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Team Functions

Immediate Actions

Readiness Strategies

# COSC PROGRAM SMART PACK



**MCO 5351.1 outlines requirements for Combat and Operational Stress Control (COSC) programs. Marine Corps leaders should read the COSC Doctrine (MCTP 3-30E) to learn more about COSC concepts.**

All Marines should build psychological resiliency by developing and employing knowledge, skills, and tools to manage operational stress issues and foster a climate to reduce stigma.

Commanders should:

- Maximize force preservation and readiness through prevention, identification, and early intervention of combat and operational stress issues, whether deployed or in garrison.
- Promote psychological resilience and the long-term health of Marines, attached Sailors and their families.
- Promote the five core leader functions of Strengthen, Mitigate, Identify, Treat, and Reintegrate.
- Establish a climate where Marines can seek assistance for stress reactions without fear of reprisal.
- Use COSC concepts to enhance risk monitoring and inform force preservation efforts.

Each Marine has a role to play in his or her unit's COSC efforts and should work collaboratively to address unit and individual Marines' stress control needs. Every commander will determine how to incorporate COSC requirements and principles into a command program to best support mission and build and maintain a favorable command climate.

## COSC Best Practices

- Appoint an effective, respected Marine as the unit's COSC representative to advise on COSC issues, know the trained Operational Stress Control and Readiness (OSCAR) team members, and liaise with the COSC Regional Training Coordinators (RTCs).
- Select the right Marines for OSCAR Team Training, they are the unit's trained stress control capability, and advocate for that OSCAR Team to operate within the unit.
- Strengthen Marines against stress-related issues by weaving COSC skills, knowledge, attitudes, and tools into routine field trainings. Use COSC concepts during training exercises with decision points to evaluate, critique, and debrief COSC and OSCAR Team incorporation.
- Contact the COSC RTC to build your unit's own OSCAR training team for further developing and sustaining COSC skills. OSCAR team members can become trainers and master trainers.
- Additionally for deploying units, integrate COSC concepts throughout the deployment training cycle:
  - ⇒ Discuss expectations for the deployment.
  - ⇒ Share experiences/lessons learned from previous deployments.
  - ⇒ Practice COSC concepts at routine exercises.
  - ⇒ Use your OSCAR extenders and mental health professionals to inform decision making and develop deployment cycle activities specific to the unit's needs.
  - ⇒ Use OSCAR team members and trainers to lead COSC discussions, hip pocket briefings, trainings, such as Deployment Cycle Training (DCT), and to lead decompression efforts.
- Encourage OSCAR Team activities throughout the deployment cycle; they are trained to engage Marines and discuss real issues before they escalate.

# COSC PERSONNEL

## COSC



**The COSC program, per MCO 5351.1, tasks two personnel types with administrative duties.**

The Marine Corps implements COSC principles across the Fleet Marine Force—in theater, in garrison, and at home—to maximizing force preservation and readiness by preventing, identifying, and managing stress.

### COSC Regional Training Coordinators (RTCs)

Four civilians, one at each MEF and MARFORRES, serve as a central point of contact on COSC issues.

- COSC RTCs advise commanders on COSC programs, maintain OSCAR master trainer certification, oversee OSCAR Team Training courses, teach OSCAR master trainer and train-the-trainer courses, and give status reports to HQMC on a quarterly basis or as requested. COSC RTCs provide guidance to COSC representatives and OSCAR Teams.
- COSC RTCs make staff assist visits to COSC programs to ensure compliance with Marine Corps directives, monitor the quality of local training, analyze program challenges, and recommend best practices. They provide COSC training to Deployment Readiness Coordinators and Uniformed Readiness Coordinators, Family Team Building, Embedded Preventive Behavioral Health Capability (EPBHC) staff, formal schools, and others as needed.

### COSC Representatives

Each battalion/squadron or equivalent level command appoints a Staff Non-Commissioned Officer (SNCO) or officer to be the COSC representative.

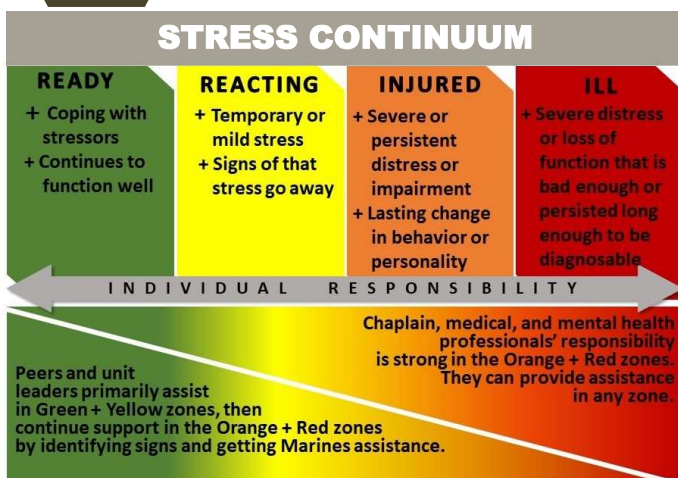
- COSC representatives advise commanders on COSC requirements and programs. Representatives know COSC doctrine and policies and help develop command plans and policies, incorporating COSC principles and policies.
- Representatives ensure all officers, SNCOs, and Non-Commissioned Officers are familiar with COSC principles and tools and that all COSC training requirements are completed and reported in the Marine Corps Total Force system.

**COSC RTCs and COSC representatives do not provide clinical counseling or diagnoses.**

## OSCAR TEAM



**Built by OSCAR Team Training, OSCAR Teams act as sensors for commanders by noticing small changes in behavior and taking action early to build resilience and keep Marines in the fight.**



Team members, trained Marines who identify stress, apply mitigation strategies in the Yellow Zone, refer distressed Marines in the Orange & Red Zones to higher levels of support, and follow up to ensure Marines received help\*

Extenders, medical staff, Chaplains, corpsmen, and religious programs specialists, provide advanced support in Yellow and Orange Zones\*

Mental health professionals, (MHPs) within the unit in garrison and in theater, provide support in the Yellow and Orange Zones and coordinate diagnosis and treatment in the Red Zone\*\*

OSCAR Team Training brings team members, extenders, and MHPs together, combining their skillsets. \*Team members and extenders do not provide clinical counseling or diagnoses. \*\*MHPs can make a fitness for duty determination.

# COSC TRAINING

**COSC**



## HQMC COSC Capability develops courses to help Marines manage stress.

### Operational Stress Control and Readiness (OSCAR) Generation III team training (4 hours minimum)

COSC MCO 5351.1 requires OSCAR teams at all battalion-level or equivalent commands for 5% of the unit or 20 personnel, whichever is greater.

- Educates Marines on the full spectrum of stress reaction to help Marines prevent, identify, and mitigate negative outcomes.
- Teaches four foundational concepts: the Stress Continuum, the Five Core Leader Functions, the Stress Decision Flowchart, and Stress First Aid.
- Provides teams with job aids on topics such as self-care, resiliency, mental agility, optimism, and sleep that can be used to train other Marines.
- Empowers team members to support Marines in facing everyday stressors and prevents the onset of critical stressors or illness and injury.

### Deployment Cycle Training (DCT; three 60-minute briefs per audience)

- Briefs teach intervention-focused skills to warriors and leaders throughout the deployment cycle to maintain warfighting capabilities.
  - ⇒ Pre-deployment: 30 days prior to deployment; focuses on sources of stress injury, prevention techniques, cohesion, resiliency, peer support, and referrals
  - ⇒ Re-deployment: 15-30 days prior to return; focuses on stress mitigation techniques and TBI protocols
  - ⇒ Post-deployment: 60-90 days after deployment; focuses on decompression, small unit support, reunion phase, garrison and family reunion resources
- Material is designed for implementation at the appropriate point in the deployment cycle, while affording commanders flexibility to meet unit needs.

### Marine Awareness and Prevention Integrated Training (MAPIT)

- MAPIT is a tiered initiative designed to improve the total fitness of Marines and mission readiness.
- Teaches prevention of suicide, substance misuse, and domestic and child abuse.
- Reviews COSC concepts as related to behavioral health issues, but does not meet OSCAR requirement.
- Includes three phases that reflect career progression: entry level training (MAPIT ELT), sustainment via annual Unit Marine Awareness and Prevention Integrated Training (UMAPIT 3.0) with the MAPIT Dashboard, and continuing education (MAPIT for Leaders).

