

EOD technician SSgt. Beau Chastain walked into a trap ... and all the way back to active duty.

WALKING BACK

By Aaron M. U. Church, Associate Editor



THE improvised explosive device—usually in the form of a roadside bomb—has been the signature enemy weapon over the last 12 years of combat in Afghanistan and Iraq. As a result, explosive ordnance disposal has become one of the most in-demand military specialties, with EOD troops deploying far more frequently than practically any other.

Embedded with ground units, highly trained EOD techs must often disarm explosives under fire. The enemy knows EOD can neutralize their preferred weapon, and insurgents purposely target the bomb squads in ambushes.

The years of war have been harrowing for EOD techs and their families. For the airmen, the missions come in a seemingly never-ending series, hazardous and extremely stressful, and they know that troops depend on them for their lives.

Their families live with the ever-present knowledge that their absent loved one is doing one of the most unpredictable and dangerous—but utterly crucial—combat jobs in the Air Force.

On his fourth combat deployment, EOD technician SSgt. Beau Chastain walked into a trap. During a June 6, 2011, foot patrol, he was sweeping a particularly dangerous area of Helmand province, Afghanistan, for IEDs. Insurgents in the area had purposely planted an IED ahead of the British Army platoon Chastain was embedded with, trying to lure the troops into the open.

The platoon had been making its way along, probing for explosives. “We kind of lost our bearings on where we were, and where the closest other element was, and ended up right where we weren’t supposed to be,” Chastain recalled in a January interview.

The waiting insurgents sprang from hiding and sprayed the column with gunfire, wounding several of the British soldiers. As he scrambled for cover, a single round slammed into Chastain’s left thigh, dropping him in his tracks.

The large-caliber round carved away a large chunk of Chastain’s leg muscle, leaving him bleeding profusely. The British platoon sergeant braved the heavy fire and quickly ran over to help Chastain, who was lying in a growing pool of his own blood.

The sergeant applied a tourniquet, stopping the bleeding and postponing the most immediate danger.

The Dreaded Call

The platoon was still in extreme peril, however. The firefight was too intense for a medevac helicopter to attempt a landing, and casualties stacked up.

“We were under such constant fire from the enemy that they actually radioed us back and said that they wouldn’t send a helicopter because they were afraid that it would get shot down,” Chastain said. “It sounds kind of dramatic saying it out loud, but we had to fight our way back out.”

The nearest sheltered landing zone was several hundred meters down the road. Because Chastain couldn’t walk, SSgt. Steven Dauck—one of the two other EOD airmen embedded with the patrol—picked him up and lugged him to the LZ.

“He actually ended up dragging me probably two or three hundred meters, which was quite a physical feat when you consider all the gear that we have to wear. ... I guess adrenaline comes into play,” said Chastain.

At 4 a.m. back in Wichita, Kan., the phone rang. Amanda Chastain scurried out of bed to grab it before the kids woke up. It was Beau on the other end.

A call at that time of the morning is “never a good sign,” she said in a recent interview, but hearing his voice was a relief because it meant he was alive. His first words were, “All right, don’t freak out,” she said with a nervous laugh, “which is never good either.”

He explained he was in a hospital in Afghanistan, saying simply, “I was shot.” Only a few hours earlier, he’d been rushed from the field, got through emergency surgery, and was still a “little loopy” from blood loss and painkillers, according to Amanda.

“He was trying to play it off like it wasn’t a big deal and that he would be back to work the next week,” she said. “I don’t know if he fully comprehended what had happened.”

Packed with filth from the battle and from his being dragged down the rural Afghan road, Chastain’s wounds quickly became infected. The doctors initially operated to open and clean the wound, and over the next few days performed several surgeries to piece his thigh back together. However, because he’d been taken to a British field hospital, he was completely outside the Air Force’s notification system. Fortunately, someone gave him a satellite phone. It turned out to be the only way of keeping Amanda and his unit back at McConnell AFB, Kan., informed of where he was and how he was doing between surgeries.

Airmen with injuries as serious as Chastain’s are usually flown quickly to Germany, then on to the United States for follow-on care and recovery. Instead, the allied doctors at first wanted to keep him in Afghanistan for three months of rehabilitation and put him back in the field for the final month of his tour.

Chastain secured his release in a couple of weeks and essentially hitchhiked his way to Germany, dragging his equipment

through several passenger terminals to catch a spare “space-A” seat on a cargo flight to Ramstein AB, Germany, the typical way station for regular and wounded troops headed home.

