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**A PSYCHOLOGICAL GUIDE
FOR LEADERS
ACROSS THE DEPLOYMENT CYCLE**

Edition A Version 1

OCTOBER 2019



NORTH ATLANTIC TREATY ORGANIZATION

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CHAPTER 1 EXECUTIVE SUMMARY

NATO Task Group HFM 081/RTG on “Stress and Psychological Support in Modern Military Operations” was formed in 2002 with the direction that it was to run for a period of 4 years. HFM 081/RTG consisted of over 30 professionals representing 19 different NATO and PfP nations, including a variety of military and civilian defence professionals from the field of military psychological support, representing a range of disciplines, such as psychology, psychiatry, social work and sociology.

Among its various achievements, the Task Group conducted an international research project, a Military Leaders’ Survey of 172 NATO and PfP military leaders across 16 nations who identified key areas of interest related to psychological health on operations.¹ These leaders included both officers and enlisted personnel from all branches of service. Each participant had served in a leadership capacity on a deployment sometime in the past two years. Leaders described areas related to operational stress about which they wanted information, and they also provided personal accounts illustrating key points.

The Task Group also produced reports on best practices in psychological support before, during and after operations, inventories of instruments used to survey unit morale as well and an inventory of clinical tools used across NATO- and PfP nations for assessment, intervention and education with individuals and groups before, during and after deployments in routine and crisis situations. In addition, the Task Group sponsored a ground-breaking NATO symposium, HFM-134, “Human Dimensions in Military Operations: Military Leaders’ Strategies for Addressing Stress and Psychological Support”. The symposium, developed by the Task Group and co-sponsored by the NATO Committee of the Chiefs of Military Medical Services (COMEDS) Military Psychiatry Working Group (MP-WG), was held in Brussels in April 2006 and served as a platform for the latter part of the Task Group’s work.

The final product of the Task Group is a series of guidelines for psychological support in military operations, in the form of a Military Leaders Guide. Military leaders at all levels have a key role in sustaining the mental readiness of service members under their command and play an important part in maintaining morale on the home front for military families. The Guide provides military leaders with information and practical strategies for dealing with stress and the provision of psychological support in order to enhance unit effectiveness in modern military operations.

The information presented in the report and guide is the result of the Task Group’s international collaboration which was reviewed and updated in 2017. While there are gaps in the research literature and therefore a lack of science-based evidence to support some of the decisions about psychological support in military operations, the members of the NATO Military Mental Health Panel have made recommendations based upon what is considered to be current best practice.

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CHAPTER 2 MILITARY LEADERS' ROLE IN PSYCHOLOGICAL READINESS

Chapter Objectives:

- Review impact of deployment stressors on unit
- Discuss role of leadership and training
- Identify goals of guide

2.1 INTRODUCTION

Box 1.1: The First Casualty

“Three months into a year’s deployment a night patrol was ambushed and a personnel vehicle was struck by a rocket-propelled grenade [RPG]. A soldier was pinned underneath. Military police arrived and there was a one-and-a-half hour gun battle during which time the trapped soldier was screaming. We got him out but he died at the scene despite resuscitation attempts. The incident affected everyone badly. On return to base, some soldiers unleashed their feelings; others bottled them up. For many this had been a first combat exposure. No mental health support was available that night. Many were stressed out.”

- *Military Leaders Survey*

Being a military leader is a challenging job. Besides achieving operational objectives, unit leaders handle a range of problems affecting unit readiness. Whilst most military personnel do well on deployment, it is the leader’s responsibility to manage psychological support when individuals are affected by operational stressors. Unit leaders may be called upon to come up with solutions when faced with crises such as the death of a unit member (see Box 1.1). Leaders must also settle less dramatic issues such as conflict within their unit. The way in which leaders address these challenges has a profound impact on unit readiness and performance.

The skills, responsibility and authority of military leaders put them in a unique position to make a significant difference in how unit members cope with operational stress. This guide is designed to provide leaders with tools to help them manage the array of psychologically demanding experiences that can occur during an operation and which have the potential to degrade individual and unit performance.

2.2 THE DEMANDS OF OPERATIONAL LIFE

Psychologically demanding experiences can involve a range of events which individuals may interpret differently. What is stressful for one person may not be stressful for another. The impact of various stressors may also not be the same. Some stressors may affect an individual’s ability to concentrate; another stressor may affect an individual’s mood. There are, however, certain basic characteristics associated with high-stress events.² These include events that are:

(1) Threatening

Example: being shot at during a fire fight

(2) Overwhelming

Example: being confronted with the death of a unit buddy

(3) Unexpected

Example: being surprised by bad news from home while deployed

(4) Uncertain

Example: being on a mission with an unclear return date

(5) Ambiguous

Example: having to respond to an incident when rules of engagement seem unclear

When an event has these characteristics it is likely to be considered demanding. Unit members may experience many different types of demands. One way to think about the demands that unit members face on a deployment is to categorize them into two groups: the daily hassles of deployed life and the dangers experienced from operational stressors.

2.3 DAILY HASSLES

Deployed life stressors include missing family and friends and living in unfamiliar, culturally strange surroundings. Other sources of chronic stress associated with deployed life can vary widely across operations, but include:

- lack of privacy
- The demands of close quarter living and group interaction.
- sexual deprivation
- hassles in terms of maintaining hygiene
- exposure to extreme weather conditions
- Exposure to home events via electronic means

Work-related demands are another chronic source of stress. These demands include work hassles found in garrison in addition to factors with special relevance to a deployed environment, such as boredom.

Taken alone, daily hassles may be tolerable; however, the cumulative effect of exposure to hassles potentially takes its toll on deployed personnel (see Box 1.2). Thus, it is the responsibility of leaders to consider the combined effect of daily hassles on unit members.

Box 1.2: Deployed Life

“Problems can occur due to separation from family and friends, living together in close quarters without the comfort of home. The psychologist and chaplain were present during the mission but, in case of problems, troops would rather address NCOs or Officers before speaking to 'specialised' personnel. Leaders must make an effort to emphasise the importance and necessity of the mission and try to allow maximum communication with friends and family.”

- Military Leaders Survey

2.4 OPERATIONAL STRESSORS

The duties performed on operations can expose military personnel to stressful and traumatic events. These stressors are likely to vary by operation, mission, and branch of service. For example, aircrews often fly from relatively safe rear areas into high-intensity combat and back. This constant transitioning from a secure area to a high-threat area is a typical demand facing aircrews. Troops on the ground may report different kinds of stressors such as managing uncontrolled crowds, experiencing rejection by the local population, and witnessing destruction caused by regional conflict (see Box 1.3).

Box 1.3: A Leader on Patrol

“The most difficult moment I had to deal with was not a battle event. We were patrolling in a village. I was stunned to see the poverty the people were living in; their houses, the look on their faces, the ill children, everyone looking much older, the way women were treated. It was a completely different society than the one I was used to. I had heard a lot of stories from my colleagues describing the lives of these people, but the reality was hard to take in. In addition, I was thinking that at any given moment one of these people could point a gun in my face, so there was always this feeling of lingering danger. I felt pity for these people and I wanted to help them and better understand them. I was not prepared to witness such suffering and I needed a long time to adjust. Talking to other military personnel, translators, and locals, helped with this adjustment.”

- Military Leaders Survey

Potentially traumatic events are a more extreme type of stressor. They are typically associated with serious injury or death, or the threat of serious injury or death (see Box 1.4). On operations, these potentially traumatic experiences may involve events such as:

- Snipers
- fire fights
- improvised explosive devices (IEDs)
- traffic accidents
- mass graves
- body handling
- Crowd and riot control.

Box 1.4: Encountering Threat

“Several times, I'd found myself in a situation where I led a unit against an enraged crowd of people. I'd have appreciated the presence of a specialist or at least somebody who had undergone some specialised training...and knew what to do when soldiers come into contact with dead bodies.”

- Military Leaders Survey

Potentially traumatic events tend to be relatively easy to recognise as significant stressors, and they are likely to have an impact on individuals and units. While most service members will do well, they may be changed by these deployment experiences because deployments can:

- Affect the way in which people prioritise what is important to them
- Change the way people see themselves and the world
- Give military personnel a sense of accomplishment and pride.

The task of the military leader is to provide the conditions under which positive adaptation to both potentially traumatic events and daily hassles can be optimised.³

2.5 WHAT CAN LEADERS DO?

The real-life incident described in Box 1.5 details the complex role of a military commander. In the midst of a mission, the leader's role involved keeping troops focused on the immediate objective. Following the mission, that role shifted to creating the conditions for resilience.

Box 1.5: Timing Leadership Actions

"The marines in my company had had minor fighting contact with the enemy up to this point and had come to feel, in my opinion, that they were naturally so well trained, fit and alert that this was all no more difficult than an exercise at home. When they extracted from the ambush, however, it was clear to them that they had had to fight for their lives. They had seen and dealt a lot with death and destruction and they'd had some miraculous escapes. It was a really prominent turning point when they all became combatants, not simply Marines. There were some who could not articulate their thoughts properly, a number who were still in shock and demonstrating irrational behaviour. There was a great deal of stress.

The response was straightforward. We had a task to do; others needed our help urgently and the men needed direction. My approach was unsympathetic, harsh, and purely business-like and the response was exactly what I needed. They swept into order and set off to confront whatever was assaulting their colleagues. They were so accustomed to what was needed that after 10 days of clearances and patrols I had little more to do until we stopped.

On stopping, perhaps one hour later, I went round most groups and my troop leaders and my sergeant major did the same. Most of the men were simply getting on with basic drills, cleaning weapons, re-arming, grabbing some food and sleep. Follow on orders had not been given at this stage so there was no sense of the next task, which would have given more tangible direction, and it was needed. All understood that we were going back into where we had just been. The men were dealing with stress themselves, with humour, discussion, talking through what had happened. Some had shot the enemy at less than 10 feet range and were starting to consider that. A few had had escapes that defied belief. My only input was to encourage them to talk about it, not to worry about it, to feel good that they had probably saved themselves and more importantly their buddies. They did not really need de-stressing, they were doing it themselves, all that we (the chain of command) provided was the sense of purpose, resolve, and the assurance that everything they had done and were feeling was entirely alright....

I don't have any miracle cures to offer you, except that talking with other leaders is essential."

- Military Leaders Survey

As the leader's account illustrates, unit members reacted in different ways. Coping is highly individual. As long as the coping method is helping and is not destructive, people should be encouraged to use what works best for them. Cohesive military units often automatically provide an environment that supports healthy coping.

They do it through joking around, creating strong bonds of friendship, and sharing stories that show reactions are normal. Many military units also provide traditions that help unit members make the switch from home to deployment and back again. Sometimes leaders don't need to do anything overt. As described in Box 1.5, leaders can monitor the unit to make sure natural unit processes are happening. When these processes are not working, however, the leader will need to intervene. Leaders need to assess how their unit members are doing and create the right climate to achieve healthy coping.

There are two ways leaders can step in: informally and formally. Throughout this guide, both types of support are addressed. To facilitate the informal process, leaders can foster a supportive unit climate, develop a sense of cohesion, and prioritise buddy support. They can also identify unit members who can coach and support the less experienced.

Leaders may also need to intervene formally. Formal mechanisms include using structured assessments of psychological fitness and morale, and relying on assistance from Mental Health Professionals. To effectively use formal mechanisms, leaders need to know the chain of support. This chain may include various Mental Health Professionals (see Definition Box) who provide additional expertise to the leader. Leaders will benefit from knowing how to work with these Individuals before deploying. Pre-deployment is also an ideal time to establish a strong, resilient unit climate, and the best way to do this is with effective training.

Definition Box
"Mental Health Professionals"

A broad term developed for this guide that encompasses a range of disciplines including:

- Psychologists
- Psychiatrists
- Social Workers
- Psychiatric or Mental Health Nurses/Nurse Practitioners
- Physicians

These professionals support units on operation and often work together as a team.

2.6 THE ROLE OF TRAINING

Military training exercises can strengthen both the formal and informal mechanisms of support. The formal mechanisms of support are strengthened when Mental Health Professionals are integrated in training and leaders and unit members learn how to use the formal support system.

Informal processes are strengthened through training together. Tough, realistic training develops unit confidence (Box 1.6) and builds camaraderie and appropriate expectations. Such training is particularly important for units that have not previously worked together and for integrating military personnel attached to a unit for a deployment (often called augmentees). Integrating augmentees is an important task and leaders might want to focus specifically on this issue to support the development of unit cohesion.

Box 1.6: The Best Preparation

“...the best cure lies in experience but, in its absence, it lies in the training at the Training Centre, which is quite simply the best preparation a man can have short of live contact. The standards, discipline, camaraderie, cohesion and spirit (a little harder to define but very important) across all ranks (officers train alongside their men) cannot be found anywhere else.”

- Military Leaders Survey

Well-trained military personnel report that even in difficult circumstances, their training provided a basis for successful coping (Box 1.7). Good training enhances confidence in oneself, in peers, and in unit leaders. This confidence helps protect military personnel from the negative effects of stress. Unit training provides a cornerstone for developing a positive unit climate.

Box 1.7: Training Kicks In

“During a recent war deployment in the Middle East, I was a senior officer... We received information that the ship was under imminent threat of a missile attack. It was a very stressful situation. We knew where the missiles would land but we did not know if they would have chemical warheads and what the fall out would be. ...For half an hour we did not know if the weapons would wipe out half the task force. The whole incident lasted a couple of hours. I was shaking with relief that I had done the right thing – the training ‘kicked in’.”

- Military Leaders Survey

Tough, realistic training also helps leaders prepare unit members mentally. Unit members can learn what to expect in terms of deployment stressors, and get a sense of how they might react under difficult conditions.

Leaders need to think about their own psychological preparation, too. They should be prepared to face a tough reality. This reality includes “Ten Tough Facts” identified by military Mental Health Professionals in the Research Task Group’s NATO Symposium:4

- Fear in combat is common
- Unit members may be injured or killed
- Combat events affect everybody mentally and physically
- Unit members will be afraid to admit that they have a psychological problem
- Unit members will perceive failures in leadership
- Breakdowns in communication are common

- Deployments place a tremendous strain on families
- The deployed environment can be harsh and demanding
- Unit cohesion and stability can be disrupted
- Deployment poses moral and ethical challenges

Whilst good training is the basis of building an effective unit, actual operational events can be quite different from training scenarios (Box 1.8). Things can go wrong. It is during and after these moments – in the gap between expectations and reality – that a leader’s utmost flexibility and adaptability are required.