MAPIT ELT (3 hours)	UMAPIT 3.0 (90 minutes minimum)	MAPIT for Leaders (2 hours)
<ul style="list-style-type: none"> <li>• Built for entry-level schools, prior to arrival at the first duty station</li> <li>• Introduces behavioral health (BH) topics through 1000- and 2000-level training and readiness standards</li> </ul>	<ul style="list-style-type: none"> <li>• All Marines annually receive UMAPIT 3.0, which builds on prior BH training</li> </ul> <p><b>MAPIT Dashboard (30-45 minutes)</b></p> <ul style="list-style-type: none"> <li>• Supplements UMAPIT 3.0 with guided discussions, which can be led by anyone in any situation</li> </ul>	<ul style="list-style-type: none"> <li>• BH content designed for Officer and Enlisted Professional Military Education (Expeditionary Warfare School, Advanced Course, and Career Course)</li> <li>• Builds on ELT, UMAPIT 3.0, and participants' company-level experience</li> </ul>



## FIVE CORE LEADER FUNCTIONS

1. **Strengthen**—Leaders must strengthen their Marines to enable them to successfully endure and master the stressors they face during operational deployments, garrison life, and in their personal lives. Strengthening Marines before exposure to extreme stress can help prevent stress injuries and illnesses. Many of the actions leaders already take to prepare their Marines for their operational duties can also, with only a slight change in focus, strengthen them against stress reactions, injuries, and illnesses. Strengthening for resilience and training for mission accomplishment are two strongly linked responsibilities of leaders.



2. **Mitigate**—Leaders also must mitigate the stress of their Marines to keep them functioning optimally and to prevent the negative effects of stress reactions and stress injuries. The word “mitigate” literally means to reduce in force or intensity. Since no amount of strengthening will make anyone completely immune to stress, the crucial second step for leaders to maintain the psychological health of their units and family members is to reduce the force and intensity of the stressors they experience whenever possible.

3. **Identify**—Identifying means closely monitoring every available indicator of Marines’ functioning and performance to quickly recognize when they need help. Identifying involves more than looking, listening, and feeling for signs of possible breakage or wear—it means anticipating these inevitabilities. Leaders must identify not only the stress reactions, injuries, and illnesses experienced by their Marines, but also the day-to-day stressors they encounter so they can recognize occasions of high risk for stress problems. Whereas strengthening and mitigation are activities to promote primary prevention, the core function of identification makes secondary prevention possible—timely interventions that may prevent small problems from becoming big ones. Leaders need to know how to recognize a Marines’ stress zones and which sources of stress may be most likely to push them further to the right—away from health and readiness—on the stress continuum model.

4. **Treat**—Leaders must ensure that Marines who need help receive assistance from counselors, chaplains, embedded mental health providers (EMHP), and other professionals trained to treat stress issues. Leaders cannot do this important work alone. They must assemble a network that includes Marines trained in Combat and Operational Stress Control (COSC) principles, including Operational Stress Control and Readiness (OSCAR) Team Members, medical and religious ministry Extenders, and EMHPs, and installation behavioral health personnel.

5. **Reintegrate**—Leaders also must ensure that Marines who recover from stress injuries and illnesses do not suffer any stigma or career degradation. Leaders must retain and fully use Marines who have recovered, or are in the process of recovering, from stress injuries and illnesses. For leaders, reintegration includes evaluating and forming judgments about Marines’ psychological fitness and suitability for duty, assigning recovering Marines to duties that make the best use of their capabilities, and changing whatever negative attitudes exist among unit members that might interfere with accepting these individuals back into the unit.

## YOU'RE NOT IN THIS ALONE

These resources support Marines at several points on the continuum. Know these resources and how someone might access them locally. You'll be able to refer Marines to these resources. Resources are marked with the Core Leader Function (SMITR) they best support: Strengthen (S), Mitigate (M), Identify (I), Treat (T), and/or Reintegrate (R).

**S/M:** Semper Fit & Marine Corps Family Team Building

**S/M/I/R:** New Parent Support Program

**M/I/T:** Military and Family Life Counselors

**M/I/T/R:** Community Counseling and Prevention, Family Advocacy Program,  
Substance Abuse Counseling Center

- Semper Fit provides health promotion resources and activities ranging from outdoor recreation to individualized fitness and nutrition plans.
- Marine Corps Family Team Building provides skill-building tools for individual and family development.
- Chaplains offer 100% confidentiality and are a tremendous resource to commanders and Marines.
- New Parent Support Program provides skills to active duty parents for the everyday demands of parenting in the military. It is prevention-focused, offers education and support to families who are expecting a child or have at least one child age 5 or under.
- Military and Family Life Counselors are licensed counselors at the unit and installation, in DoD schools, and within child development centers to augment existing behavioral health services. They offer confidential, non-medical, short-term counseling for individuals, families, and groups. In duty to warn scenarios, MFLCs will conduct a warm handoff to appropriate providers.
- Community Counseling Program provides short-term, evidence-based interventions and non-medical counseling for individuals (children, adolescents, and adults), couples, families, and groups. They also provide crisis intervention and skills to address everyday stressors.
- The Family Advocacy Program (FAP) is designed to address child and domestic abuse through prevention, identification, intervention, and treatment. FAP staff are trained to assist in protecting victims and supporting families. All FAPs provide required commander orientation courses upon gaining command of a unit.
- Substance Abuse Counseling Centers (SACC) provide prevention training and offer tools that support the prevention of substance abuse or dependency disorders. Additionally, the SACC provides wellness treatment and aftercare for Marines who've been unit-directed to receive care or by those who've sought out treatment on their own.

## YOU'RE NOT IN THIS ALONE: LOCAL RESOURCES

Chaplain & Religious Personnel (RPs): \_\_\_\_\_

Medical Staff: \_\_\_\_\_

Mental Health Professionals (MHPs): \_\_\_\_\_

Substance Abuse Counseling Center (SACC): \_\_\_\_\_

Community Counseling Program: \_\_\_\_\_

Family Advocacy Program: \_\_\_\_\_

New Parent Support Program: \_\_\_\_\_

Military Family Life Counselor (MFLCs): \_\_\_\_\_

COSC Representative: \_\_\_\_\_

Embedded Preventive Behavioral Health Capability (EPBHC): \_\_\_\_\_

Deployment Readiness Coordinator (DRC): \_\_\_\_\_

OSCAR Team Extenders: \_\_\_\_\_

OSCAR Team Members: \_\_\_\_\_

## THE STRESS CONTINUUM



- ♦ The Stress Continuum model provides us with a common language to talk about stress.
- ♦ This model helps us identify levels of stress in ourselves, our peers and units. The stress continuum can be used both in combat, in garrison, and in everyday life. One of the main goals is to keep service members in the Green Zone as much as possible and return them to that zone as quickly as possible after leaving it.
- ♦ The gray bar across the continuum illustrates how across the continuum, individuals have a personal responsibility to be accountable and proactively manage their stress.
- ♦ It's our primary responsibility to support fellow Marines in the Green and Yellow Zones, where peer support is effective. We continue peer support in the Orange and Red Zones by identifying signs and getting Marines assistance from experienced professionals. Even at the handoff to a professional, our role doesn't end.
- ♦ Remaining engaged and letting Marines know you are interested in their welfare reinforces a sense of belongingness and aids in their recovery.

## GREEN (READY) ZONE

- Good to go
- Prepared
- Sleeping enough
- Well trained
- Fit and tough
- Sense of humor
- Calm and steady
- Eating well
- Good decisions

- ⇒ Keep wellness a priority and work to stay in the “Green Zone.”
- ⇒ Grow your problem-solving and conflict management skills.
- ⇒ Monitor yourself and others (check in often) for signs of distress or loss of function.

If the distress looks **SEVERE OR PERSISTENT**, proceed to Orange Zone.

## YELLOW (REACTING) ZONE

- Feeling anxious, sad, or angry
- Cutting corners on the job
- Trouble sleeping
- Withdrawing from friends and family
- Worrying
- Being short-tempered
- Eating too much or too little
- Inability to concentrate

- ⇒ Recognize when you or peers are in the Yellow Zone and take action to return to the Green Zone.
- ⇒ Promote use of peers, family, chain of command, chaplain, MCCS resources, and the DSTRESS Line (877-476-7734).
- ⇒ Ensure adequate sleep and rest, PT, and nutrition.
- ⇒ Check in—**SAY SOMETHING**—and coordinate if needed.

If the distress looks **SEVERE OR PERSISTENT**, proceed to Orange Zone.

