

United States Senate

September 28, 2022

General Lloyd J. Austin III
Secretary
Department of Defense
1400 Defense Pentagon
Washington, DC 20301-1400

Dear Secretary Austin,

We write regarding alarming reports of fatal drug overdoses of active duty U.S. service members. According to *Rolling Stone* magazine, since 2020, at least 14 overdose deaths have occurred at Fort Bragg, North Carolina, where “accidental overdose is the leading cause of death” aside from self-harm.¹ This reporting follows news of recent overdoses involving cadets at Fort Bliss² and West Point.³ In light of this disturbing trend, we write seeking a full understanding of the pattern of overdoses among active duty service members, and urge you to implement a plan of action that prevents future overdoses.

The deaths and non-fatal overdoses at Fort Bragg, Fort Bliss, West Point, and in states with high military populations like Alaska, involve opioids and, more specifically, fentanyl, consumed both intentionally and unintentionally. These incidents represent the continuation of a persistent and troubling pattern. Of all categories of prescription drug misuse in the military, prescription pain relievers are most misused.⁴ The significant role opioids have played in overdoses occurring in military hospitals or involving active duty service members is well-documented.⁵ From 2010 to 2016, opioid overdose deaths among veterans more than doubled.⁶ The presence of risk factors

¹ Seth Harp, ‘These Kids are Dying’ – Inside the Overdose Crisis Sweeping Fort Bragg, *Rolling Stone* (Sept. 4, 2022), <https://www.rollingstone.com/culture/culture-features/inside-the-overdose-crisis-sweeping-fort-bragg-1396298/>.

² Lee Brown, *Fort Bliss Soldier Died of Accidental OD after Reporting Sexual Assault*, *New York Post* (June 17, 2021), <https://nypost.com/2021/06/17/fort-bliss-soldier-overdosed-after-reporting-sexual-assault/>.

³ Melissa Alonso & Amanda Musa, *5 West Point Cadets Overdose on Fentanyl During Spring Break, Police Say*, *CNN* (Mar. 12, 2022), <https://www.cnn.com/2022/03/12/us/west-point-cadets-overdose-fentanyl/index.html#:~:text=The%20United%20States%20Military%20Academy%20at%20West%20Point,Fort%20Lauderdale%20earlier%20this%20week%2C%20according%20to%20police.>

⁴ Sarah O. Meadows et al., 2018 Dep’t of Defense Health Related Behaviors Survey, RAND Corporation (2021), at 100, https://www.rand.org/pubs/research_reports/RR4222.html.

⁵ Between 2001 and 2010, 12,984 active duty service members were hospitalized due to ingestion of pharmaceutical substances, the majority of which included pain medications or psychotropic drugs. See Elisabeth Hesse, *Poisoning Related Hospitalizes and Risk Factors for Self-Inflicted Poisoning in the Active Component*, 18 *MSMR* (Nov. 2011), <https://pubmed.ncbi.nlm.nih.gov/22145849/>. A review of military hospital emergency admissions from 2009 to 2012 similarly revealed the disproportionate role of opioids and benzodiazepines in overdose incidents. See Victoria J. Ganem, BSN, RN et al., *A 3-Year Comparison of Overdoses Treated in a Military Emergency Dep’t – Complications, Admission Rates, and Health Care Resources Consumed*, 181 *Military Medicine* 1281, 1281 (2016), <https://pubmed.ncbi.nlm.nih.gov/27753564/>.

⁶ Alex S. Bennett et al., *U.S. Military Veterans and the Opioid Overdose Crisis: A Review of Risk Factors and Prevention Efforts*, 54 *Annals of Medicine* 1826, 1829-34 (2022), <https://pubmed.ncbi.nlm.nih.gov/35792749/>.

for veteran overdose death, including combat exposure, sexual trauma, and pre- or co-existing mental health disorders, are also present in active duty service members.⁷ And the lethality of even a small amount of illicit fentanyl is making recreational opioid use increasingly deadly, often for those who are not even aware it is present in the drugs they are ingesting.⁸

Despite action that the Department of Defense (DoD) has taken to increase access to substance use disorder (SUD) and behavioral health treatment, gaps remain in understanding the scope and severity of the problem and in access to treatment. There is a lack of data available regarding the number of overdoses, fatal and otherwise, occurring among active duty service members.⁹ Moreover, the impression of approximately 35 percent of active duty service members is that “seeking mental health treatment would damage [their] military career.”¹⁰

As DoD has recognized, early and accessible prevention and intervention efforts are a vital tool for avoiding drug misuse.¹¹ We sincerely appreciate the efforts that DoD has taken to reduce SUD and illicit drug use; research and monitor the issue;¹² improve access to treatment;¹³ and increase access to, and destigmatize, behavioral healthcare for active military and veterans.¹⁴ While these steps have shown some effectiveness, the recent reports of overdoses indicate a problem that may be underreported and are a call for urgent action to reduce the impact of SUD on those who have sacrificed to serve our country.

