



MARINE CORPS STRESS CONTROL JOB AID

OSCAR GEN III TEAM TRAINING

1 March 2022

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Read-ahead for OSCAR Team training (finish before course begins):

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ABOUT THE STRESS CONTROL JOB AID

This Stress Control Job Aid is a hybrid product: the textbook for use during OSCAR GEN III and the aid for OSCAR Teams to implement activities after training. Individual job aids will be posted on the Gear Locker to allow for easier reproduction. This content can be posted in common areas, such as barracks, or used as hip-pocket training for small group discussions. You'll notice a block for OSCAR Teams to fill in their contact information before making copies.

Combat and Operational Stress Control (COSC) in the Marine Corps

- In 2007, the commanding generals of the three Marine Expeditionary Forces (MEFs) convened a working group of Marine leaders, chaplains, and medical and mental health professionals to develop a new COS model, hereafter called the stress continuum model. They wanted COS to be:
 - * Small unit leader-oriented
 - * Multidisciplinary
 - * Integrated throughout the organization without stigma
 - * Consistent with the warrior ethos
 - * Focused on wellness, prevention, and resilience
- The stress continuum model since became the foundation for the COSC program. In 2008, the Marine Corps Combat Development Command made permanent Operational Stress Control and Readiness (OSCAR) teams one of its priorities. In 2009, the Assistant Commandant of the Marine Corps extended OSCAR capabilities to the infantry battalion and company levels. In 2010, the Marine Corps published the COSC Doctrine. The doctrine, also known as MCTP 3-30E, contains a wealth of information about stress management and how the five core leader functions—Strengthen, Mitigate, Identify, Treat, and Reintegrate—can be used to tackle stress control issues. The next year, a Department of Defense Instruction (DoDI) was published, 6490.05, to replace a 1999 DoDD. The DoDI established policy for COSC programs. “The Military Departments shall implement COSC policies and programs to enhance readiness, contribute to combat effectiveness, enhance the physical and mental health of military personnel, and prevent or minimize adverse effects associated with combat and operational stress,” the DoDI stated. “The Military Departments' leadership shall foster an environment and climate of prevention and protection to enhance operational performance and mitigate the potential physical and psychological consequences of combat exposure and other military operational stress.”
- Marine Corps Order (MCO) 5351.1, published in 2013, provides guidance for the Marine Corps' COSC program, including outlining the roles and requirements for personnel supporting COSC efforts. Each OSCAR Team Member has a role to play supporting unit COSC efforts and should work collaboratively to address unit and individual Marine's needs. Team Member roles include the following:
 - * **COSC Representatives** are appointed by commanders at the battalion/squadron or equivalent level. COSC Representatives serve as an advisor to commanders on all COSC requirements, programs, and activities. COSC Representatives can coordinate with OSCAR Trainers and Regional Training Coordinators to ensure all unit COSC training requirements are completed.
 - * **OSCAR Team Members** are trained Unit Marines who support and advise fellow Marines and Sailors on COSC issues and intervene to prevent potential stress concerns from becoming more serious illnesses requiring medical intervention. OSCAR Team Members can refer Marines to OSCAR Extenders and OSCAR Mental Health Professionals (MHP) when illnesses require a greater degree of care.
 - * **OSCAR Extenders** are medical staff, corpsmen, Chaplains, Religious Program Specialists, and other professionals who bridge the gap between Marine OSCAR Team Members and MHPs by working with OSCAR Team Members to provide prevention services, formal counseling, and medical care.
- According to MCO 5351.1, OSCAR MHPs are on the Table of Organization for each active Marine Division and Regiment. OSCAR MHP are specialized medical personnel such as psychiatrists and

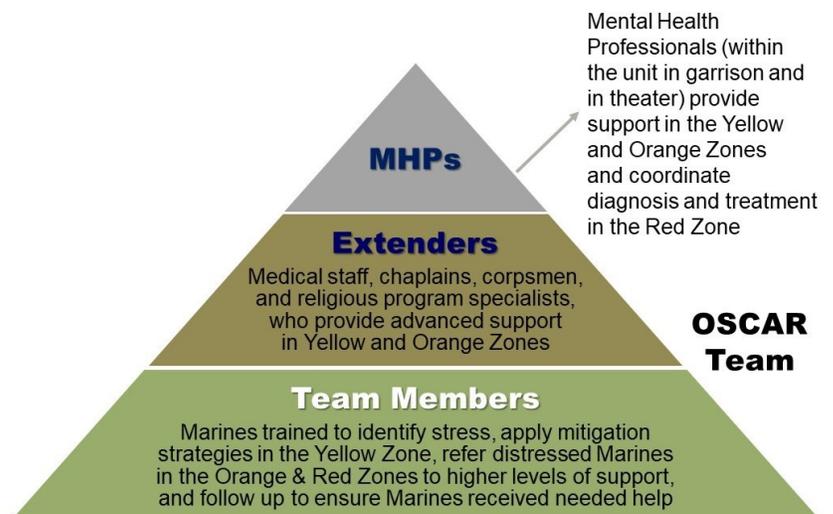
psychologists who provide clinical services, formal mental health care, and coordination with external mental health services. Other Marine unit's access to OSCAR MHP will be unique to the type and location of the unit. Whether deployed, or in garrison, the OSCAR MHP may not be centrally located.

- Additional resources and assets are available to support unit-level COSC efforts and training, which are outlined below:
 - * OSCAR Team resources for training include the Regional Training Coordinator at the MEF or Marine Forces Reserve (MARFORRES) level who can provide subject matter expertise on COSC matters to Marine leaders, COSC Representatives, and OSCAR Teams. Regional Training Coordinators can also help coordinate COSC-related training for MEFs and Major Subordinate Commands (MSCs).
 - * An additional group of trainers are available to support OSCAR Teams with COSC training. These include Core Master Trainers who can train OSCAR Master Trainers, OSCAR Master Trainers who can train OSCAR Trainers, and OSCAR Trainers who can provide OSCAR Team Training.
 - * According to MCO 5351.1, training completion and levels of certification will be reported as the following training codes:
 - O1 = OSCAR Team Member (Completed one-day OSCAR Team Training Course)
 - O3 = OSCAR Trainer (Designated by a Master Trainer as qualified to lead basic OSCAR Team Training)
 - O4 = OSCAR Master Trainer (Designated by a CMT to lead OSCAR Master Trainer)
 - O5 = OSCAR Core Master Trainer (Designated only by HQMC COSCC staff to lead OSCAR Master Trainer)

HQMC COSCC

The Headquarters Marine Corps Combat Operational Stress Control Capability (COSCC) staff develops and updates curricula. The COSCC staff is currently revising the COSC MCO and the COSC Doctrine. A COSC NAVMC outlining standard operating procedures is being developed. The staff also responds to Congressional inquiries and helps prepare leadership testimony.

OSCAR TEAM AT A GLANCE



GLOSSARY OF COSC TERMS

Combat and operational stress control (COSC)—Leader actions and responsibilities to promote resilience and psychological health in military units and individuals, including families, exposed to the stress of combat or other military operations.

Combat stress—Changes in physical or mental functioning or behavior resulting from the experience of lethal force or its aftermath. These changes can be positive and adaptive or they can be negative, including distress or loss of normal functioning.

Mental health—The absence of significant distress or impairment due to mental illness. Mental health is a prerequisite for psychological health.

Operational (or occupational) stress control—Leader actions and responsibilities to promote resilience and psychological health in military units and individuals, including family members, exposed to the stress of routine or wartime military operations in noncombat environments.

Resilience—The ability to withstand adversity without becoming significantly affected or recover quickly and fully from stress-induced distress or impairment.

