U.S. ARMY CULTURE

An Introduction for Behavioral Health Researchers

Center for the Study of Traumatic Stress
Department of Psychiatry
Uniformed Services University



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Contents

Preface 1
Chapter 1 Cultural Competence
CHAPTER 2 Conducting Research in Military Organizations9
CHAPTER 3 Army Jobs: Cultures and Subcultures17
CHAPTER 4 U.S. Army Structure: Organization, Ranks, and Responsibilities25
Chapter 5 U.S. Army Training33
Chapter 6 Career and Family Transitions43
CHAPTER 7 U.S. Army National Guard and the Army Reserve: Citizen-Soldiers 55
CHAPTER 8 Technology and War63
Appendix A Relevant Films and Books69
Appendix B Glossary of Acronyms75
Appendix C Ranks and Responsibilities77
References81

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Preface

Culture is defined as a social domain that emphasizes the practices, discourses, and material expressions, which, over time, express the continuities and discontinuities of social meaning of a life held in common (James, 2014, p. 53).

Groups define themselves in part through shared culture and understand others through perceived similarities and differences. Culture is a pervasive part of our everyday lives, and yet its influence often goes without notice. This oversight is also true for the U.S. Military. Often conceptualized as an occupation rather than a culture, the cultural considerations of military service can be easily overlooked in research settings. Military culture includes a rich collection of symbols, beliefs, values, language, dress, behaviors, relationships, and work. Like other cultures, military culture influences how research is conducted, both in its planning and execution. Understanding the culture of research participants is essential in successfully answering research questions. For researchers who work with military populations, it is important to appreciate the current stressors of battle (Chapter 8), what it means to keep the chain of command "in the loop" (Chapter 2), and what soldiers' jobs mean to them (Chapter 3).

This volume focuses on the culture of the U.S. Army. Many of the major points also apply to other military services. The concepts are important for those who desire to understand U.S. Army culture for research — particularly those early in their careers. We hope that this book helps those interested in conducting research in the Army to better navigate what can seem like a foreign land. We have attempted to keep the text brief and helpful, as entire tomes have been be written on the various cultural aspects of the Army. An extensive list of references is available for further reading. While this book includes a brief orientation to the development of theories of culture, we have included only those theories that are helpful in understanding military culture. These theories may be taken into account as considerations to be taken in designing and executing research within the U.S. Army as well as the other military services.

The book is organized into specific chapters, which can be read to answer a particular question (e.g., How does the organizational structure influence soldiers?) or in its entirety. As a result of the specificity of chapters, some material is repeated. There are questions at the end of each chapter to facilitate applying the key concepts towards research. The first chapter provides an overview of how cultural competence is more than just cultural awareness, but a set of skills and attitudes. Chapter 2 describes the important pragmatics of conducting research in the military — a must read for understanding how to interact with "the Army" before, during, and after a research project. The remaining chapters provide specifics on military culture.

These later chapters describe what soldiers do (Chapter 3), the structure of the Army (Chapter 4), and how Army training is organized to prepare soldiers for their mission (Chapter 5). Following these basic descriptions of the Army, we explore career transitions (Chapter 6). In this chapter, we describe the changes that occur in the career of the soldier and how these transitions may affect them and their families. In addition to the active duty component, the Army also consists of the reserve component comprised of the Army Reserve and the Army National Guard (Chapter 7). These two forces have undergone many changes since the events of 9/11 and now occupy major positions in U.S. defense posture. A great deal of research on soldiers is conducted within both of these organizations, which makes this chapter an important component of the text. The final chapter describes macro changes that have occurred throughout military history with a specific focus on how the war on terror has influenced the Army's conceptualization of combat and combat injury since the Gulf War. The book concludes with a summary of media (movies and books) related to the military to complement the extensive references and a brief list of acronyms and ranks.

Members of the military are U.S. citizens first — they are part of the Nation, and apart from the Nation. We hope this book will stimulate thoughts and conversations about the cultural influences of military service on service members and their families. Such increased awareness can enhance the design and execution of research within the U.S. Army, and help the lives of countless soldiers and their families. In this effort we thank the many who have gone before us. We have attempted to reference them when possible, but have certainly only captured a few. It is their efforts that have made this volume possible.

Eric G. Meyer James E. McCarroll Robert J. Ursano

CHAPTER 1

Cultural Competence

Key Points

- 1. Understanding how *your* culture, as a researcher, views the study participant. This is just as important as understanding a participant's culture
- 2. In attempting to understand how culture influences study participants, use what you know about their culture to inform the questions you ask them.
- 3. Cultural identity is not static; study participants can have different degrees of acculturation, and may identify more with a specific subculture than with a parent culture.

Background

Cultural competence is more than cultural awareness or knowledge. While knowledge of other cultures is important, it is still just a generalization and should not be used to arrive at conclusions regarding a study participant without further information. A study participant may identify with a sub-culture more than a parent culture, or they may identify as against a culture (anti-culture). Equally important is an awareness of one's own culture — how it influences your views, opinions, reactions, thoughts, emotions, and behaviors towards "others."

As exemplified in the DSM-5's Cultural Formulation Interview (CFI) (American Psychiatric Association, 2013), the crux to cultural competence is the skill of using an awareness of culture ("theirs" and "yours") to frame questions to the participant and being open to cultural differences without ascribing value to those differences.

The military, although not typically referred to as a culture, is a culture that requires a similar culturally competent approach. Having a commander, fighting in combat, frequent moves — all influence how a soldier might interpret their illnesses, care, or your research question. You, the researcher, may come from a culture with strong views of the military: positive or negative. Researchers working with the Army have a better

chance of success by framing their research questions (big and small) with an awareness of military culture and their own culture.

What Is Cultural Competence?

Cultural competence has been described as essential in the fields of medicine, anthropology, sociology, business, leadership, and education. The scope and meaning of this concept has shifted as it has been debated and politicized (Table 1). A widely accepted framework for individual cultural competence includes three components: being aware of one's self-view, understanding the worldview of culturally different people without negative judgments, and developing strategies and skills in working with culturally diverse people (Sue & Sue, 1990).

TABLE 1: Two Views of Culture

Psychiatry:

- Culture can affect how mental distress is expressed and evaluated.
- Cultural influences come from patients and providers
- Finding these influences requires patient centered care asking questions about the patient's context.

Sociology:

- Culture is considered a commonality within a group of people.
- Culture exists within the social world of groups.
- Culture attempts to ascribe meaning of the social behavior of these groups.

From this definition there is an effort to make cultural competence an organizational-level process (Cross, Bazron, Dennis, & Isaacs, 1989; Harper et al., 2006) at the corporate level or as part of an organizational mindset in handling "others." Cultural anthropologists put forth concerns that such a static, divisive conceptualization of culture could be problematic. Under such terms, culture could be misconstrued as the source of maladaptive behaviors as well as the proverbial "solution" to understanding people from unfamiliar populations (Santiago-Irizarry, 1996). By 2003, anthropologists furthered apprehensions that cultural awareness was being objectified; noting that a reified, essential, static understanding of culture is inconsistent with the dynamic, individualistic reality of culture (J. S. Taylor, 2003a, 2003b). The expansion of organizational cultural competence came to a sudden halt as leaders from a variety of fields united against leveraging social justice programs under

the guise of cultural competence (Wasley, 2006).

The definition of cultural competence has since swayed towards a more individualistic approach (Roysircar, 2004), avoiding the characterization of cultural competence as a theory (Gallegos, Tindall, & Gallegos, 2008) or a quantifiable factor (Carpenter-Song, Schwallie, & Longhofer, 2007). Many of the hidden assumptions, which undermined previous conceptualizations of cultural awareness, have since been exposed in an effort to prevent the errors of the past, to include:

- 1. Equating culture solely with ethnicity and race,
- 2. Considering culture as an attribute possessed by the minority "other" (Schnurr, Lunney, Sengupta, & Spiro, 2005,
- 3. Believing that increased exposure to these "others" would inherently improve cultural competence,
- 4. Thinking that those in need of improved cultural competence are predominately white Westerners,
- 5. Assuming that increased confidence and comfort equates to cultural competence (Kumas-Tan, Beagan, Loppie, MacLeod, & Frank, 2007).

Indeed, the psychological literature has gone so far as to say that cultural awareness is a component of an intimate relationship between two people (Rodriguez, Cabaniss, Arbuckle, & Oquendo, 2008). Such an approach maintains the focus on the person, resisting the temptation to reduce a culture into archetypes or stereotypes, which would be antithetical to the goals of cultural competence (Mills & Keddie, 2010). Research on cultural competence continues to demonstrate that the failure to acknowledge, understand, and manage sociocultural variations in attitudes and behaviors can impede effective communication, undermine alliance formation, lead to dissatisfaction, and worsen outcomes (Betancourt & Green, 2010).1

Military Cultural Competence

The U.S. military is a culture with a language, code of conduct, behavioral norms, belief systems, dress, and rituals (Reger, Etherage, Reger, & Gahm, 2008). Military culture is in fact more delineated than most other cultures, as many of its tenets are clearly defined by law and by regulation. Looking beyond such foundational influences, the experience of

^{1.} Note that the literature no longer differentiates culture by dichotomies (provider v patient, employee v customer, researcher v participant) embodying the concept that both are important and the whole group, not the supposed "other," will be negatively impacted when there is a lack of cultural competence.

being in the military greatly influences a person's identity. Military culture has a role in the cohesion among soldiers that gives them common bonds (Krueger, 2000). For some, the military is an escape and provides a predictable, sheltered life they may not have experienced growing up (Wertsch, 1991). For others, it stands as a final bastion as a rite of initiation into adulthood (Nash, 2007). For many, the desire to embody the warrior mindset drives membership (Wertsch, 1991).

Through indoctrination, military culture overlays and often replaces previous cultural beliefs while reducing, but not eliminating (Fenell, 2008), many disparities (economic, racial, gender) that exist in civilian culture (Harris, 2011; Lundquist, 2008). A preference for associating oneself with the military can occur after only a short period of service and can take precedence over other common identities, such as race, gender, sexual orientation, political party, or socioeconomic status. However, for some members, military culture can be a source of conflict. Some women veterans have described military culture as negatively impacting their identity as sexual trauma in the military felt like a betrayal of the entire military (Bell, Turchik, & Karpenko, 2014). Good or bad, indoctrination into military culture is so profound that it can fundamentally change a worldview, often impeding transition back to civilian life (Brewin, Garnett, & Andrews, 2011).

Military culture is also reflected in its most basic elements: traditions, ranks, training, jobs, hierarchies, organizations, careers, and transitions. Understanding these basic cultural influences of the U.S. military as a whole is a good starting point in appreciating the culture of soldiers and their families. However, the parent culture should not be considered the whole story. The U.S. Army (referred to simply as the Army in the remainder of this text) shares much to the same cultural identity as the entire military while maintaining its own, specific subculture (only soldiers say "hooah"). Further subcultures exist throughout the Army as they exist in civilian society. Soldiers may identify with their job, geographic location, or unit more than the Army itself. Levels of acculturation can vary from soldier to soldier and over time.

Research and Army Cultural Competence

Understanding military cultural competence is key to successful military research. According to a recent Pew survey, civilian understanding of the U.S. military is markedly low. The percentage of Americans currently serving in the military is the lowest since the period between World Wars I and II (www.pewsocialtrends.org/2011/11/23/the-military-civilian-gap-fewer-family-connections). The treatment of militaryrelated illnesses, such as posttraumatic stress disorder (PTSD), may be hindered by a lack of military cultural competence in civilian researchers and clinicians (Hoge, 2011), who struggle to understand the concepts of illness and health from the perspective and experiences of soldiers. The significance of Army cultural competence, including awareness of the common concerns, stressors, considerations, and language of soldiers and their families, is undeniable. It has been emphasized in the delivery of community behavioral health and social services (Luby, 2012), training programs for veterans' healthcare providers (Strom et al., 2012), and in the education of military students (Cole, 2015). Educational materials have also been produced on military culture (Goldenberg, Hamaoka, Santiago, & McCarroll, 2012). An 8-hour online, peer-reviewed, interactive training curriculum by the Uniformed Services University of the Health Sciences (USU) Center for Deployment Psychology (www. deploymentpsych.org) is also available. Additionally, tools for assessing military cultural competence have recently been developed (Meyer, Hall-Clark, Hamaoka, & Peterson, 2015) that can help researchers determine their own levels of military cultural awareness.

Gaining the appropriate knowledge, skills, and attitudes associated with Army cultural competence is paramount in conducting behavioral health research within the Army. A culturally competent researcher must consider how Army culture might frame a soldier's illness, injury, or other experience. Acculturation might be situational and change over time, and subculture identity might be more important than a larger cultural identity. Researchers must be aware of how their own culture might influence their research.

Conclusion

Culture is a cornerstone of society, and cultural competence is fundamental in our ability to understand each other. Researchers should take the time to become more aware of their own culture and the culture of the Army to better understand how these may impact their interactions with soldiers and their conceptualization of the Army. The more they can improve their Army cultural competence, the better prepared they will be to ask the right questions in order to successfully understand the challenges soldiers face within the construct of Army culture.

Thinking it Through

- 1. What is your (the researcher's) experience with the military? Has anyone in your family served? What is your own response to the military including combat, and other aspects of military service (e.g., your assumptions, stereotypes, emotional reactions)? How might your perspectives impact your interactions with the Army and/or soldiers? How might you reduce any negative influences from these perspectives?
- 2. What are some of the ways that military culture could impact a research question (expression of illness, understanding of care, help seeking behavior)? How would you assess for such influences?
- 3. What are some cultures outside of the military that a service member might more readily identify with?

CHAPTER 2

Conducting Research in Military Organizations

Key Points

- 1. The mission of a military organization always comes first. You must ensure that your research will not interfere with it.
- 2. Commanders are responsible for their soldiers. They want to know what you are doing so they can keep their soldiers safe. Keep them informed early and often.
- 3. Your legitimacy is not necessarily based on your credentials, but as much based on how you conduct yourself be on time, answer questions honestly, and follow through on promises.

Background

Without prior experience and knowledge, understanding the Army is confusing. What is it? A researcher new to the Army might be confronted with appreciating only one organization of the Army, a company for example. The organization to which the soldier belongs is informally referred to as the "unit" and we will use this terminology from this point forward. Understanding a unit's size, its command and control structure, training, and role on a military installation or in the defense of the nation can be daunting. In the case of reserve components, personnel are usually not located on a military installation. In addition to these structural factors are the demographics of the organization: average age of the members, gender, marital status, the number with children, where they live, and how they interact with other military units. While all of these demographic details are important considerations, misinterpreting the culture of an Army unit is where researchers can truly find themselves in hot water. Forgetting to keep the command informed or attempting to schedule research that would potentially delay a training mission can be the end of even the best-designed research project.

While understanding the intimate cultural considerations that exist between the researcher and the participant soldiers can improve any Army research project, this chapter focuses on the unit factors that can truly "make or break" a project. There are several unique challenges inherent to conducting research in Army units. Among these are (1) gaining access to an Army unit, (2) preventing coercion, (3) preventing or reducing stigmatization of those who participate in the research, and (4) avoiding interference with the mission of the unit (Fullerton, McCarroll, & Ursano, 2006). Successfully navigating these challenges requires an awareness of several distinct factors: knowledge of how an Army unit understands its purpose, appreciation for how an Army unit assesses a researcher's legitimacy, understanding the commander's obligation to the unit, setting boundaries, coordination of requirements imposed upon the unit by the research, confidentiality, and skills in effectively communicating.

Research in an Army Unit Primacy of the Mission

The military is a functionally defined organization. People, units, and equipment are all defined by what they can do. Every job supports the mission or it does not exist. Soldiers are judged on their ability to do their job in support of the mission. Failure to do so can result in disciplinary actions or, if egregious, separation from the military. The use of function as an indicator of deserving to be in the military is evident by the derogatory use of the word "civilian" for a soldier who cannot do their job.

Research does not typically support the mission in a direct fashion. As such it will be viewed with extreme scrutiny. Although it may support future missions, promises that it will directly benefit the unit participating in the research should be kept to a minimum. The emphasis should be on overall benefits to the Army in terms of increasing knowledge about the factors under study. It is also important that the research not compromise the unit's current mission, including requiring a major portion of training time.

In addition to ensuring that a research study does not impact a unit's mission directly, it must also not subvert the mission by undermining morale. Soldiers must believe in their command and in what they are doing to maintain the grueling operational tempo required to be ready to fight at a moment's notice. As a result, commanders may be wary about external investigators conducting, and then disseminating research that could undermine the morale of a unit or the entire Army (Ben-Ari & Levy, 2014). For example, if a unit is routinely told during research interviews that they should be stressed in the context of their mission, they might start to falsely report increased levels of stress.

Army officials may also be concerned that reporting research findings may threaten individual careers. For example, if an outside investigator is conducting research that could indirectly (e.g., findings of low work satisfaction or unit cohesion) or directly (e.g., finding of low trust in leadership) reflect poorly on military leadership, there may be concern about negative effects on career advancement or promotion (Ben-Ari & Levy, 2014; McCarroll, Jaccard, & Radke, 1994).

Military research is often conducted by civilian researchers working outside of the Department of Defense at the behest of the Army, rather than at the request of a researcher or research group. In these situations, the expectation of the Army is usually that the research will have an immediately beneficial effect by providing deliverable products. For instance, actionable recommendations, which may include policy implications (e. g., guidance as to which sub-populations of soldiers should be monitored by the military more closely to reduce the number of suicide attempts). In these situations, it is important to know *who* is asking the question and ensuring that the answer is given to that person first before to a journal or other public media.

In recognition of the fact that certain topics of research have a profound and direct impact on mission success, the Army has its own inhouse research arms for behavioral and health research such as the Walter Reed Army Institute of Research and the Army Research Institute for the Behavioral and Social Sciences, among others. Researchers would be wise to understand what research is already being accomplished by the Army, not only to improve their own alignment with Army priorities, but also to reduce the likelihood of duplicating efforts. The U.S. Army Medical Research and Material Command (USAMRMC) and Military Operational Medicine Research Program (MOMRP) can provide guidance to civilian researchers on current priorities in behavioral health research within the Army. Additionally, similar to research in the civilian world, a budding researcher might also consider contacting the authors of completed research related to an area of interest to access what is available and being currently conducted.

Legitimacy of the Researcher

Another consideration is the perceived legitimacy of the investigators. While it is a common practice to collaborate with an active-duty scientist or sponsor to establish legitimacy, it is important for all civilian researchers to understand how Army commanders may view them. Whereas impressive credentials, altruistic aims, or intriguing scientific questions may sway civilian institutions, these points are often superfluous to com-

manders. In a culture defined by function and status, little accord is given to researchers who are ill prepared, late, or aloof. Commanders continuously assess a researcher's competence as someone to be allowed into their unit or community. This is not to be confused with a need to give the perception that the researcher is somehow part of the Army. The researcher needs to show competence as a researcher, but also show respect for the Army. For example, engaging in quasi-military behavior (using language from movies and wearing similar clothing) is more likely to do harm than good.