## ORANGE (INJURED) ZONE

- More severe or persistent distress or impairment
- Lasting personality change
- Feelings of guilt or shame
- Losing control of emotions or thinking
- Unable to enjoy usual activities
- Difficulty sleeping

- ⇒ Always consider professional help in this zone.
- ⇒ Connect to a chaplain or medical.
- ⇒ The earlier you get help, the higher the possibility you will heal.
- ⇒ Promote positive peer support.
- ⇒ Don’t allow Marines to withdraw from others.
- ⇒ Mentor back to full duty and function.
- ⇒ Check in—**SAY SOMETHING**—and coordinate if needed.

If the distress significantly impacts **CAREER OR RELATIONSHIPS**, proceed to Red Zone.

## RED (ILL) ZONE

- Severe distress or loss of function persisting long enough to be diagnosable
- Requires intervention
- Unmanaged symptoms may significantly impact career and family

- ⇒ Check in—**SAY SOMETHING**—and coordinate if needed.
- ⇒ If you think a Marine is in the Red Zone, refer him or her to medical.
- ⇒ Only a qualified medical officer can diagnose disorders.
- ⇒ Follow up and ensure treatment compliance.
- ⇒ If possible, reintegrate with unit and restore to full duty.

**YOUR OSCAR TEAM POC:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## LEADER ACTIONS

**Leaders must recognize when Marines' confidence in themselves, their peers, or leaders is shaken or when units have lost cohesion because of casualties, changes in leadership, or challenges to the unit.**



Watch out for these three signs of stress:

**1 Body.** Heart pounding hard, even at rest. Shaking, even when not in danger. Sweating, even at rest and when not feeling hot. Loss of control of bladder or bowels. Part of one's body going numb. Being

unable to move part of one's body. Temporary loss of vision or hearing.

**2 Thinking.** Loss of ability to recall memories. Memories that keep intruding on thinking, even when trying not to remember them. Memories that are so vivid they seem like they are happening now

rather than in the past. Painful thoughts or images that keep popping into awareness and can't easily be pushed aside. Violent images or thoughts that keep popping into awareness and can't easily be pushed aside. Loss of ability to mentally concentrate and focus.

Losing track of time and surroundings.

**3 Feeling.** Intense, uncharacteristic anger. Sudden outbursts of rage. Intense, uncharacteristic fear. Sudden attacks of panic. Recurring, painful feelings of guilt or shame. Intense and persistent sadness.

### SIGNS OF STRESS

Talk to and listen to individuals Ask "How are you doing?" and other open-ended questions. Listen for statements like these:

*"I can't stop seeing the same scene replayed over and over again in my mind."*

*"I keep waking up from the same nightmare."*

*"I don't have any energy anymore."*

*"It was all my fault."*

*"I don't trust anyone in this unit any longer."*

*"I can't slow down my heart rate."*

*"I haven't slept in weeks."*

*"My appetite is gone, and I have lost a lot of weight."*

*"I am afraid I might lose it and hurt someone."*

## Support those experiencing stress

### TAKE



### ACTION

Stay calm, spread calm:

- Be patient and pay attention to those showing signs of distress.
- Listen to individuals who wish to share their stories and emotions, and remember there is no wrong or right way to feel.
- Be friendly and compassionate even if people are being difficult.
- Offer accurate information about a mishap and the resources available to help Marines and families understand the situation.
- Make sure that you are aware of your own emotional and physical reactions; seek assistance if you are struggling with signs of stress.
- Help Marines contact friends or loved ones who can support them. Relationships are invaluable during stressful times.
- Steer Marines toward helping themselves, provide resources, and maintain empathy.

## DON'T'S FOR LEADERS

**Do not** force people to share their stories with you, especially very personal details (this may decrease calmness in people who are not ready to share their experiences).

**Do not** give simple reassurances like “everything will be OK” or “at least you are alive” (statements like these tend to diminish calmness).

**Do not** tell people what you think they should be feeling, thinking or doing now or how they should act (this decreases self-efficacy, i.e.,

self-estimation of his or her own ability to cope with the situation; sense of personal power).

**Do not** tell people why you think they have suffered by alluding to their personal behaviors or beliefs (this also decreases self-efficacy).

**Do not** make promises that may not be kept (unkept promises decrease hope).

**Do not** criticize existing services or activities in front of people in need of these services. (This undermines an environment of hope and calmness.)

## RESOURCES

- Follow the R.A.C.E. protocol (Recognize the signs. Ask if the Marine is thinking about suicide. Care with words and actions. Escort Marine to help.)
- Promote hope. Remind people of the available help and services when they express fear or worry and as they recover.
- Encourage Marines to reach out to the confidential, 24/7 DSTRESS Line. Call 877-476-7734, or chat at [dstressline.com](http://dstressline.com). If at Okinawa or Iwakuni, call 098 970 7734 or DSN 645 7734. Speak anonymously with active duty Marines, veteran Marines, licensed counselors, and others who understand Marine culture. It's good to have that number in your phone—you never know when a fellow Marine might need it.
- The Veterans Crisis Line (also called Military Crisis Line) also operates 24/7 and is a confidential resource for active duty and retired Marines. Call 800-273-8255 and press 1, text 838255, or chat at [veteranscrisisline.net](http://veteranscrisisline.net). In Europe, call 00800 1273 8255 or DSN 118. In Korea, call 0808 555 118 or DSN 118. In Afghanistan, call 00 1 800 273 8255 or DSN 111.
- Refer Marines in crisis to an embedded mental health counselor, a chaplain, or installation Marine Corps Community Services programs (if not deployed).
- MCTP3-30E Combat and Operational Stress Control is a great resource for commanders and others.
- MAPIT Dashboard: Behavioral health material posted on the Gear Locker can help you lead small group discussions about suicide.

**MARINE** & Family

**OSCAR TRAINING  
SUPPLEMENT**

## SELF-CARE TIPS FOR MARINE LEADERS

All Marines experience stress on the job and in their personal lives. As a Marine leader, you are not immune, and have the added responsibility of monitoring your Marines' stress levels.

But to take care of others, you must first take care of yourself.



### FIRST STEPS

#### TAKE



#### ACTION

**1 Take a pause.** Step away until you can think clearly and calm down.

**2 Visualize a better**

**outcome.** Picturing and focusing on the outcome you want can help you work toward it, even when you're stressed.

**3 Try tactical breathing.** Breathe in for a slow count of four, hold for a count of four, and then breathe out for a slow count of four. Repeat for several minutes. Meditating and visualizing a positive place can slow down your heart rate.

**4 Relax your muscles.** Tensing and then relaxing your muscle groups can relieve stress and help you fall asleep. Tense the muscles in your toes, hold for five seconds, and release. Work your way from your calves to your neck.

### SOCIAL/SPIRITUAL

**1 Know your triggers.** Counter your triggers with positive coping statements. Write down a simple, positive statement that you could recite to help you get through the stressful situation.

**2 Meet your spiritual needs.** Some people find strength in some form of prayer or by discussing their concerns with a chaplain.

**3 Seek out social support.** Research shows that spending time talking with trusted unit members or friends can make you feel better and have a significant effect on your health.

**4 Listen closely.** Effective communication skills help minimize stress problems both for yourself and others.

**5 Talk or write about your experiences.** Talking and writing can reduce tension and relieve stress.

### DEVELOP GOOD HABITS

**1 Eat nutritious food.** Avoid foods with lots of salt and sugar. Reduce your intake of caffeine and alcohol, and drink plenty of water.

**2 Exercise.** Working out encourages self-reflection, and chatting with someone while working out helps reduce stress.

**3 Sleep.** Often 1–2 nights of restful sleep can help you recover. Tell a doc if you can't get to sleep or stay asleep.

**4 Listen to relaxing music.** Finding uplifting music can significantly lift your mood and improve mental outlook.

**5 Laugh.** Cultivating a healthy sense of humor can help you look at stressful situations differently.

**6 Carry on.** Continuing with life is the best way to honor the fallen. Don't blame yourself. You wouldn't place blame on another Marine.