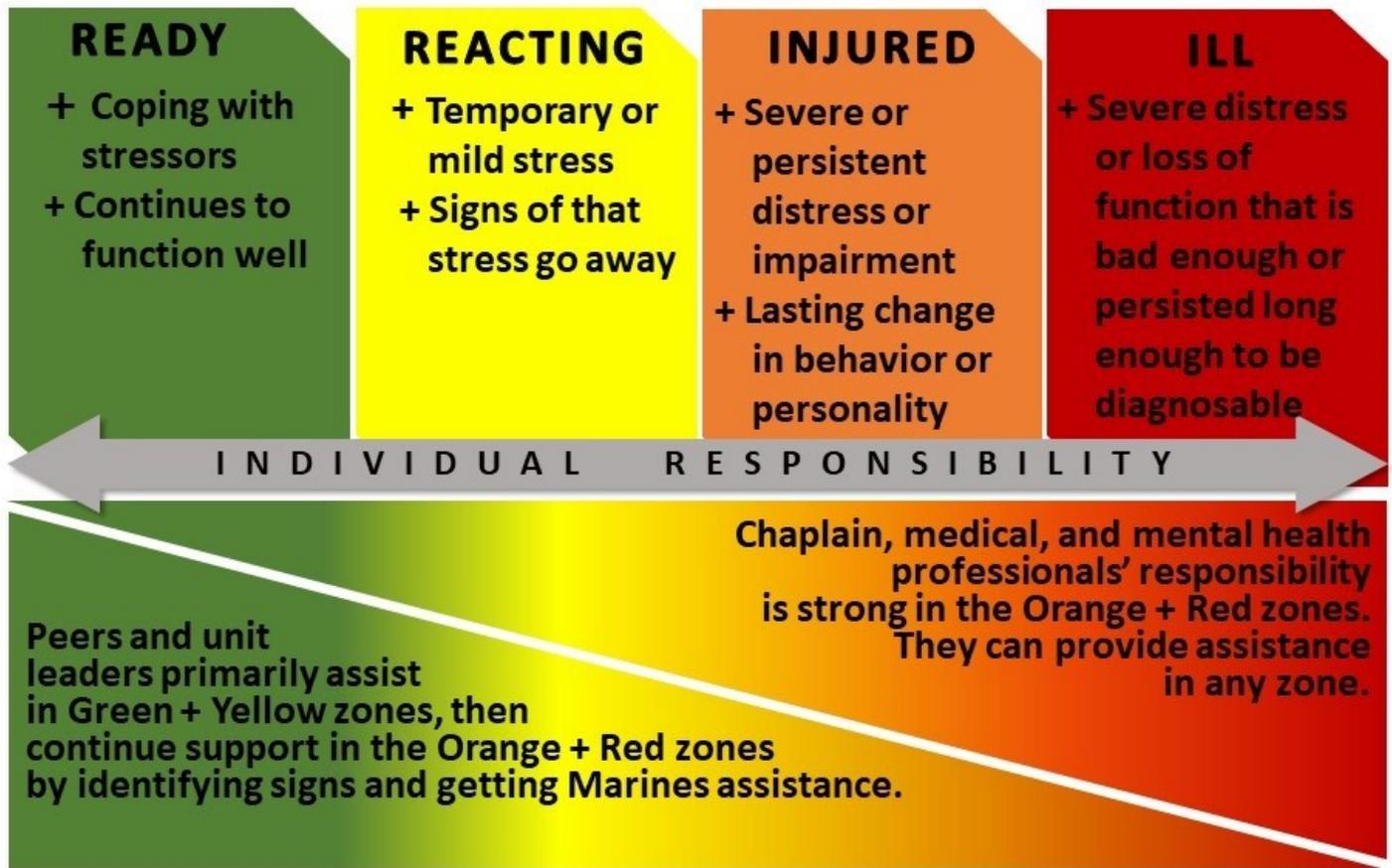
Stress injury—More severe and persistent distress or loss of functioning caused by disruptions to the integrity of the brain, mind, or spirit after exposure to overwhelming stressors. Stress injuries are invisible, but literal, wounds caused by stress, but, like more visible physical wounds, they usually heal, especially if given proper care.

Stress illness—A diagnosable mental disorder resulting from an unhealed stress injury that worsens over time to cause significant disability in one or more spheres of life.

Stressor—Any mental or physical challenge or set of challenges.

Stress reaction—The common, temporary, and often necessary experience of mild distress or changes in functioning due to stress from any cause.

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 Military OneSource (800-342-9647).
- ⇒ 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: _____

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.

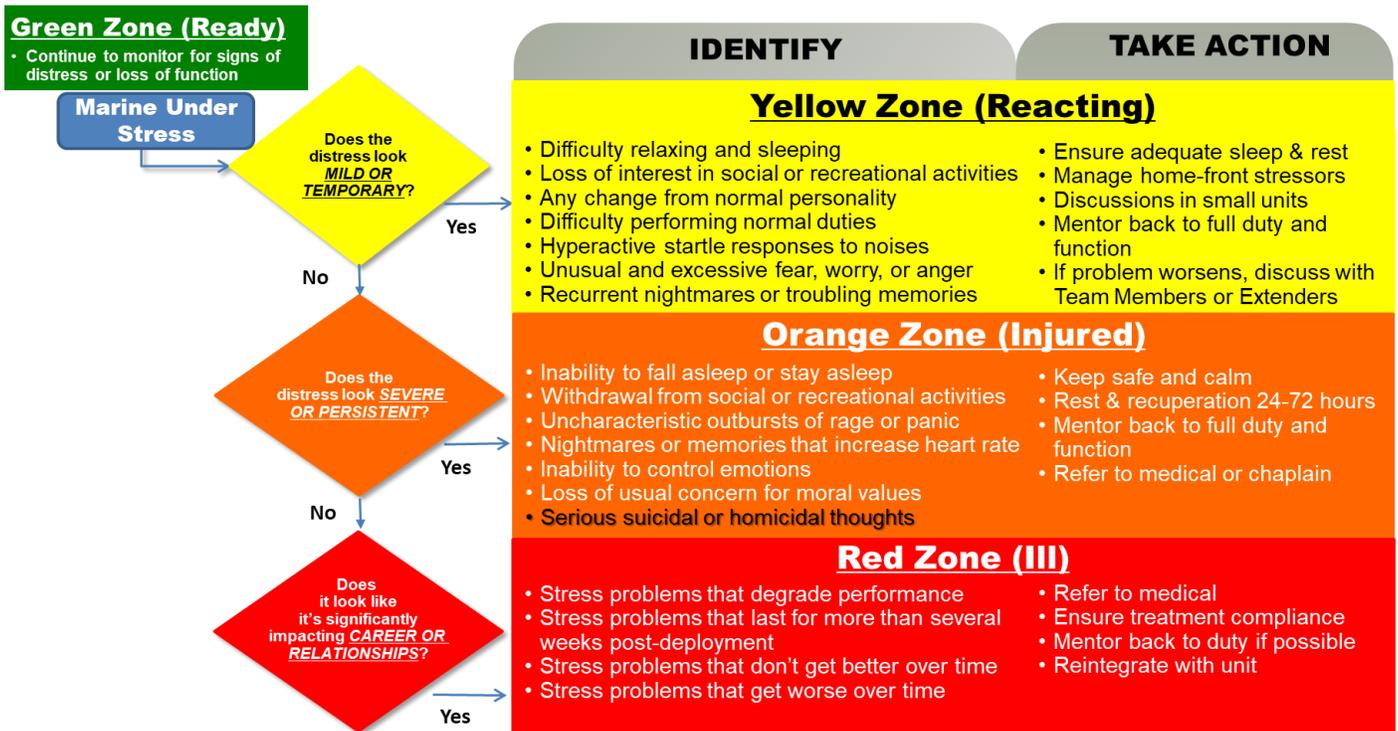
3. **Identify**—Identifying means closely monitoring every available indicator of Marines’ functioning and performance to quickly recognize when they need help. Identifying involves more than looking, listening, and feeling for signs of possible breakage or wear—it means anticipating these inevitabilities. 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.



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.

Personality	Mood	Emotion
<ul style="list-style-type: none"> • Combination of characteristics or qualities that form an individual's distinctive character 	<ul style="list-style-type: none"> • A temporary state of mind or feeling 	<ul style="list-style-type: none"> • A natural instinctive state of mind deriving from one's circumstances, mood, or relationships with others

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.