Army commanders may, however, question the knowledge base of researchers regarding Army culture and organization (Ben-Ari & Levy, 2014). This should not be considered an insult, but rather an opportunity for both to learn more, the researcher about the unit and the commander about the research. Commanders may indeed be appropriately concerned that results will be misinterpreted or misused if the researcher lacks familiarity with the Army. Respond to questions honestly and use a language they can understand (i.e., know your audience). It is potentially damaging to the researcher-command relationship if the researcher communicates using scientific jargon and unnecessarily complicated descriptions of the study design/aims. Should the opposite occur, and a commander engage in "Army speak," asking what they mean is an excellent way to demonstrate interest.

A Commander's Obligations to Soldiers

Consider the commander's obligation to the Army and to their unit. Commanders train, equip, support, and protect soldiers in order to enable them to complete dangerous missions. Soldiers have volunteered to serve the United States. Any hint that a research protocol might unnecessarily put a soldier at risk of harm would be an affront to the relationship between a commander and soldiers. As such, it is essential to keep command involved in the design and progress of your research study; again, ensuring that they understand the study using language that makes sense to them. Similar to the role of an institutional review board (IRB), the command is charged with ensuring the safety of any soldier participants. To this end, researchers should be prepared to answer whether the research they are proposing could be completed outside the military.

Similar to the ethical status given to children or inmates in research protocols, military status confers a level of vulnerability. Thus, research in the military that could be completed in a non-vulnerable civilian population is unlikely to obtain approval by commanders and/or military IRBs (McManus, McClinton, Gerhardt, & Morris, 2007). Demonstrating how

research is specific to the Army and/or will benefit unit readiness in general terms are key considerations for the researcher to be aware of when talking to unit commanders.

Pragmatics

TABLE 1. Overview of Pragmatics

Boundaries

- Focus on research
- Maintain role
- Direct communication
- Transparency in research procedures

Coordination

- Obtain required approvals
- Establish primary POC in unit
- Dovetail research with unit operations
- Keep POC and commander informed
- Follow-up after completion of data collection

Confidentiality

- Describe confidentiality protection procedures
- Assure voluntary participation

Boundaries

All research teams must establish that their role is solely to conduct their specified research with an Army unit. Otherwise, there can be a misunderstanding of the function of the research team. For example, if the principal investigators also happen to have clinical degrees (i.e., psychiatrists, clinical psychologists, or social workers), there may be attempts by soldiers/commanders to engage the researchers about concerns of a clinical nature that are not directly related to the research task at hand. The potential for role confusion can be even more significant if there is an ongoing event or stressor in the unit that appears to fall within the researcher's area of expertise. For example, military officials may expect mental health researchers to engage in crisis counseling or other therapeutic interventions if a suicide or other serious incident has recently taken place. Thus, the importance of clear roles and boundaries is paramount for the research team in order to complete the study efficiently and to maintain good relationships with military officials. Of

14

course, if general consultation (not related to a specific individual) is within the purview of the researchers, and there is time available while still completing the research in a timely manner, this may be undertaken in a limited capacity if requested by military officials.

Coordination

The research team must go through the appropriate channels to have research protocols approved. Gaining approval for human subjects research from a military institution can be a longer process than for many civilian IRBs, with upwards to an additional six months required for approval (and often longer). This expectation should be built into the research timeline. A primary contact within the unit should be consulted during the preparation of the research protocol before IRB approval, in order to ensure that a specific locale for data collection has been identified, a suitable comparison group matched for variables such as military rank and proportion of enlisted personnel has been chosen (if appropriate), a reasonable timeline has been established, and that all other details of the research plan are feasible within the military context. In particular, attention should be given to how data collection will be conducted without overly interfering with missions or the unit's training schedule. Some disruption to the unit's daily activities is unavoidable when conducting research, but this should be kept to a minimum. Once permission to conduct research has been secured from the military chain of command and the IRB, the research process can begin in earnest.

Once active data collection is underway, there should be frequent communication with the primary unit contact in order to troubleshoot any logistical difficulties that arise and to keep the commander aware of progress towards data collection goals. After data collection is complete, there should be at least one follow-up visit in order to present some findings to the commander when this is feasible. In addition, the research team will have to follow institutional guidelines in terms of gaining permission to publish any findings related to military research. Typically, this entails review and approval of any study-related manuscripts or presentations by the researcher's organization, but usually not by the military unit in which the research was conducted.

Confidentiality

The research plan will describe how participant confidentiality and the voluntary nature of study participation will be maintained. Participants may worry about possible negative effects on their career or relationships with other soldiers, particularly if mental health is being studied

and they are concerned about stigma. Reassuring soldiers of their confidentiality is important from the outset. This may encourage them to be more honest when providing mental health-related data (Fear, Seddon, Jones, Greenberg, & Wessley, 2012; Warner et al., 2011). Confidentiality can also be protected through research in which participant information is anonymous. There are methods, such as the use of participant codes, to protect confidentiality without requiring names or social security numbers. Perceived coercion can be of particular concern for military personnel. Examples include coercion to participate and to answer questions in a certain way. Working with command directly on these concerns is paramount. A researcher may also explicitly state in the research plan that military leadership will not have access to study data for any individual soldiers or be allowed to provide guidance to soldiers on any of the study components.

Conclusion

Conducting research in the military is an important endeavor. Important questions related to the military require well-designed studies. The success of such research is heavily dependent on the researcher's understanding of the priorities and concerns of the Army unit. Coordinating with command helps to ensure that the research will indeed help the Army and not compromise the unit's mission or harm personnel. By demonstrating Army cultural competence, setting boundaries, and maintaining transparency and confidentiality, a research protocol is more likely to succeed.

Thinking it Through

- 1. How does your research fit into the military mission? Is the research specific to the Army? Does it need to be accomplished in an Army population, or could it be accomplished outside the Army?
- 2. What are the concerns of the military command related to your research? In what way will your research impact the mission or the unit's readiness?
- 3. Will this research be perceived by the unit as negatively impacting soldiers? How will you address this perception?

CHAPTER 3

Army Jobs: Cultures and Subcultures

Key Points

- The U.S. Army has many different subcultures, many of which are defined by work.
- 2. The career field is often a powerful source of pride and prestige. Part of a soldier's identity is their ability to do their job.
- 3. Inquire about a soldier's occupation, its impact on their career and life, and recognize that they often have had more than one job.

Background

The Army is a complex organization requiring many different functions to meet its goals. Such functions are accomplished by organizations including many different occupations. (See Chapter 4, U.S. Army Structure.) Each occupation exists in a career field (for example, the infantry) and is classified by duties and responsibilities, which increase as the soldier progressively achieves higher ranks. Occupations are denoted by the term military occupational specialty or MOS. A variety of occupations exist in military organizations (informally referred to as units) in such a way to provide the best structure to accomplish the unit's mission. Soldiers can obtain their MOS through several routes. Prior to enlistment, the Armed Forces Qualification Test (AFQT), an aptitude test, is taken by the applicant. The score then can be used in the process of selection of the MOS by the soldier guided by the Army recruiter. Depending on the AFQT score, the applicant can choose an MOS if the MOS has openings at the time of enlistment. If the applicant does not have the qualifications or the MOS is full, the applicant can be involuntarily given another MOS.

In the most general terms, Army career fields are grouped into one of three major categories that support the Army's mission to engage and defeat the enemy on the battlefield: the combat arms, combat support, and combat service support. Each of which will be described below. This chapter also describes the functions of several common MOSs as well as one that has a unique and specialized function within the Army, mortuary affairs.

18

There are many influences in a soldier's life and career that can be attributed to Army culture in general and specific subcultures. The soldier's career field is one of these subcultures. Largely, soldiers in each career field undergo the same training and have the same mission and equipment. The career field is often a powerful source of pride and prestige; however, there are hierarchies of prestige as recognized by other soldiers and by the individual soldier. Examples are units with a long combat history and the number of awards given to the unit and to individual soldiers For example, those whose mission is combat often look upon themselves as superior to personnel in support units.

Army Functional Areas

Army functional areas (Table 1) can be described by the branches of the Army. Many of these branches have functions in more than one area. For example, engineers can perform as a combat arm through building field fortifications, route clearing, and placing and detonating explosives. Engineers can also perform combat support through movement of friendly troops (building bridges) and hindering the movement of enemy troops (blowing up bridges). Civil engineers perform combat service support with construction of supporting facilities. Similarly, aviation has a combat role with attack helicopters, a combat support role with ferrying ammunition and other supplies to the battlefield, and a combat service support role in performing air evacuation and troop movements. Again, while this multiplicity exists for many of the functional areas, for clarity only the dominant role for each branch is described.

Combat Arms

Combat arms branches of the Army are directly involved in combat. These branches are the infantry, armor, field artillery, air defense artillery, aviation, engineers, and special operations forces. The mission of all combat forces is to destroy the enemy. This is conducted through reconnaissance (searching for the enemy), seizing and holding terrain, and conducting combat operations. Within the combat arms, the Army classifies units as heavy, light, or special operations forces. Heavy forces consist of armor (tanks and armored vehicles), armored cavalry (reconnaissance), and mechanized infantry (movement by vehicles such as trucks and armored personnel carriers). Light forces include infantry and airborne infantry, which usually operate on foot. Light forces are more mobile, but they are less protected. Soldiers within special operations forces are uniquely trained to achieve military, diplomatic, economic, or psychological objectives, often by unconventional means. Their missions also

TABLE 1: Army Functional Areas

Combat Arms

- Infantry
- Armor
- Aviation
- Field Artillery
- Air Defense Artillery
- Combat Engineers
- Special Forces

Combat Support Engineers

- Aviation
- Engineers
- Chemical Corps
- Military Police
- Signal Corps
- Civil Affairs
- Psychological Operations
- Military Intelligence

Combat Service Support Aviation

- Logistics
- Adjutant General
- Acquisition Corps
- Financial Management
- Judge Advocate General Corps
- Chaplain Corps
- Army Medical Department

include counterterrorism, counter-proliferation, and special reconnaissance operations.

Combat Support

Combat support of the Army consists of many different functions that help to support combat operations while not usually engaging directly with the enemy. Among these are aviation, chemical defense, engineers, military intelligence, military police, signal, and special operations forces. Little other than the mission of supporting combat ties these disparate specialty areas together.

Combat Service Support

The primary role of combat service support (also referred to as sustainment) is to support all Army forces through a very wide variety of largely logistic functions. Occupational paths within the combat service support branches are largely in the Quartermaster Corps, a branch of the Army that includes such functions as general supply, food service, field services such as water, sanitation, laundry, bath, shower, and clothing repair, mortuary affairs, fuel and petroleum supply, and fuel delivery through pipelines and tanker trucks. In addition to the missions of the Quartermaster Corps, other combat service support functions include ordnance (munitions and equipment such as weapons), legal, medical, transportation, finance, chaplaincy, and adjutant general functions (largely human resources support like pay and assignments).

Military Occupational Specialties

The MOS is an alpha-numeric character system that classifies the field of work, special skills, and the leadership level of the individual. While there are several codes for the MOS, usually only the first three characters are commonly specified when describing a soldier's occupation. An example is the infantryman, who is identified by the MOS code 11B, informally referred to as "11 Bravo." (Bravo stands for the letter b in the phonetic alphabet that is used by the military, commercial aviation, and other fields internationally.)

The following are examples of some of the duties of soldiers in selected combat arms (infantry and engineers), combat support (military police), and combat service support (medics, motor transportation operators, and mortuary affairs) MOSs.

Infantry

The infantry is the branch of the Army whose mission is to engage and defeat the enemy at close range. There are many MOSs for infantry soldiers, but the most common is the 11B. The infantry is the backbone of the Army. Infantrymen can engage in combat on foot, via mechanized transport, by air, and by amphibious landing. They often maneuver in terrain that is inaccessible to ground-level military vehicles and thus may be airlifted or enter the combat area by parachute. They may be involved in a number of different operations, including attack, defense, patrol, escort, construction, and raid/hostage rescue. During *attack* operations, in addition to engaging enemy forces, infantrymen are traditionally charged with securing a target, which could be a bridge crossing, a hill, or a city. During *defense*, the mission is to defend a target (which may include

important terrain and/or constructed fortifications), and defeat enemy forces attempting to capture it. *Patrol*, the most common type of infantry operation, consists of small groups of infantry moving in areas in which enemy activity is suspected or has been detected. Patrols can have many purposes, including security, reconnaissance, combat, terrain mapping, and special operations. *Escort* operations involve protecting combat support units from ambush. When escorting armored vehicles, the infantry conducts patrols by scouring terrain, which may conceal enemy forces waiting to ambush friendly vehicles, and by identifying enemy strong points as potential targets for attack by heavier units or aircraft. Civil engineers normally perform construction operations. However, other soldiers, such as infantry, may be required to perform light construction when engineers are not available. Finally, during *raid/hostage* operations, infantry units are trained to quickly mobilize, infiltrate, and neutralize enemy forces in order to secure a location, or rescue or capture high profile targets, as combat intelligence dictates.

Infantry training is more physically demanding than any other branch of combat arms. It emphasizes teamwork, discipline, and the application of sustained aggression against the enemy. Day-to-day infantry operations typically involve carrying heavy loads, performing long foot or vehicle patrols, enduring inhospitable climates with temperature extremes, and frequent or constant exposure to enemy forces. As a result of combat operations and all of the other factors, they tend to suffer larger numbers of casualties than soldiers in other career fields. These frequent stressors, along with increased risk of death and injury both for themselves and fellow soldiers, add to the psychological burden for those employed in infantry operations. They tend to be at high risk for posttraumatic stress reactions, suicidality, and other mental health concerns relative to those in other military occupations (Kok, Herrell, Thomas, & Hoge, 2012; Sundin, Fear, Iversen, Rona, & Wessely, 2010; Trofimovich, Reger, Luxton, & Oetjen-Gerdes, 2013).

Combat Engineers

Combat engineers, also known as *sappers*, support infantry units and are responsible for both construction and demolition of fighting and defensive positions, building bridges, and clearing obstacles (e.g., improvised explosive devices [IEDs]). They are also required to place and detonate explosives when necessary, and to identify mines visually or with mine detectors. There can be high levels of daily stress, as combat engineers must maintain constant vigilance while searching for and clearing routes of IEDs when outside the perimeter fence of a camp while some-

times simultaneously taking fire from the enemy. If under attack, combat engineers help support infantry during a firefight.

Military Police

Military police (MPs) perform many of the same duties as civilian police, including enforcement of laws and regulations on Army installations. In both garrison and deployed environments, they prevent crime, control traffic, and respond to emergencies. In particular, their responsibilities include patrols, controlling access to installations by checking identification and ensuring that only authorized individuals are allowed to enter, participating in criminal investigations in which they interview victims, suspects, and witnesses, and arresting and charging suspects. MPs are also called upon to fight as infantry when required. In non-deployed environments, military police are also subject to the same risks as civilian police such as being assaulted or killed on the job.

Combat Medics

Combat medics are trained and serve as both soldiers and as health-care providers (Pappas, 2001). Combat medics are trained to a proficiency equal to emergency medical technician (EMT) or greater during 16 weeks of Advanced Individual Training (AIT) (See Chapter 5, U.S. Army Training). They provide emergency medical treatment, limited primary care, assistance with evacuation of injured soldiers, and are responsible for maintaining medical vehicles in the field. Combat medics are also frequently exposed to combat. For example, they can go on combat patrols where they may receive incoming fire, work in areas known to contain IEDs, and be attacked or ambushed (Chapman et al., 2012; Elnitsky et al., 2013). Medics carry weapons with which they can defend injured soldiers from further harm. Little is known about how straddling these dual roles protects from, or makes combat medics vulnerable to, stress reactions.

Motor Transport Operators

Motor transport operators drive or supervise the operation of vehicles that transport military personnel or cargo. They load and unload cargo, manage the safety of transported personnel, employ convoy defense techniques as appropriate, identify and correct or report any problems with vehicles, and prepare vehicles for movement by air, rail, or sea. During the conflicts in Iraq and Afghanistan, attacks with IEDs (see Chapter 6) have frequently targeted convoys and represent a common hazard to drivers during deployment. Convoys hit by IEDs are at risk for further

attack by small arms fire or rocket-propelled grenades. In addition, suicide bombers driving explosive-filled vehicles (vehicle-born explosive devices, or VBEDs) are also a risk during convoys.

Mortuary Affairs

Care of the dead is the responsibility of the Army's Quartermaster Corps. The soldiers who perform this mission are in the career field of mortuary affairs (MA). Their mission is to care for the remains of deceased military personnel and prepare them for return to their families. It is a very small career field. There are two active duty MA companies and two Army reserve companies. There are also Army reserve detachments in the Pacific region and a company that is responsible for processing the personal effects of the dead at the Joint Personal Effects Depot (JPED) at the Dover Air Force Base Port Mortuary. Unlike many other Army occupational specialties, such as the infantry, in which soldiers can be involuntarily enlisted, soldiers must volunteer to be in MA.

Enlisted soldiers in MA attend an eight week advanced individual training (AIT) following basic training. In AIT they learn how to process the remains brought to collection points from the battlefield or other sites of death, search and recover the dead and locate unmarked graves; disinter remains; decontaminate remains; collect, inventory, and safeguard personal effects of the deceased; establish and record tentative identification; and prepare remains and personal effects for shipment to the U.S. for autopsy, if necessary, and final identification. Training includes classroom instruction as well as field experiences, such as trips to morgues, to expose trainees to work with the dead.

After training, MA soldiers may be assigned to missions in disparate locations worldwide in peacetime as well as during armed conflicts. During war, MA soldiers operate collection points to handle the remains of American forces, their allies, civilians, and, in some circumstances, remains of the enemy. Some will work at the Dover Air Force Base Port Mortuary where the remains of service members undergo autopsy and final preparation for return to the family. Other MA soldiers will perform search and recovery missions in Europe and Asia to retrieve remains of service members killed in previous conflicts, including World Wars I and II, Korea, and Vietnam. In addition, they periodically deploy to mass fatality situations. These have included Hurricane Katrina, the Pentagon after the 9/11 attacks, and the 2010 earthquake in Haiti, among others. MA soldiers are also assigned to staff positions at the brigade or division level to advise the command on issues related to mortuary affairs.

Working conditions for MA soldiers are typically less than ideal and

may take place in dangerous environments. Soldier deaths are often violent and the physical characteristics of the remains may be gruesome and difficult to tolerate. Remains may be burned, mutilated, dismembered, or decomposed, and the smells associated with death can be overwhelming, permeating hair and clothes. Physical risks to the MA soldiers may also be present as the remains may be booby-trapped or carry disease.