**YOUR OSCAR TEAM POC:** \_\_\_\_\_



## ARE YOU FEELING THESE SIGNS OF DISTRESS?

### PHYSICAL

- Exhaustion
- Inability to fall asleep or stay asleep
- Sweating, heart pounding
- Nausea, frequent urination, or diarrhea
- Jitters, trembling, or jumpiness
- Numbness, tingling, or total loss of function of limbs or other body parts

### MENTAL

- Difficulty concentrating, confusion
- Inability to make decisions, to process information
- Memory loss

### EMOTIONAL

- Fear, worry, extreme nervousness
- Irritability, anger
- Mood swings
- Despair and sadness

### BEHAVIORAL

- Carelessness or recklessness
- Outbursts of anger or aggressiveness
- Staring into space, sometimes called the “thousand-yard stare”
- Inability to do the job
- Increased use of alcohol or drugs
- Misconduct or crime

### SPIRITUAL

- Guilt
- Shame
- Confusion
- Bitterness
- Helplessness
- Hopelessness



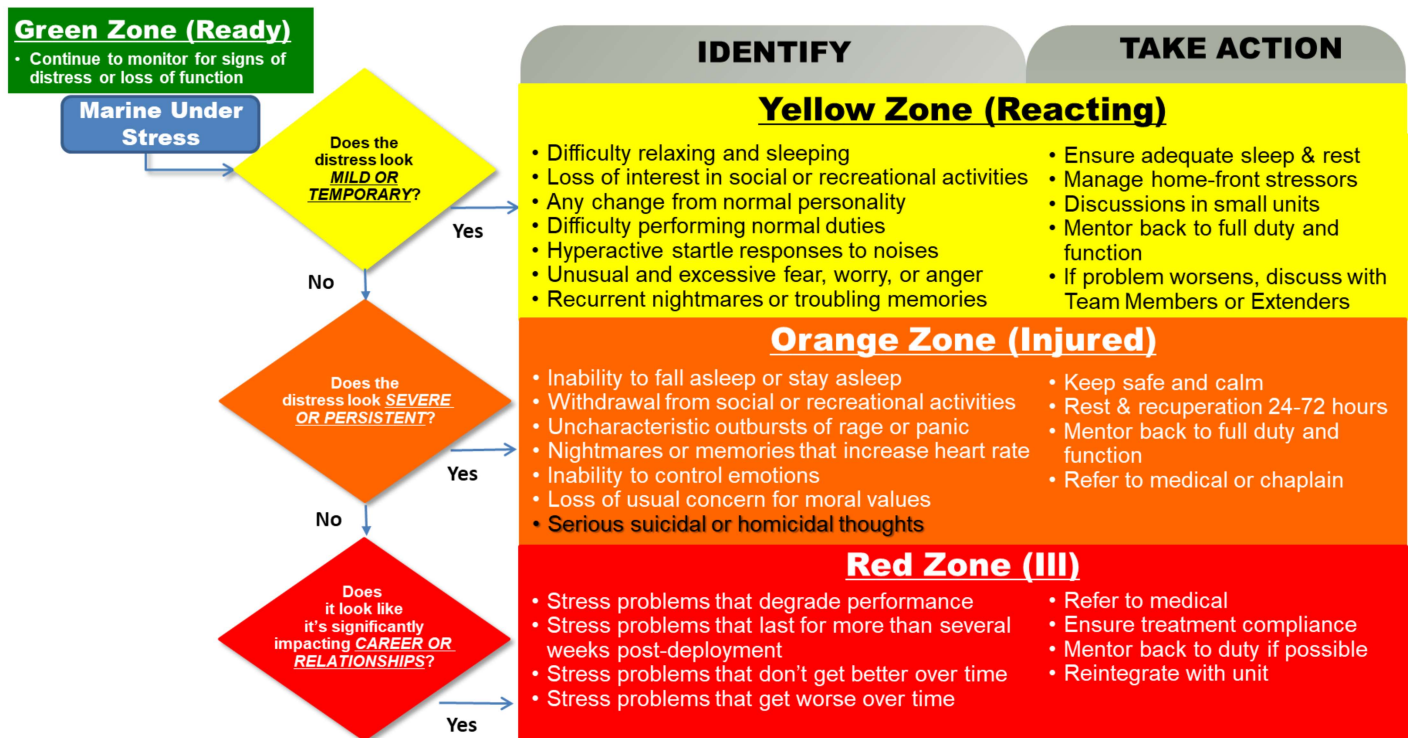
## IF SELF-CARE ISN'T ENOUGH . . .

- Talk to other Marines (including OSCAR team members) to help you manage issues. Check in with your chain of command. Confide in a Chaplain.
- Contact **Marine Corps Community Services (MCCS)** on base: [usmc-mccs.org/index.cfm/services/support/information-and-referral](http://usmc-mccs.org/index.cfm/services/support/information-and-referral).
- Reach out to the confidential, 24/7 **DSTRESS Line**. Call **877-476-7734**, or chat at [www.usmc-mccs.org/services/support/dstress-line](http://www.usmc-mccs.org/services/support/dstress-line). If at Okinawa or Iwakuni, call 098 970 7734 or DSN 645 7734. Speak anonymously with active duty Marines, veteran Marines, licensed counselors, and others who understand Marine culture. It's good to have that number in your phone—you never know when a fellow Marine might need it.
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- Seek help from a corpsman; visit a clinic/hospital, where you can speak to medical personnel or a counselor. Visit the Community Counseling Program (CCP) or a Military Family Life Counselor (MFLC).

**YOUR OSCAR TEAM POC:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

# STRESS DECISION FLOWCHART



## PERSONALITY, MOOD, AND EMOTION

**Personality** defines us as individuals. When getting to know people, we can identify a baseline of their personality, how they behave in general. Personality is shaped by early life experiences and tends to be stable over time. Personality trait examples are: outgoing, energetic, talkative, polite, kind, or friendly. There is some personality change as we age and mature—meaning personality changes can happen but rarely over night. When someone's personality suddenly changes, take notice. That's a sign of a life-changing event. People who have experienced Orange Zone stress injuries or Red Zone stress illnesses can experience significant personality changes, a signal that help is needed.

**Mood** is flexible, a shorter-term state, typically lasting hours or days. We may not be fully aware of good or bad mood. Do you ever wake up in a bad mood? This is common, and you could feel that way for most of the day. Unexpected events, either positive or negative, could also send us into a mood. Mood can also be an indicator of stress.

**Emotions** are more specific and dynamic than moods. Emotions are known to change with high frequency and last for a short time. For example, we can become angry quickly or surprised quickly. Emotions tend to replace one another, making it hard to be both happy and sad at the same time. Emotions can be very specific and produce immediate reactions when triggered by events. For example, surprise is often characterized by: raised eyebrows, widened eyes, open mouth and jumping back or maybe yelling or gasping. Surprise can trigger the fight-or-flight stress response. When startled, people may experience a burst of adrenaline that helps prepare the body to either fight or flee. Emotions are truly indicators of stress.



## STRESS FIRST AID TIPS FOR LEADERS

**When a Marine hits the Orange Zone, first aid is needed. Four stressors are most likely to shift someone into Orange:**

**LIFE THREAT:** Sensing extreme danger, which could result in death, to self or others.

**LOSS:** Grief due to the loss of close comrades, leaders, family members, friends, or other loved ones. This can also include loss of role, functioning, relationships, and values.

**INNER CONFLICT:** Psychological and emotional conflict that results from acting outside of one's morals or values, from an inability to prevent harm to others, or by contributing to—or not preventing harm—to a fellow Marine. Indications for inner conflict include the words: could've, should've, why me, if only.

**WEAR AND TEAR:** The result of fatigue and accumulation of prolonged stress, including from non-operational sources, without sufficient rest and restoration.



Use Stress First Aid (COSFA)

- Preserve life
- Prevent further harm

- Promote recovery

1. **CHECK:** Watch and listen for unusual stressors, severe distress, and changes in behavior.
2. **COORDINATE:** Inform chain of command (at least one level up), refer Marine to care provider, and follow up.
3. **COVER:** Recognize danger posed by or to a stressed person. Neutralize the danger. Keep person safe until he or she recovers.
4. **CALM:** Help the person relax. Use tactical breathing. Refocus the Marine's thinking.



5. **CONNECT:** Spend time with Marine; encourage peer support.
6. **COMPETENCE:** Encourage and mentor Marine back to full function. Retrain if necessary.
7. **CONFIDENCE:** Offer positive reinforcement as Marine reintegrates with unit. Give the Marine increasing responsibility.

