

As casualties in Afghanistan rise, Army suicides, drug use set new records

By Bill Van Auken
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As US military fatalities in Afghanistan hit a new high in July, the US Army issued a report exposing record suicides, drug use and other signs of deep demoralization among its ranks after a decade of colonial-style wars.

Another six US troops were killed in a series of four separate attacks across southern Afghanistan on Thursday and Friday, bringing the total death toll for the month to at least 66. This follows the previous high set last month of 60. Both were at least double the average number of fatalities for the first five months of this year.

But even as the casualties in Afghanistan soar, the number of suicides and other violent non-combat deaths among US Army soldiers is rising even more steeply.

The Army's 350-page report issued Thursday, titled "Health Promotion, Risk Reduction and Suicide Prevention," placed the suicides in a broader context of dangerous behavior among soldiers, including rampant drug use, drunk driving and violent crime.

The report was commissioned after the rate of suicides among active duty Army personnel rose higher than that of the general population in 2008. While the civilian rate was 19.2 per 100,000 people that year, it was 20.2 per 100,000 for Army personnel. Traditionally, the suicide rate in the Army has been considerably lower than that in the general population, and the current rate is more than triple that which existed in the Army prior to 2001.

In the last fiscal year, the Army recorded 239 suicides among both active duty soldiers and reservists. Out of these, 160 were active duty soldiers. Meanwhile, another 146 active duty deaths were attributed to what the report calls "high risk behavior". More than half of these deaths—74—were caused by drug overdoses. The report notes that the number of accidental deaths among soldiers has also tripled since 2001.

Together, suicides and so-called "high risk behavior" killed more soldiers during the year than combat in Afghanistan and Iraq.

During the same period, according to the report, there were 1,713 suicide attempts by Army soldiers.

The report does not deal with the suicide rate among veterans, which is considerably worse than those still in the Army. A 2007 study estimated the suicide rate among male veterans aged 20 to 24 at four times the national average—more than 40 per 100,000 per year.

The report is remarkably frank about the horrendous impact of

the Army's involvement for nearly nine years in the US colonial-style wars in Afghanistan and Iraq.

In assessing the rising suicide, drug abuse and crime figures, it refers to the "effects of working under an unprecedented operational tempo for almost a decade."

"We now must face the unintended consequences of leading an expeditionary Army that included involuntary enlistment extensions, accelerated promotions, extended deployment rotations, reduced dwell time and potentially diverted focus from leading and caring for soldiers" who, the reports states, "have been pushed to their breaking point."

The report states that ideally soldiers should receive 36 months of "dwell time"—stationed at their home base in the US—for every year of deployment to a combat zone. It acknowledges, however, that the escalating war in Afghanistan and the continued occupation of Iraq make such a rotation schedule impossible in the foreseeable future. Currently, soldiers receive less than two years at home for every year sent to war.

"The force is becoming increasingly dependent on drugs"

Among the more startling conclusions of the report is that the rising suicide and accidental death rates are closely bound up with a growing use of drugs, both prescribed and illegal. The drug epidemic has been fueled by active duty soldiers dealing with pain, depression, Post Traumatic Stress Disorder and other forms of mental anguish stemming, in many cases, from their exposure to killing and violence in Iraq and Afghanistan.

According to the report, fully one third of the troops are taking at least one prescription drug, while 14 percent of soldiers are using various types of powerful painkillers. The report refers to growing use of "anti-depressants, amphetamines and narcotics."

It states the following: "As we continue to wage war on several fronts, data would suggest we are becoming more dependent on pharmaceuticals to sustain the force. In fact, anecdotal information suggests that the force is becoming increasingly dependent on both legal and illegal drugs."

Drugs also have played a substantial role in the skyrocketing of criminal activity among soldiers. In fiscal 2009, soldiers were said to have committed over 50,000 misdemeanor criminal offenses, compared to 28,000 five years earlier.

The most common offenses were motor vehicle related, including drunk driving cases, speeding and road fatalities, which have increased by 166 percent since 2004. The second largest

category was soldiers going absent without leave (AWOL) or deserting, which has more than doubled (234 percent) over the last five years.

The report notes that the rise in the number of misdemeanors “at a rate of almost 5,000 per year indicates that good order and discipline are on the decline.”

