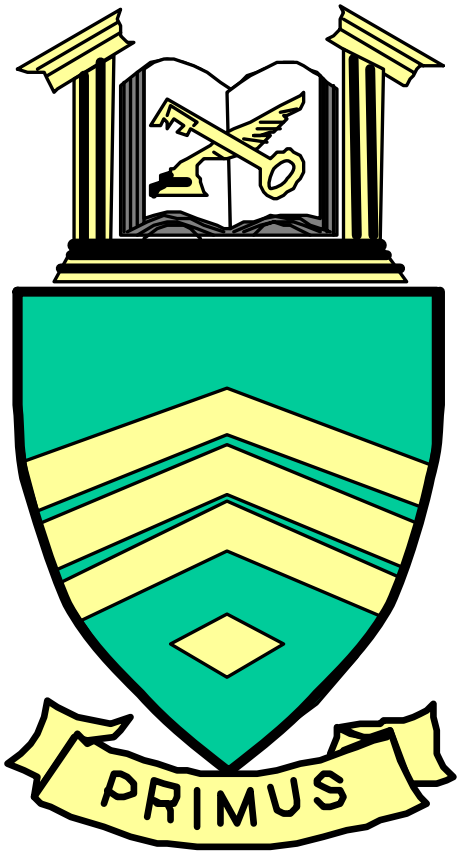
U.S. ARMY SERGEANTS MAJOR ACADEMY (FSC-TATS)

L671 OCT 03

STRESS MANAGEMENT

STUDENT HANDOUT



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This Appendix Contains

This appendix contains the items listed in this table--

Title/Synopsis	Pages
SH-1, Advance Sheet	SH-1-1
SH-2. Student Notes	SH-2-1 to SH-2-4

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Student Handout 1

Advance Sheet

Lesson Hours

This lesson consists of two hours of small group instruction.

Overview

Soldiers in our smaller, force-projection Army will face stressful situations in all of the dimensions of Army Operations. Battle fatigue casualties decrease when morale, unit cohesion, leadership, and training are strong. This lesson will provide you with additional tools to implement a program to combat battlefield stress. This lesson consists of a before class reading assignment, and a classroom discussion.

Learning Objective

Terminal Learning Objective (TLO).

Action:	Determine leaders' responsibilities for identifying, treating, and preventing battle fatigue.
Conditions:	As a first sergeant in a classroom, given FM 22-51.
Standards:	Determine the leaders' responsibilities for identifying, treating, and preventing battle fatigue, pass a 40 question written examination with a score of 70 percent or better IAW FM 22-51.

ELO A Explain the basic concepts of stress.
ELO B Discuss the normal, common signs, and the warning (more serious) signs of battle fatigue.
ELO C Explain the six sublabels of battle fatigue (light and heavy, duty and rest, hold and refer) in terms of where to treat or send the soldier.
ELO D Discuss the principles of preventing battle fatigue.
ELO E Discuss the leaders' actions to offset battle fatigue risk factors.

Assignment

The student assignments for this lesson are:

- Read FM 22-51, chapters 1, 2, 4, 5, 11, Appendix A, and page E-11 before class.

Additional Subject Area Resources

None.

Bring to Class

- Pen or pencil and writing paper.
- All reference material received for this lesson and Practical Exercise 1.

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COMBAT STRESS CONTROL

Determine leaders' responsibilities for identifying, treating, and preventing battle fatigue.

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THREE OBJECTIVES OF STRESS CONTROL

- To keep stress within acceptable limits for mission performance and to achieve the ideal (optimal) level of stress when feasible.
- To return stress to acceptable limits when it becomes temporarily disruptive.

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THREE OBJECTIVES OF STRESS CONTROL (cont)

- To progressively increase tolerance to stress so that soldiers can endure and function under the extreme stress which is unavoidable in combat.

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SIGNS/SYMPTOMS BATTLE FATIGUE

- Simple fatigue.
- Anxious.
- Depressed.
- Memory loss.
- Physical function disturbance.
- Psychosomatic forms.
- Disruptive forms.

