Combat Operational Stress Responses in Our Company

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Don't ignore your buddy!!!



Combat stress is an idea that many of us are aware of, but <u>distantly</u> so.

The idea that 'we' are stressed or that anyone around us is stressed is cognitively true, but emotionally we ignore it.

Because of this emotional isolation to the idea of combat stress, we must now reevaluate those around us.

Symptoms of Combat Stress

Common Physical Signs

Common Mental and Emotional Signs

Common Physical Signs:

- Tension: Aches (headaches), pains
- Jumpiness: Easily startled, fidgety, trembling
- Cold sweats: Dry mouth, pale skin, eyes hard to focus
- Heart: Irregular, pounding; may feel dizzy or light-headed; high or low blood pressure
- Breathing: Rapid, out-of-breath; fingers and toes start to tingle, cramp and go numb
- Stomach: Upset, may vomit
- Bowels: Diarrhea or constipation
- Bladder: Frequent urination, urgency
- Energy: Tired, drained; takes an effort to move; fatigued
- Eyes: Distant, haunted
- Muscle: Spasms
- Appetite: Increased, decreased
- Skin: Rashes, hives
- Dependants: Increased use of tobacco or alcohol

Common Mental and Emotional Signs:

- Anxiety: Keyed up, worrying, expecting the worst, feeling overwhelmed
- Irritability: Complaining; easily bothered
- Attention: Poor; unable to focus or remember details
- Thinking: Unclear; trouble communicating
- Sleep: Troubled; awakened by bad dreams
- Grief: Sad, depressed; crying for dead or wounded
- Guilt: Self-blame for errors or what had to be done
- Anger: Feeling let down by leaders or others in unit
- Confidence: Low; loss of faith in self and unit; feeling helpless or hopeless
- Mindset: Cynicism, negativism

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Our job as leaders and buddies is to watch others, and ourselves, for these signs.

It seems that as the deployment reaches its midway point that the stressors of the deployment get worse:

- domestic worries
- first deployment
- casualties
- lack of mobility

- information vacuum
- sleep loss
- physical exhaustion
- dehydration/hunger



The Wrong Mindset

- Many try to ignore their stress
- Many believe the signs to be signs of weakness
- Even 'friends' make fun of soldiers for 'not being able to hack it'

It is because of these false premises that our soldiers are depriving themselves from help

Many times we see the reaction of Combat Stress, but often we do not understand what it is.

It is overlooked, not necessarily ignored, but we often use predeployment criteria as a means of understanding the reactions.

Common Reactions That Go Unchecked or Punished

- Hyperalertness
- Fear, anxiety, trembling
- Irritability, anger, rage
- Grief, self-doubt, guilt
- Physical stress complaints
- Inattention, carelessness
- Loss of hope and faith
- Depression, insomnia
- Impaired duty performance
- Hallucinations, delusions

- Erratic actions
- Outbursts
- Freezing under fire, immobility
- Terror, panic, running under fire
- Total exhaustion, apathy
- Loss of skills and memory
- Impaired speech or muteness
- Impaired vision, touch, hearing
- Weakness and paralysis

Have you been grumpy lately?



Punishment?

Our primary concern should be for the health of our troops and try to determine why it is that those individuals are acting out.

If we only punish, what are we truly achieving? Do we help the soldier and ready him for controlling his anger and/or stress, or do we add to it by giving the soldier the idea that that individual soldier is below standards and deserving of nothing.

Overview of Deployment Related Stress

There are four levels of deployment-related stress

- COSR (Combat Operational Stress Responses)
- Adjustment Disorders
- Acute Stress Disorder (ASD)
- PTSD

Adjustment Disorder

An Adjustment disorder is much more common than PTSD or ASD and usually much less serious. It occurs when an individual is exposed to stress, causing a reaction that results in significant distress or impairment.

Acute Stress Disorder (ASD)

ASD is just as significant as PTSD except ASD normally lasts only one month and has an element of dissociation to it, meaning that the individual's mind and body part company for a while.

Post Traumatic Stress Disorder (PTSD)

PTSD is the most serious because of the length of time in which the disorder lasts. It can last a month or longer and the traumatic event is often re-experienced, things that remind the person of the experience are avoided and reactions 'numbed,' and the person will feel 'keyed

up' all of the time.



The Role of the Buddy



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The buddy must not only realize the common stress factors, but be able to positively identify stress in his soldiers.

All of us are going through stressful situations and will most likely have some signs or symptoms. Most soldiers who do have signs will regain a sense of normality within a short period of time.