Box 1.8: Training Can Never Fully Prepare You

“I was involved in very stressful urban combat. The unit had to kill a number of adversaries and afterwards it took a while to stabilise the unit. The first experience with such a situation is very stressful and hard to explain to those who have not experienced such a situation themselves. ...Training can never fully prepare you for being in the situation personally. Following the traumatic incident some subordinates suffered from feelings of guilt and most problems arose about a month after the incident. Many of the stories recounted were similar in nature and content, which proved to be of some therapeutic value. Some soldiers dwelt on whether or not they had been responsible for enemies' deaths or even those of innocent civilians and needed support and reassurance from their colleagues. The ultimate decision on whether or not to pull the trigger and kill another human being will always be a personal one, since officers can command, but not (totally) control their soldiers. Therefore, it is an important responsibility of an officer to support his soldiers when they have to make such a decision: not to excuse the soldier of making the decision, but to help him cope with having made it.”

- *Military Leaders Survey*

2.7 MENTAL HEALTH, MORAL DILEMMAS AND LEADERSHIP

There has been renewed interest in moral dilemmas and the impact it may have on service member’s psychological health and indeed fitness. A recent HFM-RTG Research Task Group-179 on “*Moral Dilemmas and Mental Health Problems*”⁵ examined this issue and has published a technical report that can be found on the NATO STO website:

<https://www.sto.nato.int/publications/STO Technical Reports/STO-TR-HFM-179>

Within this report and related publications are points that are essential for the leaders and mental health professionals in NATO militaries.

Research has demonstrated a bidirectional link between moral dilemmas and mental health. The first, and likely most commonly discussed, is that one of the consequences of moral dilemmas, or witnessing or being part of moral transgression, can lead to mental health problems including Post-Traumatic Stress Disorder. This has often been categorized as “moral injury” and is particularly relevant as shame and guilt can manifest and interfere with

recovery. The second direction is the finding that those experiencing mental health symptoms are at increased risk of ethical transgressions. This is yet another reason for military leaders to know their subordinates well and watch for psychological difficulties. The issue is particularly relevant in the modern asymmetric battlefield in which soldiers often work in very small teams, without direct oversight by command. Those under duress have ready opportunity to act inappropriately in ways such as mistreating the enemy, local civilians etc. Soldiers must be aware that the consequences of a single bad decision can erode local, national, international and host nation support, thereby potentially derailing the strategic mission and putting troops at risk. Leaders must recognize when psychological stressors arise, either insidiously during a mission or acutely such as after an IED attack with deaths, the risk of soldiers acting out in revenge or transgressing their ethical boundaries increases. Leaders must be vigilant and remind soldiers of the pitfalls.

Fortunately training and tools exist that leaders can use in order to mitigate the potential risks of ethical breaches and nations are encouraged to explore their use. The recommendation is that mental health awareness be integrated in ethics training and likewise ethical consequences be integrated in traditional MH training.⁶

2.8 OVERVIEW OF THIS GUIDE

In a 16-nation survey conducted for this guide, 172 military leaders from NATO and Partnership for Peace nations with recent operational experience were asked about their experiences managing the psychological adjustment of their subordinates. Many of the leaders mentioned the importance of relying on their past experience and their own instinct. Overwhelmingly, and across ranks from sergeant to battalion commander, leaders also said they wanted and needed specific information about what they could do to address psychological stress issues. Leaders wanted information about how to assess problems and minimise the effects of operational stress on military personnel across the deployment cycle. The results of the survey were used to develop this military leader's guide on managing the psychological stress of unit members. The following selection of quotes demonstrates the kinds of requests leaders made for this guide.

- "Use real-life situations."
- "Provide information about stress and how to take preventive measures."

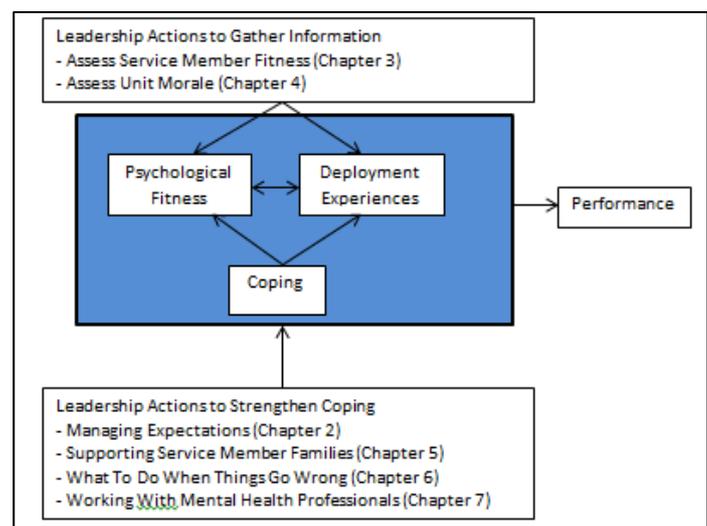


Figure 1.1. How Leaders influence the impact of Operational Stress on Unit Member Performance

- “Provide practical tools for psychological support during deployment.”
- “Illustrate the problems that can occur using scenarios.”
- “Advise military leaders on how to improve a unit's morale.”
- “Cover coping with family problems.”
- “Emphasise leader coping -- they take on a lot of the burden and are often overlooked”.
- “Include post-event management.”
- This guide was designed to meet the requests of military leaders, and to augment the training that they normally receive. The guide addresses the gaps military leaders describe: the gaps between their training and the reality of operational stress on deployment.
- The following chapters focus on six main areas:
- The fundamental assumptions military personnel bring to military service (Chapter 2);
- Assessing and supporting individual fitness (Chapter 3);
- Assessing and supporting unit morale (Chapter 4);
- Providing family support (Chapter 5);
- Managing the psychological impact of traumatic events (Chapter 6)
- Getting the most out of Mental Health Professionals (Chapter 7)

The aim of each chapter is to provide military leaders with clear guidance on what they should consider when supporting the psychological health of their personnel.

As illustrated in Figure 1.1, military leaders influence the impact of operational demands on unit member health and performance by gathering information on fitness through individual and unit assessments. They also can intervene to strengthen individual and unit level coping given deployment experiences and stressors. This leadership role extends beyond the deployment to the post-deployment phase as well.

Each chapter provides core information illustrated by real- world examples. These examples come from the 172 military leaders who responded to the survey. The accounts were selected because they reflect issues that leaders talked about on the survey and are relevant for military leaders regardless of their nationality. Although nations differ on the specific ways psychological support is organised and differ in terms of cultural background, all military leaders face the same task of supporting their military personnel to deal with the stress of operations.

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CHAPTER 3 WHAT UNIT MEMBERS AND LEADERS EXPECT

Chapter Objectives:

- Explain the importance of managing expectations
- Identify consequences of failing to meet expectations
- Provide list of leader behaviours to manage expectations

3.1 INTRODUCTION

Box 2.1: A New Mindset

I deployed as the commander of an engineering unit. The unit was mainly prepared for building and repairing stuff. This kind of work was probably the main reason many of the soldiers enlisted in the first place, an expectation the military didn't correct because our military needed specialists. In theatre, these specialists suddenly found themselves in the thick of the fight. There was no safe area to work in so they couldn't do what they expected to do. Instead, the unit had to do patrols and secure their own communication lines. These engineers even ended up in fire fights with enemy forces. As the commander, I had to face the challenge of quickly giving the unit a new mindset while maintaining discipline and morale.

-Adapted from Colonel Novosad & Captain Stepo, NATO RTO HFM-134 Symposium

In modern operations the military is often under pressure to adjust to rapid change. Leaders must themselves be prepared, and prepare their troops, for the unexpected. For instance, shifts in operational circumstances may require units to do things for which they were initially unprepared. These kinds of rapid changes are common. They affect units and individuals. Leaders are responsible for managing these changes and bringing unit member expectations in line with changing requirements (see Box 2.1 for a real-world example).⁷ Given that the military requires rapid change, it can easily violate the expectations of its personnel. Military personnel have many expectations of their organisation, as do military families. Even society in general has basic expectations about what the military should provide and about how it should behave. For example national expectations as missions shift from peacekeeping to combat operations. These expectations also change over time. On military operations there is little room for a gap between expectations and what the military delivers. Military personnel expect their leadership to provide the necessary tools for mission success and in turn are ready to provide loyalty and to make sacrifices. The failure of the military to meet these expectations can lead to problems with discipline and performance. Such problems can have particularly crucial consequences on deployment. In contrast, gaps between expectations and reality in civilian life may not necessarily have serious consequences. There are often more possibilities for negotiating alternatives than in the military.

Ultimately, it comes down to what the military organisation promises, either explicitly or implicitly, to their military personnel. These promises are sometimes difficult to keep in an operational setting. There may not be adequate time to fix the disconnection between expectations and reality. But, nonetheless, managing these expectations is critical for sustaining motivation.

This chapter provides military leaders with general guidelines for creating a favourable environment for dealing with stress that comes from violations of expectations.

The recommendations in this chapter reflect general principles of good leadership. They may largely seem to be common sense, but even “simple” truths that leaders agree upon can easily be forgotten under stressful circumstances, as illustrated in Box 2.2.8

Box 2.2: A small sacrifice

In interviews with NCOs during an operation, it was a common complaint that their junior officers never visited the troops, especially if the troops were located in a very austere environment. Naturally the assumption was that their leaders didn't want to be inconvenienced by having to travel from their air-conditioned headquarters buildings to where the troops were located in 120 degrees heat. Impressively, the NCOs did not resent their leaders having air-conditioned work environments, although they themselves did not, but they did take exception to their leaders' apparent unwillingness to sacrifice a little by refusing to visit them.

- Adapted from Lieutenant Colonel Castro, et al., NATO RTO HFM-134 Symposium

3.2 EXPECTATIONS AND THE MILITARY

What exactly is meant by expectations? Box 2.3 shows examples of the expectations held by service members, the military organisation, and the larger society. All three have expectations of each other. These expectations demonstrate that the military is no ordinary job.

Recruits join the military with a set of expectations about what the military will provide. These expectations are formed in part from myth – from stories they've heard from friends, from what they've heard on television, from images of war heroes in the movies. Recruits calculate what they perceive as the costs and benefits of military service in making their decision to join. Their expectations range from basic benefits (such as earning a living), to higher goals (such as becoming part of an elite organisation), and ideals (such as changing the world). Some of these expectations will be modified by experience.

Box 2.3 Examples of Expectations

Expectations held by service members

- Money and financial security
- Adventure and travel
- Being part of an elite community
- Leadership
- Care in the event of injury in the line-of-duty
- Recognition of service
- National support for military tasks

Expectations held by the military organisation

- Discipline and obedience
- 24/7 availability
- Fitness and endurance
- Skill specialisation

Expectations held by society

- Protection
- Sacrifice
- Exemplary behaviour

For those who complete basic training, and remain in the military, these basic expectations evolve over time. Service members expect the military to provide certain benefits and, in fact, consider these benefits to be the military's obligation. In exchange, the military organisation expects discipline and commitment from its service members. For those who have deployed there is a positive post deployment transition home associated with good leadership perceptions, unit cohesion and personal support.

Box 2.4 Examples of Unmet Expectations

- Boredom during the mission may be more common than expected
- The senior leadership may be a disappointment
- Some of the “band of brothers” may be more irritating to be around as the mission progresses
- The locals being protected by the mission may be downright hostile
- A spouse might want a separation rather than deal with continuous deployments

These intertwining sets of expectations and obligations are sometimes explicitly stated, as exemplified by service members' enlistment oath, but frequently these expectations are unspoken. Expectations are like a “psychological contract” between service members and their military organisation. Even when military personnel find that military life is a good fit, there will undoubtedly be times in their career when they are disappointed (see Box 2.4). It is when expectations are unmet, when the “contract” is broken, that service members begin to experience, and eventually express, their discontent. Leaders may find themselves dealing with the consequences.

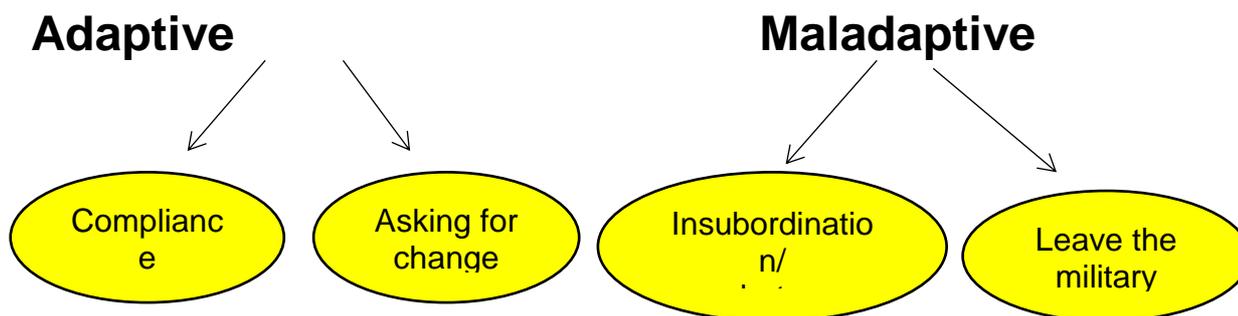
Like their subordinates, leaders also have expectations of military life. They may find meeting the demands of military life rewarding, and they may find that deployment is an enriching experience. In addition, being in a position of leadership can be rewarding. Leadership brings responsibility, power, and the experience of being a key role model. Nonetheless, leaders may also have unmet expectations. They may find that leadership is not as rewarding as they imagined, and that deployment is difficult and disappointing. They may also find “it's lonely at the top”, and constantly having to set an example takes its toll.

Service members may not be prepared to deal with these unexpected costs of military service. These costs are calculated by service members when they consider their decision to continue to serve. When there is a mismatch between what unit members expect and what the military expects, there can be several different reactions.⁹

3.3 ORGANISATIONAL PERSPECTIVES ON REACTIONS TO VIOLATIONS OF EXPECTATIONS

Reactions to violations of expectations can take two basic paths.¹⁰ First, there is an adaptive path in which the service member deals with the situation. These responses are considered adaptive from the military's perspective because the mission is not put in danger. Second,

there is a maladaptive path in which the service member tries to resolve the situation in ways that may endanger the operation.



3.3.1 Adaptive Responses

Compliance – There can be two forms of compliance: putting the situation in perspective and silent pessimism. The most adaptive form of compliance is putting the situation in perspective. This positive acceptance occurs when the unit has sufficient trust in leaders to tolerate violations of expectations. This response includes the proverbial “suck it up and drive on”, humour, and seeking social support from other service members who understand the reality of military life.

