Tuesday, Sept. 3, 2024 / Military suicide

[HALF SECOND OF SILENCE]

[BILLBOARD]

SCORING IN <Because we care, APM>

In April of 2023, Army Specialist Austin Valley took his own life.

There were two mysterious things about this tragedy.

Valley had tried already - while deployed overseas in Poland just a month earlier. And he’d nearly succeeded. And the army knew that.

After the attempt, they’d flown him home from Poland to Fort Riley, Kansas.

Also, the 21-year-old driver had not seen combat. His short time in the service had been fairly calm.

The military has a crisis: active duty servicemembers, who’ve never seen war, are dying by suicide. Thousands more, in fact, than died in the wars in Iraq and Afghanistan.

Coming up on Today, Explained: Austin Valley’s parents who want answers. And the veteran-psychiatrist who may be best-equipped to help solve a mystery that the U.S. military’s gotta crack.

**[THEME]**

NOEL: Today’s episode contains some talk of suicide.

ERIK: I was at home. I was in the garage working on something, and checked my phone and realized I had a text from him. It was essentially night over there. I thought, oh, he sent me a text and I looked. It was a half, roughly a half hour earlier. Oh, I missed it. So I open it up and it was. “Hey, dad, it's not your fault.” …It was a long text, and I remember looking at it and pausing a minute and thinking, is this a joke?

NOEL: Erik Valley is Specialist Austin Valley’s father.

I tried calling him. I got no answer. I'm like, oh, shit, you know? So I called the unit. And I said, here's the situation. I just got a suicide text from my son. You need to go find him right now.

SCORING IN <Refraction in a glass prism APM>

We didn't really know what was going on, it was just a back and forth. I got a call from, from one of the NCOs in Poland asking, you know, hey do you know any information or anything like that. I was like, no, this is, this is what I got.

By now they had emptied the barracks and we're looking for him. I think probably roughly like an hour after I had called, we got a call from someone saying, hey, we found him. One of the soldiers had shined his lighter on, found Austin hanging in a tree and cut him down and threw him in an ambulance, and he went to a local Polish hospital, where they stabilized him and medevaced him to Germany.

NOEL: That was March. By April, the army had escorted Austin back to Fort Riley, Kansas. His family were assured he’d be hospitalized. Instead, commanding officers granted Austin a 4 day pass to leave the post for Easter weekend. He bought a gun at a pawn shop.

A few days later, he went to see an ex-girlfriend. He texted, she told him to go away, he pounded on her door. So she called the police. They found Austin bleeding from a self-inflicted gunshot wound to his head. Doctors declared him brain-dead and he died in the hospital..

He left behind his parents. His dad Erik and his stepmom Stephanie, are both veterans themselves.

SCORING POSTS

SCORING OUT

NOEL: When did he decide he wanted to be a soldier?

ERIK: << laughs>> Grade school.

NOEL: No!!

ERIK: probably third or third or fourth grade. They assign you a project, or in this case, the school did. Kind of what do you want to be when you grow up? And it gave them three lines and a little area to draw a picture. And he drew, a Army plane and, you know, put the Army star on it and had soldiers jumping out of the plane. And he said, I want to be in army.

NOEL: <<laughs>>

ERIK: And, that was it. He didn't fill anything else out. And that teacher’s like, well, there's more lines, you know, that's what I want to do.

NOEL: Eric, why do you think that is?

ERIK: I don’t know! I mean, my dad was in Vietnam. I served in Desert Storm. I was, infantry sergeant. And maybe. Maybe because I talked too much about some of the fun I had.

NOEL: Hmm!

ERIK: Sometimes grandpa would sit down with him, and, and my dad had a lot of slides in Vietnam. So he would go through, you know, like pictures of firefights and stuff like that at night. And he was I think that just got him even more pumped.