MA soldiers may experience grief over the loss of the service member or the impact it has on the deceased service member's loved ones. As a means of emotional survival, MA soldiers are encouraged to avoid identifying with the deceased (Flynn, McCarroll, & Biggs, 2015). This can be challenging as the deceased may wear the same uniform as the MA soldier, be of similar age, or share other common characteristics. Work with the remains of women, children, or others who have a resemblance to the MA soldier's family or friends can be particularly difficult. Efforts to avoid identifying with the remains can break down during inventory of the deceased's personal effects (e.g., when reviewing letters and pictures from the deceased's loved ones), or when interacting with the deceased's family or unit members. Therefore, self-care and social support are especially important for individuals working in MA.

Conclusion

The U.S. Army has many occupations (MOSs) organized into combat arms, combat support, and combat service support. A general familiarity with the types of common career paths within an MOS, along with an understanding of the duties, occupational stressors, and mission of each, will be helpful to researchers and clinicians who are new to working with soldiers.

Thinking it Through

- How does your career influence the way you view an illness or personal challenges experienced by you or your family member?
- 2. How might different jobs influence the way a soldier views illness or handles stress? For example, how might being responsible for packing parachutes for others influence a soldier's view of control?
- 3. If a soldier identifies with their specific job (infantry, artillery, medical, etc) more than with the Army as a whole, how might that influence their perception of being ill, receiving care, or of participating in research?

CHAPTER 4

U.S. Army Structure: Organization, Ranks, and Responsibilities

Key Points

- Organization and rank define a soldier's position and status in the Army. These factors can help the researcher understand events in the soldier's career.
- 2. Knowing a unit's command structure and its staff is essential to understanding how a unit functions and how that could affect research.
- When conducting research that includes a wide variety of missions and functions, it is important to understand how large-scale commands operate.

Background

The first task in attempting to understand the Army begins with knowledge of its organizational structure. A soldier belongs to many organizations. A soldier will typically belong to a squad, a platoon, a company, a battalion, a brigade, a division, and a higher echelon. The Army includes active duty soldiers (Active Component), members of the Army Reserve and Army National Guard (Reserve Component), and supporting civilian personnel who work alongside military personnel. The regular Army (active duty) component is the largest force of the U.S. military services. As of 2014, it consisted of 504,330 soldiers. The Army National Guard consisted of 354,072 and the Army Reserve was 195,438 (http://www.armyg1.army.mil/HR/demographics.asp). There were approximately 800,000 Army family members. A total of 63.8% of Army soldiers reported family responsibilities: 35% had a spouse, 64% had children, and about 1% had an adult dependent.

The Army functions as a team that includes the individual, the family, and the military organization (usually known as "the unit"). Each unit has its own culture that is based on the mission, the leadership, and the personnel in the unit. In addition to the unit's mission, the leader influences

the culture of the unit. Companies within the same battalion (and battalions within brigades) can have markedly different characteristics based on the leadership style of the commander such that soldiers' daily experiences can differ markedly. For example, one commander may emphasize discipline and another physical fitness. Subcultures also exist within the ranks. For example, lower enlisted personnel will have similar duties and responsibilities that are distinct from those of higher rank. When a soldier is promoted from a lower enlisted rank to a non-commissioned officer (NCO), that person will often assume leadership over those with whom there was a previously equal relationship based on rank. NCOs have their own culture. While both officers and NCOs lead soldiers, they differ on a variety of levels such as education, time in service, and level of authority. These dissimilarities may be viewed as the foundation of separate subcultures in the Army. The researcher is encouraged to learn as much as possible about the unit, which often requires face-to-face contact with lower enlisted soldiers, NCOs, and officers. Such knowledge is beneficial not only in the design of research; it also can lead to better interpretation of qualitative and quantitative information.

Soldiers and Their Ranks

There are three major classifications of Army personnel, divided by rank and responsibility: enlisted personnel (lower enlisted and NCOs), warrant officers, and commissioned officers. (See Appendix C for descriptions of the responsibilities of each rank.) Ranks and insignia for all U.S. military services are found at http://www.defense.gov/About-DoD/ Insignias_[Accessed 12 December 2016]. Every Army rank is expressed by two or three characters, combinations of letters and numbers. Each rank is also associated with a pay grade. While soldiers are usually addressed by their rank, pay grades are also discussed, particularly when referring to unit structures. For example, a sergeant has the pay grade of E5.

Hierarchical Army Organizations

Fire Team

The basic building block of the infantry is the fire team. It usually consists of four or five soldiers who function as a unit in combat or other operations and duties. They can also serve in crews that serve weapons such as artillery and crews manning combat vehicles such as tanks. Fire teams are typically led by a corporal (E2) or a sergeant (E5).

Squad

The squad consists of approximately 10 soldiers and is ordinarily led by

TABLE 1: Overview of Army Hierarchy

- Fire Team
- Squad
- Platoon
- Company
- Battalion
- Brigade
- Division
- Corps
- Army
- Army Group

a lower ranking NCO, usually a staff sergeant (E6). Squads form platoons.

Platoon

A platoon usually consists of four squads, with a total of about 40 people, although the size varies depending on the type of unit. It is the most junior Army organization led by an officer, a lieutenant (O1 or O2), who is the platoon leader. The platoon leader is not a commander, but functions under the supervision of the company commander. Each platoon has an NCO platoon sergeant, usually a sergeant first class (SFC/E7). A platoon is a basic organization in which soldiers will all know each other and work together. Soldiers in one platoon may or may not know soldiers in other platoons, particularly soldiers who are new to the unit. Platoons form companies.

Company

Three to five platoons and a headquarters section form a company. A company is commanded by a captain (O3). It is the first level at which a commander has jurisdictional authority over soldiers. Companies vary greatly in size depending on the mission. They can include 60 to 200 soldiers or more. The senior NCO at the company level is the first sergeant (1SG/E8). At the platoon and company level, NCOs usually have longer times in the Army than most lieutenants and captains. The1SG and the platoon sergeants are major resources for the commander as well as for the platoon leaders. (NCOs are major supports for the commander at all organizational levels in the Army.) As a result of their experience, good NCOs are highly valued. Companies can also be called batteries (in the field artillery) or troops (for a cavalry company). The higher headquarters for the company is the battalion. Companies form battalions.

Battalion

A battalion is a major fighting force, typically consisting of approximately 750 soldiers. It is usually composed of four to six companies plus a head-quarters element and is commanded by a lieutenant colonel (LTC/O5), an experienced officer with usually at least 10–15 years of Army experience. The major NCO for a battalion is the command sergeant major (CSM/E9), a very powerful position and the pinnacle of an enlisted soldier's career. The CSM does not command, but leads through many roles in the battalion such as giving advice to the commander and other officers and NCOs. Other major roles of the CSM are being involved in the training, equipping, and caring for the welfare of the (primarily enlisted) personnel of the unit. The structure of a battalion can vary greatly. It usually has its own built-in support with four staff officer positions: personnel, intelligence, operations, and logistics. In some cases, additional staff officers are assigned based on the mission of the battalion. Battalions form brigades.

Brigade

A brigade is usually composed of three to six battalions and contains approximately 3,900 to 4,100 soldiers. It is commanded by a Colonel (COL/O6) and, as with the battalion, has a command sergeant major (CSM/E9) as the commander's NCO advisor. The CSM is the main link between the Colonel and the enlisted personnel of the brigade, battalions, and companies. Brigades are structured as brigade combat teams (BCTs). The BCT is the major deployable U.S. combat force. It can be deployed independently as a self-supporting organization or as part of a division. Operating independently, in addition to combat forces, it has its own logistical support. Brigades form divisions.

Division

An Army division is a command and control organization consisting of a headquarters and brigade combat teams (BCTs) as well as support organizations. It is commanded by a Major General (MG/2 stars) and has a large headquarters staff. BCTs can operate independently from other BCTs within the division or collaboratively. This type of structure improves the division's tactical ability to respond to immediate threats. Divisions form corps.

Corps

Like the division, an Army corps is a command and control organization. In times of large-scale war, such as World War II, it was deployed as a very large combat organization commanding divisions. However, in modern warfare, which consists largely of small unit actions, its role is to manage the organizations (divisions and brigade combat teams) under its command. It is commanded by a Lieutenant General (LTG/O9, three stars) and has a large headquarters staff. Corps form field Armies.

Army

Historically, a theater army has been the Army component in a unified command (see below) with both combat and support capabilities. An Army is commanded by a General (GEN/O10, four stars). An example of an Army from World War II is the U.S. Third Army, which was commanded by General George Patton. However, distinguish between an army and the entire U.S. Army. An army (such as the 3rd Army) is an existing organization whereas the U.S. Army consists of all personnel in all active and reserve components. The final Army organization discussed is the Army Group.

Army Group

Historically, an army group consists of more than one U.S. army and usually armies from allied countries. It is employed for large scale, long duration conflicts such as World War II. It is commanded by a General (GEN/O10, four stars). The last deployed army groups were in World War II: the Sixth and Twelfth United States Army Groups, and the Fifteenth Army Group. The Twelfth Army Group was the largest U.S. Army formation to ever take the field, 1.3 million personnel. It was commanded by General Omar Bradley.

Army Staff Organization *Company and Battalion Staff*

At each level of command in the Army, from the company to the armies that fight wars, there exists a staff to assist the commander in carrying out the mission. Officers will spend more time in staff positions than in command. The company commander will have an executive officer as well as enlisted personnel in staff positions. The first level at which a formal staff exists is the battalion although a less formal staff exists at company level to handle matters of personnel, operations, supply, training, and other functions. A battalion typically has four staff officers whose positions are designated by numbers preceded by a letter, 1–4: S1-Personnel, S2-Intelligence, S3-Operations and Training, and S4-Logistics. The same staff functions exist at brigade level, but an S5-Civil-Military Operations and other staff may be assigned.

Division Staff

At higher levels of command, the four functions that define battalions remain, but additional staff officers are required. At the division level, staff officers are designated by a "G" (for general staff) for functions in addition to the G1, G2, G3, and G4. The additional staff elements are: G5-Civil-Military Operations; G6-Command, Control, Communications, and Computer Operations; G7-Information Operations Officer; and G8-Resources Management. Commands can designate additional staff officers based on their mission. At the division and higher levels, commanders also have a personal staff that consists of the chaplain, judge advocate, CSM, aide(s), and the public affairs officer.

Army Staff

At the Department of the Army level, there are many more staff elements that function under the direction of the Office of the Chief of Staff of the Army. These are designated as Assistant Chiefs of Staff by function. There are also many more staff elements under the direction of the Director of the Army Staff, who is responsible for integrating and synchronizing the work of the Office of the Secretary of the Army and the Army Staff. The Director reports directly to the Army Chief of Staff.

Large Scale Army Commands

The highest levels of Army commands exist to perform various functions such as combat, training, management of personnel, resources, acquisitions, planning, and other activities as required by the current Army structure and organization. Most of these commands are called field operating activities and come under the direction of an element of the Army staff. Elements can change depending on operational and political priorities like budgets.

Training and Fighting Commands

The two major commands that contain the largest number of military personnel are the Forces Command (FORSCOM) (http://www.forscom. army.mil/ accessed 25 July 2016) and the Training and Doctrine Command (TRADOC) (http://www.tradoc.army.mil/ accessed 25 July 2016). The FORSCOM commands the Army fighting forces stationed at U.S. installations and keeps them ready for deployment. Its mission also includes the ability to plan and deploy Army Reserve and Army National Guard forces, when required. The FORSCOM headquarters is at Fort Bragg, North Carolina. The TRADOC commands and manages all training elements in the Army from initial entry training to the most senior Army service colleges (See Chapter 5, U. S. Army Training). Its headquarters is at Fort Eustis, Virginia.

The Army Materiel Command (AMC)

The Army Materiel Command (http://www.amc.army.mil accessed 25 July 2016) is responsible for all Army logistics on a global basis. Its job is materiel readiness — equipping, sustaining and enabling the warfighter through technology, acquisition support, materiel development and logistics power projection across the spectrum of joint military operations. If a soldier drives it, flies it, wears it, shoots it, communicates with it, or eats it, AMC provides it. The AMC responds to the needs of today's war fighters, but also anticipates the future and provides advanced equipment and materiel. Its headquarters is at Redstone Arsenal, Alabama.

Large Scale Combatant Commands Unified Commands

Unified commands contain U.S. forces of at least two military departments (e.g., the U.S. Army and the U.S. Navy) and may include the forces of nations other than the U.S. An example is the Northern Command that has responsibility for Army operations concerning the U.S., Canada, and Mexico. Its mission is to provide military support for civil authorities in the U.S. and to protect the territory and national interests within the contiguous United States, Alaska, Puerto Rico, Canada, and Mexico, and the air, land, and sea approaches to these areas.

Combined Forces Commands

Combined forces commands consist of U.S. forces and those of other nations. The Republic of Korea/Combined U.S. Forces Command is an example of a combined forces command (http://www.usfk.mil/). It has a combined operational planning staff, developed in 1968 as an adjunct to the United Nations Command/United States Forces Korea/ Eighth United States Army Headquarters.

Conclusion

Research, clinical practice, consulting, and otherwise interacting with members of the Army and Army veterans will be facilitated by understanding how the Army is structured. Even though soldiers wear the same uniform, there are vast differences in experience, duties, and responsibilities that vary by organization. Rank determines the level of responsibility, the career field determines the job, and experience and training determine the qualifications and ability of the individual soldier.

The Army works as a team, an approach that forms the basis of all training as well as the functioning of the overall organization. At the lowest level of Army organization, a leader is generally in charge of about five people. Through the Army hierarchy, organizations increase in size as enumerated above. For example, in World War II, the Twelfth U.S. Army Group was the largest and most powerful U. S. Army formation ever to take to the field, over 1.3 million personnel.

Army organizations from the level of the company and higher have a commander and a staff. As the organization grows larger, so does the staff. However, the most basic functions are contained in four separate staffs: personnel, intelligence, operations, and logistics. From that basic level, more elements can be added as the size of the command increases. Examples are communications, civil-military affairs, and resource management.

Army commands are also organized by function: training, combat, materiel, and support including medical, finance, and other personnel functions. In worldwide operations, the Army carries out its missions in combination with other U.S. military services and with the services of other nations. U.S. organizations that support such missions are arranged geographically over the globe.

Thinking it Through

- 1. At what level of assignment and functioning are the soldiers participating in your research at — are they junior enlisted, senior enlisted (NCOs), officers, or all ranks? Are you dealing with a company or something larger? Why might this matter?
- 2. When someone says, "The Army did..." what do they mean by "The Army"?
- 3. How could your relationship to the commander (due to requesting permission to conduct the study) impact the way soldiers view you? Could it change the way you view them?

CHAPTER 5

U.S. Army Training

Key Points

- 1. Training in the Army spans a wide range, from specific job training at lower ranks to preparation for leadership and command at higher ranks.
- 2. Formal training is required for promotion and is viewed as a reward for success.
- 3. Many training programs involve field training as opposed to class-room training, are notoriously rigorous, and provide a rite of passage for graduates.

Background

At a time when only 29% of 17-24 year olds would qualify for military service, and even fewer (1%) are actually serving, few can explain the experience of military training. Short of prolonged deployments, soldiers spend the majority of their time training. Army training gives soldiers skills that set them apart and inculcates a culture specific to their career field. This chapter will not discuss technical skills, but will emphasize the nature of the cultural conditioning that occurs beginning with initial entry training (IET) and more advanced and specialized skill training (Pietrzak, Johnson, Goldstein, Malley, & Southwick, 2009). IET is training of new enlistees. It includes basic combat training (BCT) and advanced individual training (AIT), the completion of which entitles the soldier to a career classification, the military occupational specialty, or MOS (see Chapter 3 and below in this chapter for more discussion of the MOS). Belonging to the Army (and any military service) encourages the development of an identity. Important aspects of IET are learning to work as a team and to identify with Army values (see Tables 1 and 2). Some Army organizations require additional levels of skill training, which continues to develop a soldier's identity. An example is the training of the airborne infantry soldier. Following IET, the soldier undergoes parachute training and can subsequently be assigned to an airborne infantry unit. Often, that identity stays with a soldier for the length of their career and as a veteran. As a soldier aspires to more skill and more status, additional training may be requested. The more rigorous the training, the more special the cultural context based on what is often considered an elite status compared to soldiers who have not achieved this level of training and skill. In addition to airborne training, other trainings such as Army ranger training, special operations, diving, and others carry a special identifying badge or tab for the uniform.

The level and type of skills acquired through a short or long career are part of a soldier's identity. Those factors determine where that soldier will be assigned, the types of duties expected, and the association with other soldiers that form the basis of support for the individual as well as the soldier's family. Failure to complete training and subsequently adopt the behaviors of the culture into which the soldier has been placed is a severe limitation on the ability to function, to advance, and even to continue in the Army.

Training and the Development of an Identity that Fits the Culture

Training prepares the soldier for the job, but is also the key element in developing an Army identity. BCT takes 10 weeks to complete and consists of long days of classroom and field training, Monday through Saturday. Major topics of BCT are combat skills, teamwork, and personal care. Identity development is also built through emphasis on Army values (Table 1).

Training for the Job

Training for all Army personnel (enlisted, warrant officers, and officers) is managed by the Training and Doctrine Command (TRADOC) (http://www.tradoc.army.mil/ accessed 25 July 2016). This is a high-level Army organization commanded by a 4-star general. TRADOC manages all training from the initial entry training to high-level staff colleges (e.g., the Army War College).

An individual who joins the Army is recruited for a specific job, called a military occupational specialty or MOS (see Chapter 3, U.S. Army Jobs). Training has to take into account the abilities of the soldier. Classification tests are given to evaluate abilities, but the match between abilities and interests is not always met. For example, a soldier may want a particular job, but may not qualify for it based on the requirements for the job including the level of achievement on the classification tests.

Depending on the specific capacity in which the individual serves, training can be extended or brief. MOS training for most enlisted personnel is for a few weeks or months, depending on the level of skill need-

TABLE 1. Army Core Values

(http://www.army.mil/values/ accessed 25 July 2016)

- Loyalty Bear true faith and allegiance to the U.S. Constitution, the U.S. Army, your unit, and other soldiers.
- **Duty** Fulfill your obligations.
- **Respect** Treat people as they should be treated.
- Selfless Service Put the welfare of the nation, the U.S. Army, and your subordinates before your own.
- **Honor** Live up to U.S. Army values.
- Integrity Do what's right, legally and morally
- Personal Courage Face fear, danger, or adversity (physical or moral)

ed. For the infantry, AIT is 10 weeks. The program for learning the Arabic language takes 63 weeks. For officers, there are many routes to enter the Army via the college Reserve Officer Training Corps, the U.S. Military Academy at West Point, and the Officer Candidate School, which is a 12week program. Training for officer specialties including doctors, lawyers, and chaplains generally occurs in their civilian field. As a result, military training is brief and generally consists of learning how to wear the uniform, military customs and courtesies, and the basic structure of the Army. For example, doctors will learn about the Army's medical structure in the Army Medical Command and other medical assets that are located in deployable organizations, such as in a brigade combat team or separately deployable hospitals.