Military personnel do not give trust indefinitely. As trust deteriorates, silent pessimism may take the place of compliance. Silent pessimism may not interfere with mission accomplishment in the short-term, but can take a toll on unit functioning in the long term. Thus, leaders need to pay attention to signs of pessimism. These signs include depression (see Individual Fitness chapter for a description) and low morale (see Morale chapter). Leaders should be aware of these signs so that they can take action before their unit becomes less effective.

“The day soldiers stop bringing you their problems is the day you have stopped leading them. They have either lost confidence that you can help them or concluded you do not care...”

- General Collin Powell

Asking for Change – This response can take the form of confronting the military leader, asking for the situation to change, making suggestions to improve the situation, or threatening to leave the organisation. Confrontation is not necessarily bad, but can end up including insubordination, which violates the military leader’s expectation of the service member.

3.3.2 Maladaptive Responses

Insubordination/sabotage – This response can include anything from passive aggressive behaviour (completing tasks slowly, performing at the lowest level acceptable) to insubordination. It can also include outright destructive acts, such as destroying property or harming oneself to precipitate early release from military service.

Leave the Organisation – Other responses include leaving military service using appropriate procedures or using unauthorised methods such as desertion. Both types of departure from military service may have a negative impact on organisational readiness. Leaving military service can be a sign that service members are no longer willing to tolerate violations in expectations. It can be a sign that trust in military leadership has evaporated. Trust is crucial to unit effectiveness but cannot be taken for granted.

3.4 HOW LEADERS MANAGE EXPECTATIONS MATTERS

Given the power of expectations to affect unit member commitment and loyalty, it is the responsibility of all military leaders to manage expectations from the moment of recruitment. It is important for leaders to understand unit member perceptions of the psychological contract governing military service. Leaders can use this information to predict mismatches between expectations and reality and predict what impact this mismatch will have on unit member motivation.

Leaders who anticipate the consequences of a mismatch can address potential problems in two ways. First, they can try to bring unit member expectations in line with reality by listening to concerns and acknowledging the gap in expectations, normalising the experience of unit members as appropriate, and encouraging the unit member to consider other obligations that the military has fulfilled. Second, the leader can try to redress the failure of the military to meet its part of the bargain. This may take the form of protecting unit members from unnecessary taskings, or providing additional time off to take care of personal business when mission demands have been especially difficult. What follows is a list of other leader behaviours that can help anticipate and manage problems with unit member expectations of the military.

Box 2.5: Maybe Airlines

All service members knew that when it came time to go home that they couldn't rely on the flight schedule. In fact, they dubbed the airline responsible for bringing them home "Maybe Airlines" because they never knew if the flight would leave as scheduled or not.

- *Leader's Guide Reviewer*

3.4.1 Communicate.

Leaders know that they need to communicate their intent, yet effective communication takes effort. It means not only telling subordinates the plan in both formal and informal settings but it also can mean explaining to subordinates when information is unknown. For example, the actual departure date for returning home from deployment might fluctuate depending on aircraft availability (see Box 2.5). This scheduling difficulty is common and has occurred across a variety of operations. The lack of predictability can actively be managed by leaders through the use of humour. At the very least, effective leaders tell their unit members that the date is not yet known and explain why. Effective communication helps both unit members and their families manage expectations.

The other side of communication is creating opportunities to listen to unit members. Active listening in both formal settings (such as during staff meetings) and informal settings (such as on coffee breaks) facilitates communication within the unit. Providing a safe environment for unit members to express their views encourages open communication. The leader who shuts down open discussion may find that unit members become reluctant to provide

important information. As Box 2.6 illustrates, careful listening can be useful in identifying concerns of unit members and developing strategies to increase the readiness of the entire unit. Leaders develop a reputation quickly as unit members pay attention early on to even small indicators of leadership style and these observations are rapidly shared with fellow unit members.

Box 2.6: The Newcomer

I always felt safe with my men, knowing them well, having shared a lot of missions together and being on our third deployment as a team. However, during our last deployment we had a new member of the team join who had no deployment experience. It was not easy to fit him into the team camaraderie as we felt like veterans and had gained vast amounts of experience. Consequently, he was very distant at first and had difficulty sharing things with the team. He had excelled in training but on deployment he wasn't giving 100%. I finally decided that we should get together and talk. During our discussions he said he was feeling intimidated and was worried he would not be able to meet our expectations. I explained to him that there was a first time for everyone and that he had plenty of potential. He taught me an important lesson - that I tended to have the same expectations from him as from my other team members and that it was necessary to go step-by-step and build a relationship. It's important to be a model, but I think it is more important to perceive the chief as close and willing to know you as a person as much as possible. The whole team became more empathetic and took time to explain how things were carried out

-Military Leaders Survey

Be Fair. Unit members will more positively tolerate a violation of their expectations if they believe that the difference between their expectations and the current situation is fair. For example, unit members will be tolerant of a deployment extension if everyone is delayed. Being fair means being:

- Consistent
- Unbiased
- Accurate
- Flexible

Leaders constantly have to make decisions, taking into account their goals along with the impact their decisions have on morale. This balance is something to be considered in every decision. As illustrated in Box 2.7,¹¹ decisions that leaders may think are meeting their desired goal (in this case, discipline) may backfire if unit member expectations of fair treatment are violated.

Box 2.7: No Phone Calls Home

During a peacekeeping mission telephone banks were established for soldiers to use to call home to their families. However, because the telephone switching capacity was severely restricted, soldiers were required to limit their phone calls to 15 minutes twice a week. This was such an essential restriction in order to maintain operational effectiveness that telephone use was monitored by headquarters for compliance. Unfortunately, a few soldiers discovered a way to exceed these time limits. Unable to locate the offending soldiers, whom the leadership knew numbered less than 10 soldiers from a battalion of 700, phone privileges were revoked for the entire battalion for one week. From the perspective of the 690 or so soldiers who followed the rules, this punishment was seen as extremely unfair and inappropriate, especially given that this was their primary means of communicating with their families.

-Adapted from Lieutenant Colonel Castro, et al., NATO RTO HFM-134 Symposium

3.4.2 Enhance Mutual Trust.

Research has shown that trust can make the difference between adaptive versus dysfunctional reactions to expectancy violations. Unit members are more willing to tolerate violations of expectations when they trust their leader. Leaders can build and sustain trust by:

- Being available and accessible
- Demonstrating competence
- Keeping promises
- Trusting subordinates

Trust has the added benefit of establishing a climate in which the unit can address psychological fitness issues in an open and direct manner. In such a climate, subordinates are willing to take the risk of being seen as weak when they talk about problems that may interfere with their psychological fitness for deployment. When leaders are seen as trustworthy, unit members will be more likely to identify problems. Leaders can then help their unit members get the help they need, reinforcing the sense of mutual trust.

3.4.3 Address Issues.

Subordinates expect leaders to address issues directly. Leaders, however, have to pick which issues to confront and decide how to respond proportionally. Sometimes leaders may choose to ignore an issue. For example, leaders may believe an issue will resolve itself or they may not want to stir up conflict in the unit.

Leaders need to be honest with themselves when they choose to avoid an issue. If it is a question of timing, leaders may want to tell subordinates the issue will be addressed at a more convenient point. If it is a question of not stirring up conflict, leaders need to consider the long-term benefits of addressing issues even if there might be temporary discomfort within the unit.

3.4.4 Support Discussion of Alternative Courses of Action.

It is the leader's obligation to make well-considered decisions. Subordinates expect nothing less. Once the leader makes a decision, it is the subordinates' obligation to follow that decision. Leaders expect nothing less. While there are mutual expectations between leaders and unit members, the actual process of making a well-considered decision can be difficult. It means establishing a unit climate that allows subordinates to participate in the decision-making process.

Participation is only valuable when subordinates are not afraid to express their thoughts and to question their leaders. There are several clear signals when something is amiss with the decision-making process. The leader may notice that there is a problem when the unit is divided into two camps (such as "with me" and "against me"), or there is no room for humour or self-doubt.

3.5 PUTTING IT ALL TOGETHER

It is important for military leaders to think about the possible effects of conflicting expectations and obligations. Being aware of these conflicts can help leaders understand what underlies certain behaviours, as illustrated in a case study (Box 2.8).

This case study was developed from a composite of real-life events in order to provide an example of how expectations and obligations can clash.

In Box 2.8, the three individuals (the commander, the sergeant and the spouse) could have based their actions on certain assumptions and expectations.

The commander expects his personnel to inform him of potential problems in a timely fashion, putting organizational interests before the risk of being labelled as unfit for duty.

The commander felt taken by surprise, but it remains unclear whether or not he paid much attention to the personal readiness of his unit members. He was also unaware of how his decision to leave one Senior NCO behind was considered inconsistent.

Box 2.8: Conflicting Expectations

Two days before going on a deployment a sergeant informed his commander that he could not deploy with the unit because of serious problems at home. The commander was disappointed because this sergeant was a highly valued member of his unit, and there was no replacement available on such short notice. The commander noticed that the sergeant was clearly distressed and looked depressed. The commander doubted the sergeant could effectively lead his men on operations, but the commander still decided to order the sergeant to go on the mission.

The commander felt betrayed. The sergeant had hidden his family problems until it was too late to deal with them. The commander was irritated because he believed that if the sergeant had told him sooner, they could have come up with a solution.

The sergeant also felt betrayed. He had done his utmost to solve his family problems and up to now had refused to let these problems interfere with work. He worried that others would think he was weak. He believed that work had already had an impact on his family and made his problems worse. As a result he felt the commander had an obligation to give back something in return, especially because the armed forces always say that personnel are a top priority, and how their sacrifices are appreciated. In fact, the sergeant found it unfair that another NCO, generally regarded as incompetent, was not being taken on the deployment by the commander. It seemed unfair that this other NCO was let off the hook so easily just because that NCO was not up to the job.

The sergeant's wife had enough of the military after four deployments in three years. She felt unsupported by the military, despite the fact the organisation is portrayed caring about families. She wanted something back from the organisation and felt the military is obliged to give her family a break from deploying. She made it clear that if her husband let his job come first again, he wouldn't need to come home.

There are many possible reasons for the commander's decision making. The preparation of the mission may have kept him very busy. Maybe he just assumed that everybody was fit until proven otherwise. He may not have realized that he did not make this priority clear enough to his subordinates.

- The sergeant expects the military and his commander to watch out for him and his family even if that includes taking him off the list for deployment. The sergeant was

reluctant to talk about his problems earlier because he didn't want to be labelled as a complainer or to be stigmatized as someone with personal problems. He also did not want to burden his commander with problems that he was trying to solve on his own. He may have assumed that he should not have bothered his commander until it was unavoidable.

- The sergeant's wife shares his expectation that the military should watch out for families. She believes that the military owes her support for all the years of putting up with military life. She may be unaware of some of the support services that the armed forces could provide.
- Expectations may result in a clash of interests even if the leader and the subordinate approach the situation with good intentions. Leaders may find that they can manage most effectively by considering both their own expectations and those of their subordinates.

3.6 ESTABLISHING THE RIGHT CLIMATE

- Military leaders have to be ready to make decisions in very difficult circumstances and take responsibility for the outcome. Their commitment to their subordinates and the mission provides a challenge because there are so many expectations to be considered. Clashes of expectations are likely to happen across the deployment cycle. Leaders will not be able to avoid dealing with these clashes but they can set the right climate to minimise them. The leader may be able to manage expectations more effectively by using the leadership behaviours summarised in Box 2.9.
- Even when leaders make mistakes, they are ready to learn from them. Good leadership is a process, and good leaders never stop thinking about this process.

Box 2.9: How Leaders Can Manage Expectations: Overview

- Communicate
- Be Fair
- Enhance Mutual Trust
- Make promises you can keep
- Address issues
- Support discussion of alternative courses of action

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CHAPTER 4 CHAPTER 4 – INDIVIDUAL PSYCHOLOGICAL FITNESS

Chapter Objectives:

- Understand the importance of assessing psychological fitness
- Identify signs and symptoms of psychological problems
- Summarise formal and informal methods for assessing fitness across the deployment cycle

4.1 INTRODUCTION

Box 3.1: Watching Out for Stress

“My sergeant wasn't eating. He was lethargic and had trouble making decisions, even in front of other soldiers. He became easily flustered for no reason at all. He was only focused on trash pickup. I recognised he was going through a bad spell. Others approached me about his behaviour and so I took him outside the battalion. I made it like I had to go to the doctor's but the appointment was for him. I didn't want the soldiers to know I'd lost confidence in him. Seeing a mental health professional worked for him. I had been concerned that something bad would happen to him.... I was partially happy with the outcome but wish I could have done more to show my support for him.”

- Military Leaders Survey

Leaders may personally have to address psychological fitness issues of their unit members as illustrated in Box 3.1. Therefore, it is not surprising that many NATO leaders surveyed wanted more training in identifying psychological fitness problems and maintaining the psychological fitness of their personnel. Leaders may find themselves in the position of having to assess the psychological readiness of unit members and decide whether to connect unit members to psychological support services. This process can occur at any point across the deployment cycle but has a particular sense of urgency during a deployment. This chapter outlines tools available to military leaders to help them with this process as they promote, enhance and sustain the psychological fitness of their unit members.

Definition Box

“PSYCHOLOGICAL FITNESS”

Psychological fitness is:

The mental readiness to confront the challenges of deployment, whether humanitarian, peacekeeping, combat or a combination of all three.

The mental hardiness, resilience and mental toughness to face the rigors of missions ranging from boredom to threat.

4.2 THE ROLE OF PSYCHOLOGICAL FITNESS IN MILITARY OPERATIONS

Military leaders at all levels have an interest in enhancing and maintaining the psychological fitness, readiness and performance of the personnel under their command. Military leaders

may also be among the first to notice behavioural changes and other indicators of psychological stress in their units. As seen in the account of the sergeant who began to show behaviour changes in the midst of a deployment (see Box 3.1), military leaders have the opportunity to support their unit members through early identification and intervention. In considering how military organisations can promote psychological fitness across the deployment cycle, it is important to specify several underlying assumptions:

- Individual military personnel are largely responsible for their own psychological fitness though the military organisation has to set the conditions that encourage personnel to be psychologically fit. For the individual, this may mean maintaining good physical conditioning, using adaptive coping techniques, and developing effective social support within their units.
- Military leaders play a critical role in establishing the conditions that help military personnel focus on their psychological fitness. Military leaders themselves share this expectation. In the Military Leaders' Survey, more than 50% of operational leaders identified commanding officers as the individuals responsible for the psychological fitness in their unit.¹² Military leaders set the conditions for psychological fitness by providing training and influencing motivation and morale.
- Buddies are an essential part of assessing the psychological health of unit members. Unit members look out for each other. In some militaries, unit members receive specialised training in suicide prevention and providing support to others in trouble (see Chapter 6 for a discussion of peer training).
- Military leaders establish and maintain psychological fitness by working with Mental Health Professionals. The resources available to the military leader in accomplishing these tasks differ across NATO nations. In all nations, however, the military leader is supported by at least some other professional.

