides on the base. Once headed for nursing school, and

with a bachelor's degree in psychology, she decided to pursue work in veterans' mental health care after her experience in Iraq.

"People (veterans and their families) open up when I tell them I was in the war in Iraq. They feel more comfortable," Ms. Jean-Baptiste said.