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.



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.

EXERCISE 1A: TAKING ACTION

1

Albert “Al” Schmid joined the Marine Corps a few days after Japan attacked Pearl Harbor on Dec. 7, 1941. Eight months later, the 21-year-old private and the other Marines in the 11th Gun Squad assaulted Guadalcanal as part of the first American offensive against the Japanese. Two weeks into the battle, the Japanese launched an attack on the machine gunners at 0300. During the onslaught, Marines were killed on either side of Schmid’s three-man crew. Then one of his crew was killed and Schmid took over the .30 caliber machine gun, and Cpl Leroy Diamond loaded the ammunition. A bullet hit Diamond’s arm, and he couldn’t load anymore, but he spotted targets for Schmid who kept firing and reloading for more than four hours. An enemy fighter then tossed a grenade near Schmid, wounding his left shoulder, arm, and hand—and blinding him. The Marines were pinned down, and the enemy continued to attack. Schmid and Diamond worked even more in tandem. Schmid fired and Diamond told him exactly where to point the gun. Reinforcements arrived, and the Marines pushed back the Japanese. Schmid and Diamond had killed an estimated 200 enemy combatants.¹



Schmid

- Why didn’t Diamond and Schmid give up? _____
- What prepared these Marines for the situation? _____
- How did they stay calm? _____

2

Marine Cpl Stephanie St Laurent saw the desperate post on a yard sale site for the Beaufort, SC, area. A fellow Marine, Sgt Craig Santos, had appealed for help for his ailing wife, Angela, who needed a kidney transplant. St Laurent decided to respond. “When I saw the ad I thought to myself, ‘This Marine really needs help’ and as a Marine, we’re trained to have each other’s backs,” she told DoD Live in 2011.



St Laurent (left) donated a kidney to Santos (right).

St Laurent was a perfect match, and doctors expedited the transplant surgery. Before the operation, St Laurent gave Angela Santos a Marine Corps running suit, and the women wore matching ones to the hospital. She wanted Santos to know that “Marines put family first,” St Laurent said. “I believe if we all do something to help save someone else, this world would be a better place.”²

- What does it mean to have another Marine’s back? _____
- What did Sgt Santos do for his wife? Why was that so critical? _____
- Do Marines realize other Marines have their backs? _____

3

Marine LCpl Jonathan Burson’s heroic actions began while he was eating a sandwich at the Camp Leatherneck chow hall in Helmand Province, Afghanistan, in April 2010. Burson, 21, noticed a fellow Marine was sitting alone and weeping. Anyone could have ignored the Marine in distress, but instead, Burson asked him what was wrong. They talked for hours. The next night, the Marine in crisis told Burson he planned to kill himself. Burson called for help and saved his fellow Marine’s life. Burson’s superiors awarded him the Navy and Marine Corps Achievement Medal and said they hoped other Marines would follow his example.³



Burson

- What might have been the hardest thing Burson did? _____
- Did Burson have training as a counselor? _____
- Did Burson do the right thing by calling for help? _____

EXERCISE 1A: MARINES HELPING OTHERS

4

Marine Sgt Raheem Boyd's phone rang in May 2015 while he

was in his room at Camp Lejeune. Another Marine was asking for the number of a unit's duty officer. The Marine told Boyd he had discovered suicidal posts on a Marine's Facebook



Boyd

page. "I checked that Marine's page and saw one post that looked strange and made me want to investigate further," Boyd, who recognized the Marine from a tour in Okinawa, told USMC Life. He headed to the barracks and found the suicidal Marine's room empty. Another Marine then spotted the Marine in crisis in his vehicle, armed with an assault rifle. The suicidal Marine sped away, and Boyd went looking for him. He found him sitting in his car on the side of a road and approached carefully. The distraught Marine did not recognize Boyd at first, but that did not deter him from trying to calm the Marine. He told him he was there for him and there is always another way. As police pulled up, the Marine panicked and reached for his rifle. Boyd quickly leaned through the window of the car and wrapped his body around the Marine while pushing the rifle to the floorboard. Police secured the gun, and an ambulance took the ill Marine to the hospital for treatment.⁴

- Can others learn from Boyd? _____

- Did Boyd do the right thing by intervening? Why?

- What prepared Boyd to act? _____

5

Six Camp Pendleton Marines returning from a weekend

camping trip drove up on a serious motorcycle crash near Big Bear on Nov. 4, 2018. The crash had severed one of the motorcyclist's legs and badly injured the other. Sgt Devon Espinoza told the Orange County Register "I was able to think about what the Marine Corps has taught me." He said he and his friends went into "Marine mode." They put a tourniquet on the man's leg, kept him conscious until medics arrived, and directed traffic at the scene. The Marines, who were awarded medals for their actions, said they relied on their training to handle the crisis.⁵



Espinoza

- What does "Marine mode" mean? _____

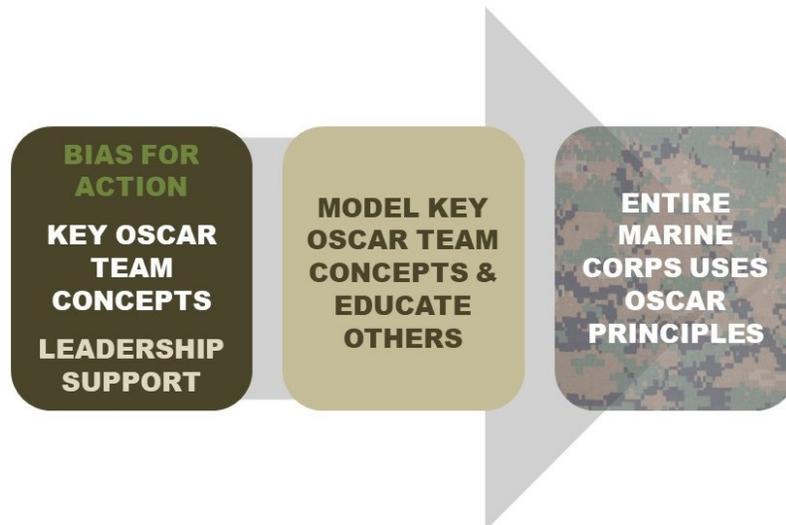
- How can it be applied to OSCAR Team members? _____

- Would it have been wrong if the Marines had not stopped to help? Why? _____

¹ <https://www.military.com/history/sgt-albert-a-schmid.html>. ² dodlive.mil/2011/09/12/medical-monday-marine-donates-kidney-save-strangers-life. ³ sandiegouniontribune.com/sdut-suicide-unseen-enemy-marines-2010may02-htmstory.html. ⁴ militarytimes.com/news/your-military/2016/03/20/the-military-s-suicide-prevention-fight-has-moved-to-facebook-and-twitter.

⁵ ocregister.com/2018/12/21/6-camp-pendleton-marines-receive-medals-for-saving-life-of-riverside-motorcyclist-severely-injured-near-big-bear.

EXERCISE 1B: POSITIVE INFLUENCERS



Record the answers you wrote on the sticky notes, and jot down some of the other participants' responses.

1. What are qualities of positive influencers? _____

2. What do you look for in a mentor? _____

3. What are two things you like best about being a Marine? _____

4. What does a bias for action mean to you? Example, notice cues and intervene. _____

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: _____

EXERCISE 2A: PULSE CHECK

During the video, use the spaces below to write down the positive and negative stressors you notice.

POSITIVE STRESSORS	NEGATIVE STRESSORS
---------------------------	---------------------------

EXERCISE 2B: TOTAL FITNESS

- What do you currently do to strengthen yourself in these areas? (Self-care)
- What will you recommend to others? (Peer support)

BODY	MIND
SPIRIT	SOCIAL

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.
- Reach out to the confidential, 24/7 **Military OneSource** 800-342-9647 or military-onesource.mil for individual counseling, peer support, and coaching. Military OneSource staff provide connections to installation- and community-based counseling services, or other providers of mental health care. They can assist in scheduling non-medical counseling services with a licensed counselor within 15 miles or a 30-minute drive. 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. 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.
- 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).