To better understand how Congress may support DoD’s work to combat the scourge of overdoses in the military, we request answers to the following questions no later than October 20, 2022:

1. How many active military service members overdosed from January 1, 2017 to present?
 - i. Of those, how many overdoses were fatal?
 - ii. Of fatal overdoses, how many were ruled a suicide? Accidental?
 - iii. What substances were involved in both fatal and non-fatal overdoses?

⁷ See Meadows, *supra* n. 4, at xxxii, xxv, 116, 131, 198; Bennet, *supra* note 6, at 1831.

⁸ See Harp, *supra* n. 1.

⁹ See Active Duty Military Deaths by Year and Manner, 1980-2021, Defense Casualty Analysis System, <https://dcas.dmdc.osd.mil/dcas/app/summaryData/deaths/byYearManner> (no individual category for overdose deaths); Meadows, et.al, *supra* note 4 (no mention of overdose deaths); Christopher T. Mann & Hannah Fischer, *Trends in Active-Duty Military Deaths Since 2006*, Cong. Research Service (upd. May 17, 2021), <https://crsreports.congress.gov/product/pdf/IF/IF10899> (no individual category for overdose deaths).

¹⁰ Meadows, *supra* n. 4, at 131.

¹¹ Meadows, *supra* n. 4, at 216.

¹² Bryce H.P. Mendez, *Substance Abuse Prevention, Treatment, and Research Efforts in the Military*, Cong. Research Service (Aug. 17, 2018), <https://crsreports.congress.gov/product/pdf/IF/IF10951/3>.

¹³ 32 C.F.R. § 199.

¹⁴ Behavioral Health Requirements of the Department of Defense, Dep’t of Defense, 7-8 (Jan. 3, 2022), <https://www.bing.com/ck/a?!&&p=22858d89f629ba9dJmltdHM9MTY2Mjk0MDgwMCZpZ3VpZD0xNTUwMDM1MC0wYTZmLTYwMjltMDQyMi0xMTVmMGU2ZjY2NDMmaW5zaWQ9NTE3Ng&ptn=3&hsh=3&felid=15500350-0a6f-6022-0422-115f0e6f6643&u=a1aHR0cHM6Ly9oZWZsdGubWlsL1JlZmVvZW5jZS1DZW50ZXIvUmVwb3J0cy8yMDIyLzAxLzlwL0JlaGF2aW9yYWwtSGVhbHRoLWJlcXVpcmVtZW50cy1vZi10aGUtRG9E&ntb=1>.

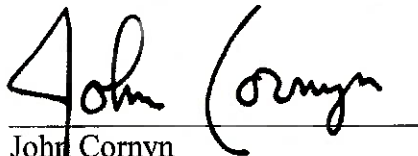
- iv. What were the demographic trends among those who overdosed?
- v. More generally, how many active duty service members had traces of misused prescription medication or illicit drugs in their system at the time of death?
2. How many active duty service members are testing positive in urinalysis testing?
 - i. What substances appear most frequently in urinalysis testing?
 - ii. Did any service members have a positive urinalysis test prior to overdose? If so, how many since January 1, 2017?
 - iii. What steps is DoD taking in response to positive tests?
3. What protocol is in place to identify and respond to an uptick in overdoses either generally or at a specific military installation?
4. What is DoD doing to improve identification and early treatment of SUD among active military members?
5. What research has DoD conducted or will conduct regarding the accessibility of treatment, including Medication Assisted Treatment (MAT), for active duty service members?
 - i. Is treatment equally accessible at all military installations?
 - ii. Are all treatment options available to all active duty service members?
 - iii. What accommodations is DoD providing to service members who are seeking treatment?
 - iv. What, if any, actual or perceived stigma exists for service members obtaining treatment for SUD?
6. What is the protocol for informing family in the event of an overdose, including non-fatal overdoses?
 - i. What supports is DoD providing to families after a fatal overdose?
7. Please provide any other information that may be relevant or helpful in understanding and addressing this problem.

Should you have any questions about this request, please contact Tara Wilson at Senator Markey's office at tara_wilson@markey.senate.gov.

Sincerely,



Edward J. Markey
United States Senator



John Cornyn
United States Senator

The Honorable Lloyd J. Austin III

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Page 4 of 4



Elizabeth Warren
United States Senator



Lisa Murkowski
United States Senator



Martin Heinrich
United States Senator