

US soldier refused Afghan deployment over PTSD

Bill Van Auken
12 November 2010

As the US marked Veterans Day Thursday, an American soldier who had refused redeployment to Afghanistan over the Army's failure to treat his Post-Traumatic Stress Disorder (PTSD) turned himself in.

Specialist Jeff Hanks, a member of the 101st Airborne Division and a veteran of deployments to both Iraq and Afghanistan, reported to his unit at Fort Campbell, Kentucky Thursday afternoon after having gone absent without leave last month to seek medical care that the Army had denied him.

Speaking to the *World Socialist Web Site* by telephone from outside the Army post on Thursday, Hanks said that he did not know what action the Army would take, but that he could face discharge or even imprisonment over his absence.

"No matter what happens, I know I am doing the right thing," said the 30-year-old infantryman.

Hanks was accompanied at Fort Campbell by his wife, Christina, a retired Army sergeant, members of Iraq Veterans Against the War and other supporters. He chose Veterans Day to make his return in order to call attention to the alarming growth in the number of troops being deployed with PTSD, the record number of soldier suicides and the military's refusal to provide needed aid and treatment.

The soldier's confrontation with the Army began last month, when he refused to board a plane that was to take him from Raleigh, North Carolina to Kuwait, the first leg of the journey back to combat in Afghanistan. First deployed there last May, he had been sent back in September, spending a few weeks with his family on rest and recuperation leave.

A loud noise at the airport triggered a panic attack, leaving him unable to get on the airplane. He went to the nearest military hospital at Fort Bragg and checked himself into the emergency room.

From there he returned to Fort Campbell and was

scheduled for an appointment with a mental health care doctor for October 11. Four days before the scheduled appointment, however, he was notified by his sergeant that he had to redeploy for Afghanistan the following day. The unit's command had intervened with the doctors and ordered them to clear him for duty without seeing him.

It was then that Hanks decided to disobey orders and seek his own treatment. Since then he has been seen by three civilian doctors and diagnosed with severe PTSD and Traumatic Brain Injury (TBI), the result of a mortar blast in Afghanistan.

"I hit a brick wall and they pushed me into a corner," Hanks said in explaining his actions. Army mental health personnel had told him there was nothing that they could do. "You don't have a gun in your mouth; you're not going to commit suicide," he was told.

The soldier had first become aware of his PTSD while deployed in Iraq in 2008. "I decided to suck it up," he said, noting that soldiers who sought help with mental health issues are subject to ridicule.

"There is a stigma put on you; you're seen as a pansy," he said. While asking for psychiatric help is supposed to be confidential, in practice it becomes known throughout a unit.

"I've seen it before," he said "We had a soldier who tried to commit suicide and he was treated like an outcast. They separated him from the rest of the guys, just compounding his problems."

He traced the beginnings of his problems to a mass casualty incident that he had witnessed in the Iraqi town of Balad, where a car bomb had gone off in the marketplace. "There was one little girl who was blown up pretty good," he recalled. "She was badly burned, and she was the same age as my older daughter."

He says that he is still haunted by the incident, dreaming about it and thinking about it constantly. "If I'm watching football, I don't even mute the commercials, because if it

gets quiet, it just comes back into my head,” he said.

When he returned on leave from Afghanistan in mid-September from his second combat deployment, his family noticed his emotional and mental problems, which included panic in crowds, difficulty in controlling his anger and emotional withdrawal.

“My five-year-old daughter sat me down and told me, ‘You’re not as nice as you used to be,’” he recounted. “She asked me what’s wrong and thought that it was something she had done. I tried to explain that it wasn’t her fault; it was my job.”

Hanks said that his problem was by no means unique. Soldiers are being sent back into combat regularly without getting treatment for mental and emotional issues caused by PTSD and head injuries.

“It’s all about the numbers,” he said, “They just want boots on the ground.”

Fort Campbell has seen a large number of soldier suicides; 14 killed themselves at the sprawling Army post on the Kentucky-Tennessee border last year. Before his unit deployed to Afghanistan, there were repeated suicide “stand downs” to address the spike in the number of soldiers taking their own lives.

“They gave us an ace card,” he said. The card, which includes different questions on an individual’s mental health, is supposed to be given to another soldier if he or she is believed to be a suicide threat.

“It’s not realistic,” said Hanks. “We had one of the guys in my unit who was acting perfectly normal and went to Memphis, checked into a hotel and hung himself.”

With the Afghan war now in its tenth year and with nearly 50,000 US troops still occupying Iraq, the stress on the military remains intense. One of the terrible prices being paid for Washington’s two colonial wars is the mental problems confronting large numbers of US troops, and a steadily rising rate of suicides.

It is estimated by the Veterans Administration that fully 35 percent of US military personnel deployed to Afghanistan and Iraq since 2001 are suffering from PTSD. Meanwhile, the number of active duty soldiers reported to have committed suicide has doubled since 2004. On average, 18 veterans are committing suicide in the US every single day, while 12,000 are driven to attempt suicide annually.

The real numbers are believed to be significantly higher. One recent study of death certificates in the state of California showed that veterans under the age of 35 were two and a half times more likely to commit suicide than

other Californians of the same age, twice as likely to die in a automobile accident and five and a half times more likely to die in a motorcycle accident.

The military has conducted no similar studies. Paul Sullivan, the executive director of Veterans for Common Sense and a Gulf War veteran, said that the Departments of Defense and Veterans Affairs are not interested in exposing the true scope of the suicide crisis and are not taking serious action to change it.

“VA and DOD appear to have a policy for veterans called ‘Don’t look, don’t find,’” he told the *New York Times*.

The story told by Hanks in terms of how the Army deals with these issues is repeated throughout the military. At Joint Base Lewis-McCord last week, a group of soldiers issued a letter charging that a member of their unit had been “killed” by the Army, the *Seattle Weekly* reported.

The soldier, Specialist Derrick Kirkland, took his own life last March. He had been sent home from a second tour of duty in Iraq because of mental health problems only to be humiliated and harassed by his sergeant. He was then “carelessly assigned to a room by himself, and like every other soldier with PTSD, given substandard care,” the letter said. As a result, the soldier hung himself.

Jeff Hanks said that he would like to stay in the military. “The economic situation is not that great to find another job,” he said. He added, however, that it is not acceptable that when “you do a job and you suffer effects from the job,” those responsible refuse to offer help.

While he said he was willing to return to Afghanistan, he allowed that he had become increasingly skeptical about the “mission” of the US military.

“I know what it’s supposed to be,” he said. “Supposedly, we’re securing Afghanistan and defeating the Taliban so the Afghans can take control themselves.”

“But when you’re there, it’s not so clear what you’re supposed to be doing,” he added. “Most of it seems like just waiting around to get hit. It’s kind of like being the police in the worst neighborhood in the world, and the morale is really suffering. I just don’t know that we can police the world.”



To contact the WSWS and the Socialist Equality Party visit:

wsws.org/contact