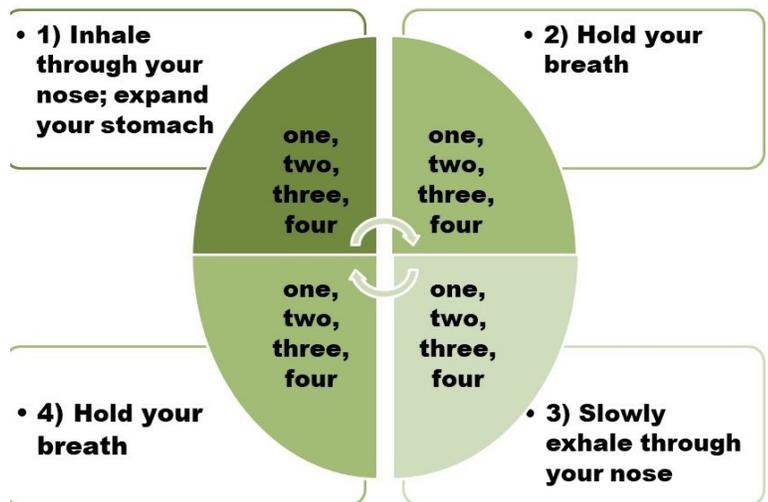
YOUR OSCAR TEAM POC: _____

EXERCISE 2C: STRENGTHEN

With increased use, mindfulness techniques may improve focus and performance and may result in overall better health and stress management. Mindfulness has been around for a long time, although it hasn't always been called that. Samurai, the ancient warriors of Japan, were well known for their mental discipline that helped them stay calm and focused during battle. Just as with other military training, the more we practice, the easier it will be to recall these techniques when needed. We should practice them often to better safeguard against stress.

BOX BREATHING

Box breathing or four square breaths helps when we're under intense stress our body has natural involuntary reactions that we call "flight, fight or freeze." Body functions such as heart rate, body temperature, breathing, blinking, and digesting are controlled by the autonomic nervous system. You *do* have some control over breathing and blinking. Getting to know and understand your breath and being able to control it is key. Breath control helps us regain focus and control of the body and nerves and lowers heart rate and blood pressure, which could help clear your mind and improve decision making. Even when you're not under stress in a crisis, using breathing techniques can help reduce the symptoms of stress and help you relax. For instance, snipers control their breath to improve accuracy, and Special Forces use the techniques to enhance performance.



Prepare for the breathing technique by getting comfortable in our seats. Let your legs relax a comfortable distance apart with your feet on floor. Straighten your back so that your spine is straight but not stiff. Relax your arms and rest your hands in your lap or on your thighs. Relax your head, neck and shoulders. If you feel comfortable closing your eyes, close your eyes. Relax your face. Take a few breaths at your natural pace, breathing in and out through the nose. If the breath becomes uncomfortable for you at any time, come back to your natural breathing pattern. It's important to breathe into your belly, not your chest, because this is activating a part of your nervous system that turns off that flight or fight response.

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- Inhale through your nose deeply, expanding your stomach for a count of four – one, two, three, four.
- Hold the breath for a count of four—one, two, three, four.
- Slowly exhale through the nose—one, two, three, four.
- Hold the breath for a count of four—one, two, three, four.
- Repeat several times. Put one hand on your heart and one hand on your belly. See if your breathing has become more slow and deep. Do you feel more relaxed?

Question: Did you physically feel anything change when you did that? _____

EXERCISE 2C: STRENGTHEN

PROGRESSIVE MUSCLE RELAXATION

Progressive muscle relaxation means systematically relaxing different muscle groups throughout the body. You can use this before doing something stressful in combat or garrison to heighten your mental and physical readiness. You can use it during stress to calm down and after intense stress to release tension.

Here's how:

- Tighten your hand and focus all your attention on your hand. Hold it tight, clench your hand and hold it.
- Keep thinking about that hand.
- With your muscles still tightened, breathe into the belly deeply, then exhale as you release the muscles, imagine all the tension is leaving your body.
- You then repeat this process with different muscle groups throughout the body.
- You can take as long as you want to do this, working through the whole body if you want to or you can spend just a couple of minutes. You have to do these techniques correctly to get the benefit. With this one, you have to think hard about the muscle group you are tightening.

A variation is to clench all your muscles at once. Let's do it:

- Take a very deep breath and clench all the muscles in your entire body, including arms, hands, legs, stomach, shoulders, neck, and jaw, for about five seconds as hard as you can, and then let go.

GROUNDING

Grounding techniques teach you how to be more present in the moment. Some of the most effective techniques help us use our senses to feel calmer and physically more comfortable. Here are some quick and easy techniques:

- **Sight**—Keep your eyes comfortably open, slowly scan the environment. Name things you see.
- **Sound**—If it's safe for you to close your eyes, close your eyes and listen to noises both internally (if in a room) and externally (outside the room) and noises around you (especially if outside).
- **Touch**—Touch various objects around you (a rock, a ring, the rough bark of a tree), splash your hands and face with cool or warm water, take a moment to really feel your feet on the floor or ground, slowly wiggle your toes and fingers.
- **Taste and Smell**—Eat something like a small piece of chocolate. Really focus on the texture,

Question: How will you use these three techniques as an OSCAR Team member? _____

EXERCISE 3A: MANAGING STRESSORS

For mitigating stress and boosting your mood, small efforts can make a difference. The mood pick-me-ups below are quick, easy and can help keep a bad moment from turning into a lousy day, and that can put you in a better frame of mind for tackling the big stuff.

TRY SPEED THINKING

Think fast. In research from Princeton and Harvard Universities, volunteers did tasks that made them think quickly, such as brainstorming rapid-fire ideas, reading at a fast pace, and watching a TV clip on fast forward. Thinking fast increased their feelings of elation and creativity. Researchers aren't sure exactly why this works, but it's similar to the racing thoughts and euphoric highs experienced by people who are manic or using stimulant drugs—just dialed back to a healthy, controllable level.

Speed Think & Ink: List all the stress management techniques you can imagine (easy ones and harder to resource ones). They can be silly. Don't be inhibited. Start writing. You have one minute.

Take one additional minute to answer the two exercise questions.

How can you enable others to manage stress?

Why is self-medicating ineffective? _____

BUT WAIT, THERE'S MORE

Stand up straight

Mom was right: Slouching is bad, and not just for your back. Research has shown that sitting or walking in a hunched-over posture with your eyes cast down is associated with feeling unenergetic, hopeless and helpless. In contrast, holding yourself up straight with your eyes aimed forward is associated with feeling more energized, positive and empowered. To really pull up your spine and perk up your attitude, find a private spot and skip or march with your head held high.

Take it outside

It's no coincidence that a cheerful disposition is often described as "sunny." Numerous studies have found a link between exposure to



sunlight and a more vibrant, positive mood. Getting sunlight early in the day seems to be particularly beneficial. Even better, going for a morning walk combines the mood-lifting effects of sunlight and exercise. If you're stuck inside, sit near a window and open the blinds to let in some natural light.

Pocket good thoughts

When you're faced with a challenge, jot down some positive thoughts about the situation. Then fold up the paper and put it in your pocket, wallet or purse. A study showed that students who tucked away their thoughts for safekeeping were more heavily influenced by them, compared to students who tossed the papers or kept the papers on their desks.

EXERCISE 3A: MANAGING STRESSORS

Flash a smile

Being happy makes you smile, but smiling may also make you happier. In one clever study, volunteers did stressful tasks while holding chopsticks in their mouths in specific ways. The chopsticks forced their facial muscles into a neutral expression, a slight smile (using only the mouth muscles) or a big smile (involving both the mouth and eye muscles). Those who "smiled" were less affected by stress than those who didn't. In the real world, putting on a happy face also draws people to you, and that helps you feel cheerier too.