STEPHANIE: he came from a family who very much believed in the duty to serve. You know the. If you if you can, you should. That's how we keep what we have in this country. I feel like he very much believed in that. We both had very similar views that way, where if you can, you should. Somebody has to. He signed his papers at 18,

ERIK: Mh-hmm

STEPHANIE: but he was a senior in high school at the time. And it was right in 2020. So, you know, everybody was home home schooling because of Covid. ~~Right.~~ So I actually took him to the recruiter's office because he said, for my birthday, I want to go sign my army papers.

ERIK: You know, he would have been a lifetime soldier.

NOEL: Austin was stationed at Fort Riley, in Kansas. He started off in the infantry and then became a driver - Bradley fighting vehicles. The stories he told his parents put them on edge just a little. The military Erik remembers took care of you. Like - it was your commanding officer’s job to relieve you for dinner. It was a small thing, but also kind of a big thing. But then, Austin’s telling them…

ERIK: A lot of nights he would be in the motor pool. Six, seven, 8:00 at night. And I know more than one night. They forgot him. Didn't feed him? No. He would call. Call? Angry because, you know, the NCOs and whatnot had gone home for the day, but they left him down there and, you know, 5:00 the chow hall is closing, and it's 6 or 7:00 at night. And, you know, he was left down there because, they're trying to repair their equipment.

NOEL: In your time in the service, how common was it that someone would forget to tell you it's dinnertime?

ERIK: You didn't. You took care of your soldiers. you were accountable for those soldiers. You had to know where they're at, and something happened and you didn't. It was you. But him being at Fort Riley. It seemed like. It was everybody for themselves. When, you know the 5:00 whistle rang, those NCOs went home. That was one of the nights that, they were having a barbecue or something, but they… he was left in the motor pool. I know he texted me, I think one night it was like almost 9:00 and he was still down there and he still had to get up the next day for duty and what not. So…

NOEL: How much did either of you know, or did both of you know about what Austin's frame of mind was like at Fort Riley, just how he was doing emotionally?

ERIK: I don't. …I think it was good up until the point of the summer before the Poland deployment. It was he was starting to not look at the Army the same way. The leadership was an issue. You want to know when you're in there that you know, your leadership has your back. And I don't think he was feeling that as much. He, liked the company he was in, he liked the guys he was serving with. He liked what he was doing, but…

STEPHANIE: I think he became very disenchanted when, you know, when you go in and you expect one thing or you're told one thing. Or you read one thing and then you figure out the honest reality of the situation.

NOEL: You know, you guys, you guys remember getting jobs when you were young and, like, you sort of know that your boss doesn't care about you, right? It's like one of those one of those moments in life where adulthood, like, really hits home. It's like, oh, this person tells me what to do and pays it. I don't give a damn about me. They just want me to, like, do a job. And I think, Eric, what you're saying is your experience of the military was not that. The experience of leadership is not just I'm a boss, it's supposed to be…I am also a leader, and I am supposed to care about the guys who are serving under me.

ERIK: I was in Germany for three years and being a young soldier was financially not, not always an option to fly home to Wisconsin for two weeks and fly back. So it was just you stayed in the barracks or whatever. And I had an NCO that, he would say, you know, Christmas dinner in my house on Saturday it's not an option. And you know you are all coming. And you know he would they would go around. No one stayed in the barracks. And that wasn't just my squad or platoon, it was the barracks are empty. You went somewhere. Your NCOs, yeah, they cared. You know what I started seeing with Austin was that things had drastically changed. You know, I was never left with a feeling of I've been abandoned. It’s just a thing. But the generation that Austin's in with the soldiers now, it seems to be a whole different mindset. It's almost like everyone’s looking out for themselves first.

NOEL: Do you have a diagnosis of why over the span of, you know, 25 or so years, we went from a service where people really care about each other to a service where a kid is being left behind and not even told that it's time for dinner. Like, what do you what do you think happened?

STEPHANIE: I think it became less of a brotherhood, and I say that and kind of giggle about it because… clearly not a brother but it became less of a brotherhood and more of a more of a numbers game. It became more of a corporate business. You know, they they had to meet their quotas. They had to meet their numbers. They had to, you know, play this numbers game or have to not had to. That's that's what's currently going on.