Training prepares the soldier for the job, but is also the key element in developing an Army identity. With the job, whether it is infantry, logistics, intelligence, or another of the many occupational specialties, comes the association with others who have had the same training and experience — a culture. Some of these subcultures are stronger than others. For example, being a member of an airborne or air assault infantry unit, such as the 82nd or the 101st Airborne Division, puts the soldier in a more elite category than those in non-airborne infantry units, such as the 1st Cavalry Division or the 1st Infantry Division. These distinctions are often bitterly argued between soldiers of such units. The training environment is also the place where the soldier begins to learn Army lingo, an occasionally esoteric terminology consisting of jargon and acronyms that seems like a foreign language to the person with no Army or other military background.

TABLE 2. The Soldier's Creed

(http://www.army.mil/values/Soldiers.html accessed 25 July 2016)

I am an American soldier.

I am a warrior and a member of a team.

I serve the people of the United States and live the Army Values.

I will always place the mission first.

I will never accept defeat.

I will never quit.

I will never leave a fallen comrade.

I am disciplined, physically and mentally tough, trained and proficient in my warrior tasks and drills.

I always maintain my arms, my equipment and myself.

I am an expert and I am a professional.

I stand ready to deploy, engage, and destroy the enemies of the United States of America in close combat.

I am a guardian of freedom and the American way of life.

Lam an American soldier.

Training and Education for Enlisted Personnel

We distinguish between training and education. Training is required for holding an MOS in the Army and for special skills like airborne qualification. Education is selective, in that while usually required for promotion, it is often elective.

Basic Combat Training (BCT)

BCT is ten weeks long and is identical for all Army active duty, Army Reserve, and Army National Guard recruits. It is conducted in a highly controlled environment with many physical and mental challenges. Recruits learn combat skills, how to work in a team, and Army customs and courtesies. BCT prepares a universal identity of soldiers (common beliefs and values) through their training and teamwork, but also learn through the seven Core Army Values and the Soldier Creed (see Tables 1 and 2). Current BCT locations are Fort Benning, GA, Fort Leonard Wood, MO, Fort Sill, OK, and Fort Jackson, SC.

Advanced Individual Training (AIT)

BCT and AIT are two levels of training that are involved in the development of an Army identity, which includes the Army culture in general and the subculture in which a soldier functions following IET. BCT prepares a universal identity of the soldiers, a combatant who shares the common beliefs of all soldiers. AIT goes further into fostering the development of a field-dependent identity based on the subcultures of infantry, medics, and other fields.

AIT consists of the remainder of the total IET and is when recruits learn the specifics of their MOS. The Army trains a vast number of specialties and these can change with new requirements involving new technology and changing conditions of warfare. For example, remotely piloted aircraft, robots, and sensors are now widely deployed. Regardless of these latter developments, basic soldier skills are the core of training.

Compared to BCT, AIT has more variability in its length and physical and mental requirements. It is different for each available Army career path, or MOS. The Army has almost 200 MOSs. AIT courses can last anywhere from 4 to 52 weeks. Although many AIT schools do not train for combat the way BCT does, individuals are still continually tested for physical fitness and weapons proficiency. There are currently about 25 locations where Army personnel attend AIT (See Table 3 for AIT training locations that may be attended by Army enlisted personnel). This number is subject to change as bases and training locations are combined or moved. Some locations are at bases of the Navy or Air Force as it is more economical to have appropriate personnel available in the same career field, while having different military services trained at the same location. Many changes in training have recently occurred for cost savings as a result of the Defense Base Closure and Realignment Commission.

If a soldier cannot complete the AIT phase of training, that person may be discharged or put into another career field for new training. This is called reclassification. Soldiers may also request reclassification at any time during their career or may become ineligible for the current MOS due to injuries, illnesses, or family difficulties.

Post-AIT Training

Following AIT, the individual may elect or be required to attend special skill training to qualify for special units or assignments. Many of these special skills will award a badge or tab for the uniform showing that the person has that credential. Most of these schools are highly challenging physically and mentally. Examples are airborne, ranger, combat infantry, combat medic, diver, and others.

Army Education for Enlisted Personnel

Enlisted personnel advancing through the ranks are required to attend a series of schools that are necessary for promotion to leadership

TABLE 3. Locations for Enlisted Advanced Individual Training

The following list is illustrative of the wide variety of skills and locations at which Army personnel (primarily enlisted) are trained. We also note locations of major branch headquarters. Often, Army personnel are taught at schools of other military services and, conversely, other military often attend Army schools. This list is subject to change based on Department of Defense requirements.

- Fort Rucker, Alabama Aviation
- Redstone Arsenal, Alabama Missiles and rockets
- Fort Huachuca, Arizona Intelligence
- Presidio of Monterey, California Foreign language
- Eglin Air Force Base, Florida Ranger School (Phase III) and explosive ordnance disposal
- Naval Support Activity, Florida Engineer divers
- Pensacola Naval Air Station, Florida Foreign communications intercept
- Fort Benning, Georgia Infantry, Airborne (Paratrooper), Ranger School (Phase I & II)
- Fort Gordon, Georgia Signal Corps
- Fort Meade, Maryland Multiple federal and defense agencies such as the National Security Agency
- Fort Leonard Wood, Missouri BCT and Engineers and Military Police Corps
- Naval Construction Battalion Center, Gulfport, Mississippi Construction engineers
- Fort Bragg, North Carolina Airborne Infantry
- Fort Sill, Oklahoma Field Artillery
- Fort Jackson, South Carolina Basic Combat Training and Chaplain Center, Finance, NCO Education
- Fort Bliss, Texas Air Defense Artillery
- Fort Sam Houston Army Medical Department
- Goodfellow Air Force Base, Texas Cryptological and intelligence training
- Lackland Air Force Base, Texas Military working dog program
- Sheppard Air Force Base, Texas Engineering and aircraft maintenance
- Fort Eustis, Virginia HQ, Training and Doctrine Command, Army Aviation and Logistic Schools
- Fort Lee, Virginia Quartermaster, Ordnance Corps, Transportation Corps schools

positions. Some are conducted at the installation where the soldier is assigned, while the more senior-level courses are conducted at a central location.

Warrior Leader Course (WLC)

This is the first level of training for soldiers after completion of BCT and AIT. It is for specialists and corporals (E4s) on the path to SGT (E5). It is a month-long course to teach leadership at the small group level. It includes instructions on how to counsel soldiers as well as tactical skills such as map reading and land navigation.

Advanced Leader Course (ALC)

ALC is a junior level NCO course that focuses on training leaders at the squad and platoon level. Soldiers who attend are Staff Sergeants (E6) and those who have been selected for promotion to staff sergeant. ALC consists of a 90-day, highly facilitated web-based common core program and a branch-specific approximately eight-week resident phase designed for the soldiers within each military occupation specialty. Mobile training teams at the installation level teach the course.

Senior Leader Course (SLC)

SLC prepares soldiers selected for promotion to Sergeant First Class (E7) to acquire the leadership, technical, and tactical skills, knowledge, and experience needed to lead platoon/company size units. It is also considered part of the preparation to be promoted to Master Sergeant (MSG/E8).

First Sergeant Course/Academy

This course prepares Sergeants First Class (E7) and Master Sergeants (E8) for the position of first sergeant of a company, battery, or troop. The course consists of two phases: self-study lessons, and three weeks of small group instruction. Phase II includes three weeks of interactive small-group instruction. Subjects of study include training management, unit administration, communicative skills, discipline and morale, logistics and maintenance, tactical operations, and physical fitness training.

Sergeants Major Course (SMC)

The SMC is a senior level NCO course. It trains Master Sergeants (E8) and Sergeants Major (E9). Personnel trained are senior enlisted leaders from the Army, other U.S. military services, and allied militaries. It is a ten-month resident course conducted at the Army Sergeants Major

Academy, Fort Bliss, TX. A Department of the Army Selection Board determines attendance for resident or non-resident training. If selected, individuals may complete the course by correspondence.

Command Sergeants Major Academy

This course, also held at the Sergeants Major Academy at Fort Bliss, Texas, is designed for Sergeants Major (E9) to learn to lead at the battalion command level.

Training and Education for Officers Becoming an Officer

There are four ways in which an individual can become an officer: the college reserve officer training program (ROTC), officer candidate school (OCS), a direct commission (for specialized fields such as medicine, law, and chaplaincy), and the U.S. Military Academy (West Point). Officers are trained in a career field that they have chosen or that they have already completed, such as a professional school.

Basic Branch Schools

An officer is commissioned in a branch of the Army. Once an officer is commissioned, basic branch school attendance is required. There are currently 16 basic branches (see below) plus the specialty branches of the Army Medical Department (Medical, Nurse, Dental, Veterinary, Medical Specialists, and Medical Service Corps), the Judge Advocate General Corps, and the Chaplains Branch.

Army functions are trained in schools of the branches of the Army (e.g., infantry). Each branch has a function in combat arms, combat support, or combat service support. In some cases (e.g., engineers) the functions of a branch fall into more than one category. (See Chapter 3: Army Jobs for a description of these functions of the Army.)

Advanced Officer Education

As officers progress, they will attend an advanced officer course in their branch that can last six months or longer. Following the advanced courses are higher-level schools for training officers from most branches. Among these are the Army Command and General Staff College (CGSC) and the Joint Service Staff College (formerly the Army Forces Staff College until integrated into the National Defense University in 1981). Each service has its own war college for senior officers (lieutenant colonel and higher). The National Defense University (NDU) prepares military and civilian leaders from the United States and other countries in national

and international security challenges. Schools for advanced officer education also usually include officers from other military services, high-level civilians of the Department of Defense, and officers from other nations.

Conclusion

In general, if the Army is not fighting, it is training. Training begins at entry and generally continues throughout a soldier's career. At the enlisted level, weapons, tactics, equipment, and leadership are the major topics. For officers (warrant and commissioned), training is oriented toward building knowledge of their basic branch until the officer reaches a higher level and duties become branch immaterial.

Thinking it Through

- 1. How might Army values impact a soldier's response to trauma? Would that change the way you design a survey or questionnaire?
- 2. What are the differences in training in enlisted soldiers and officers? What impacts might that have on their view of illness and recovery?
- 3. Where do you get your core values? Parents, school, friends, religion/faith? Do you always abide by these core values? Are any of them situational?

CHAPTER 6

Career and Family Transitions

Key Points:

- 1. Transitions in the military pose opportunities and challenges for the soldier and the family.
- 2. Stress from large transitions, such as permanent relocation or retirement, benefits from support from many levels.
- 3. Small transitions, such as changes in rank and leadership, may cause unexpected, but significant impacts on a soldier's life and career.

Background

Army life includes many transitions: enlistment or commissioning, deployment, redeployment, demotion, promotion, a relocation, which is called a permanent change of station (PCS), separating from the military (voluntarily or involuntarily), and retirement. Transitions affect the trajectory of the life and career of the soldier and family: individual, interpersonal, community, and military factors that may have an impact on career and adjustment. Some transitions are of short duration, while others may be protracted, but all transitions can be meaningful periods of adjustment. Transitions can be complex, and include challenges as well as opportunities for growth. They may contribute to increased well-being or be damaging, and many can have both positive and negative effects. Soldiers will respond differently to these transitions, so there is no easy way to predict which transitions will be stressful. Some may feel relief with getting out of the Army, while others may fear civilian life. As such, being aware of the potential for stress at any transition is important.

These stressors can be abrupt, violent, untimely, and may involve the risk of death in the case of combat deployment. There are potential stressors in all military environments, including garrison life, training, and deployment. Both individual (e.g., self-efficacy and job involvement) and unit/organization (e.g., leadership climate, collective efficacy, and policy decisions) moderators may influence the relationship between stressors (e.g., workload and role ambiguity) and health and performance outcomes (e.g., well-being, depression) (Castro, 2015). These facts highlight

the importance of individual, family, leadership, and organizational intervention at key transition points to mitigate the potential for negative outcomes.

The military family also experiences many of these transitions and stressors. Many transitions are similar to those in civilian families, while others are unique. Some unique military challenges are associated with deployment, such as concern about the health and safety of the service member while deployed, childcare, family health, and financial welfare. Overall, most families are resilient, adapt well to these Army-related transitions, learn to anticipate them, and to plan for the future. In addition to the changes to the individual and family, there are challenges unrelated to the military, such as marriage, having children, caring for elderly parents, and others. These transitions may amplify stress, especially if more than one occur simultaneously, such as the addition of a child to the family while the soldier is deployed. The ability to anticipate when transitions will occur, what to expect, and how to adapt to them can lead to increased resilience and better outcomes.

We present a chronological discussion of transitions by career stage: early, middle, and late. In general, this chapter largely addresses the life of the enlisted soldier and the family. Although officers will go through many similar transitions, the roles and responsibilities, and the career trajectories are different.

Early Career Transitions

The initial challenges faced by the recruit include adjustment to military culture and initial training (see Table 1). These transitions may involve adaptation to a new environment, isolation from civilian peers, separation from family, inexperience with authority and leadership, lack of privacy, close supervision, and monitoring of health and habits (Bijur et al., 1997; McCrary, 2006). The adjustment to military culture can be a lengthy process. Initial exposure to military culture begins with Initial Entry Training (IET) (Pietrzak et al., 2009), which is divided into Basic Combat Training (BCT) and Advanced Individual Training (AIT). BCT teaches basic combat skills, physical and mental fitness, and Army values and ethics. AIT teaches skills specific to the soldier's military occupational specialty (MOS) (See Chapter 3, Army Jobs). During BCT and AIT, soldiers begin to identify with the culture, uniform, customs, structure, and values of the Army.

IET, and particularly BCT, may be an intense and stressful transition period, associated with symptoms of depression and anxiety (M. A. Taylor, Shultz, Spiegel, Morrison, & Greene, 2007). Soldiers are adapting to

TABLE 1. Early Career Transitions

- Basic training
- MOS-specific training
- Separation from family/friends
- Adjustment to military culture
- Adaptation to discipline and authority
- Adaptation to physically taxing work (e.g., long hours, field duty, sleep deprivation, and adverse weather)

a new culture, a new community (the unit), and a new identity. Among the most important adaptations a solider makes within a military unit are the need to learn to work with others as a team and the importance of unit identity over self. Unit identity requires cohesion with one's teammates (horizontal cohesion) and with the leadership (vertical cohesion). Without horizontal cohesion the unit falls apart and can lead to mission compromise. Vertical cohesion is based on trust in the leadership such that soldiers believe that they are respected, well supervised, and that someone is looking after their welfare. While this is especially important in the early career, it is also an important factor throughout the career of a soldier (Manning, 1991).

Failure to complete BCT or AIT can feel humiliating and shameful. Most failures to complete training occur in AIT. In 2014, 13.16% failed to complete IET, 0.07% failed to complete BCT and 13.10% failed AIT. According to data from the Defense Manpower Data Center¹ indicated that females tended to fail BCT or AIT more than males: 18.55% of females compared to 12.06% of males. One may fail to complete BCT or AIT for many reasons, including the inability to meet the physical or cognitive or intellectual demands for the chosen occupational field, inability to demonstrate the capacity to adjust to requirements related to good order and discipline, and other failures to adapt. Physical fitness requirements are the biggest hurdle for soldiers in BCT (Rieger & Scott, 2006). Fitness is an essential component of an Army career. Fitness in the Army is tested annually by three measures of strength and endurance: push-ups, sit-ups, and a two-mile run. Passing a fitness test is a requirement for promotion, for attendance at an Army school, and for some assignments. Units perform calisthenics regularly, often before sunrise, as a group. Unit runs are

This data was obtained through a direct request (DRS #92854) to the DMDC made by one of the authors (JM). It represents data collected through 31JUL2015.

thought to be morale and cohesion builders.

In addition, once a soldier has completed IET and is in a unit, approximately 30% do not complete their first tour of duty (Cardona & Ritchie, 2006). If a soldier fails to meet the training requirements for one job (the military occupational specialty or MOS — See Chapter 3), another MOS can be selected if there is a vacancy available. If a vacancy is not available, a soldier can be assigned a MOS that may be less desirable to that individual. During IET, these changes are relatively easily accomplished, but are more difficult after a soldier reaches their first unit assignment. If the soldier does not fit in or does not like the MOS, moving from one into another can be a lengthy process. Such a change (reclassification) is not always successful in terms of the soldier's adaptation to the Army. A soldier may be given permission to change MOS depending on the needs of the unit. However, if the unit is due to deploy or is under-manned, they are likely to need all of their personnel and are not likely to support a person's application for reclassification to another MOS, which usually would necessitate a transfer out of the unit.

Middle Career Transitions

Although transitions are inherent across the lifespan, much of the literature on stress associated with military transition has focused on early career transitions rather than those of mid-career and late career. Significant mid-career transitions may include military leadership training, civilian education, promotion, leadership advances and changes in responsibility, adjustment and work environment-related issues, multiple deployments, and frequent moves (see Table 2).

TABLE 2. Middle Career Transitions

- Military leadership training
- Civilian education
- Promotions
- Changes in responsibility
- New unit assignment
- Changes in leadership
- Multiple deployments
- Relocation/moving
- Overseas assignments

Military Leadership Training

Leadership training is required to develop leadership skills as well as proficiency in combat skills. Military leadership training also teaches about changes in Army structure and organization (see Chapter 2). The Army is constantly changing to adapt to new realities in the world order, weapons and tactics, fighting doctrine, and new missions. Leadership training may buffer against the negative effects of stress for commanders and those they lead (e.g., role clarity, self-efficacy, and job engagement), which in turn may influence soldier health outcomes (Britt, Davison, Bliese, & Castro, 2004).

Leadership and other professional training (e.g., airborne school or ranger school) may require temporary duty (TDY) at locations other than home for periods of weeks to months. When the soldier is involved in training away from home, family members may elect to move elsewhere (such as to move in with their parents or other relatives). Changes in housing and parental responsibility, similar in many ways to those resulting from deployment (although with less attendant stress related to danger or uncertainty surrounding return), are also likely.