### BEFORE THERE IS A CRISIS

- 1 Leaders must know their Marines. Know their strengths and weaknesses. Know the challenges they face at work and at home.
- 2 Recognize when Marine's stress level moves from mild to moderate to severe.
- 3 Ensure your unit has a fully trained Operational Stress Control and Response (OSCAR) team that is ready to respond.
- 4 Check your unit's training records to make sure every Marine has had Unit Marine Awareness and Prevention Integrated Training (UMAPIT).
- 5 Stay in contact with stakeholders: your installation's Behavioral Health staff, your Embedded Preventive Behavioral Health Capability staff, your chaplain, and Navy mental health providers. Read the Combat and Operational Stress Control doctrine (MCTP 3-30E). It contains helpful information.

## BECOME AN ACTIVE GRIEVER



The Department of Veterans Affairs encourages the bereaved to be active, not passive, participants in grief, and to consider these four tasks of grief, developed by psychologists William Worden and Therese Rando:

- **Accepting the reality of your loss.** The first task of grief is breaking through the denial to an understanding that the death has occurred and can't be reversed.
- **Mourning the death of a loved one.** Although distracting yourself from the pain might temporarily make you feel better, a broken heart must heal. If you don't allow yourself to grieve, your sorrow may return in more painful ways.
- **Adjusting to the environment in which your loved one is missing.** It can take time to fully appreciate the new roles that you'll need to take on and the skills you will need to learn. Reach out for support when you need it.
- **Forming a new identity.** Be patient with yourself as you form new social connections and slowly try to create an identity that is not intertwined with your loved one.

—Military One Source

### **Additional resources:**

- Military One Source: [militaryonesource.mil](https://militaryonesource.mil)
- Gold Star Legacy: [goldstarfamilies.com/grief.asp](https://goldstarfamilies.com/grief.asp)
- Tragedy Assistance Program for Survivors (TAPS): [taps.org/publications](https://taps.org/publications)



## **Coping with Loss and Understanding Grief**

### **What is Loss?**

We all experience loss throughout our lives. Loss can take many forms and can often be sudden, unexpected, and painful. The death of a loved one, a friend, or a fellow shipmate or Marine is a type of loss many of us may have experienced. Death is not the only type of loss we experience. Loss can come in the form of the ending of a close relationship (a divorce or a break-up); a transition such as a career change or a PCS; sustaining a wound or an injury or learning that one has developed an illness (loss of health) can also be a loss. Loss might be realizing that the goals you set for yourself prior to your wound, illness, or injury will have to be modified or that your way of life and perhaps family roles will be changed in many ways. It is normal to mourn and respond to loss in our lives.

### **Grief and Coping with Loss**

The process of coping with loss, or the grieving process, is different for everyone. Each person experiences grief in their own way and own time. If you have experienced a loss, you may find that the emotions and the way you feel and the intensity of these feelings changes over the course of time. You may find yourself experiencing grief in none, one, a few, or all of the stages described below.

- Denial/Isolation: No, this isn't what's happening to me.
- Anger: This isn't fair. I don't deserve for this to happen.
- Bargaining: If "you" make this problem or situation go away, I promise that I will do the following
- Depression: Feeling intense sadness or fatigue
- Acceptance: Coming to terms or adjusting to the situation at hand; being at peace with the situation; adapting

### **Social Support: Reaching Out and Accepting Help**

Reaching out to your support network of family and friends and accepting support when you are grieving is an important part of coping with your loss. While you may find yourself wanting quiet time or time alone, it is important not to isolate yourself. You may find that joining a peer support group with individuals who have experienced a loss similar to yours is helpful.



## Professional Support and Local Resources

It may be that you feel overwhelmed by your grief or that additional support is needed to help you cope with your loss. There are many helping resources available to you and your family, and it is good to reach out for help when you need it. Your local MTF, branch health clinic, and Fleet and Family Support Center can help connect you with professional support. Your local Fleet and Family Support Center can assist you during times of transition including career and other life changes, and provide individual and family counseling resources. Contact your local Fleet and Family Support Center for assistance or additional resources.

## Additional Resources

Navy Leader's Guide for Managing Sailors in Distress

<http://www.med.navy.mil/sites/nmcphc/Documents/LGuide/index.aspx>

Limb Loss, Grief, and Coping: [http://www.med.navy.mil/sites/nmcphc/Documents/health-promotion-wellness/wounded-ill-and-injured/Amputation/WII\\_Amputation\\_LimbLossGriefCoping.pdf](http://www.med.navy.mil/sites/nmcphc/Documents/health-promotion-wellness/wounded-ill-and-injured/Amputation/WII_Amputation_LimbLossGriefCoping.pdf)

Military OneSource: <http://www.militaryonesource.mil/casualty/understanding-grief-and-loss>

Vets4Warriors: <http://www.vets4warriors.com/>

inTransition: <https://www.pdhealth.mil/resources/intransition>

Real Warriors Campaign: <http://www.realwarriors.net/>

Family members, friends, and fellow shipmates and Marines know each other best and are in a position to notice changes of behavior that indicate a peer may be in crisis. Medical team members and any other individuals in contact with a Sailor or Marine are also in a position to identify someone who may be in crisis and in need of help. You should seek professional help if you notice an individual exhibiting any of the following signs:

- Threatens to hurt or kill him/ herself or talks about wanting to hurt or kill him/herself
- Looks for ways to kill him/herself by seeking access to firearms, available pills, or other means
- Talks or writes about death, dying or suicide

**Do not leave the person alone. Call 911, seek immediate assistance from a healthcare professional and/or call the Military Crisis Line.**





## DEFEATING THE STIGMA OF SEEKING HELP

	ORGANIZATIONAL LEVEL	UNIT LEVEL	INDIVIDUAL LEVEL
<b>STIGMA IMPACT</b>	Policies that limit opportunities based on labels rather than proven abilities	Ostracizing unit members who are recovering from psychological injuries	Demoralization and loss of hope
<b>WAYS TO DEFEAT STIGMA</b>	Determining fitness and deployability based on performance rather than worst-case expectations	Setting an example of respect and fairness and having zero tolerance for stereotyping in unit	Education, understanding, and mentorship of those who have recovered from psychological injuries

## ATTACKING SOURCES OF STIGMA

Source of Stigma	How to Attack the Source of Stigma
Real harm to a military career or future employability specifically because of a mental health diagnosis and treatment.	Ensure that career opportunities are based solely on capabilities and performance, not mental health labels or prejudice.
Warrior cultures that place a great value on strength, but may be intolerant of weakness of any kind, whether physical, mental, or moral.	Continuously promote awareness that a wound, injury, or illness—however incurred— is not a sign of weakness. Rather, seeking needed help is a sign of strength.
The belief that stress or mental health problems only happen to individuals who are mentally or morally weak.	Admit openly to your own stress problems in the past and encourage subordinate leaders to do the same. Teach the truth that anyone can be injured by stress.
Attitudes of intolerance or even fear of anyone who is different.	Promote an understanding and acceptance of diversity among unit members and their families. Everyone deserves respect.

## WHAT THE COSC DOCTRINE SAYS ABOUT STIGMA

Commanders and other leaders can attack an intolerance of weakness by reminding Marines and Sailors that anyone at any time can be wounded, injured, or become ill, regardless of how well-trained and motivated they are. No one is immune to physical or psychological injury. Though it may hurt one's pride to admit injury to others—especially in a situation from which others walked away unscathed—the greater proof of strength is to have the moral courage to face problems honestly and get the help needed. . . . There is no reason why the stigma associated with stress and mental health problems should not be replaced with the same degree of compassion and empathy with which most physical injuries and illnesses are now treated.



## HELPFUL APPS FOR STRESS CONTROL

Mental fitness is just as important as physical fitness, and shouldn't be neglected. Including mental dexterity exercises into your daily routine can help you reap the benefits of a sharper mind and a healthier body.

Lumosity



The app consists of more than 50 colorful and fun mini-games designed to train five cognitive functions: speed, memory, attention, flexibility, and problem-solving.

What's Up



What's Up? is a fantastic free app utilizing some of the best Cognitive Behavioral Therapy and Acceptance Commitment Therapy methods to help you cope with Depression, Anxiety, Anger, Stress and more!

Calm



Calm is the perfect mindfulness app for beginners, but also includes hundreds of programs for intermediate and advanced users.

Elevate



Elevate is a new type of cognitive training tool designed to build communication and analytical skills.

Woebot



Woebot is a friendly self-care expert who can help you think through situations with step-by-step guidance, master skills to reduce stress and live happier.

Stop, Breathe, Think



Stop, Breathe & Think, the app for daily meditation & mindfulness, allows you to check in with your emotions.