ERIK: It's very impersonal.

NOEL: Austin felt overworked and overlooked - which is a universal feeling. For him, it spiraled. A year plus later, the thing his parents can’t wrap their heads around is that their son had TRIED to take his own life. And the army knew this, and Austin’s commanding officer made them promises - that he’d be watched

STEPHANIE: … when they were bringing him back, I said, I want to know, you know, where what is happening here. Like he he should be inpatient and somebody should constantly be watching him. You know, what are what are your plans? What are your policies? And he absolutely assured us that Austin would be watched and that. They wouldn't allow anything to happen and you know, that they wouldn't allow anything to happen, and you know that they were going to follow everything that they were supposed to follow. They didn't.

ERIK: We really figured that there was some integrity there and that there was honesty that, hey, you know, this is something bad that happened, but we're going to take care of this and make sure your son is safe. And that was the farthest thing from the truth. They were taking care of was their own career.

STEPHANIE: You know and I outright asked him, and it was a genuine question like, do you understand? Do you understand? You know what he's going to say. What? What he's going to do. You know, at this point, he just wants his freedom and he's going to tell you everything you want to hear. So you leave him alone. Austin's commander had said, ‘we we don't have the manpower to sit with him one on one like you're asking, and you guys just need to let us do our job, you know, blah, blah, blah and you know it's not the Army's job to babysit these kids.’ And I said, actually, that's where you're wrong. That is exactly your job as a commander. Your job is these soldiers.

SCORING IN <Kos Kar, APM>

NOEL: A spokesman for the 1st Infantry Division told us in a statement that the behavioral health department didn't recommend further in-patient treatment in part because Austin "regretted his decision and was actively anticipating moving forward with this life." The statement went on to say "leadership and direct supervision were implemented immediately upon Spc. Valley's return to Fort Riley." Asked why the Army granted a 4-day pass to a soldier who recently attempted suicide, the spokesman said "Holidays and four-day weekends see a significant decrease in the number of personnel on military posts. Valley had no family visitors since his return from Europe so allowing him to visit friends seemed beneficial."

NOEL: Coming up: a crisis, a psychiatrist, and what he told Congress NEEDS to get done and get done now.

**[BREAK]**

**[BUMPER]**

NOEL: Dr. Craig Joseph Bryan has a lot of credentials. Clinical psychologist. Professor of psychiatry and behavioral health at the Ohio State University. Author of *Rethinking Suicide.* Served on the Department of Defense Suicide Prevention and Response Independent Review Committee. And, maybe most important: veteran. Of the U.S. Air Force. Deployed to Iraq in 2009. He’s dedicated himself to this problem.

NOEL: How many active service members die by suicide every year?

CRAIG: You know, no obviously vary from year to year. But, you know, you're typically looking at, you know, maybe like 500 or so service members. And, you know, most of the statistics will report active components. So active duty military personnel separate from Reserve and National Guard personnel.

CRAIG: You know, the majority of service members who died by suicide, have never deployed. And that's sort of always been true even during the height of military operations. And so there was, you know, in the mid 2000s, you know, up until, well, I guess it even persists today, this, I think, impression that the rise in suicide rates amongst military personnel that started around 2005, 2006 was directly linked to deployments, cycles, combat exposure, things like that. And the the research actually never really supported that. The majority of suicides were always amongst those personnel who had never deployed.

NOEL: Really. And what does that tell us?

CRAIG: Well, I think it tells us a few things. I think first of foremost, it, I think, should warn us about the dangers of coming up with overly simplistic explanations for something as complex as suicide. And unfortunately, I don't think that lesson has really fully been learned by society, because there is this persistence in the storyline of rising suicide in the military was related to deployments. That was never true. And my usual kind of reframing of that is to respond, say, well, why do civilians die by suicide? They're not deploying either. And then usually that's it's like, oh, yeah, relationship problems, financial security, other problems in life, for some people it involves mental health conditions, substance abuse, things like that. And so in that sense, military personnel are no different from civilians.