Civilian Education

Civilian education is also an Army priority that can serve multiple purposes, to include enhancing the soldier's career through learning new skills and contributing to eligibility for promotion. Civilian educational benefits are a strong motivation for joining the military. For example, in a 2014 survey, 74% of active duty military and veterans reported that receipt of education benefits was either an important or very important reason for joining (Buryk, Trail, Gonzalez, Miller, & Friedman, 2015; Gonzales, Miller, Buryk, & Wenger, 2015). The 2009 Post-9/11 GI Bill, an effort to meet the needs of two million post-9/11 era veterans and their dependents, was the largest expansion of veterans education benefits since the 1944 GI Bill. Since 2009, service members may elect to transfer their GI Bill benefits to their spouse, to one of their children, or to divide the benefit (equivalent to the cost of tuition and fees associated with receipt of a four year degree at a public university) among two or more parties. Once they complete IET, soldiers are given funds and opportunities to take college courses, which can count toward a soldier's promotion as well as increase their skills and knowledge. All installations have an education office where soldiers can sign up for classes online, by correspondence, or in person. Many of these opportunities are also available when the soldier is deployed.

Promotion

For lower ranking enlisted personnel (E1-E4), promotion is automatic if the soldier has progressed normally without failures in performance or

requirements for more than usual discipline. At the non-commissioned officer (NCO) levels (E5-E9) promotion is competitive. Soldiers need sufficient time in their current grade, time in the Army, and there must be a vacancy in the unit at the rank for which they qualify. Additional requirements for promotion are often required. Promotion for a soldier in a unit will include a formal ceremony in which promotion orders are read and the new rank is attached to the uniform. Typically, the unit commander performs this ceremony with the soldier's family present and assisting with the ceremony by attaching the rank. The promotion ceremony, which is the formal recognition of this particular transition, is an important element of military culture.

Demotion

Enlisted soldiers can also be reduced in rank for a variety of reasons. This is not a disciplinary option for officers — although they can be denied promotion. Loss of rank comes with a loss in pay and changes in career trajectories — they may no longer hold sufficient rank to lead a fire team or platoon. Loss in pay can impact a soldier's entire family. Losing rank is also a highly visible form of punishment, as soldiers have to get their uniforms altered and explain to everyone why they "lost a stripe." Reasons for demotion can be as simple as being late, failing to improve, or poor work performance. While timeliness may seem like a small infraction in civilian life, in combat it can equate to not only military success but also to the safety of others (dropping a mortar 1 minute early or late could mean landing on friendly forces). Typically a soldier is given "paperwork," a Letter of Reprimand (LOR) for example, before losing rank, but this is not always the case.

Leadership Advances and Changes in Responsibility

As soldiers increase in rank, they become responsible for other soldiers. This usually begins at the E4 level (specialist or corporal), in which the soldier may supervise only a few people (e.g., five soldiers as a team, special detachment, or detail). There is an NCO at each squad and throughout the organization above the squad level (see chapter 4 for details on Army rank and organization), including the high levels of command. At each increasing level of the NCO ranks, there is more responsibility, not only for soldiers, but also for equipment, training, and operations. It is important to note that NCOs do not command, but they lead soldiers and offer their advice to other leaders and to the unit commander.

Some soldiers adapt quickly to becoming leaders, but there are hazards associated with taking on a leadership role: increased potential for incompetence, failure, or demotion. These difficulties often happen when a soldier is promoted early, without sufficient experience to be able to lead. If the person is a poor leader, that will be reflected in the performance of the soldiers led, which can also affect the unit cohesion and ability to function as a team. The successful leader, however, will enjoy benefits like increased respect and feelings of accomplishment. The anticipation of crises and challenges in leadership and knowing what to expect will help a leader and their unit through transitions (Bennis, 2004). Some approaches undertaken within the first six months of assuming a new position may help with the transition: seeking a mentor, building a team, making a low-key entry to learn the culture of leadership in the organization. Other beneficial strategies are learning from the wisdom of those already there, such senior NCOs, and learning who to trust (Bennis, 2004).

Work/Environment-Related Issues

Military service is inherently stressful. Physically and mentally demanding tasks, long work hours, and the possibility of being injured or killed are just a few of the stressors of military life. Adaptation to physically taxing work as well as field duty, limited sleep, adverse weather, and boredom) have been associated with adjustment difficulties. Sleep difficulties are common among soldiers and veterans. Insomnia negatively impacts combat operations and the overall deployment experience and is also a risk factor for posttraumatic stress disorder (Bramoweth & Germain, 2013). In a study of 375 service members and veterans of Operations Enduring Freedom and Iraqi Freedom, sleep difficulties were common and included sleep onset greater than 30 minutes (45.4%), achieving fewer than 4.5 hours of total sleep time (21.4%), and being awake in bed more than 15% of the time (Plumb, Peachey, & Zelman, 2014).

Deployments

Military deployments can involve multiple transitions and can be stressful, regardless of whether the deployments involve combat, peace-keeping, or humanitarian efforts. A training period always precedes the deployment and can take the soldier away from family and home for days or weeks. Response to acute stress can vary. Soldiers may be stable and resilient, have a gradual recovery, exhibit chronic distress, or have delayed reactions (Mancini, Bonanno, & Sinan, 2015). Although deployments are sometimes associated with negative outcomes in families (de Burgh, White, Fear, & Iversen, 2011), families can also be resilient in the face of deployments (Bonanno et al., 2012; Cozza, Chun, & Polo, 2005). In a study of a six-month peacekeeping deployment, soldiers reported both

positive and negative aspects of their deployment experience (Newby et al., 2005). Among the positive responses were earning extra money from deployment, self-improvement in military skills, improvement in marital or significant relationships, helping the people of the region, travel to another country, and realizing how fortunate they are to live in the United States. Negative responses included disappointment with the military chain of command, moral injury, being away from family and missing important events, deterioration of marital or significant relationships, and feeling that the mission was not worthwhile. It should be noted that there was a wide range of reports regarding the effects of deployment on marital/significant other relationships. 30% of respondents reported that there were only positive benefits, 16% thought there were only negative effects, 47% reported both positive and negative consequences, and 7% did not report either. These results emphasize the importance of variability in the adjustment to stress.

Relocation

Frequent moves are expected for the soldier and the family. Service members, particularly high ranking officers and NCOs and those with special duties, can receive orders to move on short notice, leaving little time to prepare for a move, to say farewell to friends, and to adjust to a new community. Soldiers often work closely with Army leadership to select their next assignments and may request the new location; however, they may not receive the assignment or the location that they desire. Military moves have many challenges, such as finding affordable housing if base housing is not available, and establishing new health care and support networks. If married, they may need to find employment for the spouse. Enrollment in school is necessary for children — and can be exceptionally stressful if previous work does not transfer to new school districts or if a child's programs of interest (e.g., sports, music) are not available in a new location. Children often view their peers as their main support network, which can make moving especially difficult for them. In addition to permanent moves with families, soldiers can also be ordered to locations where the family cannot accompany the soldier. These are called unaccompanied tours. Often, whether a family moves with the soldier depends on the soldier's rank as well as the duty assignment. Lower ranking personnel are often not allowed to have their families accompany them on some assignments overseas.

Injury and Illness

Soldiers risk injury and death during routine training, in movement

from locations in deployment, from accidents, and from combat. Illnesses in the Army can also differ from those in the civilian environment. Illnesses can result from exposure to a contagion due to dense living quarters, diseases that are endemic to foreign countries, and environmental exposures such as depleted uranium in munitions and toxic substances from fires (Mancuso, Ostafin, & Lovell, 2008).

As in the civilian world, illness and injury can occur at any point in life. However, in the Army, the chances of injury are high (Belmont et al., 2010). Trainees are typically young and able to "bounce back." Occasionally they will need to be "re-cycled" in a new training rotation, which is frustrating, but not career-ending. While injury can occur any time in a soldier's career, being injured in mid-career can be devastating as it can result in medical retirement or reclassification if the soldier no longer meets the physical requirements for the MOS.

Army Regulation 350-1 (standards for fitness for duty) is the basis for determining whether an individual can have a particular assignment or remain on active duty. Both physical and mental standards exist. If there is a question as to whether an individual can remain on active duty following an injury or illness, the individual's record is put before a Medical Evaluation Board (MEB). Military doctors first describe the service member's medical diagnoses and prognoses in a narrative summary (called a NARSUM). The NARSUM is presented to the military service's Physical Disability Agency (PDA), which evaluates the service member's ability to meet the demands of the occupation, including deployability. Evaluations for disability discharge have a variety of possible outcomes: discharge with severance pay, temporary disability (until the condition stabilizes), permanent disability, or return to duty. In these ways, an illness or injury may result in a jarring transition for even the best soldiers.

Late Career Transitions

The transition from middle to late career has challenges from a variety of sources (see Table 3). Occupationally, senior leaders can struggle with the increased responsibility that comes with their rank, changes in military culture due to new recruit populations, and variations in society's support for the military. Those who have been previously injured may struggle with the lingering effects of injury that can be exacerbated due to normal aging. Those with a family can struggle with the same circumstances as the civilian population — children leaving home, paying for college, and caring for aging parents.

Retirement eligibility and benefits for retirees can change with the needs of the military. At the present time, service members are eligible

TABLE 3. Late Career Transitions

- Mentoring younger soldiers
- High-level responsibility
- Family changes: aging parents, children leaving home, and retirement
- Health changes

for retirement after 20 years of service and must retire after 30 years with special exemptions for senior personnel based on the needs of the Army. Upon 20 years of service, a pension in the amount of 50% of the base pay is allotted for the rest of the retiree's life. This can then increase beyond 50% for time served past 20 years. It should be noted retirement can occur as early as age 38–45, enabling service members opportunities early in their life that would not be otherwise possible. Army Reserve and Army National Guard personnel can also retire with the same benefits based on years of active and reserve service. After retirement, service members may need training to facilitate the transition to a new career. Educational benefits are available to members after service. The Post-9/11 GI Bill is the most common means of supplementary educational funding, as the full benefits are substantial and may include in-state tuition and a stipend. There are other benefits available to retirees: access to discounted shopping in military installations; VA benefits; and disability compensation if the soldier is injured or has a serious illness during active duty (Hamaoka et al., 2014).

Despite these benefits, retirement from active duty involves many transitions and challenges for the soldier and the family (see Table 4). There are many programs within the Army during the late career can help ease the transition from the Army to civilian life. Although retirement outcomes are usually neutral or positive, retirement may also be stressful because of the potential losses it entails, such as reduced income and activity. Retirement may be associated with perceived loss of support/camaraderie and financial problems, which may lead to increased distress (Schnurr et al., 2005). Interviews with veterans revealed common concerns related to their transition to civilian life: fear of losing their "military family", worry of feeling out of place with people in their new civilian life, and anxiety about lack of support (Ahern et al., 2015).

Successful career transitions of military retirees may involve additional education and training. Many military retirees transition to a second career that is related to the military. One predictor of a successful second career transition among military retirees includes pre-military planning for a successful transition to civilian life (Vigoda-Gadot, Baruch,

TABLE 4. Transitions upon Retirement

- Planning for separation/retirement
- Relocation/moving off-base
- Educational needs for new career
- Occupational changes
- Changes in financial situation
- Loss of informal support networks
- Loss of usual installation support services
- Benefits eligibility (military/state)
- VA eligibility/accessibility

& Grimland, 2010). This preparation can inform expectations of their job and will help retirees overcome potential difficulties and frustrations in their new careers. Maintaining interpersonal relationships developed during military service, networking, and finding mentors are also important steps to successful transitions. Leaders at the end of their careers may also benefit from mentoring younger personnel (Bennis, 2004). Work-life balance difficulties may arise, as conflict with family time may lead to challenges with transitions to second careers. The new position needs to fit with the family role for long-term success. Finally, retirees who prepare for and anticipate the needs surrounding family-work conflict and find mentors and networks are more likely to be committed to their new organization, which is associated with better adjustment during the transition to a second career (Vigoda–Gadot et al., 2010).

There are other types of separation from the military besides retirement, either voluntary or involuntary, that occur prior to meeting retirement eligibility. These separations may cut short what was intended to be a long military career and remove the possibilities of advancement and retirement. Involuntary separations can occur at any level due to reductions in force, administrative discharges (e.g., behavioral or failure to adjust), medical conditions, or disciplinary reasons. Voluntary discharges are accepted, but the military may recall the soldier to active duty, if needed, depending on the needs of the military and depending on the soldier's Army component, MOS, age, retirement status, and other considerations.

Conclusion

Transitions are inherently stressful, producing changes in relationships, work context, and personal and social identity, and are associated with disrupted social networks. Successful transitions include strong re-

TABLE 5. Transitions for Soldiers and Families that Can Occur Throughout the Career

- Changes in financial situation
- Relocation/moving
- Geographic marital separation
- Less social support due to geographic isolation from family and friends
- Changes in informal support networks
- Access to medical care and health services
- Work and family obligations/responsibilities
- Spouse education
- Spouse employment
- Deployment cycle
- Children's educational needs
- Concern for safety of deployed spouse
- Aging parents/parental illness

lationships with family, friends, and community, employment after leaving the military, and a sense of well-being and contentment.

Awareness of the stressors associated with each career stage in the Army is crucial at the organizational level with respect to policies, programs, and ways to meet the demands of the military on the soldier and family. Professionals working with soldiers can benefit from a better understanding of the stress points during transitions, as these may be logical places to focus research, clinical, and programmatic efforts to improve outcomes for individuals and organizations within the Army.

Thinking it Through

- 1. Is the soldier currently going through any transitions?
- 2. How did they navigate previous transitions?
- 3. Could a career transition be related to your research question (e.g., is the stress you are seeing in senior enlisted members secondary to delayed PTSD or adjustment to a new leadership position?)?

CHAPTER 7

U.S. Army National Guard and the Army Reserve: Citizen-Soldiers

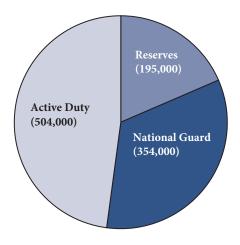
Key Points

- 1. Reservists and National Guard members identify with their civilian culture and their military culture asking about the impact of both is important.
- 2. Reservists and National Guard members may have a limited local military group with which to identify.
- 3. Reserve component personnel can face many challenges related to their military duties that are not shared by the active component forces.

Background

There are two primary components of the U.S. Army: the Active Component and the Reserve Component (RC), which consists of both the Army Reserve and the Army National Guard. The RC has many categories, but there are primarily three: the Ready Reserve, the Standby Reserve, and the Retired Reserve. The Ready Reserve includes the Selected Reserve, which is made up of soldiers who train year-round and are capable of rapid deployment, and the Individual Ready Reserve (IRR), comprised of former members of active duty or reserve forces. The IRR soldier does not belong to a unit, but still has a military obligation and can be mobilized. The Standby Reserve consists of skilled personnel who are not required to perform training, but may be mobilized to fill specific manpower needs. Similar to the IRR is the Inactive National Guard (ING). These soldiers do not drill and are not attached to a unit, but may be mobilized (called up) in the event of a national emergency. The Retired Reserve consists of personnel who have retired from active duty or the Reserve Component, but may also be called up. The Reserve and Guard have served and continue to serve important military and civil functions. In this chapter, we briefly provide the historical context of the Reserve and Guard, their roles in U.S. society and the Army, and describe them as they currently function with a special focus on their differences with the active component of the Army.

GRAPH 1: Size of U.S. Army Components in 2014



The U.S. Army National Guard

The Guard is the oldest military organization in the United States, dating from 1607, when militia companies were formed at Jamestown, (http://vko.va.ngb.army.mil/VirginiaGuard/history/overview. html). In 1636, the Massachusetts Bay Colony created three regiments that existed as separate militias around the area of Boston to defend the colony against Native Americans. The Guard has since participated in every war or conflict that the U.S. has fought. The Guard is a state organization and is commanded by the adjutant general of the state who is responsible to the governor, but can be mobilized for federal service by order of the President of the U.S. The Guard exists in all 50 states, the District of Columbia, Puerto Rico, the Virgin Islands, and Guam. Guard soldiers are civilians who mobilize for training and for state and federal missions. In addition to these part-time soldiers, the 54 Army Guard headquarters contain a mixture of active duty and civilian personnel for full-time personnel actions, such as preparing and monitoring training schedules, pay processing, and other personnel actions (United States Government Accountability Office (GAO), 2013). As of 2014, the Guard consisted of 354,072 Soldiers (http://download.militaryonesource.mil/12038/MOS/ Reports/2014-Demographics-Report.pdf). The Guard has a position on the Joint Chiefs of Staff, represented by a 4-star general, the Chief of the National Guard Bureau.

U.S. Army Reserve

Congress created the Army Reserve in 1908 as the Medical Reserve Corps (Anonymous, 2008). In 1920, after World War I, Congress established the Officer Reserve Corps, the Enlisted Reserve Corps, and the Reserve Officer Training Corps. Approximately one-third of the force was composed of medical personnel. Since that time, Reserve personnel have served in every conflict up to the present.

The Army Reserve is exclusively a federal military service, with no role in U.S. state operations except in extreme circumstances. Reserve units currently exist in 35 U.S. states, the District of Columbia, Puerto Rico, Guam, and American Samoa. The size of the Reserve in 2014 was 195,438 soldiers (http://download.militaryonesource.mil/12038/MOS/Reports/2014-Demographics-Report.pdf).

The highest-ranking officer of the Reserves is the Chief of the Army Reserve, a 3-star general who sits on the Army staff.

Army Guard and Reserve Training and Duty

When an individual joins the Guard/Reserve, that person is committed to eight years of service. Time can be spent either on activated, Guard, or Reserve status, depending on various factors such as age, job, and length of time of service. Both the Guard and Reserve attend the same initial entry training (IET) (See Chapter 5: Army Training). Following IET, the soldier typically returns to their unit unless they request or are required to attend additional training or remain on active duty. Typically, both the Guard and Reserve will train (called drill) for one weekend per month plus a two-week period (annual training) each year. If called to active duty, Guard and Reserve personnel function exactly as active component soldiers. That is, they are part of a larger force whose mission is federally defined. They serve whenever and wherever needed.

Personnel in the Guard and Reserve are eligible for the same retirement pay as soldiers who retire from an active duty career, but their retirement is computed on the basis of multiple factors including the time spent on active duty and other factors.

Current Legal Status of the Guard and Reserve

Both the Guard and Reserve derive their legal status from the U. S. Constitution (Abramowitz, 2013). The drafters of the Constitution had a mistrust of a large standing Army due to their experience with the British Army prior to the American Revolutionary War. The Constitution established militias for the U.S. in two separate clauses, 12 and 16. The first (clause 12) was "To raise and support armies, but no appropriation of

money to that use shall be for a longer term than two years." This clause provides for a standing Army, but one with a limited role at the time of its founding. The second (clause 16), is "To provide for organizing, arming, and disciplining, the militia and for governing such part of them as may be employed in the service of the United States, reserving to the states respectively, the appointment of the officers, and the authority of training the militia according to the discipline prescribed by Congress." The tensions between the active Army and the reserve components are present today as they compete for political influence and funds (White, 2010). State constitutions also have sections regulating militia and military affairs for the Guard.