Peak



Peak uses brain games and puzzles to challenge memory, language and critical thinking to keep your mind active.

Talk Life



TalkLife is a peer-support community that values research, evidence and impact to make sure you get the best help possible.

10% Happier



Life can be stressful - but meditation is scientifically proven to lower your stress levels.

Fit Brains



The Fit Brains Trainer offers balanced cognitive stimulation across 6 major brain areas, Focus, Memory, Speed, Logic, Visual and Language.

Breathe 2 Relax



Breathe2Relax is a portable stress management tool which provides detailed information on the effects of stress on the body and instructions and practice exercises to help users learn the stress management skill called diaphragmatic breathing

Tactical Breathing



Tactical Breathing Trainer can be used to gain control over physiological and Psychological responses to stress.

Mindfulness



The Mindfulness App opens up a world of professional guided meditations. It helps you towards a more peaceful and healthier state of mind.

CogniFit



CogniFit is a leading interactive mental game application that helps stimulate cognitive skills through personalized daily training.

These apps are provided for informational purposes only. No Defense Department, or U.S. Marine Corps, or Marine Corps Community Services endorsement implied. Always use caution with any application, read carefully, and know if a fee is associated.

## IMPROVING SLEEP AND REST

There are times when the mission or operational tempo do not allow Marines to get proper rest. But whenever possible, do whatever you can to get enough sleep. Here are some pointers if you're having trouble sleeping.

### **DURING THE NIGHT, IF YOU HAVE TROUBLE SLEEPING ...**

- 1** **Change your sleeping area.** Find a quiet, comfortable sleeping area without noise and distractions like TV.
- 2** **Use relaxation techniques.** There are things you can do to get your body relaxed. One way is imagine being at a relaxing place like a beach, or somewhere you have a positive memory.
- 3** **Do not lie in bed thinking or worrying.** Get out of bed if you can't fall asleep or go back to sleep within 10–15 minutes. Do something quiet or soothing such as reading a book, listening to music, or playing solitaire. Return to bed only when you feel sleepy. Repeat step as often as necessary during the night.



- 4** **If experiencing nightmares, tell yourself it's not real danger and get out of bed.** If possible, have someone else remind you that it's a dream and not real.
- 5** **Consider resting with purpose.** There's a part of the brain that is always aware even when resting or sleeping. You can get benefits from putting your body into a restful state. Techniques, such as counting back from 6 on each exhale for several minutes, helps you relax. Learning how to "body scan" and focus the mind can help. The Department of Defense embraces mindfulness meditation as a self-care strategy.

To learn more about meditation, visit [www.dodlive.mil/2016/01/08/what-you-need-to-know-about-mindfulness-meditation](http://www.dodlive.mil/2016/01/08/what-you-need-to-know-about-mindfulness-meditation) or [warriorstease.org/mind-body-practices](http://warriorstease.org/mind-body-practices).

### **TAKE**



### **ACTION**

### **RECHARGE WITH POWER NAP**

- Not enough time to sleep? Make time to squeeze in some quick zzzs.
- Power naps should be 20-30 minutes (non-REM sleep), according to the National Sleep Foundation. Set an alarm to wake up. If you sleep longer, you might fall into a deep sleep and wake up feeling tired or groggy.
  - A good time to nap is usually between 1400 and 1500 (or halfway between your normal waking and sleeping times). Don't nap late in the day. Napping within three hours of bedtime can interfere with nighttime sleep.
  - Find a quiet, dark spot to nap. If you can't find a dark place, wear sunglasses or an eye mask.
  - A light carb or dairy snack can help you nap.
  - Turn off potential distractions and find "white noise" — a constant sound, like a fan. Putting on headphones with relaxing music may help.
  - After setting your alarm, lay back and relax your muscles. Close your eyes and clear your mind. If you have trouble, try mindfulness meditation.
  - Taking a small amount of caffeine (200mg) at the start of the nap allows the caffeine to start to kick in as the nap is ending (approximately 45 mins).
  - Follow a nap with physical activity (jumping jacks, push-ups, or jogging in place) to increase your pulse rate, making you feel more refreshed. Washing your face or stepping into bright light will have the same effect.

## **YELLOW OR ORANGE ZONE MARINES MAY:**

- Be “on alert.” Looking out for danger may cause trouble falling asleep, or noises at night might wake you up easily.
- Worry or have negative thoughts that can make it difficult to fall asleep.
- Use drugs or alcohol. Using too much alcohol can get in the way of restful sleep. Alcohol and other drugs may hurt the quality of sleep.
- Have bad dreams. Nightmares are common after traumatic stress events. Interrupted sleep from nightmares makes sleep less restful, and thinking about whether a nightmare might occur can make it difficult to fall asleep.
- Have medical issues. Chronic pain, sleep apnea, stomach problems and other medical issues can make sleep difficult.
- Get into a cycle that’s hard to get out of on their own.



## **DAYTIME ACTIVITIES CAN AFFECT HOW WELL YOU SLEEP. TO SLEEP BETTER:**

- Exercise, but not within a few hours of bed. Go outside to reset the body’s sleep and wake cycles.
- Eat properly. It helps sleep.
- Limit caffeine, tobacco and alcohol; stop at least 4 hours before bedtime.
- Don’t drink any liquids after 1800; you’ll wake up to go to the head.
- Certain medications can keep you awake if taken right before bed; discuss with your doctor.
- Go to bed at the same time every night to program your body.
- Unwind for one hour before bed. Don’t do anything mentally active like play video games.
- When you lie down, put your phone away. The blue light emitted from screens can suppress melatonin, a chemical that tells the body when to sleep.

## **You need 7 to 8 hours of restful sleep for optimal performance.**

- Lack of sleep hurts performance, concentration, mood and the ability to problem solve, as well as muscle growth and repair, bone building and fat burning.
- Sleep is the time for the body to repair itself. You need it for physical and mental health.
- Sleep deprivation (being awake for 17 to 19 hours) can have the same effects as being legally drunk. Coordination, reaction time and judgment are impaired.



**YOUR OSCAR TEAM POC:** \_\_\_\_\_

## EXERCISE: SLEEP TEST

Read over the job aid on the next two pages, **Improving Sleep and Rest**. Then answer these questions.

1. How many hours of sleep should we get each night for optimal performance? \_\_\_\_\_
2. What should you do if you have a nightmare? \_\_\_\_\_  
\_\_\_\_\_
3. What should you avoid ingesting at least four hours before bedtime? \_\_\_\_\_  
\_\_\_\_\_
4. At what point can a lack of sleep have the same impact as being legally drunk? \_\_\_\_\_  
\_\_\_\_\_
5. Is it a good idea or bad idea to play video games right before bed? \_\_\_\_\_  
\_\_\_\_\_
6. How long is a power nap? \_\_\_\_\_  
\_\_\_\_\_
7. Should you take caffeine before you take a nap? \_\_\_\_\_  
\_\_\_\_\_
8. If you can't sleep, should you stay in bed until you finally fall asleep? \_\_\_\_\_  
\_\_\_\_\_
9. Can meditation help you sleep? \_\_\_\_\_  
\_\_\_\_\_
10. What should you do after a nap to make you feel more refreshed? \_\_\_\_\_  
\_\_\_\_\_

**ANSWERS:** 1. 7 or 8 hours. 2. Get out of bed and tell yourself it's not real. If possible, have someone else remind you it's not real, too. 3. Caffeine, tobacco, and alcohol. 4. Being awake for 17 to 19 hours. 5. Bad idea. Stimulates the brain too much. 6. 20-30 minutes. If you sleep longer, you might fall into a deep sleep and wake up feeling tired or groggy. 7. Yes, taking 200 mg before a nap allows the caffeine to kick in as the nap is ending. 8. No, get out of bed if you can't fall asleep within 10-15 minutes. Do something quiet or soothing such as reading a book, listening to calming music, or playing solitaire. Return to bed only when you feel sleepy. 9. Yes, putting your body into a restful state can help you relax and fall asleep. 10. Do some physical activity (jumping jacks, push-ups, or jogging in place) to increase your pulse. Washing your face or stepping into bright light will have the same effect.



# MENTAL AGILITY

**Mental agility exercises improve your ability to mitigate stress by training you to:**

- Control the things you can control
- Lessen the impact of things you can't control
- And understand the difference.

## Fire up those neurons



Here are some simple ways to exercise your brain:

- Reading
- Word games
- Crossword puzzles
- Sudoku and logic puzzles
- Brain teasers
- Memory games
- Strategy games

### If you have more time:

- Learn a foreign language.
- Take a class in a topic you have never studied.