In addition, the report refers to 64,022 felony and death investigations between 2001 and 2009, 72 percent of which were drug-related.

It also calls attention to what it terms “one of the more disturbing trends” over the past period—a sharp increase in the number of sexual offenses, which have quadrupled since 2003, the year in which US forces were sent into Iraq.

Reflecting a far more pervasive problem, the report noted a 177 percent increase in the number of soldiers found to have committed spouse abuse and child abuse and neglect over the past six years. Of those found to have engaged in this behavior, only 13 percent were referred for counseling.

In its conclusions, the report clearly reflects fears within the top brass that the Army is being ground down by its uninterrupted waging of aggressive wars over an entire decade and is facing a potential for a wholesale breakdown in morale and discipline.

The report found that “enforcement of policies designed to ensure good order and discipline has atrophied. This, in turn, has led to an increasing population of soldiers who display high risk behavior which erodes the health of the force.”

“It’s time for the Army to take a hard look at itself,” Gen. Peter Chiarelli, vice chief of staff of the Army, said at a Pentagon briefing Thursday to introduce the report. He suggested that nearly a decade of war had led to a situation in which units were continuously preparing for combat, and commanders were paying little attention to disciplinary issues. No doubt, the strain of these wars has also fostered a desire to get every soldier possible deployed, mental and drug problems or criminal behavior notwithstanding.

Absurdly, Chiarelli followed these remarks by claiming: “It is not the deployments that [are] causing this problem. It’s all the stressors that you see. For us to blame this on the war is just wrong.”

As the report makes clear, the “stressors” have their source in the strain placed on the “all-volunteer” Army by the two wars. It is impossible to explain the soaring suicide, drug abuse and crime rates since 2001 outside of this. But Chiarelli and the rest of the Army brass know full well that these wars will continue, even as new ones are being prepared.

The report’s recommendations, most of which have already been implemented, include increased reliance on suicide prevention and drug and alcohol abuse programs. This strategy has not reversed the rising suicide epidemic. So far this year, at least 80 active duty soldiers and 65 reservists have taken their own lives.

In his introduction to the report, Chiarelli advocates “reducing the high risk population” by throwing more soldiers who are drug dependent, involved in criminal behavior and suicide-prone out of the military. He dismissed the argument that in doing so the military will just be “passing on a problem to the civilian sector.”

The report includes a series of descriptions of recent suicides that provide a glimpse of the devastating effect of the Iraq and Afghanistan wars, exacerbated by social and economic pressures at home, which have led so many soldiers to kill themselves.

Among them are:

- A 33-year-old Sergeant First Class who had been sent to war three times. While described as “relaxed and easy going” by fellow soldiers, he began telling them that he was having nightmares about his experiences in Iraq and was sleeping with a gun under his pillow. After being released from his unit for training as a drill sergeant, he failed to appear at the school. When members of his unit went to his house, they found him in bed with a gunshot wound to his head and a pistol in his hand. He had been dead for five weeks.

- A 28-year-old Private First Class, who had been in the Army for four years and was separated from his wife after two deployments. He had previously attempted to kill himself and his wife, and was under investigation after testing positive for marijuana. He was also facing severe economic pressures, having lost both his home and his car. After diagnosing him with mental health problems, the Army had put him on sleeping pills, antidepressants, muscle relaxers and pain medication. After throwing away all of his remaining possessions and euthanizing his pet, the Private went AWOL. A suicide note was found in his room, and four days later he was found dead with a self-inflicted gunshot wound.

- A Sergeant who had suffered traumatic brain injury during a combat deployment and suffered from nightmares. According to the report he had “a well-documented history of alcohol dependence” and was prescribed drugs for depression and anxiety. Without telling his healthcare providers, he decided to stop taking the medication, and within days was found dead as a result of suicide.

- A 23-year-old Private First Class, who had been disciplined last year for punching a hole in a wall. Married in October of 2009, he was deployed the next month. While supporting his wife and her family, he felt under increasing pressure and argued with her about finances. Communicating with his wife over the Internet via instant messaging, he told her he was going to kill himself. She pleaded with him not to harm himself, but he committed suicide.

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