Military leaders begin promoting psychological fitness before missions start. The active promotion of psychological fitness is critical to unit effectiveness and boosts a unit's ability to perform under high-stress conditions.¹³ Psychological fitness of the unit and of individuals can be enhanced from the outset by:

- training realistically
- providing good communication up and down the chain-of-command
- avoiding unpredictability where possible
- maintaining a just system of procedures and rewards
- supporting unit cohesion
- acknowledging the sacrifices being made
- emphasising the meaningfulness of the mission

Regardless of the phase of the deployment cycle, unit leaders routinely assess the psychological fitness of their unit. This assessment can occur informally, formally, or may be a combination of the two. In an informal assessment, leaders talk with subordinates or rely on peers to identify problems. If leaders identify a problem in an individual's psychological fitness, they may decide to call in a professional for a formal assessment. Or

it may be national policy to conduct formal psychological assessments of all unit members returning from a particular deployment. In either case, leaders establish the climate that encourages a sense of responsibility for individual psychological fitness and for unit members to watch out for each other.

4.3 HOW LEADERS DETERMINE PSYCHOLOGICAL FITNESS

Military leaders often assess an individual's psychological fitness using informal strategies when they notice changes in behaviour. Unit leaders and unit personnel typically know the individuals in the unit well because they work, train, and deploy together and are in an ideal position to notice changes.

Discipline problems such as absenteeism, insubordination, and inappropriate aggression are powerful indicators that individuals might be having psychological problems. Other indicators include family-related conflict, sleep difficulties, and irritability. Other individuals may become socially withdrawn, have difficulty concentrating, or do not seem to like doing things they used to enjoy. Finally, problems related to alcohol may include driving under the influence of alcohol, blackouts, and drinking to the point of intoxication. These behaviours are frequently a sign of significant psychological fitness problems (see Definition Box).

4.4 THE DECISION TO REFER

Whilst leaders continuously assess unit members in their day-to-day interactions, the decision about when and how to refer unit members for an assessment by a psychological support professional requires some consideration. Changes in behaviour can be a natural reaction to military deployment, and may not necessarily be abnormal or problematic. In fact, it can be helpful for unit personnel to hear that others experience similar reactions and that reactions often improve over time (see Box 3.2). When reactions become extreme and/or prolonged, however, there may be a need for psychological assessment and referral. When dealing with these concerns, military leaders should consider the following questions:

Definition Box
“Possible Indications of Lack of Psychological Fitness”

- ✓ Absenteeism
- ✓ Insubordination
- ✓ Inappropriate aggression
- ✓ Discipline problems
- ✓ Family-related conflict
- ✓ Alcohol-related problems
- ✓ Sleep difficulties
- ✓ Agitation/irritation
- ✓ Social withdrawal
- ✓ Difficulty concentrating
- ✓ Difficulty making decisions
- ✓ Lack of enjoyment
- ✓ Changes in eating habits

- Has the problem become more frequent or intense over time?
- Is the problem interfering with the unit's or individual's ability to accomplish the mission?
- Is the individual a danger to him/herself or to others?
- Has the individual asked for a referral?

Box 3.2: A Normal Stress Reaction

“When in Bosnia, we were under a 36 hour consistent artillery bombardment – 1,600 shells in the first two hours, then 4,000-5,000 over the next 34 hours. The explosions were shocking – literally. For about the next six months after returning home, even the sound of a door slamming was exceptionally frightening. I was only a Captain at the time, so had not had much fighting experience. No one spoke about the bombardment afterwards, and I didn't speak to anyone about my reaction to it. I didn't understand what was happening to me – why I was reacting in such a strong way to a door slamming. Eventually it just went away. It would have been really useful if someone had just explained how people react to such artillery bombardments and explained why I was reacting so strongly to doors slamming. Soldiers need to be made aware that it's good to talk about things - it's a release.”

- Military Leaders *Survey*

Answering “yes” to any of these questions would be a strong indicator that a leader should refer an individual for a formal evaluation. If uncertain, leaders may find it especially useful to consult with a psychological support professional about the decision.

4.5 WHAT IS EXAMINED WHEN FORMALLY ASSESSING FITNESS?

Leaders play a key role in ensuring that individuals get formally assessed by Mental Health Professionals. Mental Health Professionals conduct this formal assessment using questionnaires and interviews to determine if there is a clinical problem that needs treatment, and it is their responsibility to diagnose and treat. Yet it may be helpful for leaders to have a basic overview of the kinds of clinical problems that Mental Health Professionals identify. Given the military leader's unique position, knowledge of these six common areas can facilitate a leader's support for the psychological fitness of unit members.

Whilst problems may vary, most can be categorised into six dimensions, some of which have overlapping symptoms. These six dimensions are:

- Sleep Problems
 - o Dissatisfaction with sleep pattern
Difficulty falling asleep or staying asleep
 - o Self-medicating to deal with sleep problems, such as drinking alcohol in order to sleep
- Traumatic Stress (see chapter 6 for an additional description)
 - o Difficulty stopping thoughts about the traumatic event
 - o Numbness and being withdrawn

- o Jumpiness and hyper-vigilance
- Depression
 - o Sadness
 - o Difficulty making decisions/concentrating
- Alcohol Problems/other substance abuse problems
 - o Trying to cut down but can't
 - o Needing to drink more to get the same effect
 - o Drinking causing problems with family or friends
 - o Using alcohol to sleep, deal with nightmares
 - o Risk taking behaviour related to drinking (driving, fighting)
- Anger and Irritability Problems
 - o Arguing with others
 - o Physically fighting with others
 - o Being short-tempered, irritable
 - Relationship Problems
 - o Constantly arguing with spouse/partner
 - o Concern about stability of the relationship
 - o Physical aggression towards spouse/partner
 - o Concern that the arguing might get out of control

Other symptoms may be hard for leaders to recognise as indicative of psychological stress. For example, some individuals report physical complaints such as headaches, backaches and gastrointestinal problems triggered by psychological stressors.

4.6 GROUP-LEVEL FORMAL ASSESSMENTS

Although specific individuals may be recommended for formal assessment based on their behaviour, there may also be occasions when an entire unit is formally assessed. Formal unit-level assessments generally occur for one of two reasons. First, the decision may be driven by the deployment cycle. This approach links formal assessments to specific time periods in the deployment cycle. For instance, pre-deployment assessment can be used to predict the psychological support needs of unit members about to deploy. Post-deployment assessment is required by some NATO nations in order to link service personnel to Mental Health Professionals back home.

Second, the decision to assess an entire unit formally may be in response to a specific traumatic event such as the death of a unit member (see also Chapter 6). NATO nations differ in the degree to which leaders are required or encouraged to have such assessments

conducted. Nonetheless, many NATO Mental Health Professionals agree that it is best practice to conduct some type of assessment of psychological fitness following exposure to traumatic events.

Assessment is an important first step. It helps leaders identify individuals who need help, and it can help make Mental Health Professionals available to unit members. The involvement of Mental Health Professionals is a supplement but not a substitute for leadership. Assessment provides a context for the next step, namely, leader actions that can support psychological fitness in unit members.

4.7 LEADERS' ACTIONS WHEN UNIT MEMBERS NEED HELP

There are many actions leaders can take to optimise the psychological health of unit members.

4.7.1 Active Listening.

Sometimes leaders are uncertain how to talk to unit members about emotional topics. While leaders should not take on the role of a psychological support professional, they are likely to find themselves talking to individual service members going through rough times. During these conversations, neutral support is helpful, and can be provided by letting the individual know that he or she has been heard. Leaders can occasionally restate in different words what the stressed individual has said. This simple but powerful tool lets unit members know that they have been understood and that their concerns have been acknowledged.

Less helpful comments include superficial answers such as “it was probably for the best” or “you need to relax” or ignoring the problem (such as, “let’s talk about something else”). Regardless of the leader’s willingness to fix the problem, the problem affecting the unit member may not be the kind that the leader can fix. Long-standing family problems cannot be quickly resolved, and deployment-related traumatic events cannot be undone.

4.7.2 Balancing Routine with Time Out

When units are confronted with significant psychological demands, basic military tasks still need to be completed. Even in the aftermath of a serious incident, it is the leader’s responsibility to emphasise normal military routines. Routine provides structure for unit members facing demanding events. At the same time leaders need to informally check in with their unit members. This informal process includes acknowledging the significance of events and listening closely to unit members who are ready to talk about the event. Leaders can use the aftermath as an opportunity to set an example for how to talk about the event and how to put events into perspective. Leadership in response to traumatic events is also detailed in Chapter 6.

4.7.3 Reducing Stigma and Barriers to Support

If an assessment is planned there are several steps the leader can take to support the process:

First, as mentioned in Chapter 2, the leader should establish a climate of trust. Personnel need to know that their responses to surveys or interviews will be held in confidence. In general, respecting privacy and confidentiality and discreetly checking in with the individuals reinforces the message to the entire unit that maintaining psychological fitness is a partnership between unit members and military leaders. Military leaders should support the process by example – if they come across unit personnel inappropriately discussing the psychological problems of an individual, the leaders should stop such discussion.

Second, leaders need to reduce concerns about stigma. Studies have shown that military personnel with more symptoms are especially concerned about the stigma associated with seeking out psychological support services.¹⁴ Leaders can reduce stigma by encouraging individuals to take care of their psychological fitness and emphasising the importance of psychological readiness.

Third, leaders need to work to reduce barriers to care. This can be accomplished, for example, by allowing unit members to attend psychological support appointments while on duty. Policy created at higher levels can reinforce this message through 24-hour hotlines, advertising campaigns, and confidential treatment options.

4.8 PSYCHOLOGICAL FITNESS AFTER RETURNING HOME: LEADERSHIP CONTINUES

Experienced military leaders and Mental Health Professionals acknowledge that the post-deployment period can be particularly challenging in terms of psychological fitness. Military personnel who deploy on operations where they are exposed to extreme circumstances are likely to be affected in some way by the experience. They may return with a greater appreciation for their own life and their relationships, a sense of purpose and pride in accomplishment. Many military personnel, however, report that returning home involves a transition that takes time.

Some individuals returning from an operation may initially dismiss symptoms of psychological problems. Over time, however, problems may become more obvious.

Military leaders report the need to be especially aware of the potential for problematic behavioural changes at the 3-6 month post-deployment point. Consistent with other research, respondents to the Military Leaders' Survey suggested that psychological support efforts be extended beyond the immediate post-deployment period.

Some units will remain together in this post-deployment phase providing leaders with continuity in terms of watching out for unit members. Other units may be dispersed, or augmentee's may return individually to units that did not deploy. In such cases, the augmentee's leaders need to monitor the psychological fitness of the returning individual. There are several aspects to the transition back home that leaders may want to directly address in collaboration with Mental Health Professionals. Indeed, many nations have decompression programmes or other formal homecoming activities that teach unit members and their families about adapting to work and family life after the deployment. To help unit members anticipate post-deployment challenges, leaders need to be aware of what should be expected during this phase. Leaders who are aware of these normal changes can also assess whether an individual is having a reaction that is part of the normal pattern or if the individual's reaction is relatively extreme.

4.8.1 Adjusting To the Family Takes Time

For the returning unit member and for the family, the adjustment may not be as simple as a welcome home ceremony. Roles have shifted, and families have become used to daily routines that do not include the service member. Rebuilding intimacy takes time. Despite idealised expectations, it takes time for everyone to readjust and for the family to accommodate the presence of the returning unit member (see also Chapter 5).

4.8.2 Garrison May Not Be Satisfying

Whilst the degree of adjustment varies by deployment, service members often describe ambivalence about returning to regular garrison duties.

Garrison can seem less meaningful and there is often less autonomy than during deployment. Some unit members may be used to the adrenalin rush associated with high-intensity operations and may be more likely to engage in high-risk activities such as driving too fast. Leaders can play a key role in helping with this transition by recognising this shift in intensity and level of responsibility. Leaders can address this issue by looking for opportunities for unit member professional development, by utilising the expertise of unit members in training, and by focusing on the need for safety.

4.8.3 Intense Reactions Need Time To Subside

For those individuals returning from high-intensity deployments, it is normal to over-react to events that did not previously bother them. For example, individuals may over-react to a door slamming or being stuck in traffic. Over time, though, reactions to these events should subside.

4.8.4 Relating To Others Is a Task

Unit members on deployment typically develop close bonds. They've learned to trust each other and to depend on each other, even though they may also be a little sick of each other. When they return, they may find that it is hard to relate to those who haven't deployed. They may feel like they don't know how to talk to others who haven't been through similar experiences. Learning to relate to others is an essential part of the reintegration process that takes time.

Leaders can take advantage of day-to-day opportunities to normalise problems in adjusting to life back home. They can also reinforce the message that most unit personnel will do fine even if some need help maintaining their psychological fitness over time. Leaders need to be aware that unit personnel may be ambivalent about seeking help from Mental Health Professionals even though military leaders consistently report viewing help-seeking as a sign of strength and courage. Communicating this message provides unit members with a clear signal that taking care of psychological fitness is a priority.

4.9 LEADERS ENSURING THEIR OWN PSYCHOLOGICAL FITNESS

Like their unit members, military leaders are not immune from the challenges of operational stress and adjusting to home life following a deployment. Regardless of rank, military leaders report experiencing the same transition difficulties reported by other military personnel (see Box 3.4). The key for military leaders is to check their own adjustment and determine whether it is affecting their functioning at work or their relationships at home. Leaders can evaluate their transition by listening to those around them. If friends or family comment about the leader's behaviour and suggest that the leader get help, it is a sign that the transition is not going smoothly. For long-term success, leaders need to ensure that they take breaks from the pressures of work and deployment, take care of and monitor themselves, and seek out consultation as needed.

Box 3.4: Leaders Are Not Immune

"I redeployed and ... didn't go through decompression. I had feelings I couldn't control. Not realising I'd gone through one stressful event and was going into another. I wasn't smart enough to recognise it in myself that I had PTSD. The senior leaders are neglected. We are the guiltiest ones. We need to take a lot more responsibility for ourselves during the process....I stopped driving; I talked to people around me about it. I had to explain, if I behave in a certain manner, this is the reason why. I had to get past my ego to recognise the fact that I had a problem. I went back down range and told them about my experience. 'Look, if I can experience this, you can too; don't be afraid to let someone know'."