NOEL: Specialist Austin Valley, this young man we talked about in the first half of the show was able to buy a weapon off post just a few days after he survived a suicide attempt. How typical is it that something like that happens? A man, young man, young woman is known to be in distress, but they're able to get a gun.

CRAIG: It's. It's very common.

NOEL: Huh

CRAIG: I think it's a lot more common than what we often believe. And it's it's a big reason why, you know, researchers like myself and many of my closest collaborators are really emphasizing things like. Yeah, how we how we sell firearms, how we, encourage and how we support people storing their firearms in their homes actually makes a really big difference. And our willingness if we if someone is having distress, if we know that they're in a vulnerable state, our willingness to, you know, temporarily hold on to their firearms to reduce that convenient access, we know is a very, very effective suicide prevention strategy that is hardly ever talked about, and very rarely implemented, within the US.

NOEL: When a civilian is experiencing suicidal ideation. We know what happens ideally, right? The person calls a hotline, maybe goes to a doctor, certainly a counselor, maybe gets on medication, maybe gets inpatient care. How easy is it for members of the military, active members of military, to access those things that civilians are able to access?

CRAIG: Military personnel theoretically have better access to mental health care and other protective resources than civilians. And that's because most military installations have a mental health clinic. You don't have to pay for therapy. You don't have to pay for medications. You just call, go directly. You know, since suicide rates started increasing in the military, there was this very concerted effort to expand screening efforts trying to identify who was suicidal. This is typically done by implementing like questionnaires and screeners in medical clinics. But even in the military, they're doing it outside of medical settings. And so expanded screening, unfortunately led to increased demand on mental health services. And what happened was there became this culture of if someone's suicidal, they have to go to mental health. And so we ended up flooding the mental health care system. It takes a long time sometimes to get into the front door, and then once you're in, it can be many weeks before you can schedule a next appointment. And so this sort of snowball effect and this was none of this was intended from the start, right? It was all like supposedly good intentions. We should expand screening because then we can find people who need help and we can get them connected to services. But that ended up straining the system. And so then to try to fix that, we said, well, DoD, you need to get people in within a week. And so the DoD responded, and they made it really easy to walk in the front door, but then you would have to wait six weeks for your second visit. And so you so you look like you're meeting the standard when really you're not.

NOEL: Let me run another thing past you. Austin Valley's father, Erik, is a veteran. His step mom is also a veteran. They say that their son told them things about his time in the Army, that he had a sense that his commanding officers weren't looking out for him, that at times they just kind of forgot about him, you know, forgot to call him for dinner. And they say that's very different than what they experienced. His dad in particular, who served, you know, a generation ago. Have you heard anything like that that younger service members today are describing an Army that is just different these days, less caring.

CRAIG: You know, as the global War On Terror extended for longer and longer and longer, the military's mindset, the focus became, like, almost exclusively zeroed in on warfighting. And so garrison life peacetime operations, in essence, that became a skill set, that had been lost in the militaries. And that was something we were definitely hearing from, particularly senior leaders. And I think it manifests in the younger service members while describing the sort of quality of life issues. It's like people doesn't don't care about me. My leaders aren't listening things like that. It was, in essence, our leaders forgot how to run a community. When you're not actively engaged in combat or you're deployed overseas.