Two U. S. federal statutes, U.S. Code Title 10 and Title 32, currently apply to Guard mobilization. Title 10 and Title 32 operations are terms often used when Guard operations are discussed by soldiers. Title 32 provides the legal basis for the Guard and most of its state operations. However, the Guard can be called to full-time active duty status under Title 10, for operational activities in the U.S., as determined by the Secretary of Defense. Title 10 applies to operations when members of the Guard are ordered to active duty in a time of national emergency. In this status, federal dollars are used to pay guardsmen. Title 10 similarly provides the authority to activate Reservists.

Structures and Functions of the Guard and Reserve

Both the Guard and the Reserves have the same types of military units (combat, combat support, and combat service support) and structures (squads, platoons, companies, battalions, brigades, and divisions) as the active component. Through the end of January 2015, the Reserve has contributed 8.6% of deployments to Afghanistan and 8.8% to Iraq. The Guard has contributed 17.7% of soldiers to Afghanistan and 19.7% of soldiers to Iraq (DMDC, 2015). In addition to multiple deployments, Guard and Reserve soldiers are also required to participate in peacekeeping operations, large-scale domestic disturbances and emergencies, such as hurricanes and wildfires, southwest border operations, and national inaugural events. Humanitarian operations often require Guard forces to assume key roles in security, infrastructure protection, and search and rescue. These operations have required the development of novel policies and plans: responding to Hurricane Katrina required activation of Guard Forces whose own homes were often also under water. These operations have also required new technologies (e.g., communication networks for responding over a vast area of operations), which may then be transferred to the regular Army.

Post-September 11, 2001: Changes In the Active Army, Army National Guard and Army Reserve

The Army, including both active and reserve components, has undergone substantial changes following the events of September 11, 2001 (hereafter referred to as 9/11). This transformation has major effects on the Reserve and Guard, as well as the active component (White, 2010). Previously the active component was the primary operational force, with augmentation by the Guard and Reserve, should it be necessary. The Guard and Reserve are now considered operational forces rather than strategic reserves. Prior to these changes, the reserves often were seen as "second-class" in comparison to the active Army. This was more true for the Army Reserve, which at an earlier time consisted largely of support forces, than for the Army Guard (Tucker & Army War Coll Carlisle Barracks, 2008). In Operation Iraqi Freedom, Army and Marine reservists had substantially higher rates of combat exposure than reservists in other branches of service (Russell et al., 2014).

TABLE 1. Post-9/11 Operational Changes in the Army Reserve and Guard

- Transitioned from strategic reserve to operational forces
- Became a mobile modular force (brigade combat teams)
- Overhauled unit operations:
 - More selective recruitment of personnel
 - Increased family and employer support
 - Increased training
 - Scheduled equipment maintenance
- Took an active role in homeland defense
- Increased competition with Army for funds

The strategic climate since 9/11 has called for Army forces to change from those prepared for large-scale warfare, as in the Persian Gulf War of 1990–1991, to a more mobile and modular force that is largely self-supporting and capable of rapid deployment. Whereas before 9/11 the Army division was the typical operational force that would be deployed, the brigade combat team (BCT) has become the most readily deployable force. In order to implement this concept, complex changes to policies and procedures where required. The roles of homeland defense and national security were updated. Unit operations such as recruiting of personnel, maintenance of equipment, training, family and employer support were also overhauled. All of these necessitated increased funding, which placed the Guard and Reserve in competition for DoD funds for

personnel, training, and equipment (Pressnell & Army War College Carlisle Barracks, 2013), a position that could cause increased strife between active duty and Guard and Reserve forces.

Stressors and Challenges in the Guard and Reserve Supporting Combatant Commands

The Army Guard has a role in supporting the nine U.S. combatant commands (European, Central, Africa, Pacific, North America, South America, Special Operations, Strategic, and Transportation) in promoting security and stability operations in partnership with nations in the regions of the combatant commands (Deaton, 2013; Majury & Army War College Carlisle Barracks, 2013). Goals of this civil-military strategic partnership are to promote democratic institutions, share best practices, help partner countries achieve their goals, and reduce the pressure on combatant commands to promote regional stability. Currently, some 40 U.S. states participate in this program, including joint exercises, training, and building capacity and capability of host nations in strategic partnerships.

Deployment

Reservists may be less prepared for the challenges of deployment compared to their active component counterparts for several reasons. Due to their limited drill time, reservists receive less training than active component personnel. Lower levels of deployment preparedness have been associated with an increased likelihood of posttraumatic stress disorder (PTSD) among reservists (Goldmann et al., 2012; Kline et al., 2013; Polusny et al., 2011; Shea, Reddy, Tyrka, & Sevin, 2013). Additionally, when they deploy, it is possible that they could deploy as individuals rather than as a unit. This is often more true of specialized soldiers such as doctors than lower ranking soldiers. When this happens, more mental health issues can occur than when a unit deploys (Granado et al., 2012; Sundin et al., 2012), since high social support is associated with better mental health outcomes (Goldmann et al., 2012; Pietrzak et al., 2009; Polusny et al., 2011). Further, upon their return, they quickly go back to civilian life often without the support of those with whom they were deployed. However, empirical data on the mental health consequences of deploying without one's regular unit are scant. Of the published studies, some (Ismail et al., 2000; Langston, Gould, & Greenberg, 2007; Rona et al., 2012), but not all (Booth-Kewley, Larson, Highfill-McRoy, Garland, & Gaskin, 2010; Granado et al., 2012; Sundin et al., 2012) have found significant associations between individual augmentee status and mental health outcomes.

There is also the potential for less recovery time (also referred to as dwell time) between deployments. Since the Guard can be deployed both for state and federal missions, it is possible that dwell time can be cut short if a guardsman is deployed for a state mission between federal deployments. Lastly, there are also issues of limited access to military healthcare for Army Reserve and Army Guard personnel, who normally have to be on active duty orders to receive care, but there is some additional eligibility following release from active duty. Limited access to military health care can be further exacerbated by limited access to civilian care for those who live in rural areas. Reserve component personnel returning from deployment also have an increased risk of homelessness, particularly in rural regions (Clauss, 2012).

Mental Health

Current budgetary and strategic planning has put great pressure on the Army Guard and the Army Reserve (Abramowitz, 2013). Reserve component personnel, like active duty personnel, are at risk for mental health problems following deployment (Hotopf et al., 2006; Lane, Hourani, Bray, & Williams, 2012; Milliken, Auchterlonie, & Hoge, 2007; Smith et al., 2008; Thomas et al., 2010). They are also at increased risk of heavy weekly drinking, binge drinking, and other alcohol-related problems compared to active component personnel (Jacobson et al., 2008). Compared to active duty forces that had been deployed, reservists report higher percentages of suicidal ideation (7.1% vs. 5.4%), have a higher rate of suicide attempts (2.3% vs. 1.0%), and have a higher prevalence of PTSD symptoms (8.4% vs. 7.6%) (Lane et al., 2012).

A prospective study of Guard soldiers who were deployed to Iraq from March 2006 to July 2007 investigated the role of risk and resilience factors prior to and after deployment (Polusny et al., 2011). Post-deployment new-onset probable PTSD was 13.8%. Their well-designed study, notable for controlling many potential confounders, found that combat experience, the aftermath of battle, exposure to recent stressful events, and post-deployment social support (negative) independently predicted new-onset probable PTSD. The authors further hypothesized that a lack of post-deployment social support and post-deployment family life stressors represented an important challenge for those transitioning from the combat zone to civilian life. They suggested post-deployment interventions that enhance the interpersonal supports of returning personnel. Further study is necessary to understand the role of the family in social support and how recent stressors are associated with family functioning.

Conclusion

Army Guard and Army Reserve personnel and their families have undergone many stressors and challenges due to increased levels of deployment during the recent Middle East conflicts. Both have been mobilized in unprecedented numbers for long and repeated deployments. In addition to the mission requirements, there have been large-scale structural changes in the organizations due to Army transformation. Finally, in a time of reduced resources, both components of the Army compete for resources, which will affect all operations, such as recruitment, training, unit and equipment maintenance, and the possibility of more deployments. The stress of these changes and developments will impact many levels of soldier and family life, particularly employment and health care, as laws and regulations pertaining to both are subject to many factors, such as employer considerations and availability and access to health care providers and facilities. However, both the Guard and Reserve are expected to be strengthened and expanded, given that they are more cost effective and have demonstrated success in the Middle East conflicts of the present time.

Thinking it Through

- 1. What are some typical expectations of personnel who join the Army Guard or the Army Reserve? How might they impact their view of serving?
- 2. How might being activated impact the personal and occupational life of members of the Army Guard and Army Reserve?
- 3. How might limited access to medical care and social services affect their view of the military?

CHAPTER 8

Technology and War

Key Points

- 1. Changes in the ways wars are fought have effects on soldiers that may be unique.
- 2. Technology affects weapons and strategy and forms the backdrop of the culture associated with conflicts.
- 3. Combat is increasingly technological and can impact those who never set foot on the battlefield.

Background

The current weapons, strategy, and culture affect every conflict, from a full-scale war to a clandestine operation. Weapons have evolved over millennia and most conflicts have included a change in weaponry that has often been decisive. However, improved weapons are not the only factors that influence the outcome. Strategy has also changed. Rows of soldiers of the British Army were faced by guerrilla warfare that was often used by Americans in the Revolutionary War. Fear of mustard gas dramatically changed the battlefield and the types of casualties during the First World War. The use of terror has become a mainstay in current combat. Indeed, every new weapon and tactic has a dramatic effect on the experience of combat, and the potential associated fears.

Being in the military is not synonymous with combat experience. There are soldiers who may have never deployed, let alone seen combat. Furthermore, deploying does not always involve exposure to combat. However, when a soldier does experience combat it can have a profound impact on their identity. Each conflict is different, and thus can have a different impact on the individual and the society. This chapter reviews the impact of recent conflicts and, in particular, the impact of the recent war on terror, with specific emphasis on the use of Improvised Explosive Devices (IEDs) by the enemy.

Modern Combat

Persian Gulf War

The Persian Gulf War (Operation Desert Shield/Desert Storm; 2 August 1990-28 February 1991) was the last time that the U.S. and allied forces fought a large-scale armed conflict in a linear fashion with recognized front line and rear areas. This conflict was similar to most previous American wars, with the exception of the Vietnam War. The Persian Gulf War was planned and executed in a manner that had been anticipated by over forty years of preparation in central Europe for an attack by the Soviet Union; it just happened to be fought in the Middle East. There was heavy reliance upon military dominance of the air, large-scale troop and vehicle movement, engagement of heavily armored forces across open terrain, and the use of combat air power to attack ground forces. Naval and maritime forces prepared for resupply, amphibious assault (or its threat), and the delivery of supportive bombardment by missiles and aircraft launched from the sea. With all of these assets and preparation, the war was brief and decisive.

Despite a relatively quick victory, there was great concern for largescale casualties from weapons of mass destruction (WMD), especially chemical weapons, by a foe that had employed them liberally during the Iran-Iraq War (1980-1988). This, combined with the wholesale deployment of the Reserve and Guard forces with little to no previous combat training, dramatically influenced soldiers' anxiety related to the combat environment. Exposure to desert dust, unfamiliar vaccines, smoke from burning oil wells and burn-pits, contact with depleted uranium munitions, and the threat of invisible chemical nerve agents introduced a panoply of potential causes for complex behavioral and somatic symptoms in military and civilians personnel on the battlefield.

Yugoslavia/Balkans

U.S. military involvement in the ethnic conflict surrounding the implosion of the former Yugoslavia in the Balkans (1993-2004) was a harbinger of many elements of 21st Century armed conflict, notably, dispersed combat and peacekeeping on a discontinuous battlefield, with complex geopolitical, religious, and ethnic elements. While casualties from these operations were low, the continued employment of reserve elements, confusion about the nature of the enemy, and the deep involvement of the media in framing the perceptions of both the warrior and the public foreshadowed wars to come. These all compounded the sub-cultural factors described in the above sections that characterize the special operations forces (SOF), the Air Force and regular ground forces, especially the Active Army, Army Reserve, and Army National Guard.

Post 9/11

The September 11th, 2001, attacks on the World Trade Center and the Pentagon, and the attempted attack on another target in Washington, DC, heroically foiled by the passengers of United Airlines Flight 93, set in motion a series of reactive and pre-emptive military operations, resulting in over fifteen years of armed conflict in two major theatres, Iraq and Afghanistan. These operations mirrored many of the smaller scale experiences in the Balkans: dispersed isolated engagement and peacekeeping on a discontinuous battlefield with complex geopolitical, religious, and ethnic elements. There was no rear or forward area. Soldiers deployed in historically support roles, such as truck drivers, found themselves targets of directed attacks on supply lines with IEDs. Even conventional line units, such as artillery, were employed in route clearance, security, and urban clearing operations: roles they were psychologically unprepared for, even after last minute additional skills training. Naval medical and other personnel were deployed into facilities and environments far removed from maritime or even littoral areas. Airmen were exposed to direct combat through indirect fire and ambushes during resupply and other movements. In short, very few deployed soldiers, sailors, airmen, marines, and coastguardsmen were spared engagement in direct combat operations, a fact revealed through numerous assessments of the psychological experiences of support and combat troops in annual Mental Health Advisory Team studies conducted by the Office of the Army Surgeon General. (See, for example, http://armymedicine.mil/Documents/ MHAT_9_OEF_Report.pdf accessed 25 July 2016).

The past 17 years (2001–2017) of military engagements in Afghanistan (Operation Enduring Freedom or OEF), Iraq (Operation Iraqi Freedom and New Dawn, or OIF/OND), and now Syria, in the war against the Islamic State of Iraq and the Levant or Syria (ISIL or ISIS), have seen the results of a 44-year-old transition from a conscripted Army and Marine Corps to an all-volunteer force. While earlier generations might have experienced a single long deployment (in excess of 6 months) or a predictable cycle of sea duty for 3–6 months, a large number of the active duty and Reserve and Guard forces, especially ground combatants in the Army and Marine Corps and SOF, were deployed repeatedly for tours of 7–15 months into combat zones. This is in contrast to the Persian Gulf War, which lasted for little more than a month after 5 months of preparations were complete. These changes reflect both the realities of prolonged

conflict, employing a relatively small active component and reserve force and the longer enlistments of many volunteers. Compounding this operational tempo (OPTEMPO) is the fact that many more soldiers in the all-volunteer force have families than their counterparts in the conscripted force of the 1950's — 1970's, in which there were far more single men, far fewer women, and a force that turned over regularly as short-term enlistments were completed and new soldiers replaced them.

Finally, dramatic continuous improvements occurred in the care of combatants from the point of injury or illness (POI) to the sites of recovery and rehabilitation within the military health system of DoD hospitals or the Department of Veterans Affairs facilities. A concerted multifactorial, multi-disciplinary, and tri-service effort to improve every step of casualty care from the POI, including far-forward life-saving surgical resuscitation, intra-theatre and inter-theatre evacuation — usually by helicopter and specially outfitted aircraft, respectively — and comprehensive recovery and rehabilitation was undertaken. These measures led to unprecedented survival from battlefield wounds and injuries and the retention of wounded, ill, and otherwise injured combatants who could be returned to duty, and a large number of grievously wounded amputees and others who were medically retired.

Combat Stress

Combat-related stressors, which often occur during deployments to combat zones, may also be present during deployments for peacekeeping, extended training exercises, and humanitarian missions. For example, landmines may injure soldiers deployed to peacekeeping missions. Examples of stressors frequently encountered in combat situations are presented in Table 1 (Killgore et al., 2008).

TABLE 1. Combat Deployment-Related Stressful Life Events

- Participating in IED/mine clearing operations
- Close-range IED/booby trap explosions
- Working in areas that were mined or had IEDs
- Being attacked or ambushed
- Clearing/searching homes or buildings
- Receiving small arms fire
- Seeing dead bodies or human remains
- Seeing destroyed homes and villages
- Knowing someone seriously injured or killed
- Having a member of one's own unit become a casualty
- Receiving incoming artillery rocket or mortar fire

Improvised Explosive Devices (IEDs)

A significant and novel threat to soldiers who have been deployed for combat in Afghanistan and Iraq has been the use of IEDs. IED attacks have steadily increased since the beginning of the wars in Iraq and Afghanistan, reaching a peak in March of 2007, with reports of 2,612 total IED incidents (including exploded, detected, or defused devices) and 448 casualties (including 59 troops killed in action and 389 wounded in action) in Iraq (Cordesman, Loi, & Kocharlakota, 2010). The highest number of casualties resulting from IEDs occurred in June of 2007 in Iraq, with 83 troops killed and 572 wounded, followed by a marked decrease in total IED incidents.

IEDs are easy and inexpensive to produce, yet are responsible for devastating injury and death to military personnel and extensive destruction to vehicles (DePalma, Burris, Champion, & Hodgson, 2005). They are weapons that are homemade from readily accessible materials (e.g., containers, fertilizer, wire, batteries, wood scraps) or chemicals, such as fuel, or from discarded parts of military devices (e.g., mortar shells, old mines) and are frequently loaded with metal fragments or objects that are propelled at the time of the blast and produce further, more extensive injury (DePalma et al., 2005). They are frequently buried or affixed to vehicles, and may be detonated close to the target or victim-activated, thus posing a threat that is unpredictable and difficult to identify and prevent (Barbero, 2013; Dao, 2009; Moulton, 2009). It is often unnecessary for instigators to be present at the time of the explosion, which minimizes their own risk.

IEDs were the primary cause of wartime injury and death in Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) (Bohannon, 2011; French, Iversen, Lange, & Bryant, 2012). It is estimated that more than 60% of all U.S. combat casualties in OEF/OIF have been due to IEDs (Barbero, 2013; Bohannon, 2011). The nature of IEDs initially precluded effective protective measures against them, although vehicle and body armor have since been developed. The threat of IEDs also restricts troops' freedom of movement, with slow-moving bomb detection teams and heavily armored vehicles, which are mine-resistant but difficult to maneuver, complicating travel (Dao, 2009). In addition to the physical characteristics of these weapons, the novelty of IEDs can produce significant psychological responses in soldiers. IEDs are unfamiliar and difficult to identify or anticipate, which can affect soldiers' perceptions of threat and safety, subsequently increasing their sense of vulnerability, loss of control, and helplessness. Further information on IEDs can be found at the Joint IED Defeat Organization (www.jieddo.mil).

Conclusion

Combat can be a defining experience for a soldier, and yet may only represent a small fraction of their entire career, if at all. Years of training and preparation are required for the development of combat skills, making the success, or failure, of a combat mission significant for soldiers. Exploring combat exposure in the context of the associated conflict serves an important role in understanding the cultural context of a soldier. Similarly, for the soldier who never deployed, or has never experienced combat, exploring what it means to have never been "at the tip of the spear" can be equally important. This differentiation may become increasingly complex, as more combat operations can be conducted remotely. Indeed, combat of the future will have unique influences we have yet to study — women in combat units for example, that will change the way we understand the traumas associated with war.