- Military Leaders Survey

4.10 CONCLUSION

Psychological fitness is a fundamental component of overall readiness. As with other components of readiness, military leaders and individual service personnel are responsible for ensuring psychological fitness for the demands of operational life. For the military leader, that means capitalising on informal and formal psychological fitness assessment, knowing what behaviours are indicators of difficulty, and knowing when and how to access services from military Mental Health Professionals. This partnership of individuals, leaders, and Mental Health Professionals can strengthen the readiness of the unit. By ensuring psychological fitness, military leaders build their unit's resilience so the unit can respond effectively to the challenges of military life across the deployment cycle.

CHAPTER 5 MORALE AND UNIT EFFECTIVENESS

Chapter Objectives

- Describe the importance of measuring morale
- Provide guidance on how to measure morale
- Review leader actions to improve morale

5.1 INTRODUCTION

Box 4.1: When A Group Doesn't Work Well

"Group management was the most difficult task I faced during the deployment. I was the chief of a group, the same job I had at home. I met my colleagues during the training period and I did not anticipate any trouble. When we arrived in the theatre things changed. They did not get along. I wasn't able to communicate with them. I always thought that getting things done, fulfilling our mission is the main goal, nothing else matters. Sometimes I felt we were two teams – me and them, and I couldn't manage to communicate very well. At the military level we were working well but the human level it was difficult. I felt very frustrated because of this situation and I didn't know what to do. This made me think a lot and I will try in future to see what I can do to improve in order to become a better leader."

- Military Leaders Survey

Morale is critical to military effectiveness and readiness. Box 4.1 illustrates the negative outcomes a leader experienced on deployment and demonstrates that ignoring morale issues can interfere with mission success. In the account, the leader was aware of the disconnection between mission focus and unit morale but was unsure how to go about balancing these needs. This chapter describes why morale is important, how it can be measured, and how leaders can prevent or minimise morale problems across the deployment cycle.

"...not numbers nor strength bring victory in war, but whichever army goes into battle stronger in soul, their enemies cannot withstand them."
Xenophon (565-480 BC)

5.2 WHAT IS MORALE?

Morale is a broad term that can be defined as a service member's level of motivation and enthusiasm for accomplishing mission objectives. Research on morale has produced two key findings:

- High morale is positively related to performance
- High morale is associated with fewer stress casualties.

Assessing morale alerts leaders to problems that need to be addressed and can prevent low morale from interfering with mission performance. As demonstrated in Box 4.2, poor morale can lead to disciplinary

Box 4.2: Catching Morale Problems Late in the Game

"During the deployment I had disciplinary problems with soldiers – alcohol abuse, insubordination, inappropriate behaviour. The consequences included one NCO being sent home and a further 6 soldiers being punished. Getting rid of the troublemakers didn't really solve the problem. During the rest of the operation the atmosphere in the unit was strained and full of distrust. It was a very delicate situation to deal with as a superior. I wish I had caught the problems earlier."

-Military Leaders Survey

problems and diminished readiness. While the previous chapter on fitness focused on the individual, this chapter emphasises the importance of the group's overall psychological readiness. This readiness includes a variety of unit climate variables that can impact on morale.

5.3 FACTORS INFLUENCING MORALE

Many factors influence unit morale. The nature of the military operation, for example, often impacts on morale. Military personnel trained to be a fighting force may become frustrated providing humanitarian assistance. These types of conflicts in expectations emerge when leaders have not effectively communicated the unit's new role. Other factors that can influence morale include media coverage, public support for a mission, and the degree to which unit efforts are acknowledged. In addition, factors related to the mission itself can influence unit morale, such as appreciation from the local population and seeing positive results on a particular mission. A significant factor influencing unit morale, however, is leadership quality, from the local level to the senior level.

Military personnel rely on unit leadership to define the mission and set the conditions for achieving mission goals. In exchange for their commitment to the mission, military personnel expect leaders to watch out for their best interests. If military personnel understand the mission and feel professionally and personally supported by their leaders, they will be willing to withstand the rigours of deployment.

Leaders need to assess unit morale to determine unit readiness. Assessment is important because leaders often rate unit morale more highly than do unit members. Consequently, leaders may not detect morale issues early enough to avoid problems unless they work to assess morale.

5.4 HOW AND WHEN TO ASSESS UNIT MORALE

Leaders informally assess unit morale across the deployment cycle by listening to their subordinates. They do this in a variety of contexts: during sporting events, sitting in the dining hall, and in countless other moments of "down time" during and after the duty day.

Sometimes they even assess morale in the middle of a mission (Box 4.3).

Box 4.3: Checking the Pulse of Morale

"I once had a high risk mission with my team. We all felt a little bit scared as the territory was not known and we did not know what to expect. We were very focused. However, there were signs that some of my men were wavering. So I decided to stop in a safe location for a moment. I reminded everyone of how well they had performed in training and asked them to behave in a similar manner. I told them that as a team we had to trust each other and work together. We all calmed down and completed the mission. When we arrived back at base, we discussed what we had felt during the mission and how we could build upon this experience as a team."

- *Military Leaders Survey*

These informal moments can tell a leader a great deal about the unit's morale. Relying on these informal moments, however, may not be enough. Informal assessments may provide a voice for outspoken unit members but these individuals may not necessarily reflect the views or concerns of the majority of the unit. In addition, some subordinate members may be afraid to speak up due to an imbalance of power if leaders are present or if a member of higher rank dominates the discussion. Relying on informal assessments also makes it difficult for unit leaders to track changes systematically over time. Without a formal mechanism for tracking changes, leaders cannot determine whether their actions promoting morale have been effective. One way in which leaders can assess their unit's morale more objectively is by examining the number of problematic behaviours in their unit. Such behaviours include disciplinary violations, accidents, injuries, unauthorised absences and sick leave. Typically, these problems are documented by the unit. Unfortunately, these indicators do not serve as an early warning system because they may demonstrate that a unit is already having substantial morale difficulties. Systematic formal assessments can, therefore, be useful in the early identification of morale problems.

5.5 HOW LEADERS CAN FORMALLY ASSESS MORALE

Many NATO nations rely on two formal methods for assessing morale: focus groups and surveys. A focus group is a structured discussion directed by trained facilitators with about 10-15 unit members. The unit members discuss their concerns and provide constructive criticisms and suggestions related to specific problems. For example, one topic of a focus group could be family communication; another topic might be team building.

Focus groups allow for quick assessments of issues of concern to leaders. Focus groups also provide possible solutions. The main limitation of focus groups, however, is that the small number of participants allows the opinions of only a few to be heard. For example, in a large battle group, it may be tempting to base decisions on the results of a focus group even though these decisions may not be representative of the entire battle group. Nevertheless, when the unit is small, a focus group may be an efficient means of assessing unit morale. Successful focus groups use:

- experienced facilitators who are not part of the chain-of-command
- structured questions prepared ahead of time to emphasise particular issues
- participants that are representative of the unit

Used in combination with other approaches (see Table 4.1 for an overview), focus groups can provide leaders a more complete assessment of unit morale and psychological readiness.

Morale surveys are another formal assessment method. Surveys should be jointly developed by operational leaders and military Mental Health Professionals trained in survey methodology. Including trained survey professionals to write the survey items, select the sample, administer the survey, and analyse, interpret, and report the results ensures that the procedures are conducted in accordance with professional standards. It is recommended that the surveys be anonymous to facilitate greater veracity of the responses.

Table 4.1: Comparing Methods of Morale Assessment

Approach	Objectivity	Value as Indicator of Change	Information about Cause of Problem	Comment
Informal Contacts and Discussion with Unit Members	Low	Low	Yes	Easy to obtain but biased by small number of opinions
Objective Indicators (such as discipline problems and accidents)	High	Medium	No	Indicates possible morale problems, but does not provide early warning
Focus Groups	Medium	Low	Yes	Efficient for examining specific problems but does not provide overall picture of unit morale
Morale Surveys	High	High	Maybe	Easy to obtain, requires simple calculations, may provide some information on causes of morale problems

Even if unit members don't like filling out surveys, they like being asked how they are doing. This is particularly true if they believe leadership cares about their responses and if they believe their answers can make a difference. Most nations have a standard set of questions covering key areas linked to operational readiness that leaders can address. The assessment provides the current status of moral at a specific time, but is useful only if it is intended to take action to avoid "survey fatigue". Therefore, the involvement of the leaders is necessary. The items themselves are often standardised to allow for comparison. Leaders often provide input to add questions and make a survey specifically relevant to a particular deployment.

Those developing morale surveys should be careful when asking questions that leaders are not able to address. Questions on the survey may raise unit member expectations that some issues are going to be directly addressed by their leader. For example, asking for unit members' opinions about salaries will not likely result in immediate policy changes but may raise the expectation that salaries might change. In contrast, asking about satisfaction with coffee may result in easy solutions.

*"Coffee tastes better if the latrines are dug downstream from an encampment."
- US Army Field Regulations, 1861*

5.6 WHAT TO MEASURE IN A MORALE SURVEY

Typically, morale surveys are anonymous and administered to all unit members. The items may cover global perceptions (such as cohesion) as well as satisfaction with specific environmental factors that affect morale (such as food or shelter). There are so many different perspectives on the role of morale surveys that it would be difficult to agree on a NATO –wide comprehensive morale survey. Nevertheless, there is a core set of areas assessed by several NATO nations (Box 4.4).

Box 4.4: Things to Consider on Morale Surveys

- Climate
- Cohesion
- Leadership Behaviours
- Efficacy
- Stressors
- Deployment Events
- Psychological Health

Climate – A simple rating of the overall climate can provide a point of comparison for follow-up surveys and a direct assessment of unit members' perceptions of how they are treated and how confident they feel working under current organisational conditions.

Cohesion – As an important component of morale, cohesion indicates the degree to which individuals feel connected to their unit. Cohesion is a protective factor that helps individuals adjust more effectively to stressors experienced across the deployment cycle.

Leadership – Morale survey items addressing leadership are most useful when the items target specific NCO and officer behaviours. Items can reflect the degree to which unit members perceive their leaders are effective, competent and concerned about their well-being. By emphasising specific behaviours, leaders can get feedback about things they can change.

Efficacy – Morale surveys also typically assess unit member confidence in their skills and abilities and their assessments of the skills and abilities of the entire unit. Self and unit efficacy can be increased through realistic training and serves to protect individuals from the negative effects of stressors.

Stressors – A morale survey administered during deployment usually includes a short list of environmental stressors even if these stressors cannot be directly controlled by a leader. These items are developed for specific missions but may include:

- Noise
- Weather conditions
- Food quality
- Uncertainty around date of return from deployment
- Communication with family back home
- Lack of privacy
- Living conditions
- Boredom

Deployment Events – Whilst exposure to deployment events such as snipers, fire fights, IEDS, body handling or mass graves are not events that can be controlled by a military leader, they are often included in morale surveys. These items document the levels of major stressors which may have been encountered by unit members. As in the case of environmental stressors, deployment events need to be tailored to the specific mission and asked during the deployment.

Psychological Health – Finally, a morale survey can include a brief assessment of psychological health. Such assessments are not designed to identify individuals with mental health problems. Identifying individuals is the job of individual fitness assessments (see chapter 3). Standardised and validated measures of psychological health are useful because they track overall unit mental health changes over the course of the deployment. Specific measures of psychological health may include depression, anxiety, sleep problems, and alcohol use.

5.7 WHEN TO MEASURE MORALE

Morale surveys are typically administered before a deployment and at least once during the deployment.

- **Pre-Deployment:** Leaders should ensure the survey is administered toward the end of the pre-deployment phase. By that time, team building and mission-specific training will have occurred and unit members will know their leaders and each other.
- **During Deployment:** The timing of the survey during deployment needs to be carefully considered. If the survey is administered only once, then it should be administered early in the middle phase allowing unit leaders to make mid-course adjustments. Another option is to survey unit members several times. In that case, the military leader may want to ensure that unit members are surveyed after the first few weeks of the initial adjustment period and again towards the end of the deployment.
- **Post-Deployment:** Some nations also administer the morale survey about 6 months

5.8 WHAT TO DO WITH THE RESULTS?

The purpose of the morale survey is to help military leaders manage their units more effectively. A leader's commander should never use the results as an objective measure to assess the leader's performance. Leaders should not be required to pass survey results up their chain-of-command for evaluation purposes or for direct comparison with other units. Using the morale survey in such a way would lead to resentment on the part of leaders. Any information briefed higher up the chain-of-command should be summarised across subordinate units.

At the same time, leaders have an obligation to provide feedback of the results to unit members. This feedback does not need to be detailed but should include information about what unit members have reported. The more transparent the feedback, the more unit members will be actively engaged in leader initiatives to address unit concerns. Leaders in

many NATO nations rely on Mental Health Professionals to help them interpret survey findings and develop recommendations.

5.9 WHAT LEADERS SHOULD DO?

Assessing morale helps to make leaders more effective by identifying actions that leaders need to take to address unit concerns. Morale assessment is a joint effort (see Box 4.5):

Mental Health Professionals bring general knowledge of morale issues. Their expertise and objectivity are essential for providing leaders with useful feedback and making suggestions based on the assessment results.

Military leaders have specific knowledge about their unit. They have the authority to make decisions regarding changes that will impact on unit morale.

Box 4.5: Creating Optimal Conditions for Morale Surveys

- Establish a close working relationship with psychological support professionals to ensure that current operational and unit concerns are addressed.
- Allow psychological support professionals access to personnel to ensure timely and accurate feedback on morale and readiness issues.
- Stress the importance of the assessments to unit personnel to ensure serious and honest responses.
- Endorse the survey at unit briefings or meetings.
- Provide feedback to unit members regarding the results.

Morale assessments may reveal difficulties across a range of topics such as cohesion, leadership and stressors. Appropriate leader responses will depend on the circumstances. One way to measure whether or not leader actions addressing morale issues have had an impact is to reassess morale at a later point in time. If global ratings of morale and cohesion are relatively low, leaders may want to consider unit events and teamwork exercises (see Box 4.6). Scheduling unit training is one leader action that can promote morale.

Box 4.6: Cohesion in a Riot

“During my last mission I recall the unit participated in riot control training. We were asked to play the role of rioters. I expected that the training would help improve the psychological climate of the unit, which was low at the time. Some tensions were appearing due to boredom as it was the last month of the six-month mission. The exercise helped relieve the boredom and unit cohesion improved considerably.”