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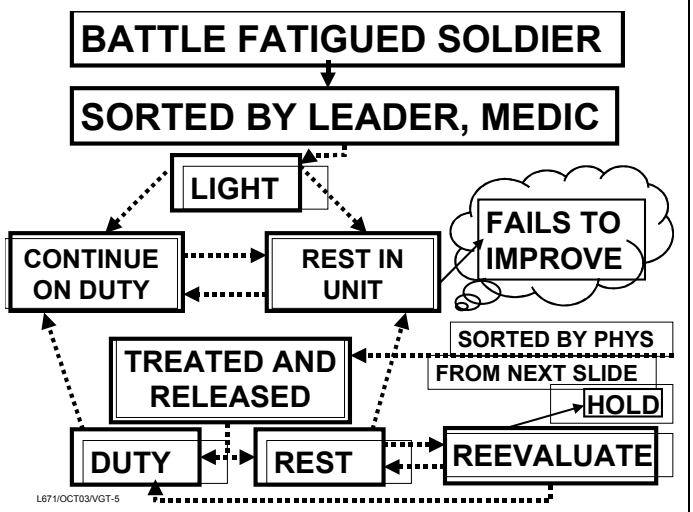

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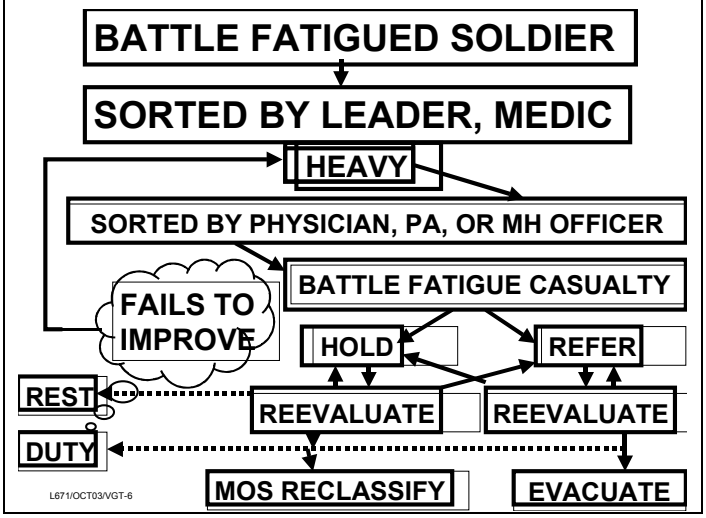

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LEADER'S ROLE

- Know which situations or events increase stress/battle fatigue.
- Compensate by reducing other stressors.
- Take corrective actions.
- Get advice from mental health personnel and/or combat stress control personnel.

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INDIVIDUAL'S ROLE

- Drink enough fluid, eat enough food, and attempt to get rest.
- Learn at least two relaxation techniques.
- Use relaxation techniques only at tactically appropriate times.
- Share feelings constructively.
- Plan ahead, prepare for the mission, and ensure readiness.

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MISCONDUCT STRESS BEHAVIOR PREVENTION

- Clearly state and teach the standards of conduct.
- Emphasize national, Army, and unit pride.
- Clearly state and consistently enforce the rules and regulations.
- Set the personal example.
- Report all violations.

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OFFSET FOR BATTLE FATIGUE RISK FACTORS

- Stabilize the home front.
- Promote unit cohesion.
- Conduct tough, realistic training.
- Prepare the unit to endure battle losses.

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OFFSET FOR BATTLE FATIGUE RISK FACTORS (cont)

- Train troops in active defense against these threats.
- Recognize static, heavy fighting and institute protective measures.
- Keep information flowing.
- Prepare troops for NBC threat contingencies.

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OFFSET FOR BATTLE FATIGUE RISK FACTORS (cont)

- Practice sleep discipline and sleep planning.
- Protect the physical well-being of the troops.
- Assure physical fitness.
- Recognize and manage the “older veteran” or “short-timer” syndrome.

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