



Military Culture 101: Understanding Today's Guard & Reserve Population

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LTC (U.S. Army Reserve)

- Provide an overview of today's military – branches, people, organizations and operations
- Build an awareness of serving in today's military, particularly with Guard and Reserve troops from Pennsylvania
- Develop some tactics to build rapport with the military community to help serve your veteran patients

- Overview of the Branches/Missions of the military
- Current Operations
- Overview of the Guard and Reserve
 - Keystone State overview
- Military Culture
 - Language/Acronyms/Ranks/Traits
- Factors for Risks of Combat Stress
- DO's and DON'Ts in dealing with Vets
- Myths & Facts: Getting help for Combat Stress
- Conclusion/Q&A

- Seven uniformed branches
- People
- About 3 million total service members
- 1.5 million active/1.5 million in Reserve Components
- Commander in Chief, President Barack Obama
- Led by the Secretary of the Defense, The Honorable Robert Gates
- Mission: provide military forces needed to deter war and protect the security of the country.
- ***www.defense.gov or www.defenselink.mil***



- Mission: fight and win our nation's wars with sustained land dominance across full-range of military operations
- Active (540K): 49% of the total Army strength – primarily combat and combat support units
- Army Guard (360K): 33% total Army strength – combat and combat support units
- Army Reserve (197K): 18% of total Army strength – primarily combat support and combat service support units
- www.army.mil





- Mission: Power projection, strategic deliverance and tactical deliver of combat power
- Active (330K): 75% of the total Naval strength
- Reserve (109K): 25% of the total Naval strength
- Currently performing some untraditional naval roles in Iraq and Afghanistan
- ***www.navy.mil***

- Mission: to provide strategic air lift and tactical air combat support
- Active (329K): 65% of the Air Force's total strength
- Air National Guard (107.5K): 21% of total AF strength
 - Manages 60% of the operational air lift
- Air Force Reserve (71K): 14% of total AF strength
- ***www.af.mil***



- Mission: Rapid deployment force; seizure of or defense of advanced naval bases for land operations
- Active (177K): 82% of total USMC strength
- Reserve (39K): 18% of total USM strength
- Shorter, but more frequent tours
- Particularly skilled in counterinsurgency, small unit tactics (Fallujah (2004-05))
- ***www.marines.mil***



- U.S. Coast Guard (Active: 42K)
 - Operates under the Dept. of Homeland Security
 - Can be transferred to the Navy during war
- U.S. Public Health Service Commissioned Corps (6K)
- National Oceanic and Atmospheric Administration Commissioned Corps (300)



CURRENT MILITARY OPERATIONS

- Primary missions
 - Operation Iraqi Freedom (OIF)
 - Operation Enduring Freedom (OEF) (Afghanistan)
- Other major operations around the world
 - Korea
 - Horn of Africa
 - Kosovo
 - Homeland Defense

RESERVE & NATIONAL GUARD SERVICE

- No longer weekend warriors
- Shift from a Strategic to an Operational Reserve
- Deployments are part of a planned cycle
- Guard has a dual role
 - State
 - Federal

ARMY RESERVE DEMOGRAPHICS

- 60% Caucasian
- 22% African-American
- 12% Hispanic
- Average office age – 42 years old
- Average enlisted age – 31 years old

GENDER

- Male -- 76%
- Female – 24%

TROOPS IN PENNSYLVANIA

- Pennsylvania Army National Guard (15,000)
- Multiple deployments since Sept. 11, 2001
- More than 17,000 have been deployed since 9-11
- Bosnia, Kosovo, Germany, Iraq (2 BDE elements)
- Pennsylvania Air National Guard (4,000)
- Army Reserve (8,600)
- Economic impact of \$370 Million
- Assorted other small units in various branches

- Much like any other diverse population
- Unique sets of value systems
- Owns set of rules and norms, very rigid
- Own language/Alphabet
- Organized hierarchy/rank structure
- Informal and formal stakeholders
- Very close-knit community, stigma, everyone knows each other's business/history

- “Downrange” – heading to Iraq, Afghanistan or some other forward deployed location.
- “Outside the Wire” – leaving the security of bases
- “FOB/COBs” – Forward/Contingency Operating Base.
- “In the Box” – Located in Iraq or Afghanistan
- “Overseas Contingency Operations” – replaces reference to the Global War on Terror.
- “Old man, CO & Top” – “affectionate” nicknames for the commanding officer and senior NCO in a unit.
- Acronyms