Browse your photos

Close family and friends can support you through life's tough moments. When they aren't there to do it in person, snapshots can serve as stand-ins. Research conducted by a British psychologist showed that looking through personal photo albums led to an 11 percent improvement in people's mood, compared to 1 percent for other mood-lifting strategies such as eating chocolate and watching TV.



Plan your getaway

A study of more than 1,500 Dutch adults found that vacationers were happier than non-vacationers, but only before their trips. Afterward, the happiness advantage quickly vanished as life settled back to normal. To keep the excited anticipation going, always have something fun in the works you can look forward to, whether it's a weeklong dream vacation or a Saturday in the country. When you need to pep up your mood, spend a few minutes researching your destination online and making plans. Then close your eyes and imagine the fun you'll have once you get there.



*Adapted from <https://www.promises.com/addiction-blog/10-quick-easy-mood-boosters>. For more ideas, listen to the podcast "Serial Stress Killer" by Christopher Hackett: *Weird & Wonderful Ways To Beat Stress* (21 mins) and *20 Ways to Distract & Destress* (18 mins).*

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: _____

EXERCISE 3B: CONTROL WHAT YOU CAN

STRESSORS I CAN CONTROL	HOW CAN I MITIGATE THEM?	STRESSORS I CAN'T CONTROL	HOW CAN I MITIGATE THEM?
Weight gain	Cut out junk food; exercise more	Stuck in a 5-mile backup on the interstate while driving home from work	Call a friend or relative you haven't talked to in a while; download a podcast or audio book; listen to your favorite radio station

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 or warriorsatease.org/mind-body-practices.

TAKE RECHARGE WITH POWER NAP



ACTION

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 sleeping and waking 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 3C: 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? _____

stepping into bright light will have the same effect.

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

DEFEATING THE STIGMA OF SEEKING HELP

	ORGANIZATIONAL LEVEL	UNIT LEVEL	INDIVIDUAL LEVEL
STIGMA IMPACT	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
WAYS TO DEFEAT STIGMA	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.

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.

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.

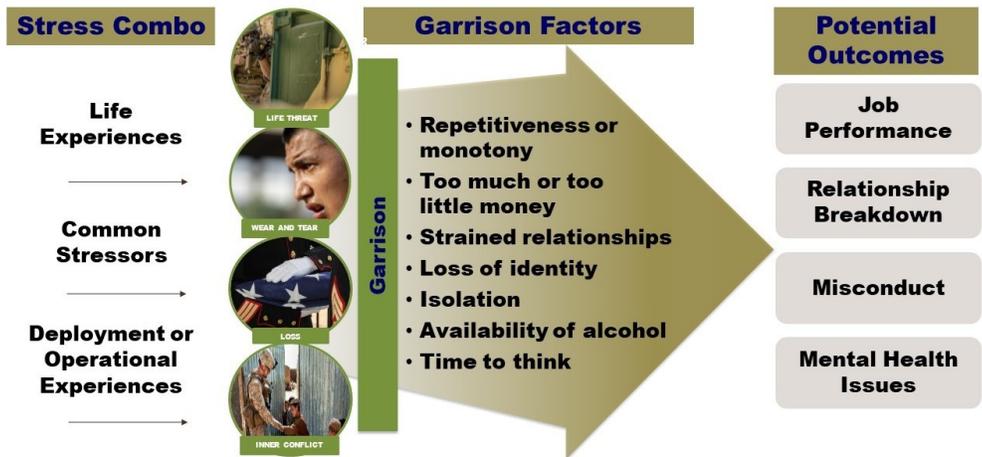
EO 12968:

"...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."

EXERCISE 3E: GARRISON STRESS

Questions to ask during a small group discussion:

- What are the key issues?
- What stress zone is the Marine narrator in?
- Will the situation improve without an intervention?
- What could you do to help this Marine?



Discussion 1: Things Went Sideways

"My unit goes from being so bored to too busy, all the time. Just three days ago, a couple Marines and I were real bored, so we went to a party. We were trying to have fun, but that went sideways. I drank too much, I'm underage, and I needed medical attention. My buddy called an ambulance, and I woke up in the emergency room with my SNCO. I've never been in trouble before, and my SNCO took care of it. But word got all the way around my unit, and Sergeant Major wants to see my leadership immediately. I know things are bad, and I don't want my mentors catching heat for my actions. I was in a good relationship for years and had someone who listened to my issues, but we broke up recently: I don't know who I can talk to now."

Discussion 2: Sad Country Song

"I got a call yesterday afternoon while leaving work. Unbelievable: unexpected orders. I guess the word never got to me but apparently I have orders in the system: I have a month to move to the other coast. To make matters worse, we just bought a house, my spouse has a great job here, and we're expecting our first baby. My spouse has no intention of moving with me, and I'm not sure if that's because of possible financial hardship or something else altogether. I'm not sure if we can overcome this. Want to hear something else that hurts? Our dog died two weeks ago. My life sounds like a country song, but I can't even laugh because there's zero humor in this."

Discussion 3: Painful Transition

"Retirement is in sight! I am looking forward to relaxing and spending quality time on the beach. I'm proud of my career and all that I've accomplished. I guess it's time for me to finally come clean about my medical. The chronic pain I've lived with for years is far worse than anyone knows. I've noticed changes in the last year and my health does not seem to be in a good place. I've been the main provider for my extended family. To be honest, I am starting to feel overwhelmed, very worried, and maybe even to the level of anxiety about how my family and I will deal with my transition. The chronic pain and feelings of worry seem to be keeping me away from my workout routine as well, which used to be a great source of stress relief. I just need to make it to retirement; get through these last couple of PT tests so I don't end up in a remedial program with my medical issues exposed to everyone."

EXERCISE 4A: WAYS TO ENGAGE WITH MARINES

What's Going On With This Marine?

You work with a Marine who seems to be going through a difficult period. You have overheard the Marine arguing with someone on the phone about who is picking up the kids from day care and about an outrageous credit card bill. And the Marine hasn't been focused on work tasks either. Other Marines are having to pick up the slack. Everybody is getting mad at the Marine and losing patience with the poor performance.

With a partner, use one of the techniques listed below. One of you will be the troubled Marine, and the other will be the concerned co-worker. You'll find more information about engagement techniques in the job aid that follows.

Use the Ask Permission technique:

"Can we talk about [insert behavior]?"

"Let's talk about how your [insert behavior] impacts your ..."

Use the Open-Ended Questions technique:

"What's going on at home?"

"What's on your mind?"

Use the Reflective Listening technique:

"It sounds like..."

"What I hear you saying..."

"I get the sense that..."

WAYS TO ENGAGE WITH MARINES



EXPLORE REASONS TO CHANGE

Get the person to describe the worst-case scenario if things stay the same.

- “Suppose you don’t change. What is the **WORST** thing that might happen?”
- “What is the **BEST** thing you could imagine that could result from changing?”

ASK PERMISSION

People more likely will discuss changing when asked, rather than when told to change.

- “Can we talk about [insert behavior]?”
- “Let’s talk about how your [insert behavior] impacts your...”

MAKING IT OK

Let the person know that plenty of other people have gone through the same issue.

- “A lot of people are concerned about changing their [insert behavior].”
- “That is not unusual. Many people will tell you it’s hard to change that and might take a few tries.”

BUILD CONFIDENCE

Confidence helps someone take action and follow through.

- “You’ve been working hard to quit [behavior]. How’s it going?”

- “Last week you were not sure you could go one day without drinking, how did you get through the past week without taking a drink?”

OPEN-ENDED QUESTIONS

Ask questions that can’t be answered with a yes or no response. Too many back-to-back closed- or dead-end questions can feel like an interrogation (e.g., “How often do you get drunk?”). Open-ended questions encourage the other person to do most of the talking.

- “Tell me what you like about [risky/problem behavior].”
- “What’s going on at home?”

- “What’s on your mind?”
- “What happens when you behave that way?”
- “How were you able to not use [substance] for [time frame]?”
- “Tell me more about when this first began.”
- “What’s different for you this time?”
- “What was that like for you?”