Thinking it Through

- 1. When did the soldier serve? Did s/he deploy? Did s/he experience any combat? What was that like?
- 2. What types of injuries did the soldier or those around him/her sustain? What type of care was available / provided? What was the outcome of their injuries?
- 3. What types of weapons was the soldier exposed to? What was their reaction to these weapons?

APPENDIX A

Relevant Films and Books

Background

Film and literature provide a powerful window into worlds to which we may not otherwise be exposed. But, as art, they can be prone to exaggeration and error. In the following list, we have diligently attempted to select books and movies that are illustrative of the military experience. These are but a token of the many books and movies depicting war and its effects. Although great lengths were taken to identify a high quality and representative selection, it is essential to maintain a reflective stance during the experience of these works. What features align with what you know about the military? What does not? These films and books can also provide researchers with a starting point from which to engage a soldier. Asking a soldier for their impression of a film will provide much more information than the film itself — and will open the door to further conversation.

Selection Process

This media list of resources offers a compelling glimpse of war and military culture. It was compiled based on recommendations by a panel of seven experts in military psychiatry and psychology. They were asked to recommend movies and books that contain one or more of the following themes: deployment, combat, returning home, PTSD, families, casualties, and general military history. These experts were interviewed in person whenever possible, and by phone, email, or written copy. In addition, Internet searches were performed using search terms such as "best Vietnam movies" and "best Korean War books." When lists of the best movies or books depicting a given conflict turned up in search results, plot summaries were carefully reviewed. Selections were chosen if they were considered to fit one or more of the requested themes, and if they were generally rated highly by critics/reviewers (e.g., www.imdb.com rating of 7.5 or higher). If movies were both recommended by experts and rated highly by critics, this was also taken into consideration in compiling the list. Another consideration was diversity within the list of recom-

mendations. For example, there was an attempt to ensure that the experiences of women during wartime or in the military were represented (e.g., Hospital Sketches by Louisa May Alcott, Sand Queen by Helen Benedict, Testament of Youth by Vera Britten (World War I)). During the process, the editors met at least weekly to review the compiled list. Through an iterative process of discussion, some selections were removed and others were retained. Selections were then grouped into broad eras (e.g., Pre-Revolutionary War-Civil War) and subcategorized into movies and books. Finally, the final themes were revised as follows: illness/injury, combat, returning home, families, PTSD/mental health, unit cohesion, military history, and military service.

IIInes Hill¹⁴ Control Returned Hotele P. 50 Meeta Health Unit Consider History

	CIV	IL WA	\R				
Movies							
Glory (1989) directed by Edward Zwick		✓				✓	
Lincoln (2012) directed by Steven Spielberg		1					
Books							
The Red Badge of Courage (1895) by Stephen Crane		✓			1		
Gone with the Wind (1936) by Margaret Mitchell		1	1	✓			
Hospital Sketches (1863) by Louisa May Alcott	✓						
	WOR	LD WA	RI				
Movies							
Sergeant York (1941) directed by Howard Hawks		✓		✓			
Legends of the Fall (1994) directed by Edward Zwick		1	1	✓			
Books							
Testament of Youth (1933) by Vera Brittain	✓			1			
All Quiet on the Western Front (1929) by Erich Maria Remarque		1		✓	1		
A Farewell to Arms (1929) by Ernest Hemingway	1	1		1	1		
	WOR	LD WAI	RII				
Movies							
Patton (1970) directed by Franklin Schaffner		✓			1	1	

	llles hi	ury Ombat Returi	Fariles	PLOIM	Unit Ohe	in Hiltary History
Saving Private Ryan (1998) directed by Steven Spielberg	•	/	√		√	
The Longest Day (1962) directed by Annakin, Marton & Wice		/				
To Hell and Back (1955) directed by Jesse Hibbs	•	/			√	
Books						
Crusade in Europe (1948) by Gen. Dwight Eisenhower	•					✓
The Second World War (1990) by John Keegan	•	/				✓
The Thin Red Line (1962) by James Jones	•	/				
	KOREAN	I WAR				
Books						
The Coldest Night (2012) by Robert Olmstead	•		✓		√	
	VIETNAN	A WAR				
Movies						
Platoon (1986) directed by Oliver Stone	•				1	
The Deer Hunter (1978) directed by Michael Cimino	✓ ,	/ /	√	√	√	
Books						
The Things They Carried (1990) by Tim O'Brien	•			✓		

lines light Retiring Horse L.S. Westalkeath Price William History

CONTEMPORARY CONFLICTS							
Movies							
Black Hawk Down (2001) directed by Ridley Scott		1					
The Hurt Locker (2008) directed by Kathryn Bigelow		1		✓			
Brothers (2009) directed by Jim Sheridan			1	1	1		
Restrepo (2010) directed by Sebastian Junger	✓	√				√	
Korengal (2014) directed by Sebastian Junger	✓	1	1	1		√	
Books							
Sand Queen (2012) by Helen Benedict		√	✓		√		

APPENDIX B

Glossary of Acronyms

AFQT	Armed Forces Qualification Test
AIT	Advanced Individual Training
BCT	Basic combat training

EMT Emergency medical technician

IED Improvised explosive device

IET Initial entry training (Consists of BCT and AIT)

MOS Military occupational specialty

MA Mortuary affairs

NCO Non-commissioned officer VBED Vehicle borne explosive device

APPENDIX C

Ranks and Responsibilities

Enlisted personnel serve in ranks from private to sergeant major, E1-E9. Enlisted personnel were about 81% of the Army in 2014. E1-E4 are referred to as junior (or lower ranking) enlisted. Those in ranks E5-E9 are NCOs although some E4 at the rank of corporal can also be considered NCOs depending on their duties. E1-E4 are usually personnel on their first enlistment in the Army. Warrant Officers were about 3%, and commissioned officers were about 16%. The primary role of lower ranking enlisted personnel is to carry out the orders issued to them to them by their NCOs and officers. Insignia for these ranks can be found at: http://www.army.mil/symbols/armyranks.html

Enlisted

PRIVATE (PVT/PV2, E1/E2) Addressed as "Private" — The lowest Army rank. This is the entry-level rank for most soldiers. Soldiers are promoted to E2 upon graduation from basic training.

PRIVATE FIRST CLASS (PFC/E₃) Addressed as "Private" — PV2s are promoted to PFC after approximately one year in the Army. Some soldiers, such as those with some college, can enter the Army as a PFC.

SPECIALIST (SPC/E4) Addressed as "Specialist" — Has served a minimum of two years and attended a specific training class as one of the requirements for this promotion. People enlisting with a four-year college degree can enter the Army as a SPC. This is the first leadership role. The SPC can lead other enlisted soldiers of lower rank.

CORPORAL (CPL/E₄) Addressed as "Corporal" — The base of the NCO ranks, CPLs serve as team leader of the smallest Army units such as a fire team or a squad. Like all other NCOs, CPLs are responsible for the individual training, personal appearance, and cleanliness of the soldiers they lead.

SERGEANT (SGT/E5) Addressed as "Sergeant" — A SGT typically leads a fire team (4 soldiers).

STAFF SERGEANT (SSG/E6) Addressed as "Sergeant" — SSGs typically lead a squad comprised of two fire teams (9 total). Outside of combat, they are often in staff positions at the company level. They can also function as platoon sergeants when the higher level NCO sergeant first class/ E7 is not available in the unit.

SERGEANT FIRST CLASS (SFC/E7) Addressed as "Sergeant" — SFCs are typically platoon sergeants and function as advisors to the platoon leader. The SFC generally has 15 to 18 years of Army experience.

MASTER SERGEANT (MSG/E8) Addressed as Master Sergeant" — The MSG generally functions is a staff position. Normally they do not have the leadership responsibilities of a first sergeant (1SG), who has the same pay grade as a MSG.

FIRST SERGEANT (1SG/E8) Addressed as "First Sergeant" — The first sergeant is the principal NCO at the company. The 1SG acts as the provider, disciplinarian, and counselor who instructs other NCOs, advises the company commander, and helps train all enlisted soldiers.

SERGEANT MAJOR (SGM/E9) (Addressed as "Sergeant Major" — A sergeant major is the senior NCO at the higher levels of Army organizations, but not at those that are commands such as battalion or brigade or higher level organizations. The SGM's roles and duties are similar to those of the first sergeant at the company level, but the SGM has the responsibility for many more soldiers and organizational responsibilities.

COMMAND SERGEANT MAJOR (CSM/E9) Addressed as "Sergeant Major" — As is the case with other senior NCOs, the CSM functions at the level of a battalion command or higher (e.g., brigade, and division). The CSM supplies recommendations to the commander and staff, and carries out policies and standards on the performance, training, appearance, and conduct of enlisted personnel.

SERGEANT MAJOR OF THE ARMY (SMA/E9) — There is only one Sergeant Major of the Army. This rank is the epitome of what it means to be a sergeant. The Sergeant Major of the Army oversees all NCOs and serves as the senior enlisted advisor to the Chief of Staff of the Army (a four-star General).

Warrant Officers

In terms of Army structure, warrant officers fall between enlisted personnel and commissioned officers. They typically come from the enlisted ranks in technical fields such as aviation, maintenance, and some logistical fields. The Army warrant officer is a technical expert, combat leader, trainer, and advisor. They are appointed by warrant by the Secretary of the Army. Through progressive levels of expertise in assignments, training, and education, the warrant officer administers, manages, maintains, operates, and integrates Army systems and equipment across the full spectrum of Army operations. Warrant officers are formally addressed as either Mr. or Ms.

WARRANT OFFICER 1 (WO1/W1) — WO1s are technically and tactically focused officers who perform the primary duties of technical leader, trainer, operator, manager, maintainer, sustainer, and advisor.

CHIEF WARRANT OFFICER 2 (CW2/W2) — CW2s are intermediatelevel technical and tactical experts who perform increased duties and responsibilities at small groups through battalion levels.

CHIEF WARRANT OFFICER 3 (CW3/W3) — CW3s are advanced-level experts who perform the primary duties of a technical and tactical leader. They provide direction, guidance, resources, assistance, and supervision necessary for subordinates to perform their duties. CW3s primarily support operations levels from team or detachment through brigade.

CHIEF WARRANT OFFICER 4 (CW4/W4) — CW4s are senior-level experts in their field. They primarily support battalion, brigade, division, corps, and echelons above corps operations. CW4s typically have special mentorship responsibilities for other WOs and provide essential advice to commanders on WO issues.

CHIEF WARRANT OFFICER 5 (CW5/W5) — CW5s are master-level technical and tactical experts who support brigade, division, corps, echelons above corps, and major command operations. They provide leader development, mentorship, advice, and counsel to WOs and branch officers. CW5s have special WO leadership and representation responsibilities within their respective commands.

Officers

SECOND LIEUTENANT (2LT/O1) (Addressed as "Lieutenant" — The entry-level rank for most Commissioned Officers. Leads platoon-size elements of four or more squads (16 to 44 soldiers).

FIRST LIEUTENANT (1LT/O2) (Addressed as "Lieutenant" — A senior lieutenant generally with 18 to 24 months of service. Leads platoons and functions as executive officer (second in command to the company commander).

CAPTAIN (CPT/O₃) Addressed as "Captain" — Commands companysized units (60 to 200 soldiers). Often functions as a staff officer at the battalion level.

MAJOR (MAJ/O₄) Addressed as "Major" — Usually serves as a staff officer at battalion and brigade level.

LIEUTENANT COLONEL (LTC/O₅) Addressed as "Lieutenant Colonel" or informally as "Colonel" — Battalion-sized units (300 to 1,000 soldiers) are typically commanded by LTCs. LTCs often have staff positions at the division level, or serve as brigade deputy commanders.

COLONEL (COL/O6) (Addressed as "Colonel" — Brigade-sized units (3,000 to 5,000 soldiers) are typically commanded by COLs. Can occupy many staff positions.

BRIGADIER GENERAL (BG/O7) Addressed as "General" — Serves as deputy commander to the commanding general for Army divisions and can occupy many staff positions. Assists in overseeing the staff's planning and coordination of a mission.

MAJOR GENERAL (MG/O8) (Addressed as "General" - Typically commands division-sized-units (10,000 to 15,000 soldiers).

LIEUTENANT GENERAL (LTG/O₉) Addressed as "General" — Typically commands corps-sized units (20,000 to 45,000 soldiers) and can hold a senior position on the Army staff.

GENERAL (GEN/O10) Addressed as "General" - The senior level of Army commissioned officer typically has over 30 years of experience and service. Commands all operations within their geographical area. The Chief of Staff of the Army is a four-star general.

References

- Abramowitz, J. D. (2013). *The Future of the Army's Reserve Components*. (USAWC Strategy Research Project), US Army War College, Carlisle Barracks, PA. Retrieved from http://www.dtic.mil/cgi-bin/GetTRDoc?AD=ADA588905
- Ahern, J., Worthen, M., Masters, J., Lippman, S. A., Ozer, E. J., & Moos, R. (2015). The Challenges of Afghanistan and Iraq Veterans' Transition from Military to Civilian Life and Approaches to Reconnection. *PLoS One*, *10*(7), e0128599. doi:10.1371/journal.pone.0128599
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders (5th ed.). Washington, DC: Author.* Arlington, VA: American Psychiatric Association.
- Anonymous. (2008). The Army Reserve at 100: An Emerging Operational Force. *Army Logistician*, 40(6), 15.
- Barbero, M. D. (2013, May 18, 2013). Improvised explosive devices are here to stay. *Washington Post*.
- Bell, M. E., Turchik, J. A., & Karpenko, J. A. (2014). Impact of gender on reactions to military sexual assault and harassment. *Health Soc Work*, 39(1), 25–33.
- Belmont, P. J., Jr., Goodman, G. P., Waterman, B., DeZee, K., Burks, R., & Owens, B. D. (2010). Disease and nonbattle injuries sustained by a U.S. Army Brigade Combat Team during Operation Iraqi Freedom. *Mil Med*, 175(7), 469–476.
- Ben-Ari, E., & Levy, Y. (2014). Getting access to the field: Insider/outsider perspectives. In J. Soeters, P. M. Shields, & S. Rietjens (Eds.), *Routledge Handbook of Research Methods in Military Studies*. (pp. 9–18). New York: Routledge.
- Bennis, W. G. (2004). The seven ages of the leader. *Harv Bus Rev*, 82(1), 46–53, 112.
- Betancourt, J. R., & Green, A. R. (2010). Linking cultural competence training to improved health outcomes. *Academic Medicine*, 85, 583–585.

- Bijur, P. E., Horodyski, M., Egerton, W., Kurzon, M., Lifrak, S., & Friedman, S. (1997). Comparison of injury during cadet basic training by gender. Arch Pediatr Adolesc Med, 151(5), 456–461.
- Bohannon, M. J. (2011). War as a laboratory for trauma research. *Science*, 331(6022), 1261–1263.
- Bonanno, G. A., Mancini, A. D., Horton, J. L., Powell, T. M., Leardmann, C. A., Boyko, E. J., ... Smith, T. C. (2012). Trajectories of trauma symptoms and resilience in deployed U.S. military service members: prospective cohort study. Br J Psychiatry, 200(4), 317–323. doi:10.1192/ bjp.bp.111.096552
- Booth-Kewley, S., Larson, G. E., Highfill-McRoy, R. M., Garland, C. F., & Gaskin, T. A. (2010). Correlates of posttraumatic stress disorder symptoms in Marines back from war. J Trauma Stress, 23(1), 69-77. doi:10.1002/jts.20485
- Bramoweth, A. D., & Germain, A. (2013). Deployment-related insomnia in military personnel and veterans. Curr Psychiatry Rep, 15(10), 401. doi:10.1007/s11920-013-0401-4
- Brewin, C. R., Garnett, R., & Andrews, B. (2011). Trauma, identity and mental health in UK military veterans. Psychol Med, 41(8), 1733-1740. doi:10.1017/s003329171000231x
- Britt, T. W., Davison, J., Bliese, P. D., & Castro, C. A. (2004). How leaders can influence the impact that stressors have on soldiers. Mil Med, 169(7), 541-545.
- Buryk, P., Trail, T. E., Gonzalez, G. C., Miller, L. L., & Friedman, E. M. (2015). Federal Educational Assistance Programs Available to Service Members: Program Features and Recommendations for Improved Delivery (RR-664-OSD). Retrieved from RAND Corporation: http:// www.rand.org/pubs/research_reports/RR664.html
- Cardona, R., & Ritchie, E. C. (2006). Psychological screening of recruits prior to accession in the US military. In B. DeKoning, D. E. Lounsbury, & R. B. North Jr (Eds.), Recruit Medicine (pp. 297–309). Falls Church, VA: Office of the Surgeon General and US Army Medical Department Center and School. Retrieved from https://ke.army.mil/ bordeninstitute/published_volumes/recruit_medicine/RM-ch16.pdf.
- Carpenter-Song, E. A., Schwallie, M. N., & Longhofer, J. (2007). Cultural competence reexamined: Critique and directions for the future. Psychiatr Serv, 58(10), 1362-1365.
- Castro, C. A. (2015). Military social work research: Theory and framework. Paper presented at the Veterans Transition Summit, Arlington, VA.
- Chapman, P. L., Cabrera, D., Varela-Mayer, C., Baker, M., Lin, C.-D., & Mayer, P. (2012). Training, deployment preparation, and combat ex-

- periences of deployed health care personnel: Key findings from deployed U. S. Army combat medics assigned to line units. *Military Medicine*, 177(3), 270–277.
- Clauss, B. (2012). Alone in the country: national guard and reserve component service and the increased risk for homelessness among rural veterans. *Journal of Law in Society*, 13(2), 405.
- Cole, R. F. (2015). Understanding military culture: A guide for professional school counselors. *The Professional Counselor*, 4(5), 497–504. doi:10.15241/rfc.4.5.497
- Cordesman, A. H., Loi, C., & Kocharlakota, V. (2010). IED metrics for Iraq: June 2003–September 2010. Retrieved from http://csis.org/files/publication/101110_ied_metrics_combined.pdf
- Cozza, S. J., Chun, R. S., & Polo, J. A. (2005). Military families and children during operation Iraqi freedom. *Psychiatr Q*, 76(4), 371–378. doi:10.1007/s11126-005-4973-y
- Cross, T. L., Bazron, B. J., Dennis, K. W., & Isaacs, M. R. (1989). Toward a culturally competent system of care: A monograph on effective services for minority children who are severely emotionally disturbed. Washington, DC: Georgetown University Child Development Center.
- Dao, J. (2009, July 14, 2009). Afghan war's buried bombs put risk in every step. *New York Times*.
- de Burgh, H. T., White, C. J., Fear, N. T., & Iversen, A. C. (2011). The impact of deployment to Iraq or Afghanistan on partners and wives of military personnel. *Int Rev Psychiatry*, 23(2), 192-200. doi:10.3109/09 540261.2011.560144
- Deaton, B. R. (2013). Regional Alignment of Army National Guard Brigades: Employing the Guard for Success in Building Partner Capacity. (Masters Thesis), Marine Corps University, Quantico, VA. Retrieved from http://www.dtic.mil/cgi-bin/GetTRDoc?AD=ADA601718
- DePalma, R. G., Burris, D. G., Champion, H. R., & Hodgson, M. J. (2005). Blast injuries. *New Engl J Med 352*(13), 1335–1342.
- Elnitsky, C. A., Chapman, P. L., Thurman, R. M., Pitts, B. L., Figley, C., & Unwin, B. (2013). Gender differences in combat medic mental health services utilization, barriers, and stigma. *Military Medicine*, *178*(7), 775–784.
- Fear, N. T., Seddon, R., Jones, N., Greenberg, N., & Wessley, S. (2012). Does anonymity increase the reporting of mental health symptoms. *BMC Public Health*, 12, 1–7.
- Fenell, D. (2008). A distinct culture: Applying multicultural counseling competencies to work with military personnel. *Counseling Today*, (50), 8–9.