- Military Leaders Survey

Box 4.7 provides a summary of additional leader behaviours. This list of leader behaviours comes from surveys and interviews with military personnel in combat. Each of these behaviours may sound obvious but studies have found that they are routinely practiced by only some NCOs and officers. Leaders need to focus on specific behaviours, rather than on global attributes such as charisma. By taking a moment to stop and consider their unit's needs, by thinking about their own role, and ultimately by taking action, leaders can promote unit morale.

Box 4.7: Leader Behaviours that Promote Morale

- Be fair and just
- Instil discipline
- Punish with caution, don't enjoy it
- Keep subordinates informed
- Admit your own mistakes
- Protect subordinates when they make honest mistakes
- Shield subordinates from unfair treatment
- Prevent subordinates from taking unnecessary risks
- Visit the troops, endure hardship together
- Engage in team building
- Manage within-group conflict early

- NATO Symposium

CHAPTER 6 MILITARY FAMILY READINESS

Annex Objectives:

Introduce concept of the Emotional Cycle of Deployment
Review reactions families have to deployment
Identify actions to enhance family support

6.1 INTRODUCTION

Box 5.1: Shocking Amount of Family Problems

“It was a rather shocking experience as a battle group commander to discover, over the duration of our mission, just how many of my soldiers at one point were affected one way or another by problems related to the family back home. Family members being hospitalised following accidents, relatives getting ill or dying, burglary at home, sons and daughters being arrested by the police, ex-husbands causing serious trouble to the spouse, flooding in the house, ... the list seemed endless. Whereas, in garrison, even major problems get solved without the commander actually knowing or intervening, obviously the deployment context changes that situation dramatically.”

- Military Leaders Survey

Military Leaders recognise that deployments are significant experiences for military families¹⁵. Deployments can increase family resiliency, demonstrate how precious family members are to one another, and underscore what values are important to family members. But deployments can also be a significant stressor. In addition to the day-to-day stress of being apart, families have to cope with the fear of losing the deployed unit member or the possibility that the deployed unit member might return seriously injured. Family problems can also end up being a major stressor for the unit members (Box 5.1).

In light of these conditions, military leaders play a significant role in maintaining family readiness on the home front. Leaders know that service members perform more effectively if they believe that their families are being taken care of back home (Box 5.2). That is why military leaders consider family readiness (see Definition Box) to be a critical component of overall readiness. This readiness extends beyond the deployment itself and encompasses the entire deployment cycle.

Box 5.2: Impact on Mental Readiness

“You can train your men as much as you want, but what do you think will happen if there is a war and these boys run around with the thought that nobody cares for their families? No way will they fight as effectively...”
General Norman H. Schwarzkopf
“It Doesn't Take a Hero”

Definition Box “Family Readiness”

Families who are emotionally prepared and have the attitude, skills, tools and knowledge to meet the challenges of the military lifestyle.

6.2 SUPPORT ACROSS THE CYCLE OF DEPLOYMENT

Many nations have a variety of organisations, activities and programmes available in their military community to support families of deployed service members across the deployment cycle. Both formal and informal networks (see Box 5.3) are necessary for meeting the needs of military families effectively. While formal and informal networks have different roles, their purpose is the same. They ensure military families cope successfully with deployment and that they maintain a state of family readiness.

Formal networks include Mental Health Professionals and those who have been officially designated to address home front support issues. Many nations have a rear detachment tasked with addressing practical home front needs and communicating information to family members. Leaders have the responsibility to ensure that the rear detachment is composed of competent, dedicated personnel who can establish supportive relationships among the unit, local resources and families. An experienced military leader adopts the principle “if it doesn’t hurt to leave certain leaders back from deployment to run the rear detachment, then you’ve probably picked the wrong people.” Military leaders need to be familiar with these formal networks to address family readiness issues. Informal networks are equally important. These resources include extended family, friends and local community groups. Military leaders can optimise the support of informal networks by encouraging their involvement.

Box 5.3: Networks of Support	
-Formal network	Family Support Organisation
	Psychologist
	Social Worker
	Mental Health Nurse
	Family Physician
	Chaplain
	Rear Detachment Support
-Informal network	Extended Family
	Friends
	Community Groups

For many military leaders, dealing with family members is one of the most difficult challenges of their job. Leaders are trained to identify objectives, issue orders, and direct unit personnel, but they are not necessarily trained to deal with family members. Family members do not have the obligations that unit members accept when they join the military. For example, they may not be supportive of a particular operation or they may disagree with a particular policy. Nonetheless, while family members may be ambivalent about a particular operation, they still expect the military to address needs that may arise. In this case “the military” is personified by the unit leader.

In assuming a leadership role, military leaders take on the practical and emotional concerns of families. Practical concerns can include problems such as being able to communicate on the internet or dealing with an error in pay. Emotional concerns may be harder to pin down. Leaders support families by helping to manage anxiety (Box 5.4). Leaders are not always expected to be able to solve family member concerns but they need to be prepared to deal with families in a way that promotes unit member confidence. Leaders manage family member anxiety by acknowledging concerns and not fuelling worry. When leaders are able to maintain a calm presence - even when they do not actually feel calm – they are able to set the

Box 5.4: Impact on Mental Readiness
<p>“All of the great leaders have had one characteristic in common: It was willingness to confront unequivocally the major anxiety of their people in their time. This, and not much else, is the essence of leadership.”</p> <p style="text-align: right;"><i>John Kenneth Galbraith</i> “The Age of Uncertainty”</p>

stage for effective family support. This perspective can be a useful way to address family member concerns across the deployment cycle.

6.3 EMOTIONAL CYCLE OF DEPLOYMENT

Leaders need to promote family support before entering the deployment cycle. By prioritising family support, leaders demonstrate their commitment to unit members and their families and can identify potential problem areas while there is still time to address them. During a deployment, there are many ways to think about family member stress and coping. One useful model is the Emotional Cycle of Deployment.¹⁶ This model provides a way for leaders to anticipate the concerns of family members at each stage (Box 5.5).

The stages are distinct and each poses specific challenges. Military leaders can prepare by being aware of each stage. Good planning in each of these phases can positively impact family stability and individual and unit readiness.

Box 5.5: Five Stages of Emotional Cycle of a Military Separation

1. Pre-deployment
2. Deployment
3. Initial Deployment
4. Stabilization
5. Anticipation of return

6.3.1 Stage 1: Pre deployment

The onset of this stage begins with the warning order for deployment. The stage ends when the unit member departs from home. The pre-deployment timeframe varies from several days to more than a year, depending on the operation.

There are a number of challenges for families at this stage (Box 5.6), but one of the key challenges is to accept that the deployment will take place and that there will be a separation. This is not always easy. Initially, family members may be angry or even protest that the deployment is unfair or should not happen. Soon the reality sets in. The increased field training, preparation, and long hours away from home are a precursor of the extended separation that is to come. In addition, unit members may talk more about the upcoming

mission and about their unit. This bonding with unit members is essential to unit cohesion yet it also creates an increasing sense of emotional distance for family members. That is, the unit member about to deploy physically may already be deployed psychologically, compounding the frustration and resentment of the remaining family members.

Tension may also build as the partners try to cram activities into the last few weeks. Partners may generate long lists of details to be taken care of, including home repairs, car maintenance, finances, tax preparation, child care plans, powers of attorney and wills. As the tension of the impending departure increases, family members may wish that the military member was already gone. Couples often report arguments just before

Box 5.6: Pre-deployment Challenges

6. Accepting the reality of deployment
7. Anticipation of loss
8. Train up/ long hours away
9. Getting affairs in order
10. Mental/physical distance
11. Arguments

the actual departure date. In a way, family members may use arguing as a method for making the separation easier to tolerate. They may do this without even being fully aware of the function that arguing can serve but unless family members know that is a normal part of the pre-deployment phase, they can be left feeling guilty or confused about this increase in arguing.

Family members being left behind may also have anxieties. They may have fears regarding risks associated with the mission, and they may have doubts about their ability to manage on their own. All of these reactions are normal but when family members don't expect these emotional reactions, the ups and downs of the pre-deployment phase can compound the tension. Communication may break down. The anxieties about the deployment are often expressed by family members in terms of being frustrated with military life. Statements such as "I didn't get married to be alone all the time", "You love your job more than me" reflect this real frustration. It's at this point that it can be helpful for leaders to remind their unit members that these kinds of reaction are normal and reflect anxiety about the deployment rather than necessarily being a direct reflection of family member attitudes toward military service (Box 5.7).

Box 5.7: What Can Military Leaders Do?

- Ensure unit members are trained in what to expect in terms of family adjustment
- Offer training to family members about what to expect
- Develop unclassified intelligence briefing
- Emphasise joint effort between individuals and rear support o Provide contacts for additional help
- Set aside time in the unit calendar for unit members to take care of personal, administrative and logistical issues
- Send letters to families
- Provide information regarding the mission o Identify resources available
- Identify contact person with phone numbers

A military leader's commitment to family readiness will ensure the unit can deploy with confidence (Box 5.7). Leaders can demonstrate this commitment through pre-deployment briefings and by showing personal interest in how unit family members are doing.¹⁷ Pre-deployment briefs also provide the opportunity to engage families, introduce them to one another, and reassure them that leaders are aware of their concerns. Military Leaders should coordinate pre-deployment briefings geared for family support early in the process. Leaders can also ensure that Mental Health Professionals are available to discuss how children react differently to deployment depending on their age. Many leaders have found those planning children's activities, providing babysitting services and scheduling briefings at various times

Box 5.8: Considerations for a Pre-Deployment Brief for Families

- Nature of the mission
 - Mission goals
 - Risks associated with the mission
 - Options for communicating
 - Postal service, internet, e-mail, telephone
 - Access to mission updates:
 - Unit web site
 - Newsletter
 - Rear detachment support
- Calendar of unit events before, during and after deployment
- Media awareness
- What to expect in terms of the emotional cycle of deployment
- Resources available with phone numbers for families to use
- Contact procedures in the event of an emergency

increases participation and sends a message to families that they are considered a priority. Box 5.8 provides suggestions for topics to cover in a pre-deployment brief. In some nations, unit members live in geographically dispersed regions, and leaders will need to adapt their family support accordingly. The pre-deployment phase sets the precedent for how family support is prioritised across the deployment cycle. Before they deploy, military leaders need to give clear guidance to the rear detachment about providing family support. By working together, deployed military leaders and the rear detachment can establish effective communication that will enhance family support initiatives.

6.3.2 Stage 2: Initial Deployment

Although the pre-deployment stage prepares families for departure, the deployment itself may still come as a challenge. In the first few weeks following departure, the family has to reorganise roles and responsibilities. The military member's departure may create a hole in the family. This gap is both a practical one in terms of accomplishing specific tasks and an emotional one in that family members may feel a variety of reactions (Box 5.9).

Box 5.9: Possible Reactions During Initial Deployment

- Overwhelmed
- Numb, sad
- Lonely
- Disoriented
- Mixed emotions/relief
- Difficulty Sleeping

For many, the initial deployment stage can be an unpleasant, disorganising experience but when family members know what to expect, they are more likely to put their reactions into perspective. At this stage, effective rear detachment support becomes a priority (Box 5.10). Structured family events during the initial deployment phase can provide an opportunity for family members back home to connect with one another, share experiences, and reduce loneliness. The adjustment during this busy and difficult period will be smoother with a strong rear detachment (Box 5.11)

Box 5.10: Deployment Phase: What Can Military Leaders Do?

- Establish strong rear detachment in advance
- Support rear detachment activities
- Maintain regular contact with the rear detachment

Box 5.11: Handing Family Problems

“I considered myself fortunate to be able to rely on efficient key personnel to deal with the impact of the family problems that arose during the mission. It allowed me to concentrate on the mission and still know that problems were effectively addressed. In theatre, in addition to my staff and battery commanders, the doctor and the psychologist formed a team to advise me on possible actions. Back home my rear detachment commander was a very experienced officer with a natural flair for liaising with the families...”

- Military Leaders Survey

6.3.3 Stage 3: Stabilization

Stabilization takes place as family members get involved in activities and new routines (Box 5.12). Many rely on the rear detachment and other local resources for support. These formal networks meet regularly to handle problems and disseminate information. Other families are more comfortable with informal networks of support and rely on extended family, friends and community groups. Many family members find that they are able to cope with problems that occur and feel increasingly confident and in control.¹⁸ These are markers of a successful adjustment.

Box 5.12: Possible Reactions During Stabilisation

- Become involved in new activities
- Develop new routines
- Become more independent
- Feel more confident
- Feel more in control

6.3.4 Stage 4: Anticipation of Return

This stage is generally one of intense anticipation (Box 5.13). As with the initial deployment stage, there may be conflicting emotions. On the one hand, there is excitement that the unit member is coming home. On the other hand, there may be some apprehension. Family members may wonder how the returning unit member will adjust to changes that have occurred in the family. They may also wonder how much the unit member has changed as a result of the deployment. Family members aren't the only ones anticipating the reunion. Unit members are also focused on transitioning home and have their own expectations and concerns.

Box 5.13: Possible Responses to Anticipation of Return

- Intense anticipation
- Excitement
- Anxiety or concerns about adjustment

For military leaders, this stage is an opportunity to accomplish important tasks related to family support (see Box 5.14). Meanwhile, the rear detachment can also ensure that family members are provided reunion briefings so that they know what to expect. By encouraging family members and unit members to communicate with each other about their expectations for the reunion, unit leaders and the rear detachment can facilitate a more effective post-deployment adjustment.

Box 5.14: Deployment Phase: What can military leaders do?

- Communicate the planned return date and emphasize the fact that this date may change
- Send a thank you letter to the families for their continued support.
- Ensure unit members are briefed on family reintegration issues
- Address differences in expectations between family members and unit members
- Plan the homecoming reception

6.3.5 Stage 5: Post Deployment

Box 5.15: Possible Post-deployment Reactions

- Honeymoon period
- Loss of independence
- Need for “own” space
- Renegotiating routines
- Reintegrating into family

The post-deployment stage consists of two distinct phases. Families often experience an initial phase of adjustment (Box 5.15). For some families, this early phase is characterised by a “honeymoon” period in which they idealize each other. For some families, the adjustment is initially more difficult and is characterized by feeling of estrangement which are compounded by the mismatch between expectations and reality. Both of these reactions are normal and are part of initial

post-deployment adjustment as the unit member slowly integrates back into the family. The second phase of adjustment involves re-establishing a pattern of family functioning that incorporates the returning family member. This process may take some time because returning unit members may be psychologically absent, still thinking about the deployment, although they are physically present (Box 5.16).