COLUMBO APPROACH

This tactic is named after the police detective played by Peter Falk (right) in the 1970s TV series "Columbo."

Put the pieces together and repeat the situation back to the person in a way that shows it doesn't make a lot of sense. The following examples might sound a bit unsympathetic, but you want people to recognize what's going on rather than tell them that what they are saying does not make sense.

- "On the one hand you're coughing and are out of

breath, and on the other hand you are saying cigarettes are not causing you any problems. What do you think is causing your



breathing difficulties?"

- "So, help me to understand. On the one hand you say

you want to live to see your 12-year old daughter grow up and yet you won't take the medication your doctor prescribed. How will that

help you live to see your daughter grow up?"

- "Help me understand. I hear you saying you are worried about keeping the custody of your children and you want to stay in the Corps. But, on the other hand you're telling

me that you're using drugs. How's this going to work?"

ADVICE/FEEDBACK

People often have either little information or have misinformation about their behaviors.

Research has shown that by and large the effectiveness of simple advice is very limited (e.g., Only 5% to 10% of smokers are likely to quit when told to quit because smoking is bad for their health.).

Most people do not like being told what to do. They prefer being given choices in making decisions.

How information is presented can affect how it is received.

You can relate behavior to what other people are doing so the person can see how they are doing

(e.g., "I guess I drink as much as my friends, but maybe we are all drinking more than we should.").

People respond to the positive and want good things to happen for them and their family.

A good example of providing positive information about changing is evident with smoking. Within 20 minutes of stopping smoking, an ex-smoker's body begins a series of changes ranging from an immediate decrease in blood pressure to 15 years later seeing the risk of coronary heart disease and death return to nearly that of those who have never smoked.

But some people don't want the information, so don't push.

- "What do you know about the

benefits of quitting [behavior]? Want to talk about it?"

- "What do you know about how your [behavior] affects your [health problem]?"
- "What do you know about what will happen if you get a second drunk driving arrest?"
- "Okay, you said that the legal limit for drunk driving is 0.08%. What do you know about how many drinks it takes to get to this level?"
- "So you said you are concerned about gaining weight if you stop smoking. How much do you think the average person gains in the first year after quitting?"

THE SAY-DO GAP

Behavior is the strongest form of communication, and it must match the words we say. We often say what we mean, but we sometimes fail to follow through. This misalignment of words and actions (say-do gap) erodes trust. Make conscious efforts to follow words with matching actions, closing the say-do gap.

For example, you say *“I’d like to support your [behavior] change.”*

To verify your willingness to support the behavior change, you’ll need to take action (e.g., assist in finding resources).



AFFIRMATIONS

People coming to you for support appreciate your opinion. Saying something positive makes them more confident they can change.

- “You showed a lot of [insert what best describes the behavior—strength, courage, determination] by doing that.”
- “It’s clear that you’re really trying to change your [behavior].”
- “With all the obstacles you have right now, it’s [insert what best describes the person’s behavior—impressive, amazing] that you’ve been able to refrain from engaging in [behavior].”
- “In spite of what happened last week, coming back today reflects that you’re concerned about changing your [behavior].”

DECISIONAL BALANCING

Most choices bring either good, less good, or bad consequences. There is some impact from the decision. Help people weigh the pros and cons of their behavior. Leading them through that process can help them decide if they really want to change and what might be holding them back.

- *“What are some of the good things about your [behavior]?”*

You can help others identify and close say-do gaps:

- *“You’ve said you’d like to change [behavior] but you have not taken action to change [behavior]. Does this mean you’re happy staying the same?”*
- *“Okay, on the flipside, what are some of the negative things about your [behavior].”*

YOUR OSCAR TEAM POC: _____

REFLECTIVE LISTENING

Hear what people say and summarize it back to them. This builds trust by showing you are paying attention and understand.

- “It sounds like....”
- “What I hear you saying...”
- “So, on the one hand, it sounds like Yet, on the other hand....”
- “I get the sense that....”
- “It sounds like your [behavior (e.g., drinking)] has been one way for you to [whatever



advantage they receive (e.g., forget about what happened)].”

- “I get the sense that you are wanting to change, and you have concerns about [topic or behavior].”
- “What I hear you saying is that your [behavior] is really not much of a problem right now. What do you think is going to happen five years from now if you keep going like this?”
- “I get the feeling there is a lot of pressure on you to change, and you are not sure you can do it because it didn’t work out last time you tried.”

CHANGE TALK

Rather than telling people it’s important to change, get the person to see it for him/herself.

- “What makes you think you need to change?”
- “What will happen if you don’t change?”
- “What would be the benefit of changing your [behavior]?”
- “What would your life be like three years from now if you changed your [behavior]?”
- “Why do you think your wife/girlfriend/friend is worried about your [behavior]?”

SUPPORTING SOMEONE WHO WANTS TO CHANGE BUT IS FINDING IT TOUGH

Pick actionable things to take steps to change.

- “If you decide to change, what would you have to do to make this happen?”
- “How can I help you get where you need to be?”

TECHNOLOGY

Consider using social media or a video app when you can’t see people in person. Use their preferred communication mode.

HOTLINES

Let the person know about the 24/7 **Military OneSource** counseling, peer support, and coaching at 800-342-9647 or military-onesource.mil. Military OneSource can assist in scheduling non-medical counseling services with a licensed counselor within 15 miles or a 30-minute drive. The **Veterans Crisis Line (also called Military Crisis Line)** is also a good 24/7 confidential resource. Call 800-273-8255 and press 1, text 838255, or chat at 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.

EXERCISE 4B: MORE THAN A BITE AND A BEER

It's Friday night after a long week of field training, and you and your buddies can't wait to hit the local bar. A group meets at a popular local spot, orders several appetizers, and enjoys a round of beers. You suddenly notice an escalation between Smith and Jones. They are shouting, and you hear something about football. They both move into the lobby. Before everyone realizes what is happening, punches are thrown. You and others separate them and know it's time to leave. You separate into two groups, some with Jones and you with a few others and Smith. You begin to walk down the street and Jones still seems a little escalated.

1. What are the key issues? What are the risks? _____

2. What did the bystanders do to check on Smith and Jones? _____

3. How did the bystanders coordinate, cover and calm both Smith and Jones? _____

EXERCISE 4C: NO TIME

"I came into work smelling like alcohol. So, I've been enrolled in the Substance Abuse Program. I'm not happy about it, but at least the staff are nice, and I am actually learning a lot. The classes got me thinking that I want to attend anger management as well. They meet once a week for a couple hours, but I'm already out of the office for my substance abuse classes, so my leadership thinks I'm just trying to get out of work. I enrolled in anger management but had to drop the course after leadership said they can't afford to have me out of the office any more than what I already am. My spouse is busy with our child most of the time, but there seems to be a huge disconnect there as well. The op tempo is unbelievable. I understand why they need me at work as much as possible, but, damn, I want to get to the bottom of my problems and why I started drinking in the first place. I want to be a Marine, but I want to get myself straight, too. I can't be the best Marine, parent and spouse if I don't get some of this mess resolved."