“I was on crutches and I could barely walk,” let alone carry equipment and deployment bags, he said.

Since he wasn’t in the system, there was no one waiting for him at Ramstein. Eventually someone picked him up from the flight line and drove him to nearby Landstuhl Regional Medical Center. By then, “my dressing had completely bled through and I had a big blood stain on my uniform,” he said. “The Air Force isn’t used to dealing with situations like this, and that became painfully obvious in my case,” he observed.

Nevertheless, the Landstuhl medical team quickly got him cleaned up and

treated him for about a week before allowing him to make the last leg of the trip home.

Through multiple deployments to Iraq and Afghanistan, airmen and their families simply have had to come to terms with injury and death. The EOD community, as with many ground combat-related specialties, is small, and most technicians have had close friends lose limbs or even their lives in the line of duty.

A Strange Sense of Relief

Airmen like Chastain consider themselves blessed. Lying in an Afghan farmer’s field “with the tourniquet on my leg, ... I was almost relieved,” he said. “The EOD guys especially are dealing with explosives and there’s either nothing left of you, or you’re missing limbs—multiple limbs.” Having

only taken a bullet, “I was extremely thankful,” he said.

Amanda admitted that her first reaction to the news was also relief. EOD spouses understand the risk their loved ones run and “mentally prepare that they’re not going to come back,” she said. In January, “one of my best friends lost her husband in Afghanistan, so I know that’s the reality,” she said. Spouses are also fully aware EOD airmen “usually have a bounty on their heads,” that insurgents often lay traps—as in Chastain’s case—specifically to kill EOD teams.

“They knew they would come to try to disarm the IEDs and they were waiting,” she said.

The lifestyle takes its toll on airmen and families alike, not just in terms of life and limb but also mentally and emotionally.



Photo by SSgt. Beau Chastain

Two Sides of the Combat Coin

Airmen in high-demand battlefield roles who've repeatedly deployed to Southwest Asia have motivations and perspectives on combat differing sharply from that of their families back home.

For SSgt. Beau Chastain, an EOD tech assigned to the 22nd Civil Engineering Squadron at McConnell AFB, Kan., now on his fifth deployment, combat has simply become his job. "I don't look at it from the aspect that every day I wake up and think, 'I'm going to go save somebody's life today' or anything like that—nothing so melodramatic. You become used to what you do and you don't think of the possible consequences."

What motivates him is a sense of obligation to his fellow EOD techs, to share the danger and burden of their chosen profession.

Back home, it's a different story. Chastain's wife, Amanda—the Air Force's 2012 Joan Orr Spouse of the Year—said, "For me and the kids, ... the way we're able to deal with it is to think that he's out there saving lives." Though her husband may not look at it the same way, "that's how we deal with it: Dad has to go away; he's doing a good thing," she said.

For the whole family, though, one thought remains the same: "If he's not there to disarm those IEDs, ... our friends' dads are going to get killed, so that's kind of how we—I guess—deal with it," Amanda Chastain said.

"I don't know any EOD techs who are in combat situations who are coming back without any problems," Amanda asserted. All of them, she explained, have a least some lingering psychological damage, especially if they've lost comrades or been wounded on deployment, as many have. After months of alertness to every potential threat, they have to adjust to a secure home environment, surrounded by family instead of enemy insurgents. It's difficult "to come back and turn that off, especially when you have kids around the house and they're running around making noises and stuff," she pointed out.

Beau's return from all three of his previous combat deployments had been hard for Amanda—who'd known him since high school—but she admitted that this time was much worse. He had nightmares for the first time and wrestled with uncharacteristic bouts of irritability and short temper.

"I could see him restraining himself all the time, which is so not him at all," she said. "For him to ever raise his voice or be short to temper is just completely out of character," she continued. "I think it was really frustrating for him because you want to be in control," but with his post-traumatic stress he really wasn't.

"I think it's a topic no one wants to discuss—it's like a shameful thing or something—but in a lot of jobs like EOD, it's just a reality," she said.

Transitioning Home

Combat airmen most commonly suffer post-traumatic stress disorder, but are often reluctant to seek help, worrying it will damage their career and ability to deploy, burdening their comrades. When an EOD is constrained from going back to the fight, "you feel like you're letting your brothers down. ... It puts more strain on the ones that are still there,"

said Chastain. Getting back to the field became one of the main impulses driving him to recover.