### Change your routine to strengthen your brain:

- Take a different route to work.
- Shop at an unfamiliar grocery store.
- Explore a different park.

Mixing things up creates new brain pathways and strengthens existing connections.



**ATTITUDE:** 40% of our actions are based on habit. Train your mind to build habits you want. Make decisions based on the situation, access your skills, identify strengths in yourself and others, and focus on taking the right action. **Game option:** Role-playing and scenario-based exercises help.

**ATTENTION:** Improve your focus. Practice avoiding distractions, maintaining focus, and concentrating while learning. Close your eyes and sort your thoughts into separate imaginary boxes being packed onto a truck. This teaches you to separate critical and non-critical factors and expands your ability to spot solutions. **Game option:** Explore the Lumosity app.

**SPEED:** Practice decision making and reacting quickly. **Game option:** Play chess under time pressure or Rock, Paper, Scissors.

**PROBLEM SOLVING:** Determine the best course of action, be optimistic, break down complicated situations, and improve accuracy. **Game options:** Role-playing and scenario-based exercises help.

**FLEXIBILITY:** Work on communicating clearly, thinking outside the box, and multi-tasking to build mental agility. **Game options:** Try Sudoku, Rubik's cubes, and crossword puzzles. Change things up in your daily life.



**Don't forget to check out mental agility apps like Lumosity, Fit Brains, Peak, and CogniFit.**

**YOUR OSCAR TEAM POC:** \_\_\_\_\_



# BE AN OPTIMIST INSTEAD OF A PESSIMIST

## Discard Negative Habits

## Build Positive Habits

<b>Personalizing:</b> Blaming yourself completely for problems. Seeing yourself as a solely responsible rather than considering the impact of the situation, chance events, or other people's actions.	<b>Contextualizing:</b> Acknowledge that many things have contributed to this problem. Think of everything that may have played a role, including others' actions, chance events, and past history.
<b>Over-generalizing:</b> Seeing problems in all aspects of your life that are your fault. Ignoring examples of your own success and focusing only on those instances that fit your "pattern of failure."	<b>Specifying:</b> Think through when you have been able to successfully handle challenges. Recognize when you have been capable and successful.
<b>Fortune-telling:</b> Somehow knowing your problems will never get better, and they will always be your fault while assuming anything that can go wrong will.	<b>Delimiting:</b> Acknowledge the unique circumstances of this problem. There may be similarities in future challenges; what you have learned now can help you deal with those in the future.
<b>All-or-nothing thinking:</b> Seeing the world in black and white; always and never. Judging past events in terms of complete success or complete failure.	<b>Balancing:</b> Realistically estimate what percentage of the situation is going poorly and what is still OK. Acknowledge what has gone well despite what could have been better.
<b>Filtering:</b> Focusing mostly on the negative aspects of the situation even though there may be many good things about it as well.	<b>Problem solving:</b> Do not focus on the things that are going wrong. Instead, focus on the opportunities to make the situation better.
<b>Mind reading:</b> Worrying about the hidden reasons why people may say or do things. Assuming immediately, for example, that they are thinking poorly of you without investigating if that is truly the case.	<b>Trusting:</b> Accept that other people will think well of you and treat you well. Second guessing is unproductive. If you are really concerned about what they are thinking, ask about it.
<b>Disqualifying:</b> Discounting your successes and others' encouragement or compliments and finding a way to interpret even these good things in a negative light.	<b>Appreciating:</b> Take time to think about your successes and value them. Remind yourself of your strengths and talents.
<b>Magnifying:</b> Noticing every little mistake or problem and overestimating their importance. Allowing small problems or criticisms to overly affect feelings.	<b>Perspective taking:</b> Review the positive facts about the situation in your mind. This includes dealing successfully with challenges.
<b>Emotional reasoning:</b> Judging things based on how you feel, not on the facts. Even though everything appears fine, if you are feeling worried, there must be a problem.	<b>Grounding:</b> Remind yourself of the facts of the situation. Consider whether there may be any outside factors that influence your feelings.
<b>Obligating:</b> Feeling obligated to live up to a lot of "should." These may be things you believe you need to do or that other people expect of you.	<b>Gauging:</b> Be flexible and recognize that perfection is not the goal. Remember that your best is what is expected.
<b>Labeling:</b> Judging and labeling yourself in a negative way, such as personal name-calling.	<b>Acknowledging:</b> Think of everything about yourself that a single label could never capture. Remind yourself how inaccurate it is to pigeon-hole.
<b>Comparing:</b> Measuring self-worth by comparing with other people and thinking about how much better they are at everything in comparison.	<b>Admiring:</b> Think about someone you admire who is good at handling problems. Consider what the person has taught you and how that can help you in the future.

# REINTEGRATION AFTER A STRESS INJURY

## REINTEGRATION IS KEY

Reintegration prevents the Marine Corps from losing valuable personnel. Key components are:

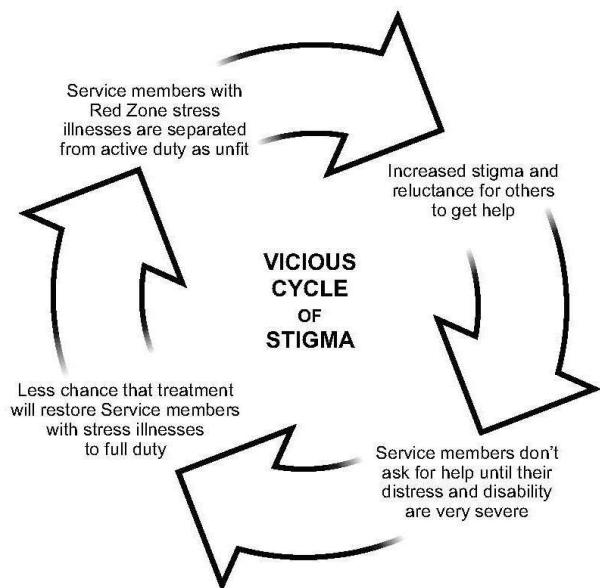
- Ensuring psychological readiness
- Restoring a sense of honor to the psychologically wounded
- Reducing stigma associated with seeking treatment

The Corps considers reintegration part of the sacred duty of not abandoning those who have sacrificed for others.

## REINTEGRATION ASSESSMENT

The first component of reintegration—assessing and making decisions about psychological fitness and deployability—is performed by commanders and other unit leaders by considering four questions:

- Does the Marine or Sailor meet medical standards for retention?
- Is the Marine or Sailor unable to adequately perform required duties because of a stress injury or illness?
- Is the Marine or Sailor unable to adequately perform required duties because of treatment being received for a stress injury or illness?
- Is the Marine or Sailor ineligible for assignment to specific duties because of directives or regulations?



## REINTEGRATION CHALLENGES

The reintegration process often involves **relearning skills, regaining confidence, and earning back the trust** of other team members and shipmates. However, reintegration after recovery from psychological injuries can be more complex and difficult because of the stigma often associated with those injuries.

For this reason, successful reintegration after a stress injury or illness—whether back to duty or out of the military—depends on winning the battle against stigma.

## REINTEGRATION GOALS

- Communicate an attitude of respect and trust.
- Help the Marine refocus on the mission and rebuild confidence.
- Ensure others don't undermine any Marine's reputation.
- Marines who are in treatment or have recently completed treatment are still at risk and need continued support.

**YOUR OSCAR TEAM POC:** \_\_\_\_\_

## WILL SEEKING HELP HURT MY CLEARANCE?

Many security clearance applicants worry unnecessarily and sometimes choose not to seek treatment due to fears that it could result in the denial or revocation of a clearance. You may be surprised: 99.98% of people whose clearance was denied or revoked had other issues in addition to psychological concerns.

The current policy provides both adjudicators and commanders flexibility to allow individuals undergoing counseling to maintain their security clearance. When people apply for security clearance, they need to fill out the "Questionnaire for National Security Positions," Standard Form 86. To protect privacy, and to assure there are no negative repercussions because of treatment or counseling for a psychological health issue, the Department of Defense (DoD) has made changes to the form.

**Applicants may report any unauthorized questioning** about psychological health care to the DoD Inspector General Hotline at 800-424-9098.

### Question 21 and when to answer "no"

Question 21 of Standard Form 86 asks, "In the last seven years, have you consulted with a health care professional regarding an emotional or mental health condition, or were you hospitalized for such a condition?"