- Flynn, B. W., McCarroll, J. E., & Biggs, Q. M. (2015). Stress and resilience in military mortuary workers: Care of the dead from battlefield to home. Death studies, 39(2), 92-98.
- French, L. M., Iversen, G. L., Lange, R. T., & Bryant, R. A. (2012). Neuropsychological consequences of injury in military personnel Neuropsychological assessment of work-related injuries. (pp. 127-160). New York: Guilford Press.
- Fullerton, C. S., McCarroll, J. E., & Ursano, R. J. (2006). Conducting research with military and uniformed services workers. In F. N. Norris, S. Galea, & M. J. Friedman (Eds.), Methods for Disaster Mental Health Research (pp. 254–264). New York: Guilford Press.
- Gallegos, J. S., Tindall, C., & Gallegos, S. A. (2008). The need for advancement in the conceptualization of cultural competence. Advances in *Social Work*, 9(1), 51–62.
- Goldenberg, M., Hamaoka, D., Santiago, P., & McCarroll, J. (2012). Basic Training: A Primer on Military Life and Culture for Health Care Providers. Retrieved from Bethesda, MD:
- Goldmann, E., Calabrese, J. R., Prescott, M. R., Tamburrino, M., Liberzon, I., Slembarski, R., ... Galea, S. (2012). Potentially modifiable pre-, peri-, and postdeployment characteristics associated with deploymentrelated posttraumatic stress disorder among ohio army national guard soldiers. Ann Epidemiol, 22(2), 71-78. doi:10.1016/j.annepidem.2011.11.003
- Gonzales, G. C., Miller, L. L., Buryk, P., & Wenger, J. W. (2015). Higher education benefits for post-9/11 military service members and veterans Veterans Affairs, Subcommittee on Economic Opportunity (CT-428). Retrieved from RAND Corporation: http://www.rand.org/content/ dam/rand/pubs/testimonies/CT400/CT428/RAND_CT428.pdf
- Granado, N. S., Zimmermann, L., Smith, B., Jones, K. A., Wells, T. S., Ryan, M. A., ... Smith, T. C. (2012). Individual augmentee deployment and newly reported mental health morbidity. J Occup Environ Med, 54(5), 615-620. doi:10.1097/JOM.0b013e31824be417
- Hamaoka, D., Bates, M. J., McCarroll, J. E., Brim, W. L., Lunasco, T. K., & Rhodes, J. E. (2014). An Introduction to Military Service. In S. Cozza, M. Goldenberg, & R. Ursano (Eds.), Care of Military Service Members, Veterans, and Their Families (1st ed.): American Psychiatric Publishing.
- Harper, M., Hernandez, M., Nesman, T., Mowrey, D., Worthington, J., & Isaacs, M. (2006). Organizational cultural competence: A review of assessment protocols (FMHI 240-2). Retrieved from Tampa, FL:
- Harris, G. L. (2011). Reducing healthcare disparities in the military through cultural competence. J Health Hum Serv Adm, 34(2), 145–181.

- Hoge, C. W. (2011). Interventions for war-related posttraumatic stress disorder. *Journal of the American Medical Association*, 306(5), 549–551.
- Hotopf, M., Hull, L., Fear, N. T., Browne, T., Horn, O., Iversen, A., ... Wessely, S. (2006). The health of UK military personnel who deployed to the 2003 Iraq war: a cohort study. *Lancet*, *367*(9524), 1731–1741. doi:10.1016/s0140-6736(06)68662-5
- Ismail, K., Blatchley, N., Hotopf, M., Hull, L., Palmer, I., Unwin, C., ... Wessely, S. (2000). Occupational risk factors for ill health in Gulf veterans of the United Kingdom. *J Epidemiol Community Health*, *54*(11), 834–838.
- Jacobson, I. G., Ryan, M. A., Hooper, T. I., Smith, T. C., Amoroso, P. J., Boyko, E. J., ...Bell, N. S. (2008). Alcohol use and alcohol-related problems before and after military combat deployment. *Jama*, 300(6), 663–675. doi:10.1001/jama.300.6.663
- James, P. (2014). *Urban sustainability in theory and practice: circles of sustainability:* Routledge.
- Killgore, W. D., Cotting, D. I., Thomas, J. L., Cox, A. L., McGurk, D., Vo, A. H., ... Hoge, C. W. (2008). Post-combat invincibility: violent combat experiences are associated with increased risk-taking propensity following deployment. *J Psychiatr Res*, 42(13), 1112–1121. doi:10.1016/j. jpsychires.2008.01.001
- Kline, A., Ciccone, D. S., Weiner, M., Interian, A., St Hill, L., Falca-Dodson, M., ...Losonczy, M. (2013). Gender differences in the risk and protective factors associated with PTSD: a prospective study of National Guard troops deployed to Iraq. *Psychiatry*, *76*(3), 256–272. doi:10.1521/psyc.2013.76.3.256
- Kok, B. C., Herrell, R. K., Thomas, J. L., & Hoge, C. W. (2012). Posttraumatic stress disorder associated with combat service in Iraq or Afghanistan: reconciling prevalence differences between studies. *J Nerv Ment Dis*, 200(5), 444–450. doi:10.1097/NMD.0b013e3182532312
- Krueger, G. P. (2000). Military culture *Encylopedia of Psychology* (Vol. 5, pp. 252–259). Washington, DC: American Psychological Association.
- Kumas-Tan, Z., Beagan, B., Loppie, C., MacLeod, A., & Frank, B. (2007). Measures of cultural competance: Examinin hidden assumptions. *Academic Medicine*, 82, 548–557.
- Lane, M. E., Hourani, L. L., Bray, R. M., & Williams, J. (2012). Prevalence of perceived stress and mental health indicators among reserve-component and active-duty military personnel. *Am J Public Health*, *102*(6), 1213–1220. doi:10.2105/ajph.2011.300280
- Langston, V., Gould, M., & Greenberg, N. (2007). Culture: what is its ef-

- fect on stress in the military? Mil Med, 172(9), 931–935.
- Luby, C. D. (2012). Promoting military cultural awareness in an off-post community of behavioral health and social support service providers. Advances in Social Work, 13(1), 67-82.
- Lundquist, J. H. (2008). Ethnic and Gender Satisfaction in the Military: The Effect of a Meritocratic Institution. *American Sociological Review*, 73(3), 477-496. doi:10.1177/000312240807300306
- Majury, D. B., & Army War College Carlisle Barracks, P. A. (2013). The National Guard's State Partnerships: Security Cooperation and Force Multiplier.
- Mancini, A. D., Bonanno, G. A., & Sinan, B. (2015). A brief retrospective method for identifying longitudinal trajectories of adjustment following acute stress. Assessment, 22(3), 298-308. doi:10.1177/1073191114550816
- Mancuso, J. D., Ostafin, M., & Lovell, M. (2008). Postdeployment evaluation of health risk communication after exposure to a toxic industrial chemical. Mil Med, 173(4), 369-374.
- Manning, F. (1991). Cohesion and Esprit de Corps In R. Gal & A. D. Mangelsdorff (Eds.), Handbook of military psychology. New York: John Wiley & Sons.
- McCarroll, J. E., Jaccard, J. J., & Radke, A. Q. (1994). Psychiatric consultation to command In F. D. Jones, L. R. Sparacino, V. L. Wilcox, & J. M. Rothberg (Eds.), Military Psychiatry: Preparing in Peace for War (pp. 151-192). Washington, DC: Office of the Army Surgeon General.
- McCrary, J. E. (2006). Overview of Recruiting and Accessions. In B. DeKoning (Ed.), Recruit Medicine (pp. 29-43). Washington, D.C.; Fort Sam Houston, Tex.; Falls Church, Va.: Borden Institute, Walter Reed Army Medical Center; U.S. Army Medical Dept. Center and School; Office of The Surgeon General, U.S. Army.
- McManus, J., McClinton, A., Gerhardt, R., & Morris, M. (2007). Performance of ethical military research is possible: on and off the battlefield. Sci Eng Ethics, 13(3), 297–303. doi:10.1007/s11948-007-9022-9
- Meyer, E. G., Hall-Clark, B. N., Hamaoka, D., & Peterson, A. L. (2015). Assessment of Military Cultural Competence: A Pilot Study. Acad Psychiatry, 39(4), 382-388. doi:10.1007/s40596-015-0328-7
- Milliken, C. S., Auchterlonie, J. L., & Hoge, C. W. (2007). Longitudinal assessment of mental health problems among active and reserve component soldiers returning from the Iraq war. Jama, 298(18), 2141-2148. doi:10.1001/jama.298.18.2141
- Mills, M., & Keddie, A. (2010). Cultural reductionism and the media: polarising discourses around schools, violence and masculinity in an

- age of terror. Oxford Review of Education, 36(4), 427–444. doi:10.108 0/03054985.2010.494449
- Moulton, J. (2009). Rethinking IED strategies: from Iraq to Afghanistan. Retrieved from http://www.army.mil/article/26877
- Nash, W. P. (2007). The stressors of war. In C. R. Figley & W. P. Nash (Eds.), *Combat stress injury : theory, research, and management* (pp. 11–32). New York, NY: Routledge: Taylor and Francis Group.
- Newby, J. H., McCarroll, J. E., Ursano, R. J., Fan, Z., Shigemura, J., & Tucker-Harris, Y. (2005). Positive and negative consequences of a military deployment. *Mil Med*, *170*(10), 815–819.
- Pappas, C. G. (2001). The Ranger medic. Mil Med, 166(5), 394-400.
- Pietrzak, R. H., Johnson, D. C., Goldstein, M. B., Malley, J. C., & Southwick, S. M. (2009). Psychological resilience and postdeployment social support protect against traumatic stress and depressive symptoms in soldiers returning from Operations Enduring Freedom and Iraqi Freedom. *Depress Anxiety*, 26(8), 745–751. doi:10.1002/da.20558
- Plumb, T. R., Peachey, J. T., & Zelman, D. C. (2014). Sleep disturbance is common among servicemembers and veterans of Operations Enduring Freedom and Iraqi Freedom. *Psychol Serv*, 11(2), 209–219. doi:10.1037/a0034958
- Polusny, M. A., Erbes, C. R., Murdoch, M., Arbisi, P. A., Thuras, P., & Rath, M. B. (2011). Prospective risk factors for new-onset post-traumatic stress disorder in National Guard soldiers deployed to Iraq. *Psychol Med*, 41(4), 687-698. doi:10.1017/s0033291710002047
- Pressnell, R. C., & Army War College Carlisle Barracks, P. A. (2013). DOTMLPF Implications for an Operational Army National Guard.
- Reger, M. A., Etherage, J. R., Reger, G. M., & Gahm, G. A. (2008). Civilian psychologists in an Army culture: The ethical challenge of cultural competence. *Military Psychology*, 20(1), 21-35. doi:10.1080/08995600701753144
- Rieger, W., & Scott, S. J. (2006). Physical Fitness in Initial Entry Training In B. B. DeKoning, D. E. Lounsbury, & R. B. North Jr (Eds.), Recruit Medicine (pp. 111–124). Falls Church, VA: Office of the Surgeon General and US Army Medical Department Center and School. Retrieved from https://ke.army.mil/bordeninstitute/published_volumes/recruit_medicine/RM-ch07.pdf.
- Rodriguez, C. I., Cabaniss, D. L., Arbuckle, M. R., & Oquendo, M. A. (2008). The role of culture in psychodynamic psychotherapy: Parallel process resulting from cultural similarities between patient and therapist. *American Journal of Psychiatry*, 165(11), 1402–1406.
- $Rona, R.\,J., Jones, M., Sundin, J., Goodwin, L., Hull, L., Wessely, S., \&\, Fear, N.$

- T. (2012). Predicting persistent posttraumatic stress disorder (PTSD) in UK military personnel who served in Iraq: a longitudinal study. I *Psychiatr Res*, 46(9), 1191–1198. doi:10.1016/j.jpsychires.2012.05.009
- Roysircar, G. (2004). Cultural Self-Awareness Assessment: Practice Examples From Psychology Training. Professional Psychology: Research and Practice, 35(6), 658-666. doi:10.1037/0735-7028.35.6.658
- Russell, D. W., Russell, C. A., Riviere, L. A., Thomas, J. L., Wilk, J. E., & Bliese, P. D. (2014). Changes in alcohol use after traumatic experiences: the impact of combat on Army National Guardsmen. *Drug Alcohol* Depend, 139, 47-52. doi:10.1016/j.drugalcdep.2014.03.004
- Santiago-Irizarry, V. (1996). Culture as cure. Cultural Anthropology, 11(1), 3-24.
- Schnurr, P. P., Lunney, C. A., Sengupta, A., & Spiro, A., 3rd. (2005). A longitudinal study of retirement in older male veterans. J Consult Clin Psychol, 73(3), 561-566. doi:10.1037/0022-006x.73.3.561
- Shea, T. M., Reddy, M. K., Tyrka, A. R., & Sevin, E. (2013). Risk factors for post-deployment posttraumatic stress disorder in national guard/reserve service members. Psychiatry Res, 210(3), 1042-1048. doi:10.1016/j.psychres.2013.08.039
- Smith, T. C., Ryan, M. A., Wingard, D. L., Slymen, D. J., Sallis, J. F., & Kritz-Silverstein, D. (2008). New onset and persistent symptoms of posttraumatic stress disorder self reported after deployment and combat exposures: prospective population based US military cohort study. Bmj, 336(7640), 366-371. doi:10.1136/bmj.39430.638241.AE
- Strom, T. Q., Gavian, M. E., Possis, E., Loughlin, J., Bui, T., Linardatos, E., ...Siegel, W. (2012). Cultural and ethical considerations when working with military personnel and veterans: A primer for VA training programs. Training and Education in Professional Psychology, 6(2), 67-75. doi:10.1037/a0028275
- Sue, D. W., & Sue, D. (1990). Counseling the culturally different: Theory and practice (2nd ed.). New York: Wiley.
- Sundin, J., Fear, N. T., Iversen, A., Rona, R. J., & Wessely, S. (2010). PTSD after deployment to Iraq: conflicting rates, conflicting claims. Psychol *Med*, 40(3), 367–382. doi:10.1017/S0033291709990791
- Sundin, J., Mulligan, K., Henry, S., Hull, L., Jones, N., Greenberg, N., ... Fear, N. T. (2012). Impact on mental health of deploying as an individual augmentee in the U.K. Armed Forces. Mil Med, 177(5), 511-516.
- Taylor, J. S. (2003a). Confronting "culture" in medicine's "culture of no culture". Acad Med, 78(6), 555-559.
- Taylor, J. S. (2003b). The story catches you and you fall down: Tragedy, ethnography, and "cultural competence". Med Anthropol Q, 17(2),

- 159–181. doi:10.1525/mag.2003.17.2.159
- Taylor, M. A., Shultz, K. S., Spiegel, P. E., Morrison, R. F., & Greene, J. (2007). Occupational Attachment and Met Expectations as Predictors of Retirement Adjustment of Naval Officers. *Journal of Applied Social Psychology*, 37(8), 1697–1725. doi:10.1111/j.1559-1816.2007.00234.x
- Thomas, J. L., Wilk, J. E., Riviere, L. A., McGurk, D., Castro, C. A., & Hoge, C. W. (2010). Prevalence of mental health problems and functional impairment among active component and National Guard soldiers 3 and 12 months following combat in Iraq. *Arch Gen Psychiatry*, *67*(6), 614–623. doi:10.1001/archgenpsychiatry.2010.54
- Trofimovich, L., Reger, M. A., Luxton, D. D., & Oetjen-Gerdes, L. A. (2013). Suicide risk by military occupation in the DoD active component population. *Suicide Life Threat Behav*, 43(3), 274–278. doi:10.1111/sltb.12013
- Tucker, L. L., & Army War Coll Carlisle Barracks, P. A. (2008). Army Reserve Culture: A Critical Part of Transformation.
- United States Government Accountability Office (GAO). (2013). *Defense Management: Actions Needed to Ensure National Guard and Reserve Headquarters Are Sized to be Efficient*. (GAO-14–71). Retrieved from http://www.gao.gov/assets/660/658978.pdf.
- Vigoda-Gadot, E., Baruch, Y., & Grimland, S. (2010). Career transitions: An empirical examination of second career of military retirees. *Public Personnel Management*, 39(4), 379–404.
- Warner, C. H., Appenzeller, G. N., Grieger, T., Belenkiy, S., Breitbach, J., Parker, J., ... Hoge, C. (2011). Importance of anonymity to encourage honest reporting in mental health screening after combat deployment. *Arch Gen Psychiatry*, 68(10), 1065–1071. doi:10.1001/archgenpsychiatry.2011.112
- Wasley, P. (2006). Accreditor of education schools drops controversial 'Social Justice' language. *Chronicle of Higher Education*. Retrieved from http://go.galegroup.com/ps/i.do?id=GALE%7CA146915114&v = 2.1&u=beth43189&it=r&p=EAIM&sw=w&asid=6197f14775b4466 b066380fc2778117c
- Wertsch, J. V. (1991). A sociocultural approach to socially shared cognition. In L. B. Resnick, J. M. Levine, & S. D. Teasley (Eds.), *Perspectives on socially shared cognition* (pp. 85–100). Washington, DC: American Psychological Association.
- White, C. L. (2010). *The Army National Guard and Army Reserve: An operational transformation*. (USAWC Civilian Research Paper), US Army War College. Retrieved from http://www.dtic.mil/dtic/tr/full-text/u2/a544350.pdf



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