Box 5.16: Talk to Me

"After my husband had been home for a few days, I got aggravated with him when he would telephone his colleagues every time something of importance came up within the family - finally I told him 'I'm your wife, talk to *me*'."

- *Military Spouse*

The family also needs to renegotiate roles and expectations. Thus, this phase takes energy, patience, communication and a sense of humour. Initially many families think getting back to normal is the easy part of the deployment cycle but in fact for some families this may be the most difficult phase. Although couples may expect to pick up the relationship

where they left off, and while they are physically together, it may take time to re-establish intimacy and re-connect emotionally (Box 5.17).

Leaders' responsibility for family support does not end when the unit returns home. In fact, the post-deployment phase requires leaders to continue placing emphasis on family issues. Leaders should incorporate family members in post-deployment briefings that emphasise unit mission accomplishments, thereby making the sacrifice of the families more meaningful. Leaders should also be sure to thank families for their support and to recognise their efforts both in formal ceremonies and during informal conversation.

Box 5.17: Intimacy Takes Time

"I couldn't believe it. After my shower, I kept my towel around me to walk to our bedroom."

- *Military Leaders Survey*

Box 5.18: Post-Deployment Phase: What Can Military Leaders Do?

- Incorporate family members in Post-deployment briefings
- Emphasize the accomplishments of the mission
- Thank families for their support and acknowledge their efforts
- Watch out for unit members who may be struggling

Military leaders should also be sure to recognise the achievements of the rear detachment, demonstrating the importance placed on the contributions of the rear detachment to mission success. Furthermore, military leaders need to watch out for unit members who may be struggling with family problems during the post-deployment phase and facilitate referrals to Mental Health Professionals as appropriate (see Box 5.18 and also Chapter 3).

6.4 LEADING BY EXAMPLE

Many military leaders report forgetting to prioritise their own families. Other leaders acknowledge thinking that family issues in the emotional cycle of deployment do not apply to their own families. Ironically, by not considering their own family, leaders may not have a firm basis of support during deployment and upon returning home. In addition, paying careful attention to their own family is one way to set a good example for their unit members.

6.5 MILITARY FAMILIES: THE STRENGTH THAT COMES WITH DEPLOYMENT

Military families know they are a special type of family. They know that to adjust to the demands of military life requires a commitment and competence which many civilian families never have to demonstrate. This special status is part of their identity. Military families also know deployments are one of the most challenging demands of military life. Even if families expect deployments, deployments still create difficulties. Families that overcome these difficulties and learn to navigate the emotional phases of the deployment cycle emerge stronger and closer than ever. It's up to military leaders to provide the climate for family support so that military families have an opportunity for successful adaptation and personal growth.

CHAPTER 7 WHAT TO DO WHEN THINGS GO WRONG

Chapter Objectives:

Define importance of early intervention
 Introduce 3-level model for early intervention
 Review leader actions following potentially traumatic events

7.1 INTRODUCTION

Box 6.1: The Dark Horse Ceremony

A few days after returning home from a combat tour, a marine infantry battalion held a ceremony on a beach to honour its fallen. This particular battalion had participated in heavy house-to-house fighting and had suffered many combat deaths. The memorial on the beach was named "The Dark Horse Ceremony," since the battalion's radio call sign was "Dark Horse." At dusk, the entire battalion, nearly one thousand-strong, assembled in close-order ranks on a level stretch of sand, facing a low rise. As taps were played by a bag-piper on a bluff above the assembled marines, and, as the sun settled into the ocean behind them, the battalion's commander walked a rider-less black stallion into full view of them all. Combat boots had been placed backwards in the stirrups of the vacant saddle.

While the commander held and stroked the dark horse's head, one marine after another marched to the front of the battalion, held up a set of dog tags, and barked out the name of the fallen marine whose name was stamped on them. Each of the fallen marine's dog tags was draped, in turn, over the pommel of the black stallion. After the last name was called and the last set of dog tags was draped, the battalion commander slowly walked the dark horse through the ranks of the assembled marines. As it passed close before them, each marine reached out one hand to stroke the flank of the animal that bore the weight of their dead. After the ceremony had ended and the remaining daylight had left, bonfires were lit on the beach and the marines of the Dark Horse battalion spent the night in comradeship.

- NATO RTO HFM-134 Symposium

Military leaders know that they are responsible for the physical and psychological well-being of their unit members. The Dark Horse Ceremony (see Box 6.1) is one example of how leaders can help unit members sustain well-being when faced with one of the harshest realities of military life: unit members getting killed. This chapter addresses what leaders can do when unit members experience potentially traumatic events. These events may occur during any phase of the deployment cycle (including training) but often occur during the deployment phase. Box 6.2 provides examples of events that may be considered potentially traumatic. In addition, it is not only single potentially traumatic incidents that can cause stress reactions, but also periods of

Box 6.2: Examples of Potentially Traumatic Events

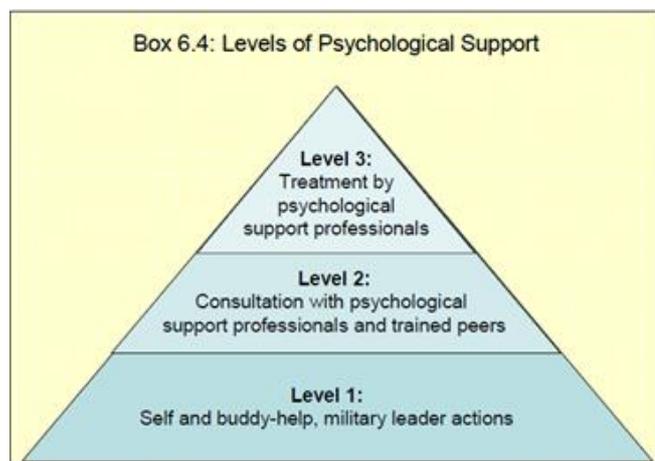
- Death in Training
- Suicide
- Combat Death of Unit Member
- Intense Combat
- Traffic Fatality
- Witnessing War Crimes
- Witnessing Civilian Suffering
- Fratricide
- Mass casualty
- Severely Injured Unit Member
- Sustained Threat

longer duration in which unit members are confronted with chronic levels of threat, danger, violence or destruction.

- Reactions to potentially traumatic events are varied. These reactions are neither a disease nor a weakness: rather, they are natural responses to extreme events. It is normal for individuals to experience some range of these reactions in the days and months following a potentially traumatic event. These reactions can be categorised in terms of cognitive, physical, emotional, and behavioural changes (see Box 6.3)¹⁹. Sometimes, symptoms of stress reactions occur right away. In other cases, symptoms take time to appear. Generally, reactions subside over time. The focus of this chapter is to help military leaders be proactive in supporting unit members following potentially traumatic events so that stress reactions can be minimised.

Box 6.3: Common Signs and Symptoms of Stress Reactions	
<p><i>Cognitive</i></p> <p>Memory Problems Inability to concentrate Poor judgement Seeing only the negative Anxious or racing thoughts, worry</p>	<p><i>Physical</i></p> <p>Excessive sweating Nausea or Dizzy spells Chest pain or Increased heart rate Elevated blood pressure Rapid breathing</p>
<p><i>Emotional</i></p> <p>Helplessness Emotional shock Moodiness, irritability or Anger Grief Guilt or Shame Depression or general unhappiness Feeling overwhelmed Hopelessness</p>	<p><i>Behavioral</i></p> <p>Changes in ordinary behavior patterns Changes in eating and drinking Changes in sleeping habits Decreased personal hygiene Withdrawal from others Prolonged silences Nervous Habits (e.g. Nail biting, pacing)</p>

Different levels of support may be needed for different situations (Box 6.4). In this chapter, Level 1 focuses on unit member and leader actions. This level is the most frequently used and therefore the largest part of the pyramid of psychological support. This support involves self-help, buddy-help, and leader actions. Level 1 takes effect immediately after the potentially traumatic event. Level 2 interventions involve more formal actions that may be carried out by trained peers and/or Mental Health Professionals. Finally, Level 3 consists of specialised treatment of individual unit members by Mental Health Professionals. Level 3 interventions occur less frequently than the other two levels of the pyramid but are important for leaders to consider as additional tools in maintaining unit readiness. Levels 2 and 3 should be initiated according to the severity of reactions to the potentially traumatic event rather than according to specific timelines.



A key assumption underlying this chapter is the belief that most unit members will recover from potentially traumatic events without any professional intervention. The assumption is

that Levels 2 and 3 will be the exception rather than the norm following potentially traumatic events. In fact, in many cases, self-help and other Level 1 actions will be sufficient to help the majority of unit members cope with potentially traumatic events. For this reason, the chapter focuses primarily on Level 1. Nonetheless, information about Levels 2 and 3 are included so that leaders know when accessing formal support is appropriate.

It is also important to note that leaders' ability to help their units after potentially traumatic events depends upon leaders taking care of themselves too. Leaders may have experienced the same potentially traumatic events as unit members, and the leaders may also experience stress reactions. In particular, leaders should be aware that their decision making may be influenced by these normal stress reactions. Leaders may also want to pay particular attention to the quality of their sleep, signs of irritability, and other possible reactions. By monitoring themselves, leaders can adjust their decision-making to take these changes into account and to take care of themselves.

7.2 LEVEL 1: LEADER ACTIONS

Following exposure to potentially traumatic events, unit members are likely to engage naturally in behaviours that promote recovery. The actions of leaders at all levels, however, can go a long way to establish conditions that support and sustain recovery (see Highlight of Box 1.5 repeated in Box 6.5).

Box 6.5: Encouraging people to talk

"My only input was to encourage them to talk about it, not to worry about it, to feel good that they had probably saved themselves and, more importantly, their colleagues. They did not really need de-stressing; they were doing it themselves. All that we (the chain-of-command) provided was the sense of purpose, resolve, and the assurance that everything they had done and were feeling was entirely alright. "

- Military Leaders Survey

One of the most significant potentially traumatic events that a leader may face is the death of a unit member and the subsequent grief reactions of unit members and those on the home front. These reactions will be different for each individual but are likely to affect the functioning of the unit as a whole. What leaders choose to do in the aftermath of such a loss will set the tone for how the unit and families deal with and recover from the loss. Leaders who acknowledge the loss, give permission for grief, and place the loss in context provide meaningful support at a time that many unit members need it most.

It is critical to acknowledge and honour the lost individual. The account in the beginning of the chapter (Box 6.1) described a memorial ceremony held to mark the death of several unit members. During operations, such ceremonies may not be feasible. Nevertheless, something needs to be done to acknowledge a unit member's death. In times of grief, leadership involves ensuring that time is set aside to stop and consider the loss (Box 6.6).

Box 6.6: Honouring the Fallen

“The rocket attack happened late at night. It killed two unit members. We were in an outpost miles away from anyone else. What were we to do with the bodies because it was too dangerous for helicopters?

At first they were left in a place close to the guys’ kit. I and the other NCOs from the platoon were not happy with this. First, it would have been demoralising for the guys to see the bodies when they went to retrieve their kit the following morning and, second, we thought it was a bit undignified because of how they were left.

We decided between ourselves to move the dead to a sheltered spot in a garden under a big tree and cover them over. This simple gesture played a big part in handling this situation and helped to prepare us for the rest of what was to come. We later made a plaque and hung it in the room where they died.”

- Leader’s Guide Reviewer
- Military Leaders Survey

Memorial ceremonies may occur during the deployment and again afterwards upon homecoming. Such ceremonies can become especially meaningful by incorporating the use of symbols that have significance to the unit and by having unit members involved in planning wherever possible.

The role of leadership in the wake of a unit member’s death also involves giving permission to grieve. This permission can include standing the unit down for a period of time and reminding subordinate leaders that grieving is not likely to end when the memorial ceremony is over. Leaders can also lead by example by talking about the impact of the loss on them. By acknowledging their own reaction, leaders help shape a unit climate that counters stigma associated with grief. Although unit leaders may not feel trained to deal with a death in their unit, the unit will look to the leader for guidance and the family will expect a personal acknowledgement of the loss. By addressing grief issues directly, leaders set the standard for taking care of unit members.

Leaders also have the opportunity to set the foundation for unit recovery by placing the loss in context. The leader can help orient the unit toward the future by emphasising the meaning of the unit member’s contributions, the meaning of their sacrifice, and the expectation that the unit will continue its mission.

Dealing with the loss of a unit member is not likely to be easy for the unit or for the unit leadership. Unit leaders need to ensure that they have an outlet for dealing with their own emotional reactions such as talking with a peer or a chaplain. In many nations, chaplain support is a key part of helping the unit with the process of recovery by offering counsel and spiritual guidance. In some nations, this role is filled by

Mental Health Professionals. Not all potentially traumatic events involve the death of a unit member. Leaders should be able to identify possible traumatic incidents and establish an environment that will support recovery (see Box 6.7)

Box 6.7: How Leaders Can Help

- *Make time to process events*
- *Bring people together in an appropriate setting and at an appropriate time*
- *Allow service members to react both as individuals and as a group*
- *Recognise unit members’ experiences and sacrifices*
- *Manage the event using unit resources*
- *Call in specialist help if and when needed*

7.3 LEVEL 1: INFORMAL BUDDY HELP

Leaders also have a responsibility to establish a climate in which buddy support takes place across the deployment cycle. Buddy help can be defined as informal psychological support given by one unit member to another. Buddy help relies on the existence of a personal relationship and the sharing of a common experience and represents unit members looking out for each other.

Buddy help is unique because unit members understand each other in a way that outsiders may not. They share experiences, values and beliefs. That's why buddies are so effective in helping each other deal with the aftermath of potentially traumatic events. Buddy help is often considered a type of psychological first aid.

Box 6.8: The Buddy-Buddy System Working

“An explosive device had blown the front off one of our vehicles. No one was injured inside, remarkably, but the whole front end of the armoured vehicle had been sheared completely off. Sitting with some of these 18 and 19 year-old soldiers, sitting with them in their barrack block when they disclosed the excitement of this, you could see they were still running on adrenalin. We gave them the opportunity and the time to articulate, not just verbally, but emotionally too. We gave them the space to do that in an operational theatre where they were expected to go back out on duty again the next day. To just give them that little time between duties, not just for eating and resting, but to just get a hot cup of tea and just talk to each other about how they all felt and how desperately scared and everything else they were, was very important. I could see that this was the buddy-buddy system actually working, keeping people with their team for mutual support. I think we've learned that lesson, that you keep people in their little tight group where you can give them the opportunity to talk about things like that”.

- Military Leaders Survey

Some nations have focused basic military training to improve the “buddy” system. This training includes teaching service members to recognise signs of stress in friends. It also includes training in listening skills, stress management and coping techniques.