You can answer "no" if:

- You've received counseling strictly related to adjustment from service in combat
- You've received counseling strictly related to marital or family issues (not court ordered or related to violence you have committed), or grief issues
- You're a victim of sexual assault who received counseling related to that trauma.

An applicant cannot be denied an interim security clearance solely due to a "yes" to Question 21.

**For more information**, read the DoD's guidance on question 21. The memo is available online. Military OneSource also has compiled information on the topic at: [www.militaryonesource.mil/health-wellness/mental-health/mental-health/does-receiving-psychological-health-care-affect-security-clearance](http://www.militaryonesource.mil/health-wellness/mental-health/mental-health/does-receiving-psychological-health-care-affect-security-clearance).

Standard Form 86  
Revised December 2010  
U.S. Office of Personnel Management  
5 CFR Parts 731, 732, and 736

### QUESTIONNAIRE FOR NATIONAL SECURITY POSITIONS

Form approved:  
OMB No. 3206 0005

#### Section 21 - Psychological and Emotional Health

Mental health counseling in and of itself is **not a reason** to revoke or deny eligibility for access to classified information or for a sensitive position, suitability or fitness to obtain or retain Federal employment, fitness to obtain or retain contract employment, or eligibility for physical or logical access to federally controlled facilities or information systems.

- 21.1** In the last seven (7) years, have you consulted with a health care professional regarding an emotional or mental health condition or were you hospitalized for such a condition? Answer 'No' if the counseling was for any of the following reasons and was not court-ordered:
- strictly marital, family, grief not related to violence by you; or
  - strictly related to adjustments from service in a military combat environment

☐ YES ☐ NO (If NO, proceed to Section 22)

Please respond to this question with the following additional instruction: Victims of sexual assault who have consulted with the health care professional regarding an emotional or mental health condition during this period strictly in relation to the sexual assault are instructed to answer No.

#### EO 12968:

"...No negative inference concerning the standards in this section may be raised solely on the basis of mental health counseling. **Such counseling can be a positive factor in eligibility determinations.** However, mental health counseling, where relevant to the adjudication of access to classified information, may justify further inquiry to determine whether the standards of subsection (b) (casts doubt on individuals judgement, reliability, or trustworthiness) of this section are satisfied, and mental health may be considered where it directly relates to those standards."

# COMBAT AND OPERATIONAL STRESS CONTROL TAKEAWAYS

## TIPS FOR REDUCING STRESS

**Exercise.** Exercising melts away stress. Take a run, lift weights, or play a sport with friends.

**Eat well.** Break for a healthy snack or meal — like blueberries, yogurt, a turkey sandwich, almonds, or sunflower seeds.

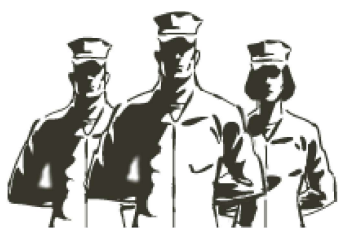
**Rest.** Getting proper sleep is often hard for Marines, but it can work wonders for relieving stress.

**Breathe.** Try four-step breathing (Inhale through the nose to a count of four, hold the breath to a count of four, exhale through the nose for a count of four, hold for a count of four. Repeat several times.

**Find time for fun.** Catch up with a friend, listen to music, or spend time on a favorite hobby.



## HOTLINE ASSISTANCE



**DSTRESS**

WIN YOUR PERSONAL BATTLES.

(CONUS)

**1.877.476.7734**

(OCONUS)

**098.970.7734**



**1-800-273-8255 PRESS 1**

Confidential chat at [VeteransCrisisLine.net](https://VeteransCrisisLine.net) or text to 838255

Confidential support 24 hours a day, 7 days a week, 365 days a year for Veterans, Service members, and their families.

## ADDITIONAL RESOURCES

- Chaplains
- Community Counseling Program (CCP)
- Embedded Preventive Behavioral Health Capability (EPBHC) Specialists or Navy Medical Staff
- Family Advocacy Program (FAP)
- Military & Family Life Counselors (MFLC)
- New Parent Support Program (NPSP)
- OSCAR Team Members
- Substance Abuse Counseling Center (SACC)

## FREQUENTLY USED ACRONYMS

**CCP**—Community Counseling Program

**COSC**—Combat and Operational Stress Control

**EPBHC**—Embedded Preventive Behavioral Health Capability

**EMHP**—Embedded Mental Health Provider

**FAP**—Family Advocacy Program

**MCCS**—Marine Corps Community Services

**MFLC**—Military & Family Life Counselors

**MIP**—Marine Intercept Program

**NPSP**—New Parent Support Program

**OODA Loop**—Observe, Orient, Decide, and Act

**OSCAR**—Operational Stress Control and Readiness

**SACC**—Substance Abuse Counseling Center

**SACO**—Substance Abuse Control Officer

**SAP**—Substance Abuse Program

**SPPO**—Suicide Prevention Program Officer

**UMAPIT**—Unit Marine Awareness and Prevention Integrated Training

**VA**—Victim Advocate

**Contact HQMC COSCC:** Email questions or feedback to [HQMC\\_COSCC@usmc.mil](mailto:HQMC_COSCC@usmc.mil).

**MCCS website:** [www.usmc-mccs.org](http://www.usmc-mccs.org)



## USE STRESS FIRST AID TO:

- Preserve life
- Prevent further harm
- Promote recovery

1. **CHECK:** Watch and listen for unusual stressors, severe distress, and changes in behavior.
2. **COORDINATE:** Inform chain of command (at least one level up), refer Marine to care provider, and follow up.
3. **COVER:** Recognize danger posed by or to a stressed person. Neutralize the danger. Keep person safe until he or she recovers.
4. **CALM:** Help the person relax. Use tactical breathing. Refocus the Marine's thinking.



5. **CONNECT:** Spend time with Marine; encourage peer support.
6. **COMPETENCE:** Encourage and mentor Marine back to full function. Retrain if necessary.
7. **CONFIDENCE:** Offer positive reinforcement as Marine reintegrates with unit. Give the Marine increasing responsibility.

## ADDITIONAL RESOURCES

**Semper Fit:** Take advantage of program offerings, including recreational sports leagues, nutrition and healthy lifestyle information. Physical fitness promotes mental fitness.

**Single Marine Program:** Offers a variety of social, competitive, and educational activities that may include the great outdoors like paintball, fishing trips, river rafting, mountain biking, and hiking. Some installations coordinate weekend trips for groups to recreational destinations.

The acronym **R.A.C.E.** helps you remember the actions to take to prevent suicide. **R.A.C.E.** increases your confidence in asking if a buddy is thinking of suicide.

**R**

### Recognize the signs.

⇒ Be alert to changes in friends, family members, and Marines.

**A**

### Ask the question.

⇒ "Are you thinking of killing yourself?" (Be aware that people don't always answer honestly the first time you ask. Keep checking back if you're concerned.)

**C**

### Care with words and actions.

- ⇒ Let your words and actions show that you're listening.
- ⇒ If unsure about Marine's state of mind, alert chain of command or chaplain.


**E**

### Escort person to help.

- > Don't let the person out of your sight. Stay until help arrives, or take the person directly to help.
- > Resources include health professionals, DSTRESS Line (877-476-7734), National Suicide Prevention Lifeline (800-273-TALK (8255), and 911.

### R.A.C.E. Conversation Prompts (Try asking these questions as part of your conversation with someone.)

- Tell me what's been going on with you. • I can see something has been bothering you. Tell me how I can help.
- Talking about what's bothering you might help. I'm here to listen. • You don't seem like yourself. What's on your mind?



**DSTRESS**  
WIN YOUR PERSONAL BATTLES.  
(CONUS)  
**1.877.476.7734**  
(OCONUS)  
**098.970.7734**

For emergencies, call 911,  
or go to closest hospital.

**Military  
Crisis Line**  
1-800-273-8255  
**PRESS 1**

Confidential chat at VeteransCrisisLine.net  
or text to 838255.




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**Make double-sided copies.**

**Recognize** the signs. Be alert to changes in friends, family, and Marines.

**Ask** the question. "Are you thinking of killing yourself? (Be aware that people don't always answer honestly the first time you ask. Keep checking back if you're concerned.)

**Care** with words and actions. Let your words and actions show that you're listening. If unsure about Marine's state of mind, alert chain of command.

**Escort** person to help. Don't let the person out of your sight. Stay until help arrives, or take the person directly to help.

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