

**ONE HUNDRED AND FIRST NATIONAL CONVENTION  
OF  
THE AMERICAN LEGION  
Indianapolis, Indiana  
August 27, 28, 29, 2019**

**Resolution No. 52: Antidepressant Harms Analysis**

**Origin: Michigan**

**Submitted by: Convention Committee on Veterans Affairs & Rehabilitation  
(As Amended)**

WHEREAS, According to the Department of Veterans Affairs (VA) an average of twenty (20) veterans died by suicide each day in 2014, approximately 6,079 veterans died by suicide in 2016, and veterans now account for eighteen (18) percent of all deaths by suicide among U.S. adults; and

WHEREAS, According to the Department of Veterans Affairs, the average suicide rate for veterans who used Veterans Health Administration (VHA) services between 2005 and 2016, were on average 32% higher than for veterans who did not use VHA services; and

WHEREAS, According to the Defense Suicide Prevention Office (DPSO), Quarterly Suicide Report (QSR), 3rd Quarter, CY 2018, from CY 2016-2018, 797 Active Component servicemembers, 575 Reserve Component servicemembers and 346 National Guardsmen died by suicide; and

WHEREAS, Veterans who have access to Veterans Health Administration (VHA) services have greater access to psychiatric care than veterans who do not have access to VHA services; and

WHEREAS, Veterans who have been diagnosed with a mental health condition and have access to psychiatric care are more likely to be prescribed antidepressant drugs than veterans who do not have access to psychiatric care or VHA services; and

WHEREAS, According to the VA, the suicide rate for male veterans between the ages of 18-34 is 451/100,000, and it is this veteran population at the greatest risk to die by suicide; and

WHEREAS, A study comparing suicide rates between seven (7) different types of antidepressants, found that the suicide rate for the first ninety (90) days of treatment for six (6) of those seven (7) drugs studied, had suicide rates greater than 451/100,000, more than ten (10) times that of even the most at risk veteran population, male veterans between the ages of 18-34; and

WHEREAS, According to the Congressional Research Service, there have been over 128,000 deployed veterans diagnosed with post-traumatic stress disorder (PTSD) between 2000-2014, and

WHEREAS, According to a study by the Department of Defense (DoD), antidepressants were prescribed to 70-80% of servicemembers that had been diagnosed with depression or PTSD; and

WHEREAS, Veterans and servicemembers have been prescribed antidepressant drugs that could take months and years to safely withdraw from, but may not have provided informed consent related to those withdrawal risks; and

WHEREAS, Antidepressant drug makers are required by the Food & Drug Administration to include a “Black Box Warning” that antidepressants can increase the risk of suicidal thoughts and behaviors in young adults; and

WHEREAS, In spite of the “Black Box Warnings” and other indicators listed above that identify the use of antidepressants could be causing veteran suicides and other physiological and psychological harms, the word “antidepressant” is not mentioned one time in the United States

Department of Veterans Affairs 42 page “National Strategy for Preventing Veteran Suicide, 2018-2028”; now, therefore, be it

**RESOLVED, By The American Legion in National Convention assembled in Indianapolis, Indiana, August 27, 28, 29, 2019, That The American Legion urge the Department of Veterans Affairs (VA) and Department of Defense (DoD) to investigate the role antidepressants have in veteran, active and reserve component servicemembers and National Guard personnel suicides; and, be it further**

**RESOLVED, That the VA and DoD conduct a comprehensive “Antidepressant Harms Analysis” to investigate the harm antidepressants may cause, to include, but not be limited to: suicides, homicides, violent crimes, job loss, relationship failures, homelessness, lifelong disabilities, and depression or post-traumatic stress disorder (PTSD); and, be it further**

**RESOLVED, That the VA and DoD investigate the possible harms caused to veterans, servicemembers and members of the National Guard who were prescribed antidepressant drugs, but who may not have been provided information to allow them to provide informed consent for the need to taper off of these drugs over the course of many months and years, once they have begun treatment; and, be it further**

**RESOLVED, That The American Legion research the role antidepressants have in veteran suicides, homicides, violent crimes, job loss, relationship failures, homelessness, and permanent disabilities from PTSD, and may instead be the side effects of antidepressant drugs exacerbating existing depression or PTSD; and, be it further**

**RESOLVED, That The American Legion urge Congress to require the Department of Veterans Affairs and the Department of Defense to conduct a comprehensive antidepressant harms analysis as it relates to the role of antidepressants in veteran and servicemember suicides, homicides, violent crimes, job loss, relationship failures, homelessness, and lifelong disabilities that may be the side effects or withdrawal effects of antidepressant drugs exacerbating pre-existing depression or PTSD; and, be it further**

**RESOLVED, That the completed antidepressant harms analysis be provided to the president of the United States, the United States Congress and The American Legion to show the total number of acts of suicide, homicide and violent crimes that veterans and servicemembers committed while they were actively taking or had recently withdrawn from an antidepressant drug, and should also show the number of Veterans Health Administration (VHA) using veterans and servicemembers who have open prescriptions for antidepressants and have not recently seen a psychologist or counselor; and, be it further**

**RESOLVED, That the report also detail veteran and servicemembers information related to job loss, relationship failures, homelessness and disabilities that may be related to antidepressant drugs; and, be it finally**

**RESOLVED, That every veteran or servicemember who has an open prescription for an antidepressant and has not recently been seen by a psychologist or counselor shall receive a wellness check from the VHA or DoD health-care providers to ensure the veteran or servicemember patient’s health and safety, and that the veteran or servicemember be re-enrolled in counseling services at the patient’s request.**