- ACU – Army Combat Uniform
- AGR – Active Guard & Reserve
- BCT – Brigade Combat Team
- AWOL – Absent Without Leave
- FRG – Family Readiness Group
- FTX – Field Training Exercise
- GO – General Officer
- HQ -- Headquarters
- IRR – Individual Ready Reserve

- MOS – Military Occupational Specialty
- MRE – Meals Ready to Eat
- NCO – Noncommissioned Officer
- OIC – Officer in Charge
- PAO – Public Affairs Officer
- PT – Physical Training, Army Physical Fitness Training
- PX – Post Exchange
- ROTC – Reserve Officer Training Corps
- SOP – Standard Operating Procedure
- TDY – Temporary Duty

- Pyramid-based structures
- Incorporate many of the same competencies/sections as Corporate America
- Officers: Managers, planners, resourcers
- Enlisted: “worker bees”
 - The Noncommissioned officer is the backbone of the Army

• Private (E-2)				
• Sergeant (E-5)				
• Master Sgt. (E-8)				
• Officers				
				

VETERAN CHARACTER TRAITS

- Older than you might think
- Hard-charging
- Independent
- Physically fit
- Largely drug-free
- Life experience
- Usually talkative
- Self-deprecating
- Good humored
- Proud to serve

FAMILY EFFECTS OF MOBILIZATION

- Employment Conflicts
- Remote facilities with little contact/support
- Lack of access to needed military life support
- Commissary
- Post Exchange (PX – “military Wal-mart”)
- Healthcare/Tricare
- Daycare

RISK FACTORS FOR COMBAT STRESS

- Unit experience/Unit Cohesion
 - Cross leveling
 - Continuity in the ranks
- Where are you located
 - Living conditions
- Frequency of mobilization
- What's your job/MOS
- Missions outside the wire
- Seeing a comrade wounded or die
- Civilian Contractors are at risk

- Thank them for their service.
- Listen non-judgmentally, with empathy and acceptance.
- Learn about the symptoms the veteran is experiencing.
- Ask them open-ended, general questions about their military service.

- Be aware the veteran may be feeling shame and treat him or her with “respect, dignity, and privacy.”
- Make sure veterans and their families are aware of available services and potential benefits of them.
- Offer to take them to get help if necessary.
- Reinforce they are doing the right thing by seeking help.

- Try to “talk the talk.” Nothing will discredit you more in the eyes of a veteran.
- Rush the veteran into intense work, social and/or recreational activities; this must be done gradually as symptoms improve.
- Give your armchair general or political analysis of the war.

- Press for details of a traumatic event, but be prepared to listen when they are offered.
- Allow the abuse of drugs and alcohol as a solution.
- Attempt to manhandle the veteran, except to prevent serious assault or suicide attempts.
- Tell him or her that they are “lucky” to have survived or that things could have been much worse.

- **Myth:** Medications that treat mental health problems are habit-forming.
 - **Fact:** When properly prescribed and used, most medications for mental health problems are not addictive

- **Myth:** Medications change a person's personality.
 - **Fact:** When properly prescribed and used, most medications do not change a person's true personality.

- **Myth:** A person can't be “clean and sober” while taking medication.
 - **Fact:** When properly prescribed and used, most medications do not act as “happy pills,” cloud a person's judgment, or give a false sense of courage. Instead, rather than making someone *less* functional, they make him or her *more* functional.

- **Myth:** Therapy is just whining about problems; it doesn't help.
 - **Fact:** Therapy has been scientifically tested and found to be effective.

- **Myth:** People who seek help for mental health problems will be viewed as “crazy” by others.
 - **Fact:** Seeking treatment is a smart choice that takes strength. Mental health problems are *not flaws or weaknesses*.

- **Myth:** Treatment is a cop-out for people who are too weak to cope with day-to-day life.
 - **Fact:** Seeking treatment means a person has the courage to look for a way to feel and perform better.
- **Myth:** People with mental health problems can't get better.
 - **Fact:** Effective therapy helps change the behaviors that are making a person's life dysfunctional. When correctly diagnosed and treated, a person can live a stable and healthy life.



SAVE THE DATE: Friday, March 26
CSIP Annual Combat Stress Conference

Keynote Speaker: BG Rhonda Cornum

Army's Director of Comprehensive Soldier Fitness

at Washington & Jefferson College



QUESTIONS????

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