

When COVID-19 lockdowns were first implemented, I was still serving in the military. While many soldiers across all branches experienced COVID differently, at the time, I was stationed at Fort Benning, GA. What was unique about Benning was that all combat arms soldiers in the Army receive their One Station Unit Training at this location (Tankers, Scouts and Infantry). It is a well-known fact that random sickness runs rampant in these environments, due to the cross-section of backgrounds and environments that the Army is made of, with this being their first step into the giant melting pot that takes civilians and turns them into disciplined soldiers. COVID was no exception, and my experience reflected that accordingly.

While the rest of the country was locked down, soldiers and trainees at Benning experienced some of the most mind-numbing circumstances of “hurry up and wait.” Additional weeks of quarantine were implemented on incoming trainees, the slightest sign or symptom could result in mass contact tracing and immediate removal from training, along with a litany of other restrictions that many would see as draconian even by the standards of the pandemic, but were understood by those of us familiar with the Army as simply the necessary means to maintain some semblance of effectiveness at completing the assigned task of training young men and women to be soldiers.

Travel was virtually non-existent. Non-essential travel required approval authority at levels of command that were far higher than one’s typical yearly leave request, etc. Essential vs. non-essential personnel changed on a daily basis, as the Army trains its soldiers to Improvise, Adapt and Overcome – a mission I can attest that the force continued to accomplish in the face of this new challenge. Due to what I will relate below, I don’t think I would have gone anywhere even if I could have, although in hindsight, it was most likely exactly what I needed at the time.

Personally, I became one of the victims (I use that term loosely) of one of the unseen dangers of the pandemic. While I remained COVID-free until well after the lockdowns were lifted, some pre-existing medical conditions in my family required an even greater level of isolation as the public at large continued to struggle to identify and counter this new and changing virus. As such, an alcohol abuse problem that had largely been kept at bay due to a strenuous schedule or “op tempo” was allowed to run free, and my personal battle with alcoholism became far more impactful on my life than COVID did. I nearly died and can credit only a merciful God and some fantastic leaders and caregivers with their assistance in getting me the help I needed, ultimately culminating in a liver transplant about a year after I received my honorable discharge in March of 2022.

I was far from the only one affected in this manner, and the data continues to show that it was not just the military that was affected negatively in the areas of mental health and substance abuse. If I learned anything from my experience during the pandemic, it was that humans are not meant to live solitary lives in isolation, and that virtual contact is no replacement for the experience of human contact and person-to-person interaction.