SCORING IN <Haus im see>

I remember when we were visiting, an army base in Korea, and, you know, doing our focus groups. One of the things that we heard over and over and over again, particularly from the junior enlisted, was, delays in, travel expenses, like reimbursement. So, you know, you get this government travel card and you got to buy a flight, you got to move all your stuff and you got to, you know, travel halfway around the world to do your job. Then you arrive in a foreign country where you don't speak the language, and you don't really have internet access. You don't have a phone that, you know, is on a local cell phone plan, things like that. And so while you are trying to get your life adjusted to this new world, right, this new life, you have to, like, submit all your receipts and all this paperwork for your employer to reimburse you for all of the expenses that you've incurred to get there, to do your job. And we were hearing that, you know, payments are delayed. Vouchers are rejected. People are going into debt. They can't pay their bills. Then there are there are mistakes with their, just a routine salary. Their paycheck is has errors, all this kind of stuff. And as we really kind of looked into it and started asking questions about what's going on, you know, we found that it was just there was a sort of dismissal of the initial response was, well, if soldiers can't fill out their paperwork properly, that's not our problem. But as we started asking more questions of that, we found out that the process that is used to get reimbursed is a nightmare. And so it became this this system problem, where that was leading to this financial strain amongst over 50% of the people coming into this one location. And so you magnify that now across the entire enterprise, the entire DOD, because we were hearing this everywhere. And one of the core problems that was identified was, in essence, we've automatized almost everything in the military. There are no more experts whose job is to help you submit your voucher correctly. And the mindset was, well, hey, that's not that important because, you know, we we're at war. We got to make sure that we maintain lethality and readiness. And so we need to go the field. We need to be able to fight and wage and win America's wars. And the point that we were often trying to make was, well, it's hard to be lethal and ready, if you can't pay your bills because your employer hasn't paid you back to do their work.

SCORING OUT

NOEL: I’m glad you gave us that example because, yes, that illustrates how easy it is to become deeply frustrated.

CRAIG: You know, in essence, the the term that I came up with, it was death by a thousand paper cuts. And this is I think this is partly why suicide rates in the United States have gone up the past two decades. We've made life miserable, and, and a lot of it, the biggest frustrations that many of us have are related to these everyday nuisances, these frustrations, these annoyances that build up. And they're chronic, right? Because it gets kicked back to you four times. And it's seen as like not a real problem. Right? It's not trauma, it's not life and death, that kind of stuff. And but when you magnify that issue right across multiple areas of life, people feel as though there's no one to turn to. There are no experts to help me. I'm on my own. The system doesn't work. And what that kind of comes out as is the system doesn't care about me. I'm replaceable. I don't mean anything. And that's where I think you create the conditions for suicide to become more likely. Right? None of like, I don't think those hassles by themselves, none of those experiences directly cause suicide. But I think they accumulate and they wear a person down. And yeah, when you're 19 years old, you're not in a stage of your life yet where you can absorb, you know, a few hundred and few thousand of delayed payments like you might be able to if you're in your 40s or 50s.

NOEL: When you testified before Congress, what did you tell Congress needs to happen here to stop this?

CRAIG: We’ve medicalized suicide, and so as a result almost everything that we do now to prevent suicide has like a mental health kind of flair to it. That's why we do so much screening. We refer people to mental health treatment. that's that is important, you know, I'm a psychologist. This is my job. I do therapy with people who are suicidal. So I know that it's important, but you can't therapy your way out of this.

SCORING IN <Sleptover>

We need to look at these bigger issues. Because if a person gets reimbursed in a timely manner and is able to access support services from the community for relationship problems, things like that, then they're probably less likely to get to a point where we need to send them to a mental health professional, right? Which then solves the problem of this long wait time that we have. And so I've directly recommended to Congress stop pushing for more screening. All you're doing is making the problem worse. And secondly, the more provocative argument I made, it's like we need to be talking about guns and it's going to be really hard to get ahead of this problem if we are unable to have an honest conversation about the method. That is, nearly 75% of all suicides in the military.

NOEL: Dr. Craig Joseph Bryan. The Ohio State University

If you are having thoughts of suicide, call or text 9-8-8. Talk to someone, please.

Today’s episode was produced by Victoria Chamberlin. Our editor is Matthew Collette. Patrick Boyd and Andrea Kristinsdottir engineered. Laura Bullard fact-checked. Our thanks to Steve Beynon of military-dot-com who did some very good original reporting about Austin Valley.

NOEL: I’m Noel King. It’s Today, Explained.

**[10 SECONDS OF SILENCE]**