Unit members will naturally engage in buddy help if the circumstances are correct (Box6.8). Leaders can foster a climate that encourages buddy support. They can emphasise the importance of looking out for one another, make time to process events, bring people together, and encourage other unit activities and training such as those described in Box 6.7.

7.4 LEVEL 2 AND LEVEL 3: FORMAL INTERVENTIONS

When leaders identify individuals who are unable to function or who have problematic behaviour changes despite Level 1 actions, formal interventions may be required (Box 6.9). Level 2 and 3 interventions are provided by specially trained personnel who typically have not been involved in the incident. These interventions are designed to take care of unit members and reduce personnel loss. Ideally, they are provided as near as possible to the unit, as soon as possible, and with the expectation that the individual will recover and return to duty. This approach facilitates the natural process of recovery, and many individuals will be able to remain with their unit.²⁰ Those who do not benefit from this level of intervention may need to be evacuated.

7.5 LEVEL 2: SUPPORT BY TRAINED PEERS

Consistent with the principles of level 2 and 3 support, some nations have peer-delivered stress risk-assessment and intervention programmes activated quickly after a potentially traumatic event. Leaders from these nations may request formal support from these trained peers (see Box 6.9). Trained peers normally come from the unit but may come from outside if no trained peers are available or if the unit's trained peers were involved in the incident themselves.

Formal support from trained peers is similar to buddy help. Peers have credibility and are not seen as part of the medical establishment. What makes them special is that they are trained in the use of certain techniques. These peers can conduct risk assessments, crisis management briefings and early interventions. In those nations that have formal peer support programmes, leaders should consider selecting unit members for such training as part of ongoing preparation for operational deployments.

Box 6.9: A Formal Peer Assessment

Four marines, including one sergeant, deployed to a country on diplomatic protection duties, were targeted by rebels as they picked up the diplomatic bags at the airport. Two RPGs severely damaged the vehicle in which they were travelling. When the emergency services arrived the sergeant tried to explain that they had been attacked. However the local police saw that the marines had weapons but were in civilian clothing and became aggressive and hostile. All four were taken to police cells and their wounds were given scant attention in spite of all four having suffered lacerations and varying degrees of concussion.

Eventually diplomatic pressure led to the group being released from custody and taken to hospital. After having their wounds tended, all four returned to the embassy compound. The detachment sergeant major (who was a specially trained peer practitioner) discussed the incident with the sergeant and the diplomats who negotiated the marines' release. He decided that a formal peer assessment was warranted and decided that the sergeant should be seen separately as he may have felt in some way responsible since he was in charge. The junior marines, who were seen together, all showed varying signs of distress but perceived that the situation would have been far worse if the sergeant had not been as steady and robust as he had been. Although one appeared to be suffering with some signs of acute stress and was not functioning well, the sergeant major was able to alter his duties to ease his work stress, whilst ensuring that he had the support of his buddies. The sergeant appeared to feel very guilty that he had let his lads down and was not able to get them to hospital sooner. However, after seeing both groups the sergeant major decided it was best to get all four together. Indeed, when the juniors praised their sergeant's actions, it was obvious to all that the sergeant became less distressed, realising at last that he had done a good job and that he had earned the respect of his subordinates.

All four were encouraged to keep talking to each other and were given the opportunity to phone home. However, they all continued to carry out their duties in theatre. At follow up, some four weeks later, they were back to their same old selves.

- NATO RTO HFM-134 Symposium

7.6 LEVEL 2: PROFESSIONAL SUPPORT

Leaders also often have access to Mental Health Professionals to assist after a potentially traumatic event. Level 2 psychological support is designed to assess and provide early interventions. The specific types of interventions might include short term one-on-one consultations as well as targeted group interventions. Leaders may have several options

regarding who provides this type of care and, in general, should select providers who are known to the unit (see Box 6.10 for an example).

Box 6.10: Calling in the Professionals

“I was especially concerned about how the different operational groups coped with the situation during and after the experience. Upon returning to camp, I decided to call the psychologists in to assist with debriefing. Participation in the debriefing was mandatory which turned out to be very satisfactory. As everyone was seen by the mental health professional no one was stigmatised. The decision was seen as a good call.”

- Military Leaders Survey

7.7 LEVEL 3: PROFESSIONAL REFERRAL

Although most personnel will experience stress reactions after a potentially traumatic event, only a minority will develop severe psychological problems such as post-traumatic stress disorder or depression. Level-2 providers typically identify those individuals requiring specialised Level 3 treatment.

Mental Health Professionals at Level 3 evaluate individuals, make diagnoses and treat individuals in need. This support is likely to be provided away from the unit and, in some cases, may require medical evacuation. Given the potential severity of stress reactions, it is essential that leaders support the system of managing high-risk individuals (see Box 6.11).

Box 6.11: Leaders Managing Traumatic Events

“Each time there were situations of important stress, the chain-of-command fully played its role and the medical support team intervened by taking on individual management of particular cases or referring on where appropriate.

An NCO died after an accident during artillery live firing. I managed this situation together with my unit’s doctor. Together, we managed unit stress, provided support to the family etc.”

- NATO RTO HFM-134 Symposium

7.8 Conclusion

Military organisations ideally have structures in place that enable level 2 and level 3 interventions and pro-actively support leaders in taking care of their unit.

With these structures in place, the military leader has a responsibility to:

- understand when it is appropriate to use each level of support
- be aware of the importance of their own actions in supporting unit recovery
- communicate the importance of buddy help
- facilitate access to each intervention level
- incorporate stress reactions and buddy help into training scenarios
- work to reduce stigma associated with seeking help from professionals

Potentially traumatic events not only provide leaders with a challenge but also provide them with an opportunity. Effective leaders actively demonstrate concern for individuals, acknowledge loss, communicate directly with unit members and their families, and send a message that the unit is expected to recover. Through good leadership, they can help their unit strengthen cohesion, resilience, and readiness.

CHAPTER 8 WORKING WITH MENTAL HEALTH PROFESSIONALS

Chapter Objectives:

Describe the benefits of consulting with Mental Health professionals
 Provide guidance on how to make the most of Mental Health professionals
 Describe what leaders should expect from their Mental Health professionals

8.1 INTRODUCTION – WHAT LEADERS KNOW

Box 7.1: It's Our Job

“Commanders at all levels should realise that they have the responsibility for, and play a vital role in, education and management of stress and for all the mental and emotional problems of the soldiers under their care.

Pre -deployment training, knowing your soldiers and the management of stress during and after operational deployments are fundamental to helping soldiers deal with adjusting their reactions to normal circumstances after having been under abnormal conditions.

The responsibilities of a Commander are enormous, starting well before a deployment and probably never ending afterwards. For a Commander this is a lonely job. He cannot and must not abrogate responsibility. But he does not have to feel lonely when he puts his trust in his subordinates.”

Major General Cammaert
 NATO RTO HFM-134 Symposium

Ultimately, military leaders know that responsibility for their unit's performance and the health of their subordinates rests with them. Like any military leader, Major General Cammaert, of the Royal Netherlands Marine Corps, understands this responsibility (Box 7.1). As a military officer with a wealth of experience in international operations, he was asked to provide a keynote address at the NATO symposium, “Human Dimensions in Military Operations: Military Leaders' Strategies for Addressing Stress and Psychological Support”.²¹

As stated in Box 7.1, the Commander's responsibilities for taking care of the mission and personnel are enormous. While military leaders typically receive training in reaching mission objectives, leaders participating in the NATO survey often reported they did not receive training on how to deal with stress in their unit.

The goal of this chapter is to provide leaders with a perspective on the benefits of consulting with Mental Health Professionals and on how to make the most of those professionals.

8.2 BENEFITS AND QUESTIONS SURROUNDING PSYCHOLOGICAL SUPPORT

Leaders maximise their effectiveness by managing stress-related concerns of unit members. In this role, leaders will occasionally need to consult with, or refer to, a psychological support professional. These professionals represent different disciplines and training but they are all specialists in dealing with psychological issues. Leaders and unit members occasionally have questions about Mental Health Professionals (see Box 7.2 for summary).

8.2.1 What do military Mental Health Professionals offer?

Mental Health Professionals assess the well-being and morale of unit members and offer psychological treatment. Leaders can also consult with Mental Health Professionals to help them address unit issues and to generate recommendations for actions to improve well-being and morale. These recommendations can then be considered when military leaders implement changes within their unit. Leaders can also request specific training on issues that affect their whole unit including how families are affected by deployment, stress management, anger control, and responsible alcohol use.

Box 7.2: Questions about Consulting with Mental Health Professionals

- What do military Mental Health professionals offer?
- Are Mental Health professionals all the same?
- Does paying attention to stress weaken the unit?
- Should a leader get involved in a subordinate's personal problems?
- If unit members are affected by stress, do they belong in the military?

8.2.2 Are Mental Health Professionals all the same?

No. Mental Health Professionals come from a range of disciplines. For example, some are experts in surveys while others are experts in providing treatment. As a result, individual Mental Health Professionals may or may not have the specific skill set that a leader may need to address a particular unit issue. Leaders should find out about the specific domain of expertise of the Mental Health Professionals available to them, become familiar with them and integrate them into unit training and deployment planning.

8.2.3 Does paying attention to stress weaken the unit?

No. While addressing the topic of stress may lead to the identification of stress-related concerns, it will not cause stress to suddenly emerge out of nowhere. However, leaders need to be prepared to hear the answers when they ask a question about stress. If a leader asks how much stress unit members experience or whether or not there are significant morale problems in the unit, the answers may very well indicate a problem. Asking about stress may help leaders identify the specific nature of issues and problems.

Not asking about stress won't make the issue go away; it will just get identified as some other kind of problem – a discipline problem, for example. Lack of adequate problem identification will make it that much harder for leaders to address the underlying concerns of both individual subordinates and their unit as a whole. It is the very lack of problem identification that could weaken the unit, making it less ready to withstand the rigours of operational demands.

8.2.4 Should a leader get involved in a subordinate's personal problems?

Yes. Leaders are routinely taught that they are responsible for maintaining unit readiness. Readiness entails both physical and psychological components. The personal problems of unit members affect their psychological readiness. Consequently, these problems must be addressed by leaders. Even if the larger culture would typically consider stress-related problems as beyond the reach of the work organisation, the military is different. For leaders, being responsible means actively checking in with unit members and offering them the opportunity to talk about concerns before those concerns affect unit readiness. By giving unit members the clear and consistent message that stress-related problems concern everyone, leaders are establishing the expectation that unit members should be able to rely on their unit for support.

8.2.5 If unit members are affected by stress, do they belong in the military?

For the most part, the answer is yes. It is normal for some unit members to experience stress from the demands of military life (Box 7.3). This stress is often temporary. Leaders know that early identification of problems can mean the difference between an effective unit member and attrition. Even simple leader actions, like requiring rest and relaxation, assigning a change in duties, or providing a chance to talk about problems, can make a difference for unit members who are struggling. Nevertheless, there will be cases in which an individual is no longer suited for military life, and it is better for that individual to leave military service.

Box 7.3: Stress Levels Will Always Be High

“It is a sad fact of our profession that stress levels are, and always will be, high. Commanders need the support of military mental health professionals in caring for those deployed personnel who cannot cope with their deployment experiences.”

- Major General Cammaert

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8.3 USER'S GUIDE TO MILITARY MENTAL HEALTH PROFESSIONALS

The following tips may help leaders use their Mental Health Professionals:

Be specific. Leaders should tell the psychological support professional what their concerns are and what the goal is in terms of outcome. If the psychological support professional is not the right person to help, he or she should refer the leader to one who is.

Box 7.4: It's OK to Seek Help

“Emphasise the fact that it's OK to seek help. Leaders play an important role in diminishing prejudices that still exist with regard to mental health care.”

- Major General Cammaert

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Be realistic. Even though leaders can expect a lot from their Mental Health Professionals, there are limits to what can be done under extreme or difficult circumstances. For example, there is no way to get rid of grief when a unit is struggling with the loss of unit members, or to get rid of stress when tough demands are placed on unit members. Being realistic means identifying what can be done within the confines of the mission requirements.

Integrate them. Leaders can get the most out of Mental Health Professionals by integrating them into unit activities across the deployment cycle. As a result, Mental Health Professionals get to know the unit and the unit member are more likely to trust them long before deploying or at least before a potentially traumatic event occurs.

Practice consistency. Leaders who want to reduce stigma associated with mental health problems in their unit need to be consistent (see Box 7.4). They need to support those who seek help, encourage them, and remind their subordinate leaders that it takes leadership to ensure that those who need help, get it.

What leaders can expect from Mental Health Professionals. Military leaders have the right to expect good service from their Mental Health Professionals. While each nation and every deployment will have a different combination of professional support available, military leaders have the right to expect that support be provided by individuals who:

- understand the military
- understand the leader's intent
- know about operational stress
- make useful recommendations

Mental Health Professionals know that leaders expect a lot from them.²² Mental Health Professionals have an obligation to be the experts and must be prepared to “challenge the limits of their profession to support the commander’s ability to sustain the unit’s psychological well-being.”²³

CHAPTER 9 CONCLUSION

9.1 INTRODUCTION

This leader's guide addresses the potential gap between what leaders know and what they need to know about stress and psychological support. This guide describes methods which leaders can use to enhance the psychological fitness and morale of unit members across the deployment cycle. In summary, the guide covered:

- the expectations members bring to the unit and the impact that these expectations can have on morale and behaviour
- different methods by which leaders can systematically assess psychological fitness and morale
- strategies by which leaders can detect and manage signs and symptoms of stress reactions
- options leaders can pursue in terms of providing family support across the deployment cycle
- what leaders can do to maximise use of their Mental Health Professionals

9.2 A COMMON UNDERSTANDING

It became evident during the NATO Symposium and Military Leaders Survey that military leaders would prefer more specific information than provided in this guide. However, because each nation has its own traditions and practices, this guide took a general approach in order to be relevant to leaders from as many nations as possible. If leaders require more details about psychological support and programmes specific to their own military, they should turn to Mental Health Professionals in their own nation.

Despite national differences, leaders should be aware that, even on deployments in an international environment, there is a common understanding among both leaders and Mental Health Professionals of the importance of psychological readiness and support. Concerns described by military leaders in the NATO survey revealed remarkable consistency. Leaders want their unit members to be psychologically fit and to have high morale. Leaders from a range of nations recognise that unit members may struggle at different points in the deployment cycle. Military life can be demanding, and it can be rewarding. But good leaders wouldn't trade it for anything.

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CHAPTER 10	END NOTES
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