The U.S. is poorly equipped to care for the tens of thousands of soldiers injured in Iraq.
By Linda Bilmes

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THE NEW YEAR brought with it the 3,000th American death in Iraq. But what's equally alarming — and far less well known — is that for every fatality in Iraq, there are 16 injuries. That's an unprecedented casualty level. In the Vietnam and Korean wars, by contrast, there were fewer than three people wounded for each fatality. In World Wars I and II, there were less than two.

That means we now have more than 50,000 wounded Iraq war soldiers. In one sense, this reflects positive change: Better medical care and stronger body armor are enabling many more soldiers to survive injuries that might have led, in earlier generations, to death. But like so much else about this war, the Bush administration failed to foresee what it would mean, failed to plan for the growing tide of veterans who would be in urgent need of medical and disability care. The result is that as the Iraq war approaches its fourth anniversary, the Department of Veterans Affairs is buckling under a growing volume of disability claims and rising demand for medical attention.

So far, more than 200,000 veterans from Iraq and Afghanistan have been treated at VA medical facilities — three times what the VA projected, according to a Government Accountability Office analysis. More than one-third of them have been diagnosed with mental health conditions, including post-traumatic stress disorder, acute depression and substance abuse. Thousands more have crippling disabilities such as brain or spinal injuries. In each of the last two years, the VA has underestimated the number of veterans who would seek help and the cost of treating them — forcing it to go cap in hand to Congress for billions of dollars in emergency funding.

The VA system has a reputation for high-quality care, but waiting lists to see a doctor at some facilities now run as long as several months. Shortages are particularly acute in mental health care. Dr. Frances Murphy, the VA's deputy undersecretary for health, recently wrote that some VA clinics do not provide mental health or substance abuse care, or if they do, "waiting lists render that care virtually inaccessible."

The VA also runs Vet Centers — 207 walk-in neighborhood help centers that provide counseling to veterans and their families. These popular, low-cost centers have already treated 144,000 new veterans. But they are so understaffed that nearly half are sending veterans who need individual therapy into group sessions or placing them on waiting lists, according to a recent report by the House Veterans' Affairs Committee.

At the same time, wounded veterans trying to obtain disability checks are being tied up in a bureaucratic nightmare. The Veterans Benefits Administration has a backlog of 400,000 pending claims — and rising. Veterans must wait from six months to two years to begin receiving the money that is due to them while the agency plods through paperwork. The staff eventually helps veterans secure 88% of the benefits they ask for — but in the interim, thousands of veterans with disabilities are left to fend for themselves.

The situation is about to go from bad to worse. Of the 1.4 million service members involved in the war effort from the beginning, 900,000 are still deployed on active duty. Once they are discharged, the demands for medical care and counseling will skyrocket, as will the number of benefit claims. The Veterans for America organization projects that VA medical centers may need to treat up to 750,000 more returning Iraq and Afghan war veterans and that half a million veterans may visit the Vet Centers.

And then there is the cost. After the Persian Gulf War in 1991, half of all veterans sought VA medical care, and 44% filed disability claims. Assuming that this pattern is repeated, the lifetime cost of providing disability payments and healthcare to Iraq and Afghan war veterans will likely cost U.S. taxpayers between $300 billion and $600 billion, depending on how long the war lasts.

President Bush is now talking about spending more money on recruiting in order to boost the size of the Army and deploy more troops to Iraq. But what about taking care of those soldiers when they return home? The VA's solution is to hire an additional 1,000 claims adjudicators to cut the backlog.

A better idea would be to stop examining each application and instead automatically accept all disability claims, then audit a sample (like the IRS does for tax filings) to weed out fraud. Or at a minimum, simple claims should be fast-tracked and settled within 60 days. We should also place more counselors and more claims experts in the Vet Centers and harmonize recordkeeping so veterans can move seamlessly from the Army's payroll into VA hospitals and outpatient care.

One of the first votes facing the new Democratic-controlled Congress will be another "supplemental" budget request for $100 billion-plus to keep the war going. The last Congress approved a dozen such requests with barely a peep, afraid of "not supporting our troops." If the new Congress really wants to support our troops, it should start by spending a few more pennies on the ones who have already fought and come home.