1. What are the key issues? What are the risks? _____

2. What stress zone do you think this Marine is in? _____

3. How do you connect, then build competence and confidence with this Marine? _____

REINTEGRATION AFTER A STRESS INJURY

REINTEGRATION IS KEY

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

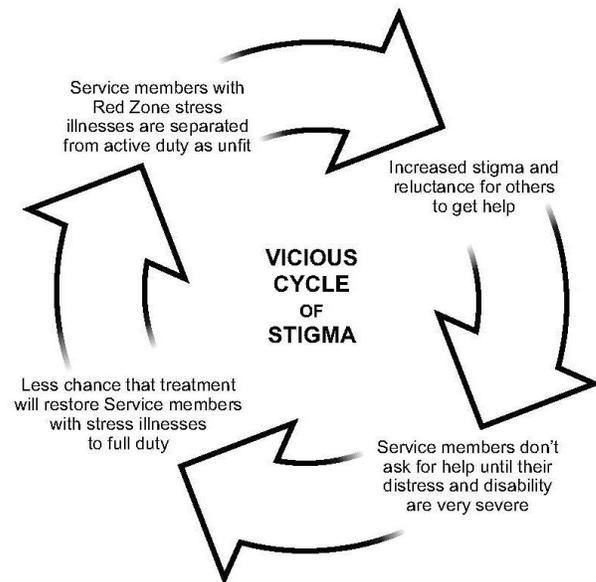
- Ensuring psychological readiness
- Restoring a sense of honor to the psychologically wounded
- Reducing stigma associated with seeking treatment

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: _____

EXERCISE 4D: THE DESIRE TO CHANGE

Marine Wants to Kick the Habit

A Marine in your barracks stopped by your room the other night to talk about energy drinks. The Marine thinks he might have a problem. He might be addicted to the caffeine and the sugar. He's been downing six Monsters a day, and sometimes more. "I've got to stop drinking them," the Marine said. You ran into him at the Exchange two days later, and he was buying a case of energy drinks. "I can't kick it," he tells you in line. You can't believe what you saw. You want to talk to him about it tonight.

With a partner, use one of the techniques list below. One of you will be the Marine with the energy drink habit, and the other will be the concerned Marine. You'll find more information about engagement techniques in the job aid on page 36, Ways to Engage with Marines.

Use the Making It OK technique:

"A lot of people are concerned about"

"That is not unusual. Many people will tell you it's hard to change that and might take a few tries."

Explore Reasons to Change technique:

Get the person to describe the worst-case scenario if things stay the same.

"Suppose you don't change. What is the WORST thing that might happen?"

"What is the BEST thing you could imagine that could result from changing?"

Use the Change Talk technique:

"What makes you think you need to change?"

"What will happen if you don't change?"

"What would be the benefit of changing your behavior?"

"Why do you think your is worried about your behavior?"

EXERCISE 4E: OSCAR TEAM ACTIVITIES PLAN

These are ideas of how you can put your OSCAR Team training to work across the SMITR spectrum. You will brainstorm ideas that will work best for your unit's team.

REINTEGRATE

STRENGTHEN

- Mentor peers and junior Marines in one-on-one conversations
- Apply MCLD teach, coach, mentor & SMART goals
- Build healthy behaviors
- Conversations, empathy
- Influence use of sponsorship programs for all new joins
- Group fitness activities
- Group outing to sporting events
- Unit bowling league
- Helping fellow Marine move
- Outdoor rec activities with a fellow Marine
- Meet for coffee
- Engaging new Marines in activities to foster sense of connectedness

MITIGATE

- Teach coping skills
- Assess Marine's 'fitness' (mind, body, spirit, social) and find areas where a Marine may be able to improve
- Assess potential morale issues within the unit and find ways to improve cohesion
- Have conversations about a Marine's past and present for risk factors and seek potential resources to mitigate
- Empathy, listening, conversation skills
- Accompany a fellow Marine to a med appointment
- Listening to a Marine who is stressed

IDENTIFY

- Assess for events that may increase stress, or for times when multiple stressors are impacting a Marine
- Assess behaviors for changes in the face of stressors
- Assess coping skills and level of functioning
- Intervening when seeing a Marine in trouble (e.g., car accident, assault, sexual assault, etc.).

TREAT

- Know available resources, MTF, MCCS, Chaplain, MFLC, phone numbers, locations
- Peer mentorship and leaders should be engaged throughout treatment
- Follow up on treatment appointments, take Marine to appointments as needed
- Monitor progress
- Normalize use of counseling
- Empathy, listening, conversation skills

- Have positive reintegration plan for Marines who return from counseling/medical care
- Change attitudes of peers who may not accept these Marines in the unit
- Normalize use of counseling
- Empathy, listening, conversation skills
- Support transition process for Marines transitioning to veteran status (those whose recovery is insufficient to permit return to full duty)
- Communicate a consistent attitude of trust and respect
- Set clear expectations for performance

OSCAR TEAM ACTIVITIES PLAN

S-STRENGTHEN M—MITIGATE I—IDENTIFY T—TREAT R-REINTEGRATE

WHO LEADS?												
PARTNERS/ RESOURCES (Who can help?)												
ACTION STEPS (Methods, tracking progress, etc.)												
TIMELINE												
ACTIVITY												
SMITR												

EXERCISE 4F: LEADERS DRIVE STRESS CONTROL

Add at least three ideas for your growth in both categories:

LEADERSHIP	INDIVIDUAL
<ul style="list-style-type: none">• Establish intent• Generate buy in• Set the example/inspire• Know available resources• Instill fitness of body, mind, spirit, social• Supervise• Foster healthy relationships• Know your Marines and look out for their welfare	<ul style="list-style-type: none">• Know yourself, seek self-improvement• Take personal responsibility• Intervene on fellow Marine's behalf• Know available resources• Embody fitness of body, mind, spirit, social
1)	1)
2)	2)
3)	3)

HELPFUL APPS FOR OSCAR 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.

Tactical Breathing



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

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

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.

OPTIMAL BEHAVIORS FOR MARINES

TAKE CARE OF YOUR BODY

- 1** Eat a variety of foods that are rich in vitamins, minerals, and fiber. Limit fats, cholesterol, salt (sodium), and added sugars (in food and beverages). The Nutrition Facts label will help.
- 2** Avoid caffeine (especially energy drinks). Caffeine can alter moods and make stress reactions worse.
- 3** Be aware of the impacts of supplements.
- 4** Eat regular meals at consistent times to help maintain energy.



- 5** Choose lean, low-fat or fat-free foods—for example, milk and meats. Bake, roast, or poach instead of frying. Choose higher fat options sparingly; save those for special occasions.

STAY IN PEAK SHAPE



Regular exercise helps you maintain good health and get back a sense of routine in a time of transition. Practice good form and safe habits, especially if you are exercising frequently at a high intensity level.

- Creating relevant goals aligned with a combined program of weight training, cardio, and nutrition provides the best results.
- Any amount of physical activity is better than none; participating in even a small amount of physical activity provides health benefits.
- Before exercise, warm up for about 10 minutes to reduce chances of injury from overusing cold muscles.
- Adults should do at least two hours and 30 minutes a week of moderate-intensity, or one hour and 15 minutes a week of vigorous-intensity aerobic physical activity, or an equivalent combo.
- For more extensive health benefits, adults should increase their aerobic physical activity to five hours a



week of moderate intensity, or two hours and 30 minutes a week of vigorous intensity, or an equivalent combo. More health benefits are gained by engaging in physical activity beyond this amount.

- Gain additional benefits by doing strengthening activities that are moderate or high intensity and involve all major muscle groups two or more days a week.
- After exercise, stretch while muscles are warm. This will lengthen muscles to avoid injury.

FOR MORE WELLNESS AND NUTRITION ADVICE, VISIT USMC-MCCS.ORG OR YOUR SEMPER FIT.