But it is those who do not that we must recognize and help.

- Keep unit cohesion and unit pride
- Help soldiers have stable home fronts
- Keep soldiers physically fit
- Conduct tough, realistic training
- Cross-train in key areas
- Enforce sleep discipline
- Plan for personal hygiene
- Preserve soldiers' welfare, safety, and health
- Reduce uncertainty
- Enforce individual health protection measures

Keeping the unit informed of new developments is primary. Many times we hear news (rumors) that we know not to believe, but it is only a matter of time before we begin to believe them.

These rumors about when we will leave, canceling of 'leave,' etc, causes stress beyond belief to those who trust the rumors. Proper 'real' news given out or simply reiterated is a must.

We must squash the rumors where they lay!

The organization of team events is one way that soldiers learn to pass their time and relax.

These team events should of course not be mandatory (mandatory fun is not fun) but should be extremely encouraged.

Volleyball tournaments, horse-shoe tournaments, grill outs, etc bring cohesion and relieve the stress that needs to be relieved.

Encourage your soldiers to participate in the religious service of their choice.

You should know which of your soldiers are religious and <u>allow them</u> the opportunity to practice their faith. Sometimes this may mean changing the schedule around.

Encourage Communication!!!!

- Tele-video conferences at the MWR
- Web Cams at the 'little' MWR
- Free phone cards are available
- E-mail (take the time to write a long one)
- Letters (send letters to your loved ones)
- Postcards, Birthday cards, etc

"I wish I could argue with my wife right now, at least I would be with her."

What someone said to me



Check up on your soldiers!!!

The friend must ensure that he checks in with his buddies from time to time, both individually and in a group.

Talk and listen to them; if you're a leader you can conduct sensing sessions where soldiers can express their concerns.

Of course, if anything is beyond your help or control, refer the soldier to the chaplain, mental health or combat stress control teams.

Brand New Idea!!!!!

Besides the basics (be a good friend, listen attentively, acknowledge the grievances, ask questions to help you understand) the leader can plant the seeds of new ideas and positively praise the soldier for his/her deeds and the fact that they talked with you.

"Positive praise goes a long way."



Stress Management

Stress Management

The essence of stress management is the effort to better control, mitigate, or interact with the stress in one's life.

Critical Incident Stress Management (CISM)

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Four major categories to the stress management techniques

- 1) Techniques to avoid or reduce exposure to stressors
- 2) Techniques to reappraise or reinterpret stressors
- 3) Techniques to reduce stress arousal
- 4) Techniques to ventilate the stress arousals

Techniques to avoid or reduce exposure to stressors

To avoid or reduce exposure to the stressors (the stimulus that causes, evokes, or is otherwise strongly associated with the stress response) you can:

- problem solve,
- use proper time management,
- eat and drink well (hard to do here I know)
- avoid <u>known</u> stressors if possible.

Techniques to reappraise or reinterpret stressors

To reinterpret the stressors will take counseling involving cognitive reframing and even psychotherapy.

These of course may not be available.

The stage we need is the reduction of stress arousal and even the fourth stage, ventilating those stress arousals.

Techniques to reduce stress arousal

This involves proper sleep patterns, relaxation (meditation, prayer, etc) and may even include medications.

(Medicine does not mean you are 'psycho,' only that your body may be imbalanced)

Techniques to ventilate the stress arousals

To properly ventilate the stress arousal you can:

- Exercise (sweat)
- Cry
- Hydrate and urinate
 (all involving the release of fluids that contain toxins).
- Also is the process of catharsis, professional counseling in order to release or purge the stress.

These are the facts!

But will you apply them?

Your going home

There are conflicting expectations

Your going home
 Things are going to be different

There are conflicting expectations

- Your going home
 Things are going to be different
 Redirect the Future
- There are conflicting expectations

Your going home

There are conflicting expectations
 Everyone is expecting something else

Your going home

- There are conflicting expectations
 Everyone is expecting something else
 Don't fix the problems
- Things can get better

Your going home

There are conflicting expectations

Things can get better
 If you ask for help

Conclusion

Combat Stress is a reality that will take the hearts of our soldiers if not acknowledged and dealt with.

We must help our brothers and sisters in need before it is too late.

Useful Resources for the Future

- Military OneSource www.militaryonesource.com 1-800-342-9647
- American Red Cross
- Veterans Affairs
- Local Mental Health Service look up 'counseling' in the yellow pages
- Local Pastor yellow pages again if you need
- 911

Resources Used

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