This mentality extends to the families as well. "There is not another career field in the Air Force that you can rely on more heavily than ours" to support one another, he said.

Though scattered to small shops worldwide and deploying only two or three at a time, EOD airmen and, by extension, their families form a close-knit community. When Beau was injured, Amanda had "EOD 'sisters'" calling from Japan and New Mexico, "checking in on me and talking it through," she said. There's "something intangible about our community that is just on another level."

The Air Force makes a conscious effort to help airmen transitioning home from combat through its Deployment Transition Center at Ramstein. Chastain's unit came back from Afghanistan four months after he got home. The Air Force flew him back to Ramstein to go through the DTC debrief and unload with his unit.

"That was cool for him and them to have closure—they could see he was doing better," Amanda commented, but she said help for the family has been much harder to get.

"I'm advocating for that a little bit, because I feel, ... at least in the Air Force, ... there's not quite enough support for families dealing with them coming back," she said.

Learning to care for its battlefield airmen has taken the Air Force time, given that historically, it's used to combat at 30,000 feet. Moreover, the effect on families of back-to-back deployments has yet to be fully understood.

"It's taking a toll on the families and I don't think that there's enough help, other than handing you a booklet saying

Left: The farmer's field in Afghanistan where Chastain—approximately five minutes after he took this picture—was shot.



Lying in the LZ for 45 minutes, one of his first thoughts was of gratitude.

“I didn’t want to get out of the Air Force,” he said. While lowering his expectations is difficult, he’s “thankful” the PT score did not disqualify him. Staying in as an EOD tech “was the one thing that I wanted to try to hold on to,” he said.

On Nov. 6, 2012—less than 18 months after his injury—Chastain re-enlisted and three days later shipped out on deployment—this time to the Middle East. The deployment is Chastain’s fifth since his six-year-old son, Ethan, was born.

“That’s all that [Ethan has] ever known,” Amanda said. For the family, Chastain’s



Top: Then Brig. Gen. Tod Wolters presents a Purple Heart to SSgt. Beau Chastain in the hospital at Camp Bastion, Afghanistan. **Above:** Chastain (c) is flanked by Col. Mark Evans (l) and Command CMSgt. Michael Edwards upon arrival at Wichita Mid-Continent Airport. Chastain’s trip home was long and arduous.

that this is normal. ... You just feel very alone in it,” Amanda said.

“It’s not like they’re not offering anything,” but the Air Force needs to support families at a deeper and more personal level in coping with reintegrating their loved ones at home, she maintained.

Amanda and the Chastain children found a workshop and day camp at nearby Fort Riley, Kan., that helped her with “coping skills” and open discussion.

“I think the Army just has that a little bit more together because they’ve had to deal with it a lot more,” she said. Especially as the war in Afghanistan winds down and increasing numbers of airmen come home for longer periods, “they’re probably going to need to do more.”

From the time he was wounded, it took Chastain almost a month to get back to the US. After that, he spent

several months in physical therapy and on crutches, unable to bear his own weight. Initially, his wound was still stitched shut and oozing. Getting his sutures removed “was probably the most pain that I’ve ever seen him in,” Amanda said. Finally, he graduated to a cane, and after nearly a year-and-a-half of rehab, he passed the Air Force physical fitness test once again.

Lucky Shot

“If the bullet had been an inch to the right, I would have lost my leg,” he noted. Instead, he’ll just have to be content with lower PT scores than he’s been accustomed to, his doctor told him.

Amanda revealed that when the helicopter finally came to pick Beau up after the ambush, Chastain chose to wait for the next one, so more seriously wounded comrades could go first.

last return—with post-traumatic stress—was “the hardest part.” Though their son and junior-high-age daughter have been “just amazing,” Amanda wonders how much longer they can soldier on. With Chastain already three months into his deployment, she explained that Ethan’s had “a really, really hard time,” worrying that his father won’t come back.

Amanda confessed she probably would have “freaked out” if he had headed back to Afghanistan, but this latest deployment brought a strange mix of emotions.

“I almost felt guilty because, in some ways, it’s easier because you’re not walking around on eggshells” to avoid frustrating him. At the same time, “I’d rather him be here,” she said. “I know things aren’t going to be magically different when he gets back, so I’m a little nervous,” she said. “However hard, we’ll get through it. ... We’re just blessed to still have him.” ■