YOUR OSCAR TEAM POC: _____

BE AN OPTIMIST INSTEAD OF A PESSIMIST

Discard Negative Habits

Build Positive Habits

<p>Personalizing: 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.</p>	<p>Contextualizing: 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.</p>
<p>Over-generalizing: 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."</p>	<p>Specifying: Think through when you have been able to successfully handle challenges. Recognize when you have been capable and successful.</p>
<p>Fortune-telling: Somehow knowing your problems will never get better, and they will always be your fault while assuming anything that can go wrong will.</p>	<p>Delimiting: 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.</p>
<p>All-or-nothing thinking: Seeing the world in black and white; always and never. Judging past events in terms of complete success or complete failure.</p>	<p>Balancing: 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.</p>
<p>Filtering: Focusing mostly on the negative aspects of the situation even though there may be many good things about it as well.</p>	<p>Problem solving: Do not focus on the things that are going wrong. Instead, focus on the opportunities to make the situation better.</p>
<p>Mind reading: 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.</p>	<p>Trusting: 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.</p>
<p>Disqualifying: Discounting your successes and others' encouragement or compliments and finding a way to interpret even these good things in a negative light.</p>	<p>Appreciating: Take time to think about your successes and value them. Remind yourself of your strengths and talents.</p>
<p>Magnifying: Noticing every little mistake or problem and overestimating their importance. Allowing small problems or criticisms to overly affect feelings.</p>	<p>Perspective taking: Review the positive facts about the situation in your mind. This includes dealing successfully with challenges.</p>
<p>Emotional reasoning: 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.</p>	<p>Grounding: Remind yourself of the facts of the situation. Consider whether there may be any outside factors that influence your feelings.</p>
<p>Obligating: 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.</p>	<p>Gauging: Be flexible and recognize that perfection is not the goal. Remember that your best is what is expected.</p>
<p>Labeling: Judging and labeling yourself in a negative way, such as personal name-calling.</p>	<p>Acknowledging: Think of everything about yourself that a single label could never capture. Remind yourself how inaccurate it is to pigeon-hole.</p>
<p>Comparing: Measuring self-worth by comparing with other people and thinking about how much better they are at everything in comparison.</p>	<p>Admiring: 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.</p>

TRAUMATIC BRAIN INJURY (TBI)

TBIs are the result of a blast, blow, or jolt to the head, or a penetrating head injury that disrupts the function of the brain.

TBIs can be caused by any blow to the head.

Blast injuries are a common cause, but TBIs can also be caused by vehicle accidents, sports injuries, falls, or physical blows to the head.

The Marine may not realize the extent of the injury. If you notice a Marine's performance has changed following a head injury, make sure the Marine gets medical care.



A traumatic event can cause both a TBI and a Combat Stress Reaction. Some TBI symptoms overlap with Combat Stress Reactions, but TBIs and Combat Stress Reactions are not the same things. TBIs are caused by a physical injury to the head. **Only a health provider can determine if the Marine has suffered a TBI, a Combat Stress Reaction or both.**

A concussion is a mild TBI. If a blow, blast or jolt results in brief unconsciousness (0-30 minutes), altering of consciousness (dazed, confused) of 24 hours or less, or memory loss (24 hours or less), the Marine should be checked for TBI.

TBIs have a direct impact on a Marine's ability to complete the mission:

- TBIs can affect physical and mental strength, slow reaction time, and hurt balance and coordination.
- TBIs result in decreased mental functioning and can keep Marines from performing normally.

Repeat exposure compounds risk for TBI.

Exposure to a new blast or blow to the head before the Marine has recovered from the last TBI can make the damage even worse. It is critical to ensure proper treatment and avoid repeat concussions.

Line Response–The 5 Rs:

Recognize–Initial evaluation (I.E.D. Checklist)

Rest–Mandatory 24-hour rest period

Refer–Medical evaluation

Report–Document Significant Action (SIGACT) in Combined Information Data Network Exchange (CIDNE) and Blast Exposure and Concussion Incident Report (BECIR)

Return to Duty–Coordinate return to duty determination with medical

Marines with prior TBIs may take longer to recover from a new TBI, but a full recovery can be expected. Marines should mention earlier injuries, including childhood concussions, as this may impact the treatment plan.

SCREENING FOR TBI IS MANDATORY WHEN:

- A Marine is in a vehicle involved in a blast event, collision, or rollover.
- The Marine is within 50 meters of a blast (even if he or she is inside and the blast is outside).
- A Marine receives a direct blow to the head.
- The command directs that a Marine be evaluated.

DIAGNOSIS

TBIs are a physical injury or disruption of brain function that result from external force to the head. The terms mild TBI, mTBI, and concussion are all used interchangeably. They must have at least one of the following symptoms:

- Loss of consciousness or decreased consciousness
- Loss of memory before or after injury
- Change in mental status (confused, disoriented, or slow thinking)
- Neurological deficits
- Intracranial lesions.

TREATMENT

Medical provider should determine management. It may include:

- Reduced stimulus
- Education about TBI
- Supportive command with restricted duty status
- Pain management
- Rehydration and nutrition
- Continuous consultation with medical provider

POST-CONCUSSION SYMPTOMS

Emotional	Physical	Cognitive
Anxiety	Headache	Slowed processing
Depression	Dizziness	Decreased attention
Irritability	Balance problems	Poor concentration
Unstable Mood	Nausea/vomiting	Memory problems
	Fatigue	Problems finding words
	Visual disturbances	Abstract reasoning problems
	Sensitivity to light/noise	
	Ringing in the ears	
	Sleep disturbances	

PROTECT YOUR STRONGEST WEAPON

Concussion
Know the symptoms

H Headaches and/or Vomiting ✓

E Ears Ringing ✓

A Amnesia, Altered Loss of Consciousness ✓

D Double Vision and/or Dizziness ✓

S Something Feels Wrong or Is Not Right ✓

If you or a buddy experiences symptoms of a **CONCUSSION**, get checked out.

Events That Require a Medical Evaluation for Possible Concussion

- Being in a vehicle blast event, collision or rollover
- Being within 50 meters of a blast (inside or outside)
- A direct blow to the head – Including non-combat head injuries in-theater
- Someone says – or you feel – you may have lost consciousness
- Exposure to more than one blast event

Released: December 2013 | Revised March 2019
This product is reviewed annually and current until superseded.
Visit dvbic.dcoe.mil for the latest information.

DVBIC is the TBI center of excellence for the Defense Health Agency.
4061.1.1.12

BLOOD TEST CAN HELP DIAGNOSE TBI

Research funded by the Department of Defense and the US Army has found two proteins rapidly appear in the blood following a blow or jolt to the head when a serious traumatic brain injury occurs. The Brain Trauma Indicator blood test that can identify whether the proteins are in the blood or not. With the blood test as a diagnostic tool, medical professionals can rule out more serious brain injuries while evaluating someone with a suspected concussion.



YOUR OSCAR TEAM POC: _____

SPIRITUAL FITNESS GUIDE

Spiritual Fitness Guide: This is a self-assessment tool to help service members determine their spiritual condition.

FIT	STRESSED	DEPLETED	DRAINED
<p>Potential Indicators</p> <ul style="list-style-type: none"> ➤ Engaged in life's meaning/purpose ➤ Hopeful about life/future ➤ Makes sound moral decisions ➤ Fully engaged with family, friends, and community ➤ Able to forgive self and others ➤ Respectful of others ➤ Engaged in core values/beliefs 	<p>Potential Indicators</p> <ul style="list-style-type: none"> ➤ Neglecting life's meaning/purpose ➤ Less hopeful about life/future ➤ Makes some poor moral decisions ➤ Somewhat engaged with family, friends, and community ➤ Difficulty forgiving self or others ➤ Less respectful of others ➤ Straying from core values/beliefs 	<p>Potential Indicators</p> <ul style="list-style-type: none"> ➤ Losing a sense of life's meaning/purpose ➤ Holds very little hope about life/future ➤ Makes poor moral decisions routinely ➤ Weakly engaged with family, friends, and community ➤ Not likely to forgive self or others ➤ Strong disrespect for others ➤ Disregards core values/beliefs 	<p>Potential Indicators</p> <ul style="list-style-type: none"> ➤ Feels like life has no meaning/purpose ➤ Holds no hope about life/future ➤ Engaged in extreme immoral behavior ➤ Not engaged with family, friends or community ➤ Forgiveness is not an option ➤ Complete disrespect for others ➤ Abandoned core values/beliefs

If you find yourself in need of support, do not suffer in silence. Seek immediately from any avenue of support.

Resources for Support

- Chaplain – Military and Family Life Counselors – Community Counseling Program – Family Readiness Officers – Leaders – Family or Friend – MCCS One Source – DSTRESS 1-877-476-7734

Your Chaplain cares about you and is committed to helping with your spiritual fitness. Absolute 100% confidentiality is guaranteed.

CHAPLAIN POC: